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## **Return of Private Foundation**

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

OMB No. 1545-0052

▶ 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

	Fo	r cale	ndar year 2014 or tax year beginning		, 2014	4, and	ending	· · · · ·	, 20
			oundation				A Employe	r identification number	er .
	PE	OTFIN	FOUNDATION					06-1046591	
			nd street (or P.O. box number if mail is not delivered to street address)		Room	/surte	B Telephor	e number (see instruct	ions)
	10	MOH	TON ST					207-771-0965	<u>.</u>
	Cr	ty or tov	vn, state or province, country, and ZIP or foreign postal code				C If exempt	tion application is pend	
	PΩ	DRTI A	ND MAINE 04101				i unumpi	appca.iorr.io pona	g, 6/100// //10/67
				n of a former	public	charity	D 1. Foreigi	n organizations, check	here ▶□
			☐ Final return ☐ Amended			•			<del></del>
			Address change  Name cha	nge				n organizations meeting here and attach compu	
	H	Chec	k type of organization:     Section 501(c)(3) exempt p	rivate founda	ation		E If private	foundation status was	terminated under
			on 4947(a)(1) nonexempt charitable trust			lation	section 5	07(b)(1)(A), check here	▶∐
	ī	Fair n	narket value of all assets at   J Accounting method	l: 🗸 Cash	☐ A	ccrual	E If the four	ndation is in a 60-mont	h termination
		end c	of year (from Part II, col. (c), Other (specify)					ction 507(b)(1)(B), check	
		line 1	6) ► \$ 8,394.00 (Part I, column (d) must be	on cash basis	s.)				
	P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue	and				(d) Disbursements
			amounts in columns (b), (c), and (d) may not necessarily equal	expenses p			investment come	(c) Adjusted net income	for charitable purposes
			the amounts ın column (a) (see instructions).)	DOORS	ı				(cash basis only)
		1	Contributions, gifts, grants, etc., received (attach schedule)	7	5,000				
2015		2	Check ► ☐ if the foundation is <b>not</b> required to attach Sch. B					·	
7		3	Interest on savings and temporary cash investments		35		35	0	
TC:		4	Dividends and interest from securities		0		0	0	
1		5a	Gross rents		0		0	0	
<del>-</del>		b	Net rental income or (loss)					1	
× i	9	6a	Net gain or (loss) from sale of assets not on line 10	F	≀Eถ	EIV	FD		
<u>:                                    </u>	Revenue	b	Gross sales price for all assets on line 6a						
Ή;	ě	7	Capital gain net income (from Part IV, line 2)	2-625			015		
<u> </u>	Œ	8	Net short-term capital gain	- N	YAN	112	טוט א	0	
Ş		9	Income modifications	Ш				0	
SCAPTED MAY		10a	Gross sales less returns and allowances		ឲ្យ	EV	117		
		b	Less: Cost of goods sold				4 10 10 10 10 10 10 10 10 10 10 10 10 10	,	
		С	Gross profit or (loss) (attach schedule)		0			0	
		11	Other income (attach schedule)		0		0	0	
		12	Total. Add lines 1 through 11		5,035		35	0	
	Ś	13	Compensation of officers, directors, trustees, etc.	8	5,833		0	0	
	Expenses	14	Other employee salaries and wages	··	0		0	0	
	be	15	Pension plans, employee benefits		7,770		0	0	
	ΜŽ	16a	, , , , , , , , , , , , , , , , , , ,		3,446		0	0	
	ē	i .	Accounting fees (attach schedule)		0		0	0	
	ati	17 C	Other professional fees (attach schedule) Interest	<del></del>	0		- 0	0	
	str	17 18	Interest		0		0	0	<u> </u>
	ini	19	Depreciation (attach schedule) and depletion		5,630		0	0	
	<u>E</u>	20	Occupancy		0		0	0	
	Ad	21	Travel, conferences, and meetings		,610			0	<del></del>
	פ	22	Printing and publications		0		0	0	
	ā	23	Other expenses (attach schedule)					0	<del></del>
	<u>e</u>	23 24	Total operating and administrative expenses.	<del></del>	,937		35	U	
	Operating and Administrative	~~	Add lines 13 through 23	120	,226		o	o	
	<u>B</u>	25	Contributions, gifts, grants paid		,000	-	<del>"</del>		
	O	26	Total expenses and disbursements. Add lines 24 and 25		,226		0	0	
•		27	Subtract line 26 from line 12:	404	,,,,,	-			
		a	Excess of revenue over expenses and disbursements	_100	101			ļ	
			Net investment income (if negative, enter -0-)	-103	,191		0	<del>-</del>	
			Adjusted net income (if negative enter -0-)						

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X

Form **990-PF** (2014)



107	art II	Attached schedules and amounts in the description column	Beginning of year		f year
	art II	Balance Sheets Attached schedules and amounts in the description column 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	197,544	8,394	8,394
	2	Savings and temporary cash investments	0	0	
	3	Accounts receivable ▶ 0			
		Accounts receivable ► 0  Less: allowance for doubtful accounts ► 0	0	0	
	4				
		Piedges receivable ► 0  Less: allowance for doubtful accounts ► 0	0	0	
	5	Grants receivable	0	0	
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	0	0	
	7	Other notes and loans receivable (attach schedule) ▶0			
		Less: allowance for doubtful accounts ▶0	0	0	
ts	8	Inventories for sale or use	0	0	
Assets	9	Prepaid expenses and deferred charges	0	0	
As	10a	Investments—U.S. and state government obligations (attach schedule)	0	0	
	b	Investments—corporate stock (attach schedule)	0	0	
	С	Investments—corporate bonds (attach schedule)	0	0	
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶0	o	0	
	12	Investments-mortgage loans	0	, 0	
	13	Investments—other (attach schedule)	0	0	
	14	Land, buildings, and equipment: basis ▶0			
		Less: accumulated depreciation (attach schedule) ▶ 0	o	o	
	15	Other assets (describe ► 0	0	0	
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	197,544	8,394	8,394
	17	Accounts payable and accrued expenses	0	41	
'n	18	Grants payable	0	0	
<u>ë</u>	19	Deferred revenue	0	0	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0	0	
ia k	21	Mortgages and other notes payable (attach schedule)	0	0	
_	22	Other liabilities (describe ▶)	0	0	
	23	Total liabilities (add lines 17 through 22)	0	41	
es		Foundations that follow SFAS 117, check here ► ☑ and complete lines 24 through 26 and lines 30 and 31.		· · · · · · · · · · · · · · · · · · ·	
Balances	24	Unrestricted	197.544	8,353	
ala I	25	Temporarily restricted	197,544	0,353	
	26	Permanently restricted	0	0	
Fund		Foundations that do not follow SFAS 117, check here ►	<del>-</del>		
ᇎ		and complete lines 27 through 31.			
Net Assets or	27	Capital stock, trust principal, or current funds			
ध	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Se	29	Retained earnings, accumulated income, endowment, or other funds			
₹	30	Total net assets or fund balances (see instructions)	197,544	8,353	
ᄫ	31	Total liabilities and net assets/fund balances (see	107,011	0,000	
<b>z</b>		instructions)	197,544	8,394	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	107,017	0,0041	<del></del>
		net assets or fund balances at beginning of year-Part II, colum	n (a), line 30 (must	agree with	<del></del>
		of-year figure reported on prior year's return)			197,544
2	Enter	r amount from Part I, line 27a			-189,191
3		r increases not included in line 2 (itemize) ▶			0
	Add I	lines 1, 2, and 3		4	8,353
_	n	and a making find ad to the or Office at 100 h			0
6	Total	eases not included in line 2 (itemize)  net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), line	30 6	8,353

Part	V Capital Gains and	Losses for Tax on Investme	nt Income	NONE		
	(a) List and describe the 2-story brick warehous	e kind(s) of property sold (e.g., real estate, se, 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						
<u>c</u>						
<u>d</u>						
<u>e</u>	<u> </u>	(f) Depreciation allowed	(a) Cost or	other been	(h) Coir	or (loss)
	(e) Gross sales price	(or allowable)		other basis nse of sale		) minus (g)
<u>a</u>						
<u>b</u>						
c					<del> </del>	
e					·	
	Complete only for assets show	wing gain in column (h) and owned by	the foundation	on 12/31/69	(I) Gains (Col.	(h) gain minus
	(i) F M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col.	s of col. (i) (j), if any	col. (k), but not	less than -0-) <b>or</b> om col. (h))
a						
b						
<u>c</u>						
<u>d</u>		•	·		· · · · · ·	
<u>е</u>		( If gain, als	so enter in Par	rt I. line 7	<del></del>	
2	Capital gain net income or	(net capital loss) { If (loss), e	nter -0- in Par	t I, line 7	2	
3	If gain, also enter in Part I	or (loss) as defined in sections 12, line 8, column (c) (see instruction	ons). If (loss),		3	
Part		er Section 4940(e) for Reduce		et Investment		<del> </del>
		ate foundations subject to the sec				
•	uon 4940(d)(2) applies, leave			PPLICABLE	,	
Was t	he foundation liable for the s	ection 4942 tax on the distributat qualify under section 4940(e). Do i	ole amount of	any year in the b	ase period?	☐ Yes ☐ No
1		unt in each column for each year;			king any entries.	
	(a)	(b)	1	(c)		(d)
Cale	Base period years andar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of	nonchantable-use as		bution ratio vided by col. (c))
	2013					
	2012					
	2011					
	2010					
	2009					<del></del>
2	Total of line 1, column (d)				. 2	
3		or the 5-year base period—divide				
•		ation has been in existence if less			- I	
	-					
4	Enter the net value of noncl	haritable-use assets for 2014 fron	n Part X, line 5	5	. 4	<del></del>
5	Multiply line 4 by line 3 .				. 5	
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6	
7	Add lines 5 and 6				. 7	
8		s from Part XII, line 4			. 8	
		er than line 7, check the box in Pa			nat part using a 1%	6 tax rate. See the

Part		instr	uctio	ns)′
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			ļ
	here ▶ ☐ and enter 1% of Part I, line 27b			ł
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of J Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
3	Add lines 1 and 2			Ì
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			
6	Credits/Payments:			
а	2014 estimated tax payments and 2013 overpayment credited to 2014   6a			
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) . 6c			ļ
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d			<u> </u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			ļ
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9			<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			l
	VII-A Statements Regarding Activities  During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1	Yes	No
1a	participate or intervene in any political campaign?	1a	163	1
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	10		<u> </u>
b	Instructions for the definition)?	1b		1
	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		✓
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		<b>✓</b>
_	If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1
h	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		1
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied 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	✓	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶		l	
_	Connecticut			
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		İ	
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation not required by AG Office.  Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	8b		<u>✓</u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		Ì	
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	ֻ	ļ	./
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	9		<u>√</u>
	names and addresses . SEE SCH. B FOR INFORMATION	40	_	

⁴-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		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
14	Website address ► NONE  The books are in care of ► STEVE LANFER & MATTHEW OWEN  Telephone no. ► 20	7-771	ODGE	
17	Located at ► 10 MOULTON ST. PORTLAND MAINE  ZIP+4 ►	0410		
15	Located at ► 10 MOULTON ST. PORTLAND MAINE  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ ┌
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	
	over a bank, securities, or other financial account in a foreign country?	16	L	<b>/</b>
	"Yes," enter the name of the foreign country ►			
Dar	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
ı aı	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):		103	110
IG	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ✓ No			
	(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 Vo			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			i
	(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.)			
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		1
	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		İ	
	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	Í		
	6e, Part XIII) for tax year(s) beginning before 2014?	]		
	If "Yes," list the years ▶ 20, 20, 20, 20	İ	i	
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.)	[	Ì	-
_	•	2b		✓
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, 20, 20, 20, 20, 20, 20, 20	ļ		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	ĺ		
	at any time during the year?	- 1	- 1	
b	If "Yes," did it have excess business holdings in 2014 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	ļ	ļ	
	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		
_	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<b>√</b>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	ł	- 1	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		✓_

EIN 06-1046591 Form 990-PF (2014) Page 6 Statements Regarding Activities for Which Form 4720 May Be Required (continued) Part VII-B During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on. Yes √ No (3) Provide a grant to an individual for travel, study, or other similar purposes? . . . . . ✓ No (4) Provide a grant to an organization other than a charitable, etc., organization described in **V** No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . . . . . . . . . . . . . . If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 5b Organizations relying on a current notice regarding disaster assistance check here If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . . . . . . . . . . . . . . . If "Yes," attach the statement required by Regulations section 53.4945-5(d). Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors List all officers, directors, trustees, foundation managers and their compensation (see instructions). (b) Title, and average (c) Compensation (d) Contributions to (e) Expense account, other allowances (a) Name and address (If not paid, employee benefit plans hours per weel devoted to position enter -0-) and deferred compensation SEE SCHEDULE ATTACHED Compensation of five highest-paid employees (other than those included on line 1-see instructions). If none, enter "NONE." (d) Contributions to (b) Title, and average

(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other allowances
NONE				
<b>Total</b> number of other employees paid over \$50,000	<u></u>	· · · · · · ·		0

Information About Officers, Directors, Trustees, Foundation Managers and Contractors (continued)	s, Highly Paid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). It	f none, enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Typ	e of service (c) Compensation
NONE.	
***************************************	
7	
***************************************	
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 statistical information sorganizations and other beneficiaries served, conferences convened, research papers produced, etc.	such as the number of Expenses
1 Grant paid to Emmaus Teams (a 501 (c) (3) which ministers to 6 senior citizen residences and whi	ich sponsors
programs that feed hungry people	
	70,000
2 Grant paid to Re-Entry Ministry (a 501 (c) (3) (for a multi-faceted, Christ-centered home where wor	
to drugs are restored as productive citizens and as witnesses to the life changing power of Jesus	
0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	30,000
3 Grant paid to Manna (a 501 (c) (3) (for feeding programs, residential recovery programs, a shelter	for women and
an outpatient counseling for addicted persons)	45.000
4 Grant paid to Root Cellar (a 501 (c)(3) (a Christian mission which unites the local community in a	15,000
of satisfying the physical and spiritual needs of inner-city youth and families	
	8,000
Part IX-B Summary of Program-Related Investments (see instructions) NOT A	APPLICABLE
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
\	
2	
All other program related investments. Can instructions	
All other program-related investments. See instructions.  3	
U	
V	
Total. Add lines 1 through 3	
	Form <b>990-PF</b> (2014)

Par		ign fo	undations, '
	see instructions.)	<del></del>	
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	C
b	Average of monthly cash balances	1b	46,800
С	Fair market value of all other assets (see instructions)	1c	(
d	Total (add lines 1a, b, and c)	1d	46,800
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	C
3	Subtract line 2 from line 1d	3	46,810
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	46,810
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part	XI 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.)	ounda	itions
1	Minimum investment return from Part X, line 6	1	0
<b>2</b> a	Tax on investment income for 2014 from Part VI, line 5		•
b	Income tax for 2014. (This does not include the tax from Part VI.) 2b 0		
C	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	0
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	0
Part	Qualifying Distributions (see instructions)  Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
ı a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	4-	
b	Program-related investments—total from Part IX-B	1a	264,226
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	ID	0
_	purposes		_
3		2	0
-	Amounts set aside for specific charitable projects that satisfy the:	_	_
a	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	. 0
4 5	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	4	264,226
5		_	
6	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	264,226
	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.	y wheth	ner the foundation

Form 9	990-PF (2014)			EIN 06-	1046591	Page \$
	XIII Undistributed Incon	ne (see instructio	ns)			
		(000 111011101111	(a)	(b)	(c)	(d)
1	Distributable amount for 201-	4 from Part XI,	Corpus	Years prior to 2013	2013	2014
2	Undistributed income, if any, as of	f the end of 2014:		<del></del>		
а	Enter amount for 2013 only .	ì			o	
b	Total for prior years: 20,2	0,20[		0		
3	Excess distributions carryover,	if any, to 2014:				
а	From 2009	0				
b	From 2010	50,087				
C	From 2011	105,050				
ď	From 2012	244,370				
e	From 2013	338,437		Ì	j	
f 4	Total of lines 3a through e . Qualifying distributions for 201		737,944			<del></del>
7	line 4: ► \$ 264,226	14 HOIH Fait XII,	1		ĺ	
а	Applied to 2013, but not more	than line 2a			0	
	Applied to undistributed incom		·			<del></del>
	(Election required—see instruction			o		
С	Treated as distributions out of	corpus (Election				
	required—see instructions) .	[	0			
d	Applied to 2014 distributable a	P				0
е	Remaining amount distributed	· -	264.226			
5	Excess distributions carryover a (If an amount appears in column	nn (d), the same	0			0
6	amount must be shown in colur Enter the net total of each					
	indicated below:					
<b>a</b>	Corpus. Add lines 3f, 4c, and 4e.		1,002,170			
Ь	Prior years' undistributed incline 4b from line 2b	come. Subtract		_		
		ļ		0		
С	Enter the amount of prior years income for which a notice of		1			
	been issued, or on which the					
	tax has been previously assess			o		
d	Subtract line 6c from line	6b. Taxable				
	amount—see instructions .			0		
е	Undistributed income for 2013					
	4a from line 2a. Taxable					
	instructions				0	
f	Undistributed income for 2014.  4d and 5 from line 1. This an					
	distributed in 2015					
7	Amounts treated as distribution	· · · · · · · · · · · ·	<del></del>			0
-	to satisfy requirements impos					
	170(b)(1)(F) or 4942(g)(3) (Ele					
	required—see instructions) .	[				
8	Excess distributions carryover					
	applied on line 5 or line 7 (see in		0			
9	Excess distributions carryo					
	Subtract lines 7 and 8 from line	6a	1,002,170			
10	Analysis of line 9:	, I				
a	Excess from 2010	50,087		İ		
b	Excess from 2011	105,050			)	
C d	Excess from 2012	244,370 338,437		1		
	Excess from 2014	264,226				
		· · · · · · · · · · · · · · · · · ·				

Parl	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9	) NOT APPI	ICABLE
1a	If the foundation has received a ruling	or determination	letter that it is a	private operating		
	foundation, and the ruling is effective fo	r 2014, enter the da	ate of the ruling .	<b>.</b>		
b	Check box to indicate whether the four	ndation is a private	operating foundat	ion described in se	ection 🗌 4942(j)	(3) or 🔲 4942(j)(5)
<b>2</b> a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(6) 10421
	each year listed					
b					<u>.</u>	
С	Qualifying distributions from Part XII, line 4 for each year listed					`
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
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 alternative test relied upon:					
а	"Assets" alternative test—enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
b	section 4942(j)(3)(B)(i)					
b	of minimum investment return shown in	ļ				
_	Part X, line 6 for each year listed			····		
C	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Informatio	n (Complete thi	is part only if th	e foundation ha	ad \$5,000 or me	ore in assets at
	any time during the year-		s.)			
1	Information Regarding Foundation	•				_
а	List any managers of the foundation w					by the foundation
	before the close of any tax year (but or	ily il triey nave cor	nunduted more tha	iii 45,000). (See Se	ection 507 (a)(2).)	
NONE b	List any managers of the foundation	who own 10% or	more of the stack	of a corporation	for an equally la	rge portion of the
	ownership of a partnership or other en			•		ge portion or the
NONE		**		Ü		
2	Information Regarding Contribution	, Grant, Gift, Loar	n, Scholarship, et	c., Programs:		
	Check here ► ☑ if the foundation of unsolicited requests for funds. If the foundations, complete items 2a, b	oundation makes g				
	The name, address, and telephone nur	<del></del>	dropp of the person	a to whom applies	tions should be s	ddragaed;
а	The name, address, and telephone hul	nder or e-mail add	aress of the person	т то whom арриса	mons should be a	Jaressea.
b	The form in which applications should	be submitted and	information and m	naterials they shou	ld include:	
c	Any submission deadlines:				·	
	Any restrictions or limitations on awa	arde euch oo be	geographical are	as charitable feel	de kinde of insti	itutions or other
u	factors:	arus, sucii as Dy	geographical are	as, unantable liel	us, Killus VI IIISU	tutions, or other

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year	or substantial contributor			
1-Emmaus Teams, 8 Pine Ridge Rd, Cumberland Foreside, Me 04110	N/A	501c3	Ministry Sr. Citizen homes & feedin	70,000
2-Re-Entry Ministry, 82 Benham Ave, Bridgeport, CT 06605	N/A	501c3	Rehab drug addicted women	30,000
3-Manna, P.O. 2763, Bangor, ME 04402	N/A	501c3	Feeding/housing needy	15,000
4-Root Cellar, 94 Washington Ave,Portland ME 04101	N/A	501c3	Feeding hungry	8,000
5-Care Corp Int'l, 3904 Belstrum Dr, Flower Mount, TX	N/A	501c3	Church planting & growth	5,000
			,	
Total			▶ 3a	128.000
<b>b</b> Approved for future payment				
None				
Total			▶ 3b	200 PF

Pa	rt X	VI-A Analysis of Income-Producing Ac	itivities NOI	NE			•
		oss amounts unless otherwise indicated.		siness income	Excluded by secti	on 512, 513, or 514	(e)
	J		(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.
1	Pro	gram service revenue:	Dusiness code	Amount	LACIDSION CODE	Amount	(See instructions.
	а						
	b						
	C				<del></del>		
	ď				· · · · · · · · · · · · · · · · · · ·	·····	
	e			·- ·-			
	f				<del> </del>		
	٠.				ļ		
_	_	Fees and contracts from government agencies			ļ		<del></del>
2		mbership dues and assessments			<del> </del>		
3		rest on savings and temporary cash investments					
4		dends and interest from securities		<del></del>			
5		rental income or (loss) from real estate:		···	ļ		
		Debt-financed property					
		Not debt-financed property		· · · · · · · · · · · · · · · · · · ·			
6	Net	rental income or (loss) from personal property					
7	Oth	er investment income					
8	Gair	or (loss) from sales of assets other than inventory				-	
9	Net	income or (loss) from special events					
10		ss profit or (loss) from sales of inventory					<u> </u>
11	Oth	er revenue: a	-				
	b						
	c						
	ď	, , , , , , , , , , , , , , , , , , , ,		· - · - · - · · - · · · · · · · · · · ·			
	e .						
12	Sub	total Add columns (b) (d) and (a)			l I		
		total. Add columns (b), (d), and (e)			L	12	
13	Tota	al. Add line 12, columns (b), (d), and (e)			<u> </u>	13	
<b>13</b> (See	Tota work	al. Add line 12, columns (b), (d), and (e)	 s.)				ICARLE
13 (See Par	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
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13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV No.	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	s.) ccomplishme	ent of Exemp	t Purposes	NOT APPL	

		Exempt O	rganizations							
1	in se			ly engage in any of the fo in section 501(c)(3) organ					Yes	No
а	Tran	sfers from the re	porting foundation	to a noncharitable exen	npt organizatio	n of:		1	l	i
	(1) (	Cash						1a(1)		✓
	(2)	Other assets .						1a(2)		✓
b	Othe	er transactions:						1		ĺ
				xempt organization .				1b(1)		✓
				ritable exempt organizati	on			1b(2)		✓
			, equipment, or ot					1b(3)	_	✓
			-					1b(4)		✓
		oans or loan gua						1b(5)	-	✓
				ship or fundraising solici				1b(6)		<b>√</b>
C .				lists, other assets, or pa				1c	لــــا	✓
d				res," complete the follow relices given by the repor						
				ngement, show in colum						
(a) Line		(b) Amount involved		ncharitable exempt organization			rs, transactions, and sl			
(a) Line	-	(b) Amount involved	(c) Name of no	ichantable exempt organization	(u) Desc	inplion or transfe	is, transactions, and si	iailiy ari	angeme	
							<del> </del>	· · · · · · · ·		
			<del></del>	······································	<del></del>	<del></del>				
	$\dashv$			··	<del></del>					
					_ <del></del>		<del></del>			
	$\neg$	<del></del>	<del></del>	<del></del>						
						<u>-</u>				
						·				
						<u>-</u> -				
	desc	ribed in section 5		affiliated with, or related (other than section 501(de.			· ·	Yes	<b>√</b> 1	<b>10</b>
		(a) Name of organi	<del></del> _	(b) Type of organ	ization		c) Description of relation	nship		
				ned this return, including accompa than taxpayer) is based on all infor				dge and b	elief, it i	s true,
Sign	Corre	A A	Jacon Office and Collect	alan tapayer) is based of tall line.	Madon of Willon prep	arci nas any mov	May the	RS discus		
lere	7	Value	Japles	4/3/12	TRUSTEE/DI	RECTOR		preparer s ictions)? [		
	Sign	ature of officer or trus		Date /	Title	16	<u>L</u>			
Paid		Print/Type preparer's	s name	Preparer's signature		Date	Check [_] if [	PTIN		
repa	rer					<del></del>	self-employed			
Jse C	nly	Firm's name			<del></del>		Firm's EiN ►			
		Firm's address >					Phone no			

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

## Schedule B

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

► 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.

OMB No. 1545-0047

Name of the organization		Employer identification number				
PROTEIN FOUNDATION 06-1046591						
Organization type (check o	ne):					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private for	undation				
	527 political organization					
	, ,					
Form 990-PF	√ 501(c)(3) exempt private foundation					
7 31111 333 7 1	- os Hollo sysmete humans is a management					
	4947(a)(1) nonexempt charitable trust treated as a private founda	ation				
	= 40-11(a)(1) Horioxompt orialization tradition as a private rounds					
	501(c)(3) taxable private foundation					
	50 1(0)(0) taxable private roundation					
Chack if your organization in	covered by the General Rule or a Special Rule.					
· · · · · · · · · · · · · · · · · · ·	•					
	7), (8), or (10) organization can check boxes for both the General Rule a	and a Special Hule. See				
instructions.						
General Rule						
	filing Form 990, 990-EZ, or 990-PF that received, during the year, conf					
,	or property) from any one contributor. Complete Parts I and II. See instr	ructions for determining a				
contributor's total c	ontributions.					
Special Rules						
☐ For an organization	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 3	31/3 % support test of the				
regulations under se	ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 99	00 or 990-EZ), Part II, line				
	that received from any one contributor, during the year, total contribu					
\$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				
	he year, total contributions of more than \$1,000 exclusively for religious					
	al purposes, or for the prevention of cruelty to children or animals. Con					
• •		•				
☐ For an organization	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ tha	t received from any ane				
	he year, contributions exclusively for religious, charitable, etc., purpose					
	I more than \$1,000. If this box is checked, enter here the total contribu					
	n exclusively religious, charitable, etc., purpose. Do not complete any of					
totaling \$5,000 or we	es to this organization because it received nonexclusively religious, cha	ntable, etc., contributions				
totaling \$5,000 or m	ore during the year	· <b>&gt;</b> \$				
Once the second	Character and the the Organic Bulk. 17, 17, 10, 11, 12, 13	(I) O.I. I.I. D.E. 222				
	t is not covered by the General Rule and/or the Special Rules does not					
990-EZ, or 990-PF), Dut it mu	st answer "No" on Part IV, line 2, of its Form 990; or check the box on	IIIIe ri ot its form 990-EZ or on its				

Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Employer identification number PROTEIN FOUNDATION 06-1046591

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) . Type of contribution
1	HOUSE OF FLAVORS  110 NORTH WILLIAM STREET  LUDINGTON, MICHIGAN 49431	\$\$	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
(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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 3 Name of organization Employer identification number **PROTEIN FOUNDATION** 06-1046591 Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. NONE Part II (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) **FMV** (or estimate) from Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions)

(a) No.

from

Part I

(b)

Description of noncash property given

(d)

Date received

(c)

FMV (or estimate)

(see instructions)

<u> </u>	PROTEIN FOUNDATION SCHEDULE IN SUPPORT OF FORM PF990 2014	0	06-1046591		
	Part VIII list of officers, directors, trustees, etc <u>col a</u>	col b title	2 00	col d benefits	<u>a loo</u>
	NAME AND ADDRESS	hours/wk	comb.	& def. comp.	exp. accts.
	1 Walter Baker, 10 Weston Hill Rd, Riverside, CT 06878	Trustee/2	0	0	0
	2 Carol Fuchella, 56 lvy Street, Greenwich, CT 06830	Trustee/7	0	0	0
	3 Whit Gallagher, 7 Boxwood Drive, Yarmouth, ME 04096	Trustee/10	0	0	0
	4 Stephen Lanfer, 178 Sea Meadow, Yarmouth, ME 04096	Trustee/14	0	0	0
	5 Dale McClinton, 137 Last Resort Terrace, Black Mountain, NC 28711	Trustee/1	0	0	0
	6 Ralph Rogers, 8 Pine Road, Cumberland Foreside, ME 04110	Trustee/40	0	0	0
	7 Frank Starvel, 6 Gisborne Place, Old Greenwich, CT 06870	Trustee/14	0	0	0
	8 Matthew Owen, 35 Fieldstone Drive, Yarmouth, ME 04096	Managing Dir/40	85,833	27,770	0

06-1046591			
PROTEIN FOUNDATION	SCHEDULE IN SUPPORT OF FORM PF990 2014	Part X Line 4 Explanation of "cash deemed held for charitable purpose"	

The amount of cash deemed held for charitable purpose of \$46,810 is payable pursuant to an employment contract to the Managing Director for Salary and Benefits during 2015.

06-1046591	\$ 3,446	\$ 6,630	\$ 395	824	1,300	418	\$ 2,937
PROTEIN FOUNDATION SCHEDULE IN SUPPORT OF FORM PF990 2014	Part I Line 16A Legal fees for general matters	Part I Line 18 Payroll taxes for Employer Social Security and Medicare expense	Part I Line 23 - Other Exp Payroll Service	Insurance Premium	Association Dues	Office Supply	Total Line 23