

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf. OMB No 1545-0052

Department of the Treasury Internal Revenue Service For calendar year 2015 or tax year beginning and ending Name of foundation A Employer identification number GERRISH H. MILLIKEN FOUNDATION CO WILMINGTON TRUST COMPANY 009209-009 06-6037106 thumber and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number ₹100 NORTH MARKET ST. DE3-C070 (302)651-8571 Gitycor town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here SWILMINGTON, DE 19890-0001 GTCheck all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here NA) Final return Amended return Foreign organizations meeting the 85% test check here and attach computation Address change Name change H Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 6,655,842. (Part I, column (d) must be on cash basis.) **\$** Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income 895,955. Contributions, gifts, grants, etc., received N/A 2 Check If the foundation is not required to attach Sch B Interest on savings and temporary cash investments 1,036. 1,036 STATEMENT 53,396. 53,396 Dividends and interest from securities STATEMENT 5a Gross rents b Net rental income or (loss) <60,384. 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line fla 1,083,009. 7 Capital gain net income (from Part IV, line 2) 0 8 Net short-term capital gain Ç Income modifications 10a and allowances Ö MAY 1 7 20 (i) b Less Cost of goods sold c Gross profit or (loss) OCHEN. 11 Other income 890,003 54,432 Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc. 0. Other employee salaries and wages 14 15 Pension plans, employee benefits STMT 3 4,500. 4,500 16a Legal fees 0. STMT 4 2,508 1,254 **b** Accounting fees 1,254. c Other professional fees 17 Interest 18 Taxes STMT 5 416. 0. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 6 <u>25,258</u> 25,258 Operating 0. 24 Total operating and administrative 32,682 expenses. Add lines 13 through 23 31,012 1,254. 520,900 Contributions, gifts, grants paid 520,900. 26 Total expenses and disbursements. 553,582 Add lines 24 and 25 012 522,154. 27 Subtract line 26 from line 12; 336,421 & Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 23,420 C Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2015)

SCANNED MAY 9

N/A

Attached schedules and amounts in the description

column should be for end-of-year amounts only

Balance Sheets

2 Savings and temporary cash investments

Cash - non-interest-bearing

Accounts receivable ►

C/O WILMINGTON TRUST COMPANY 009209-009

Beginning of year

(a) Book Value

1,244,886.

06-6037106

(c) Fair Market Value

379,552.

End of year

(b) Book Value

379,552.

Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less: allowance for doubtful accounts Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts Inventories for sale or use Prepaid expenses and deferred charges 3,570,221. 3,802,771. 10a Investments - U.S. and state government obligations STMT 9 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation Investments - mortgage loans 2,495,978. 1,573,666. 2,431,011. STMT 10 Investments - other 13 Land, buildings, and equipment: basis 14 Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 6,678,301. 6,388,773. 6,655,842. instructions. Also, see page 1, item I) Accounts payable and accrued expenses 17 Grants payable 18 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted **▶** 🗓 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 6,388,773. 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 6,388,773. 6,678,301 30 Total net assets or fund balances 6,388,773. 6,678,301 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 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) 6,388,773. 2 Enter amount from Part I, line 27a 336,421. 5,989. SEE STATEMENT Other increases not included in line 2 (itemize) 731,183. Add lines 1, 2, and 3 SEE STATEMENT 8 Decreases not included in line 2 (itemize) 52,882. Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6,678,301. Form **990-PF** (2015)

Form **990-PF** (2015)

1,170,672.

522,154.

Add lines 5 and 6

See the Part VI instructions.

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.

Enter qualifying distributions from Part XII, line 4

GERRISH H. MILLIKEN FOUNDATION C/O WILMINGTON TRUST COMPANY 009209-009 06-6037106 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔙 and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: b Domestic foundations that meet the section 4940(e) requirements in Part V, check here | Image: and enter 1% 468. of Part I, line 27b a All other domestic foundations enter 2% of line 27b, Exempt foreign organizations enter 4% of Part I, line 12, col. (b). Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 Credits/Payments: 832 a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6с 6d d Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d 832. 7 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 364. Enter the amount of line 10 to be: Credited to 2016 estimated tax . Refunded 0. Part VII-A Statements Regarding Activities Yes No 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 X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? X 15 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. X c Did the foundation file Form 1120-POL for this year? 1c 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. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 X If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b if "Yes," has it filed a tax return on Form 990-T for this year? 4b 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or 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? X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X 8a Enter the states to which the foundation reports or with which it is registered (see instructions) 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 X 8b 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 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10

523531

Form **990-PF** (2015)

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?

Form **990-PF** (2015)

GERRISH H. MILLIKEN FOUND C/O WILMINGTON TRUST COM		100	06 60271	06 5
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	06-60371 ued)	06 Page 6
5a During the year did the foundation pay or incur any amount to:		100///	J.Cu)	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); or				1 1
any voter registration drive?	and all the state of the state		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	•		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				1 1
4945(d)(4)(A)? (see instructions)			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?	, , ,		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described	in Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	•	•	N/A	5Ь (
Organizations relying on a current notice regarding disaster assistance check hi	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ined		
expenditure responsibility for the grant?	N	I/A 🔲 Ye	8 No	
If "Yes," attach the statement required by Regulations section 53.4945	5-5(d).			li
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			
a personal benefit contract?		Y6	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu		<u> </u>		7b
Part VIII Information About Officers, Directors, Trustored Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	/	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
4. N Nama and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and deterred compensation	allowances
		1		
		_	_	
SEE STATEMENT 11		0.	0.	0.
		 		
		İ		
			Į Į	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "		
	(b) Title, and average		(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	einployee benefit plans and deferred	account, other allowances
NONE	devoted to position		compensation	allowalices
NOME				
		 		
]	
			 	
		1		
			[
Total number of other employees paid over \$50,000				0
			Form	990-PF (2015)

11-24-15

Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences conversed, research papers produced, etc. Part IX-B Summary of Program-Related investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. All other program-related investments. See instructions. 3 Amount N/A		<u>6-6037</u>	106 Page 7
(c) Compensation NONE Total number of others recoving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A	Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities on the foundation of other beneficieries served, conferences convened, research papers produced, etc. 1	3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
Total number of others recaving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year, include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A	(a) Name and address of each person paid more than \$50,000 (b) Type of service	;	(c) Compensation
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. N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.	NONE		
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. N/A			
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. N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.			
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. N/A			
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. N/A			
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. N/A			
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. N/A			
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. N/A			
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. N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.	Total number of others receiving over \$50,000 for professional services		0
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. IN/A 2 Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.	Part IX-A Summary of Direct Charitable Activities		<u> </u>
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.	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
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.	1N/A		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.			
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.			
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount All other program-related investments. See instructions.	2	-	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount All other program-related investments. See instructions.		_	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount All other program-related investments. See instructions.	3		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions.		_	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount 1		_	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions. 3	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions. 3		_	
N/A All other program-related investments. See instructions. 3			
All other program-related investments. See instructions.			Amount
All other program-related investments. See instructions. 3	1 <u>N/A</u>	\dashv	
All other program-related investments. See instructions. 3			
3	2		
3			
3	All other program-related investments. See instructions.		
Total Add lines 1 through 3			
LATRI ADD ROES I DICORDES I	Table Add Inno 1 through 2		
Form 990-PF (2015	Total. Add lines i ullough 3		0. rm 990-PF (2015)

Page 8

Form 990-PF (2015) Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 4,366,534. Average monthly fair market value of securities 1a Average of monthly cash balances 1b <u>767,146.</u> ,502,766. c Fair market value of all other assets 10 1d 6,636,446. Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3 6,636,446. Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 <u>99,547.</u> 6,536,899. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 326,845 Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 326,845. Minimum investment return from Part X, line 6 468 Tax on investment income for 2015 from Part VI, line 5 Income tax for 2015. (This does not include the tax from Part VI.) c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 522,154. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: 3 a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3Ь Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 522,154. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 5 income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2015)

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
Distributable amount for 2015 from Part XI, line 7				326,377.
2 Undistributed income, if any, as of the end of 2015				320,311.
a Enter amount for 2014 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010 1,429,360.				
b From 2011 602,572.				
c From 2012 359, 456.				
d From 2013 181,787.				
e From 2014				
f Total of lines 3a through e	2,573,175.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 522,154.			<u>-</u>	
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior		ا ر		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount	105 777			326,377.
e Remaining amount distributed out of corpus	195,777.			
Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,768,952.			
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 instr.			0.	
f Undistributed income for 2015. Subtract		<i>'</i>		
lines 4d and 5 from line 1. This amount must			1	_
be distributed in 2016				0.
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	1,429,360.	İ	,	
not applied on line 5 or line 7 9 Excess distributions carryover to 2016.	1,449,3000			
Subtract lines 7 and 8 from line 6a	1,339,592.			
10 Analysis of line 9:				
a Excess from 2011 602, 572.				
b Excess from 2012 359, 456.		ļ		
c Excess from 2013 181, 787.			,	
d Excess from 2014		ĺ		
e Excess from 2015 195,777.				

GERRISH H. MILLIKEN FOUNDATION Form 990-PF (2015) C/O WILMINGTON TRUST COMPANY 009209-009 06-6037106 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) 2 a Enter the lesser of the adjusted net Tax year Prior 3 years (a) 2015 (b) 2014 (c) 2013(d) 2012(e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year 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 foundation had \$5,000 or more in assets at any time during the year-see instructions.) **Information Regarding Foundation Managers:** a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) PHOEBE MILLIKEN b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🗶 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: NONE b The form in which applications should be submitted and information and materials they should include: 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: GRANTS MADE AS SELECTED BY TRUSTEES

Form **990-PF** (2015)

Page 11

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to **Amount** status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year PUBLIC CHARITY GENERAL AND/OR ABILIS 50 GLENVILLE STREET EDUCATIONAL PURPOSE GREENWICH, CT 06831 500. ACADIA FAMILY CENTER PUBLIC CHARITY GENERAL AND/OR 1 FERLAND POINT ROAD EDUCATIONAL PURPOSE SOUTHWEST HARBOR, ME 04679 500. ACADIA WILDLIFE FOUNDATION PUBLIC CHARITY GENERAL AND/OR PO BOX 207 EDUCATIONAL PURPOSE MOUNT DESERT, ME 04660 10,000. AMERICAN RED CROSS PUBLIC CHARITY GENERAL AND/OR PO BOX 37839 EDUCATIONAL PURPOSE BOONE IA 50037 100. ARTSPACE PUBLIC CHARITY GENERAL AND/OR 230 SOUTH 500 WEST EDUCATIONAL PURPOSE SALT LAKE CITY UT 84101 5,000. SEE CONTINUATION SHEET(S) Total 3a 520,900. b Approved for future payment NONE Total

Form 990-PF (2015)

GERRISH H. Form 990-PF (2015) C/O WILMING		DUNDATION COMPANY 0092	09-00	9 06-6	037106 Page 12
Part XVI-A Analysis of Income-F			<u> </u>	<u> </u>	037100 Fage 12
Enter gross amounts unless otherwise indicated.		d business income	Excluded b	y section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a		 			
D					
C	1				
O					
e		-			
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1,036. 53,396.	
4 Dividends and interest from securities			14	53,396.	
5 Net rental income or (loss) from real estate:			ļļ		
a Debt-financed property			ļ. — ļ		
b Not debt-financed property	<u> </u>				
6 Net rental income or (loss) from personal					
property 7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	<60,384.	
9 Net income or (loss) from special events			-		
10 Gross profit or (loss) from sales of inventory				-	
11 Other revenue:					
a					
b	1 1				
C		<u> </u>			
d			 		
e				5 050	
12 Subtotal. Add columns (b), (d), and (e)		0.	<u> </u>	<5,952.	
13 Total. Add line 12, columns (b), (d), and (e)	tions \			. 13	<5,952.
(See worksheet in line 13 instructions to verify calcula		muliahmant of E	ramet D		
Part XVI-B Relationship of Activ	ities to the Acco	mpasament or E	tempt P	urposes 	
Line No. Explain below how each activity for wi			contributed	importantly to the accom	plishment of
the foundation's exempt purposes (of	her than by providing fur	nds for such purposes).		_ 	
					
					
					
					
					
		<u> </u>			

Form **990-PF** (2015)

523621 11-24-15

orm 990-PF (20	15) C/O	WILMINGTON	TRUST	COMPANY	009209-009	<u>06-6037106</u>	Page 1
Part XVII	Information	Regarding Tran	sfers To a	nd Transacti	ons and Relationsh	ps With Noncharitable	
	Exempt Org	anizations					

Signature of officer or trustee Print/Type preparer's name Preparer's signature Date Check if PTIN self- employed					g with any other organization		tion 501(c) of		Yes	No
(9) Cliner seases Committee		· ·		•	- · · · · · · · · · · · · · · · · · · ·	nizations?]	
(2) Other assets b Other transcrions: (1) Sales of assets from a nonchardable exempt organization (2) Purchases of assets from a nonchardable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rental of facilities, equipment, or other assets (5) Loans of than guarantees (6) Loans of than guarantees (7) Loans of than guarantees (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) In an answer to any of the above is "Yes," complete the following schedule. Column (p) should always show the fair market 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 organization (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of beaviers, transactions, and charing arrangements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (d) Description of teasifiers, transactions, and charing arrangements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (d) Description of teasifiers, transactions, and charing arrangements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (d) Description of relationship 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (e) Description of relationship 2b If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A (b) Type of organization (c) Description of relationship N/A (c) Description of relationship N/A (d) Description of relationship N/A (e) Description of relationship N/A (f) Description of relationship N/A (g) Permissionship N/A (h) Ty			g foundation to a nor	icharitable exempt or	ganization of:				1	!
b. Other transactions: (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) Rental organization arrangements (5) Loans or lang quarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Italia										
(1) Sales of assets from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rental of facilities, equipment, or other assets (5) Loans or of oang purarities (6) Performance of services or membership or fundrasing solicitations (7) Loans or loan guarantees (8) Performance of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) In the answer to any of the above is Yes, complete the following schedule. Column (6) 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 arrangements. Show in column (6) 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 sections 501(c)(3)) or in section 527? 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 sections 501(c)(3)) or in section 527? 3b If Yes, complete the following schedule. 4c) N/A 4c) The foundation of the following schedule. 4c) N/A 4c) The foundation of the following schedule. 4c) N/A 4c) The foundation of the following schedule. 4c) N/A 4c) Describtion of relationship. 4c) Describti					- •			1a(2)		<u>X</u>
(2) Purchases of assets from a noncharriable exempt organization (3) Reintal of facilities, equipment, or other assets (4) Reinhousement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Sharing of facilities, equipment, making lasts, other assets, or paid employees (8) Table 1			ncharitable evernt o	raanization				45.43		17
(8) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Losars or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Losars or loan guarantees (8) Losars or loan guarantees (9) Losars or loan guarantees (10)	٠,,		•	=						
(4) Rembursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Early 1960 X 1960 X										
(S) Leans or load quarantees (B) Performance of services or membership or fundrating solicitations c Sharing of facilities, equipment, making lists, other assets, or paid employees d if the answer to any of the above is "es;" complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services greenby. 1 Line ro (b) Amount involved (c) Name of noncharitable exempt organization (d) the value of the goods, other assets, or services greenby. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (d) Description of banders, transactions, and sharing arrangements. N/A 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? If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (e) Description of relationship N/A Preparer Signature of officer or finisties Preparer's signature Date Date Preparer Preparer's signature Date Preparer Preparer's signature Preparer's signature Preparer's signature Preparer's signature Preparer's signature Preparer's Signature Preparer's Tax Preparer's Date Preparer Date Preparer Preparer Preparer's Date Preparer Date Preparer Preparer Preparer's Date Preparer Date Preparer Preparer's Date Preparer Date Preparer Preparer's Date Preparer Date Preparer Preparer Date Preparer Preparer Date Preparer Preparer Date Date Preparer Preparer Date Date Preparer Date Date Preparer Da										
(6) Performance of services or membership or fundrasing solicitations c Sharing of facilities, equipment, maining lists, other assets, or paid employees d Ithe answer to any of the above is "Fes," 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 given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (a) the value of the goods, other assets, or services given by the value of the goods, other assets, or services given by the value of the goods, other assets, or services given by the value of the goods, other assets, or services given by the value of the goods, other assets, or services given by the value of the goods, other assets, or services given by the value of the goods, other assets, or services given by the value of the goods, other assets, or services given by the value of the goods, other assets, or services given by the value of the value of the goods, other assets, or services given by the value of the value of the properties of services and the value of the value of the value of the value of the value of the goods, other assets, or services given by the value of the goods, other assets, or services given by the value of the properties of the value of the properties of the value of the value of the properties of the value of the properties of the value of the properties of the properties of the value of the properties of the value of the properties of the value of the properties of the value of the properties of the properties of the value of the properties of the properties of the properties of the value of the properties of the properties of the properties of the properties of the properties of the properties of the properties of the p	٠,	-								
Staring of facilities, equipment, making lists, other assets, or paid employees It I was 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 precised. It I was not the goods, other assets, or services received. It I was not the goods, other assets, or services received. It I was not the goods, other assets, or services received. It I was not the goods, other assets, or services received. It I was not the goods, other assets, or services received. It I was not the goods, other assets, or services received. It I was not the goods, other assets, or services received. It I was not good to the goods, other assets, or services received. It I was not good to the goods, other assets, or services received. It I was not good to the goods, other assets, or services received. It I was not goods, other assets, or services received. It I was not good to the goods, other assets, or services received. It I was not good to the goods, other assets, or services received. It I was not good to the goods, other assets, or services received. It I was not good to the goods, other assets, or services received. It I was not good to the good to th	٠,	•		fundraising solicitatio	ns					
d If the answer to any of the above is Yes, 'complete the following schedule. Column (s) should slawys 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 (s) 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 organization N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization second second in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If Yes X No If Yes, 'complete the following schedule. (a) Name of organization (b) Type of organization (c) Type of organization or relationship N/A Under president of propary, I declare that I have examined the return, including accompanying schedules and statements, and to the best of my knowledge in the return of the proparation of the pr	٠,		•	-						
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 (4) the value of the goods, other assets, or services received. a) Limit no (6) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N / A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 50 f(c) of the Code (other than section 50 f(c)(3)) or in section 5277						ways show the fair	market value of the goods, ot		ets.	
(c) Name of noncharitable exempt organization N/A 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 52?? If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Way the IRS discusse this even with the preparer form than including accompanying schedules and statements, and to the best of my knowledge with the following schedule. Sign with belief, it is them, correct, and complete Decisioation of preparer (other than tappayer) is based on all information of which prepare the any knowledge with the preparer of the state of the second of th									,	
N/A 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 52?? □ If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Complete that the prepared of the prepared (other than taxpayer) is based on all information of which prepare has any knowledge for the prepared form that prepare the prepared form that prepared the prepared form that prepared the prepared form that prepared the prepared form that prepared the prepared form that prepared the prepared form that prepared the prepared form that prepared the prepared form that prepared the prepared form that prepared the prepared form that prepared the prepared form that prepared the prepared form that prepared the prepared form that prepared the prepared form that prepared the prepared form that prepared the prepared form that prepared	colu	mn (d) the value of the								
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 X No	a) Line no	(b) Amount invol	ved (c) N	lame of noncharitable	e exempt organization	(d) Description	n of transfers, transactions, and sh	aring arr	angemer	nts
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?				N/A						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?		<u> </u>								
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?							··· · ································			
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?								 .		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	<u>-</u> .									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?				 				_		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?							- ···			
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
(a) Name of organization (b) Type of organization (c) Description of relationship N/A	2a Is th	e foundation directly or	indirectly affiliated w	rith, or related to, one	or more tax-exempt organ	zations described				
(a) Name of organization (b) Type of organization (c) Description of relationship N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	ın se	ection 501(c) of the Cod	le (other than section	501(c)(3)) or in sect	tion 527?			Yes	X	No
N/A Under penalties of perjury, I declare that I have examined this return, including accompanying achedules 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 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 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 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 and belief, it is true, correct, and complete Declaration of preparer shown below (see instrict). Signature of officer or trustee	b If "Y				· · · · · · · · · · · · · · · · · · ·			_		
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 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 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 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 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 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 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 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 and belief, it is true, correct, and complete Declaration of which preparer has any knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and belief, it is true, correct, and to the best of my knowledge and statements, and to the best of my knowledge and knowledge					(b) Type of organization		(c) Description of relationshi	p		
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 Signature of officer or trustee			1/A							
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 Signature of officer or trustee	_			 						
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 Signature of officer or trustee	 -						· · · · · · · · · · · · · · · · · · ·			
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 Signature of officer or trustee										
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 Signature of officer or trustee	Т	Linder penalties of persity	I declare that I have evan	nined this return, includin	no accompanying echedules and	etatemente, and to the	a host of my knowledge			
Here Signature of officer or trustee Date Title Print/Type preparer's name Preparer's signature Preparer Use Only Firm's name ► WILMINGTON TRUST COMPANY Firm's address ► TRUST TAX SERVICES DE3-C070 1100 N MARKET STREET, DE 19890-0001 Proparer Date Check If PTIN Self- employed P00440203 Ptim's EIN ► 51-0055023 Ptim's address ► TRUST TAX SERVICES DE3-C070 Phone no. (302) 651-8565	Sign						may t			
Signature of officer or trustee Print/Type preparer's name Preparer's signature Preparer's signature Date Check if PTIN self- employed Preparer Use Only Firm's name ➤ WILMINGTON TRUST COMPANY Firm's address ➤ TRUST TAX SERVICES DE3-C070 1100 N MARKET STREET, DE 19890-0001 Phone no. (302) 651-8565	Here	The	2 11-		15-9-16	106m	s <u>how</u>	n below ()?
Print/Type preparer's name Preparer's signature Preparer's signature Preparer's signature Date Check if self- employed self- employed Preparer Use Only Firm's name ➤ WILMINGTON TRUST COMPANY Firm's address ➤ TRUST TAX SERVICES DE3-C070 1100 N MARKET STREET, DE 19890-0001 Phone no. (302) 651-8565		Signature of officer or	trustee	•				_ Yes		No
Paid Preparer Use Only Firm's address ► TRUST TAX SERVICES DE3-C070 1100 N MARKET STREET, DE 19890-0001 self- employed P00440203 Firm's EIN ► 51-0055023 Phone no. (302) 651-8565				Preparer's s		· · · · · · · · · · · · · · · · · · ·	Check I If PTIN			
Paid Preparer Use Only FRANK SCHER, E. A. FRANK SCHER, E. A 05/05/16 P00440203 Firm's name ► WILMINGTON TRUST COMPANY Firm's EIN ► 51-0055023 Firm's address ► TRUST TAX SERVICES DE3-C070 Phone no. (302) 651-8565		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•		<u> </u>	1				
Preparer Use Only Firm's name ► WILMINGTON TRUST COMPANY Firm's address ► TRUST TAX SERVICES DE3-C070 1100 N MARKET STREET, DE 19890-0001 Phone no. (302) 651-8565	Paid	FRANK S	CHER. E.	A. FRANK	SCHER. E. A	05/05/16		440	203	
Use Only Firm's address TRUST TAX SERVICES DE3-C070	-	rer Firm's name 🕨				<u>,,,</u>				
1100 N MARKET STREET, DE 19890-0001 Phone no. (302) 651-8565	Use 0	nly								
		Firm's address	TRUST TA	X SERVICE	S DE3-C070					
	_		1100 N M	IARKET STR	EET, DE 1989	0-0001	Phone no. (302)	<u>651</u> -	<u>- 85</u> 6	55

Schedule B (Form 990, 990-EZ.

Department of the Treasury Internal Revenue Service

or 990-PF)

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

OMB No 1545-0047

Name of the organization

GERRISH H. MILLIKEN FOUNDATION C/O WILMINGTON TRUST COMPANY 009209-009

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number

06-6037106

Organization type (check one). Section: Filers of: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 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** X 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 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 33 1/3% 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 990-PF, Part I, line 2, to

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

GERRISH H. MILLIKEN FOUNDATION

C/O WILMINGTON TRUST COMPANY 009209-009

Employer identification number

06-6037106

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.
(a)	(b)	(c)
N _a	Nome address and ZID + A	Total

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d)
140.	Name, addess, and zir + 4	Total contributions	Type of contribution
1	GERRISH MILLIKEN JR - DEATH BENEFIT 1100 NORTH MARKET ST WILMINGTON, DE 19890	\$ <u>55,205.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	GERRISH MILLIKEN JR RETIREMENT PLAN 1100 NORTH MARKET ST WILMINGTON, DE 19890	\$637,624.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	GERIISH MILLIKEN CUSTODY ACCOUN 009207-000 1100 NORTH MARKET ST WILMINGTON, DE 19890	\$3.	Person X Payroll
			i
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	• •		, , ,
No.	Name, address, and ZIP + 4 G H MILLIKEN FOR G L HICKSON - CRUT 1100 NORTH MARKET ST	Total contributions	Person X Payroll Noncash (Complete Part II for
No. 4	Name, address, and ZIP + 4 G H MILLIKEN FOR G L HICKSON - CRUT 1100 NORTH MARKET ST WILMINGTON, DE 19890 (b)	Total contributions \$ 10,474.	Person X Payroll
(a) No.	Name, address, and ZIP + 4 G H MILLIKEN FOR G L HICKSON - CRUT 1100 NORTH MARKET ST WILMINGTON, DE 19890 (b) Name, address, and ZIP + 4 G H MILLIKEN FOR G L HICKSON - CRUT 1100 NORTH MARKET ST	\$ 10,474.	Person X Payroll

Name of organization

GERRISH H. MILLIKEN FOUNDATION

C/O WILMINGTON TRUST COMPANY 009209-009

06-6037106

Employer identification number

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

art II	Noncash Property (see instructions). Use duplicate copies of Par	t ii π addπionai space is needed.	
(a)		(c)	
No.	(b)	FMV (or estimate)	(d) _{~-}
from	Description of noncash property given	(see instructions)	Date received
Part I		(see man actions)	
	135000 UNITS U.S. TREASURY BONDS		
	5.625% 2/15/27		
-		<u> </u>	12/01/15
-			14/01/15
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I	bescription of notices in property given	(see instructions)	Date received
asti			
-			
 -			
-			
-		<u> </u>	
(a)		<u> </u>	
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	(a) Date received
PartI	pessiphion or noneast property given	(see instructions)	pale received
-			
 -			
-		— ₆	
-	· · · · · · · · · · · · · · · · · · ·	\$	
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part	bescription of noncastr property given	(see instructions)	Date received
-			
-	· · · · · · · · · · · · · · · · · · ·		
-			
-		\$	
-			- · · · · · · · · · · · · · · · · · · ·
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	(a) Date received
Part I	besomption of notices in property given	(see instructions)	Pale i eceived
-			
			
-		 _{\$}	
-		—— * — ——	
(a)			
No.	(b)	(c)	(al\
from	Description of noncash property given	FMV (or estimate)	(d)
Part I	besoription of noncastr property given	(see instructions)	Date received
	·		
-			
-			
-		\$	
3453 10-26-15			90, 990-EZ, or 990-PF) (2

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 4 **Employer identification number** Name of organization GERRISH H. MILLIKEN FOUNDATION /O WILMINGTON TRUST COMPANY 009209-009 <u>06-6037106</u> Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this linfo once) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from 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

				·	
FORM 990-PF INTERE	ST ON SAVING	S AND TEMPOR	ARY CASH IN	VESTMENTS S	STATEMENT 1
SOURCE		(A) REVENUE PER BOOK	NET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME
RESTRICTED SHORT TE INVESTMENT CORP INT RESTRICTED SHORT TE INVESTMENT FD US IN	EREST ERM	1,0	23. 13.	23.	
TOTAL TO PART I, LI	ENE 3	1,0	36.	1,036.	
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES S	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
ARISTOTLE FUND DIVIDEND INCOME K-1 BOX 6 ARISTOTLE FUND INTEREST INCOME	3,106.	0.	3,106.	3,106.	
K-1 BOX 5 SYLVAN PARTNERS LLC - SERIES I	130.	0.	130.	130.	· ·
DIVIDEND INCOME SYLVAN PARTNERS LLC - SERIES I	8,470.	0.	8,470.	8,470.	,
INTEREST INCOME U. S. INTEREST (DIRECT FROM	2.	0.	2.	2.	,
SPECIFIC BONDS)	41,688.	0.	41,688.	41,688.	•
TO PART I, LINE 4	53,396.	0.	53,396.	53,396.	

			-	
FORM 990-PF	LEGAL	FEES	នា	PATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES IVINS PHILLIPS BARKER	4,500.	4,500.		0.
TO FM 990-PF, PG 1, LN 16A =	4,500.	4,500.		0.
FORM 990-PF	ACCOUNTI	NG FEES	នា	PATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADMINISTRATIVE FEES	2,508.	1,254.		1,254.
TO FORM 990-PF, PG 1, LN 16B	2,508.	1,254.		1,254.
EODY 000 DE	ma v	n a		
FORM 990-PF	TAX	es 	Si	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
2015 FEDERAL EXCISE ESTIMATED TAXES PAID	416.	0.		0.
TO FORM 990-PF, PG 1, LN 18 =	416.	0.		0.
FORM 990-PF	OTHER E	XPENSES	Si	PATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
WILMINGTON TRUST (CUSTODIAN) FEE ARISTOTLE FUND OTHER	1,287.	1,287.		0.
DEDUCTIONS BOX 13K SYLVAN PARTNERS LLC OTHER	21,987.	21,987.		0.
DEDUCTIONS BOX 13K & 13L	536.	536.		0.

	-		-		
GERRISH H. MILLIKEN FOUNDATI	ON C/O WILMI	_		06-6037	106
ADMISSION FEE SYLVAN PARTNERS LLC	1,448.	1,4	148.		0.
TO FORM 990-PF, PG 1, LN 23	25,258.	25,2	258.		0.
=		 -			
ORM 990-PF OTHER INCREASES	IN NET ASSET	S OR FUI	ND BALANCES	STATEMENT	7
DESCRIPTION				AMOUNT	
HORT TERM INVESTMENT FUND & S	YLVAN PARTNE	ERS LLC I	DIVIDEND		
TIMING DIFFERENCE TRANSFER REVERSED FROM PRIOR Y	EAR			1,0! 4,9:	
COTAL TO FORM 990-PF, PART III	, LINE 3			5,989.	
ORM 990-PF OTHER DECREASES	IN NET ASSE	ETS OR FU	JND BALANCES	STATEMENT	8
DESCRIPTION				AMOUNT	
DIFFERENCE BETWEEN FMV AND COSTROM CRUT	T OF US TRE	ASURY CON	TRIBUTED	52,88	82.
COTAL TO FORM 990-PF, PART III	, LINE 5			52,882.	
FORM 990-PF U.S. AND ST	ATE/CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT	9
ESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET	r
INITED STATES TREASURY NOTES,	SEE X		3,802,771.	3,845,27	—— 79.
OTAL U.S. GOVERNMENT OBLIGATI	ons	-	3,802,771.	3,845,27	
TOTAL STATE AND MUNICIPAL GOVE	RNMENT OBLIC	- EATIONS			

3,802,771.

3,845,279.

POTAL TO FORM 990-PF, PART II, LINE 10A

Statement Analysis of Changes in Net Assets or Fund Balances Gerrish H Milliken Foundation EIN. 06-6037106 12/31/2015

MUTUAL FUND ADJUSTMENT

Sylvan

Income Fund SI	summary heet	T/C 906 SUMMARY	plus + minus -	\$6,42° \$8,05°	7.71	(24.000
				(\$1,63	0 07)	(\$1.630.07)
Ending	cost basis	M/V	plus +	966,22	20.28	
	ng cost basis	M/V	minus -	•	0.00	
	purchases	T/C 946	minus -	(\$963,552		
Cost of	•	TAX COST BAS	•	·	2.00) 0.00	
003(0)	Saics	1700 0001 070	ic plus +			00 007 70
				2,00	57.78	\$2,667.78
Commo	on fund loss	T/C 46	plus +	œ.	0.00	
	n fund gain	T/C 510	minus -	•	0.00	
001.11110	m rana gam	170 010	11111143	_	<u> </u>	80.00
						\$0.00
SHORT TERM INV	ESTMENT FL	JNDS				
0044 :		0045		• • •		
	come posted i		plus +	\$10		
2015 inc	come posted i	n 2016	minus -	\$8	<u>7.11 </u>	\$15.96
NET FUND ADJUS	TMENT/VARI	ANCE				\$1,053.67

FORM •990-PF O	THER INVESTMENTS		STAT	EMENT 10
DESCRIPTION	VALUATION METHOD	BOOK VALUE		MARKET ALUE
THE ARISTOTLE FUND OF MAINE, LP SYLVAN PARTNERS LLC - SERIES I	COST COST	1,526,85 969,12		,502,766. 928,245.
TOTAL TO FORM 990-PF, PART II, L	INE 13	2,495,97	78. 2	,431,011.
	ST OF OFFICERS, D D FOUNDATION MANA		STAT	EMENT 11
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
PHOEBE MILLIKEN P.O. BOX 1926 SPARTANBURG, SC 29304	TRUSTEE 1.00	0.	0.	0.
PETER MILLIKEN P.O. BOX 1926 SPARTANBURG, SC 29304	TRUSTEE 1.00	0.	0.	0.
THOMAS HAMILTON P.O. BOX 1926 SPARTANBURG, SC 29304	OFFICER / TREA	SURER 0.	0.	0.
STEPHEN G. MILLIKEN P.O. BOX 1926 SPARTANBURG, SC 29304	TRUSTEE 1.00	0.	0.	0.
JOHN W. MILLIKEN P.O. BOX 1926 SPARTANBURG, SC 29304	TRUSTEE 1.00	0.	0.	0.
PHOEBE WHIPPLE P.O. BOX 1926 SPARTANBURG, SC 29304	TRUSTEE 1.00	0.	0.	0.
GERRISH H. MILLIKEN III P.O. BOX 1926 SPARTANBURG, SC 29304	TRUSTEE 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.

C/O WILMINGTON TRUST COMPANY 009209-009 06-6037106 Part XV Supplementary Information

Part XV Supplementary Informatio	n			
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	John Bullon	
BEATRIX FARRAND SOCIETY		PUBLIC CHARITY	GENERAL AND/OR	
PO BOX 111 MOUNT DESERT ME 04660			EDUCATIONAL PURPOSE	E00
				500.
BOCA GRANDE HEALTH CLINIC		PUBLIC CHARITY	GENERAL AND/OR	
PO BOX 2340			EDUCATIONAL PURPOSE	
BOCA GRANDE, FL 33921				200.
CAMP BEECH CLIFF		PUBLIC CHARITY	GENERAL AND/OR	
PO BOX 381 MOUNT DESERT. ME 04660			EDUCATIONAL PURPOSE	
MONT SECURE, IN OCCUPA				200,
CAMPHILL FOUNDATION		PUBLIC CHARITY	GENERAL AND/OR	
285 HUNGRY HOLLOW ROAD			EDUCATIONAL PURPOSE	
CHESTNUT RIDGE, NY 10977				1,000.
CHRISTODORA, INC ONE EAST 53RD STREET 1401		PUBLIC CHARITY	GENERAL AND/OR	
NEW YORK NY 10022			EDUCATIONAL PURPOSE	1.100.
COLLEGE OF FOREST RESOURCES -		PUBLIC CHARITY	GENERAL AND/OR	1,100,
WASHINGTON PULP & PAPER FOUNDATION			EDUCATIONAL PURPOSE	
INC PO BOX 352100				
SEATTLE, WA 98195				2.000.
COLLEGE OF THE ATLANTIC		PUBLIC CHARITY	GENERAL AND/OR	
105 EDEN STREET			EDUCATIONAL PURPOSE	
BAR HARBOR ME 04609				15,000.
COLLEGE OF WILLIAM & MARY FOUNDATION		DIDLIC CUARTED	GENERAL AND/OR	
PO BOX 8795		FOBLIC CHARITI	EDUCATIONAL PURPOSE	
WILLIAMSBURG, VA 23187				5,000.
COMBINED ORGANIZATION OF POLICE -		PUBLIC CHARITY	GENERAL AND/OR	
GREENWICH POLICE DEPT	`		EDUCATIONAL PURPOSE	
PO BOX 1611				
GREENWICH, CT 06836				500,
DANA-FARBER CANCER INSTITUTE RUNNING		PUBLIC CHARITY	GENERAL AND/OR	
PROGRAM			EDUCATIONAL PURPOSE	
450 BROOKLINE AVENUE BOSTON, MA 02215				1,000,
Total from continuation sheets				504 800

C/O WILMINGTON TRUST COMPANY 009209-009 06-6037106

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual,	Foundation	Dumana of avent or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
DOCTORS WITHOUT BORDERS		PUBLIC CHARITY	GENERAL AND/OR	
333 SEVENTH AVENUE, 2ND FLOOR			EDUCATIONAL PURPOSE	
NEW YORK, NY 10001				5,00
DOWNEAST HORIZONS FOUNDATION		PUBLIC CHARITY	GENERAL AND/OR	
1200 STATE HIGHWAY 3			EDUCATIONAL PURPOSE	
BAR HARBOR, ME 04609			, ,	2,500
FAMILY CENTERS, INC		PUBLIC CHARITY	GENERAL AND/OR	
PO BOX 7550			EDUCATIONAL PURPOSE	
GREENWICH, CT 06836		 -		500
FIRST CHURCH OF THE UNITARIAN		PUBLIC CHARITY	GENERAL AND/OR	
PO BOX 66			EDUCATIONAL PURPOSE	
LANCASTER, MA 01523-0066				1,000
FOOD WORKS		PUBLIC CHARITY	GENERAL AND/OR	
64 MAIN STREET			EDUCATIONAL PURPOSE	
MONPELIER, VT 05602		 		500
FRIENDS OF ACADIA		PUBLIC CHARITY	GENERAL AND/OR	
43 COTTAGE STREET			EDUCATIONAL PURPOSE	
BAR HARBOR, ME 04609	_	 		2,000
FRIENDS OF BOCA GRANDE COMMUNITY		PUBLIC CHARITY	GENERAL AND/OR	
CENTER, INC			EDUCATIONAL PURPOSE	
PO BOX 1222				
BOCA GRANDE FL 33921			 	300
GASPARILLA ISLAND CONSERVATION &		PUBLIC CHARITY	GENERAL AND/OR	
IMPROVEMENT ASSOCIATION			EDUCATIONAL PURPOSE	
PO BOX 446				
BOCA GRANDE, FL 33921				500
GIDEON'S PROMISE, INC		PUBLIC CHARITY	GENERAL AND/OR	
34 PEACHTREE ST NW, STE 2460			EDUCATIONAL PURPOSE	
ATLANTA, GA 30303				5,000
GIDEON'S PROMISE, INC		PUBLIC CHARITY	GENERAL AND/OR	
101 MARIETTA STREET NW 250			EDUCATIONAL PURPOSE	
ATLANTA GA 30303 Total from continuation sheets		<u> </u>		5,000

C/O WILMINGTON TRUST COMPANY 009209-009 06-6037106 Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to **Amount** contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient GLENVILLE FIRE CO NO 2 INC PUBLIC CHARITY GENERAL AND/OR 266 GLENVILLE ROAD EDUCATIONAL PURPOSE GREENWICH, CT 06831 200. GREAT HARBOR MARITIME MUSEUM PUBLIC CHARITY GENERAL AND/OR PO BOX 145 EDUCATIONAL PURPOSE NORTHEAST HARBOR ME 04662 500. GREENWICH EMERGENCY MEDICAL SERVICE PUBLIC CHARITY GENERAL AND/OR INCORPORATED EDUCATIONAL PURPOSE 1111 EAST PUTNAM AVENUE RIVERSIDE CT 06878 500. GREENWICH HOSPITAL ASSOCIATION PUBLIC CHARITY GENERAL AND/OR 5 PERRYRIDGE ROAD EDUCATIONAL PURPOSE GREENWICH CT 06830 5,000. GREENWICH LAND TRUST, INC PUBLIC CHARITY GENERAL AND/OR 2 EAST SUITE D EDUCATIONAL PURPOSE COS COB CT 06807 200. GREENWICH POLICE DEPARTMENT PUBLIC CHARITY GENERAL AND/OR SCHOLARSHIP FUND INC EDUCATIONAL PURPOSE 11 BRUCE PLACE GREENWICH CT 06830 2,000. HOME PUBLIC CHARITY GENERAL AND/OR PO BOX 10 EDUCATIONAL PURPOSE ORLAND, ME 04472 3,000, HANCOCK COUNTY MEDICAL MISSION PUBLIC CHARITY GENERAL AND/OR PO BOX 241 EDUCATIONAL PURPOSE ELLSWORTH, ME 04605 10,000. HARTE RESEARCH INSTITUTE FOUNDATION PUBLIC CHARITY GENERAL AND/OR 20742 STONE OAK PKWY, STE 107 EDUCATIONAL PURPOSE SAN ANTONIO, TX 78258 15,000. HOSPICE VOLUNTEERS OF HANCOCK COUNTY PUBLIC CHARITY GENERAL AND/OR 14 MCKENZIE AVENUE EDUCATIONAL PURPOSE ELLSWORTH ME 04605 200. Total from continuation sheets

GERRISH H. MILLIKEN FOUNDATION
C/O WILMINGTON TRUST COMPANY 009209-009

06-6037106 Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient HURRICANE ISLANNO FOUNDATION PUBLIC CHARITY GENERAL AND/OR PO BOX 1280 EDUCATIONAL PURPOSE ROCKLAND ME 04841 30,000. PUBLIC CHARITY GENERAL AND/OR ISLAND CONNECTIONS EDUCATIONAL PURPOSE 15 EAGLE LAKE ROAD BAR HARBOR ME 04609 500. PUBLIC CHARITY GENERAL AND/OR ISLAND HOUSING TRUST PO BOX 851 EDUCATIONAL PURPOSE MOUNT DESERT ME 04660 5.000. ISLAND INSTITUTE PUBLIC CHARITY GENERAL AND/OR PO BOX 648 EDUCATIONAL PURPOSE ROCKLAND, ME 04841 500. ISLAND READERS AND WRITERS PUBLIC CHARITY GENERAL AND/OR PO BOX 227 EDUCATIONAL PURPOSE MOUNT DESERT, ME 04660 1,000. JACKSON LABORATORY PUBLIC CHARITY GENERAL AND/OR PO BOX 254 EDUCATIONAL PURPOSE BAR HARBOR, ME 04609 1,000. JEFFERSON DAVIS GRANT FOUNDATION PUBLIC CHARITY GENERAL AND/OR PO BOX 620 EDUCATIONAL PURPOSE BAR HARBOR ME 04609-0620 20,000. JOHANN FUST COMMUNITY LIBRARY OF BOCA PUBLIC CHARITY GENERAL AND/OR GRANDE FLORIDA INC EDUCATIONAL PURPOSE PO BOX 309 BOCA GRANDE, FL 33921 100. JUDICIAL WATCH, INC PUBLIC CHARITY GENERAL AND/OR 425 THIRD STREET, SW, SUITE 800 EDUCATIONAL PURPOSE WASHINGTON, DC 20024 1,000, JUSTICEAID PUBLIC CHARITY GENERAL AND/OR 2120 KALORAMA ROAD NW, APT 3 EDUCATIONAL PURPOSE WASHINGTON, DC 20008 5,000. Total from continuation sheets

GERRISH H. MILLIKEN FOUNDATION C/O WILMINGTON TRUST COMPANY 009209-009 06-6037106

Part XV Supplementary Information 3 Grants and Contributions Paid During the Ye	ear (Continuation)	·		
Recipient	If recipient is an individual,	Farman	Dung and of and the	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LOUISE DUPONT CROWNINSHIELD COMMUNITY		PUBLIC CHARITY	GENERAL AND/OR	
HOUSE			EDUCATIONAL PURPOSE	
PO BOX 101				
BOCA GRANDE, FL 33921				500
MAINE AUDOBON SOCIETY		PUBLIC CHARITY	GENERAL AND/OR	
20 GILSLAND FARM ROAD			EDUCATIONAL PURPOSE	
FALMOUTH, ME 04105				500
MAINE COAST HERITAGE TRUST		PUBLIC CHARITY	GENERAL AND/OR	
1 BOWDOIN MILL ISLAND, STE 201			EDUCATIONAL PURPOSE	
TOPSHAM ME 04086				1,000
MAINE COMMUNITY FOUNDATION, INC		PUBLIC CHARITY	GENERAL AND/OR	
245 MAIN STREET			EDUCATIONAL PURPOSE	
ELLSWORTH, ME 04605				10,500
MAINE FARMLAND TRUST, INC		PUBLIC CHARITY	GENERAL AND/OR	
97 MAIN STREET			EDUCATIONAL PURPOSE	
BELFAST ME 04915				500,
MAINE LIGHTHOUSE CORPORATION		PUBLIC CHARITY	GENERAL AND/OR	
109 MAIN STREET			EDUCATIONAL PURPOSE	
BAR HARBOR, ME 04609				1,000.
MAINE ORGANIC FARMERS & GARDENERS		PUBLIC CHARITY	GENERAL AND/OR	
ASSOCIATION			EDUCATIONAL PURPOSE	
PO BOX 170				
UNITY, ME 04988				5,000.
MAINE PUBLIC BROADCASTING CORPORATION		PUBLIC CHARITY	GENERAL AND/OR	
1450 LISBON STREET			EDUCATIONAL PURPOSE	
LEWISTON, ME 04240				5,000.
MAINE SEA COAST MISSIONARY SOCIETY	;	PUBLIC CHARITY	GENERAL AND/OR	
127 WEST STREET			EDUCATIONAL PURPOSE	
BAR HARBOR, ME 04609		-		1,000.
MAINE WOMEN'S FUND		PUBLIC CHARITY	GENERAL AND/OR	
74 LUNT ROAD, STE 100			EDUCATIONAL PURPOSE	
FALMOUTH ME 04105	<u> </u>		<u> </u>	5,000,

C/O WILMINGTON TRUST COMPANY 009209-009 06-6037106

Mame and address (nome or business) Mame and address (nome and business) Mame and address (nome and and now and and and now and and and now and address and and now and and and now and and and and now and and and now and and and and now and and and and now and and and and now and and and now and and and and now and and and and now and and and now and and and and now and and and and now and and and now and and and and now and and and now and and and and now and and and and and and and and and and	Part XV Supplementary Information	n			
Name and address (nome or business) Show any relationship to my production managed state of contribution and production managed state of recombination and production state of recombination and production state of recombination and production state of recombination and product of rec	3 Grants and Contributions Paid During the				
BERRY-GO-ROUND INC /2 BOLLING PLACE REMAYLER, CT 06839 BESERVE KURHARDT FOUNDATION, INC S WISELERS AVENUE, SAD FLOOR LEASANTYLLE, RY 10570 LEASANTYLLE, RY 10570 LEASANTYLLE, RY 10570 LEASANTYLLE, RY 10570 LEASANTYLLE, RY 10570 LEASANTYLLE, RY 10570 LEASANTYLLE, RY 10570 LEASANTYLLE, RY 10570 LEASANTYLLE, RY 10570 LUBLIC CHARITY DEMERAL AND/OR EDUCATIONAL PURPOSE J. 000 LOUNT DESERT FIRE AND RESCUE SECCIATION - FIRE DEFERTMENT OR BOX 248 COUNT DESERT ISLAND BIOLOGICAL ADDORATORY OR BOX 258 ALEBURY COVE, ME 04672 LOUNT DESERT ISLAND HISTORICAL COUNT DESERT ISLAND HISTORICAL COUNT DESERT SLAND HISTORICAL COUNT DESERT SLAND HISTORICAL COUNT DESERT LAND & GALUEN PRESERVE OR BOX 356 ALEBURY COVE, ME 04672 LOUNT DESERT LAND & GALUEN PRESERVE OR BOX 357 ALEBURY DESERT LAND & GALUEN PRESERVE OR BOX 358 ALEBURY COVE, ME 04675 LOUNT DESERT HAND & GALUEN PRESERVE OR BOX 359 EAL HANBOR, ME 04652 LOUNT DESERT HAND & GALUEN PRESERVE OR BOX 356 COUNT DESERT HAND & GALUEN PRESERVE OR BOX 357 ALEBURY DESERT HAND & GALUEN PRESERVE OR BOX 358 EAL HANBOR, ME 04675 LOUNT DESERT HAND & GALUEN PRESERVE OR BOX 358 EAL HANBOR, ME 04675 LOUNT DESERT HAND & GALUEN PRESERVE OR BOX 358 EAL HANBOR, ME 04675 LOUNT DESERT HAND & GALUEN PRESERVE OR BOX 358 EAL HANBOR, ME 04675 LOUNT DESERT HAND & GALUEN PRESERVE OR BOX 358 EAL HANBOR, ME 04675 LOUNT DESERT HAND AND RESCUE SECCITATION - FULLIC CHARITY DEMERAL AND/OR EDUCATIONAL PURPOSE LOUNT DESERT HAND AND RESCUE SECCITATION - FULLIC CHARITY DEMERAL AND/OR EDUCATIONAL PURPOSE LOUNT DESERT HAND AND RESCUE SECCITATION - FULLIC CHARITY DEMERAL AND/OR EDUCATIONAL PURPOSE LOUNT DESERT HAND AND RESCUE SECCITATION - FULLIC CHARITY DEMERAL AND/OR EDUCATIONAL PURPOSE LOUNT DESERT HAND AND RESCUE SECCITATION - FULLIC CHARITY DEMERAL AND/OR EDUCATIONAL PURPOSE LOUNT DESERT HAND AND RESCUE SECCITATION - FULL CHARITY DEMERAL AND/OR EDUCATIONAL PURPOSE LOUNT DESERT HAND AND RESCUE SECCITATION - FULL CHARITY DEMERAL AND/OR EDUCATIONAL PURPOSE LOUNT DESERT HAND AND RESCUE SECCITATI	·	show any relationship to			Amount
### PUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE ###################################	Name and address (nome or business)	or substantial contributor			
### PUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE ###################################	MERRY-GO-ROUND INC		PUBLIC CHARTTY	GENERAL AND/OR	
REENWICH, CT 98830 ESERVE KUNNARDT FOUNDATION, INC S WIEELER AVENUE, 340 FLOOR LEASANTVILLE, NY 10870 ITSS HALL'S SCHOOL 92 HOLKES ROAD ITSS HALL'S SCHOOL 92 HOLKES ROAD ITSPIELD, MA 01201 OUNT DESERT FIRE AND RESCUE SSOCIATION - FIRE DEPARTMENT O BOX 248 OUNT DESERT SLAND BIOLOGICAL ABORATORY O BOX 486 OUNT DESERT ISLAND BIOLOGICAL ABORATORY O BOX 503 OUNT DESERT ISLAND HISTORICAL OCIETY O BOX 503 OUNT DESERT ISLAND HISTORICAL OCIETY O BOX 503 OUNT DESERT HEARD, ME 04662 IN 000 OUNT DESERT SLAND HISTORICAL OCIETY O BOX 503 OUNT DESERT HARDOR, ME 04672 IN 000 OUNT DESERT HARDOR, ME 04672 IN 000 OUNT DESERT HARDOR, ME 04672 OUNT DESERT HARDOR, ME 04660 OUNT DESERT HARDOR, ME 04675 OUNT DESERT HARDOR, ME 04675 OUNT DESERT LAND 4 GARDEN FRESERVE O BOX 503 OUNT DESERT HARDOR, ME 04675 OUNT DESERT HARDOR, ME 04672 OUNT DESERT HARDOR, ME 04672 OUNT DESERT HARDOR, ME 04675 OUNT DESERT HARDOR, ME 04672 OUNT DESERT HARDOR, ME 04662 OUNT DESERT HARDOR, ME 04662 OUNT DESERT HARDOR, ME 04662	1/2 BOLLING PLACE			1	
### BWHELER AVENUE, 33D FLOOR LEASANTVILLE, NY 10570 ILEASANTVILLE, NY 10570 PUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 30,000 INTERIOR FIRE AND RESCUE SSOCIATION - FIRE DEPARTMENT O BOX 248 COUNT DESERT ISLAND BIOLOGICAL ABORATORY O BOX 35 ALSBURY COVE, ME 04672 IL.000 INTERIOR ISLAND HISTORICAL COLIETY O BOX 653 COUNT DESERT, ME 04660 ILLOUR DESERT LAND & GARDEN PRESERVE O BOX 208 IRAL HARBOR, NE 04675 ILLOUR DESERT MEDICAL CENTER O BOX 256 INTERIOR MEDICAL AND/OR EDUCATIONAL PURPOSE INTERIOR MEDICAL AND/OR EDUCATIONAL PURPOSE INTERIOR MEDICAL AND/OR EDUCATIONAL PURPOSE INTERIOR MEDICAL CENTER O BOX 256 INTERIOR MEDICAL AND/OR EDUCATIONAL PURPOSE INTERIOR MEDICAL AND/OR EDUCATIONAL PURPOSE INTERIOR MEDICAL CENTER O BOX 256 INTERIOR MEDICAL AND/OR EDUCATIONAL PURPOSE INT	GREENWICH, CT 06830				100
### BWHELER AVENUE, 33D FLOOR LEASANTVILLE, NY 10570 ILEASANTVILLE, NY 10570 PUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 30,000 INTERIOR FIRE AND RESCUE SSOCIATION - FIRE DEPARTMENT O BOX 248 COUNT DESERT ISLAND BIOLOGICAL ABORATORY O BOX 35 ALSBURY COVE, ME 04672 IL.000 INTERIOR ISLAND HISTORICAL COLIETY O BOX 653 COUNT DESERT, ME 04660 ILLOUR DESERT LAND & GARDEN PRESERVE O BOX 208 IRAL HARBOR, NE 04675 ILLOUR DESERT MEDICAL CENTER O BOX 256 INTERIOR MEDICAL AND/OR EDUCATIONAL PURPOSE INTERIOR MEDICAL AND/OR EDUCATIONAL PURPOSE INTERIOR MEDICAL AND/OR EDUCATIONAL PURPOSE INTERIOR MEDICAL CENTER O BOX 256 INTERIOR MEDICAL AND/OR EDUCATIONAL PURPOSE INTERIOR MEDICAL AND/OR EDUCATIONAL PURPOSE INTERIOR MEDICAL CENTER O BOX 256 INTERIOR MEDICAL AND/OR EDUCATIONAL PURPOSE INT					
LEASANTVILLE, NY 10570 1.000 115S HALL'S SCHOOL 92 HOLMES ROAD 11TSFIELD, MA 01201 30,000 COUNT DESERT FIRE AND RESCUE SSOCIATION - FIRE DEPARTMENT O BOX 248 COUNT DESERT ISLAND BIOLOGICAL ABORATORY O BOX 35 ALSBURY COVE, ME 04672 COUNT DESERT ISLAND HISTORICAL CCIETY O BOX 53 COUNT DESERT LAND A GARDEN PRESERVE O BOX 53 COUNT DESERT LAND & GARDEN PRESERVE O BOX 633 COUNT DESERT LAND & GARDEN PRESERVE O BOX 653 COUNT DESERT LAND & GARDEN PRESERVE O BOX 650 OCUNT DESERT MEDICAL CENTER O BOX 208 COUNT DESERT MEDICAL CENTER O BOX 208 OUNT DESERT MEDICAL CENTER O BOX 206 OUNT DESERT MEDICAL CENTER O BOX 926 OUNT DESERT MEDICAL CENTER O BOX 207 OUNT DESERT MEDICAL CENTER O BOX 208 OUNT DESERT MEDICAL CENTER OUNT DESERT MEDICAL AND/OR ENTERAL AND/OR	•		PUBLIC CHARITY		
ISS HALL'S SCHOOL 92 HOLMES ROAD 11TISFIELD, MA 01201 23 HOLMES ROAD 11TISFIELD, MA 01201 230,000 10UNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 OUNT DESERT ISLAND BIOLOGICAL ABORATORY O BOX 253 CUNT DESERT ISLAND HISTORICAL COUNTY DESERT ISLAND HISTORICAL OUNT DESERT LAND & GARDEN PRESERVE O BOX 268 COUNT DESERT LAND & GARDEN PRESERVE O BOX 208 EAL HARROR, ME 04662 DOUNT DESERT MEDICAL CENTER O BOX 268 COUNT DESERT MEDICAL CENTER O BOX 269 COUNT DESERT MEDICAL CENTER O BOX 269 COUNT DESERT MEDICAL CENTER O BOX 260 COUNT DESERT MEDICAL CENTER O BOX 266 COUNT DESERT MEDICAL CENTER O BOX 266 COUNT DESERT MEDICAL CENTER O BOX 276 COUNT DESERT MEDICAL CENTER OUNT DESERT MEDICAL CENTER OUNT DESERT MEDICAL CENTER ATERCAL AND/OR EDUCATIONAL PURPOSE 10,000 10,000 ENERGAL AND/OR EDUCATIONAL PURPOSE 10,000 EDUCATIONAL PURPOSE 10,000	•			EDUCATIONAL PURPOSE	
92 HOLMES ROAD INTERPIELD, NA 01201 SOCIATIONAL FURPOSE 30,000 DUNT DESERT FIRE AND RESCUE SSOCIATION - FIRE DEPARTMENT O EOX 248 ORTHEAST HARBOR, ME 04662 DULLIC CHARITY SENERAL AND/OR EDUCATIONAL FURPOSE 2,000 DUNT DESERT ISLAND BIOLOGICAL ADDRARORY O BOX 35 ALSBURY COVE, ME 04672 DUBLIC CHARITY DENERAL AND/OR EDUCATIONAL FURPOSE 1,000 DUNT DESERT ISLAND HISTORICAL COLIETY O BOX 653 GUINT DESERT, ME 04660 DULLIC CHARITY SENERAL AND/OR EDUCATIONAL FURPOSE 10,000 DUNT DESERT, ME 04675 FUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 100,000 DUNT DESERT LAND & GARDEN PRESERVE O BOX 208 EAL HARBOR, ME 04675 DUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 106,000 DUNT DESERT MEDICAL CENTER O BOX 926 COUNT ST. JOSEPH HIGHMOOD STREET HIGHMOOD STREET HATERVILLE, ME 04901 DUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 COUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 ORTHEAST HARBOR, ME 04662 30,000	FLEASANIVIEDE, NI 10370				1,000
92 HOLMES ROAD ITTSFIELD, MA 01201 OUNT DESERT FIRE AND RESCUE SSOCIATION - FIRE DEPARTMENT O BOX 248 ORTHEAST HARBOR, ME 04662 OUNT DESERT ISLAND BIOLOGICAL ABORATORY O BOX 35 ALSBURY COVE, ME 04672 OUNT DESERT ISLAND HISTORICAL OCIETY O BOX 653 OUNT DESERT, ME 04660 OUNT DESERT, ME 04660 IOUNT DESERT, ME 04672 OUNT DESERT, ME 04660 OUNT DESERT, ME 04675 OUNT DESERT LAND & GARDEN PRESERVE O BOX 208 EAL HARBOR, ME 04675 OUNT DESERT MEDICAL CENTER O BOX 926 ORTHEAST HARBOR, ME 04662 OUNT SESERT MEDICAL CENTER O BOX 926 ORTHEAST HARBOR, ME 04662 OUNT SESERT MEDICAL CENTER O BOX 926 ORTHEAST HARBOR, ME 04662 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 928 OUNT DESERT SANDOR MEDICAL CHARITY SEMERAL AND/OR EDUCATIONAL PURPOSE 1,000	MISS HALL'S SCHOOL		PUBLIC CHARITY	GENERAL AND/OR	
OUNT DESERT FIRE AND RESCUE SSOCIATION - FIRE DEPARTMENT O BOX 248 ORTHEAST HARROR, ME 04662 2,000 OUNT DESERT ISLAND BIOLOGICAL ABDRATORY O BOX 35 ALSBURY COVE, ME 04672 OUNT DESERT ISLAND HISTORICAL OCIETY O BOX 653 OUNT DESERT, ME 04660 10,000 OUNT DESERT, ME 04660 OUNT DESERT, ME 04660 OUNT DESERT, ME 04675 OUNT DESERT, ME 04660 OUNT DESERT, ME 04675 OUNT DESERT LAND & GARDEN PRESERVE O BOX 208 CEAL HARBOR, ME 04675 OUNT DESERT MEDICAL CENTER O BOX 208 OUNT DESERT MEDICAL CENTER O BOX 208 OUNT DESERT MEDICAL CENTER O BOX 926 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 OUNT MEASURE MEROR, ME 04662	492 HOLMES ROAD			1	
SSOCIATION - FIRE DEPARTMENT O BOX 248 ORTHEAST HARBOR, ME 04662 2,000 OUNT DESERT ISLAND BIOLOGICAL ABDRANTORY O BOX 35 ALESURY COVE, ME 04672 DUBLIC CHARITY DEBERAL AND/OR EDUCATIONAL PURPOSE 1,000 OUNT DESERT ISLAND HISTORICAL OCIETY O BOX 208 OUNT DESERT, ME 04660 DUINT DESERT, ME 04675 DUINT DESERT LAND & GARDEN PRESERVE O BOX 208 CEAL HARBOR, ME 04675 DUINT DESERT MEDICAL CENTER O BOX 208 OUNT DESERT MEDICAL CENTER O BOX 296 OUNT DESERT MEDICAL CENTER O BOX 296 OUNT DESERT MEDICAL CENTER O BOX 296 OUNT DESERT MEDICAL CENTER O BOX 926 OUNT DESERT MEDICAL CENTER OUNT DESERT MEDICAL CENTER O BOX 926 OUNT DESERT MEDICAL CENTER OUN	PITTSFIELD, MA 01201				30,000
O BOX 248 ORTHEAST HARBOR, ME 04662 COUNT DESERT ISLAND BIOLOGICAL ABORATORY O BOX 35 ALESURY COVE, ME 04672 COUNT DESERT ISLAND HISTORICAL COLIETY O BOX 653 COUNT DESERT, ME 04660 COUNT DESERT, ME 04660 COUNT DESERT, ME 04660 COUNT DESERT LAND & GARDEN PRESERVE O BOX 268 COUNT DESERT LAND & GARDEN PRESERVE O BOX 208 COUNT DESERT MEDICAL CENTER O BOX 296 COUNT DESERT MEDICAL CENTER O BOX 296 COUNT SESERT MEDICAL CENTER O BOX 296 COUNT SESERT MEDICAL CENTER O BOX 296 COUNT ST. JOSEPH HIGHWOOD STREET HIGHWOOD STREET ATERVILLE, ME 04901 COUNT DESERT PIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 COUNT DESERT PIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 COUNTERST HARBOR, ME 04662 3,000 3,000	MOUNT DESERT FIRE AND RESCUE		PUBLIC CHARITY	GENERAL AND/OR	
ORTHEAST HARBOR, ME 04662 OUNT DESERT ISLAND BIOLOGICAL ABORATORY O BOX 35 ALLSBURY COVE, ME 04672 OUNT DESERT ISLAND HISTORICAL OUIT DESERT ISLAND HISTORICAL OUIT DESERT ISLAND HISTORICAL OUIT DESERT, ME 04660 OUNT DESERT, ME 04660 OUNT DESERT LAND & GARDEN PRESERVE O BOX 208 DEAL HARBOR, ME 04675 OUNT DESERT MEDICAL CENTER O BOX 208 ORTHEAST HARBOR, ME 04662 OUNT ST. JOSEPH HIGHWOOD STREET ATERVILLE, ME 04901 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 ORTHEAST HARBOR, ME 04662 PUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 10,000 DUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 ORTHEAST HARBOR, ME 04662	ASSOCIATION - FIRE DEPARTMENT			EDUCATIONAL PURPOSE	
OUNT DESERT ISLAND BIOLOGICAL ABORATORY O BOX 35 ALSBURY COVE, ME 04672 OUNT DESERT ISLAND HISTORICAL OUNT DESERT ISLAND HISTORICAL OUNT DESERT ISLAND HISTORICAL OUNT DESERT, ME 04660 OUNT DESERT, ME 04660 OUNT DESERT LAND & GARDEN PRESERVE O BOX 208 EAL HARBOR, ME 04675 OUNT DESERT MEDICAL CENTER O BOX 208 OUNT DESERT MEDICAL CENTER O BOX 208 OUNT DESERT MEDICAL CENTER O BOX 926 ORTHEAST HARBOR, ME 04662 OUNT ST. JOSEPH HIGHWOOD STREET ACTERVILLE, ME 04901 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 ORTHEAST HARBOR, ME 04662 3,000	PO BOX 248				
ABORATORY O BOX 35 ALSBURY COVE, ME 04672 1,000 OUNT DESERT ISLAND HISTORICAL OCIETY O BOX 653 OUNT DESERT, ME 04660 OUNT DESERT, ME 04660 OUNT DESERT, ME 04675 OUNT DESERT LAND & GARDEN PRESERVE O BOX 208 EAL HARBOR, ME 04675 OUNT DESERT MEDICAL CENTER O BOX 926 ORTHEAST HARBOR, ME 04662 OUNT ST. JOSEPH HIGHWOOD STREET AGTERVILLE, ME 04901 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 ORTHEAST HARBOR, ME 04662 PUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 10,000 10,000 PUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 10,000 10,00	NORTHEAST HARBOR, ME 04662				2,000
ABORATORY O BOX 35 ALSBURY COVE, ME 04672 1,000 OUNT DESERT ISLAND HISTORICAL OCIETY O BOX 653 OUNT DESERT, ME 04660 OUNT DESERT, ME 04660 OUNT DESERT, ME 04675 OUNT DESERT LAND & GARDEN PRESERVE O BOX 208 EAL HARBOR, ME 04675 OUNT DESERT MEDICAL CENTER O BOX 926 ORTHEAST HARBOR, ME 04662 OUNT ST. JOSEPH HIGHWOOD STREET AGTERVILLE, ME 04901 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 ORTHEAST HARBOR, ME 04662 PUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 10,000 10,000 PUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 10,000 10,00	MOUNT DESERT ISLAND BIOLOGICAL		PUBLIC CHARITY	GENERAL AND/OR	
ALSBURY COVE, ME 04672 COUNT DESERT ISLAND HISTORICAL COUNT DESERT, ME 04660 COUNT DESERT, ME 04660 COUNT DESERT LAND & GARDEN PRESERVE CO BOX 208 CEAL HARBOR, ME 04675 COUNT DESERT MEDICAL CENTER CO BOX 926 COUNT DESERT HARBOR, ME 04662 COUNT ST, JOSEPH COUNT DESERT FIRE AND RESCUE ATERVILLE, ME 04901 COUNT DESERT FIRE AND RESCUE ASSOCIATION - POLICE DEPARTMENT CO BOX 248 CORTHEAST HARBOR, ME 04662 1,000 PUBLIC CHARITY COUNT DESERT FIRE AND RESCUE ASSOCIATION - POLICE DEPARTMENT CO BOX 248 CORTHEAST HARBOR, ME 04662 3,000	LABORATORY				
OCIETY O BOX 653 OUNT DESERT, ME 04660 OUNT DESERT, ME 04660 OUNT DESERT, ME 04660 OUNT DESERT LAND & GARDEN PRESERVE O BOX 208 EAL HARBOR, ME 04675 OUNT DESERT MEDICAL CENTER O BOX 926 OUNT DESERT HARBOR, ME 04662 OUNT DESERT HARBOR, ME 04662 PUBLIC CHARITY DENERAL AND/OR EDUCATIONAL PURPOSE 1,000 PUBLIC CHARITY DENERAL AND/OR EDUCATIONAL PURPOSE 1,000 PUBLIC CHARITY DENERAL AND/OR EDUCATIONAL PURPOSE 1,000 OUNT ST. JOSEPH HIGHWOOD STREET ATTERVILLE, ME 04901 DOUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 OUNTHEAST HARBOR, ME 04662 3,000	РО ВОХ 35				
OCIETY O BOX 653 COUNT DESERT, ME 04660 COUNT DESERT, ME 04660 COUNT DESERT LAND & GARDEN PRESERVE O BOX 208 CEAL HARBOR, ME 04675 COUNT DESERT MEDICAL CENTER O BOX 926 COUNT DESERT HABOR, ME 04662 COUNT ST. JOSEPH HIGHWOOD STREET HARBOR, ME 04901 COUNT DESERT FIRE AND RESCUE ASSOCIATION - POLICE DEPARTMENT O BOX 248 COUNT DESERT FIRE AND RESCUE ASSOCIATION - POLICE DEPARTMENT O BOX 248 COUNT BESERT FIRE AND RESCUE ASSOCIATION - POLICE DEPARTMENT O BOX 248 COUNT BESERT FIRE AND RESCUE ASSOCIATION - POLICE DEPARTMENT O BOX 248 COUNT BESERT HARBOR, ME 04662 20 DUCATIONAL PURPOSE EDUCATIONAL PURPOSE 10,000 10 DUBLIC CHARITY	SALSBURY COVE, ME 04672				1,000
OCIETY O BOX 653 COUNT DESERT, ME 04660 COUNT DESERT, ME 04660 COUNT DESERT LAND & GARDEN PRESERVE O BOX 208 CEAL HARBOR, ME 04675 COUNT DESERT MEDICAL CENTER O BOX 926 COUNT DESERT HABOR, ME 04662 COUNT ST. JOSEPH HIGHWOOD STREET HARBOR, ME 04901 COUNT DESERT FIRE AND RESCUE ASSOCIATION - POLICE DEPARTMENT O BOX 248 COUNT DESERT FIRE AND RESCUE ASSOCIATION - POLICE DEPARTMENT O BOX 248 COUNT BESERT FIRE AND RESCUE ASSOCIATION - POLICE DEPARTMENT O BOX 248 COUNT BESERT FIRE AND RESCUE ASSOCIATION - POLICE DEPARTMENT O BOX 248 COUNT BESERT HARBOR, ME 04662 20 DUCATIONAL PURPOSE EDUCATIONAL PURPOSE 10,000 10 DUBLIC CHARITY	MOINT DESERT ISLAND HISTORICAL		DIDITO CUARTON	OPNERAL AND OR	
O BOX 653 COUNT DESERT, ME 04660 DUBLIC CHARITY DESERT LAND & GARDEN PRESERVE DO BOX 208 COUNT DESERT MEDICAL CENTER DO BOX 926 COUNT DESERT MEDICAL CENTER DO BOX 926 COUNT ST. JOSEPH HIGHWOOD STREET DATERVILLE, ME 04901 COUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT DO BOX 248 COUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT DO BOX 248 COUNT BESERT MEDICAL AND/OR EDUCATIONAL PURPOSE PUBLIC CHARITY DENERAL AND/OR EDUCATIONAL PURPOSE PUBLIC CHARITY DENERAL AND/OR EDUCATIONAL PURPOSE PUBLIC CHARITY DENERAL AND/OR EDUCATIONAL PURPOSE 3,000	SOCIETY		FOBBIC CHARITI		
OUNT DESERT LAND & GARDEN PRESERVE O BOX 208 COUNT DESERT MEDICAL CENTER O BOX 926 COUNT DESERT MEDICAL CENTER O BOX 926 COUNT ST. JOSEPH HIGHWOOD STREET VATERVILLE, ME 04901 COUNT DESERT FIRE AND RESCUE SCOCIATION - POLICE DEPARTMENT O BOX 248 CORTHEAST HARBOR, ME 04662 PUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 10,000 AND CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 10,000 AND CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 3,000	РО ВОХ 653				
EDUCATIONAL PURPOSE TO BOX 208 EDUCATIONAL PURPOSE 106,000 DOUNT DESERT MEDICAL CENTER DO BOX 926 COUNT ST. JOSEPH HIGHWOOD STREET ATERVILLE, ME 04901 COUNT DESERT FIRE AND RESCUE SENERAL AND/OR EDUCATIONAL PURPOSE 1,000 1000 TO BOX 248 COUNT DESERT FIRE AND RESCUE SENERAL AND/OR EDUCATIONAL PURPOSE PUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 10,000 1000 TO BOX 248 COUNT DESERT FIRE AND RESCUE SESOCIATION - POLICE DEPARTMENT TO BOX 248 COUNTHEAST HARBOR, ME 04662	MOUNT DESERT, ME 04660				10,000
EDUCATIONAL PURPOSE TO BOX 208 EDUCATIONAL PURPOSE 106,000 DOUNT DESERT MEDICAL CENTER DO BOX 926 COUNT ST. JOSEPH HIGHWOOD STREET ATERVILLE, ME 04901 COUNT DESERT FIRE AND RESCUE SENERAL AND/OR EDUCATIONAL PURPOSE 1,000 1000 TO BOX 248 COUNT DESERT FIRE AND RESCUE SENERAL AND/OR EDUCATIONAL PURPOSE PUBLIC CHARITY SENERAL AND/OR EDUCATIONAL PURPOSE 10,000 1000 TO BOX 248 COUNT DESERT FIRE AND RESCUE SESOCIATION - POLICE DEPARTMENT TO BOX 248 COUNTHEAST HARBOR, ME 04662					
TOUNT DESERT MEDICAL CENTER TO BOX 926 TOUNT ST. JOSEPH HIGHWOOD STREET ATTERVILLE, ME 04901 TOUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT TO BOX 248 TO BOX 248 TO BOX 926 PUBLIC CHARITY SEMERAL AND/OR EDUCATIONAL PURPOSE PUBLIC CHARITY SEMERAL AND/OR EDUCATIONAL PURPOSE TO BOX 248 TO B			PUBLIC CHARITY	1	
COUNT DESERT MEDICAL CENTER O BOX 926 COUNT ST. JOSEPH HIGHWOOD STREET ATTERVILLE, ME 04901 COUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 COUNT DESERT HARBOR, ME 04662 PUBLIC CHARITY GENERAL AND/OR EDUCATIONAL PURPOSE PUBLIC CHARITY GENERAL AND/OR EDUCATIONAL PURPOSE PUBLIC CHARITY GENERAL AND/OR EDUCATIONAL PURPOSE 3,000				EDUCATIONAL PURPOSE	106 000
EDUCATIONAL PURPOSE 1,000 COUNT ST. JOSEPH HIGHWOOD STREET EDUCATIONAL PURPOSE EDUCATIONAL PURPOSE 10,000 COUNT DESERT FIRE AND RESCUE ESSOCIATION - POLICE DEPARTMENT O BOX 248 CORTHEAST HARBOR, ME 04662 EDUCATIONAL PURPOSE 1,000 PUBLIC CHARITY GENERAL AND/OR EDUCATIONAL PURPOSE 2,000 3,000				-	106,000
EDUCATIONAL PURPOSE 1,000 COUNT ST. JOSEPH HIGHWOOD STREET EDUCATIONAL PURPOSE EDUCATIONAL PURPOSE 10,000 COUNT DESERT FIRE AND RESCUE ESSOCIATION - POLICE DEPARTMENT O BOX 248 CORTHEAST HARBOR, ME 04662 EDUCATIONAL PURPOSE 1,000 PUBLIC CHARITY GENERAL AND/OR EDUCATIONAL PURPOSE 2,000 3,000	MOUNT DESERT MEDICAL CENTER		PUBLIC CHARITY	GENERAL AND/OR	
OUNT ST. JOSEPH HIGHWOOD STREET ATTERVILLE, ME 04901 OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 OUNTHEAST HARBOR, ME 04662 PUBLIC CHARITY GENERAL AND/OR EDUCATIONAL PURPOSE 3,000	PO BOX 926				
HIGHWOOD STREET ATTERVILLE, ME 04901 COUNT DESERT FIRE AND RESCUE ASSOCIATION - POLICE DEPARTMENT O BOX 248 COUNT DESERT HARBOR, ME 04662 EDUCATIONAL PURPOSE EDUCATIONAL PURPOSE 3,000	NORTHEAST HARBOR, ME 04662				1,000
HIGHWOOD STREET ATTERVILLE, ME 04901 COUNT DESERT FIRE AND RESCUE ASSOCIATION - POLICE DEPARTMENT O BOX 248 COUNT DESERT HARBOR, ME 04662 EDUCATIONAL PURPOSE EDUCATIONAL PURPOSE 3,000					
ATERVILLE, ME 04901 COUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT DO BOX 248 CONTHEAST HARBOR, ME 04662 10,000 PUBLIC CHARITY GENERAL AND/OR EDUCATIONAL PURPOSE 3,000	MOUNT ST. JOSEPH		PUBLIC CHARITY	GENERAL AND/OR	
OUNT DESERT FIRE AND RESCUE SSOCIATION - POLICE DEPARTMENT O BOX 248 ORTHEAST HARBOR ME 04662 PUBLIC CHARITY GENERAL AND/OR EDUCATIONAL PURPOSE 3,000	7 HIGHWOOD STREET			EDUCATIONAL PURPOSE	
SSOCIATION - POLICE DEPARTMENT EDUCATIONAL PURPOSE DO BOX 248 CONTHEAST HARBOR ME 04662 3,000	WATERVILLE, ME 04901				10,000.
O BOX 248 ORTHEAST HARBOR ME 04662	MOUNT DESERT FIRE AND RESCUE		PUBLIC CHARITY	GENERAL AND/OR	
ORTHEAST HARBOR ME 04662 3,000	ASSOCIATION - POLICE DEPARTMENT			EDUCATIONAL PURPOSE	
<u> </u>	PO BOX 248				
	NORTHEAST HARBOR ME 04662 Total from continuation sheets		<u> </u>	<u> </u>	3,000.

C/O WILMINGTON TRUST COMPANY 009209-009 06-6037106 Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of contribution Amount any foundation manager Name and address (home or business) or substantial contributor recipient MOUNT DESERT ISLAND HIGH SCHOOL PUBLIC CHARITY GENERAL AND/OR PO BOX 180 EDUCATIONAL PURPOSE MOUNT DESERT, ME 04660 500. MOUNT DESERT NURSERY SCHOOL PUBLIC CHARITY GENERAL AND/OR EDUCATIONAL PURPOSE 15 TRACY ROAD NORTHEAST HARBOR, ME 04662 3,000. MOUNT DESERT NURSING ASSOCIATION PUBLIC CHARITY GENERAL AND/OR PO BOX 397 EDUCATIONAL PURPOSE NORTHEAST HARBOR ME 04662 10,000. NATIONAL AUDOBON SOCIETY PUBLIC CHARITY GENERAL AND/OR 613 RIVERSVILLE ROAD EDUCATIONAL PURPOSE GREENWICH CT 06831 500. NATURAL RESOURCE COUNCIL OF MAINE PUBLIC CHARITY GENERAL AND/OR 3 WADE STREET EDUCATIONAL PURPOSE AUGUSTA, ME 04330 4,000, NATURE CONSERVANCY, INC PUBLIC CHARITY GENERAL AND/OR 4245 N FAIRFAX DR. STE 100 EDUCATIONAL PURPOSE ARLINGTON VA 22203 1,000. NATUREBRIDGE FOR THE ROB REED AND PUBLIC CHARITY GENERAL AND/OR LENA SHARPE FUND EDUCATIONAL PURPOSE 28 GEARY STREET - SUITE 650 SAN FRANCISCO, CA 94108 500. NEIGHBORHOOD HOUSE CLUB PUBLIC CHARITY GENERAL AND/OR PO BOX 332 EDUCATIONAL PURPOSE NORTHEAST HARBOR, ME 04662 5,000. NEXT STEP DOMESTIC VIOLENCE PROJECT PUBLIC CHARITY GENERAL AND/OR 733 BANGOR ROAD EDUCATIONAL PURPOSE ELLSWORTH ME 04605 2,000. NORTHEAST HARBOR AMBULANCE SERVICE PUBLIC CHARITY GENERAL AND/OR INC EDUCATIONAL PURPOSE PO BOX 122 NORTHEAST HARBOR, ME 04662 2,000.

Total from continuation sheets

C/O WILMINGTON TRUST COMPANY 009209-009 06-6037106

Part XV Supplementary Information 3 Grants and Contributions Paid During the Ye	ear (Continuation)			
3 Grants and Contributions Paid During the Ye Recipient	If recipient is an individual,		 	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		-
NORTHEAST HARBOR LIBRARY SCHOLARSHIP		PUBLIC CHARITY	GENERAL AND/OR	
FUND			EDUCATIONAL PURPOSE	
РО ВОХ 279				
NORTHEAST HARBOR, ME 04662				7,000
NORTHEAST HARBOR SAILING SCHOOL		PUBLIC CHARITY	GENERAL AND/OR	
PO BOX 12			EDUCATIONAL PURPOSE	
NORTHEAST HARBOR, ME 04662				500
WORKER OF THE POOR THE POOR TWO POOR THE POOR TH				
NORTHEAST HARBOR VILLAGE IMPROVEMENT SOCIETY		POBLIC CHARITY	GENERAL AND/OR EDUCATIONAL PURPOSE	
PO BOX 86			EDUCATIONAL PURPOSE	
HANCOCK ME 04640				3,000
OUR LADY OF MERCY CATHOLIC CHURCH		DIIBI TO CHARTMY	GENERAL AND/OR	
PO BOX 181		FOBLIC CHARITI	EDUCATIONAL PURPOSE	
BOCA GRANDE, FL 33921				500
over by lan				
OUR PLACE 44 WALL STREET, 2ND FLOOR		PUBLIC CHARITY	GENERAL AND/OR EDUCATIONAL PURPOSE	
NEW YORK, NY 10005			EDUCATIONAL PORPOSE	1,000
	1			1,000
PARISH OF ST. MARY AND ST. JUDE PO BOX 105		PUBLIC CHARITY	GENERAL AND/OR	
NORTHEAST HARBOR, ME 04662			EDUCATIONAL PURPOSE	52,000
NOTE THE PROPERTY OF THE PROPE				52,000
PENOBSCOT EAST RESOURCE CENTER INC		PUBLIC CHARITY	GENERAL AND/OR	
PO BOX 279 STONINGTON, ME 04681			EDUCATIONAL PURPOSE	E00
SIONINGION, ME 04001				500
PRESIDENT & FELLOWS OF HARVARD		PUBLIC CHARITY	GENERAL AND/OR	
COLLEGE			EDUCATIONAL PURPOSE	
1033 MASSACHUSETTS AVE, SUITE 3				
CAMBRIDGE, MA 02138		-		8,100
RESIST		PUBLIC CHARITY	GENERAL AND/OR	
259 ELM STREET, #201			EDUCATIONAL PURPOSE	
SOMERVILLE, MA 02144			2	5,000
ROCKEND INC		PUBLIC CHARITY	GENERAL AND/OR	
PO BOX 296			EDUCATIONAL PURPOSE	
NORTHEAST HARBOR ME 04662	L	<u></u>		5,000

GERRISH H. MILLIKEN FOUNDATION C/O WILMINGTON TRUST COMPANY 009209-009 06-6037106 Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient PUBLIC CHARITY GENERAL AND/OR ROCKFORD INSTITUTE 928 NORTH MAIN STREET EDUCATIONAL PURPOSE ROCKFORD IL 61103 1,000. ROUND HILL VOLUNTEER FIRE DEPT INC PUBLIC CHARITY GENERAL AND/OR PO BOX 8 EDUCATIONAL PURPOSE GREENWICH, CT 06831 1,000. PUBLIC CHARITY GENERAL AND/OR ROYAL PALM PLAYERS, INC EDUCATIONAL PURPOSE PO BOX 954 BOCA GRANDE FL 33921 200. PUBLIC CHARITY SALVATION ARMY GENERAL AND/OR 855 ASYLUM AVENUE EDUCATIONAL PURPOSE HARTFORD CT 06105-2801 500. SEEDS OF INDEPENDENCE PUBLIC CHARITY GENERAL AND/OR EDUCATIONAL PURPOSE PO BOX 8 FREEPORT ME 04032 5,000. SPECIAL OLYMPICS - CONNECTICUT PUBLIC CHARITY GENERAL AND/OR 2666 STATE STREET, 1 EDUCATIONAL PURPOSE HAMDEN CT 06517-2232 100. SPECIAL OLYMPICS - ILLINOIS PUBLIC CHARITY GENERAL AND/OR 605 EAST WILLOW EDUCATIONAL PURPOSE NORMAL IL 61761 1,000, SPECIAL OPERATIONS WARRIOR FOUNDATION PUBLIC CHARITY GENERAL AND/OR PO BOX 89367 EDUCATIONAL PURPOSE TAMPA FL 33689 1,000. ST. ANDREW AND ST. JOHN EPISCOPAL PUBLIC CHARITY GENERAL AND/OR CHURCH - WESTSIDE FOOD PANTRY EDUCATIONAL PURPOSE PO BOX 767 SOUTHWEST HARBOR, ME 04679 200.

STRIVE DC INC

128 M STREET NW, STE 318

Total from continuation sheets

WASHINGTON DC 20001

PUBLIC CHARITY GENERAL AND/OR

EDUCATIONAL PURPOSE

2,000.

C/O <u>WILMINGTON TRUST COMPANY 009209-009</u> 06-6037106 Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor STROUD WATER RESEARCH CENTER PUBLIC CHARITY GENERAL AND/OR 970 SPENCER ROAD EDUCATIONAL PURPOSE AVONDALE, PA 19311 10,000. THE ISLESFORD NEIGHBORHOOD HOUSE PUBLIC CHARITY GENERAL AND/OR ASSOCIATION EDUCATIONAL PURPOSE 10 MOSSWOOD RD, PO BOX 112 ISLESFORD ME 04646 500. THE JESSE HELMS CENTER FOUNDATION PUBLIC CHARITY GENERAL AND/OR PO BOX 247 EDUCATIONAL PURPOSE WINGATE, NC 28174 1,000. PUBLIC CHARITY GENERAL AND/OR THE TOWN OF BAR HARBOR FOR MDI SKATEPARK ASSOCIATION EDUCATIONAL PURPOSE 93 COTTAGE STREET BAR HARBOR, ME 04609-0620 <u>15,000.</u> UNION CHURCH OF NORTHEAST HARBOR PUBLIC CHARITY GENERAL AND/OR MAINE EDUCATIONAL PURPOSE PO BOX 555 NORTHEAST HARBOR, ME 04662 500. UNITED CHURCH OF CHRIST OF NORTHEAST PUBLIC CHARITY GENERAL AND/OR HARBOR & SEAL HARBOR EDUCATIONAL PURPOSE 21 SUMMIT ROAD NORTHEAST HARBOR, ME 04662 500. UNITED WAY OF GREENWICH PUBLIC CHARITY GENERAL AND/OR 1 LAFAYETTE COURT EDUCATIONAL PURPOSE GREENWICH CT 06830 500. UNITED WAY OF SALT LAKE PUBLIC CHARITY GENERAL AND/OR 257 E 200 SOUTH, STE 300 EDUCATIONAL PURPOSE SALT LAKE CITY UT 84111 5,000. WILLOWIND THERAPEUTIC RIDING CENTER. PUBLIC CHARITY GENERAL AND/OR INC EDUCATIONAL PURPOSE 1140 STATE HIGHWAY 3 BAR HARBOR, ME 04609 5,000. WORLD WILDLIFE FUND, INC PUBLIC CHARITY GENERAL AND/OR 1250 24TH STREET NW EDUCATIONAL PURPOSE WASHINGTON, DC 20037 100,

Total from continuation sheets

CONTENT OF MILLING OF THE CONTENT OF			ONTINUA 6-60371		FOR 990-PF PAGE	, PART 1 OF	IV 1
(a) List and	describe the kind(s) of property solick warehouse; or common stock, 2	d, e.g., real estate,		(b) How acq	urred (c) Date acquire	ed (d) Date s (mo., day,	old
ta ARISTOTLE FUND b ARISTOTLE FUND c SYLVAN PARTNER	S/T LOSS K-1 BO L/T GAIN K-1 BO	X 8 X 9A		D - Donati	VARIOUS VARIOUS VARIOUS	12/31, 12/31,	/ <u>15</u> / <u>15</u>
d SYLVAN PARTNER e U.S. TREASURY	S LLC L/T GAIN K	-1 BOX 9A		P	VARIOUS VARIOUS	12/31	15
f U.S. TREASURY	NOTES 2.125% 5/3	1/15		P P	VARIOUS VARIOUS	05/31	15
h U.S. TREASURY		30/15		P	VARIOUS		
k						 	
n	······································						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale	9		(h) Gain or (loss) (e) plus (f) minus (g)	
a b 59,899.		87,	958.			<87,95 59,89	
C		2,	087.			<2,08	
d 5,110.						5,13	
<u>e</u> 238,000.		250,				<12,70	
f 240,000.		251,				<11,5	<u>LO.</u> >
g 270,000.		275,				<u><5,2</u> 2	
h 270,000.		275,	922.			<5,92	<u>44.</u> >
<u>k</u>							
<u>m</u> ព				·			
0	1						
	ng gain in column (h) and owned by	the foundation on 12/31/69		(l) Losses (from col. (f	1))	
(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)	Gains (ex	cess of col. (h) gain o but not less than "-0-	ver col. (k),	
<u>a</u>						<u><87,95</u>	
<u>b</u>						59,89	
		 				<2,08 5,11	
_						<12,70	
						<11,51	
						<5,21	
						<5,92	
i							
Ī							
<u>k</u>	<u> </u>	ļ					
1							
						<u> </u>	
0	<u> </u>	<u></u>		T			
2 Capital gain net income or (net ca	t ii (1000), ciitoi	0-" in Part I, line 7 J	2			<60,38	<u>34.</u> >
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, if (loss), enter "-0-" in Part I, line 8		iu (o).	<u>}</u>		N/A		

Supporting Detail for 990PF Part II Page Two Balance Sheet Account: 009209-009 CUST FOR GERRISH H MILLIKEN FDTN

As of Date 12/31/2015

λ s of D	ate 12/31/2015						
RI	Description ESTRICTED SHORT TERM		CUSIP	Quantity	Value	Price	Tax Cost
cast IN	VESTMENT FND		821400009	378,539 8200	378,539.82	1 00	378,539 82
S	YLVAN PARTNERS LLC - SERIES	1	999484108	10 3	928,245 24		969,122 00
co	est basis derived as follows				323,213 21	00,	
Er	nd of Year 2015 tax basis per Portfo	olio Ass	et List	966,220.28			
	ash Flow to partner for year of 2015			300,220.20			
	20,, ,	-		(8,057 00)			
Ad	dd: net tax effect of all k-1 attribute	S		()			
				10,959.00			
Er	nd of Year 2015 Fully Adjusted Tax	Basis					
				969,122 28			
TH	HE ARISTOTLE FUND OF MAINE,	LP	LP0055444	1 00	1,502,766.00	n/a	1,526,856 00
co	st basis derived as follows						
pr	or year 990PF (year 2014) tax bas	is		1,573,666 00			
Ne	et of year 2015 k-1 attributes (no d	ash in/	out in 2015)	(46,810 00)			
Er	nd of Year 2015 Fully Adjusted Tax	Basis					
				1,526,856.00			
U	NITED STATES TREASURY BONI	os					
D	TD 02/15/1997 6.625% 02/15/2027		912810EZ7	135,000.0000	191,436 75	1 42	139,765 94
	NITED STATES TREASURY NOTE						
	TD 05/31/2012 0 625% 05/31/2017		912828SY7	270,000.0000	268,809 30	1.00	267,769 07
	NITED STATES TREASURY NOTE						
	TD 08/31/2012 0 625% 08/31/2017		912828TM2	270,000.0000	268,269.30	0.99	265,535.28
	NITED STATES TREASURY NOTE FD 02/28/2013 0.750% 02/28/2018		0420201120	270 000 0000	207.000.00	0.00	005 047 00
	NITED STATES TREASURY NOTE		912828UR9	270,000.0000	267,699.60	0.99	265,347.63
	TD 12/31/2012 0.750% 12/31/2017		912828UE8	270,000.0000	268,174.80	0.99	264,838 21
	NITED STATES TREASURY NOTE		012020020	270,000.0000	200,174.00	0.55	204,038 21
	TD 02/29/2012 0.875% 02/28/2017		912828SJ0	270,000 0000	270,105.30	1.00	271,013.00
U	NITED STATES TREASURY NOTE	S					2. 1,010.00
ום	TD 11/30/2011 0.875% 11/30/2016		912828RU6	270,000.0000	270,159.30	1 00	272,991.57
	NITED STATES TREASURY NOTE						
	TD 05/31/2013 1.000% 05/31/2018		912828VE7	270,000.0000	268,617.60	0 99	266,730.43
	NITED STATES TREASURY NOTE						
	TD 08/31/2011 1.000% 08/31/2016		912828RF9	270,000 0000	270,548.10	1 00	273,923 77
	NITED STATES TREASURY NOTE		040000434	070 000 0000	000 540 40	4.00	
	TD 11/30/2013 1.250% 11/30/2018 NITED STATES TREASURY NOTE		912828A34	270,000 0000	269,546.40	1 00	270,074 16
	TD 02/28/2014 1.500% 02/28/2019		912828C24	270,000 0000	270,853.20	1.00	271 000 04
	NITED STATES TREASURY NOTE		312020024	270,000 0000	270,033.20	1.00	271,008.84
	TD 05/31/2014 1.500% 05/31/2019		912828WL0	152,000.0000	152,142.88	1.00	152,051 23
	NITED STATES TREASURY NOTE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,.,.		102,001 20
רם	TD 08/31/2011 1.500% 08/31/2018		912828RE2	270,000.0000	271,792.80	1.01	271,116.83
U	NITED STATES TREASURY NOTE	S					•
D	TD 05/31/2011 1.750% 05/31/2016		912828QP8	265,000.0000	266,375.35	1.01	272,357.97
	NITED STATES TREASURY NOTE						
	TD 02/28/2011 2.125% 02/29/2016		912828QJ2	270,000.0000	270,747.90	1.00	278,246 81
	Principal Portfolio -	USD		9,162,507.6459	6,654,829.64		6,677,288.56
	ESTRICTED SHORT TERM		821400009	1,012.5000	1,012.50	1.00	1,012.50
TOTAL	Income Portfolio -	USD		1,012.5000	1,012.50		1,012.50

TOTAL 009209-009

\$6,655,842

\$6,678,301