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Form **990-PF** Department of the Treasury

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

			m 990-PF and its separate	instructions	is at www. <i>ir</i> :	s.gov/form990pf,	Open to Public Inspection
For	aler	dar year 2014 or tax year beginning SEP	1, 2014	, and e	nding	AUG 31, 201	5
		foundation				A Employer identification	on number
		JAMIN FULLER & HARRIET					
_	_	KENNEBEC SAVINGS BANK		EE		01-600854	8
		nd street (or P O box number if mail is not delivered to street	address)		Room/suite	B Telephone number	
_1	<u>50</u>	STATE STREET				(207) 622	-5801
		own, state or province, country, and ZIP or foreign p	ostal code			C If exemption application is	pending, check here
_A	UG	USTA, ME 04332					
G (heck	all that apply: Initial return	Initial return of a fo	ormer public o	harity	D 1. Foreign organization	ns, check here 🕨 🗔
		Final return	Amended return] ,	
		Address change	Name change			Foreign organizations in check here and attach or check here.	computation
H_C	_	type of organization: X Section 501(c)(3) ex	empt private foundation			E If private foundation st	atus was terminated
			Other taxable private founda	ation		under section 507(b)(1)(A), check here 🕨 🗀
I Fa	ır ma	rket value of all assets at end of year J Accounti	ng method: 🔼 Cash	Accr	ual	F If the foundation is in a	60-month termination
•			ther (specify)			under section 507(b)(1)(B), check here 🕨 📖
_		475,506. (Part I, colu	mn (d) must be on cash t	basis)			
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and		vestment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessanly equal the amounts in column (a))	expenses per books	inco	ome	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	240,825.			N/A	
	2	Check If the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	24.		24.		STATEMENT 1
	4	Dividends and interest from securities	2,211.		2,211.		STATEMENT 2
	5a	Gross rents				I.,	
	b	Net rental income or (loss)					
Φ	6a	Net gain or (loss) from sale of assets not on line 10	176,586.				
Revenue	þ	Gross sales price for all assets on line 6a 408,440.					
ě	7	Capital gain net income (from Part IV, line 2)		17	6,586.		
	8	Net short-term capital gain					_
	9	Income modifications	1				
	10a	Gross sales less returns and allowances					
		Less Cost of goods sold	(0)				
	C	Gross profit or (loss) ROV 1 0 2015					
	11	Other income	161	- 4-	0 004		
	12	Total. Add lines 1 through-11-	419,646.	17	8,821.		
	13	Compensation of officers, directors, trustees, etc.,	1,161.		580.		581.
	14	Other employee salaries and wages					
Ś		Pension plans, employee benefits					
nse		Legal fees					
g		Accounting fees					
Ü		Other professional fees					<u> </u>
Ě		Interest	1 007		1 055	_	
štra		Taxes STMT 3	1,057.		1,057.		0.
ij	19	Depreciation and depletion					<u> </u>
Operating and Administrative Expenses	20	Occupancy					-
ā	21	Travel, conferences, and meetings					
au	22	Printing and publications					
ting	23	Other expenses			-		
erai	24	Total operating and administrative	2 210		1 627		E01
ŏ	0F	expenses. Add lines 13 through 23	2,218. 4,000.		1,637.		581.
_		Contributions, gifts, grants paid	4,000				4,000.
	26	Total expenses and disbursements.	6 210		1 627		A E01
	07	Add lines 24 and 25	6,218.		1,637.	<u> </u>	4,581.
		Subtract line 26 from line 12:	413,428.				
		Excess of revenue over expenses and disbursements	413,440.	17	7,184.		
		Net investment income (if negative, enter -0-)			/, ±04·	N/A	
	C	Adjusted net income (if negative, enter -0-)	<u>il</u>			I N/A	

423501 11-24-14 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2014)

01-6008548

Page 2

Г	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
뜨	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	3,448.	32,094.	32,094.
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts		ĺ	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			·
		Less, allowance for doubtful accounts	İ		
S.	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	1	Investments - U.S. and state government obligations			
	1	Investments - corporate stock STMT 4	62,691.	327,017.	304,951.
	1	Investments - corporate bonds STMT 5	19,970.	140,262.	138,461.
	Ι	Investments - land, buildings, and equipment basis			
	-	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other		, 	
		Land, buildings, and equipment; basis			
	1	Less accumulated depreciation			
	15	Other assets (describe >			
	1	Total assets (to be completed by all filers - see the		· · · · · · · · ·	
	'	instructions. Also, see page 1, item I)	86,109.	499,373.	475,506.
_	17	Accounts payable and accrued expenses	00,2000	19973731	173,3001
	18	Grants payable			
(A)	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
<u>.</u>	ŀ	Other liabilities (describe)			
) in inabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_	20	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
alances		Temporarily restricted		<u>-</u>	
За́	26	Permanently restricted			
ğ	20	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
ò	27	Capital stock, trust principal, or current funds	64,455.	305,280.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets or Fund B	29	Retained earnings, accumulated income, endowment, or other funds	21,654.	194,093.	
et/	30	Total net assets or fund balances	86,109.	499,373.	
Z	30	Total liet 455615 Of fully balances	00,103.	4,57,575	
	21	Total liabilities and net assets/fund balances	86,109.	499,373.	
_	•			433,373.	
P	<u>art</u>	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30	T	
		st agree with end-of-year figure reported on prior year's return)		1	86,109.
2		r amount from Part I, line 27a	•	2	413,428.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	499,537.
		eases not included in line 2 (itemize) COST BASIS ADJ	USTMENT	5	164.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	499,373.

423511 11-24-14

BENJAMIN FULLER & HARRIET WILLIAMS MEM

Form 990-PF (2014) TR, KENNEBEC SAVINGS BANK AGENT FOR TTEE 01-6008548 Page 3 Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (a) List and describe the kind(s) of property sold (e.g., real estate, (d) Date sold (c) Date acquired 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) (mo., day, yr.) D - Donation 12 SECURITIES SHORT TERM 08/27/1408/31/15 b SECURITIES LONG TERM 08/31/15 c CAPITAL GAINS DIVIDENDS d е (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price plus expense of sale (or allowable) (e) plus (f) minus (g) 38,755 40,180 -1,425.367,445. 191,674. 175,771. 2,240. 2,240. C d Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any -1,425. 175,771. 2,240. C d e If gain, also enter in Part I, line 7 176,586. 2 Capital gain net income or (net capital loss) 2 If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). N/A If (loss), enter -0- in Part I, line 8 Part V | Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. 1 Enter the appropriate amount in each column for each year; see the instructions before making any entries. (d) Distribution ratio Base period years Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) (col. (b) divided by col. (c)) .051293 4,317 84,163 2013 4,500. 75,451. .059641 2012 3,983. 71,867. .055422 2011 73,932. .060677 2010 4,486. 66,009. 2009 3,000 .045448 .272481 2 Total of line 1, column (d) 2 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years .054496 the foundation has been in existence if less than 5 years 3 184,431. 4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5 10,051. 5 Multiply line 4 by line 3 5 1,772. 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 7 Add lines 5 and 6 11,823. 4,581. 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

Form **990-PF** (2014)

See the Part VI instructions.

	BENJAMIN FULLER & HARRIET WIL			_	01 6	200546		
Form 9	90-PF (2014) TR, KENNEBEC SAVINGS BANK AGE VI Excise Tax Based on Investment Income (Section 494)					008548		Page 4
	xempt operating foundations described in section 4940(d)(2), check here \to \to \tag{and}			340(e), 01	1010-3	ee 111361	uctio	113)
	ate of ruling or determination letter: (attach copy of letter if ne			\ne\				
	omestic foundations that meet the section 4940(e) requirements in Part V, check here			,,,,	11		3.5	544.
	f Part I, line 27b	<u> </u>	G 0111C1 170		 -		- , .	
	II other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4	% of Part I. I	ine 12. col	. (b).				
	ax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. (, (5).	2			0.
	dd lines 1 and 2		- ,		3		3,5	544.
4 5	ubtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter	· - 0-)	•	4		-	0.
	ax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		·		5		3,5	44.
6 0	redits/Payments;			·				
a 2	014 estimated tax payments and 2013 overpayment credited to 2014	6a		520	. [
b E	xempt foreign organizations - tax withheld at source	6b			7			
c T	ax paid with application for extension of time to file (Form 8868)	6c						
d B	ackup withholding erroneously withheld	6d						
7 T	otal credits and payments. Add lines 6a through 6d				7		5	20.
8 E	nter any penalty for underpayment of estimated tax. Check here 📖 if Form 2220 is att	ached			8			2.
	ax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			. •	9		3,0	26.
	verpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			, ▶	10			
	nter the amount of line 10 to be: Credited to 2015 estimated tax			Refunded 	11			
	VII-A Statements Regarding Activities						132	T & 1
	uring the tax year, did the foundation attempt to influence any national, state, or local legi	islation or di	d it particip	ate or interver	ne in	<u> </u>	Yes	No
	ny political campaign?	,			١٥.	1a	ļ	X
	id it spend more than \$100 during the year (either directly or indirectly) for political purpo					1b	<u> </u>	X
	the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a	na copies d	or any ma	teriais publis	nea or			
	istributed by the foundation in connection with the activities Id the foundation file Form 1120-POL for this year?					1c		x
	nter the amount (if any) of tax on political expenditures (section 4955) imposed during th	io voor:				16		 ^
	1) On the foundation. > \$ 0 • (2) On foundation manager	-		0	_			Ì
•	nter the reimbursement (if any) paid by the foundation during the year for political expens		nosed on f		-			
	nanagers. > \$ 0.	andro and min	p0000 011 1	oundation				
	as the foundation engaged in any activities that have not previously been reported to the	IRS?				2	1	X
	"Yes," attach a detailed description of the activities			•				
3 ⊦	as the foundation made any changes, not previously reported to the IRS, in its governing	instrument,	articles of	incorporation,	, or			1
b	ylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	ges		·		3		x
4a D	id the foundation have unrelated business gross income of \$1,000 or more during the ye	ar?				4a		X
b II	"Yes," has it filed a tax return on Form 990-T for this year?				N/I	4 4b		
5 V	as there a liquidation, termination, dissolution, or substantial contraction during the year/	?				5		X
li	"Yes," attach the statement required by General Instruction T.							
6 A	re 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 mandato	ory directions	s that confl	ict with the sta	ite law			
	emain in the governing instrument?					6	X	
7 0	id the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	mplete Par	rt II, col (d	c), and Part >	(V	7	Х	Ļ
٥. ٢								
	nter the states to which the foundation reports or with which it is registered (see instructi ME	ons) –				-	1	
_	the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attornov Cor	noral (cr. da	scionato)		—	1	
	f each state as required by General Instruction G? If "No," attach explanation	Autorney Ger	neral (OF DE	isiyilate)		86	X	
	i each state as required by <i>General Instruction G? If "No," attach explanation</i> the foundation claiming status as a private operating foundation within the meaning of s	ection 4040	(i)/3) or 40	149(1)(5) for an	landar	00	 ^	+
	can boundation claiming status as a private operating foundation within the meaning of sear 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			TE())(J) 101 68	nemual	9	1	x
	id any persons become substantial contributors during the tax year? If "Yes," attach a sched	·-		addresses		10	+	X
	g are ser year in 100, attach a solite.					Form 99 0)-PF	<u> </u>

BENJAMIN FULLER & HARRIET WILLIAMS MEM

	n 990-PF (2014) TR, KENNEBEC SAVINGS BANK AGENT FOR TTEE U1-6008	<u> </u>		Page 5
$\overline{}$	art 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	1 '		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1		
	If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			_
14		622	-58	01
	Located at ► 150 STATE ST., AUGUSTA, ME	1332		
15	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	N	/A	0.
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the			
	foreign country			
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1	a During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1 !		
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			
	(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	1 !		
	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		Х
	Organizations relying on a current notice regarding disaster assistance check here			
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1 1		
	before the first day of the tax year beginning in 2014?	1c		Х
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)):			
	a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2014? Yes X No			
	If "Yes," list the years ▶ , , , ,			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			}
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	, , , , , , , , , , , , , , , , , , ,			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
	b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or 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	1		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			•
	Form 4720, to determine if the foundation had excess business holdings in 2014) N/A	3b		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from leopardy before the first day of the tax year beginning in 2014?	l 4h		l x

BENJAMIN FULLER & HARRIET WILLIAMS MEM Form 990-PF (2014) TR, KENNEBEC SAVINGS BANK AGENT FOR TTEE 01-6008548 Page 6 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (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, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A 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 c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained N/A └─ Yes └ No expenditure responsibility for the grant? 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 premiums on __ Yes X No a personal benefit contract? 6b X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (a) Name and address (If not paid, enter -0-) allowances KENNEBEC SAVINGS BANK AGENT 150 STATE STREET AUGUSTA, ME 04332 1.00 0. 0. 1,161 MARK L. JOHNSTON TRUSTEE 150 STATE STREET AUGUSTA, ME 04332 0 0 0. 1.00 ANDREW E. SILSBY TRUSTEE 150 STATE STREET AUGUSTA, ME 04332 0. 0. 1.00 0. WILLIAM S. HILL TRUSTEE 150 STATE STREET AUGUSTA, ME 04332 1.00 0 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 hours per week (c) Compensation devoted to position allowances

(a) Name and address of each employee paid more than \$50,000

(b) Title, and average hours per week devoted to position

(c) Compensation

(d) Contributions to employee benefit plans addered compensation

(e) Expense account, other allowances

(f) Compensation

(h) Title, and average hours per week devoted to position

(h) Title, and average hours per week devoted to position

(h) Title, and average hours per week devoted to position

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(h) Title, and average hours per week devoted to position

(h) Title, and

Form 90PF (2014) TR, KENNEBEC SAVINGS BANK AGENT FOR TTEE 01-6008548 P Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter *NONE.* (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compen NONE NONE Total number of others receiving over \$50,000 for professional services NONE Let the foundation's four largest direct charitable activities Let the floundation's four largest direct charitable activities List the floundation's four largest direct charitable activities N/A Part IX-B Summary of Direct Charitable Activities Let the floundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions. All other program-related investments. See instructions.	BENJAMIN FULLER & HARRIET WIL	TIAMS MEM	
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compen NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundations four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A			60085 4 8 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compen NONE Total number of others receiving over \$50,000 for professional services	Part VIII Information About Officers, Directors, Trustees, Fou	ndation Managers, Highly	
(a) Name and address of each person pard more than \$50,000 (b) Type of service (c) Compen NONE 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 such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1			
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 such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1			(c) Compensation
Part IX-A Summary of Direct Charitable Activities	NONE	(4, 7)	
Part IX-A Summary of Direct Charitable Activities			
Part IX-A Summary of Direct Charitable Activities			
Part IX-A Summary of Direct Charitable Activities			
Part IX-A Summary of Direct Charitable Activities			
Part IX-A Summary of Direct Charitable Activities			
Part IX-A Summary of Direct Charitable Activities			
Part IX-A Summary of Direct Charitable Activities			
Part IX-A Summary of Direct Charitable Activities	Table number of others recovered over \$50,000 for professional convers		•
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1			P
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. All other program-related investments. See instructions. 3		s produced, etc.	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. All other program-related investments. See instructions. 3	4		
1 N/A 2 All other program-related investments. See instructions. 3		ar on lines 1 and 2	Amount
All other program-related investments. See instructions. 3			· mount
3	2		
3			
	All other program-related investments. See instructions. 3		
Total Add lines 1 through 2	Total. Add lines 1 through 3		0.

5

184.431.

9,222.

Form 990-PF (2014)

Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 169,469. a Average monthly fair market value of securities b Average of monthly cash balances 1b 17,771. c Fair market value of all other assets 1c 187,240. d Total (add lines 1a, b, and c) 10 e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 187,240. Subtract line 2 from line 1d 3 4 2,809. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) Minimum investment return from Part X, line 6 9,222. 3,544. 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 3,544. c Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 5,678. Deduction from distributable amount (see instructions) 6 5,678. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions)

Minimum investment return. Enter 5% of line 5

Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	4,581.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	4,581.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,581.

Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2014)

Part XIII Undistributed Income (see instructions)

	(0)	(b)	/o\	(4)
1	(a) Corpus	Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,		, , , , , , , , , , , , , , , , , , ,		
line 7				5,678.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010 817.				
c From 2011 424.				
dFrom 2012 752.				
e From 2013 628.	0 501			
f Total of lines 3a through e	2,621.			-
4 Qualifying distributions for 2014 from				
Part XII, line 4: ►\$ 4,581.			0	
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				4,581.
d Applied to 2014 distributable amount	0.			4,301.
e Remaining amount distributed out of corpus	1,097.	<u>-</u>		1,097.
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	1,037.			1,057.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,524.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line			_	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions) 8 Excess distributions carryover from 2009	0.			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	1,524.			
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011 144.				
c Excess from 2012 752.				
d Excess from 2013 628.				
e Excess from 2014_				
42358 I 11-24-14	•	•		Form 990-PF (2014)

BENJAMIN FULLER & HARRIET WILLIAMS MEM TR. KENNEBEC SAVINGS BANK AGENT FOR TTEE

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Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) Tax vear Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2014 (b) 2013 (c) 2012 (d) 2011 (e) Total income from Part I or the minimum investment return from Part X for each year listed b 85% of line 2a c 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 e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter-(1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year 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 Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here Fig. 1 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. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed; ATTN: ANDREW SILSBY KENNEBEC SAVINGS BANK, 207-622-5801 PO BOX 50, AUGUSTA, ME 04332 b The form in which applications should be submitted and information and materials they should include: WRITTEN REQUEST c Any submission deadlines; NONE d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: TRUST DISTRIBUTES INCOME TO SUPPORT HEALTH EDUCATION OF BOYS & GIRLS PURSUANT TO THE TRUST AGREEMENT 423601 11-24-14 Form **990-PF** (2014)

Form 990-PF (2014) TR, KENNEBEC SAVINGS BANK AGENT FOR TTEE

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Purpose of grant or Foundation any foundation manager **Amount** status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year AUSTIN PEAY STATE UNIVERSITY/ LINDSAY NONE SCHOLARSHIP AWARD PAULIN 601 COLLEGE STREET CLARKSVILLE, TN 37044 500. UNIVERSITY OF NEW ENGLAND/ HALEY NONE SCHOLARSHIP AWARD PELLETIER 11 HILLS BEACH RD BIDDEFORD, ME 04005 500. UNIVERSITY OF VERMONT/MELISSA NONE SCHOLARSHIP AWARD PETERSEN CAMPUS CENTER BURLINGTON, VT 05405 500. UNIVERSITY OF MAINE ORONO/ZOE QUICK NONE SCHOLARSHIP AWARD FLAGSTAFF ROAD ORONO, ME 04469 500. UNIVERSITY OF MAINE ORONO/BENJAMIN NONE SCHOLARSHIP AWARD ROY FLAGSTAFF ROAD ORONO, ME 04469 500. SEE CONTINUATION SHEET(S) Total ▶ 3a 4,000. b Approved for future payment NONE 0. Total **▶** 3b

BENJAMIN FULLER & HARRIET WILLIAMS MEM TR, KENNEBEC SAVINGS BANK AGENT FOR TTEE 01-6008548

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual,	Equadot:	Durence of acceptance	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
		•		
NIVERSITY OF MAINE FARMINGTON/ LYDIA	NONE		SCHOLARSHIP AWARD	
OY				
24 MAINE STREET				
ARMINGTON, ME 04938				50
NIVERSITY OF MAINE AT ORONO/ ANTHONY	NONE		SCHOLARSHIP AWARD	
EMENTELLI				
FLAGSTAFF ROAD				'
DRONO, ME 04473	 			50
MERRIMACK COLLEGE/ JALEN THOMPSON	NONE		SCHOLARSHIP AWARD	
15 TURNPIKE ST				
ANDOVER, MA 01845				50
<u>-</u>				
-				
]			
Total from continuation sheets	1			1,50

Form 990-PF (2014) Part XVI-A

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ed by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a					
b				-	·- ·
c	_				
d					
e					
f			1 1	-	
g Fees and contracts from government agencies			1 1		-
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash			+ +		
investments			14	24.	
4 Dividends and interest from securities	<u> </u>		14	2,211.	· ·
5 Net rental income or (loss) from real estate.			+	2,211	
•			++		
a Debt-financed property					 .
b Not debt-financed property		_			
6 Net rental income or (loss) from personal					
property			1		
7 Other investment income		 	\perp		
8 Gain or (loss) from sales of assets other					
than inventory			18	176,586.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	1 1				
a					
b	_ []				
c					
d					
e	_				
12 Subtotal. Add columns (b), (d), and (e)	_	0	•	178,821.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	178,821.
(See worksheet in line 13 instructions to verify calculations.)				·· -	
Part XVI-B Relationship of Activities	to the Acco	omplishment of E	xempt	Purposes	
				<u> </u>	
Line No. Explain below how each activity for which inc			A contribu	ted importantly to the accomp	plishment of
the foundation's exempt purposes (other tha	in by providing fu	nds for such purposes).			
			-		
				<u>-</u> -	
	-				
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· ·					
				· · · · · · · · · · · · · · · · · · ·	
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				···	
423621 11-24-14					Form 990-PF (2014)

0	1	_	6	0	0	8	5	4	8	
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Form 990-PF (2014) Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1 Did	the organization directly or indi	rectly engage in any	of the following	ig with any other organization	on described in secti	on 501(c) of	1 :	Yes	No
	Code (other than section 501(c			· · · · · · · · · · · · · · · · · · ·	nizations?			i	
	nsfers from the reporting found	ation to a noncharit	able exempt or	ganızatıon of:					
٠,	Cash						1a(1)		X
	Other assets						1a(2)		X
	er transactions:								1
(1)	Sales of assets to a noncharita	ble exempt organiza	ation				1b(1)		_X_
	Purchases of assets from a no		organization				1b(2)		X
	Rental of facilities, equipment,						1b(3)		X
	Reimbursement arrangements						1b(4)		X
	Loans or loan guarantees						1b(5)		X
	Performance of services or me						1b(6)		X
	ring of facilities, equipment, ma						10		X
	e answer to any of the above is							ets,	
	ervices given by the reporting for				ie in any transaction	or snaring arrangement, s	now in		
a)Line no	(b) Amount involved			e exempt organization	(d) a				
a)Line no	(U) Amount involved	(c) ivanie o		Exempt or yanization	(u) Description	of transfers, transactions, and	sharing arr	angeme	nts
	-	<u> </u>	N/A		-				
					-				
-	 				 				
	<u> </u>								
	 			<u> </u>					
									
							-		
						_			
				-					
	 				 				
									
	·-				···	- ,-			
									
2a Isth	e foundation directly or indirect	I tlv affiliated with or	related to one	or more tax-exempt organi	zations described	·			
	ection 501(c) of the Code (other	-			2410113 003011000	Г	Yes	X	No
	es," complete the following sch	•	,,(o,) or in 3000	1011 OL1		_		L-6-5_	טוו ג
	(a) Name of org			(b) Type of organization		(c) Description of relations	hip		
	N/A			() 31			-		—
	· · · · · · · · · · · · · · · · · · ·			. <u>-</u> .					
	_ ··								

		7.1							
I	Under penalties of perjury, declare.						y the IRS d	iecijee t	nie -
Sign	and belief, it is true, correct, and cor	hplete, Declaration of p	reparer (other that	n taxpayer) is based on all inform	nation of which preparer	nas any knowledge retu	m with the	prepare	er
Here	V-W	ושיי		11/6/15	TRUSTE		X Yes	300 11131	Ϊ'nο l
	Signature of officer or trustee			Date	Title				
	Print/Type preparer's na	ıme	Preparer's s	ignature (), 1/1/2	Date	Check if PTIN			
				How I hears		self- employed			
Paid	ROBERT J.	KEARNS	ROBERT		10/29/15	P0	0584	792	
Prepa		PAGE LLC	•	· -		Firm's EIN ▶ 01-0			
Use O	nly								
	Firm's address ► ON	E MARKET	SQUARE				-		
	AU	GUSTA, ME	<u> 0433</u> 0			Phone no. 207-63	22-4	766	
				 -		Fr	orm 990	-PF	(2014)

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.

2014

Name of the organization

BENJAMIN FULLER & HARRIET WILLIAMS MEM TR, KENNEBEC SAVINGS BANK AGENT FOR TTEE

Employer identification number

01-6008548

Organization type (check one)					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt chantable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
• •	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions.				
General Rule					
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor Complete Parts I and II See instructions for determining a contributor's total contributions				
Special Rules					
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1 Complete Parts I and II				
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the itions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for cruelty to children or animals. Complete Parts I, II, and III.				
year, contributions is checked, enter he purpose. Do not contribute the purpose of the purpose o	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year				
but it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)				

Name of organization BENJAMIN FULLER & HARRIET WILLIAMS MEM TR, KENNEBEC SAVINGS BANK AGENT FOR TTEE Employer identification number

01-6008548

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	ROBERT G FULLER JR 79 MAPLE RIDGE DRIVE WINTHROP, ME 04364-3427	\$\$ \$	Person Payroll Noncash X (Complete Part II for noncash contributions)			
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	ROBERT G FULLER JR 79 MAPLE RIDGE DRIVE WINTHROP, ME 04364-3427	\$\$	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Occupiete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Complete Part II for noncash contributions)			
(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			
423452 11-0	5-14	\$Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions.) 990, 990-EZ, or 990-PF) (2014)			

Name of organization

BENJAMIN FULLER & HARRIET WILLIAMS MEM TR, KENNEBEC SAVINGS BANK AGENT FOR TTEE Employer identification number

01-6008548

Part II No	ncash Property	(see instructions)	Use duplicate co	pies 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
$1 \mid \overline{1,21}$	56 SHARES CVS CORP L5 SHARES DANAHER CORP 50 SHARES ECOLAB INC	\$\$	06/26/15
(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. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	90, 990-EZ, or 990-PF) (20

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization Employer identification number BENJAMIN FULLER & HARRIET WILLIAMS MEM 01-6008548 TR, KENNEBEC SAVINGS BANK AGENT FOR TTEE Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTERE	EST ON SAVII	NGS AND TEM	PORARY	CASH II	NVESTMENTS	STATEMENT 1
SOURCE		(A REVE PER B	NUE		(B) WESTMENT NCOME	(C) ADJUSTED NET INCOME
CORPORATE			24.		24.	
TOTAL TO PART I, LI	<u>-</u>	24.		24.		
FORM 990-PF	DIVIDENDS	S AND INTER	EST FR	OM SECU	RITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	R	(A) EVENUE R BOOKS	(B) NET INVEST MENT INCOM	
FOREIGN LT ORDINARY ST	189 2,240 1,582 440	2,24	0. 0. 0.	189 0 1,582 440	. 1,582). 2.
TO PART I, LINE 4	4,451	2,24	0.	2,211	2,211	
FORM 990-PF		TAX	ES	· · · · · ·		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOME	
FOREIGN TAX US		6. 1,051.		6. 1,051.		0.
TO FORM 990-PF, PG	1, LN 18	1,057.		1,057.		0.

FORM 990-PF	CORPORATE STOCK		STATEMENT 4
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK		327,017.	304,951.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	327,017.	304,951.
FORM 990-PF	CORPORATE BONDS		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS		140,262.	138,461.
TOTAL TO FORM 990-PF, PART II,	LINE 10C	140,262.	138,461.