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Form

990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation MAX KAGAN FAMILY FOUNDATION		A Employer identification number 01-6019033	
Number and street (or P O box number if mail is not delivered to street address) 2 OLD GARDEN ROAD		B Telephone number (see instructions) (978) 546-1188	
City or town, state or province, country, and ZIP or foreign postal code ROCKPORT, MA 01966		C If exemption application is pending, check here ☐	
G Check all that apply ☐ Initial return ☐ Final return ☒ Address change		Initial return of a former public charity ☐ Amended return ☐ Name change	
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ E If private foundation status was terminated under section 507(b)(1)(A), check here ☐ F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 3,698,427		J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	31,600			
	2 Check ☐ if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	13,568	13,568		
	4 Dividends and interest from securities	78,983	78,983		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	199,285			
	b Gross sales price for all assets on line 6a 1,658,770				
	7 Capital gain net income (from Part IV, line 2) . . .		199,285		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	5,596	5,596		
	12 Total.Add lines 1 through 11	329,032	297,432		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).	5,435	5,435		0
	c Other professional fees (attach schedule)	33,370	33,370		0
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	13,989	0		0
	19 Depreciation (attach schedule) and depletion . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).				
	24 Total operating and administrative expenses. Add lines 13 through 23	52,794	38,805		0
	25 Contributions, gifts, grants paid	113,735			113,735
	26 Total expenses and disbursements.Add lines 24 and 25	166,529	38,805		113,735
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	162,503			
	b Net investment income (if negative, enter -0-)		258,627		
	c Adjusted net income(if negative, enter -0-) . . .				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	-2		
	2	Savings and temporary cash investments	257,249	179,991	179,991
	3	Accounts receivable ▶ <u>3,893</u>			
		Less allowance for doubtful accounts ▶ _____		3,893	3,893
	4	Pledges receivable ▶ _____			
		Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach schedule) ▶ _____			
		Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)	174,746 	174,738	235,207
	b	Investments—corporate stock (attach schedule)	2,266,473 	2,486,750	2,715,941
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____			
	Less accumulated depreciation (attach schedule) ▶ _____				
12	Investments—mortgage loans.				
13	Investments—other (attach schedule)	649,756 	651,858	563,395	
14	Land, buildings, and equipment basis ▶ _____				
	Less accumulated depreciation (attach schedule) ▶ _____				
15	Other assets (describe ▶ _____)				
16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	3,348,222	3,497,230	3,698,427	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule).			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities(add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	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	1,545,996	1,545,996	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	1,802,226	1,951,234	
	30	Total net assets or fund balances(see instructions)	3,348,222	3,497,230	
31	Total liabilities and net assets/fund balances(see instructions)	3,348,222	3,497,230		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1	3,348,222
2	Enter amount from Part I, line 27a	2	162,503
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	3,510,725
5	Decreases not included in line 2 (itemize) ▶ 	5	13,495
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	3,497,230

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	199,285
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) (see instructions) If (loss), enter -0- in Part I, line 8 }		3	

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
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 instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	178,545	3,822,735	0 046706
2013	188,408	3,513,546	0 053623
2012	152,110	3,212,175	0 047354
2011	180,442	3,296,354	0 054740
2010	168,363	3,175,180	0 053025

2	Total of line 1, column (d).	2	0 255448
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 051090
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	3,747,558
5	Multiply line 4 by line 3.	5	191,463
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	2,586
7	Add lines 5 and 6.	7	194,049
8	Enter qualifying distributions from Part XII, line 4.	8	113,735

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 See
the Part VI instructions

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a

Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1
Date of ruling or determination letter _____
(attach copy of letter if necessary—see instructions)

b

Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b

c

All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)

2

Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

3

Add lines 1 and 2.

4

Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

5

Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-

6

Credits/Payments

a

2015 estimated tax payments and 2014 overpayment credited to 2015

6a

2,373

b

Exempt foreign organizations—tax withheld at source

6b

c

Tax paid with application for extension of time to file (Form 8868).

6c

d

Backup withholding erroneously withheld

6d

7

Total credits and payments. Add lines 6a through 6d.

8

Enter any **penalty** for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.

9

Tax due. If the total of lines 5 and 8 is more than line 7, enter **amount owed**

10

Overpayment. If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid**

11

Enter the amount of line 10 to be **Credited to 2015 estimated tax** ☐ **Refunded** ☐

1	5,173
2	0
3	5,173
4	0
5	5,173
6a	2,373
6b	
6c	
6d	
7	2,373
8	52
9	2,852
10	
11	

Part VII-A

Statements Regarding Activities

1a

During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

1a

No

b

Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.

1b

No

c

Did the foundation file **Form 1120-POL** for this year?

1c

No

d

Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:
(1) On the foundation ☐ \$ _____ 0 (2) On foundation managers ☐ \$ _____ 0

e

Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ _____ 0

2

Has the foundation engaged in any activities that have not previously been reported to the IRS?
If "Yes," attach a detailed description of the activities.

2

No

3

Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*

3

No

4a

Did the foundation have unrelated business gross income of \$1,000 or more during the year?

4a

No

b

If "Yes," has it filed a tax return on **Form 990-T** for this year?

4b

5

Was there a liquidation, termination, dissolution, or substantial contraction during the year?
If "Yes," attach the statement required by General Instruction T.

5

No

6

Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:
• By language in the governing instrument, or
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

6

Yes

7

Did the foundation have at least \$5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV.*

7

Yes

8a

Enter the states to which the foundation reports or with which it is registered (see instructions):
☐ ME _____

b

If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation.*

8b

Yes

9

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?
If "Yes," complete Part XIV

9

No

10

Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.*

10

No

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶N/A	13	Yes	
14	The books are in care of ▶LESLIE KAGAN Telephone no ▶(978) 546-1188 Located at ▶2 OLD GARDEN ROAD ROCKPORT MA ZIP+4 ▶01966			
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 ▶	15		
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶	16	Yes	No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ 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)? ☐ Yes ☒ No			
	(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). ☐ Yes ☒ No			
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)? ☐ Organizations relying on a current notice regarding disaster assistance check here. ▶ ☐	1b		
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 before the first day of the tax year beginning in 2015?	1c		No
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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? ☐ Yes ☒ No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	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).	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 ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ 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 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? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.</i>)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

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

(1)

Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

Yes

No

(2)

Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

Yes

No

(3)

Provide a grant to an individual for travel, study, or other similar purposes?

Yes

No

(4)

Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A) ? (see instructions).

Yes

No

(5)

Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

Yes

No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here.

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

Yes

No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes

No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

Yes

No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
LESLIE KAGAN 2 OLD GARDEN ROAD ROCKPORT, MA 01966	TRUSTEE 1 00	0	0	0
RONALD STRIAR 2 OLD GARDEN ROAD ROCKPORT, MA 01966	TRUSTEE 1 00	0	0	0
RICHARD GROSSMAN 2 OLD GARDEN ROAD ROCKPORT, MA 01966	TRUSTEE 1 00	0	0	0
CANDACE PLATZ 2 OLD GARDEN ROAD ROCKPORT, MA 01966	TRUSTEE 1 00	0	0	0

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

Total

number of other employees paid over \$50,000.

0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. 		0

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.	Expenses
1	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 	0

Part X

Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations,see instructions.)

1	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	3,574,045
b	Average of monthly cash balances.	1b	230,582
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	3,804,627
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	3,804,627
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	57,069
5	Net value of noncharitable-use assets.Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,747,558
6	Minimum investment return.Enter 5% of line 5.	6	187,378

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.)

1	Minimum investment return from Part X, line 6.	1	187,378
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	5,173
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	5,173
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	182,205
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	182,205
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	182,205

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	113,735
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	113,735
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	0
6	Adjusted qualifying distributions.Subtract line 5 from line 4.	6	113,735

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

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				182,205
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.				7,667
e From 2014.				6,465
f Total of lines 3a through e.	14,132			
4 Qualifying distributions for 2015 from Part XII, line 4				
a Applied to 2014, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2015 distributable amount.				113,735
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	14,132			14,132
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
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 2014 Subtract line 4a from line 2a Taxable amount—see instructions.			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015.				54,338
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).	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	0			
10 Analysis of line 9				
a Excess from 2011.				
b Excess from 2012.				
c Excess from 2013.				
d Excess from 2014.				
e Excess from 2015.				

Part XIV

a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . .

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

a Enter the lesser of the adjusted net 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 listed. . . .

c "Support" alternative test—enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . .

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Part XV **Supplementary Information (Complete this part only if the organization 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))

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

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

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

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

LESLIE KAGAN
51 PINE STREET
ORONO, ME 04473
(978) 546-1188
LKAGAN@KAGANAS.COM

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

N/A

c Any submission deadlines

N/A

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

N/A

Part XV

Supplementary Information(continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			3a	113,735
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments.					
3	Interest on savings and temporary cash investments			14	13,568	
4	Dividends and interest from securities. . .			14	78,983	
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			14	199,285	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory . . .					
11	Other revenue a MISCELLANEOUS REVENUE _____					5,596
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal Add columns (b), (d), and (e). .		0		291,836	5,596
13	Total. Add line 12, columns (b), (d), and (e).			13		297,432

(See worksheet in line 13 instructions to verify calculations)

[illegible]

l. Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

(1) Cash.

(2) Other assets.

(1) Sales of assets to a noncharitable exempt organization.

(2) Purchases of assets from a noncharitable exempt organization.

(3) Rental of facilities, equipment, or other assets.

(4) Reimbursement arrangements.

(5) Loans or loan guarantees.

(6)Performance of services or membership or fundraising solicitations.

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . ☐ Yes ☒ No

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

* * * * *

2016-09-07

* * * * *

Signature of officer or trustee

Date

Title

May the IRS discuss this return with the preparer shown below
(see instr)? ☒ Yes ☐ No

Print/Type preparer's name
KENNETH DAVIN CPA

Preparer's Signature

Date
2016-09-07

Check if self-employed ☐

PTIN P01280481

Firm's name
KEVIN P MARTIN ASSOCIATES PC

Firm's EIN 04-3097400

Firm's address 10 FORBES WEST BRAINTREE, MA 02184

Phone no (781) 380-3520

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
UBS FINANCIAL 33224	P		
UBS FINANCIAL 33224	P		
UBS FINANCIAL 62596	P		
UBS FINANCIAL 62596	P		
UBS FINANCIAL 62597	P		
UBS FINANCIAL 62597	P		
UBS FINANCIAL 62598	P		
UBS FINANCIAL 62598	P		
UBS FINANCIAL 62599	P		
UBS FINANCIAL 62599	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
86,228		86,414	-186
5,250		3,845	1,405
316,130		335,612	-19,482
248,713		191,375	57,338
50,453		58,846	-8,393
239,752		196,271	43,481
223,654		221,521	2,133
257,814		201,857	55,957
1,580		985	595
124,749		96,394	28,355

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-186
			1,405
			-19,482
			57,338
			-8,393
			43,481
			2,133
			55,957
			595
			28,355

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
UBS FINANCIAL 62600	P		
FROM PASSTHROUGH	P		
ADJUSTMENT TO SALE OF INTEREST IN ENBRIDGE ENERGY PARTNERS LP	P		
ADJUSTMENT TO SALE OF INTEREST IN KKR & CO LP	P		
ADJUSTMENT TO SALE OF INTEREST IN MARKWEST ENERGY PARTNERS LP	P		
CAPITAL GAINS DIVIDENDS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
87,439		65,053	22,386
417			417
8,497			8,497
		1,312	-1,312
5,608			5,608
2,486			2,486

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

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 Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			22,386
			417
			8,497
			-1,312
			5,608
			2,486

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ADVOCATES FOR CHILDREN PO BOX 3316 AUBURN,ME 04212	NONE	PC	OPERATIONAL SUPPORT	100
AMERICAN FEDERATION OF POLICE AND CONCERNED CITIZENS 6350 HORIZON DRIVE TITUSVILLE,FL 32780	NONE	PC	OPERATIONAL SUPPORT	100
AMERICAN JEWISH WORLD SERVICE 45 WEST 36TH STREET NEWYORK,NY 10018	NONE	PC	OPERATIONAL SUPPORT	4,000
ARTIS NAPLES 5833 PELICAN BAY BLVD NAPLES,FL 34108	NONE	PC	OPERATIONAL SUPPORT	1,600
ASPCA PO BOX 96929 WASHINGTON,DC 20077	NONE	PC	OPERATIONAL SUPPORT	600
BETH ISRAEL SYNAGOGUE 920 FRANKLIN RD ROANOKE,VA 24016	NONE	PC	OPERATIONAL SUPPORT	100
BROOKFIELD INSTITUTE PO BOX 388 BROOKFIELD,MA 01506	NONE	PC	OPERATIONAL SUPPORT	800
CAMP SUSAN CURTIS FOUNDATION 1321 WASHINGTON AVE 104 PORTLAND,ME 04103	NONE	PC	OPERATIONAL SUPPORT	150
CAPE ANN ANIMAL AID 4 PAWS LANE GLOUCESTER,MA 01930	NONE	PC	OPERATIONAL SUPPORT	950
CAPE ANN FOOD PANTRY 28 EMERSON AVE GLOUCESTER,MA 01930	NONE	PC	OPERATIONAL SUPPORT	2,250
CIRCLE OF FRIENDS 11965 VENICE BLVD SUITE 301 LOS ANGELES,CA 90066	NONE	PC	OPERATIONAL SUPPORT	250
COMBINED JEWISH PHILANTHROPIES 126 HIGH ST BOSTON,MA 02110	NONE	PC	OPERATIONAL SUPPORT	4,750
CONGREGATION BETH ISRAEL PO BOX 1726 BANGOR,ME 04402	NONE	PC	OPERATIONAL SUPPORT	1,235
CORNELL LAB OF ORINITHOLOGY PO BOX 11 ITHACA,NY 14851	NONE	PC	OPERATIONAL SUPPORT	100
CURE ALZHEIMER'S FUND 34 WASHINGTON ST WELLESLEY HILLS,MA 02481	NONE	PC	OPERATIONAL SUPPORT	750
Total			3a	113,735

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
DANA FARBER CANCER INSTITUTE 10 BROOKLINE PLACE WEST BROOKLINE,MA 02445	NONE	PC	OPERATIONAL SUPPORT	5,000
DEERFIELD ACADEMY PO BOX 306 DEERFIELD,MA 01342	NONE	PC	OPERATIONAL SUPPORT	1,000
DISABLED AMERICAN VETERANS PO BOX 14301 CINCINNATI,OH 45250	NONE	PC	OPERATIONAL SUPPORT	100
ENGENDER HEALTH 440 NINTH AVENUE NEW YORK,NY 10001	NONE	PC	OPERATIONAL SUPPORT	100
ESSEX COUNTY GREENBELT 82 EASTERN AVE ESSEX,MA 01929	NONE	PC	OPERATIONAL SUPPORT	750
FINCA 1201 15TH STREET NW 8TH FLOOR WASHINGTON,DC 20005	NONE	PC	OPERATIONAL SUPPORT	100
FISHER CENTER FOR ALZHEIMER'S 1 INTREPID SQUARE NEW YORK,NY 10036	NONE	PC	OPERATIONAL SUPPORT	3,400
FRIENDS OF ISRAELS ENVIRONMENT 4182 BECK AVENUE STUDIO CITY,CA 91604	NONE	PC	OPERATIONAL SUPPORT	2,000
GREATER ANDROSCOGGIN HUMANE SOCIETY 55 STRAWBERRY AVE LEWISTON,ME 04240	NONE	PC	OPERATIONAL SUPPORT	8,000
GREATER MIAMI JEWISH FEDERATION 4200 BISCAYNE BLVD MIAMI,FL 33137	NONE	PC	OPERATIONAL SUPPORT	8,000
GREEN MOUNTAIN HORSE RESCUE PO BOX 8 SOUTH WOODSTOCK,VT 05071	NONE	PC	OPERATIONAL SUPPORT	750
GROWTH THROUGH LEARNING 86 SHERMAN STREET CAMBRIDGE,MA 02140	NONE	PC	OPERATIONAL SUPPORT	1,000
HELP HOSPITALIZED VETERANS PO BOX 758505 TOPEKA,KS 66675	NONE	PC	OPERATIONAL SUPPORT	100
HILLEL AT UNIVERSITY OF MIAMI 1100 STANFORD DRIVE CORAL GABLES,FL 33146	NONE	PC	OPERATIONAL SUPPORT	500
JEWISH FEDERATION NAPLES 2500 VANDERBILT BEACH RD NAPLES,FL 34109	NONE	PC	OPERATIONAL SUPPORT	2,500
Total				113,735

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
LAST STOP HORSE RESCUE 938 TAR RIDGE ROAD PRENTISS,ME 04487	NONE	PC	OPERATIONAL SUPPORT	1,750
MACCABI USA 1511 WALNUT ST 401 PHILADELPHIA,PA 19103	NONE	PC	OPERATIONAL SUPPORT	1,250
MAINE STATE SOCIETY FOR PROTECTION OF ANIMALS PO BOX 10 WINDHAM,ME 04082	NONE	PC	OPERATIONAL SUPPORT	100
NATIONAL FOUNDATION FOR CANCER RESEARCH 4600 EAST-WEST HWY 600 BETHESDA,MD 20814	NONE	PC	OPERATIONAL SUPPORT	100
PARTNERS IN HEALTH 888 COMMONWEALTH AVE BOSTON,MA 02215	NONE	PC	OPERATIONAL SUPPORT	3,000
PATIENT AIRLIFT SERVICES 120 ADAMS BLVD FARMINGDALE,NY 11735	NONE	PC	OPERATIONAL SUPPORT	15,000
PLAY FOR PINK 60 EAST 56TH STREET NEWYORK,NY 10018	NONE	PC	OPERATIONAL SUPPORT	1,000
RIDING TO THE TOP PO BOX 1928 WINDHAM,ME 04062	NONE	PC	OPERATIONAL SUPPORT	9,400
ROCKPORT CHAMBER MUSIC PO BOX 312 ROCKPORT,MA 01966	NONE	PC	OPERATIONAL SUPPORT	450
SIMMONS COLLEGE 300 FENWAY BOSTON,MA 02115	NONE	PC	OPERATIONAL SUPPORT	1,000
SPECIAL OLYMPICS PO BOX 2170 SOUTH PORTLAND,ME 04116	NONE	PC	OPERATIONAL SUPPORT	100
SUSAN CURTIS FOUNDATION 1321 WASHINGTON AVE PORTLAND,ME 04103	NONE	PC	OPERATIONAL SUPPORT	1,000
TEMPLE BETH SHALOM 193 EAST PLEASANT AVE LIVINGSTON,NJ 07039	NONE	PC	OPERATIONAL SUPPORT	4,000
TEMPLE SHALOM SYNAGOGUE CENTER 74 BRADMAN ST AUBURN,ME 04210	NONE	PC	OPERATIONAL SUPPORT	2,500
THE BROOKE 5TH FLOOR FRIARS BRIDGE COURT LONDON SE1 8NZ UK	NONE	PC	OPERATIONAL SUPPORT	4,000
Total  3a				113,735

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
THE PUBLIC THEATER 425 LAFAYETTE STREET NEW YORK,NY 10003	NONE	PC	OPERATIONAL SUPPORT	1,000
TILTON SCHOOL 30 SCHOOL ST LEWISTON,ME 04240	NONE	PC	OPERATIONAL SUPPORT	1,000
TREE STREET YOUTH 144 HOWE ST LEWISTON,ME 04240	NONE	PC	OPERATIONAL SUPPORT	1,000
TUFTS UNIVERSITY 169 HOLLAND STREET 3RD FLOOR SOMERVILLE,MA 02144	NONE	PC	OPERATIONAL SUPPORT	500
UNITED JEWISH APPEAL - NJ 130 E 59TH ST NEW YORK,NY 10022	NONE	PC	OPERATIONAL SUPPORT	1,500
UNIVERISTY OF MIAMI 1320 S DIXIE HWY CORAL GABLES,FL 33146	NONE	PC	OPERATIONAL SUPPORT	2,500
UNIVERSITY OF VERMONT UNOVERSITY OF VERMONT BURLINGTON,VT 05405	NONE	PC	OPERATIONAL SUPPORT	5,000
USO PO BOX 96860 WASHINGTON,DC 20077	NONE	PC	OPERATIONAL SUPPORT	100
WELLSPRING HOUSE 302 ESSEX AVE GLOUCESTER,MA 01930	NONE	PC	OPERATIONAL SUPPORT	2,250
WINTER KIDS 120 EXCHANGE ST 205 PORTLAND,ME 04101	NONE	PC	OPERATIONAL SUPPORT	100
WOUNDED WARRIOR PROJECT PO BOX 75816 TOPEKA,KS 66675	NONE	PC	OPERATIONAL SUPPORT	1,100
YMCA LEWISTON AUBURN 62 TURNER ST AUBURN,ME 04210	NONE	PC	OPERATIONAL SUPPORT	2,000
Total				113,735

TY 2015 Accounting Fees Schedule

Name: MAX KAGAN FAMILY FOUNDATION

EIN: 01-6019033

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING & TAX PREP	2,500	2,500		0
BOOKKEEPING	2,935	2,935		0

TY 2015 Investments Corporate Stock Schedule

Name: MAX KAGAN FAMILY FOUNDATION

EIN: 01-6019033

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK	2,486,750	2,715,941

TY 2015 Investments Government Obligations Schedule

Name: MAX KAGAN FAMILY FOUNDATION

EIN: 01-6019033

US Government Securities - End of

Year Book Value:

174,738

US Government Securities - End of

Year Fair Market Value:

235,207

**State & Local Government
Securities - End of Year Book**

Value:

0

**State & Local Government
Securities - End of Year Fair**

Market Value:

0

TY 2015 Investments - Other Schedule

Name: MAX KAGAN FAMILY FOUNDATION

EIN: 01-6019033

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS	AT COST	651,858	563,395

TY 2015 Other Decreases Schedule

Name: MAX KAGAN FAMILY FOUNDATION

EIN: 01-6019033

Description	Amount
BOOK/TAX DIFFERENCE ON PASSTHROUGH	12,861
OTHER PASSTHROUGH INCOME INCLUDED IN UBIT	634

TY 2015 Other Income Schedule

Name: MAX KAGAN FAMILY FOUNDATION

EIN: 01-6019033

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MISCELLANEOUS REVENUE	5,596	5,596	5,596

TY 2015 Other Professional Fees Schedule

Name: MAX KAGAN FAMILY FOUNDATION

EIN: 01-6019033

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT ADVISORY FEES	33,370	33,370		0

TY 2015 Taxes Schedule**Name:** MAX KAGAN FAMILY FOUNDATION**EIN:** 01-6019033

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE TAXES	408	0		0
FEDERAL TAXES	11,222	0		0
FOREIGN TAXES PAID	2,359	0		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.	OMB No 1545-0047
		2015

Name of the organization MAX KAGAN FAMILY FOUNDATION	Employer identification number 01-6019033
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Organization type (check one)

Filers of: Form 990 or 990-EZ Form 990-PF	Section: ☐ 501(c)() (enter number) organization ☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation ☐ 527 political organization ☒ 501(c)(3) exempt private foundation ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation
--	---

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any 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. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization MAX KAGAN FAMILY FOUNDATION	Employer identification number 01-6019033
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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	LESLIE KAGAN	\$ 11,200	Person ☒
	2 OLD GARDEN ROAD		Payroll ☐
	ROCKPORT, MA 01966		Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	REBECCA PLATZ	\$ 100	Person ☒
	31 VALLEY ROAD		Payroll ☐
	CUMBERLAND CENTER, ME 04021		Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	JAMES A PLATZ	\$ 15,000	Person ☒
	2 GREAT FALLS PLAZA		Payroll ☐
	AUBURN, ME 04210		Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	DANIEL G KAGAN	\$ 5,200	Person ☒
	2 ROLAND KIMBALL ROAD		Payroll ☐
	FREEPORT, ME 04032		Noncash ☐ (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	SHANA E CASHMAN	\$ 100	Person ☒
	128 W CONCORD STREET		Payroll ☐
	BOSTON, MA 02118		Noncash ☐ (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)

Name of organization MAX KAGAN FAMILY FOUNDATION	Employer identification number 01-6019033
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Part II **Noncash Property**
(see instructions) Use duplicate copies of Part II if additional space is needed

[illegible]

Name of organization MAX KAGAN FAMILY FOUNDATION	Employer identification number 01-6019033
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Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
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