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SCLUNED JUN O G 2016,

Form 990-PF Department of the Treasury Internal Revenue Service

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.irs.gov/form990pf.

OMB No 1545-0052

LOI	Calti	noar year 2015 or tax year deginning		, and ending		
Na	me o	foundation			A Employer identification	number
C	CAROL AND DAVID HANCOCK CHARITABLE TRUST 01-6124732					
Nu	nber a	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_2	0	EAST BEACH ROAD			(207) 627-	4201
		own, state or province, country, and ZIP or foreign p	ostal code		C if exemption application is p	ending, check here
	'AS	CO, ME 04015]	_
G (Check	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
		Final return	Amended return		2 Foreign organizations me	eting the 85% test
_		Address change	Name change		Foreign organizations me check here and attach co	mputation
쁜	_	type of organization: X Section 501(c)(3) ex			E If private foundation stat	
늗		, , , ,	Other taxable private founda	· r - r	under section 507(b)(1)	(A), check here
		arket value of all assets at end of year J Account	-	Accrual	F If the foundation is in a (- 1 1
	rom≀ ►\$	Part II, col (c), line 16) Ut. (Part I, colu.	her (specify)	hania)	under section 507(b)(1)	(B), check here
_	rt i				fol Adinated and	(d) Disbursements
	# L	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes
	1	Contributions, gifts, grants, etc., received	15,250.			(cash basis only)
	2	Check if the foundation is not required to attach Sch B	13,230	· · · · · · · · · · · · · · · · · · ·		
	3	Interest on savings and temporary cash investments		<u>. </u>		
	4	Dividends and interest from securities	11,924.	11,924.		STATEMENT 1
	5a	Gross rents				
	Ь	Net rental Income or (loss)				
•	ва	Net gain or (loss) from sale of assets not on line 10	20,604.			
Ş	b	Gross sales price for all assets on line 6a 83,202.				
Revenue	7	Capital gain net income (from Part IV, line 2)		20,604.		
Œ	8	Net short-term capital gain			N/A	
	9	Income modifications Gross sales tess forum SEIVED and allowances				
	10a	and allowances				
	b					
	C					
	11	Omed firebuse	47 770	20 520		
_	12	Totals Aud illies tillough	47,778.	32,528.	0.	0.
	13	Companisation of officers, directors, trustes, etc	U•	0.	<u> </u>	<u> </u>
	14	Other employee salaries and wages				
S	15	Pension plans, employee benefits Legal fees				
sesuedx	h	Accounting fees STMT 2	875.	875.	0.	0.
ĕ		Other professional fees	0.51	0751		•
Ē.	17	Interest				
Operating and Administrative	18	Taxes STMT 3	1,696.	1,696.	0.	0.
텵	19	Depreciation and depletion				
Ē	20	Occupancy				
A	21	Travel, conferences, and meetings				
and	22	Printing and publications				
ē	23	Other expenses STMT 4	4,813.	4,813.	0.	0.
Æ	24	Total operating and administrative			_	
8		expenses. Add lines 13 through 23	7,384.	7,384.	0.	0.
J	1	Contributions, gifts, grants paid	35,200.			35,200.
	26	Total expenses and disbursements.	40 504	7 204		25 000
_	-	Add lines 24 and 25	42,584.	7,384.	0.	35,200.
	ŀ	Subtract line 26 from line 12:	5,194.			
		Excess of revenue over expenses and disbursements	3,134.	25,144.	 -	
		Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)		27,144.	0.	
5235	01 4-15	LHA For Paperwork Reduction Act Notice, see	instructions	<u> </u>	·	Form 990-PF (2015)
11-2	IO	mar itana 1 in the second in t				[[40]

CAROL AND DAVID HANCOCK CHARITABLE TRUST Form 990-PF (2015) 01-6124732 Beginning of year End of year Part | 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 Cash - non-interest-bearing 7,207. 12,337. 2 Savings and temporary cash investments 12,337. 3 Accounts receivable ► Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations STMT 5 12,500. 227,325. STMT 6 240,144. 391,447. **b** Investments - corporate stock 159,376. STMT 7 159,110. 155,134. c Investments - corporate bonds 150,000 11 Investments - land, buildings, and equipment basis 150,000. 150,000. 150,000. Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ► ACCRUED DIVIDENDS 38. 49. <u>49.</u> 16 Total assets (to be completed by all filers - see the 556,446. 708,967. instructions. Also, see page 1, item I) 561,640. 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualific 21 Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) 0. Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. or Fund Balances 24 Unrestricted 556,446 561,640. 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 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 556,446. 561,640. 30 Total net assets or fund balances 31 Total liabliities and net assets/fund balances 556,446. 561,640 Part M 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) 556,446. 2 Enter amount from Part I, line 27a 5,194.Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 561,640. 5 Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 561,640. Form **990-PF** (2015)

Capital Gains	and Losse	s for Tax on In	vestmen	t Income						-
(a) List and desc 2-story brick wa	ribe the kind(s arehouse, or co	of property sold (e.g. mmon stock, 200 shs	, real estate, . MLC Co.)		I `P	How ac - Purcl - Dona	quired hase ation	(c) Date a (mo., d		(d) Date sold (mo., day, yr.)
18 SEE ATTACHED R	EPORT	-			Ť		P			
b SEE ATTACHED R	EPORT						P	-		
c CAPITAL GAINS	DIAIDE	NDS								
d		_								
e					L_,					
(e) Gross sales price		ciation allowed allowable)		st or other basis expense of sale					aın or (loss) s (f) minus (g)
a 44.					6.					-2.
b 83,104.		_		62,55	<u> </u>					20,552.
54.										54.
d e					\dashv					
Complete only for assets shown	o dain in colur	nn (h) and owned by t	he foundation	on 12/31/69			<u>(1)</u>	Gaine (C	ol. (h) gaın	minue
		justed basis		cess of col. (i)	\dashv		col.	(k), but n	ot less than	1 -0-) or
(i) F.M.V. as of 12/31/69		f 12/31/69	over	col. (j), if any				Losses	(from col. (h))
a										-2.
b										20,552.
C										54.
d										
е										
2 Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0-			}	2				20,604.
3 Net short-term capital gain or (los	ss) as defined i	n sections 1222(5) and	d (6):							
If gain, also enter in Part I, line 8,		(/	\ /-		1		!			_
If (loss), enter -0- in Part I, line 8		. 4646/.) (<u> </u>		Ц	3				-2.
Qualification U (For optional use by domestic private							ient inc	ome		
If section 4940(d)(2) applies, leave the Was the foundation liable for the sectif "Yes," the foundation does not qual 1. Enter the appropriate amount in	tion 4942 tax o	on 4940(e). Do not coi	mplete this pa	rt.						Yes X No
(a)	Cacir Coldinii IC	(b)	isa actions be	ore making any ci	(c)					(d) ution ratio
Base periód years Calendar year (or tax year beginnii	ng in) A	djusted qualifying dist		Net value of no		ıtable-ı		_	Distrib (col. (b) div	ided by col. (c))
2014			4,500. 1,920.				0,520 5,530			.047882
2013			$\frac{1,920.}{2,530.}$				$\frac{3,330}{4,018}$		-	.049739
2012 2011			4,802.				$\frac{2,018}{8,103}$.052882
2010			5,626.				5,815			.051200
2 Total of line 1, column (d)	<u> </u>		<u>., </u>				<u>, , , , , , , , , , , , , , , , , , , </u>	2		.248266
3 Average distribution ratio for the the foundation has been in existent			n line 2 by 5,	or by the number	of ye	ars		3		.049653
4 Enter the net value of noncharitab	le-use assets t	or 2015 from Part X, I	ıne 5					4		719,140.
5 Multiply line 4 by line 3			5		35,707.					
6 Enter 1% of net investment income (1% of Part I, line 27b)			6		251.					
7 Add lines 5 and 6								7		35,958.
8 Enter qualifying distributions from	n Part XII, line	4						35,200.		
If line 8 is equal to or greater than See the Part VI instructions.	i line 7, check t	he box in Part VI, line	1b, and comp	lete that part usin	g a 1º	% tax r	ate.			
523521 11-24-15	<u> </u>								F	orm 990-PF (2015)

Excise Tax Based on Investment Income (Section 4940(p), 4940(p), or 4940(p), o	Form 990-PF (2015) CAROL AND DAVID HANCOCK CHAR			6124732 Page 4
Dates of ruling or determination letter: Cataba copy of letter if necessary-see instructions			or 4948 -	- see instructions)
b Domestic Goundations that met the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 127b. • All other domestic foundations enter 2% of the 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (e). • 2 Tax under section 51 (domestic section 4947(e)(1) trusts and taxable foundations only. Others enter -0-) • 3 3 503. • Add lines 1 in writement (annum. Subtract line 4 from line 3. If zero or less, enter -0-) • 5 Tax based on investment it come. Subtract line 4 from line 3. If zero or less, enter -0-) • 6 CreditifyPayments: • 2015 estimated by payments and 2014 overpayment credited to 2015 • Exempt foreign organizations - tax withheld at source • Tax paid with application for extension of time to life (Form 8968) • Bectical and payments. Add lines 6 through 6d • Enter any paeatly for underpayment of estimated tax. Check here ☐ if Form 2220 is attached • Tax day. If the total of lines 5 and 6 is more than line 7, enter amount evered • Total credits and payments. Add lines 6 all through 6d • Extension and the total of lines 5 and 6 is more than line 7, enter amount everyald • Total credits and payments. Add lines 6 all through 6d • Total credits and payments. Add lines 6 all through 6d • Total credits and payments and the board lines 5 and 6, enter the amount everyald • Total credits and payments. Add lines 6 are the similar of the lines of the complete of the similar of the form 2220 is attached • Total credits and payments. Add lines 6 are the similar of the lines of the complete of the form 2220 is attached • Total credits and payments. Add lines 5 and 6 is more than 180 during the very lines of the lines of the complete of the form 2220 is attached • Total credits and payments. Add lines 5 and 6 is more than line 7, enter amount everyald • Total credits and payments. Add lines 5 and 6 is more than 180 during the veryal of the complete of the form 2220 is attached • Total credits and the foundation of the form 220 is a stached • Total cred	, , ,	I		
of Part I, Ine 27b All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under serticin 511 (domestic section 4947(a) (1) trusts and taxable foundations only. Others enter 4-) 3 Add lines 1 and 2 3 Sod3. 3 Subtible A (nome) bax (domestic section 4947(a) (1) trusts and taxable foundations only. Others enter 4-) 5 Tax based on Investment Income. Subtract line 4 from line 3. If zero or less, enter 4-0 5 Credits Payments: a 2015 setimated tax payments and 2014 overpayment credited to 2015 6 Exempt foreign organizations - tax withheld at source 5 Tax paid with application for extension of time to file (Form 8868) 6 Excup withholding emmenus by withheld 6 Enter any penalty for underpayment of estimated tax. Check here decreased a few control of the 10 trust of 10 trust of 10 section 49 from 220 is attached 6 Enter any penalty for underpayment of estimated tax. 7 Tax des. If the total of lines 5 and 6 is more than line 7, enter amount ewed 9 4 90 Tax des. If the total of lines 5 and 6 is more than line 7, enter amount ewed 9 4 90 Tax des. If the total of lines 5 and 4 senter the amount overpaid 10 overpayment. If line 7 is more than 510 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? If the answer is Yee's to lar or 16, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in Erem 1914-200 for the year? If the answer is Yee's to lar or 16, attach a detailed description of the activities. O . 2 (3) not nondation managers, large year (1) on the foundation file Form 112-POLO for the year? If Yes, has if filed a tax return on Ferm 890-1 for the year? If Yes, has the floundation have unreleased business gross involved year proported to the IRS? If Yes, attach the statement required by General instruction of the activities. By language in the governing instrument. By language in the governing instrument. By state			4 renesse	م ند به درو
e All other domestic foundations enter 2% of tine 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 Subtlet A (monme) ax (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 reless, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero reless, enter -0- 6 Credit/Payments: 2 2 0.5 6 Subtractive Payments and 2014 overpayment credited to 2015 8 a 20 . 8 b 20 . 8 b 20 . 8 c 20 . 8 b 20 . 8 c 20 . 8 c 20 . 8 c 20 . 9 Expent foreign organizations - tax withheld at source 6 Exchap withholding erroneously withheld 7 Total credits and payments. Add lines 6 at through 6d 8 c 2 . 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overed 10 Total credits and payments. Add lines 6 at through 6d 11 Either the amount of line 10 to bit; Credited to 2016 estimated tax level 11 to 2016 estimated by 11 to 2016 est	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1	503.
2 au under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 3 503-3 4 dot 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 an investment lincome. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tox based an investment lincome. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tox based an investment lincome. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tox based an investment lincome. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tox day. If you can be subtracted to 2015 6 Exempt foreign organizations - Law withheld at source 8 6 Exempt foreign organizations - Law withheld at 5 zero -0- 6 Tox day. If the line of the standard tax between the subtracted 4	of Part I, line 27b			
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4 Subtitle A (imcome) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based in investment income. Subtact line 4 from line S. If zero or liss, enter -0- 6 Credits-Payments: a 2015 setimated tax payments and 2014 overpayment credited to 2015 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld d Total credits and payments. Add lines 6a through 6d B Enter any penalty for underpayment of estimated tax. Check here ☐ d Form 2220 is attached d Total credits and payments. Add lines 6a through 6d Fitted any penalty for underpayment of estimated tax. Check here ☐ d Form 2220 is attached d Total credits and payments. Add lines 6a through 6d Fitted any penalty for underpayment of lost interest of the total of lines 6a d B. smort than time?, enter amount oved d Total credits and payments. Add is more than life. 7, enter amount oved d Total credits and payments. Add is more than life. 7, enter amount oved d Total credits and 6 is more than 16. The credits amount overpaid to overpayment. If line? Is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line? Is more than the total of lines 5 and 8, enter the amount overpaid 11 Statements Regarding Activities 1a During the bax year, dot the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any pational campaign? 1a During the bax year, dot the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any pational participate or individual participate or intervene in any pational participate or distributed by the foundation in connectron with the activities. a During the bax year, dot for foundation foundation foundation foundation foundation foundation in connectron with the activities. b It is the foundation have on policical expenditures (section 4945) improved to t	2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	2	
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6 Credits/Payments: a 2015 astimated tax payments and 2014 overpayment credited to 2015 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8968) d Backup withholding erroneously withheld d Total credits and payments, Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here	4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	4	
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b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Entar any penalty for underpayment of estimated tax. Check here 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 10 Tenter the amount of line 10 to be: Creditate to 2016 settlement by Refunded 11 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 campalin? b Did it spend more than 5100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c bid the fundation file Form 1120-POL for the year? (1) On the foundation.	6 Credits/Payments:			
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b If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 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? 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 Ba 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 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 X 10 Did any persons become substantial contributors during the tax year? If "Yes," ettach a schedule listing their names and addresses				
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10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X			or Perculati	
	THE DIR MIT PERSONS DECOMES SUBSECULAR COMMUNICIES AND MIT IN THES," Affach a school	names suggested in the measure successes		

Form	1990-PF (2015)	r 01-612	4732	Page 5
	Statements Regarding Activities (continued)			r ago o
\ 			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	X
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	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	n?	13 X	
	Website address ► N/A	70.00		
14		Telephone no. \triangleright (207)	627-76	76
	Located at ▶ PO BOX 299, CASCO, ME	ZIP+4 ▶ 0	4015	, _,
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	N Land	>T / 3	•
10	and enter the amount of tax-exempt interest received or accrued during the year	▶ <u>15 </u>	N/A Yes	No
10	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over securities, or other financial account in a foreign country?	a Dank,	16 Tes	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		10	
	foreign country		: 	
3.	Statements Regarding Activities for Which Form 4720 May Be Requ	ired	<u></u>	
٠	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	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?	Yes X No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X 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 X 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	Yes X No		
) .	termination of government service, if terminating within 90 days.)		:	
U	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1b	
	Organizations relying on a current notice regarding disaster assistance check here	N/A ►□	10	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were no	t corrected	:	
•	before the first day of the tax year beginning in 2015?	. 001100100	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operati	na foundation		
	defined in section 4942(j)(3) or 4942(j)(5)):			
	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax ye	ear(s) beginning] :	
	before 2015?	Yes X No	! ! !	
	If "Yes," list the years 🛌 , , , , ,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relatively	ing to incorrect		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer			
	statement - see instructions.)	N/A	2b	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		<u> </u>	
0-	Did the foundation held more than a COV director indirect interest in our brown a second of the country in the	_)* 1	
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	Yes X No		
	during the year? • If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disquald			, , , , , , , , , , , , , , , , , , ,
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4	· ·		4
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Us			
	Form 4720, to determine if the foundation had excess business holdings in 2015)	N/A	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its cha	ritable purpose that		£ 19.00
	had not been removed from peopardy before the first day of the tax year beginning in 2015?	<u> </u>	4b	X
		E _r	rm QQA_PF	/2016\

Form	990-PF	(2015)	

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

Total. Add lines 1 through 3

0.

1.50	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	e instructions.)
7 1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	, ,	
8	Average monthly fair market value of securities	1a	557,369.
b	Average of monthly cash balances	1b	22,722.
C	Fair market value of all other assets	10	150,000
d	Total (add lines 1a, b, and c)	1d	730,091
е	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	730,091.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10,951.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	719,140.
6	Minimum investment return. Enter 5% of line 5	6	35,957.
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	35,957.
28	Tax on investment income for 2015 from Part VI, line 5 2a 503.		
b	Income tax for 2015. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	503.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	35,454.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	35,454.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	35,454.
i de	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		35,200.
•		1a 1b	33,200.
	Program-related investments - total from Part IX-B		<u> </u>
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:	-	
	Suitability test (prior IRS approval required)	3a	
_	Cash distribution test (attach the required schedule)	3b	35,200.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	33,200
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	8	35,200.
9	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation (<u>:</u>

Form **990-PF** (2015)

4940(e) reduction of tax in those years.

Form 990-PF (2015) C	CAROL AND DA	VID HANCOCK	CHARITABLE	TRUST	01-61247	732 Page 9
Part XIII Undistrib	uted income (see	instructions)				
		(a) Corpus	(b) Years prior to 2014	(c) 2014		(d) 2015
1 Distributable amount for 20 line 7	015 from Part XI,					35,454.
2 Undistributed income, if any, as	a of the end of 2015			+		33,131
a Enter amount for 2014 only	i i			35	,103.	
b Total for prior years:	´ -	······································		·- 		· · · · · · · · · · · · · · · · · · ·
, ,			0			
3 Excess distributions carryo	over, if any, to 2015:					
a From 2010					ŀ	
b From 2011						
c From 2012						
d From 2013						
e From 2014			1			
f Total of lines 3a through e		0.				
4 Qualifying distributions for				İ		
Part XII, line 4: ►\$	35,200.					
a Applied to 2014, but not m	<u> </u>			35	,103.	
b Applied to undistributed in	•					
years (Election required - s	′ —		0	•		
c Treated as distributions ou	' '	0.				
(Election required - see ins	· -		 			97.
d Applied to 2015 distributab		0.	ļ	- 		9/.
e Remaining amount distribu	·	0.	 	 		0.
5 Excess distributions carryover a (If an amount appears in column must be shown in column (a))	applied to 2015 n (d), the same amount	<u> </u>				
6 Enter the net total of each indicated below:	column as					
& Corpus Add lines 3f, 4c, and 4c	e Subtract line 5	0.	1			
b Prior years' undistributed i	ncome. Subtract					
line 4b from line 2b			0	•		
c Enter the amount of prior y undistributed income for w deficiency has been issued the section 4942(a) tax has assessed	hich a notice of I, or on which	-	0			
d Subtract line 6c from line 6	6b. Taxable	· · · · · · · · · · · · · · · · · · ·				 .
amount - see instructions			0	-		
e Undistributed income for 2						
4a from line 2a. Taxable an					0.	
f Undistributed income for 2 lines 4d and 5 from line 1.	3			İ		
be distributed in 2016	This amount must					35,357
7 Amounts treated as distrib	utions out of			 		33,337.
corpus to satisfy requireme	l l					
section 170(b)(1)(F) or 49						
may be required - see instr		0.				
8 Excess distributions carryo				1		
not applied on line 5 or line		0.		1		
9 Excess distributions carry						
Subtract lines 7 and 8 from		0.		1	j	
10 Analysis of line 9:				1		A
a Excess from 2011				1		
b Excess from 2012						
c Excess from 2013					ĺ	

523581 11-24-15

d Excess from 2014 e Excess from 2015

	ND DAVID HA				L24/32 Page 1
Private Operating Fo			II-A, question 9)	N/A	
1 a If the foundation has received a ruling or		-			
foundation, and the ruling is effective for		-	. ▶ ـ	Larger	- 4-4 1 4-1
b Check box to indicate whether the found		ig foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2015	(b) 2014	Prior 3 years (c) 2013	(d) 2012	(e) Total
income from Part I or the minimum	(4)2010	(2) 2014	(6) 20 13	(u) 20 12	(6) 10121
investment return from Part X for					
each year listed		<u> </u>			_
b 85% of line 2a			 	ļ	
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not			+	-	<u> </u>
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			 		<u> </u>
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 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)				ļ	
b "Endowment" alternative test - enter 2/3 of minimum investment return			İ		
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	ļ				
securities loans (section					
512(a)(5)), or royalties)				ļ	<u> </u>
(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			1		
an exempt organization			 		
(4) Gross investment income Supplementary Infor	mation (Comple	te this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during th					ore in assets
1 Information Regarding Foundation					
 List any managers of the foundation who year (but only if they have contributed me 	have contributed more t	han 2% of the total con	tributions received by the	foundation before the clo	se of any tax
NONE) ie iliali 40,000). (366 36	sction 507 (u)(2)-)			
	our 100/ or more of the	otask of a sernamtion	(as an agually large narth		
 b List any managers of the foundation who other entity) of which the foundation has 			(or an equally large port	on of the ownership of a p	artnership or
NONE		_			
2 Information Regarding Contribution	on, Grant Gift Loss	Scholarship etc. P	roorame:		
				not accept unsolicited requ	lests for funds. If
the foundation makes gifts, grants, etc. (s					
a The name, address, and telephone numb	er or e-mail address of th	ne person to whom app	cations should be addre	ssed:	
SEE STATEMENT 8 b The form in which applications should be	submitted and informat	ion and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards,	such as by geographica	l areas, charitable fields	, kinds of institutions. or	other factors:	
	-3 9-5 BL.	,			

Supplementary Information	ition (continued)			
3 Grants and Contributions Paid During		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
Paid during the year				
		<u></u>		
CAMP SUNSHINE	NONE	PUBLIC	CAMP SPONSORSHIP	
P.O. BOX 829				2,500
SOUTH CASCO, ME 04077		+		2,500
MSAD 61 MUSIC DEPARTMENT	NONE	PUBLIC	MUSIC DEPARTMENT	
900 PORTLAND ROAD			1	
BRIDGTON, ME 04009				4,900
CASCO RECREATION DEPARTMENT	NONE	PUBLIC	RECREATION DEPARTMENT	
940 MEADOW RD				
CASCO, ME 04015				5,000
LAKE REGION ATHLETIC DEPARTMENT	NONE	PUBLIC	EDUCATIONAL	
P.O. BOX 221				5,300
CASCO, ME 04015				5,300
LOON ECHO LAND TRUST	NONE	PUBLIC	LAND PRESERVATION	
1 CHASE STREET				
BRIDGTON, ME 04009				7,500
Total SEE	CONTINUATION SHE	RT(S)	▶ 3a	35,200
b Approved for future payment				
NONE				
		<u> </u>		
Tabel			<u> </u>	
Total	 		> 3b	0 rm 990-PF (2015

Part XVI-A	Analysis	of Income	-Producing	Activities
------------	----------	-----------	------------	-------------------

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income		by section 512, 513, or 514	(e)
-	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a	_ [
b		-			
C					
d					
e					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
Dividends and interest from securities			14	11,924.	
5 Net rental income or (loss) from real estate:	192, 193		R See of		
a Debt-financed property					
b Not debt-financed property			16		
B Net rental income or (loss) from personal property					.
7 Other investment income					
3 Gain or (loss) from sales of assets other than inventory			18	20,604.	-
Net income or (loss) from special events				<u> </u>	·
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b					
C					
d					
0					
2 Subtotal. Add columns (b), (d), and (e)	No. of	().[]	32,528.	0
3 Total. Add line 12, columns (b), (d), and (e)				13	32,528
See worksheet in line 13 instructions to verify calculations.	.)				
Relationship of Activities	s to the Accom	plishment of	Exempt P	urposes	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other the				I importantly to the accomp	lishment of

 the foundation's exempt purposes (other than by providing funds for such purposes).

Part XVII | Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 50 1(c) of Yes No

	organization directly or mun			• •		C.1.0.11 30 1(C) 01	1		
	de (other than section 501(c)				inizations?		1		
a Transfe	ers from the reporting found:	ation to a noncharital	ole exempt or	ganization of;			1		
(1) Ca	ish						18(1)		X
(2) 01	her assets						1=(2)		X
b Other t	ransactions:								l
(1) Sa	iles of assets to a noncharita	ble exempt organizat	IOU				1b(1)		X
(2) Pu	irchases of assets from a no	ncharitable exempt o	rganization				1b(2)		X
(3) Re	ental of facilities, equipment,	or other assets					16(3)		X
(4) Re	eimbursement arrangements	ı					15(4)		X
(5) Lo	ans or loan guarantees						16(5)		X
(B) Pe	erformance of services or me	mbership or fundrais	sing sobcitatio	ns			16(6)		X
c Sharing	g of facilities, equipment, ma	uling lists, other asse	ts, or paid em	ployees			1c		X
d If the a	nswer to any of the above is	"Yes," complete the f	ollowing sche	dute. Column (b) should a	lways show the fair	market value of the goods,	other ass	ets,	
or serv	nces given by the reporting fo	oundation. If the four	idation receive	ed less than fair market va	ive in any transactio	on or sharing arrangement,	show in		
column	n (d) the value of the goods,								
(B)Lino no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Descripti	on of transfers, transactions and	sparing ar	ısngeme	ints
			N/A						
	-								
									—
			-						—
					- 				
									
-		 							
		 		 					
		1				·-			—
+									
				· · · · · · · · · · · · · · · · · ·					
		<u> </u>							
		<u> </u>							
2a Is the f	oundation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organ	nizations described	_		_	_
	ion 501(c) of the Code (other		(3)) or in sect	ion 527?		į	Yes	X] No
b If Yes,	complete the following sch								
	(a) Name of org	janization		(b) Type of organization		(c) Description of relations	ship		
	N/A								
•									
							_		
	dor ponatios of porjury, I doclaro						y the IHS	decire	the s
Sign in	d boted it is true, correct and cor	mplete Declaration of pro	obstor (other sps	n taxpayor) is based on all info	rmation of which propa	to use any knownedge	turn with th	o breba	ror
Here	(Juna !	A Mario	1 K	2 15/10/1	/ TRUST	BB I	X Yes]"س [
5	Signature of officer of trustee	/ / / / / / / / / / / / / / / / / / / 	<u> </u>	Date /	Trtte				<u> </u>
	Print/Type preparer & na		Preparer's s		Date	Check X if PYIN			
	, ,,, . p. apa. a. a		l '.	<u> </u>	[]	self- employed			
Paid	CHARLES J	KRAN TTT	Charle	es Kean	05/03/16		0289	578	<u> </u>
Prepare			1 - , 400 0.		193733710	Firm's EIN ▶ 01-0			
Use On		AGB DUC				11111135111 1 01-0	u 76 J		
200 011	Firm's address ► 30	LONG CPE	דפת אא	VR	 				
		OUTH PORTL				Phone no. 207-7	74-5	701	
	30	OIR FORTE	ALLU, I	P ATAR			orm 99		
						,	Will AA	V-FF	(2015)

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

Name of the organization

Employer identification number

C	AROL AND	DAVID HANCOCK	CHARITABLE TRUST	01-6124732
Organization type (check of	one)			
Filers of:	Section:			
Form 990 or 990-EZ	501(c)() (enter number) organiz	ation	
	4947(a)(1) nonexempt charitable tru	st not treated as a private foundation	
	527 poli	tical organization		
Form 990-PF	X 501(c)(3	exempt private foundation		
	4947(a)(1) nonexempt charitable tru	st treated as a private foundation	
	501(c)(3) taxable private foundation		
Note. Only a section 501(c	_	e General Rule or a Special rganization can check boxes	Rule. s for both the General Rule and a Special Ru	ule. See instructions.
General Rule				
_	•	· ·	eived, during the year, contributions totaling ee instructions for determining a contributor	•
Special Rules				
sections 509(a)(1)	and 170(b)(1)(A) or, during the ye	(vi), that checked Schedule ar, total contributions of the	90 or 990-EZ that met the 33 1/3% support A (Form 990 or 990-EZ), Part II, line 13, 16a, greater of (1) \$5,000 or (2) 2% of the amou	, or 16b, and that received from
year, total contrib	utions of more th		iling Form 990 or 990-EZ that received from Igious, charitable, scientific, literary, or educ is I, II, and III.	
year, contribution is checked, enter purpose. Do not c	s exclusively for i here the total co complete any of t	eligious, charitable, etc., pu ntributions that were receive	iling Form 990 or 990-EZ that received from rposes, but no such contributions totaled med during the year for an exclusively religious I Rule applies to this organization because in during the year	nore than \$1,000. If this box s, charitable, etc.,
but it must answer "No" or	n Part IV, line 2, o	•	or the Special Rules does not file Schedule b box on line H of its Form 990-EZ or on its F in 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

דחם גי	A ATT	DAUTD	UNNCOCE	CHARITABLE	MDITCH
TOW	MND	DWATD	TANCOCK	CUVKTIVDID	IKUSI

CAROL	AND DAVID HANCOCK CHARITABLE TRUST		<u>1-6124732</u>
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	Il space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HANCOCK LUMBER COMPANY P.O.BOX 299 CASCO, ME 04015	\$12,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll 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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)

Employer identification number

CAROL AND DAVID HANCOCK CHARITABLE TRUST

01-6124732

A.A.	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Employer identification number

CAROL	AND DAVID HANCOCK CHAR Exclusively religious, charitable, etc., cont the year from any one contributor. Complete of	ributions to organizations des	scribed in section	on 501(C)(7), (8), or	01-6124732 (10) that total more than \$1,000 for
	completing Part III, enter the total of exclusively religious Use duplicate copies of Part III if addition	s, charitable, etc., contributions of \$	1,000 or less for th	e year (Enter this info once	\$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	t ·	(d) Desc	ription of how gift is held
Parti					
				<u></u>	
}		(e) Transfer	of gift		
	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	t	(d) Desc	ription of how gift is held
		-			
-		(e) Transfer	of aift		
			-		
}	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of tra	nsferor to transferee
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift	t	(d) Desc	ription of how gift is held
		(e) Transfer	of gift		
-	Transferee's name, address, a	nd ZIP + 4	Re	elationship of tra	nsferor to transferee
				<u></u>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	t	(d) Desc	ription of how gift is held
		(e) Transfer	of gift		
	Transferee's name, address, a	nd ZIP + 4	Re	elationship of tra	nsferor to transferee

CAROL AND DAVID HANCOCK CHARITABLE TRUST 01-6124732

Grants and Contributions Paid During th	e Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
IE TREE LEGAL	NONE	PUBLIC	COMMUNITY AID	
FEDERAL ST				
RTLAND, ME 04101			<u></u>	10,0
	-	<u> </u>		
		 		
				•
				
and the second s				

ORM 990-PF	DIVIDENDS	AND INTER	EST FROM SECU	RITIES ST	PATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE S PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
SCHWAB - ACCRUED INTEREST PAID SCHWAB - INTEREST SCWHAB - CAP.GAIN	-64. 5,489.		064 0. 5,489		0.
DIVS SCWHAB - DIVIDENDS	54. 6,499.		4. 0 0. 6,499	· · · · · · · · · · · · · · · · · · ·	0. 0.
TO PART I, LINE 4	11,978.	5-	11,924	. 11,924.	0.
FORM 990-PF		ACCOUNTI	NG FEES	Si	TATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREPARATION		875.	875.	0.	0.
FORM 990-PF, PG 1	L, LN 16B	875.	875.	0.	0.
FORM 990-PF		TAX	3S	Sī	PATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DESCRIPTION		EXPENSES	NET INVEST-	ADJUSTED	CHARITABLE

	OTHER E	XPENSES			STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM		
INVESTMENT FEES (RM DAVIS) ADR FEES	4,798.		798. 15.		0.	0
TO FORM 990-PF, PG 1, LN 23	4,813.	4,	813.		0.	0
FORM 990-PF U.S. AND	STATE/CITY G	OVERNMENT	OBLI	GATIONS	STATEMENT	Į.
DESCRIPTION	U.S GOV'		воо	K VALUE	FAIR MARKE VALUE	T
US AND STATE GOVERNMENT OBLI	GATIONS X			0.		0
TOTAL U.S. GOVERNMENT OBLIGA	rions	•				
TOTAL STATE AND MUNICIPAL GO	VERNMENT OBL	IGATIONS				
TOTAL TO FORM 990-PF, PART I	I, LINE 10A			0.		0 .
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	
						•
DESCRIPTION			воо	K VALUE	FAIR MARKE VALUE	
			воо	K VALUE 240,144.		T
CORPORATE STOCK	I, LINE 10B		ВОО		VALUE	47
CORPORATE STOCK TOTAL TO FORM 990-PF, PART I	I, LINE 10B CORPORAT	E BONDS	воо	240,144.	VALUE 391,4	47
CORPORATE STOCK TOTAL TO FORM 990-PF, PART I		E BONDS		240,144.	VALUE 391,4 391,4	47.
DESCRIPTION CORPORATE STOCK TOTAL TO FORM 990-PF, PART II FORM 990-PF DESCRIPTION CORPORATE BONDS		E BONDS		240,144.	VALUE 391,4 391,4 STATEMENT FAIR MARKE	47.47.

ORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

CAROL HANCOCK PO BOX 299 CASCO, ME 04015

TELEPHONE NUMBER

(207) 627-4201

FORM AND CONTENT OF APPLICATIONS

INFORMATION SHOULD INCLUDE AMOUNT OF GRANT, CHARITABLE PURPOSE AND HOW GRANT WILL BE MONITORED.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE