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### Form **990-PF**

## **Return of Private Foundation**

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

OMB No 1545-0052

**2014** 

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.

► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

_		ndar year 2014 or tax year beginning		)14, and	ending		, 20
Na		oundation GOULDER FAMILY FOUNDATI	ON			er identification numb	
N	ımber aı	nd street (or PO box number if mail is not delivered to street address)  97 RIDGE ROAD	Ro	om/suite		ne number (see instruction   18 - 465 - 22	•
Ci	ty or tow	vn, state or province, country, and ZIP or foreign postal code HOLLIS, NH 03049				tion application is pen	
<u>_</u>	Chec		n of a former pub	lia abaritu			
_	Onco	Final return Amended	-	iic criainty	ו U 1. Foreig	n organizations, check	there ►
		☐ Address change ☐ Name cha				in organizations meetir here and attach comp	
H	Chec	k type of organization: Section 501(c)(3) exempt		1		foundation status was	
		on 4947(a)(1) nonexempt charitable trust			section 5	507(b)(1)(A), check here	. ▶□
ī		narket value of all assets at J Accounting method			P 16 11- 6-		Ab. 4 1
	end o	of year (from Part II, col. (c),			underse	indation is in a 60-mon ction 507(b)(1)(B), chec	th termination ck here . ▶ ☐
[3]	line 1	6) ► \$ 720547.30 (Part I, column (d) must be	e on cash basıs.)	*****			_
c)	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books		investment come	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
-	1	Contributions, gifts, grants, etc., received (attach schedule)	268330.00	2			1
, 'a'	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch. B	<u> </u>				
•	3	Interest on savings and temporary cash investments					
ļ	4	Dividends and interest from securities	7389.75	73	89.75	7389.75	
•	5a	Gross rents			<del>- • • • • •</del>		j
	b	Net rental income or (loss)					
e	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a					
ě	7	Capital gain net income (from Part IV, line 2)		<u> </u>			. ]
Œ	8	Net short-term capital gain			· · · · · · · · · · · · · · · · · · ·		
	9	Income modifications		ļ			
	10a	Gross sales less returns and allowances		<del></del>			
	b	Less: Cost of goods sold					
	11	Gross profit or (loss) (attach schedule)		<del> </del>	-		
	12	Total. Add lines 1 through 11	275719.75	72	89.75	7389.75	
	13	Compensation of officers, directors, trustees, etc.	G 1 . 1 . 7 . 7 . 7 . 7 . 7 . 7 . 7 . 7 .	1 73	<u> </u>	1707.12	<del> </del>
xpenses	14	Other employee salaries and wages		†			
eü	15	Pension plans, employee benefits		1			
χ	16a	Legal fees (attach schedule)					
Ш	b	Accounting fees (attach schedule)			-		
Ę	С	Other professional fees (attach schedule)					
and Administrative E	17	Interest					
nis	18	Taxes (attach schedule) (see instructions)	3051.12	30	51.12	3051.12	
<u>a</u>	19	Depreciation (attach schedule) and depletion		1			
Ad	20	Occupancy	ļ	-		<u> </u>	
þ	21	Travel, conferences, and meetings		<del>                                     </del>			
a	22	Printing and publications	75.00	<del>                                      </del>	75.00	70.00	
ing	23 24	Other expenses (attach schedule) Annual. Fee.  Total operating and administrative expenses.	75.00	<del> </del>	75.00	75.00	
Operating	_,	Add lines 13 through 23					
be	25	Contributions, gifts, grants paid	135,000.00				
0	26	Total expenses and disbursements. Add lines 24 and 25	138126.12		26.12	3126.12	
	27	Subtract line 26 from line 12:	, , , , , , , , , , , , , , , , , , , ,	1			
	a	Excess of revenue over expenses and disbursements	137,593.63	3			
	b	Net investment income (if negative, enter -0-) .			63.63	-	
	С	Adjusted net income (if negative, enter -0-)				4263.63	

Ð	art II	Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year			of year	
				(a) Book Value	(b) Book Va		· · · · · · · · · · · · · · · · · · ·	larket Value
	1		bearing	13689.42	20139.4			39.4J
	2		ary cash investments	70647.27	201879.	<u>82</u>	2018	79.82
	3	Accounts receivable		33	" 47' 1		<u> </u>	
		Less: allowance for o	loubtful accounts ▶				ļ	
	4	Pledges receivable ▶			13 mg + 1 state +		ļ	* ***
			loubtful accounts ▶				<u> </u>	
	5							
	6		m officers, directors, trustees, and other					
		· · · · · · · · · · · · · · · · · · ·	(attach schedule) (see instructions)		···			
	7	Other notes and loans re	eceivable (attach schedule) ▶					
		Less: allowance for dou	ıbtful accounts ▶					
Assets	8		ruse					
SS	9	•	d deferred charges					
⋖	10a		state government obligations (attach schedule)				44==	
	b	•	ate stock (attach schedule)	<i>381953</i>	3819	<u> 53</u>	4985	528.06
	С		ate bonds (attach schedule)					_
	11	Investments—land, build	ings, and equipment: basis ▶					
			ciation (attach schedule) ▶					
	12	_	age loans					
	13		attach schedule)				<del> </del>	<del></del>
	14	Land, buildings, and eq	uipment: basis ▶		<del></del>			
	4-		eciation (attach schedule) ▶					
	15 16	Other assets (describ	e ►) be completed by all filers—see the					
	10		e page 1, item l)	466289.69	603 972	24	720	547.30
	17		d accrued expenses	700007.07	-		, , ,	
	18						ł	İ
es	19							
☱	20		ectors, trustees, and other disqualified persons			-	{ ,	
Liabilities	21		notes payable (attach schedule)					
	22	Other liabilities (descr	· · · · · · · · · · · · · · · · · · ·					
	23		ibe ► )   lines 17 through 22)					1
			low SFAS 117, check here ▶ □					j
ances		and complete lines 2	24 through 26 and lines 30 and 31.					1
۱ ፰	24	Unrestricted						Ì
_	25							
<u> </u>	26	Permanently restricted				-		
Net Assets or Fund Ba			not follow SFAS 117, check here ▶ □					
ှ		and complete lines 2						i
ة	27	Capital stock, trust pr	incipal, or current funds					į
<u> </u>	28	Paid-in or capital surp	olus, or land, bldg., and equipment fund					
) S	29	Retained earnings, accu	ımulated income, endowment, or other funds					-
₹	30		und balances (see instructions) [					
ᅙ	31		<b>nd net assets/fund balances</b> (see [					
_								
	rt III		ges in Net Assets or Fund Balances					
1			alances at beginning of year-Part II, colur					- 40 4 =
			on prior year's return)			1		289.69
2	Enter	r amount from Part I, III	ne 27a			2		593.63
3	Othe	r increases not include	ed in line 2 (itemize) >			3		<u>63.98</u>
_	_					4	7205	47.30
5	Decre	eases not included in I	ine 2 (itemize) ►  ances at end of year (line 4 minus line 5)—F	and the anti-		5	733	F// 7 2 -
Ø	rotal	Het assets of fund bal	ances at end of year (line 4 minus line 5)—F	aren, column (b), III	IE 3U	6	720	547.30

Part	V Capital Gains and	Losses for Tax on Investmer	nt Income			
		ne kınd(s) of property sold (e g , real estate, use; or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a						
b						
c			,			
<u>d</u>			1/			
e			V-+-			<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale	, ,	n or (loss) (f) minus (g)
a						
<u>b</u>						
<u>c</u>						
<u>d</u>						
<u>е</u>		<u></u>		40/01/00		
	Complete only for assets sho	wing gain in column (h) and owned by t				(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		t less than -0-) <b>or</b> rom col (h))
a						
<u> </u>						
<u>c</u>					· · · · · · · · · · · · · · · · · · ·	
d					··	
е						
2	Capital gain net income or		o enter in Pa ter -0- in Par		2	
3	If gain, also enter in Part	n or (loss) as defined in sections 12 I, line 8, column (c) (see instruction	ns). If (loss),	, enter -0- in {		
					3	
Part		er Section 4940(e) for Reduce				
(For o	ptional use by domestic priv	vate foundations subject to the sec	tion 4940(a) 1	tax on net investi	ment income.)	
If sect	tion 4940(d)(2) applies, leave	e this part blank.				
Was t	he foundation liable for the	section 4942 tax on the distributable			ase period?	☐ Yes ☐ No
		qualify under section 4940(e). Do n			leina anu antrina	
	(a)	ount in each column for each year; s	see the Instru		aking any entries.	(d)
Cale	Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of	(c) nonchantable-use as	sets Dist	nbution ratio divided by col (c))
	2013		4			
	2012	1 / 1/				
	2011		#			
	2010		<u> </u>			
	2009		<u> </u>			
2	Total of line 1, column (d)					
3		for the 5-year base period—divide t		•		
	number of years the found	lation has been in existence if less t	nan 5 years		. 3	
4	Enter the net value of nonc	charitable-use assets for 2014 from	Part X, line 5	5	. 4	
5	Multiply line 4 by line 3 .				. 5	
6	•	at income (1% of Part I, line 27b)			. 6	
7	Add lines 5 and 6				7	
-						
8		ns from Part XII, line 4 . . . . ter than line 7, check the box ın Pa				% tax rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	<u>instr</u>	ıcţio	ns)
1a	and onto it of the interest of the control of the c			
b				2
	here ► ☐ and enter 1% of Part I, line 27b			
C				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			ļ
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			
6	Credits/Payments:			
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			Í
b	Exempt foreign organizations—tax withheld at source 6b			
c d	Tax paid with application for extension of time to file (Form 8868) . 6c Backup withholding erroneously withheld 6d			Ì
7	Total credits and payments. Add lines 6a through 6d	<b></b>		
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			<u> </u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10			
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ Refunded ▶ 11			
Part	VII-A Statements Regarding Activities			
1a	5 miles years, and the statement and the stateme		Yes	No
	participate or intervene in any political campaign?	1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		V
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
_	published or distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		V
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		:	
	on foundation managers. ▶ \$			· ·
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		V
	If "Yes," attach a detailed description of the activities.			7.1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	***********		
4-	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3		
4a b		4a 4b		
5	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	5	$\dashv$	V
•	If "Yes," attach the statement required by General Instruction T.	Ť		
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			
	conflict with the state law remain in the governing instrument?	6		
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 XV	7	<u> </u>	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			
				3
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	, ———,		200
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	<u> </u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		30 Sec. 2	
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			V
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	9	<del>- ,  </del>	
. •	names and addresses	10	$V \mid$	

Pai	t 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		·V			
12`	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)			V			
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	17	-			
	Website address						
14	The books are in care of ▶ David N Goulder Telephone no. ▶ 603-	465	دد	98			
15	The books are in care of ▶ David N Goulder Telephone no. ▶ 603-6  Located at ▶ 97 Aude Road Hellis NH 03049  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	49					
and enter the amount of tax-exempt interest received or accrued during the year							
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?		Yes	No V			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If	16		ļ-			
	"Yes," enter the name of the foreign country			ļ			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required						
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No			
1a	During the year did the foundation (either directly or indirectly):						
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	· ·					
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes	١٤					
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?						
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the						
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			İ			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b					
	Organizations relying on a current notice regarding disaster assistance check here ▶□			}			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1c					
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):						
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?						
	If "Yes," list the years ▶ 20, 20, 20, 20	Ì	ĺ				
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to						
	all years listed, answer "No" and attach statement—see instructions.)	2b		<u> </u>			
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  20, 20, 20, 20, 20, 20		ļ				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?						
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			1			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the						
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		- 1	}			
	foundation had excess business holdings in 2014.)	3b					
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	$\dashv$	~			
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	+					
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		V			

_	
Page	t

Par	t VII-B	Statements Regarding Activities	for V	Vhich Form	4720	May Be F	tequire	ed (contin	ued)		<b>.</b>
5a		year did the foundation pay or incur a			1	· - 4045/-	o				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . ☐ Yes ☑ No (2) Influence the outcome of any specific public election (see section 4955); or to carry on,										
	directly or indirectly, any voter registration drive?										
		e a grant to an individual for travel, stude e a grant to an organization other than							₩ No	·	
		a 4945(d)(4)(A)? (see instructions).			_				✓No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational								<u>_</u>		
b		ies, or for the prevention of cruelty to c ver is "Yes" to 5a(1)–(5), did <b>any</b> of the							☑No bed in		
_	Regulations	s section 53.4945 or in a current notice r	egardi	ing disaster a	ssistand	ce (see instr	uctions	)?		5b	
_		ons relying on a current notice regarding							▶ □		
С		ver is "Yes" to question 5a(4), does the maintained expenditure responsibility							□ No		
_		tach the statement required by Regula									
6a		undation, during the year, receive any f nal benefit contract?							ΜNο		
b	•	indation, during the year, pay premium						_	_	6b	
7.		6b, file Form 8870.		ta a probibitor	d toy ob	altar transar	ation?	☐ Yes	MAN A		
		during the tax year, was the foundation a d the foundation receive any proceeds								7b	
Part		formation About Officers, Direct	ors, 1	Γrustees, F	ounda	tion Man	agers,	Highly P	aid E	mploye	es,
1		nd Contractors icers, directors, trustees, foundation	mana	agers and th	eir con	npensation	ı (see i	nstruction	ıs).		
	_	(a) Name and address	(b) Title	e, and average irs per week	(c) Co	mpensation not paid,	(d)	Contributions byee benefit p	to	(e) Expen	se account,
4=-	David 1	Naoulder		ed to position		ter -0-)		erred comper		other al	lowances
650	JE Mone Dr. Jar	huster Place, Portland OR 9730, ne Wood	Pre	s/Dir		O					
	Dure Hill A Michael	ld Durham MF 04222 TGoulder	Sec	c/Dor		0					·
	Robert	B. Goulder	Tre	es./Dir		٥					
<u> 36 f</u>	<u> Kerrimad</u>	Rd, Amherst NH 03031	$\mathcal{D}$	)ır		)					
2	Compensa "NONE."	ation of five highest-paid employee	s (oth	er than thos	se incl	uded on li	ne 1	see instru	ction	s). If no	ne, enter
(	(a) Name and a	ddress of each employee paid more than \$50,000	r	(b) Title, and a hours per y devoted to pe	veek	(c) Compe		(d) Contribut employee b plans and de compensa	enefit eferred		se account, lowances
97	Scot	t A Goulder 4 Hallic NH 03049		Dir		C	)				
Trail t Could an											
97	97 Ridge Rd, Hollis N. H. 03049 Dir O										
				-		L					
				140	M						
Total	number of a	ther employees paid over \$50,000 .				<u> </u>				<u> </u>	
- Otal	idilibel 010	ther employees paid over \$50,000.	<del>· · ·</del>	··Non	1 <u>C- ·</u>	• • •		· · ·		Form 990	-PF (2014)

3 Five highest-paid independent contractors for professional services (see instructions). If no	e, enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of s	ervice (c) Compensati
·	
Lone	
toloumber of other residue and \$50,000 for residue in the same of	
tal number of others receiving over \$50,000 for professional services	· · · · <u>•  </u>
art IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such organizations and other beneficiaries served, conferences convened, research papers produced, etc.	s the number of Expenses
1	
2	
Jee Attachment 2	
art IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
Jee Attachment 2	
	· <del>-</del>
All other program-related investments. See instructions	

Part	· · · · · · · · · · · · · · · · · · ·	ign foundations,
	see instructions.)	
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
b	Average of monthly cash balances	1b
C	Fair market value of all other assets (see instructions)	1c
d	Average of monthly cash balances	1d
е	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
3	Subtract line 2 from line 1d	3
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see	
_	instructions)	4
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5
6	Minimum investment return. Enter 5% of line 5	6
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► ☐ and do not complete this part.)	oundations
4		1
1	Minimum investment return from Part X, line 6	1 - 1
2a b	Tax on investment income for 2014 from Part VI, line 5	
C	Add lines 2a and 2b	2c
3	Distributable amount before adjustments. Subtract line 2c from line 1	3
4	Recoveries of amounts treated as qualifying distributions	4
5	Add lines 3 and 4	5
6	Deduction from distributable amount (see instructions)	6
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	
	line 1	7
Part	VII Qualifying Distributions (assignments)	
rait	XII Qualifying Distributions (see instructions)	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	** ***********************************
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a
b	Program-related investments—total from Part IX-B	1b
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:	<u></u>
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
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 instructions)	5
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether the foundation
	qualifies for the section 4040(e) reduction of tax in those years.	Form 990-PF (2014)

<u>Part</u>	XIII Undistributed Income (see instruction	ons)	<del> </del>		
	· · · · · · · · · · · · · · · · · · ·	(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
•	line 7	- 78		.,	
2	Undistributed income, if any, as of the end of 2014:	574.45	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. "1, 2, " - ",	<del>/</del>
а	Enter amount for 2013 only	, (\$)	14.2		1
b	Total for prior years: 20 ,20 ,20	Send of the Send of the send o	<i>ii</i> **,	4 42 / 20	And the state of t
3	Excess distributions carryover, if any, to 2014:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3	1 24 MA 15 17 14	Lo Ting
а	From 2009			700	
b	From 2010	, ,	,		
_	From 2011		•	/	
C C					
d	From 2012				
e	From 2013				,
f	Total of lines 3a through e		,	<i></i>	4.
4	Qualifying distributions for 2014 from Part XII,	- v .			in the
	line 4: ▶ \$	· 'ĵ '\ "		<u>/</u>	
a	Applied to 2013, but not more than line 2a .		/		, ,
b	Applied to undistributed income of prior years		/		
	(Election required—see instructions)		/		
С	Treated as distributions out of corpus (Election		7		
	required—see instructions)		/ /		
d	Applied to 2014 distributable amount				
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2014	-	_/		
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)		/		
6	Enter the net total of each column as		/		
	indicated below:	<i>y</i>	/		
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	/		1	
b	Prior years' undistributed income. Subtract		, , , , , , , , , , , , , , , , , , , ,		
	line 4b from line 2b	. /			
С	Enter the amount of prior years' undistributed	<del>/</del>			
·	income for which a notice of deficiency has	/			
	been issued, or on which the section 4942(a)	/			
	tax has been previously assessed	<i>/</i> .			
d	Subtract line 6c from line 6b. Taxable				
-	amount—see instructions			j	
_	Undistributed income for 2013. Subtract line	$\overline{}$			
-	4a from line 2a. Taxable amount—see		ļ		
	instructions	/		ľ	
	/L				
	Undistributed income for 2014. Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2015				
	/ L				
	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions) /				
	Excess distributions carryover from 2009 not	T			
	applied on line 5 or line 7 (see instructions).				
	Excess distributions carryoyer to 2015.				
	Subtract lines 7 and 8 from line 6a	Į	<u> </u>		
0	Analysis of line 9:				
а	Excess from 2010 /		ŀ		
	Excess from 2011 / .	}		ļ	
	Excess from 2012 /		i		1
	Evenes from 2012			}	
	Excess from 2014		}		
		J	1	E	1

orm 9:	90-PF (2014)					Page 10
art	XIV Private Operating Founda	ations (see inst	ructions and Par	t VII-A, question !	9)	
1a	If the foundation has received a rulin	•				
	foundation, and the ruling is effective for		•			(O) 53 40 40 (n (5)
b	Check box to indicate whether the four		ite operating found		ection	(3) or 4942(j)(5)
Za	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(b) 2012	Prior 3 years	45 2011	(e) Total
	investment return from Part X for	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
h	each year listed		<del> </del>	<del></del>		<u> </u>
	Qualifying distributions from Part XII,					<u> </u>
-	line 4 for each year listed					
d	Amounts included in line 2c not used directly			//		
	for active conduct of exempt activities			XI	-	
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the		_	1		
	alternative test relied upon:		1 ( )	Attachn	lents 1	Lac ( )
а	"Assets" alternative test—enter:		1 Uee	MICHA	יו בנייטו	14 O
	(1) Value of all assets		<del>                                     </del>	<del>                                     </del>	ļ	
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3	<b></b>	<del> </del> -	1		<u> </u>
	of minimum investment return shown in Part X, line 6 for each year listed		-			
С	"Support" alternative test—enter:					
	(1) Total support other than gross				1	
	investment income (interest,					
	dividends, rents, payments on secunties loans (section					
	512(a)(5)), or royalties)		<u> </u>			
	(2) Support from general public	- "	T	T		
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)		<b>-</b>	ļ		
	(3) Largest amount of support from					
	an exempt organization		<del>-</del>	<del>                                     </del>		
art	(4) Gross investment income	n (Complete t	hie part only if	the foundation h	ad \$5 000 or me	ore in assets at
al L	any time during the year-	• •		the loundation in	iaα φ5,000 οι τικ	ore iii assets at
<u> </u>	Information Regarding Foundation					
	List any managers of the foundation v		outed more than 2	% of the total cont	ributions received	by the foundation
	before the close of any tax year (but o					•
	List any managers of the foundation			•		rge portion of the
	ownership of a partnership or other er	itity) of which the	e foundation has a	10% or greater into	erest.	
	Information Regarding Contribution	Cross Off I -	on Coholombin	oto Drossessos		
	Check here ► ☐ if the foundation				organizations and	does not accent
	unsolicited requests for funds. If the fo	•	•		_	•
	other conditions, complete items 2a, b		g, g, e.e.	. (000		gamaana amaa
_	The name, address, and telephone nu		ddress of the pers	son to whom applic	ations should be a	ddressed:
			,	, ,		
b	The form in which applications should	be submitted ar	nd information and	I materials they sho	uld include:	
	Amu aubaina da diinaa			<del></del>		
Ü,	Any submission deadlines:					
d	Any restrictions or limitations on aw	ards, such as h	ov geographical a	areas, charitable fie	elds, kinds of inst	titutions, or other
- '						

factors:

3	Grants and Contributions Paid During		ed for Fut	ture Payment	
	Desirient	If recipient is an individual,		die Fayineit	Т
		show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Contribution	
a	Paid during the year  See	Attachn			
	Total	· · · · · · · ·	<del></del>	<u> </u>	3a
	Total				Bb

	rt XVI-A Analysis of Income-Producing Ac					
Ent	er gross amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	( (e)
		(a)	(b)	(c)	(d)	Related or exempt function income
1	Program service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
·	a					
	b					
	С					
	d					·
	e					
	Face and contract from			<del>                                     </del>		
2	<b>g</b> Fees and contracts from government agencies Membership dues and assessments		N 1 -	<i>{</i>	<u> </u>	
3	Interest on savings and temporary cash investments		1/	<del>/ -  </del>	-	
4	Dividends and interest from securities		<del>/ \ / /</del>			
5	Net rental income or (loss) from real estate:		<b>/</b>			
	a Debt-financed property					
	<b>b</b> Not debt-financed property					·
	Net rental income or (loss) from personal property					
7	- · · · · · · · · · · · · · · · · · · ·					
8	Gain or (loss) from sales of assets other than inventory					
9 10	Net income or (loss) from special events Gross profit or (loss) from sales of inventory					
	Other revenue: a					
	b	-			-	
	С					
	d					
	e					
	Subtotal. Add columns (b), (d), and (e)				13	
	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation				13	
	t XVI-B Relationship of Activities to the A		ent of Exemp	t Purposes		
	Explain below how each activity for which accomplishment of the foundation's exempt pur				A contributed in	nportantly to the
	▼ accomplishment of the foundation's exempt pur	poses (other thar	by providing fun	ds for such purpo	oses) (See instruc	tions.)
				<u> </u>		
					<del></del>	
			<del></del>			
	Coe	Hach	ment .	<del>ノーー</del>		
	Jee 7	(,,,,,,				

Firm's address ▶

rart	VAII		n Regarding Tra rganizations	insters to and trans	actions and	Helationsr	iips with Nonc	naritable
<del>1</del>	Did t			engage in any of the fo	llowing with an	v other orga	nization describe	ed Yes No
•				section 501(c)(3) organ				~
		nizations?	•	· // · · ·	•	ŕ	0 1	
а	Transfers from the reporting foundation to a noncharitable exempt organization of:							
		ash						1a(1)
	<b>(2)</b> O	ther assets .		· / 1· 1· 0 ·	* ~ ~ ~ .	· · A · .	1	1a(2)
b	(2) Other assets							
	(1) Sales of assets to a noncharitable exempt organization							1b(1)
								1b(2)
				er assets				1b(3)
								1b(4)
		oans or loan gua						1b(5)
_				ship or fundraising solicit				1b(6)
c d				ists, other assets, or pai es," complete the follow				1c
u				rices given by the report				
				gement, show in column				
(a) Line		b) Amount involved		charitable exempt organization		<u> </u>	ers, transactions, and	
		<u>·                                      </u>		, ,	.,,,			
				<del> </del>				
				·				_
								<del></del> .
	_						· · · · · · · · · · · · · · · · · · ·	
	_			· · · · · · · · · · · · · · · · · · ·				
			-					
	_							
			<del></del>					
2a	Is the	foundation dire	ctly or indirectly af	filiated with, or related	to, one or mor	e tax-exem	pt organizations	
	descri	bed in section 5	01(c) of the Code (	other than section 501(c	)(3)) or in section	on 527? .		☐ Yes ☐ No
			following schedule					
		(a) Name of organi	zation	(b) Type of organi	zation		(c) Description of rela-	tionship
						·		
	11-4			<u> </u>				
Sign				ed this return, including accompai an taxpayer) is based on all inform				ledge and belief, it is trui
-		( ) ( )	u 2 00	13/31/15	$\Omega$	' '		e IRS discuss this return e preparer shown below
Here	Signa	ture of officer or trus	tee Tree de		Presid	ent_		tructions)? Yes No
		Print/Type preparer's		Preparer's signature	THE	Date		PTIN
Paid	- 1	, F - F - F - W					Check I If self-employed	
Prepa		Firm's name ►	-	<del></del>		<u> </u>	Firm's EIN ▶	<u> </u>
Use C	וחין γווין	F. I II					THE SERVE	

Phone no

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

#### **Schedule of Contributors**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

GOULDER FAMILY FOUNDATION

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Employer identification number

02-0268498

Organization type (check one):						
Filers of	•	Section:				
Form 99	0 or 990-EZ	☐ 501(c)( ) (enter number) organization				
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
		☐ 527 political organization				
Form 99	0-PF	501(c)(3) exempt private foundation				
		☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation				
		☐ 501(c)(3) taxable private foundation				
Check if	vour organization is	covered by the <b>General Rule</b> or a <b>Special Rule</b> .				
	nly a section 501(c)(7	), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See				
General	Rule					
Œ	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special	Rules					
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received uring the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributoralling \$5,000 or more during the year		the year, contributions exclusively for religious, charitable, etc., purposes, but no such if more than \$1,000. If this box is checked, enter here the total contributions that were received in exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the less to this organization because it received nonexclusively religious, charitable, etc., contributions				

Name of organization

GOULDER FAMILY FOUNDATION

Employer identification number

O2-0368498

r ar u	Contributors (see instructions). Use auplicate copies of	Part I if additional space is	needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Estate of Claire T. Goulder 51 Bowie Hill Road Durham, ME 0422	\$ 260,000.00	Person Payroli Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Estate of Morton E. Goulder 650 SE Monchester Place Portland, OR 97202	\$ £330.00	Person Payroli Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person  Payroll  Noncash  (Complete Part II for

Name of organization
GOULDER FAMILY FOUNDATION

Employer identification number 02-0268498

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
	NOTAPP	LICABLE			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b)  Description of noncash property given .	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization **Employer identification number** GOULDER FAMILY FOUNDATION 02-0268498 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part i Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift from (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held from (b) Purpose of gift (c) Use of gift Part I .(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

# Attachment 1

Part I

Line 4

Dividends Oppenheimer

#7389.75

Line 18

Taxes

Foreign Taxes Withheld (Opp.)

1246.12

NH Property Tuxes (2014)

168.00

NH Property Taxes (2008-13)

1637.00

#3051.12

Part II

Oppenheimer

Clasing Balance

Cash

Bank of America \$ 20139.42

\$201879.82

\$222,019.24

Equites

Bank of Am (1985454)

\$ 355188.06

Toronto Dom (300054)

# 143340.00

\$498528.06

Part VII-A

Line 10

Contributor

Estate of Claire T Boulder

Estate of Morton EGoulder

(includes direct payment of Foundation fee and property taxes)

\$260,000.00

8330.00

\$ 268330.00

# Attachment 2

Part IX-A

2014 Donations

# All donations by wire transfer from Oppenheimer ace't

Date	Recipient	Amount
12/15/14	Beaverbrook	\$ 100,000.00
1415/14	Beaverbrook	\$ 10,000.00
12/15/14	Home Health & Haspice	\$ 10,000.00
12/15/14	Harbor Homes	\$ 10,000.00
12/15/14	Humane Society of Nashua	\$ 5,000.00
	·	\$135,000.00