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Form 990-PF

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

Department of the Treas	ıry	Do not enter	social security numbers or rm 990-PF and its separate	this form as	it may be m	ade public.	2010
Internal Revenue Service For calendar year 2			rm 990-PF and its separate	and e		s.govnormaaopr.	Open to Public inspection
Name of foundation				, 4.10		A Employer identification	on number
	~	Oh i b . h				07 431000	5
		ngs Charltar	le Foundatio	n	Room/suite	27-431899	<u>/</u>
13 Elm S	treet				Roonvsuite	B Telephone number (207) 474	-9511
City or town, state of Skowhega		ountry, and ZIP or foreign p	postal code			C If exemption application is	pending, check here
G Check all that app		Initial return	Initial return of a f	ormer public c	harity	D 1. Foreign organization	ns, check here
		Final return	Amended return				
		Address change	Name change			Foreign organizations in check here and attach in	computation
H Check type of org		X Section 501(c)(3) e:				E If private foundation st	
			Other taxable private found			under section 507(b)(1)(A), check here
Fair market value (from Part II, col		· 1 —	ing method: L Cash ther (specify)	X Accr	uai	F If the foundation is in a	
►\$			ımn (d) must be on cash	basis)		under section 507(b)(i)(b), check fiere
Dort I Analysis	of Revenue a	nd Expenses	(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
The total o	amounts in colu equal the amou	umns (b), (c), and (d) may not nts in column (a))	expenses per books	inco		income	for charitable purposes (cash basis only)
1 Contribution	ns, gifts, grar	nts, etc., received	248,993.			N/A	
2 Check ▶	If the foundation	on is not required to attach Sch. B					
3 Cash investr	avıngs and temp nents	oorary					
	and interest fr	om securities	19.		19.		Statement 2
5a Gross rent	-						1
b Net rental in			2,239.				Statement 1
Gross sales assets on lin	oss) from sale of price for all	f assets not on line 10 251,232.	2,237.				Deacement 1
b Gross sales assets on lim 7 Capital gain				21	0,402.		
8 Net short-t	erm capital ga	ain		-			
	difications						
10a Gross sales and allowand	ess returns :es						
b Less Cost o	=						-
c Gross prof	, ,		ļ <u></u>				
	ines Albreug	ah di	251,251.	21	0,421.		
13 Compensati	doronce sun	recions trustees, etc.	0.		0.		- 0.
14 Othersemp	ovee salaries						1
15 Per ရှိတြက္ pl	ans, employee	and wages of the benefits					
16a Legal fees			2 2 2 2 2				
b Accounting	JEDEN	V. U7Stmt 3	1,300.		650.		650.
C Other-profe	ssionariees-						
18 Taxes		Stmt 4	10,288.		0.		0.
₽I	n and depletic		10,200.			 	
20 Occupancy	•						
21 Travel, con	ferences, and	meetings					
22 Printing an	d publications						
23 Other expe		Stmt 5	471.		421.		50.
24 Total oper	ating and adm		10.050		1 001		700
expenses.	Add lines 13 t	-	12,059. 66,000.		1,071.	 -	700. 66,000.
25 Contribution 26 Total expe		•	00,000.				00,000.
Add lines 2		วบเอยแยแน้.	78,059.		1,071.		66,700.
	e 26 from line	= 12;	70,039.		_ , v , ± •		30,,001
		nses and disbursements	173,192.				
		(if negative, enter -0-)		209	9,350.		
		negative, enter -0-)				N/A	
		Reduction Act Notice, see	instructions.				Form 990-PF

	' I				
_	1				
-6					
_	Complete only for assets showing	gain in column (h) and owned by	the foundation on 12/31/69	1	(I) Gains (Col. (h) gain minus
_	(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		col. (k), but not less than -0-) or Losses (from col. (h))
_	1				210,402.
ī					
_					
_	i				
_6					
2	Capital gain net income or (net cap	ortal loss) { If gain, also enter If (loss), enter -0-	•	} 2	210,402.

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8

N/A Part V | Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part.

Yes X No

Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	Distribution ratio (col. (b) divided by col. (c))
2014	25,585.	611,452.	.041843
2013	78,535.	472,487.	.166216
2012	43,160.	442,877.	.097454
2011	50,850.	48,675.	1.044684
2010	0.	6,498.	.000000

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

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

2	1.350197
3	.270039
4	799,689.
5	215,947.
6	2,094.
7	218,041.

See the Part VI instructions.

Form **990-PF** (2015)

66,700.

Form 990-PF (2015) Skowhegan Savings Charitable Foundation Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940)		27-431 948 - see			Page 4
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.)				
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		-		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	· }	1		4,1	87.
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). J				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	,	2			0.
3 Add lines 1 and 2	,	3		4,1	87.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		4,1	87.
6 Credits/Payments:				,	
a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a	5,150.				
b Exempt foreign organizations - tax withheld at source 6b					
c Tax paid with application for extension of time to file (Form 8868)					
d Backup withholding erroneously withheld 6d	_				
7 Total credits and payments. Add lines 6a through 6d		7		5,1	50.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10		9	63.
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax > 963. Re	efunded 🕨	11			0.
Part VII-A Statements Regarding Activities	•	<u> </u>	_	-	
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	or intervene	ın	•	Yes	No
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)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materi	als publishe	ed or			
distributed by the foundation in connection with the activities			İ		•
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year;				,	
(1) On the foundation. ▶ \$ 0 . (2) On foundation managers ▶ \$	0.				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on four	idation			}	
managers. ▶ \$ 0 •					
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 inc	orporation, o	r		-	-
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
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:			ļ.,		
By language in the governing instrument, or					
 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict visit is a state legislation. 	with the state	law			
remain in the governing instrument?			6	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), a	and Part XV		7	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)			1 .		
ME					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or design	nate)				
of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calei	ndar			
year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		_X_
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and add	resses		10		X
		F	orm 99 0)-PF	(2015)

Form 990-PF (2015) Skowhegan Savings Charit			<u>27-43189</u>	<u>97</u>	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contur	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es 🗓 No	-	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir	··			1
any voter registration drive?		_	es 🔀 No	- 1	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? (see instructions)		Y	es 🗶 No	1	1
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or i	for			1
the prevention of cruelty to children or animals?		Y	es 🗶 No	i	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t	nere		▶□□□		\top
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined			
expenditure responsibility for the grant?			es 🔲 No		
If "Yes," attach the statement required by Regulations section 53 494					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					1
a personal benefit contract?	h-) h	□ v	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		1	6b	x
If "Yes" to 6b, file Form 8870	orderial bettern bentrable		F-		+==
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X No	. = . 6	٠.
b If "Yes," did the foundation receive any proceeds or have any net income attribu		''		7b	+
Part VIII Information About Officers, Directors, Trust		nagere Highl		70	—
Paid Employees, and Contractors	ees, i ouildation wa	mayers, mym	y		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
, , , , , , , , , , , , , , , , , , , ,	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Ex	pense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred compensation	(e) Ex accoun	t, other
	to position	enter -0-)	compensation	anow	ances
See Statement 6			ا م		0
see statement o		0.	0.		<u> </u>
					
	·	ļ			
	_				
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(/2N -		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) Ex	pense t. other
	devoted to position	(c) compensation	and deterred compensation	allowa	ances
NONE					
Total number of other employees paid over \$50,000	<u> </u>	ļ	▶		
				990-PF	<u>-</u>
			1 01111	200-F F	(4013)

Form 990-PF (2015) Skowhegan Savings Charitable Four	ndation 27	7-431899	97 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly		
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	(0) Compensation
NONE			
			
	_		
			
20000			
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		•	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	al information such as the		
number of organizations and other beneficiaries served, conferences convened, research papers produ	ced, etc.	Ex	penses
1N/A			
2		4	
		\dashv	
3		+	
4		4	
Part IX-B Summary of Program-Related Investments	· · · · · · · · · · · · · · · · · · ·		
Describe the two largest program-related investments made by the foundation during the tax year on lin	nes 1 and 2	An	nount
1N/A			
		_	
			
2		-	
		-	
All other program-related investments. See instructions.		1	
3			
		4	
Total. Add lines 1 through 3			0.
TOTAL AUG RITES 1 DITOUGH 5		· •	U .

	rm 990-PF (2015) Skowhegan Savings Charitable Foundation	27-	<u>-4318997 Page</u> 8
F	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	<u> </u>	
8		1a	0.
b	Average of monthly cash balances	1b	811,867.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	811,867.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	811,867.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	12,178.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	799,689.
6	Minimum investment return. Enter 5% of line 5	6	39,984.
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and	id certain	· · · · · · · · · · · · · · · · · · ·
Ξ	foreign organizations check here 🕨 🔃 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	39,984.
2a	Tax on investment income for 2015 from Part VI, line 5		
b			
C	Add lines 2a and 2b	2c	4,187.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	35,797.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	35,797.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	35,797.
P	art XII Qualifying Distributions (see instructions)		
	and a dealinying bistributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	66,700.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	66,700.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	66,700.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies for	the section
	4940(e) reduction of tax in those years.		

Form 990-PF (2015) Skownegan S	avings Chari	table Foundat	10n 2/-4	131899/ Page 9
Part XIII Undistributed Income (see	e instructions)			
	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
Distributable amount for 2015 from Part XI, line 7				35,797.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years;				
, ,		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011 48, 250.				
c From 2012 21,016.				
dFrom 2013 55,114.				
e From 2014 145.	1			
f Total of lines 3a through e	124,525.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ▶\$ 66,700.	-	- ,		
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				35,797.
e Remaining amount distributed out of corpus	30,903.	··· · · · · · · · · · · · · · · · · ·		
5 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	155,428.			
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				
lines 4d and 5 from line 1. This amount must				
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	···· i	· · · · · · · · · · · · · · · · · · ·		
not applied on line 5 or line 7	0.	ļ		
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	155,428.			
10 Analysis of line 9:				

523581 11-24-15

48,250 a Excess from 2011 21,016. b Excess from 2012 55,114. c Excess from 2013 145. d Excess from 2014 30,903. e Excess from 2015

	egan Savings			<u>27-43</u> :	L8997 Page 10
Part XIV Private Operating	Foundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a rulii	ng or determination letter tha	it it is a private operating			-
foundation, and the ruling is effectiv	e for 2015, enter the date of	the ruling	▶		
b Check box to indicate whether the fo	oundation is a private operati	ng foundation described	ın section	4942(j)(3) or 494	12(<u>j)(</u> 5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for			1		
each year listed			<u> </u>		
b 85% of line 2a			<u> </u>		
c Qualifying distributions from Part XI	l,		\		
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 directi	·		1		
for active conduct of exempt activities	es.	İ			
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	ļ		 		
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	<u> </u>		<u> </u>		
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,	i				
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)		ļ			
(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					
	formation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
	g the year-see inst			, ,	
1 Information Regarding Founda	tion Managers:				
a List any managers of the foundation		than 2% of the total cont	ributions received by the t	oundation before the close	e of any tax
year (but only if they have contribute			•		•
None					
b List any managers of the foundation			(or an equally large portio	n of the ownership of a pai	tnership or
other entity) of which the foundation	has a 10% or greater interes	st.			
None				·	
2 Information Regarding Contrib					
Check here ► if the foundation	n only makes contributions	to preselected charitable	organizations and does no	ot accept unsolicited reque	sts for funds. If
the foundation makes gifts, grants, e					0. —————
a The name, address, and telephone n	umber or e-mail address of t	the person to whom appl	ications should be address	sed.	
See Statement 6					
			la la materia		
b The form in which applications shou See Statement 6	io de submitted and informa	tion and materials they si	nonia iucinge:		
c Any submission deadlines:				-	
See Statement 6					
d Any restrictions or limitations on awa	ards, such as by geographic	al areas, charitable fields	kinds of institutions or of	ther factors:	
See Statement 6	, Juon ay by geograpino	ur urcas, ciraritavic licius,	nings of manufulling, 01 0	mor lactors,	

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year Jobs for Maine Graduates, Inc. N/A PC General Support 45 Commerce Drive, Suite 9 Augusta, ME 04330 40,000. Lake George Corporation N/A PC General Support P.O. Box 896 5,000. Skowhegan, ME 04976 Maine Community Foundation N/A PC Skowhegan Early 245 Main Street Childhood Education Ellsworth, ME 04605 Campaign 5,000. Maine General Medical Center N/A PC General Support 6 East Chestnut Street Augusta, ME 04330 5,000. Penobscot Community Health Center N/A PC General Support P.O. Box 1358 Bangor, ME 04402 5,000. See continuation sheet(s) 66,000. Total ➤ 3a **b** Approved for future payment None Total ▶ 3b

	_	
Part XVI-A	Analysis of Income-Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		led by section 512, 513, or 514	(e)	
-	(a)	(b)	(C) Exclu-	(d)	Related or exempt	
1 Program service revenue:	Business code	Amount	sion	Amount	function income	
a						
b						
C						
d					· · · · · · · · · · · · · · · · · · ·	
е						
1		-				
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities			14	19.		
 5 Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property 						
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory			18	2,239.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue: a						
b		-				
C						
d						
е						
12 Subtotal. Add columns (b), (d), and (e)		0.		2,258.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	2,258.	
(See worksheet in line 13 instructions to verify calculations.)						

Relationship of Activities to the Accomplishment of Exempt Purposes

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

Form **990-PF** (2015)

523621 11-24-15

-						
Sign Here	and be	penalties of perury. I declare that I have examined this aligh, it is true, correct and complete Declaration of problems. The correct and complete Declaration of problems are the correct and complete Declaration of problems.			r has any knowledge	May the IRS discuss this return with the preparer shown below (see Instr.)? X Yes No
		Print/Type preparer's name	Preparer's signature	Date	Check if self- employed	PTIN
Paid		Nicholas E. Porto	190	04/09/16		P01310283
Prepa Use C		Firm's name ► BAKER NEWMAN	& NOYES, LLC		Firm's EIN ► 01	L-0494526
		Firm's address ► BOX 507 PORTLAND, M	E 04112		Phone no. (20	07) 879-2100
						- 000 55

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2015

Skowhegan Savings Charitable Foundation

Employer identification number

27-4318997

Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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. 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),

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)

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

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

Name of organization

Employer identification number

Skowhegan Savings Charitable Foundation

27-4318997

Part I	Contributors (see instructions) Use duplicate copies of Part I	if additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Skowhegan Savings Bank 13 Elm Street Skowhegan, ME 04976	\$ 248,993.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u></u>		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omnocash Complete Part II for noncash contributions)
523452 10-26	i-15	Schedule B (Form	990, 990-EZ, or 990-PF) (2015)

Employer identification number

Skowhegan Savings Charitable Foundation

27-4318997

	Noncash Property (see instructions). Use duplicate copies of Pari	t II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	685 shares AYE; 1,325 shares BMY	_	
		s248,993.	12/21/15
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			
(a)	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of or	ganization		Employer identification number				
Skowho Part III	egan Savings Charitable	ntributions to organizations described	27 - 4318997 I in section 501(c)(7), (8), or (10) that total more than \$1,000 for				
	the year from any one contributor. Complete completing Part III, enter the total of exclusively religing Use duplicate copies of Part III if addition	Columns (a) through (e) and the folloops, chantable, etc., contributions of \$1,000 o	WING line entry. For organizations				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gif	<u> </u>				
-	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, a	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 gif	t				
-	Transferee's name, address, a	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, a	and ZIP + 4	Relationship of transferor to transferee				

Form 990-PF	Gain or	(Loss) fro	om Sale of	Assets	St	atement 1
(a) Description of Prop	perty			Manner cquired	Date Acquired	Date Sold
Publicly Traded Sec	curities					
(b) Gross Sales Pric	Cos	c) t or E Basis	(d) Expense of Sale	(e) Deprec		(f) n or Loss
251,2	232.	248,993.	0.		0.	2,239.
Capital Gains Divid	lends from	Part IV				0.
Total to Form 990-F	F, Part I,	line 6a				2,239.
Form 990-PF	Dividend Gross Amount	s and Inter Capital Gains Dividend	(a) Reven	ıe Net	St (b) Invest- Income	atement 2 (c) Adjusted Net Income
Dividends	19	•	0.	19.	19.	
To Part I, line 4	19	•	0.	19.	19.	
·		=				
Form 990-PF		Accounti				atement 3
Form 990-PF		Accounti (a) Expenses Per Books		- Adj		atement 3 (d) Charitable Purposes
		(a) Expenses	ng Fees (b) Net Invest	- Adj	St. c) usted	(d) Charitable

Form 990-PF	Taxes		Statement 4		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Excise Taxes	10,288.	0.		0.	
To Form 990-PF, Pg 1, ln 18	10,288.	0.		0.	
Form 990-PF	Other Expenses		Statement		
		-		tatement 5	
Description	(a) Expenses Per Books	(b) Net Invest-	(c) Adjusted Net Income	(d) Charitable Purposes	
Description Annual Filing Fee Banking Fees	Expenses	(b) Net Invest-	(c) Adjusted	(d) Charitable	

Form 990-PF	Part VIII - List of Officers, Directors	Statement	6
	Trustees and Foundation Managers		

Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense
Richard Anzelc, Jr. 13 Elm Street Skowhegan, ME 04976	Director 1.00	0.	0.	0.
James Austin 13 Elm Street Skowhegan, ME 04976	Director 1.00	0.	0.	0.
Roger Gifford 13 Elm Street Skowhegan, ME 04976	Director 1.00	0.	0.	0.
Howard Sevey 13 Elm Street Skowhegan, ME 04976	Director 1.00	0.	0.	0.
Warren C. Shay 13 Elm Street Skowhegan, ME 04976	Director 1.00	0.	0.	0.
Claire Theriault Perkins 13 Elm Street Skowhegan, ME 04976	Director 1.00	0.	0.	0.
John C. Witherspoon 13 Elm Street Skowhegan, ME 04976	President 3.00	0.	0.	0.
Vicki L. Alward 13 Elm Street Skowhegan, ME 04976	Vice President 15.00	0.	0.	0.
Richard St. Pierre 13 Elm Street Skowhegan, ME 04976	Treasurer 10.00	0.	0.	0.
Totals included on 990-PF, Page 6	Part VIII	0.	0.	0.

SKOWHEGAN SAVINGS CHARITABLE FOUNDATION EIN: 27-4318997



Charitable Foundation

Providing economic and community development throughout our region

Skowhegan Savings is a caring, committed member of the communities where our customers live, work, and raise their families. To strengthen and enhance these communities, we support charitable giving, sponsorships, and employee volunteer efforts. While we are committed to a wide range of organizations and programs throughout the region, we are particularly focused on financial literacy programs and Economic and Community Development, including programs that promote job creation, business retention, business growth, and community enhancement. Skowhegan Savings will consider requests that fit within the following guidelines.

- Requests that have a broad impact on the communities within our service area will be a
 priority
- Non-profit organizations will be given priority and proof of 501 (c)(3) tax status should be provided
- We will give priority to requests that promote education, particularly in the area of financial literacy
- Community and Economic Development programs that bring business and jobs to our communities will also be a priority

Although we realize there are many worthy causes seeking funding, as a general rule, we cannot make contributions to the following:

- Individuals or programs that benefit specific individuals (with the exception of approved scholarship programs)
- Religious organizations
- Labor organizations
- · Political candidates or campaigns

SKOWHEGAN SAVINGS CHARITABLE FOUNDATION EIN: 27-4318997

- Endowment funds
- For-profit businesses or organizations

Eligible organizations may submit only one application for funding per calendar year.

To apply for funding:

Please submit a written request with a short summary of the project or program for which funding is sought along with the attached request form to:

Skowhegan Savings ATTN: Charitable Foundation P.O. Box 250 Skowhegan, ME 04976

- PDF Application »
- Word Application »

27-4318997

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to any foundation manager or substantial contributor Amount Name and address (home or business) N/A Somerset Economic Development PC Technical Support Corporation 225 Water Street Skowhegan, ME 04974 6,000. Total from continuation sheets 6,000.