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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

▶ 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

For	calend	dar year 2014 or tax year beginning	, 2014	, and ending	9		, 20
Na	me of f	oundation			A Employer	identification number	
P	OND E	FAMILY FOUNDATION			20-1131	673	
N	ımber a	and street (or P O box number if mail is not delivered to street address)		Room/suite	B Telephone	number (see instructions)
C,	/o K	IRK POND TREAS 3 CANTER LANE			(207)76	7-4421	
Cı	ty or tov	wn, state or province, country, and ZIP or foreign postal code			C If exempts	on application is pending,	check here
C	APE I	ELIZABETH, ME 04107				, , 3 .	<u></u>
G	heck a	all that apply Initial return Initial return	of a former public cha	arity	D 1. Foreigr	n organizations, check he	re▶
		Final return Amended ret	turn				
		Address change Name change	e			n organizations meeting the here and attach computat	
н	heck t	type of organization: X Section 501(c)(3) exempt priva	ate foundation		1	oundation status was terr	
	Secti	<u>—</u> — —	axable private founda	ation		07(b)(1)(A), check here	
I F		rket value of all assets at J Accounting method:	X Cash	Accrual	F If the four	dation is in a 60-month te	rmination
e	end of y	vear (from Part II, col. (c), Other (specify)				tion 507(b)(1)(B), check h	
łı	ne 16)	▶ \$ 4,933,075 (Part I, column (d) must be	e on cash basis.)		ļ		
Pa	rt I	Analysis of Revenue and Expenses (The total of	(a) Davisson and				(d) Disbursements
	سسبب	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for charitable purposes
		the amounts in column (a) (see instructions))	books		come	income	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	81,10	0			
	2	Check ▶ ☐ If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	96,09	4	96,094	 -	
	5a	Gross rents					
	ь	Net rental income or (loss)		-			
ø	6a	Net gain or (loss) from sale of assets not on line 10	277,66	3			/
Revenue	ь	Gross sales price for all assets on line 6a 405,564		:		DECE	/ED
Ķ	7	Capital gain net income (from Part IV, line 2)			277,663		VLE
8	8	Net short-term capital gain				ιņ	8
	9	Income modifications				高 MAY 0 4	2015
	10a	Gross sales less returns and allowances					82
	ь	Less Cost of goods sold				MAN	
	С	Gross profit or (loss) (attach schedule)	_				O. C.
	11	Other income (attach schedule) STM1.06	8	88	88		- ⁻
	12	Total. Add lines 1 through 11	454,94	5	373,845		, <u>, , , , , , , , , , , , , , , , , , </u>
	13	Compensation of officers, directors, trustees, etc	35,00	0	14,000		21,000
es	14	Other employee salanes and wages					
seuses	15	Pension plans, employee benefits					
	16a	Legal fees (attach schedule) STM107	1,82	24	1,368		456
<u>D</u> û	b	Accounting fees (attach schedule)					
Z.≥	С	Other professional fees (attach schedule)					
a t	17	Interest					
⊃ĭ≅	18	Taxes (attach schedule) (see instructions) STM110	4,85	51	4,851		
ᆤ	19	Depreciation (attach schedule) and depletion					
₹	20	Occupancy					
्रह	21	Travel, conferences, and meetings					
SCANNEL MAY 0 / 2013 Operating and Administrative Ex	22	Printing and publications		70			70
₹Ē	23	Other expenses (attach schedule) STM103	12,59	97	12,562		35
Z E	24	Total operating and administrative expenses.					
ڲۊ		Add lines 13 through 23	54,34		32,781		21,561
4 <i>5</i> 0	25	Contributions, gifts, grants paid	224,75	3 ::			224,753 ·
_	26	Total expenses and disbursements. Add lines 24 and 25 .	279,09	5	32,781		246,314 ·
	27	Subtract line 26 from line 12				·	
	a	Excess of revenue over expenses and disbursements .	175,85	50			
	ь	Net investment income (if negative, enter -0-)			341,064		‡
	С	Adjusted net income (If negative, enter -0-)					

P:	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End of ye	ear
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1 1 、	Cash - non-interest-bearing	1,294	14,	599	14,599
	2	Savings and temporary cash investments	177,238	394,	775	394,775
	3	Accounts receivable ▶		-		
		Less allowance for doubtful accounts ▶	1		1	
	4	Pledges receivable	-			
		Less¹ allowance for doubtful accounts ▶	1		ì	
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other		 		
	"	disqualified persons (attach schedule) (see instructions)				
	7					······································
	′	Other notes and loans receivable (attach schedule)	Ŧ		1	
Ø	١.	Less: allowance for doubtful accounts				
Assets	8	Inventories for sale or use				
Ą	9	Prepaid expenses and deferred charges				
•	1	Investments - U.S and state government obligations (attach schedule)				
	1	Investments - corporate stock (attach schedule) STM137	2,015,430	1,871,	661	4,043,147
	C	Investments - corporate bonds (attach schedule) STM138	503,339	476,	544	480,554
	11	Investments - land, buildings, and equipment basis	‡			
		Less accumulated depreciation (attach schedule)			İ	
	12	Investments - mortgage loans				
	13	Investments - other (attach schedule)				
	14	Land, buildings, and equipment: basis	-			
		Less accumulated depreciation (attach schedule)			Ī	
	15	Other assets (describe ▶				
	16	Total assets (to be completed by all filers - see the				
		ınstructions. Also, see page 1, item l)	2,697,301	2,757,	579	4,933,075
	17	Accounts payable and accrued expenses				
	18	Grants payable				
Liabilities	19	Deferred revenue				
=	20	Loans from officers, directors, trustees, and other disqualified persons				
ap	21	Mortgages and other notes payable (attach schedule)				
J	22	Other held to a fall of the second	· · · · · · · · · · · · · · · · · · ·			
	23	Total liabilities (add lines 17 through 22)	0		0	
		Foundations that follow SFAS 117, check here X			-	
S		and complete lines 24 through 26 and lines 30 and 31.				
alances	24	Unrestricted	2,697,301	2,757,	570	
a	25	Temporarily restricted	2,037,301	2,131,	373	
Ва	26	Permanently restricted				
or Fund B	20	Foundations that do not follow SFAS 117, check here				
בֿ						
7	27	and complete lines 27 through 31.				
ts (27	Capital stock, trust principal, or current funds				
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
As	29	Retained earnings, accumulated income, endowment, or other funds				
Net	30	Total net assets or fund balances (see instructions)	2,697,301	2,757,	579	
Z	31	Total liabilities and net assets/fund balances (see				
	4 989	instructions)	2,697,301	2,757,	579	······································
	rt II					
		net assets or fund balances at beginning of year - Part II, column (a), line 3	, •			
		f-year figure reported on pnor year's return)			1	2,697,301
		amount from Part I, line 27a			2	175,850
					3	
		nes 1, 2, and 3	• • • • • • • • • • • • • • • • • • • •		4	2,873,151
		eases not included in line 2 (itemize) STM116			5	115,572
	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30		6	2,757,579
FFΔ						Form 990-PF (2014)

		FAMILY FOUNDATION	-44 1			20-11	31673 Page 3
		d Losses for Tax on Inves	stment Income				
		he kind(s) of property sold (e g,real es use, or common stock, 200 shs MLC C		(b) How acquired P-Purchase D-Donation	(c) Date ad (mo., da		(d) Date sold (mo , day, yr)
1a	REPORTED BY HM PAY	SON MANAGED ACCT		P	10-02-2	2006	12-17-2014
ь	REPORTED ON HM PAY	SON NOMMNGD ACCT		D	02-16-2	2000	12-05-2014
С							
d							
_ е							
	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale						in or (loss) (f) minus (g)
a	147,012			126,026			20,986
b	258,552			1,875			256,677
С							
d							
e							
	Complete only for assets showing	g gain in column (h) and owned by t	the foundation on 1	2/31/69	m	Gains (Co	ol (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (j)			k), but no	t less than -0-) or from col (h))
а							20,986
b							256,677
c							
d							
e					1		
2 (Capital gain net income or (net ca	anital loss) 🕻 -	o enter in Part I, line nter -0- in Part I, line	>	2		277,663
3 1	Net short-term capital gain or (los	s) as defined in sections 1222(5) a	ınd (6):				
ŀ	f gaın, also enter in Part I, line 8,	column (c) (see instructions) If (los	ss), enter -0- ın	3			
					3		
Pa	rt V Qualification Und	ler Section 4940(e) for Re	duced Tax on	Net Investme	ent Incor	ne	
(For	optional use by domestic private	foundations subject to the section	4940(a) tax on net i	nvestment incom	e)		
If sec	ction 4940(d)(2) applies, leave th	is part blank.					
		·					
		ion 4942 tax on the distributable am		the base period?			Yes X No
		ify under section 4940(e) Do not co					
<u>1</u> E		each column for each year, see the	instructions before	making any entri	es.		(4)
C	(a) Base period years alendar year (or tax year beginning ir	(b) Adjusted qualifying distributions	Net value of n	(c) oncharitable-use as	sets	Dist (col (b)	(d) ribution ratio divided by col (c))
	2013	172,90	09	4,069,9	22		. 042485
	2012	136,4	17	3,709,1	.33	0 .	. 036779
	2011	157,10	04	3,436,1	.46	0.	. 045721
	2010	162,0	88	3,042,2	50	0.	. 053279
	2009	136,3	79	2,406,1	.75	0.	056679
	Total of line 1, column (d)				. 2	0.	. 234942
•					· • 	i — —	
	•	5-year base penod - divide the total	on line 2 by 5, or b	y the			
	•		on line 2 by 5, or b	y the		0.	. 046988
r	number of years the foundation h	5-year base penod - divide the total as been in existence if less than 5 y	l on line 2 by 5, or b years	y the	. 3	0.	. 046988
r	number of years the foundation h	5-year base penod - divide the total	l on line 2 by 5, or b years	y the	. 3	0.	4,666,870
r	number of years the foundation h	5-year base penod - divide the total as been in existence if less than 5 y	l on line 2 by 5, or b years	y the	. 3	0.	
4 E	number of years the foundation h	5-year base penod - divide the total as been in existence if less than 5 y	l on line 2 by 5, or b years (, line 5	y the 	3	0.	
4 E	number of years the foundation he net value of noncharital Multiply line 4 by line 3	5-year base penod - divide the total as been in existence if less than 5 yole-use assets for 2014 from Part X	l on line 2 by 5, or b years (, line 5	y the	4 5	0.	4,666,870
4 E	number of years the foundation he net value of noncharital Multiply line 4 by line 3	5-year base penod - divide the total as been in existence if less than 5 yole-use assets for 2014 from Part X	l on line 2 by 5, or b years (, line 5	y the	4 5	0.	4,666,870 219,287
4 E 5 M	number of years the foundation he number of years the foundation he net value of noncharital Multiply line 4 by line 3	5-year base penod - divide the total as been in existence if less than 5 yole-use assets for 2014 from Part X	l on line 2 by 5, or b years (, line 5	y the	. 4	0.	4,666,870 219,287
4 E 5 M 6 E 7 A	number of years the foundation he number of years the foundation he net value of noncharital Multiply line 4 by line 3	5-year base penod - divide the total as been in existence if less than 5 yole-use assets for 2014 from Part X	l on line 2 by 5, or b years (, line 5	y the	. 3 . 4 . 5 . 6	0.	4,666,870 219,287 3,411

	990-PF (2014) POND FAMILY FOUNDATION 20-113:			age 4			
Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	structi	ons)				
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		3	,411			
	here ► X and enter 1% of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of						
	Part I, line 12, col. (b).						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . 2			0			
3	Add lines 1 and 2		3	,411			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . 4			0			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5		3	,411			
6	Credits/Payments						
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 3,564						
b	Exempt foreign organizations - tax withheld at source 6b						
C	Tax paid with application for extension of time to file (Form 8868) 6c						
d	Backup withholding erroneously withheld 6d						
7	Total credits and payments. Add lines 6a through 6d		3	,564			
8	Enter any penalty for underpayment of estimated tax. Check here						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed						
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			153			
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 153 Refunded ▶ 11						
Par	t VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		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							
	Instructions for the definition)?						
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			X			
	published or distributed by the foundation in connection with the activities						
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:						
	(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		Ī				
	on foundation managers. • \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х			
	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of						
	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		Х			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х			
	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		Ī				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		Ī				
	conflict with the state law remain in the governing instrument?	6	X	ĺ			
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	X	_			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		 				
	ME		1				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		Ī				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		 				
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"	1	1				
	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		x			

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POND FAMILY FOUNDATION

Pai	t VII-B Statements Regarding Activitie	es for V	Which Forr	n 4720	May Be	Requi	red (continued)			
5a	Dunng the year did the foundation pay or incur any an	nount to:				_				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No									
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,									
	directly or indirectly, any voter registration drive?									
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No									
	(4) Provide a grant to an organization other than a chantable, etc., organization described in									
section 4945(d)(4)(A)? (see instructions)										
	(5) Provide for any purpose other than religious, chantable, scientific, literary, or educational									
	purposes, or for the prevention of cruelty to children or animals?									
b										
	Regulations section 53.4945 or in a current notice reg	ardıng dı	saster assistar	ice (see	instructions)	?	<u></u>	5b		
	Organizations relying on a current notice regarding dis	saster as	sistance check	here			▶ 📙			
C	If the answer is "Yes" to question 5a(4), does the four	dation cl	aım exemption	from the	e tax	_				
	because it maintained expenditure responsibility for the	e grant?				[Yes No			
	If "Yes," attach the statement required by Regulations	section (53.4945-5(d).							
6a	Did the foundation, during the year, receive any funds	, directly	or indirectly, to	pay pre	emiums	-				
	on a personal benefit contract?					[Yes X No	1 1		
b	Did the foundation, during the year, pay premiums, dir	ectly or II	ndirectly, on a	persona	l benefit cont	ract?		6b	X	
	If "Yes" to 6b, file Form 8870.					-				
	At any time during the tax year, was the foundation a	•	•			L	Yes X No	1 1		
	If "Yes," did the foundation receive any proceeds or ha							7b		
Pai	t VIII Information About Officers, Dire	ectors,	Trustees,	Found	dation Ma	nager	s, Highly Paid	Emplo	yees,	
	and Contractors									
1 L	ist all officers, directors, trustees, foundation mana	•					0			
	(a) Name and address	hour	e, and average 's per week	` (If n	mpensation ot paid,	emple	Contributions to byee benefit plans		nse account, llowances	
	990_OFOV	 	ed to position	en	ter -0-)	and def	erred compensation			
	ST. JOHN POND	PRESI	DENT AND I	P						
	ANTER LANE, CAPE ELIZ., ME 04107	<u> </u>	14.00		35,000		0		0	
	C POND	TREAS	URER AND I	2				^		
-	ANTER LANE, CAPE ELIZ., ME 04107	2222	1.00		0		0		0	
	POND	DIREC'			0		o		0	
	JPLAND ROAD, NEWTON, MA 02468 L POND	DIREC'	0.20				U		<u> </u>	
	ARBORSIDE DR, FALMOUTH, ME 04105	DIREC.	0.20		0		0		0	
	Compensation of five highest-paid employees (othe	r than th		on line		uctions)			<u> </u>	
	NONE."	i tilali til	ose included		1 - 366 msu	u Ctions,	. Il lione, enter			
							(d) Contributions to			
	(a) Name and address of each employee paid more than \$50	.000	(b) Title, and a hours per w		(c) Comper	nsation	employee benefit		nse account, llowances	
	(,,		devoted to po		(0, 00		plans and deferred compensation	otner a	llowances	
NON										
									_	
Γota	number of other employees paid over \$50,000						. •		0	

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Part VIII Information About Officers, Directors, Trustees, Foun and Contractors (continued)	dation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional services (see instru	uctions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		-
	 	
		
	1	
otal 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 statistic organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1		
2		
3		
4		
D. A.W.D. Community of D. Indeed Investments (see instance)	ations)	
Part IX-B Summary of Program-Related Investments (see instru		Amount
Describe the two largest program-related investments made by the foundation during the tax year of N/A	Times 1 and 2	Amount
,,		
2		
All other program-related investments See instructions		·
3		
Total. Add lines 1 through 3		Form 990-PF (20
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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign	found	lations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	4,598,055
b	Average of monthly cash balances	1b	139,884
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	4,737,939
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	0
3	Subtract line 2 from line 1d	3	4,737,939
4	Cash deemed held for chantable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	71,069
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,666,870
6	Minimum investment return. Enter 5% of line 5	6	233,344
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	ounda	tions
	and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	233,344
2a	Tax on investment income for 2014 from Part VI, line 5 2a 3,411		
b	Income tax for 2014. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	3,411
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	229,933
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	229,933
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	229,933
Dai			
	TEXIL 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	246,314
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 chantable projects that satisfy the:		
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	246,314
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	3,411
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	242,903
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	founda	ation
	qualifies for the section 4940(e) reduction of tax in those years.	_	

20-1131673

Form 990-PF (2014) POND FAMILY FOUNDATION

Part XIII Undistributed Income (see instructions)

1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years pnor to 2013	(c) 2013	(d) 2014
	line 7				229,933
2	Undistributed income, if any, as of the end of 2014:				
а	Enter amount for 2013 only		5	13,936	
þ	Total for pnor years.				
3	Excess distributions carryover, if any, to 2014:		-		•
а	From 2009		1	1	
b	From 2010		I	1	
С	From 2011		1	1	
d	From 2012		1	1	
е	From 2013		•		
f	Total of lines 3a through e	1			
4	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶\$ 246,314		1		
а	Applied to 2013, but not more than line 2a		j	13,936	
	Applied to undistributed income of prior years				
_	(Election required - see instructions)				
c	Treated as distributions out of corpus (Election			***************************************	
Ū	required - see instructions)		‡		
А	Applied to 2014 distributable amount		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		229,933
e	Remaining amount distributed out of corpus	2,445			
5	Excess distributions carryover applied to 2014 .	-/3			
•	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)			1	
6	Enter the net total of each column as				
•	indicated below:			1	
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5 .	2,445	1	1	
-	Prior years' undistributed income Subtract	2,113			
D	line 4b from line 2b				
_	Enter the amount of prior years' undistributed				.,
C					
	income for which a notice of deficiency has been issued, or on which the section 4942(a)			1	
	tax has been previously assessed			1	
	· • • • • • • • • • • • • • • • • • • •				
a	Subtract line 6c from line 6b Taxable			1	
	amount - see instructions				
е	Undistributed income for 2013. Subtract line				
	4a from line 2a Taxable amount - see				
,	Instructions				
f	Undistributed income for 2014. Subtract lines	1	-		
	4d and 5 from line 1. This amount must be		1		^
_	distributed in 2015			····	
7	Amounts treated as distributions out of corpus		#	1	
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be			1	
_	required - see instructions)			·····	
8	Excess distributions carryover from 2009 not		1		
_	applied on line 5 or line 7 (see instructions)			····	
9	Excess distributions carryover to 2015.		1.	Į	
	Subtract lines 7 and 8 from line 6a	2,445		····	
10	Analysis of line 9		·:	1	
а	Excess from 2010				
b	Excess from 2011				
C	Excess from 2012			#	
d	Excess from 2013		: · · · · · · · · · · · · · · · · · · ·		
۵	Excess from 2014 2 . 445	1		ŧ	

NONE,

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

990APP

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, chantable fields, kinds of institutions, or other factors.

Form 990-PF (2014)

EEA

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor						
a Paid during the year	-						
CONGRGATION BET HA'AM							
81 WESTBROOK STREET							
SOUTH PORTLAND, ME 04106		PC	GENERAL	3,000			
							
CAPE ELIZ. CHURCH OF LATTER DAY STS							
29 OCEAN HOUSE ROAD							
CAPE ELIZABETH, ME 04107		PC	GENERAL	3,000			
CAPE ELIZ. CHURCH OF THE NAZARENE							
499 OCEAN HOUSE RD							
CAPE ELIZABETH, ME 04107		PC	GENERAL	3,000			
CALL DITABLES, ME 04107		•	GENERALI	3,000			
CAPE ELIZ. UNITED METHODIST CHURCH							
280 OCEAN HOUSE RD							
CAPE ELIZABETH, ME 04107		PC	GENERAL	3,500			
COMMUNITY/WAYFINDER SCHOOLS							
79 WASHINGTON ST							
CAMDEN, ME 04843		PC	GENERAL	2,000			
HIDGE GOVERNMENTS GUIDAN HAG			4 4				
FIRST CONGREGATIONAL CHURCH, UCC			1. GENERAL				
301 COTTAGE RD		20	2. PILGRIM LODGE	20.000			
SOUTH PORTLAND, ME 04107		PC	CAMPAIGN	30,000			
LAMDA CHI ALPHA FOUNDATION							
11711 N PENNSYLVANIA ST							
CARMEL, IN 46032-6959		PC	GENERAL	42,000			
MAINE BEHAVIORAL HEALTH							
49 OAK STREET							
AUGUSTA, ME 04330		PC	GENERAL	50,000			
Total	<u> </u>		▶ 3a				
b Approved for future payment	1	<u> </u>					
, , , , , , , , , , , , , , , , , , ,							
		i					
Total		<u>.</u>	<u>.</u> . <u> ▶ </u> _ 3b _				

20-1131673

Part XV Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Recipient Purpose of grant or status of recipient Amount contribution any foundation manager Name and address (home or business) or substantial contributor a Paid during the year MAINE CANCER FOUNDATION PO BOX 553 GENERAL 11,500 PC PORTLAND, ME 04112 MAINE CONF UNITED CHURCH OF CHRIST 1 WESTON ST GENERAL 5,000 AUGUSTA, ME 04330 PC MAINE MEDICAL CENTER 22 BRAMHALL ST 20,000 PORTLAND, ME 04101 PC **GENERAL** MEADOWBROOK SCHOOL 51 WEST ST PC **GENERAL** 3,000 FREEPORT, ME 04032 PEOPLE'S UNITED METHODIST CHURCH 310 BROADWAY PC GENERAL 3,000 SOUTH PORTLAND, ME 04106 PORTLAND BALLET 517 FOREST AVE GENERAL 500 PORTLAND, ME 04101 PC PORTLAND STAGE COMPANY 25 FOREST AVE 500 PC GENERAL PORTLAND, ME 04101 REEDY CREEK MIDDLE SCHOOL 110 CORNING RD 1,500 PC **GENERAL** CARY, NC 27518 Approved for future payment 3b Total

20-1131673

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	Toopion		_			
a Paid during the year							
RONALD MCDONALD HOUSE							
250 BRACKETT ST			d d d d d d d d d d d d d d d d d d d	1 750			
PORTLAND, ME 04102		PC	GENERAL	1,750			
SAD 60							
21 MAIN ST							
NORTH BERWICK, ME 03906		PC	GENERAL	1,003			
ST BARTHOLOMEW CHURCH							
8 TWO LIGHTS ROAD							
CAPE ELIZABETH, ME 04107		PC	GENERAL	3,000			
SERVICES FOR THE UNDERSERVED							
305 SEVENTH AVE, 10TH FL							
NEW YORK, NY 10001		PC	GENERAL	1,500			
SHALOM HOUSE							
106 GILMAN ST							
PORTLAND, ME 04102		PC	GENERAL	1,500			
SOUTH PORTLAND HIGH SCHOOL							
637 HIGHLAND AVE			DOLLARS FOR				
SOUTH PORTLAND, ME 04106		PC	SCHOLARS	500			
COUMURDY WATER ACRES ON ACTIC							
SOUTHERN MAINE AGENCY ON AGING 136 US ROUTE 1			-				
SCARBOROUGH, ME 04074		PC	GENERAL	2,000			
benediction, and older				_,,,,,			
SOUTHERN MAINE HEALTH CARE AUXILIAR							
1 MEDICAL CENTER DRIVE							
BIDDEFORD, ME 04005		PC	GENERAL	1,000			
Total		<u> </u>					
b Approved for future payment							
Total		1	> 3b	 			
<u>Total</u>	<u></u>	<u></u>					

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	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 or business)	or substantial contributor	recipient						
a Paid during the year								
SPRING HARBOR HOSPITAL								
123 ANDOVER RD			1. SIGNS OF					
WESTBROOK, ME 04092		PC	HOPE	14,000				
				-				
ST ALBANS CHURCH								
885 SHORE RD								
CAPE ELIZABETH, ME 04107		PC	GENERAL	3,000				
STRIVE								
28 FODEN RD								
SOUTH PORTLAND, ME 04106			GENERAL	500				
UNIV OF ARKANSAS								
1 UNIV OF ARKANSAS			ACCESS ARKANSAS					
FAYETTEVILLE, AR 72701-9980		PC	SCHOLARSHIP	12,000				
FAMILY HOPE								
PO BOX 1385								
SCARBOROUGH, ME 04070-1385		PC	GENERAL	1,500				
Total			▶ 3a	224,753				
b Approved for future payment								
		<u></u>						
Total		<u> </u>						

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by sect	(e) Related or exempt	
4. December account revenue	(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
1 Program service revenue a	code				
			-		
			 		
		<u>-</u>	1		
e				_	
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments .					
4 Dividends and interest from securities			14	96,094	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			14	88	···
8 Gain or (loss) from sales of assets other than inventory			18	277,663	
9 Net income or (loss) from special events			_		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a			 		
b			1		
c			+		
d			+		
e	-		-	272 045	
12 Subtotal. Add columns (b), (d), and (e)				373,845	373,84
See worksheet in line 13 instructions to venfy calculations)		.			3,3,01
Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	ome is reported	l ın column (e) of	Part XVI-A contribu	ited importantly to the	
accomplishment of the foundation's exempt p	diposes (other	ulait by providing	, runus for such pur		
					· <u> </u>
	.				<u>-</u>
		· · ·			
	·				
	-				
					
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				<u>.</u>	
				· · · · · · · · · · · · · · · · · · ·	
<u> </u>					
	-			·	
	-				

Portland ME 04101

Par	t XVII•		n Regarding Tr ganizations	ansfers To and Transa	ctions ar	nd Relation	ships Wit	h Nonchari	itable	
1	Did the or	rganization dire	ctly or indirectly enga	ge in any of the following with	any other or	anization desc	nbed	: .	Yes	No
				ion 501(c)(3) organizations) or	-					1
	organizati		·	, , , ,					Ī	
а	Transfers	from the repor	ting foundation to a ne	onchantable exempt organizati	on of:			<u> </u>	1	
	(1) Cash							1a(1	ı)Î	X
										Х
b		nsactions:							1	
	(1) Sales	of assets to a	noncharitable exemp	t organization				1b(1	ı) [†]	X
				e exempt organization					2)	Х
	(3) Renta	al of facilities, e	quipment, or other as	sets				1b(3	3)	Х
	(4) Reimi	bursement arra	ngements					1b(4	()	Х
									5)	Х
				or fundraising solicitations .					j)	Х
				other assets, or paid employees						Х
				mplete the following schedule		hould always s	how the fair	market		
				given by the reporting foundation						
				ent, show in column (d) the valu						
(a) Lin		Amount involved		charitable exempt organization	1			ns, and sharing ai	rrangeme	ents
-						•		<u> </u>		
						•				
			-							
								· · · · · · · · · · · · · · · · · · ·		
										
				 ·						
										
-										
	described	I in section 501	(c) of the Code (other	with, or related to, one or more than section 501(c)(3)) or in s	•	organizations		Y	'es X] No
<u>b</u>			lowing schedule	ALV Transport		T	/-\ D :	· ·		
		a) Name of orgar	nization	(b) Type of organizati	on	 	(c) Descriptio	n of relationship		
								-		
					·	 				
						 		·		
	Under n	enalties of penuiny I	declare that I have examin	ed this return, including accompanying	chedules and o	visioments, and to il	ha hast of my kn	outodge and bolief	it is this	
Sia	correct,	and complete Decl	aration of preparer (other th	ed this retum, including accompanying an taxpayer) is based on all information	of which prepar	er has any knowled	ne best of my kn lge	owledge and belief,	it is true,	
Sig		MA	. 0 1	Luladix				May the IRS discu		
Her		ature of officer and	road will	<u> </u>	. • <u></u>	ENT AND D	RECTOR	with the preparer s (see inst)?	shown belo	ow No
	Sign	nature of officer or		Dare /	Title	l north	r			
Paid	4	Print/Type prepar		Preparer's Signature	1	Date	Check	L PTIN		
		Michael J		JUK 1 H		04-15-201		nployed P0135	56119	
	parer	Firm's name		rd Gardner & Henry			irm's EIN			
Use	Only	Firm's address	► Ten Free St	treet /		F	Phone no			

207-775-7271

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

2014

Name	of the organization			Employer identification number
POND	FAMILY FOUNDATIO	N		20-1131673
Organ	ization type (check one):			
Filers	of:	Section:		
Form 9	990 or 990-EZ	501(c)() (enter number) organization	
		4947(a)(1) no	nexempt charitable trust not treated as a private foundation	
		527 political o	rganization	
Form 9	990-PF	∑ 501(c)(3) exe	mpt private foundation	
		4947(a)(1) no	nexempt charitable trust treated as a private foundation	
		501(c)(3) taxa	able private foundation	
Check	if your organization is cover	ered by the General	Rule or a Special Rule.	
Note.		8), or (10) organization	on can check boxes for both the General Rule and a Special F	Rule. See
Gener	al Rule			
X	•	perty) from any one	or 990-PF that received, during the year, contributions totaling contributor. Complete Parts I and II. See instructions for deter	
Specia	al Rules			
	regulations under section 13, 16a, or 16b, and that	ns 509(a)(1) and 170 received from any o	(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (b)(1)(A)(vı), that checked Schedule A (Form 990 or 990-EZ), one contributor, during the year, total contributions of the great 90, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Par	, Part II, line ter of (1)
	contributor, during the ye	ear, total contribution	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from s of more than \$1,000 exclusively for religious, chantable, science revention of cruelty to children or animals. Complete Parts I, II	entific,
	contributor, during the ye contributions totaled mor during the year for an ex- General Rule applies to	ear, contributions exc e than \$1,000 If this clusively religious, cl this organization bec	(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from clusively for religious, chantable, etc., purposes, but no such sbox is checked, enter here the total contributions that were rehantable, etc., purpose Do not complete any of the parts unlessause it received nonexclusively religious, charitable, etc., cor	eceived ess the ntributions
990-E	Z, or 990-PF), but it must a	answer "No" on Part	General Rule and/or the Special Rules does not file Schedule I IV, line 2, of its Form 990; or check the box on Tine H of its Fo meet the filing requirements of Schedule B (Form 990, 990-EZ	orm 990-EZ or on its

Name of organization
POND FAMILY FOUNDATION

Employer identification number 20 - 1131673

Part I	Contributors (see instructions). Use duplicate cop	ies of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KIRK POND 3 CANTER LANE CAPE ELIZABETH, ME 04107	\$\$	Person Dayroll Dayroll 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 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

Name of organization
POND FAMILY FOUNDATION

Employer identification number 20-1131673

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
1	5,000 SHS FAIRCHILD SEMICONDUCTOR	\$\$	07-18-2014
(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

List of Officers, Directors, Trustees, and Key Employees

1 List all officers, directors, trustees, and key employees for the	year even if they wer	e not compensated	•	
(a) Name and title	(b) Average	(c) Reportable compensation (Form W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
ERIN POND FRIEDLAND DIRECTOR				
1125 PARK AVE. APT. 11B, NY, NY 10128	0.20	o	o	0
1123 FARR AVE. AFT. 11B, NI, NI 10126	0.20			
			_	
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		Federal St	Federal Supporting Statements	nents	2014 PG 01	
Name(s) as shown on return POND FAMILY FOUNDATION					Your Social Security Number 20-1131673	umber
	FORM 990F	FORM 990PF, PART 1, LINE 16(/	LINE 16(A) - LEGAL FEES SCHEDULE	ULE	STATEMENT #107	
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE		
JENSEN BAIRD TOTALS	1,824	1,368	0 0	456		
					PG 01	
	FORM	990PF, PART I, LINE	FORM 990PF, PART I, LINE 18 - TAXES SCHEDULE		STATEMENT #110	-
DESCRIPTION IRS EXCISE TAX FOREIGN TAXES IRS ESTIMATED TAX PAYMENTS	REVENUE AND EXPENSES 856 431 3,564	NET INVESTMENT 856 431 3,564	ADJUSTED NET INCOME 0 0	CHARITABLE PURPOSE 0 0 0		
TOTALS	4,851	4,851	0	0		

POOK FANITY TOURDATION			Federal Su	leral Supporting Statements	nents	2014 PG 01
FORM 990PF, PART 1, LINE 23 - OTHER EXPENSES SCHEDULE REVENUE AND EXPENSES AND EXPE	Name(s) as shown on return POND FAMILY FOUNDATION					Your Social Security Number 20-1131673
Necessity Nece		FORM 990PF		OTHER EXPENSES SCHED	J.E.	STATEMENT #103
CORPORATE ANNUAL REPORT FEE 35 0 0 3 MBB LID SPANSID 12,488 12,488 0 0 MBB LID SPANSID 14 16 0 0 SERVICE CHARGE 12,597 12,562 0 0 FOTALS 12,597 12,562 0 0 FOTALS FORM 90DFF, PART I, LINE 11 - OTHER INCOME SCHEDULE REVENUE NET ADJUSTED HON-DIVIDEND DISTRIBUTIONS 88 0 FOTALS 88 0	DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE	
12,488 12,488 0 0 18 LTD SPUSRD ADR 60 60 0 SERVICE CHARGE 14 14 0 0 12,597 12,562 0 0 TOTALS 12,597 12,562 0 0 REVENUE NET 1, LINE 11 - OTHER INCOME SCHEDULE REVENUE NET ADJUSTED 0 TOTALS 88 88 0 0 TOTALS 88	CORPORATE ANNUAL REPORT FEE	35	0	0	35	
12,597 12,562 0	HM PAYSON MANAGEMENT FEES	12,488	12,488	0	0	
12,567 12,562 0	ABB LTD SPNSRD ADR	09	09	0	0	
FORM 990PF, PART I, LINE 11 - OTHER INCOME SCHEDULE REVENUE NET ADJUSTED DESCRIPTION AND EXPENSES INVESTMENT NET INCOME NON-DIVIDEND DISTRIBUTIONS 88 00 TOTALS 88 00 TOTALS 12,562 00 REVENUE NET ADJUSTED TOTALS 88 00 TOTALS 12,562 00 TOTALS 10,000 11 - OTHER INCOME SCHEDULE REVENUE NET INCOME SCHEDULE REVENUE NET INCOME SCHEDULE TOTALS 10,000 11 - OTHER INCOME SCHEDULE REVENUE NET INCOME SCHEDULE REVENUE	SERVICE CHARGE	14	14	0	0	
FORM 990PF, PART 1, REVENUE NON-DIVIDEND DISTRIBUTIONS SECRIPTION AND EXPENSES INVESTIBUTION TOTALS AND EXPENSES INVESTIBUTION AND EXPENSES INVESTIBUTION AND EXPENSES INVESTIBUTION AND EXPENSES	TOTALS	12,597	12,562	0	35	
REVENUE NET NON-DIVIDEND DISTRIBUTIONS 88 TOTALS 88 TOTALS 88					ı,	PG 01
DESCRIPTION AND EXPENSES INVESTMENT AND USTREBUTIONS AND EXPENSES INVESTMENT NET INCOME SEVENULE NET INCOME AND EXPENSES INVESTMENT NET INCOME AND EXPENSES INC		FORM 99.		- OIMEK INCOME SCHED	ULE	SIAIEMENI #100
TOTALS 88 88 88	DESCRIPTION NON-DIVIDEND DISTRIBUTIONS	REVENUE AND EXPENSES 88	NET INVESTMENT 88	ADJUSTED NET INCOME 0		
	TOTALS	88	88	0		
				i		

Federal Supporting Statements **2014** PG 01 Name(s) as shown on return POND FAMILY FOUNDATION 20-1131673 FORM 990PF, PART III, LINE 5 STATEMENT #116 OTHER DECREASES SCHEDULE SEE EXHIBIT A ATTACHED 115,572 TOTAL 115,572 PG 01 FORM 990PF, PART II, LINE 10(B)
INVESTMENTS: CORPORATE STOCK SCHEDULE STATEMENT #137 **CATEGORY** BOY BOOK VALUE EOY FMV HM PAYSON NON-MANAGED ACT COM 1,250 HMPAYSON MANAGED ACCT. COM/OTH 2,014,180 1,871,661 4,043,147 2,015,430 1,871,661 4,043,147 TOTALS FORM 990PF, PART II, LINE 10 (C) STATEMENT #138 PG 01 INVESTMENTS: CORPORATE BOND SCHEDULE **CATEGORY** BOY BOOK VALUE EOY FMV 503,339 476,544 480,554 HM PAYSON MANAGED ACT

503,339 476,544 480,554

TOTALS

EXHIBIT A THE POND FAMILY FOUNDATION E.I.N. 20-1131673 IRS FORM 990-PF TAXABLE YEAR ENDING DECEMBER 31, 2014

PART III, LINE 5: ANALYSIS OF CHANGES IN NET ASSETS OR FUND BALANCES

The Foundation was formed in 2004 as a Maine nonprofit corporation. During 2014 its founder, Kirk Pond, contributed appreciated publicly traded stock with the following date of gift value and Donor's cost basis:

Date of Gift	<u>Gift</u>	Date of Gift Value	Donor's Tax Cost Basis
	5000 shares – Fairchild Semiconductor common stock	\$81,100	\$625.00

The fair market value of this gift is reflected in Part 1 on Line 1. The Foundation sold these shares on 9/19/2014 and the gain from that sale of \$82,438 is reflected in Part 1 on Lines 6a and 7. Thus, an adjustment needs to be made in Part III (Analysis of Changes in Net Assets or Fund Balances) to address the double counting of this amount on Line 1 and Line 6a of Part I. The balance sheet adjustment for the donated stock is \$81,100 - \$625 cost basis which equals \$80,475. The net adjustment to the Changes in Net Assets or Fund Balances reflected on Line 5 of Part III is a decrease of \$115,572 which is the above adjustment of \$80,475.00 plus adjustments for dollar rounding and other book value adjustments reported by Foundation's investment manager, H.M. Payson in the attached e-mail dated April 13, 2015.

	Federal Supporting Statements	2014 PG 01
Name(s) as shown on return		Your Social Security Number
POND FAMILY	FOUNDATION	20-1131673

FORM 990PF, PART XV, LINE 2 APPLICATION SUBMISSION INFORMATION

GRANT PROGRAM

GENERAL

APPLICANT NAME

ANN ST. JOHN POND

ADDRESS

3 CANTER LANE

CAPE ELIZABETH, ME 04107

TELEPHONE

207-767-4421

EMAIL ADDRESS

NSTJOHN46@HOTMAIL.COM

FORM & CONTENT

THERE IS NO PRESCRIBED FORM IN WHICH THE APPLICATIONS SHOULD BE SUBMITTED. THE APPLICANT MUST SUBMIT MATERIALS REGARDING ITS IRS TAX EXEMPT STATUS AND EXPLAIN THE PURPOSE FOR THE REQUESTED GRANT.

SUBMISSION DEADLINE

NO SUBMISSION DEADLINE

RESTRICTIONS ON AWARD

THE FOUNDATION HAS LIMITED RESOURCES AND LIMITS GRANTS TO TAX EXEMPT ORGANIZATIONS WHICH QUALIFY AS PUBLIC CHARITIES.

2014 Tax Information Statement

POND FAMILY FOUNDATION Recipient's Name and Address: CAPE ELIZABETH, ME 04107 NON-MANAGED ACCOUNT 3 CANTER LANE 5940712225 XX-XXX1673 01-0420707 Z Account Number: Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: State:

1000 art 2nd TIN notice Corrected

ONE PORTLAND SQUARE P O BOX 31

PORTLAND, ME 04112

Payer's Name and Address:

H M PAYSON & CO

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated. Reported to the IRS is proceeds less commissions and option premiums.

Description of property (Box 1a)

CUSIP Number	Date Sold or Disposed	Date Acquired	Form 8949 Checkbox	Proceeds	Cost or Other Basis	Code if any	Adjustments	Net Gain or Loss	Federal income Tax Withheld	State Tax Withheld
	(Box 1c)	(Box 1b)		(Box 1d)	(Box 1e)	(Box 1f)	(Box 1g)		(Box 4)	(Box 16)
Long Term Sale 5000.0	Long Term Sales Reported on 1099-B 5000.0 FAIRCHILD SEMICON INTL	99-B CON INTL								
303726103	09/19/2014	09/19/2014 02/16/2000	ш. ::	83,062,66	625 00	:	0 0 0	82,437.66	00 0	0.00
10000.0	FAIRCHILD SEMICON INTL	CON INTL								
303726103		12/05/2014 02/16/2000		175,489.11	1,250.00	:	0.00	174,239.11	00.00	0.00
Total Long Tern	Total Long Term Sales Reported on 1099-B	n 1099-B		258,551.77	1,875.00		0.00	256,676.77	0.00	00 0
(

Report on Form 8949, Part II, with Box E checked



responsible for the accuracy of their own tax return.

Recipient's Name and Address: POND FAMILY FOUNDATION

MANAGED ACCOUNT

3 CANTER LANE

CAPE ELIZABETH, ME 04107

2014 Tax Information Statement

5990712211 XX-XXX1673 01-0420707 뿔 Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: Account Number: State:

2nd TIN notice

Corrected

ONE PORTLAND SQUARE P O BOX 31

PORTLAND, ME 04112

Payer's Name and Address:

H M PAYSON & CO

2014 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715 Reported to the IRS is proceeds less commissions and option premiums.

For noncovered securities (Box 5 is checked) shown on this statement, cost basis information is not being reported to the IRS. Cost or Other Basis amounts shown with a "U" are unknown or unsubstantiated.

Description of property (Box 1a)

Federal State Income Tax Tax Withheld Withheld	(Box 4) (Box 16)		00 0 00 0 00 0		0 00 0		0000 000		00 0 0 00 0 0 0		00 0 0 0 0		00 00 00 0	0.00 0.00
Net Gain or Loss Tax			19,752,48		00 0		-150.75		459 00		1,056.72		-131.60	20,985.85
Adjustments	(Box 1g)		0.00		00 0		0.00		00 0		00.0		óó·ó	0.00
Code if any	(Box 1f)										:		:	
Cost or Other Basis	(Box 1e)		48,698,00	LL 1.3%	25,000.00		25,195.50	RATE	6,004 50	5 75%	16,996.60	0AX70	4,131.60	126,026.20
Proceeds	(Box 1d)		68,450.48	04/25/2012 CALL 1.3%	25,000.00		25,044,75	1/17/2006 ADJ I	6,463 50	DTD 12/14/2005	18,053.32	888830# NISI) (4,000.00	147,012.05
Form 8949 Checkbox			 	FEDERAL NATIONAL MORTGAGE ASSN NOTE DTD 04/25/	E 25,0	FREEPORT-MCMORAN INC SR NT DTD 02/13/201	ш;	MOHAWK INDUSTRIES INC SR UNSECURED DTD 01/17/2006 ADJ RATE	ш.	TRANSATLANTIC HOLDINGS INC SR UNSECURED DTD 12/14/2005 5 75%	ш	E DTD 09/21/2010	SEDOL#B4LbLM8)4 11/17/2014 11/10/2011 E 4,000.00 4,1	
Date Acquired	(Box 1b)	99-B SORED ADR	07/15/2014 07/16/2009	NAL MORTGAGE	04/25/2017-2014 04/25/2014 04/09/2012	ORAN INC SR N	12/17/2014 09/12/2012 E	STRIES INC SR U	08/15/2014 10/02/2006 E	IC HOLDINGS INC	10/15/2014 01/05/2007 E	NC SENIOR NOTE	(8) 4 4 11/10/2011	on 1099-B
Date Sold or Disposed	(Box 1c)	Long Term Sales Reported on 1099-B 3000.0 ABB LTD SPONSORED ADR	02/11/2017	FEDERAL NATIC	04/25/201/-20 04/25/2014	FREEPORT-MCN	12/17/201	MOHAWK INDU	08/15/2014	TRANSATLANTI	12/14/2015	TRANSOCEAN	SEDOL #84L6LF 11/17/2014	Total Long Term Sales Reported on 1099-B
CUSIP Number		Long Term Sale 3000.0	000375204	25000.0	3136G0CE9	25000.0	35671DAV7	0.0009	608190AH7	17000 0	893521AA2	4000 0	893830AX7	Total Long Tern

Report on Form 8949, Part II, with Box E checked



noncovered securities shown on this statement, cost basis information is not being reported to the Internal Revenue Service. The taxpayer is ultimately This is important tax information and is being furnished to the Internal Revenue Service (except as indicated). If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. For responsible for the accuracy of their own tax return. 2014 990-11F Latt 20-1131673

Page 3

<u>HM</u>Payson

Account #: 5940712225 Reporting Period: 12/01/2014 - 12/31/2014

		Asse	Asset Statement						
Units	Description	Unit Cost	Total Cost	Mkt Price	Mkt Value	Unrealized % of Gain/Loss Account	% of Account	Annual Yield Income at Mkt	Yield at Mkt
Cash & Equivalents	ivalents								
Cash & E 257,739 21	Cash & Equivalents 257,739 210 FEDERATED GOVT OBLIGS TX-MGD	1 00	257,739 21	1 00	257,739 21	00 0	100.00	25 77	0 01
	INSTL Income Cash	00 0	00 0	00 0	00 0	00 0	00 0	0.00	00 0
	Principal Cash	00 0	00 0	00 0	00 0	000	000	0 00	000
Total Cas	Total Cash & Equivalents	-	257,739.21		12.66/,/32	0.00	100.00	77.67	0.0
Total Account	4		257,739.21		257,739.21	0.00	100.00	25.77	0.01

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POND FAMILY FOUNDATION MANAGED ACCOUNT

5990712211 12/01/2014 - 12/31/2014 Account #: Reporting Period:

		Asse	Asset Statement						
Units	Description	Unit Cost	Total Cost	Mkt Price	Mkt Value	Unrealized Gain/Loss	% of Account	Annual	Yield at Mkt
Cash & Equivalents	iivalents								
Cash & E	Cash & Equivalents 0 FEDERATED PRIME VALUE	0.00	00 0	0.00	00 0	00 0	0.00	00 0	00 0
137,036 010	OBLIGATIONS INSTL 10 FEDERATED GOVT OBLIGS TX-MGD	1.00	137,036 01	1 00	137,036 01	00 0	2 94	13 70	0.01
Total Cas	INSTL Income Cash Principal Cash Total Cash & Equivalents	00 0	0 00 0.00 137,036.01	00 0	0 00 0 00 137,036.01	0 0 0 0 00 0 00	0 00 0 00 2.94	0 00 0 00 13.70	0.00 0.00 0.01
Fixed Income	ije								
Corporat	Corporate Bonds & Notes						!	!	
210	ISHARES 1-3 YEAR CREDIT BOND	104.45	21,934 47	105 18	22,087 80	153 33	0 47	206 85	0 94
30,000	(MK1) HEWLETT-PACKARD CO GLOBAL NOTE	98 03	29,408 00	100 79	30,235 50	827 50	0 65	637 50	2 11
25,000	DTD 09/13/2010 2.125% 09/13/2015 ENTERGY CORP SR NOTE DTD	101.51	25,377 94	101 42	25,356 00	-21 94	0.54	906 25	3 57
25,000	09/16/2010 3 625% 09/15/2015 LEUCADIA NATIONAL CORP SR NT DTD	105.98	26,495.50	104 46	26,114.25	-381 25	0.56	2,031.25	7 78
25,000	09/25/2007 8.125% 09/15/2015 CELGENE CORP SR NT DTD	102 95	25,737.50	100.98	25,245 25	-492.25	0.54	612 50	2 43
25,000	10/07/2010 2 45% 10/15/2015 HARSCO CORP SR NT DTD 09/20/2010	102 10	25,525.00	99.88	24,968 75	-556.25	0.54	675 00	2.70
33,000	TRANSATLANTIC HOLDINGS INC SR UNSECURED DTD 12/14/2005 5.75%	86 66	32,993.40	103.68	34,214.07	1,220 67	0.73	1,897.50	5.55
. 19,000	IZ/14/2015 MOHAWK INDUSTRIES INC SR UNSECURED DTD 01/17/2006 ADJ RATE 6 125% 01/15/2016	100 08	19,014 25	104 72	19,897 18	882 93	0 43	1,163 75	5 85

168-1002 37 of 75

HMPayson

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POND FAMILY FOUNDATION MANAGED ACCOUNT

12/01/2014 - 12/31/2014 5990712211 Reporting Period: Account #:

Yield at Mkt 792.00 Income 00 009 662 50 900 00 15,943.10 16,735.10 2,750 00 1,875 00 1,025 00 Annual 0 55 0 55 9.97 034 10.31 **,** o€ 1 15 1.07 1.1 1 07 Account 380 00 4,010.81 Unrealized Gain/Loss 4,083 00 -266 50 -600 75 -223 50 4,497.05 -486.24 -507 94 25,722 75 51,65100 49,847.50 16,040 16 **480,554.46** 53,633.00 25,516 75 164,514.30 Mkt Value 50,024.50 102 89 99.70 100 05 103 30 100.25 102 07 Mkt Price 107.27 Asset Statement (Cont'd) 51,271 00 460,017.25 16,526.40 476,543.65 Total Cost 25,783 25 26,323 50 50,071 00 49,550 00 50,532 44 103 29 100.14 103.13 105 29 99 10 101.07 102.54 Unit Cost HARTFORD FINL SVCS SR UNSECURED TRANSOCEAN INC SENIOR NOTE DTD TEVA PHARMACEUTICAL FIN CO B V SEDOL #B4L6LR8) 4.95% 11/15/2015 NEWELL RUBBERMAID INC NT DTD AFLAC INC NOTE DTD 02/10/2012 09/21/2010 (ISIN #US893830AX70 OTD 10/03/2006 5 5% 10/15/2016 WALGREEN COMPANY NT DTD *IECH DATA CORP SR NT DTD* 09/21/2012 3 75% 09/21/2017 12/04/2012 2.05% 12/01/2017 NOTE DTD 11/10/2011 2 4% 09/13/2012 1 8% 09/15/2017 Total Corporate Bonds & Notes 2 65% 02/15/2017 11/10/2016 Description Foreign Bonds 16,000 TRAN **Total Fixed Income Core Equity** 25,000 50,000 50,000 50,000 50,000 25,000 Units

3.43

4 94

2 35

5 13

2 58

1 80

3 63

2 06

2 04 3 63 1 16 1 02 1.72

2,160 00 4,250 00 2,352 00 2,100 00

2 28 2 51 4 33 4 41 13.54

52,054.00 58,537 00 137,542 00 149,917 00 **398,050.00**

106,120 00 117,125 00 201,915 00 205,740.00 **630,900.00**

93 70 96 15 68 58

54,066 00 58,588 00 64,373 00 55,823.00

54 07 46 87 30 65 18 61

MCDONALDS CORP

AUTOLIV INC

1,000 1,250

Consumer Discretionary

TJX COS INC NEW

NIKE INC CL B

2,100

· Total Consumer Discretionary

3.48

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POND FAMILY FOUNDATION MANAGED ACCOUNT

Account #: 5990712211 Reporting Period: 12/01/2014 - 12/31/2014

		Asset Sta	Asset Statement (Cont'd	(p,					
Units	Description	Unit Cost	Total Cost	Mkt Price	Mkt Value	Unrealized Gain/Loss	% of Account	Annual Income	Yield at Mkt
Consume 1,968 800 2,000 975 Total Cons	Consumer Staples 1,968 MONDELEZ INTL INC COM CL A 800 PEPSICO INC 2,000 PROCTER & GAMBLE CO 975 WAL-MART STORES INC Total Consumer Staples	19 29 62.69 43 73 45 69	37,970.41 50,151.60 87,451.45 44,548.17 220,121.63	36.33 94 56 91.09 85.88	71,487.60 75,648.00 182,180.00 83,733.00 413,048.60	33,517.19 25,496.40 94,728.55 39,184.83 192,926.97	1 53 1 62 3 91 1 80 8.86	1,180.80 2,096.00 5,148 00 1,872 00	1.65 2.77 2.83 2.24 2.49
Energy 525 950 1,200 1,600 1,500 Total Energy	CHEVRON CORP CONOCOPHILLIPS DEVON ENERGY CORP EXXON MOBIL CORP SCHLUMBERGER LIMITED WILLIAMS COMPANIES INC	52.80 47.89 58.55 65.36 26.31 24.84	27,717 25 45,491.51 70,257.68 49,020 50 42,093 00 37,264.63	112.18 69.06 61.21 92.45 85.41 44.94	58,894 50 65,607.00 73,452 00 69,337.50 136,656.00 67,410.00	31,177.25 20,115.49 3,194.32 20,317.00 94,563.00 30,145.37	126 1.41 1.58 1.49 2.93 1.45	2,247 00 2,774 00 1,152 00 2,070 00 2,560 00 3,420.00	3 82 4 23 1 57 2.99 1 87 3.02
Financials 1,000 AFL 1,000 AME 250 BER 1,500 JP N 1,000 TRA 1,500 WEL	AFLAC INC AMERICAN EXPRESS CO BERKSHIRE HATHAWAY INC B JP MORGAN CHASE & CO TRAVELERS COMPANIES INC WELLS FARGO & COMPANY	43.82 39.93 70.92 33.71 49.43 41.37	43,817.50 39,927.00 17,730.29 50,557.85 49,430.00 62,047.85	61.09 93.04 150.15 62.58 105.85 54.82	61,090 00 93,040.00 37,537 50 93,870.00 105,850.00 82,230 00	17,272 50 53,113 00 19,807 21 43,312 15 56,420 00 20,182.15	1.31 2.00 0.81 2.01 2.27 1.76	1,560.00 1,040.00 0 00 2,400 00 2,200 00 2,100 00 9,300.00	2.55 1 12 0 00 2 56 2 08 2 55 4 96
Health Care 1,000 ABBO 1,982 IDEX) 1,352 JOHN · 3,750 PFIZE Total Health Care	are ABBOTT LABORATORIES IDEXX LABORATORIES INC JOHNSON AND JOHNSON PFIZER INC	25.47 8.94 66.47	25,473 82 17,719.08 89,863.12 60,645 13	45 02 148.27 104.57 31.15	45,020 00 293,871.14 141,378.64 116,812 50 597,082.28	19,546.18 276,152.06 51,515.52 56,167.37 403,381.13	0.97 6.31 3.03 2.51	960 00 0.00 3,785.60 4,200 00 8,945.60	2.13 0.00 2.68 3.60

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POND FAMILY FOUNDATION MANAGED ACCOUNT

5990712211 12/01/2014 - 12/31/2014 Account #: Reporting Period:

		Asset St	Asset Statement (Cont'd)	d)					
a stigli	Description	Unit Cost	Total Cost	Mkt Price	Mkt Value	Unrealized Gaın/Loss	% of Account	Annual Income	Yield at Mkt
Industrials	als	00 63	63 197 70	137 62	137,620 00	74,422 30	2 95	2,480 00	1 80
1,000	GENERAL DYNAMICS CORP	93.20	31 561 20	43 04	60,256 00	28,694 80	1 29	00 0	000
1,400	SPIRIT AEROSYSTEMS HLDS INC CL A	76.28	64.836.50	164 32	139,672.00	74,835 50	3 00	3,485 00	2 50
850		75.89	102,445.41	115 00	155,250 00	52,804 59	3 33	3,186 00	2.05
1,350	UNITED TECHNOLOGIES CORP	21.87	54,675 00	98 92	247,300 00	192,625 00	531	00.0	00 0
Z,500 WEA Total Industrials	WEATING COM		316,715.81		740,098.00	423,382.19	15.88	9,151.00	1.24
Informat	Information Technology	04 20	30 553 00	110.38	38.633.00	8.080 00	0 83	658 00	1 70
350	APPLE INC	35.77	22,333.33	71.82	44,528 40	22,349 20	96 0	1,165 60	2 62
620	HARRIS CORPORATION INTERNATIONAL RUSINESS MACHINES	76 17	60,937.75	160 44	128,352.00	67,414 25	2.75	3,520.00	2.74
2.050	MICROSOFT CORP	25 58	52,429 62	46.45	95,222 50	42,792 88	2 0 6 9 8	1,542.00	1.07
3,500	ORACLE CORP	19.36	67,/44.80	44.97	157,395.00	02,000,60	90.0	0.555.50	900
Total Info	Total Information Technology		233,844.37		464,130.90	230,286.33	9.90	9,000,6	9
Materials 700	is MONSANTO CO	10 00	7,000 00	119.47	83,629 00	76,629 00	1 79	1,372 00	1 64
Total Core Equity	quity		√1,739,588.02	·	/ 3,873,863.28 2,134,275.26	2,134,275.26	83.12	73,716.00	1.90
Other Equity	İ.y.								
Foreign 3,235	Foreign Equity Funds 3,235 ISHARES MSCI EMERGING MARKETS (MKT)	31 50	101,894.12	39 29	127,103.15	25,209.03	2 73	2,833.86	2 23
REITS . 958	HCP INC (REIT)	31 50	30,178.91	44 03	42,180 74	12,001 83	0 91	2,088 44	4.95
Total Other Equity	Equity		132,073.03		169,283.89	37,210.86	3.63	4,922.30	2.91
			2.485.240.71		4,660,737.64 2,175,496.93	2,175,496.93	100.00	95,387.10	2.05
Total Account	nt								

Michael J. Quinlan

From:

Deborah J. Towle < DJT@hmpayson.com>

Sent:

Monday, April 13, 2015 5:11 PM

To:

Michael J. Quinlan

Subject:

RE: Pond Family Foundation 990-PF

Michael.

Here's what I found:

- 1) Your 990PF reflects the cost of items so shouldn't the value of the contribution of Fairchild stock be the cost of \$625?
- 2) There were two assets sold in December 2013 that settled in January, 2014. The tax cost of these securities is included in your starting balance, but the subsequent loss of \$36,358 is not reflected anywhere.
- 3) Is the \$88 on Part I, line 11 return of capital? If so, this amount may be included twice because it is included in the \$96,094 dividend amount.
- 4) In February 2014, there was a basis adjustment for HCP Inc (REIT) to reflect the 2013 return of capital of \$130 00
- 5) Accrued interest of \$411.46 that paid on 12/10/2013 was carried over and used to offset 2014 interest on 40,000 units Tech Data Corp Sr Nt 3.75%, due 9/21/2014.
- 6) A dividend of \$1,050.00 that paid on 1/31/2014 on 3500 shares of Annaly Mortgage Management Inc (REIT) was taxable in 2013

So if you factor	these things in, I think I got it down to \$18.
175,850.00	increase on return
(81,100.00)	removed FMV of gift
625.00	add cost of gift
(88.00)	duplicated Return of capital
1,050.00	dividend on Annaly Mortgage paid Jan 2014 taxable in 2013
411.00	interest paid on Tech Data Corp Note in 2013 used to offset 2014 interest
(130.00)	basis adjustment 2013 return of capital
(36,358.00)	losses on assets sold in 2013 - settled Jan 2014
60,260.00	net increase
2,697,301.00	beg of year
2,757,579.00	end of year
60,278.00	net increase
18.00	difference

Deb

Deborah J. Towle, CTFA, CISP

djt@hmpayson.com

HM Payson

One Portland Square, 5th Floor | P.O. Box 31 | Portland, ME 04112 207 772 3761 main | 207 518 6237 direct hmpayson.com

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