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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.

► Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990-pf.

OMB No 1545-0052
2015
Open to Public Inspection

For calendar year 2015 or tax year beginning . and ending A Employer identification number Name of foundation 01-0538172 PINELAND FARMS, INC. Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 32 FARMVIEW DRIVE 207-688-4800 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here NEW GLOUCESTER, ME 04260 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Trinal return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: Cash X Accrual F If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col. (c), line 16) 6,332,049. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income 2,720,723. Contributions, gifts, grants, etc., received 2 Check Inf the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 129. 129 STATEMENT 129. 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) STATEMENT -26,4086a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 78,832. 0 7 Capital gain net income (from Part IV, line 2) 0 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances 4,436,575 STATEMENT b Less Cost of goods sold 2,703,686 ROSTMARKS) 2,703,686 11 Other income 129 12 Total. Add lines 1 through 11 5,398,130 2,703,815 13 Conpensation of the state of 0. 0. 0. Ō. 1,003,147. 1,216,994. 2,144,725 14 Other employee salaries and wages $1\overline{61}, 1\overline{61}$. 15 Pension plans, employed benefits 302,780. 0. 141,619. Expenses 16a Legal feeSERVICE CENTER 4 30,906. 0. 0. 30,906. STMT 5 14,771. 129 Ô. 14,642. **b** Accounting fees 17,357. 8,118. 9,239. STMT 6 0. c Other professional fees 17 Interest 101,252. 115,225. STMT 7 216,477. 0. 18 Taxes 352,933. 754,569. 0. 19 Depreciation and depletion 521,165. 268,237. 252,928. <u>o</u> . 20 Occupancy 43,679. 49,706. 93,385. 0 21 Travel, conferences, and meetings 1,623. 1,847. 3,470. 0. 22 Printing and publications 883,708. STMT 8 1,674,492 0 783,207. 23 Other expenses 24 Total operating and administrative 5,774,097 129. 2,703,815. 2,736,356. expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 6,647. 6,647. 26 Total expenses and disbursements. 5,780,744 129 2,703,815. 2,743,003. Add lines 24 and 25 27 Subtract line 26 from line 12: -382,614. 2 Excess of revenue over expenses and disbursements 0 b Net investment income (if negative, enter -0-) 0. .c Adjusted net income (if negative, enter -0-)

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions. Form **990-PF** (2015)

PINELAN1

JIIII 990-PF (2013) FINELIAND FARMS, INC.	Beginning of year	End of y	/ear
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	410,070.	1,128,926.	1,128,926
2 Savings and temporary cash investments			
3 Accounts receivable ► 100,450	•		
Less; allowance for doubtful accounts ▶	82,229.	100,450.	100,450
4 Pledges receivable ►			
Less: allowance for doubtful accounts ▶	1		
5 Grants receivable	52,721.	51,009.	51,009
6 Receivables due from officers, directors, trustees, and other			
disqualified persons			
7 Other notes and loans receivable			
Less: allowance for doubtful accounts	7	j	
8 Inventories for sale or use	115,747.	115,062.	115,062
9 Prepaid expenses and deferred charges	88,802.	65,446.	65,446
10a investments - U.S. and state government obligations			
b Investments - corporate stock			
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis			-
Less accumulated depreciation	i -]	
12 Investments - mortgage loans			
13 Investments - other			-
14 Land, buildings, and equipment basis ► 11,759,227			
Less accumulated depreciation STMT 9 7,081,640	5,050,002.	4,677,587.	4,677,587
15 Other assets (describe ► STATEMENT 10)		4,677,587. 193,569.	4,677,585 193,569
16 Total assets (to be completed by all filers - see the			
instructions. Also, see page 1, item I)	5,993,603.	6,332,049.	6,332,049
17 Accounts payable and accrued expenses	111,040.	95,263.	
18 Grants payable .			
19 Deferred revenue	14,986.	17,632.	
20 Loans from officers, directors, trustees, and other disqualified persons			
21 Mortgages and other notes payable			
22 Other liabilities (describe ► STATEMENT 11)	413,745.	1,147,936.	
	F20 771	1 200 021	
23 Total liabilities (add lines 17 through 22)	539,771.	1,260,831.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.	F 401 111	4 005 046	
24 Unrestricted	5,401,111.	4,995,046.	
25 Temporarily restricted	52,721.	76,172.	
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.			
27 Capital stock, trust principal, or current funds			
28 Paid-in or capital surplus, or land, bldg., and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds	E 452 022	E 071 010	
30 Total net assets or fund balances	5,453,832.	5,071,218.	
31 Total liabilities and net assets/fund balances	5,993,603.	6,332,049.	
art III Analysis of Changes in Net Assets or Fund	Balances		-
Total net assets or fund balances at beginning of year - Part II, column (a), lin	e 30	1.1	E 4E2 020

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		Г	
	(must agree with end-of-year figure reported on prior year's return)	1		5,453,832.
2	Enter amount from Part I, line 27a	2	Γ	-382,614.
3	Other increases not included in line 2 (itemize)	3	$oxed{\mathbb{L}}$	0.
4	Add lines 1, 2, and 3	4		5,071,218.
5	Decreases not included in line 2 (itemize)	5	\prod	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6		5,071,218.

Form **990-PF** (2015)

Form 990-PF			D FARMS, INC		<u> </u>				0	1-053	8172	Page 3
Part IV	-		sses for Tax on In		t Income	T 71 X						
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)							How a Purc Don - Don	cquired chase ation		acquired lay, yr.)	(d) Dat (mo., d	
1a												
b	NO	NE										_
_c						L					<u> </u>	
d												_
<u>e</u>	· -	(4)	Danas allawa	(=) 0=	-AAb b	l			(1-) (1			
	ross sales price	(1)	Depreciation allowed (or allowable)		st or other basis expense of sale					iain or (loss s (f) minus		
<u>a</u> b				<u> </u>								
<u> </u>				_								
_												-
е			-									
Complet	e only for assets showin	ig gain in	column (h) and owned by t	the foundation	on 12/31/69					Col. (h) gain		
(i) F.M.	.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			col.	(k), but i Losses	not less tha (from col.	n -0-) or (h))	
<u>a</u>												
b c												
				,								
d e						_						
				5		╮		Τ				
2 Capital ga	in net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-			- }	2					
3 Net short-	,	s) as defi	ned in sections 1222(5) an			ו			-	_		
	enter -0- in Part I, line 8	coluitiii (t	·)·			別	3					
		nder S	ection 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inc	ome			
(For optional	use by domestic private	foundation	ons subject to the section 4	1940(a) tax or	net investment in	come	e.)		_			
If section 40/	10(d)(2) applies, leave th	nie nart bl	ank									
11 45011011 434	to(u)(z) applies, leave ii	ns part be	alin.									
			tax on the distributable am	, ,	•	rod?					Yes	X No
			section 4940(e). Do not co nn for each year, see the in			ntriac			·			
- Enter the	(a)	acii colul		ISH UCHOIIS DE	lore making any e						(d)	
Calendar y	Base periód years ear (or tax year beginnii	ng in)	Adjusted qualifying dist		Net value of no		rıtable-			Distrit (col. (b) div	(d) oution ratio /ided by col.	
	2014	<u>_</u>		8,369.		1	<u>, 16</u>	2,033 1,945	•			64264
	2013			4,426. 0,255.				$\frac{1,945}{8,218}$				8329 <u>4</u> 69864
	2012			$\frac{0,235}{0,575}$				6,828				56966
	2010		4.71	$\frac{3,375}{2,785}$		_		7,057				06845
	2010			2,,000	<u> </u>			7,001				
2 Total of lu	ne 1, column (d)								2		77.8	81233
3 Average d	listribution ratio for the S	5-year bas	se period - divide the total o	n line 2 by 5,	or by the number	of ye	ars					
the found	ation has been in exister	nce if less	than 5 years						3		15.5	<u>76247</u>
1 Enter the	not value of nancharitah	la_uca aa	sets for 2015 from Part X, (ino E					4		816	,361.
• Eliter ule	net value of noncharitab	ie-use as:	sets for 20 is from Part A, i	ille 5					<u> </u>			
5 Multiply III	ne 4 by line 3								5	1	2,715	,841.
6 Enter 1%	of net investment incom	ne (1% of	Part I, line 27b)						6	<u> </u>		0.
7 Add lines	5 and 6								7	1	2,715	,841.
8 Enter qua	lifying distributions from	n Part XII,	line 4						8		3,230	,396.
	equal to or greater than	line 7, ch	eck the box in Part VI, line	1b, and comp	lete that part using	g a 1º	% tax ı	rate.				

Form **990-PF** (2015)

Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	۱.,		
	If "Yes," attach statement (see instructions)	12	Х	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.PINELANDFARMS.ORG	13	Λ	
1.4	The books are in care of ► ERIK HAYWARD Telephone no. ► 207-87	9-6	280	
14	Located at THREE CANAL PLAZA, PORTLAND, ME			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<u> </u>	·
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, 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. If "Yes," enter the name of the			
	foreign country			
Pi	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	,	2 2	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	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? Yes X No			
	(.,			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) 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?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	l		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
1	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 _C		x
2	before the first day of the tax year beginning in 2015? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	- "	-	 ^ `
2	defined in section 4942(j)(3) or 4942(j)(5)):			
	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2015?			
	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		
1	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3				
	during the year? L Yes LX_ No b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after			
ı	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	1		
	Form 4720, to determine if the foundation had excess business holdings in 2015.) N/A	3b		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X
	Γ ₀	rm 99 6	1_DE	(2015)

Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)						
5a During the year did the foundation pay or incur any amount to:									
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?									
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,									
any voter registration drive?									
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No						
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			1 1					
4945(d)(4)(A)? (see instructions)		Y₁	es X No	1 1					
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			1 1					
the prevention of cruelty to children or animals?		Y∈	es X No	1 1					
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	ın Regulatıons							
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	_				
Organizations relying on a current notice regarding disaster assistance check h	ere			1 1					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				1 1					
expenditure responsibility for the grant?	N	[/A	es L No]					
If "Yes," attach the statement required by Regulations section 53.494	• •		ľ						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			1 1					
a personal benefit contract?	•	Y₁	es X No		-				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		ļ.	6b X	<u>_</u>				
If "Yes" to 6b, file Form 8870.		—	<u>चि</u>						
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y	es X No						
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b					
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highly	y						
	componentian								
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(e) Expens	e				
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expens	ier				
	to position	`enter`-0-)	compensation	allowances	<u> </u>				
			i						
СЕЕ СТАТЕМЕНТ 12		0.	0.		١.				
SEE STATEMENT 12		0.	0.	C	<u>.</u>				
SEE STATEMENT 12		0.	0.	C	<u>).</u>				
SEE STATEMENT 12		0.	0.		<u>).</u>				
SEE STATEMENT 12		0.	0.) <u>.</u>				
SEE STATEMENT 12		0.	0.	C) <u>.</u>				
SEE STATEMENT 12		0.	0.	C) <u>.</u>				
SEE STATEMENT 12		0.	0.	C) <u>.</u>				
SEE STATEMENT 12		0.	0.	C) <u>.</u>				
SEE STATEMENT 12		0.	0.	C	<u>) .</u>				
	cluded on line 1). If none,		0.	C) <u>.</u>				
Compensation of five highest-paid employees (other than those inc.)	(b) Title, and average	enter "NONE."	(d) Contributions to						
	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expens account, oth allowances	ie ener				
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	enter "NONE." (c) Compensation	(d) Contributions to	(e) Expens	ie ener				
2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000 MICHAEL B. POULIN - 1545 INTERVALE	(b) Title, and average hours per week devoted to position EQUESTRIAN TR	enter "NONE." (c) Compensation	(d) Contributions to employee benefit plans and delerred compensation	(e) Expens account, oth allowances	ne ner s				
2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000 MICHAEL B. POULIN - 1545 INTERVALE RD, NEW GLOUCESTER, ME 04260	(b) Title, and average hours per week devoted to position EQUESTRIAN TR	enter "NONE." (c) Compensation AINER 103,001.	(d) Contributions to employee benefit plans and deferred	(e) Expens account, oth allowances	ie ener				
2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000 MICHAEL B. POULIN - 1545 INTERVALE RD, NEW GLOUCESTER, ME 04260 JUSTIN M. GRAY	(b) Title, and average hours per week devoted to position EQUESTRIAN TR	enter "NONE." (c) Compensation AINER 103,001. MANAGER	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens account, oth allowances	ne ner s				
2 Compensation of five highest-paid employees (other than those independent of the highest-paid employees (other than those independent of the highest of each employee paid more than \$50,000 MICHAEL B. POULIN - 1545 INTERVALE RD, NEW GLOUCESTER, ME 04260 JUSTIN M. GRAY 100 MERRILL RD, GRAY, ME 04039	(b) Title, and average hours per week devoted to position EQUESTRIAN TR 40.00 PRODUCE FARM 40.00	enter "NONE." (c) Compensation AINER 103,001. MANAGER 97,101.	(d) Contributions to employee benefit plans and delerred compensation	(e) Expens account, oth allowances	e e ner s				
2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000 MICHAEL B. POULIN - 1545 INTERVALE RD, NEW GLOUCESTER, ME 04260 JUSTIN M. GRAY 100 MERRILL RD, GRAY, ME 04039 MATTHEW M. SABASTEANSKI	(b) Title, and average hours per week devoted to position EQUESTRIAN TR 40.00 PRODUCE FARM 40.00 OUTDOOR DIREC	enter "NONE." (c) Compensation AINER 103,001. MANAGER 97,101.	(d) Contributions to employee benefit plans and deterred compensation 3,090.	(e) Expens account, oth allowances	e ner s				
2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000 MICHAEL B. POULIN - 1545 INTERVALE RD, NEW GLOUCESTER, ME 04260 JUSTIN M. GRAY 100 MERRILL RD, GRAY, ME 04039 MATTHEW M. SABASTEANSKI 769 WEBBS MILLS RD, RAYMOND, ME 04071	(b) Title, and average hours per week devoted to position EQUESTRIAN TR 40.00 PRODUCE FARM 40.00 OUTDOOR DIRECT	enter "NONE." (c) Compensation AINER 103,001. MANAGER 97,101. TOR 82,402.	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens account, oth allowances	e ner s				
2 Compensation of five highest-paid employees (other than those income (a) Name and address of each employee paid more than \$50,000 MICHAEL B. POULIN - 1545 INTERVALE RD, NEW GLOUCESTER, ME 04260 JUSTIN M. GRAY 100 MERRILL RD, GRAY, ME 04039 MATTHEW M. SABASTEANSKI 769 WEBBS MILLS RD, RAYMOND, ME 04071 NORMAN A. MARTIN III	(b) Title, and average hours per week devoted to position EQUESTRIAN TR 40.00 PRODUCE FARM 40.00 OUTDOOR DIRECTOR OF TARM 40.00 DAIRY FARM MA	enter "NONE." (c) Compensation AINER 103,001. MANAGER 97,101. TOR 82,402. NAGER	(d) Contributions to employee benefit plans and deterned compensation 3,090. 8,365.	(e) Expens account, oth allowances	eeners).				
2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000 MICHAEL B. POULIN - 1545 INTERVALE RD, NEW GLOUCESTER, ME 04260 JUSTIN M. GRAY 100 MERRILL RD, GRAY, ME 04039 MATTHEW M. SABASTEANSKI 769 WEBBS MILLS RD, RAYMOND, ME 04071 NORMAN A. MARTIN III 27 MILL POND RD, GORHAM, ME 04038	(b) Title, and average hours per week devoted to position EQUESTRIAN TR 40.00 PRODUCE FARM 40.00 OUTDOOR DIRECT 40.00 DAIRY FARM MA 40.00	enter "NONE." (c) Compensation AINER 103,001. MANAGER 97,101. TOR 82,402. NAGER 83,460.	(d) Contributions to employee benefit plans and deterred compensation 3,090. 8,365. 8,364.	(e) Expens account, oth allowances	eeners).				
2 Compensation of five highest-paid employees (other than those income (a) Name and address of each employee paid more than \$50,000 MICHAEL B. POULIN - 1545 INTERVALE RD, NEW GLOUCESTER, ME 04260 JUSTIN M. GRAY 100 MERRILL RD, GRAY, ME 04039 MATTHEW M. SABASTEANSKI 769 WEBBS MILLS RD, RAYMOND, ME 04071 NORMAN A. MARTIN III 27 MILL POND RD, GORHAM, ME 04038 RONALD S. STUART	(b) Title, and average hours per week devoted to position EQUESTRIAN TR 40.00 PRODUCE FARM 40.00 OUTDOOR DIRECT 40.00 DAIRY FARM MA 40.00 ASSISTANT FAR	enter "NONE." (c) Compensation AINER 103,001. MANAGER 97,101. TOR 82,402. NAGER 83,460. M MANAGER	(d) Contributions to employee benefit plans and delerred compensation 3,090. 8,365. 8,364.	(e) Expens account, oth allowances 4,670	eners).				
2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000 MICHAEL B. POULIN - 1545 INTERVALE RD, NEW GLOUCESTER, ME 04260 JUSTIN M. GRAY 100 MERRILL RD, GRAY, ME 04039 MATTHEW M. SABASTEANSKI 769 WEBBS MILLS RD, RAYMOND, ME 04071 NORMAN A. MARTIN III 27 MILL POND RD, GORHAM, ME 04038	(b) Title, and average hours per week devoted to position EQUESTRIAN TR 40.00 PRODUCE FARM 40.00 OUTDOOR DIRECT 40.00 DAIRY FARM MA 40.00	enter "NONE." (c) Compensation AINER 103,001. MANAGER 97,101. TOR 82,402. NAGER 83,460.	(d) Contributions to employee benefit plans and deterred compensation 3,090. 8,365. 8,364.	(e) Expens account, oth allowances 4,670	eeners).				

523551 11-24-15

3 Five highest-paid independent contractors for professional services. If none, en	ter "NONE."	-
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		<u> </u>
	 	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta	tistical information such as the	Fynanaa
number of organizations and other beneficiaries served, conferences convened, research papers p	roduced, etc.	Expenses
1		
		0 740 001
SEE STATEMENT 13		2,743,001.
2		
		
3	· · · · · · · · · · · · · · · · · · ·	
4		
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
1 N/A		
2		
	·	
All other program-related investments, See instructions.		
3		
Total. Add lines 1 through 3	>	0.

Form **990-PF** (2015)

PINELAND FARMS, INC. 01-0538172 Page 8 Form 990-PF (2015) 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: a Average monthly fair market value of securities 1a 1b b Average of monthly cash balances c Fair market value of all other assets 1c d Total (add lines 1a, b, and c) 14 828,793. e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e 2 Acquisition indebtedness applicable to line 1 assets 828,793. Subtract line 2 from line 1d 3 4 12,432. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 816,361. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 40,818. Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here \(\bigcup \) and do not complete this part.) Minimum investment return from Part X, line 6 2a Tax on investment income for 2015 from Part VI, line 5 2b b Income tax for 2015. (This does not include the tax from Part VI.) c Add lines 2a and 2b 20 Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions Add lines 3 and 4 5 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 16 b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 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 3,230,396. 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 5 income. Enter 1% of Part I, line 27b

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

Form **990-PF** (2015)

3,230,396.

6 Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Form 990-PF (2015) Page 9

Part XIII Undistributed Income (se	ee instructions)	N/A		
I	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2014	2014	2015
1 Distributable amount for 2015 from Part XI,	· · · · · ·			-
line 7				
2 Undistributed income, if any, as of the end of 2015				The state of the s
a Enter amount for 2014 only				
b Total for prior years:				
, ,				
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e				
4 Qualifying distributions for 2015 from		Ī		
Part XII, line 4: ►\$				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior				
years (Election required - see instructions)				
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2015 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount		<u> </u>		<u> </u>
must be shown in column (a))				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract			,	
line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which				ľ
the section 4942(a) tax has been previously				
assessed		 		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		 		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7				
9 Excess distributions carryover to 2016.		 		
Subtract lines 7 and 8 from line 6a				
O Analysis of line 9:		 		
a Excess from 2011				ł
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				Ì
e Excess from 2015				

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Form 990-PF (2015)

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

3 Grants and Contributions Paid During the		Payment		_
Recipient	If recipient is an individual,		D at annual	
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
a Paid during the year				
QUOGGY JO SKI CLUB			FACILITY IMPROVEMENTS	
PO BOX 1171				
PRESQUE ISLE, ME 04769				6,622.
PINE TREE JUNIOR HOLSTEIN CLUB			SPONSORSHIP	
772 WEST RIDGE RD				
CORNVILLE, ME 04976				25.
		_		
			-	
Total		.,	▶ 3a	6,647.
b Approved for future payment				
NONE				
110112				
			 	
Total		<u> </u>	▶ 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income	ded 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					
		·			
d	- -				
e	- - - - - - - - -				
	-				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	129.	
4 Dividends and interest from securities					
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					
8 Gain or (loss) from sales of assets other than inventory			18	-26,408.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	453220	92,173.			2,611,513.
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		92,173.		-26,279.	2,611,513.
13 Total. Add line 12, columns (b), (d), and (e)				13	2,677,407.
(See worksheet in line 13 instructions to verify calculations.)			_		

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below now each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of									
	the foundation's exempt purposes (other than by providing funds for such purposes).									
	REVENUE FROM THE SALES OF INVENTORY RELATES TO THE ORGANIZATION'S									
	SALES OF ITS FARM GOODS; THUS PROMOTING SUSTAINABILITY AND VIABILITY									
	OF FARMING IN MAINE AND PRESERVING FARMLAND FROM DEVELOPMENT.									
	EQUESTRIAN AND OUTDOOR SKIING OPERATIONS PROMOTE AMATEUR ATHLETICS									
	AND HEALTHY LIFESTYLES THROUGH RECREATION.									

Form 99				AND FAR								1-0538			age 13
Part	XVII			egarding Tr	ansfe	ers To	and Tra	nsactions	and Rela	ations	hips With	Nonchar	itabl	е	
1 Du	d the e	Exempt O			ony of th	ho follows				م م مرا ام	han 504/a) af			IV	Ma
		rganization directly (other than section								a in sec	100 50 I(C) OT			Yes	NO
		from the reporting							anizations?					1	
) Cash		Touris	audit to a noticina	ai itabic i	exempt of	yamzanon ()i.					12/11		х
-	-	r assets											1a(1) 1a(2)	_	X
•	-	sactions:											18(2)	+-	
		of assets to a non-	charita	ble exempt organ	nization								 1b(1)		x
		hases of assets from				nization							1b(2)		X
		al of facilities, equip			.pro.ga								1b(3)		
•	•	bursement arrange					•						1b(4)	-	Х
	•	s or loan guarantee											1b(5)	_	X
	-	rmance of services		mbership or fun	draising	solicitatio	ons						1b(6)	-	Х
c Sh	iaring o	f facilities, equipme	nt, ma	iling lists, other a	assets, c	or paid em	ployees				•		1c		x
d Ift	the ans	wer to any of the ab	ove is	"Yes," complete t	the follo	wing sche	edule. Colun	nn (b) should a	always show	the fair i	narket value of t	he goods, ot	her as	sets,	
or	service	s given by the repo	rting fo	oundation. If the	foundat	ion receiv	ed less thar								
		d) the value of the g													
(a)Line r	no	(b) Amount involve					e exempt or	ganızatıon			n of transfers, trans		narıng ar	rangeme	ents
B3	4	504,5	76.	OCTOBER	COF	RPORA	TION		SEE	ST	ATEMENT	14			
	_														
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	+								+		···				
						-		-			·				
	_														
	1			-						-					
						-									
2a Ist	he four	ndation directly or i	ndirect	ly affiliated with,	or relate	ed to, one	or more tax	-exempt orgai	nizations desc	ribed					
		501(c) of the Code											Yes	X] No
b If"	Yes," co	mplete the followin													
		(a) Name		anization			(b) Type o	of organization			(c) Description o	of relationship	p		
		N	/A												
		_													
	Linder	penatties of perjury, I o	lociaro t	that I have evamined	t thic rotu	ım ındırdın		na ashadulaa an	d atatements a		h and ad man lem - 1111-	4			
Sign		lief, it is true, correct, a										May ti	he IRS o	discuss t e prepare	his -
Here							ی ا	1/12/2010	(mp	EASU	מיז מז	shown	<u>l</u> below	(see inst	7)?
	Sign	ature of officer or to	rustee				Date	10/001	Title	CASC	KEK	— <u>[</u>	Yes		J No
-	1 2.8	Print/Type prepare		me	Pre	parer's si		-	Date		Check i	f I PTIN			
						,	g	~n			self- employed	'''			
Paid		KIRK PU	RVI	S	ΚI	RK P	URVIS	1/14	05/11	/16		P004	439	837	
Prepa	arer	Firm's name ► I				PUR		BASSE	rr, P.		Fırm's EIN ▶				
Use (Only			-	•								_	-	

Phone no. 207-874-0355
Form **990-PF** (2015)

Firm's address ▶ 15 CASCO STREET

PORTLAND, ME 04101-2902

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.lrs.gov/form990.

OMB No 1545-0047

2015

Name of the organization

Employer identification number

P	INELAND FARMS, INC.	01-0538172					
Organization type (check	one):						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF							
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	is 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 Ru	le. See instructions.					
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling y one contributor. Complete Parts I and II. See instructions for determining a contributor						
Special Rules							
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1. Complete Parts I and II.	or 16b, and that received from					
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educatively to children or animals. Complete Parts I, II, and III.						
For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year							
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule En Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fot the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

PINELAND FARMS, INC.

01-0538172

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	LIBRA FOUNDATION THREE CANAL PLAZA PORTLAND, ME 04112-8516	\$ 2,600,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	U.S DEPT. OF VETERANS AFFAIRS 810 VERMONT AVE, NW WASHINGTON, DC 20420	\$51,009.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	RICHARD C RANDALL, SR. BOX 145, 1 RANDALL RD STANDISH, ME 04084	\$ 30,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	MAINE CYCLING CLUB PO BOX 608 AUBURN, ME 04212	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	NOYCE LEADERSHIP INSTITUTE 419 S. SAN ANTONIO RD, SUITE 213 LOS ALTOS, CA 94022	\$30,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
523452 10-2		\$Schodule B (Form)	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

INELA	ND FARMS, INC.		1-0538172
art II	Noncash Property (see instructions). Use duplicate copies of Property	art 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
		<u> </u>	
(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	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

523453 10-26-15

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization Employer identification number PINELAND FARMS, INC.

| 01-05381/2
| Part | | Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee 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 (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	INTEREST	ON	SAVINGS	AND	TEMPORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE				-	(A) REVENUE ER BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOM	
BANK INTERES	T INCOME		_		129.		129.	1	29.
TOTAL TO PART I, LINE 3			129.			129.	1	29.	

FORM 99	0-PF 	GAIN C	R (LOSS)	FROM	SALE	OF	ASSETS	STA	PEMENT	2
DESCRIP	(A) TION OF PROPERT	Ϋ́					MANNER ACQUIRED	DATE ACQUIRED	DATE S	OLD
EQUIPME	NT						PURCHASED			
	(B) GROSS SALES PRICE		(C) ST OR R BASIS	EXI	(D) PENSE SALE	OF	(E) DEPREC.	GAIN	(F)	S
•	78,832.		604,216	•	-	0 .	498,97	6.	-26,4	08.
NET GAI	N OR LOSS FROM	SALE C	F ASSETS						-26,4	08.
CAPITAL	GAINS DIVIDENT	S FROM	PART IV							0.
ጥር ጥልነ. ጥ	O FORM 990-PF,	ኮልዩጥ 1	LINE 6	Δ					-26,4	08.

FORM 990-PF INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 10	STATEMENT
INCOME	
1. GROSS RECEIPTS	
2. RETURNS AND ALLOWANCES	4,436,57
4. COST OF GOODS SOLD (LINE 15)	2,703,68
6. OTHER INCOME	
7. GROSS INCOME (ADD LINES 5 AND 6)	2,703,68
COST OF GOODS SOLD	
8. INVENTORY AT BEGINNING OF YEAR	
13. ADD LINES 8 THROUGH 12	1,847,95
14. INVENTORY AT END OF YEAR	1,732,88

FORM 990-PF	LEGAL	FEES	S1	TATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
LEGAL FEES	30,906.	0.	0.	30,906.	
TO FM 990-PF, PG 1, LN 16A	30,906.	0.	0.	30,906.	
FORM 990-PF	ACCOUNTI	NG FEES	Si	PATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	14,771.	129.	0.	14,642.	
TO FORM 990-PF, PG 1, LN 16B	14,771.	129.	0.	14,642.	
FORM 990-PF (OTHER PROFES	SIONAL FEES	Si	PATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
CONSULTING FEES	17,357.	0.	8,118.	9,239.	
TO FORM 990-PF, PG 1, LN 16C	17,357.	0.	8,118.	9,239.	
FORM 990-PF	TAX	ES	STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL TAXES PERSONAL PROPERTY TAXES USE TAXES PROPERTY TAXES	182,853. 2,788. 10,378. 20,458.	0. 0. 0.	85,525. 1,304. 4,854. 9,569.	97,328. 1,484. 5,524. 10,889.	
TO FORM 990-PF, PG 1, LN 18	216,477.	0.	101,252.	115,225.	
=					

FORM 990-PF	OTHER E	XPENSES	STATEMENT 8		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
TELEPHONE	28,518.	0.	13,339.	15,179.	
PAYROLL FEES	7,078.	0.	3,311.	3,767.	
DUES AND SUBSCRIPTIONS	21,620.	0.	10,112.	11,508.	
LIABILITY INSURANCE	157,999.	0.	73,900.	60,743.	
WORKERS COMP	80,751.	0.	37,769.	42,982.	
LICENSES AND PERMITS	22,339.	0.	10,449.	11,890.	
POSTAGE AND DELIVERY	3,567.	0.	1,668.	1,899.	
CREDIT CARD FEES	41,731.	0.	19,519.	22,212.	
SUPPLIES	196,052.	0.	91,699.	104,353.	
CABLE/INTERNET	15,390.	0.	7,198.	8,192.	
MAINTENANCE	147,202.	0.	68,850.	78,352.	
VETERINARY EXPENSES	155,140.	0.	72,563.	82,577.	
ADVERTISING AND PROMOTION	47,004.	0.	21,985.	25,019.	
EMBRYO	14,347.	0.	6,710.	7,637.	
FERTILIZER AND PESTICIDE	13,403.	0.	6,269.	7,134.	
DAIRY SUPPLIES	177,455.	0.	83,001.	94,454.	
BREEDING FEES	10,764.	0.	5,035.	5,729.	
TRASH DISPOSAL	17,050.	0.	7,975.	9,075.	
AUTOMOBILE EXPENSES	27,288.	0.	12,763.	14,525.	
CONTRACT LABOR	50,399.	0.	23,573.	26,826.	
SHOP SUPPLIES	30,487.	0.	14,260.	16,227.	
LAB TESTING	216.	0.	101.	115.	
GAS AND FUEL	131,845.	0.	61,668.	70,177.	
FEED	264,050.	0.	123,504.	156,323.	
LAUNDRY & LINEN	2,382.	0.	1,114.	1,268.	
UTILITIES	82.	0.	38.	44.	
MISCELLANEOUS	300.	0.	142.	160.	
BANK SERVICE CHARGES	270.	0.	126.	144.	
AMORTIZATION	9,763.	0.	4,566.	5,197.	
		0.	783,207.	883,708.	

FORM 990-PF	DEPRECIATION	OF	ASSETS	NOT	HELD	FOR	INVESTMENT	STATEMENT	9 ——
DESCRIPTION			O!		r or Basi	S	ACCUMULATED DEPRECIATION	BOOK VALU	Έ
ADMIN EDUCATION FARM GILLESPIE GUEST HOUSES EQUESTRIAN				2,5	399,9 35,8 540,6 307,8 149,0	70. 71. 83. 29.	1,032,561. 28,986. 2,134,359. 1,096,689. 149,029. 970,938.	367,3 6,8 406,3 211,1	84. 12. 94.

PINELAND FARMS, INC.			01-0538172		
MARKET OUTDOOR RENTAL ANI - EQUIPMENT ANI - BUILDINGS ANI - LAND	279,942. 1,351,165. 331,018. 506,663. 1,693,804. 559,500.	199,805. 1,015,788. 293,547. 94,208. 65,730.	80,137. 335,377. 37,471. 412,455. 1,628,074. 559,500.		
TOTAL TO FM 990-PF, PART II, LN 14	11,759,227.	7,081,640.	4,677,587.		
FORM 990-PF	OTHER ASSETS		STATEMENT 10		
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE		
WEBSITE DESIGN, NET OF AMORTIZATION GOODWILL BRAND LOGO, NET OF AMORTIZATION	13,437. 175,000. 5,595.	13,860. 175,000. 4,709.	13,860. 175,000. 4,709.		
TO FORM 990-PF, PART II, LINE 15	194,032.	193,569.	193,569.		
FORM 990-PF OTH	HER LIABILITIES		STATEMENT 11		
DESCRIPTION		BOY AMOUNT	EOY AMOUNT		
ACCRUED PAYROLL SECURITY DEPOSITS AMOUNTS HELD FOR NOYCE LEADERSHIP	BOY AMOUNT EOY AMOUNT 101,401. 25,985. 32,853. 27,215.				
INSTITUTE		279,491.	1,094,736.		
TOTAL TO FORM 990-PF, PART II, LIN	NE 22	413,745.	1,147,936.		

FORM 990-PF	PART VIII - LIS TRUSTEES AND	T OF OFFICERS, FOUNDATION MAN		STATI	EMENT 12
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
PAUL PIETROPAOLI 3 CANAL PLAZA PORTLAND, ME 04112	i.	SECRETARY 2.00	0.	0.	0.
MORRIS FISHER 3 CANAL PLAZA PORTLAND, ME 04112		PRESIDENT 2.00	0.	0.	0.
RICHARD PETERSEN 3 CANAL PLAZA PORTLAND, ME 04112		TRUSTEE 2.00	0.	0.	0.
DANA BALDWIN 3 CANAL PLAZA PORTLAND, ME 04112		TRUSTEE 2.00	0.	0.	0.
ROBERTA WRIGHT 3 CANAL PLAZA PORTLAND, ME 04112		TRUSTEE 2.00	0.	0.	0.
TOTALS INCLUDED ON	990-PF, PAGE 6	, PART VIII	0.	0.	0.
FORM 990-PF	SUMMARY OF DIR	ECT CHARITABLE	ACTIVITIES	STATE	EMENT 13

ACTIVITY ONE

THE ORGANIZATION SOLD GOODS RELATED TO ITS FARMING AND EDUCATIONAL PROGRAMS, PROMOTING SUSTAINABILITY OF LOCAL AGRICULTURE AND PROVIDING EDUCATIONAL OPPORTUNITIES FOR THE PUBLIC. EQUESTRIAN AND OUTDOOR SKIING AND HIKING OPERATIONS PROMOTE AMATEUR ATHLETICS AND HEALTHY LIFESTYLES THROUGH RECREATION.

EXPENSES TO FORM 990-PF, PART IX-A, LINE 1 2,743,001. 990-PF INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS STATEMENT 14 PART XVII, LINE 1, COLUMN (D)

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

OCTOBER CORPORATION

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

FACILITY LEASE PAYMENTS

25

			<u>F</u>	Description		<u> </u>	990-PF
Asset Number	Date Method/	1 1.45	11	<u> </u>		· · · · · ·	
Number	Date placed IRC sec. ADMIN	Life or rate	Line No.	Cost or other basis	Basis reduction	Accumulated depreciation/amortization	Current year deduction
	123110SL EDUCATION	.000	16	1,399,903.		949,461.	83,100
·-··	123110SL FARM	.000	16	35,870.		27,113.	1,873
	123110SL GILLESPIE	.000	16	2,540,671.		1,998,020.	136,339
	123110SL GUEST HOUSES	.000	16	1,307,883.		1,037,679.	59,010
	12,31,10SL EQUESTRIAN	.000	16	149,029.	· · · · · -	148,614.	415
	123110SL MARKET	.000	16	1,603,779.		760,586.	210,352
	123110SL OUTDOOR	.000	16	279,942.		177,852.	21,953
	123110SL RENTAL	.000	16	1,351,165.		908,154.	107,634
	123110SL ANI - EQUIPME	ENT	16	331,018.		281,826.	11,721
	MO 9 ₁ 30 ₁ 14 SL ANI - BUILDIN	1GS	16	506,663.		22,575.	71,633
	09 ₁ 30 ₁ 14 ₁ SL ANI - LAND	.000	16	1,693,804.		15,191.	50,539
	093014L * TOTAL 990-E	F PG	1 D				0
		<u> </u>	ļ	11,759,227.	0.	6,327,071.	754,569
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6261 -01-15			#	- Current year section 179	(D) - Asset dispos	sed	