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# Form **990-PF** Department of the Treasury

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

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

For calendar	r year 2015 or tax year beginning JUL	1, 2015	, and ending	JUN 30, 201	6
Name of fou	<del></del>		, - <u>   </u>	A Employer identification	
				,	
BURNS	FAMILY FOUNDATION IN	<u>c</u>		46-567184	4
Number and s	street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
PO BO	OX 6			207-563-1	700
	n, state or province, country, and ZIP or foreign po	ostal code		C If exemption application is	pending, check here
	RISCOTTA, ME 04543				
G Check all 1	that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizatio	ns, check here
	Final return	Amended return		2. Foreign organizations i	meeting the 85% test.
	Address change	Name change		2. Foreign organizations a check here and attach	computation
	pe of organization: X Section 501(c)(3) ex			E If private foundation s	
		Other taxable private foundang method: X Cash		under section 507(b)(	
	et value of all assets at end of year J Accounting	-	Accrual	F If the foundation is in	
(irom Part	t II, col. (c), line 16) Oti 9 , 818 , 656 . (Part I, colur	ner (specify)	asis I	under section 507(b)(	1)(B), check here
	Analysis of Revenue and Expenses			(a) Adverted not	(d) Disbursements
m لنتنت	The total of amounts in columns (b), (c), and (d) may not becessarily equal the amounts in column (a) )	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	ontributions, gifts, grants, etc., received	6,312.		N/A	(vasi vasis only)
	neck It the foundation is not required to attach Sch. B	9,312.		11/23	
	terest on savings and temporary	124.	124.		STATEMENT 1
_	vidends and interest from securities	288,920.	288,920.		STATEMENT 2
1 .	ross rents				
	et rental income or (loss)				
6a Net	et gain or (loss) from sale of assets not on line 10	153,777.			
b ass	oss sales price for all 2,286,510.				
b Gro b ass	apital gain net income (from Part IV, line 2)		<u> 153,777.</u>		
8 Ne	et short-term capital gain				
9 Inc	come modifications CENED				
10a and	d allowances				
	ss Cost of goods sold				
CG Gro	ross profite (los\$10 V 1 6 2016 G			·	
(( ))	ther income	440 122	442,821.	·	
55 12 To	otal. Add lines 1/through 11: \ 17	449,133. 12,500.	2,500.		10,000.
	ompensation of officers, directors, trustees, etc	12,500.			10,000:
14 Oth	ther employee salaries and wages ension plans, employee benefits				
-0 160 Lo	egal fees STMT 3	15,000.	0.		15,000.
FY TOU LO	accounting fees STMT 4	2,495.	0.		2,495.
CONTRACTOR	ther professional fees STMT 5	37,255.	37,255.		0.
ະ <b>ພິ</b> 17 Int	terest				
18 Ta	exes STMT 6	956.	191.		765.
19 De	epreciation and depletion				
20 Oc	ccupancy				
<u>₹</u> 21 Tra	ravel, conferences, and meetings				
22 Pri	rinting and publications				
23 Oti	ther expenses STMT 7	3,571.	375.		2,160.
हूं 24 To	otal operating and administrative		40 201		20 420
= 1	xpenses. Add lines 13 through 23	71,777.	40,321.		30, <u>420.</u> 986,500.
25 60	ontributions, gifts, grants paid	986,500.			300,300.
1	otal expenses and disbursements.	1,058,277.	40,321.		1,016,920.
	dd lines 24 and 25	1,050,411.	40,341	<del></del>	1,010,720•
	ubtract line 26 from line 12:	<609,144.	>		
	xcess of revenue over expenses and disbursements let investment income (if negative, enter -0-)		402,500.	,	
	djusted net income (if negative, enter -0-)			N/A	Form <b>990-PF</b> (2015) \$3
C An					

Foi	m <u>9</u> 9	00-PF(2015) BURNS FAMILY FOUNDATION	INC.	46-!	5671844 Page 2
	art	II Balance Sheets Atlached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
	aπ	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	112,760.	76,381.	76,381.
	2	Savings and temporary cash investments			
	3	Accounts receivable >			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►_			
		Less: allowance for doubtful accounts ▶		1	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ď	10a	Investments - U.S. and state government obligations STMT 8	3,223,882.	2,387,982.	2,411,235.
	b	Investments - corporate stock STMT 9	4,016,723.	4,063,740.	4,337,314.
	C	Investments - corporate bonds STMT 10	1,963,075.	1,987,135.	2,040,232.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 11	729,179.	912,943.	953,494.
	14	Land, buildings, and equipment; basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ► STATEMENT 12)	10,447.	18,741.	0.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item !)	10,056,066.	9,446,922.	9,818,656.
	17	Accounts payable and accrued expenses		<u> </u>	
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		- <u></u> -	
iab	21	Mortgages and other notes payable			
_	22	Other liabilities (describe )			
_	23_	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
<i>ι</i> Λ		and complete lines 24 through 26 and lines 30 and 31.			
ĕ	24	Unrestricted			
ian	25	Temporarily restricted			
B	26	Permanently restricted			
Ë		Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Balances		and complete lines 27 through 31.		_	
tsc	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ţ	29	Retained earnings, accumulated income, endowment, or other funds	10,056,066.	9,446,922.	
Ž	30	Total net assets or fund balances	10,056,066.	9,446,922.	
			10 056 066	0.446.000	
_	31	Total liabilities and net assets/fund balances	10,056,066.	9,446,922.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	10,056,066.
2	•	r amount from Part I, line 27a		2	<609,144.>
3		r increases not included in line 2 (itemize)	<u> </u>	3	0.
4		lines 1, 2, and 3		4	9,446,922.
		eases not included in line 2 (itemize)			0.
6_	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	9,446,922.
					Form <b>990-PF</b> (2015)

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Form **990-PF** (2015)

_	n 990-PF (2015) BURNS FAMILY FOUNDATION INC. 46-50 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s				Page 4 1 <b>S)</b>
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 X and enter 1%		4	1,0	25.
	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).				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
	Add lines 1 and 2		4	1,0	25.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		4	1,0	25.
	Credits/Payments:			-	
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 17, 162.				
	Exempt foreign organizations - tax withheld at source 6b				
	Tax paid with application for extension of time to file (Form 8868)  6c				
	Backup withholding erroneously withheld 6d				
	Total credits and payments. Add lines 6a through 6d		17	7.1	62.
	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				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		13	3.1	37.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax				0.
	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		T,	Yes	No
	any political campaign?		а		Х
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	<u> </u>	ь		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		T		
	distributed by the foundation in connection with the activities.				
c	Did the foundation file Form 1120-POL for this year?		c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
٠	(1) On the foundation. $\blacktriangleright$ \$ 0 . (2) On foundation managers. $\blacktriangleright$ \$ 0 .	-	İ		
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
٠	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 incorporation, or				
٠	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		Х
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	A A	b	-	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		<u>x</u>
•	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?		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), and Part XV		7	Х	
•	, , , , , , , , , , , , , , , , , , , ,				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	ME				
Ь	of 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	_ [	3ь	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 calendar				
-	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		<u> X</u>
		Form '	990	-PF	(2015)

_	n 990-PF (2015) BURNS FAMILY FOUNDATION INC. 46-56	1844		Page 5
P	art VII-A Statements Regarding Activities (continued)	<del></del>	15.6	
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			v
40	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1 40		х
12	If "Yes," attach statement (see instructions)  Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	х	<u> </u>
13	Website address ► N/A	13		
14	The books are in care of ► JOHN J. LYNCH, JR.  Telephone no. ► 207 – 5	63-1	700	
• •	Located at ▶PO BOX 6, DAMARISCOTTA, ME ZIP+4 ▶C			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b></b>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	0.
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		_X_
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pi	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1:	a During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?  Yes X No  (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No			
	, , , , , , , , , , , , , , , , , , , ,			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after	İ		
	termination of government service, if terminating within 90 days.)			
ı	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
(	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1		
	before the first day of the tax year beginning in 2015?	1c	<u> </u>	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
;	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2015?			
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)  N/A	2b		
	statement - see instructions.)  c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		<del>                                     </del>
9	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3	during the year?			
	b if "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after			1
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,		1	
	Form 4720, to determine if the foundation had excess business holdings in 2015)  N/A	3b	ļ	<u> </u>
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		1	
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	0.55	<u> </u>
		Form <b>99</b>	U-PF	(2015)

orm 990-PF <sub>4</sub> (2015) BURNS FAMILY FOUNDATION	INC.		46-56718	<b>44</b> Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)	<del></del>
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y6	s X No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir			
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	s?	Y6	es 🗶 No	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			
4945(d)(4)(A)? (see instructions)		Ye	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational purposes, or	for		
the prevention of cruelty to children or animals?	,		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the excentions described			
section 53.4945 or in a current notice regarding disaster assistance (see instri		in riogalations	N/A 5	ib
Organizations relying on a current notice regarding disaster assistance check	· ·			
		unad		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		. —		
expenditure responsibility for the grant?		1/A	es L 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	pay premiums on	<u> </u>		
a personal benefit contract?		Ye	es X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u> </u>	Sb 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	shelter transaction?	Ye	es 🗶 No 📙	
b If "Yes," did the foundation receive any proceeds or have any net income attrib				'b
Part VIII Information About Officers, Directors, Trust	tees, Foundation Ma	anagers, Highly	/	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their		14.0	(d) 0	
(a) Name 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-)	compensation	allowances
ANN C. MCFARLAND	DIRECTOR			
PO BOX 1112				
DAMARISCOTTA, ME 04543	1.00	0.	0.	_0.
ELIZABETH C. GRAVES	DIRECTOR			
5 COOPER WAY	]			
WALPOLE, ME 04573	1.00	0.	0.	0.
JOHN SCHIANCHI	DIRECTOR			
154 LAKE STREET	1			
SADDLE RIVER, NJ 07458	0.00	0.	٥.ا	0.
JOHN J. LYNCH	EXECUTIVE DIF			
PO BOX 6		T-01011		
DAMARISCOTTA, ME 04543	10.00	12,500.	l o.l	0.
2 Compensation of five highest-paid employees (other than those in				
	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE	devoted to position		Compensacion	
NONE	-			
	1			
		-		
	-			
	-			
	4			
		-		
	4			
	<u> </u>			0
Total number of other employees paid over \$50,000			Enro	990-PF (2015)
			rorm	990-FF (2019)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly 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 serv	ice	(c) Comp	ensation
NONE			
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<b>&gt;</b>	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses	
1 N/A			
2			
		<u> </u>	
3			
4			
Part IX-B Summary of Program-Related Investments		Amount	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  1 N/A		Amount	
2		-	
All other program-related investments. See instructions.			
3			
Total. Add lines 1 through 3	<b>•</b>		0.
		Form <b>990-F</b>	

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P	art X 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:		
а	Average monthly fair market value of securities	1a	_9,572,605.
b	Average of monthly cash balances	1b	94,570.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	9,667,175.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2 _	0.
3	Subtract line 2 from line 1d	3	9,667,175.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	145,008.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	9,522,167.
6	Minimum investment return. Enter 5% of line 5	6	476,108.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
	foreign organizations check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	476,108.
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)	]	
C	Add lines 2a and 2b	2c	4,025.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	472,083.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	<u>472,083.</u>
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	472,083.
F	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		1 016 000
а		1a	1,016,920.
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		3a	
b	Cash distribution test (attach the required schedule)	3b	1 016 020
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,016,920.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	4 005
	income. Enter 1% of Part I, line 27b	5	4,025. 1,012,895.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	NAME THE EMPLOY OF USE A WILLDS LICED IN LICED V. COLUMN IN LICED COLUMN VOICE WINDS PRICE VIOLET AND WINDS THE TOP TO HOUSE IN LICED AND A COLUMN VIOLENCE VIOLET VIOLET AND A COLUMN VIOLET V	omannes in	n me seciion

Form **990-PF** (2015)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

(a) (b) (c) Corpus Years prior to 2014 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7	472 002
2 Undistributed income, if any, as of the end of 2015	472,083.
a Enter amount for 2014 only	0.
b Total for prior years:	
3 Excess distributions carryover, if any, to 2015:	
a From 2010	
<b>b</b> From 2011	
c From 2012	
d From 2013	
e From 2014 722, 467.	
f Total of lines 3a through e 722, 467.	
4 Qualifying distributions for 2015 from	
Part XII, line 4: > \$1,016,920.	
	0.
a Applied to 2014, but not more than line 2a	
b Applied to undistributed income of prior  years (Election required - see instructions)  O •	
c Treated as distributions out of corpus	
(Election required - see instructions)  0 •	472 002
d Applied to 2015 distributable amount	472,083.
e Remaining amount distributed out of corpus	
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount	0.
must be shown in column (a))  6 Enter the net total of each column as	
indicated below:	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 1, 267, 304.	
<b>b</b> Prior years' undistributed income. Subtract	
line 4b from line 2b	
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed  O •	
d Subtract line 6c from line 6b. Taxable	
amount - see instructions	
e Undistributed income for 2014. Subtract line	
4a from line 2a. Taxable amount - see instr.	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)	
8 Excess distributions carryover from 2010	
not applied on line 5 or line 7	
9 Excess distributions carryover to 2016.	
Subtract lines 7 and 8 from line 6a 1, 267, 304.	
10 Analysis of line 9:	
a Excess from 2011	
b Excess from 2012	
c Excess from 2013	
d Excess from 2014 722, 467.	
e Excess from 2015 544,837.	5 - 000 PE (0045)

523581 11-24-15

Form **990-PF** (2015)

Part XIV Private Operating	FAMILY FOUND		I-A guestion 9)		46-56	71844 Page 10
1 a If the foundation has received a ruling			PA, question 3)	N/A	· · · · ·	<del> </del>
foundation, and the ruling is effective	=					
<b>b</b> Check box to indicate whether the for	•	•	in section	4942(j)(3	\or \\	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	T Touridation described	Prior 3 year			J = 1
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013		1) 2012	(e) Total
investment return from Part X for	```	<del></del>	<del>                                     </del>	<u>`</u>	<u> </u>	
each year listed						
<b>b</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 activitie	s.					
Subtract line 2d from line 2c						
3 Complete 3a, b, or c for the alternative test relied upon:						
a "Assets" alternative test - enter:						
(1) Value of all assets						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b "Endowment" alternative test - enter						
2/3 of minimum investment return shown in Part X, line 6 for each year listed	ļ					
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						<del> </del>
(4) Gross investment income	 formation (Comple	ata this part only	if the found	ation had \$5	5 000 or m	ore in assets
Part XV Supplementary In	g the year-see inst	ructions )	ii tile louliu	ation nau w	,,000 01 111	010 111 033013
		14000113.7		<del></del>		
<ul> <li>Information Regarding Founda</li> <li>a List any managers of the foundation</li> </ul>		than 20/ of the total con	tributions received	hy the foundation	n hefore the cli	nse of any tay
year (but only if they have contribute			a ibations received	by the loundation	T DCTOTO LITO OIL	oo or any tan
NONE		, .				
b List any managers of the foundation	who own 10% or more of t	he stock of a corporation	(or an equally larg	e portion of the o	wnership of a	partnership or
other entity) of which the foundation			` ' '	•		
NONE						
2 Information Regarding Contrib	ution, Grant, Gift, Loan	, Scholarship, etc., P	rograms:			
Check here  if the foundation the foundation makes gifts, grants, e	n only makes contributions tc. (see instructions) to indi					
a The name, address, and telephone n						
<b>SEE STATEMENT 13 b</b> The form in which applications shou	ld be submitted and inform	ation and materials they	should include:			
c Any submission deadlines:						
d Any restrictions or limitations on aw	ards, such as by geographi	cal areas, charitable fields	s, kinds of institution	ons, or other facto	rs:	

3 Grants and Contributions Paid During the Y		Payment		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	<u> </u>	
a Paid during the year				
LINCOLN ACADEMY	NONE	PUBLIC CHARITY	BASEBALL AND SOFTBALL	
81 ACADEMY HILL			FIELDS PROJECT	
NEWCASTLE ME 04553				500,000
BOOTHBAY REGION HUMANE SOCIETY	NONE	PUBLIC CHARITY	ANIMAL SHELTER SUPPORT	
PO BOX 7				
EDGECOMB ME 04556				10,000
•				-
COMMUNITY ENERGY FUND OF LINCOLN	NONE	PUBLIC CHARITY	HEATING OIL AND ENERGY ASSISTANCE	
PO BOX 40				25 000
BRISTOL, ME 04539				25,000
DAMARISCOTTA RIVER ASSOCIATION PO BOX 333	NONE	PUBLIC CHARITY	EXPANSION OF EDUCATION PROGRAMS	
DAMARISCOTTA, ME 04543				50,000
ELDER CARE NETWORK OF LINCOLN COUNTY	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	
PO BOX 652			SUPPORT	50.000
DAMARISCOTTA ME 04543  Total SEE CON	TINUATION SHEE	한다(S)	▶ 3a	50,000 986,500
b Approved for future payment	VIINOATION SHEE		Ja	966,500
NONE				
		:		
Total			<b>▶</b> 3b	0

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

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	<del></del>			-	·
b				-	
C	i i				
0					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	124.	
4 Dividends and interest from securities			14	288,920.	
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	153,777.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	(	).	442,821.	0
13 Total. Add line 12, columns (b), (d), and (e)				13	442,821
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accom	plishment of	Exempt Po	urposes	
······································				importantly to the accomp	

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	5 000 PF (004

Form **990-PF** (2015)

Pa	rt XVII	Information Re Exempt Organ		sfers To	and Transaction	ns a	nd Relations	ships With No	ncharitabl		<u> 10 10 </u>
1								No			
		the Code (other than section 501(c)(3) organizations) or in section 527, relating to political org						11011 30 1(0) 01		1.00	<del></del>
a	a Transfers from the reporting foundation to a noncharitable exempt organization of:										
	(1) Cash	·		•					1a(1)		X
	(2) Othe	er assets							1a(2)		X
b	Other tra	nsactions:									
	(1) Sale	s of assets to a noncharita	ble exempt organizat	tion					1b(1)		X
	(2) Purc	chases of assets from a no	ncharitable exempt o	organization					1b(2)	<u> </u>	X
	(3) Rent	tal of facilities, equipment,	or other assets						1b(3)		X
	• •	nbursement arrangements							1b(4)	1	X
	• •	ns or loan guarantees							1b(5)		X
	• •	ormance of services or me	· ·	-					1b(6)		X
		of facilities, equipment, ma	-			سنام امانت	ava ahaw tha faw				<u> </u>
	or service	swer to any of the above is es given by the reporting for d) the value of the goods,	oundation. If the four	ndation receiv	ed less than fair mark		-		-	seis,	
(a) Li	<del></del>	(b) Amount involved			e exempt organization		(d) Description	n of transfers, transaction	one and charing a	rangeme	
(4)	-	(b) / mount involved	(0) Hamo or	N/A	o exempt or gamzation		(a) Descriptio	n or transiers, transactio	nis, and sharing a	- angerne	
		<del></del>		N/A			+				
							<del></del>				
										-	
							<del></del>				
							<del> </del>				
	-						+				
	- +						<del>                                     </del>	<del></del>	•		
	ın sectior	indation directly or indirect in 501(c) of the Code (other complete the following sch	r than section 501(c)	-	•	organiza	ations described		Yes	ĺχ	] No
		(a) Name of org	anization		(b) Type of organiza	ation		(c) Description of re	elationship		
		N/A						<u> </u>			
				<del></del>				<del> </del>			
Sig He	in and b	r penalties of perjury, I declare belief it is true, correct add con	mplete Declaration of pro	s return, includir eparer (other tha	ng accompanying schedul in taxpayer) is based on al	II ınforma	TRUST	r has any knowledge	May the IRS return with the shown below X Yes	e prepar (see ins	er
	July	Print/Type preparer's na		Preparer's s			Date	Check X If	PTIN		
		The rape property 3 lie			7			self- employed			
Pa	id	WILLIAM RA	CINE	Mund		1	1/02/16	. ,	P00055	847	
	parer	Firm's name ► WIL		ACINE,	CPA		, _,,	Firm's EIN ▶ 0			
Us	e Only			<u>/</u>							
		Firm's address ► 10	09 WASHIN	GTON S	TREET						
		BA	TH, ME 04	530				Phone no. 20	<u>7-443-5</u>		
									Form <b>99</b>	0-PF	(2015)

### 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.irs.gov/form990.

OMB No 1545-0047

2015

**Employer identification number** 

BURNS FAMILY FOUNDATION INC 46-5671844 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 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 contributors **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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2015) Page 2 Name of organization Employer identification number BURNS FAMILY FOUNDATION INC. 46-5671844 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution NANCY C. BURNS ESTATE [X]Person Payroll PO BOX 6 6,312. Noncash (Complete Part II for DAMARISCOTTA, ME 04543 noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions) (a) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person

Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

## BURNS FAMILY FOUNDATION INC.

46-5671844

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

Name of org	anization	Employer identification nu	mber				
BURNS	FAMILY FOUNDATION INC.		46-5671844	-			
Part III	Exclusively religious charitable, etc., contr	ibutions to organizations describ	ed in section 501(c)(7), (8), or (10) that total more than \$1	1,000 for			
	the year from any one contributor. Complete completing Part III, enter the total of exclusively religious	olumns (a) through (e) and the fo , charitable, etc , contributions of \$1,000	O or less for the year (Enter this info once)				
4 ) A)	Use duplicate copies of Part III if additiona	al space is needed.					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is hel	d			
Part I	(a) Lapose of gift	(0) 000 or gire	(a) Description of new gire is				
				<del></del>			
		<del> </del>					
		(e) Transfer of	gift				
		(1)	•				
	Transferee's name, address, an	d 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	d			
-		(a) Tanadan ada	-:44				
		(e) Transfer of (	gift				
	Transferee's name, address, ar	d ZIP + 4	Relationship of transferor to transferee				
Γ							
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is hel	ld			
			<del></del>				
-		(a) Transfer of a					
	(e) Transfer of gift						
	Transferee's name, address, ar	d ZIP + 4	Relationship of transferor to transferee				
-							
(a) No.							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is hel	d			
1 0.1							
		<del></del>					
		(e) Transfer of (	girt				
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
F							
-							

Part IV Capital Gains and Los	BSES for Tax on Investment Income	40-50	/1044	PAGE I UF Z
(a) List and	I describe the kind(s) of property solorick warehouse; or common stock, 20		I F F F UI CHASE	(c) Date acquired (d) Date sold (mo., day, yr.)
1a EMC CORP 3.375		JU SRS. MLG GO.	D - Donation	
b ENTERGY	<del>-</del>		P P	02/25/1505/26/16 08/05/1309/30/15
c EXXON MOBIL			P	08/05/1305/30/15
d GENERAL ELECTR	TC		P	08/05/1301/29/16
e HANESBRANDS			P	08/05/13/09/30/15
f MICROSOFT			P	08/05/1309/30/15
g SOUTHERN COMPA	NY		P	08/05/1309/30/15
h 3M COMPANY			P	08/05/1310/30/15
UNION PACIFIC			P	02/24/1504/26/16
<u>  BERKSHIRE HATH</u>			P	08/05/1307/20/15
k GARDEN ST NJ Z			P	08/05/1307/29/15
GLOUCESTER NJ			P	08/05/13/10/01/15
m MORRIS CNTY NJ	3.0%		P	08/05/1307/29/15
n NJ ED FAC 4.0%			P	08/05/13/10/01/15
o PORT AUTHOR NY		(-) O44b b	P	08/05/13/07/07/15
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		h) Gain or (loss) plus (f) minus (g)
a 85,000.		102,900.		<17,900.
b 72,106.		75,693.		<3,587.
c 179,297. d 220,795.		182,770. 188,998.		<3,473.; 31,797.
d 220,795. e 95,102.	· -	50,863.	<del></del>	44,239.
f 31,089.		22,274.		8,815.
g 41,318.		41,252.		66.
b 56,268.		42,491.		13,777.
69,949.		97,154.		<27,205.
354,850.		296,275.		58,575.
k 76,644.		68,034.		8,610.
204,686.		207,400.		<2,714.
m 75,941.		69,445.		6,496.
n 111,916.		110,468.	<del> </del>	1,448.
o 123,514.	ng gain in column (h) and owned by t	104,846.	(1) 1	18,668. psses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess	s of col. (h) gain over col. (k), not less than "-0-")
a				<17,900.
0				<3,587.
c				<3,473.
<u>d</u>				31,797.
<u>e</u>				44,239.
<u> </u>		<u> </u>		8,815.
9			<del> </del>	<u>66.</u> 13,777.
II				<27,205.
<u> </u>			•	58,575.
,k				8,610.
1				<2,714.
m				6,496.
n		1,448.		
0				18,668.
2 Capital gain net income or (net ca	pital loss) { If gain, also enter If (loss), enter "-0	in Part I, line 7	2	
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) and column (c).			
If (loss), enter "-0-" in Part I, line 8	3	J	3	

BURNS FAMILY FOU	NDATION INC.	46-5672	1844 P		OF 2
(a) List and	I describe the kind(s) of property solerick warehouse; or common stock, 20	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a SAYREVILLE NJ b MORRISTOWN NJ c FHLB 3.14%	3.75%		P P P	08/05/13 08/05/13 06/16/15	09/15/15 10/01/15
e FHLB 3.14% f SYSCO CORP 3.0			P P P		03/29/16 05/18/16 07/15/15
g h			P	04/22/15	07/15/15
k		·			
m					
o (e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis		Gain or (loss)	
a 140,025.	(or allowable)	plus expense of sale 124,977.	(e) p	lus (f) minus (g)	15,048.
50,000. c 49,550. d 97,460.		50,778. 49,975.			<778.> <425.> 4,910.
97,460. e 50,000. f 101,000.		92,550. 49,975. 103,615.			25. <2,615.>
<u>g</u> h					
k					
<u>n</u>					
	ng gain in column (h) and owned by t		(I) Los	ses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess of but n	of col. (h) gain òver ot less than "-0-")	
<u>a</u> <u>b</u>					15,048. <778.> <425.>
<u>c</u> <u>d</u> <u>e</u>					4,910. 25.
<u>f</u> <u>g</u> h				-	<2,615.
<u> </u>					
m				<u>-</u>	
0			· ·		
2 Capital gain net income or (net ca	ipital loss) {   If gain, also enter   If (loss), enter   If (loss), enter   If (loss)	in Part I, line 7 "in Part I, line 7	2		<u> 153,777.</u>

N/A

If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

BURNS FAMILY FOUNDATION INC. 46-5671844

Part XV | Supplementary Information

Part XV Supplementary Informatian Grants and Contributions Paid During the				
Recipient	If recipient is an individual,	<del></del>		
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		
FOWA RESCUE INC	NONE	PUBLIC CHARTTY	SUPPORT OF VETERINARY	
PO BOX 3701	[		PROGRAM	
WAYNE, NJ 07470				7,50
LINCOLN ACADEMY	NONE	PUBLIC CHARITY	ANNUAL FUND, SUPPORT	
81 ACADEMY HILL			OF OPERATIONS	
NEWCASTLE, ME 04553		<u> </u>		50,000
LINCOLN COUNTY CHILDRENS SERVICES	NONE	DIIBLTC CHARTTY	SUPPORT OF OPERATIONS	
12 JACKIE'S TRAIL	NONE	FOBBIC CHARITI	SOFFORT OF OPERATIONS	
DAMARISCOTTA, ME 04543				20,000
LINCOLN COUNTY DENTAL INC.	NONE	PUBLIC CHARITY	SUPPORT OF OPERATIONS	
748 MAIN STREET DAMARISCOTTA, ME 04543				50.00
JAMARISCOIIM, ME 04343		-		50,000
LINCOLN COUNTY HEALTHCARE	NONE	PUBLIC CHARITY	SUPPORT OF THE	
35 MILES STREET			HOSPITAL	
DAMARISCOTTA, ME 04543				15,000
NEW HARBOR METHODIST CHURCH	NONE	RELIGIOUS	SUPPORT OF NEW HARBOR	
10 HARBOR HILL ROAD NEW HARBOR, ME 04554			FOOD PANTRY	4,000
NEW HARDOR, ME 04334				4,000
NEW HOPE EVANGELICAL FREE CHURCH	NONE	RELIGIOUS	SUPPORT OF NEW HOPE	
111 SOUTH MAIN STREET			WOMEN'S SHELTER	
SOLON, ME 04979				10,000
NEWCASTLE SECOND CONGREGATIONAL	NONE	RELIGIOUS	SUPPORT OF ECUMENICAL	
CHURCH			FOOD PANTRY	
PO BOX 46				10.00
NEWCASTLE, ME 04553				10,000
OCEANSWIDE INC	NONE	PUBLIC CHARITY	SUPPORT OF SCUBA	
PO BOX 797			PROGRAM	
NEWCASTLE, ME 04553				10,000
RUTHERFORD LIBRARY ASSOCIATION PO BOX 145	NONE	PUBLIC CHARITY	SUPPORT OF OPERATIONS	
SOUTH BRISTOL ME 04568				20,000
Total from continuation sheets				351 500

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 SKIDOMPHA LIBRARY ASSOCIATION NONE PUBLIC CHARITY SUPPORT OF OPERATIONS PO BOX 70 100,000. DAMARISCOTTA, ME 04543 TOWN OF SOUTH BRISTOL, MAINE NONE GOVERNMENTAL ELEMENTARY SCHOOL 2024 STATE ROUTE 129 ORGANIZATION ENRICHMENT PROGRAMS 55,000. SOUTH BRISTOL, ME 04568 Total from continuation sheets

<del> </del>						
FORM 990-PF INTERES	T ON SAVI	NGS AND TEN	IPORARY	CASH IN	VESTMENTS	STATEMENT
SOURCE	( <i>)</i> REVE PER E	NUE		(B) VESTMENT COME	(C) ADJUSTED NET INCOME	
BATH SAVINGS INSTITU CHECKING	JTION,		124.		124.	
TOTAL TO PART I, LIN	IE 3		124.		124.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FR	OM SECUR	ITIES	STATEMENT
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI	R.	(A) EVENUE R BOOKS	(B) NET INVES' MENT INCO	
CORPORATE BONDS DIVIDENDS INTEREST, OTHER MUNICIPAL BONDS US GOVERNMENT	68,190 96,846 15,135 107,340	•		68,190. 96,846. 15,135. 107,340.	96,84 15,13 107,34	6. 5. 0.
INTEREST - TO PART I, LINE 4 =	1,409		0.	1,409.		
FORM 990-PF		LEGAI	, FEES		-	STATEMENT
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM	
LEGAL	_	15,000.		0.		15,000
TO FM 990-PF, PG 1,	LN 16A	15,000.	<del>-</del>	0.		15,000

FORM 990-PF	ACCOUNTI	NG FEES	S	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ACCOUNTING FEES	2,495.	0.		2,495.		
TO FORM 990-PF, PG 1, LN 16B	2,495.	. 0.		2,495.		
FORM 990-PF 0	THER PROFES	SIONAL FEES	S	TATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
INVESTMENT ADVISORY FEES	37,255.	37,255.		0.		
TO FORM 990-PF, PG 1, LN 16C	37,255.	37,255.		0.		
FORM 990-PF	TAX	ES	S	TATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
PAYROLL TAXES	956.	191.		765.		
TO FORM 990-PF, PG 1, LN 18	956.	191.		765.		
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
DIRECTORS & OFFICERS LIABILITY INSURANCE CORPORATE FILING FEE DUES AND PUBLICATIONS AMORTIZATION	750. 35. 1,750. 1,036.	375. 0. 0.		375. 35. 1,750. 0.		
TO FORM 990-PF, PG 1, LN 23	3,571.	375.		2,160.		
				<del></del>		

FORM 990-PF U.S. AND STATE/CITY GOVERN	MENT OBLIGATIONS	STATEMENT 8
	HER V'T BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHED SCHEDULE X	2,387,982. 0.	2,411,235.
TOTAL U.S. GOVERNMENT OBLIGATIONS		
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATION	ONS 2,387,982.	2,411,235.
TOTAL TO FORM 990-PF, PART II, LINE 10A	2,387,982.	2,411,235.
FORM 990-PF CORPORATE STO	CK	STATEMENT 9
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHED SCHEDULE	4,063,740.	4,337,314.
TOTAL TO FORM 990-PF, PART II, LINE 10B	4,063,740.	4,337,314.
FORM 990-PF CORPORATE BON	DS	STATEMENT 10
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHED SCHEDULE	1,987,135.	2,040,232.
TOTAL TO FORM 990-PF, PART II, LINE 10C	1,987,135.	2,040,232.
FORM 990-PF OTHER INVESTME	NTS	STATEMENT 11
VALUATION METHOD	ON BOOK VALUE	FAIR MARKET VALUE
NEGOTIABLE CERTIFICATES OF DEPOSIT COST	554,714. 249,531.	581,503. 249,531.
MONEY MARKET ACCOUNT COST REAL ESTATE INVESTMENT TRUSTS COST	108,698.	122,460.

FORM 990-PF	OTHER ASSETS	STATEMENT	12	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKE VALUE	T
ORGANIZATION COSTS, NET	10,447.	18,741.		0.
TO FORM 990-PF, PART II, LINE 15	10,447.	18,741.		0.

### FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 13

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

JOHN J. LYNCH, JR. PO BOX 6 DAMARISCOTTA, ME 04543

TELEPHONE NUMBER

207-563-1700

#### FORM AND CONTENT OF APPLICATIONS

THE ORGANIZATION REQUIRES ALL POTENTIAL DONEES TO COMPLETE A GRANT APPLICATION FORM AVAILABLE AT THE ORGANIZATION'S ADDRESS OF RECORD. A COPY OF THE APPLICATION IS ATTACHED AND IT OUTLINES ALL OF THE INFORMATION REQUIRED TO BE SUBMITTED.

#### ANY SUBMISSION DEADLINES

### RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION MAKES GRANTS FOR CHARITABLE, SCIENTIFIC, LITERARY OR EDUCATIONAL PURPOSES, OR FOR THE PREVENTION OF CRUELTY TO CHILDREN OR ANIMALS, SUPPORT OF HEALTH CARE ORGANIZATIONS AND LIBRARIES, AND OTHER SUCH PURPOSES AS DEFINED WITHIN THE MEANING OF SECTION 501-C-3 OF THE INTERNAL REVENUE CODE.

2015 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

	Current, Year Deduction	725.	311.	1,036.		ation Deduction
	Current Sec 179	•		0	,	nercial Revitaliza
	Accumulated Depreciation	423.		423.		age, Bonus, Com
	Basis For Depreciation	10,870.	9,330.	20,200.		* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction
,	Reduction In Basis			0		*ITC,
	Bus % Excl				1.20	
	Unadjusted Cost Or Basis	10,870.	9,330.	20,200.		(D) - Asset disposed
F	Lin <b>e</b> No	43	42			/- (a)
	Lıfe	180M	180M			
	Method					
	Date Acquired	120114	010116			
	Description	10RGANIZATION COSTS	ະດີ	* TOTAL 990-PF PG L DEPR & AMORT		
	Asset No		(1)			528102 04-01-15
<u>_</u>						

## **GRANT APPLICATION FORM**

# BURNS FAMILY FOUNDATION, INC. P.O. Box 6 Damariscotta, ME 04543

Organization Information:	
Organization Name:	
Address:	
Telephone:	Email:
Fax:	
Executive Director:	
Telephone:	Email:
Name/Title of Contact Perso	n:
Telephone:	Email:
Total Organization budget fo	r current year:
Date of incorporation:	
FEIN (or equivalent):	
Yes No	a Public Charity under section 501(c)(3)?:  f IRS determination letter and most recent IRS 990
Primary service category of o	organization:
Please summarize the organi	zation's mission (2-3 sentences):

Grant Request Information:
Amount requested:
Please summarize the purpose of your grant request (project title, if appropriate):
Timeframe in which funds will be used:
Project budget (if applicable):
List other private and public funding sources for this project:
Funding sources to date, including amount(s) and date(s) received:
Funding sources pending, including amount(s) and anticipated date(s) of receipt:
By signing below, you certify that your organization is presently classified as a "Public Charity" by the I.R.S.
Signature of authorized official: Date: Name/Title:
Data documents clients B Burns Family Foundation (Nancy). Grant Application Form docx

# BATH SÁVINGS TRUST COMPANY

For the Account of:

Account Number: 50089900

### **BURNS FAMILY FOUNDATION INC**

From 6/1/2016 To 6/30/2016

## **Asset Allocation**

	· · · · · · · · · · · · · · · · · · ·	Market Value	% Portfolio
	Cash & Equivalents	\$249,531 31	2 56%
	Equity	\$4,459,773 64	45 78%
Orah A Francisco	Fixed Income	\$5,032,970 40	51 66%
Cash & Equivalents	Total Assets	\$9,742,275 35	100 00%
	Ex-Dividends	\$5,811 50	
	Accrued Income	\$54,909 9 <u>9</u>	
		\$9,802,996 84	
red Income			

# **Activity Summary**

	Cost Value	Market Value
Previous Statement Balance	\$9,336,229 15	\$9,567,011 18
Interest	\$10,565 07	\$10,565 07
Dividends	\$14,359 89	\$14,359 89
Realized Gains	\$0 00	
Account Fees	(\$9,353 58)	(\$9,353 58)
Net Portfolio Change		\$159,692 79
Ending Balance	\$9,351,800 53	\$9,742,275 35

# BATH: SAVINGS TRUST COMPANY

For the Account of:

Account Number: 50089900

## **BURNS FAMILY FOUNDATION INC**

From 6/1/2016 To 6/30/2016

### **Statement of Assets**

Symbol	Asset Description	Units/Shares or Face Value	Unit Price	Total Cost	Market Value
	·				
0 Common S					
ABT	ABBOTT LABORATORIES	2,300 0000	\$39 31	\$97,917 93	\$90,413 (
WPL .	APPLE COMPUTER	1,200 0000	\$95 60	\$138,696 58	\$114,720 (
CPC	BALCHEM CORPORATION	1,950 0000	<b>\$</b> 59 65	\$120,043 04	\$116,317 5
iR	BROADRIDGE FINANCIAL SOLUTIONS INC	2,400 0000	\$65 20	\$135,247 01	\$156,480 (
FB	BROWN FORMAN INC B	1,200 0000	\$99 76	\$112,055 26	\$119,712 (
CTSH	COGNIZANT TECHNOLOGY SOLUTIONS CORP	2,100 0000	\$57 24	\$124,957 92	\$120,204 (
L	COLGATE PALMOLIVE COMPANY	1,700 0000	\$73 20	\$115,563 39	\$124,440
ois .	DISNEY/THE WALT/CO	800 0000	\$97 82	\$81,434 21	\$78,256
CL	ECOLAB INC	1,150 0000	\$118 60	\$126,346 54	\$136,390
ОМ	EXXON MOBIL CORPORATION	10,000 0000	\$93 74	\$913,850 00	\$937,400
DS	FACTSET RESEARCH SYSTEMS INC	700 0000	\$161 42	\$106,590 02	\$112,994
E	GENERAL ELECTRIC COMPANY	12,300 0000	\$31 48	\$301,903 50	\$387,204
ILD	GILEAD SCIENCES, INC	1,200 0000	\$83 42	\$121,862 84	\$100,104
KHY	JACK HENRY AND ASSOCIATES INC	1,900 0000	\$87 27	\$125,837 19	\$165,813
SY	HERSHEY COMPANY	1,200 0000	\$117 79	\$110,149 20	\$141,348
NJ	JOHNSON & JOHNSON	1,240 0000	\$121 30	\$116,392 60	\$150,412
A	MASTERCARD INCORPORATED	1,500 0000	\$88 06	\$132,541 18	\$132,090
 04675991	MIRANT CORPORATION	372 0000	\$0.00	\$1 00	\$1
KE	NIKE INC CL B	2,400 0000	\$55 20	\$123,938 54	\$132,480
VI.	PHILLIP MORRIS INTERNATIONAL INC	600 0000	\$101 72	\$49,626 00	\$61,032
u EG	PUBLIC SERVICE ENTERPRISE GROUP	1,424 0000	\$46 61	\$48,786 24	\$66,372
BUX	STARBUCKS CORP	2,900 0000	\$57 12	\$130,394 70	\$165,648
RCL	STERICYCLE INC	900 0000	\$104 12	\$122,255 48	\$93,708
	STRYKER CORPORATION	1,200 0000	\$119 83	\$114,976 88	\$143,796
YK .v	TJX COS INC NEW	1,700 0000	\$77 23	\$114,431 11	\$131,291
JX	TRACTOR SUPPLY COMPANY	•	\$91 18	\$123,596 05	\$127,652
sco		1,400 0000	\$102 55		\$82,040
TX	UNITED TECHNOLOGIES CORPORATION	800 0000		\$96,507 49	
FC	VF CORP	1,450 0000	\$61 49 —— Total	\$98,903 27 	\$89,160 \$4,277,478
D Preferred S	Stock		Total	44,004,000 17	<b>41,277,77</b>
PFF	ISHARES S&P US PREFERRED STOCK	1,500 0000	\$39 89	\$58,934 84 ———————————————————————————————————	\$59,835
0. 0	Dd-		Total	\$58,934 84	\$59,835
O Corporate I	AFLAC INC 3 25% 03/17/2025 NON-	100,000 0000	\$103 99	\$101,462 00	\$103,986
	CALLABLE	·	·		
0287YAQ2	ABBVIE INC 3 60% 05/14/2025 CALLABLE 02/14/2025	150,000 0000	\$104 78	\$151,252 50	\$157,174
08252AN8	AFFILIATED MNGRS GROUP 3 50% 08/01/2025 NON-CALLABLE	100,000 0000	\$99 90	\$100,625 00	\$99,895
23135AN6	AMAZON COM INC 3 80% 12/05/2024 NON- CALLABLE	75,000 0000	\$112 08	\$76,312 50	\$84,062
258M0DP1	AMERICAN EXP CR CORP 2 25% 08/15/2019 NON-CALLABLE	100,000 0000	\$102 08	\$101,520 00	\$102,082
71813BL2	BAXTER INTERNATIONAL 3 20% 06/15/2023 CALLABLE 03/15/2023	100,000 0000	\$102 65	\$103,330 00	\$102,649
75896AA8	BED BATH & BEYIND INC 3 749% 08/01/2024	50,000 0000	\$101 94	\$49,755 00	\$50,971
34429BA6	CAMPBELL SOUP CO 3 30% 03/19/2025 CALLABLE 12/19/2024	100,000 0000	\$105 12	\$102,200 00	\$105,116

<sup>\*</sup> All or part of value is unknown

# BATH SÄVINGS TRUST COMPANY

For the Account of:

Account Number: 50089900

## **BURNS FAMILY FOUNDATION INC**

From 6/1/2016 To 6/30/2016

		<del></del>			0/1/2010 10 0/30/2010	
Symbol	Asset Description	Units/Shares or Face Value	Unit Price	Total Cost	Market Value	
20030NBD2	COMCAST CORP 3 125% 07/15/2022 NON- CALLABLE	50,000 0000	\$106 93	\$50,229 00	\$53,464 50	
278642AK9	EBAY INC 2 875% 08/01/2021	50,000 0000	\$103 27	\$50,399 50	\$51,635 50	
278642AL7	EBAY INC 3 45% 08/01/2024 NON- CALLABLE	100,000 0000	\$102 22	\$98,750 00	\$102,216 00	
46625HJZ4	JP MORGAN CHASE 4 125% 12/15/2026 NON-CALLABLE	50,000 0000	\$105 95	\$50,572 50	\$52,976 00	
46625HKA7	JP MORGAN CHASE 2 25% 01/23/2020 NON- CALLABLE	50,000 0000	\$101 38	\$49,992 00	\$50,687 50	
585055AX4	MEDTRONIC INC 3 125% 03/15/2022 CALLABLE 12/15/2021	50,000 0000	\$106 00	\$50,999 00	\$53,002 00	
670346AL9	NUCOR CORP 4 125% 09/15/2022 NON- CALLABLE	100,000 0000	\$108 76	\$104,507 00	\$108,761 00	
670346AM7	NUCOR CORP 4 00% 08/01/2023 NON- CALLABLE	50,000 0000	\$106 80	\$51,480 00	\$53,398 00	
747525AE3	QUALCOMM INC 3 00% 05/20/2022 NON- CALLABLE	100,000 0000	\$105 53	\$100,000 00	\$105,530 00	
76720AAC0	RIO TINTO FIN USA 3 50% 03/22/2022 CALLABLE 12/22/2021	75,000 0000	\$105 23	\$77,471 25	\$78,924 75	
778296AA1	ROSS STORES INC 3 375% 09/15/2024	100,000 0000	\$104 50	\$103,790 00	\$104,495 00	
88166JAA1	TEVA PHARM INC PA 3 65% 11/10/2021 NON-CALLABLE	150,000 0000	\$105 97	\$156,562 50	\$158,959 50	
94973VBA4	WELLPOINT INC 3 30% 01/15/2023 NON- CALLABLE	100,000 0000	\$103 29	\$101,650 00	\$103,293 00	
94974BFJ4	WELLS FARGO COMPANY 3 45% 02/13/2023 NON-CALLABLE	100,000 0000	\$103 47	\$102,500 00	\$103,473 00	
94974BFY1	WELLS FARGO CO 4 10% 06/03/2026 NON- CALLABLE	50,000 0000	\$106 96	<b>\$</b> 51,775 00	\$53,480 50	
25 Tax Exempt	Ronds		Total	\$1,987,134 75	\$2,040,232 00	
107889NQ6	BRICK TWP NJ SER A 4 00% 11/01/2027 CALLABLE 11/01/2019 @PAR	50,000 0000	\$110 57	\$50,332 71	\$55,282 50	
121651EU3	BURLINGTON CNTY NJ 4 00% 08/15/2020 CALLABLE 08/15/2017 @PAR	70,000 0000	\$103 37	\$72,756 13	\$72,356 20	
13281KSR0	CAMDEN CNTY NJ IMT AUTH 4 00% 09/01/2016	50,000 0000	\$100 57	\$52,645 11	\$50,285 00	
404540QE9	HACKENSACK NJ GEN IMT 4 00% 01/15/2021 CALLABLE 01/15/2017 @PAR	100,000 0000	\$101 65	\$102,467 66	\$101,646 00	
408036DJ7	HAMILTON TWP NJ 3 35% 02/01/2022 CALLABLE 02/01/2020 @PAR	25,000 0000	\$107 07	\$25,481 80	\$26,766 75	
50547PFK0	LACEY MUNI AUTH NJ 4 25% 12/01/2024 CALLABLE 12/01/2017 @PAR	100,000 0000	\$104 42	\$101,711 89	\$104,422 00	
6095584J7	MONMOUTH CNTY NJ 4 00% 09/15/2021 CALLABLE 09/15/2017 @PAR	100,000 0000	\$104 12	\$104,313 39	\$104,116 00	
618329MB9	MORRIS TWP NJ 4 00% 11/15/2021	250,000 0000	\$101 28	\$257,952 42	\$253,210 00	
64579FVF7	HACKENSACK NJ AUTH REV 5 25% 01/01/2036 CALLABLE 01/01/2018 @PAR	50,000 0000	\$105 99	\$50,794 19	\$52,996 50	
645918SD6	NEW JERSEY DEV AUTH 4 75% 09/01/2033 CALLABLE 09/01/2018 @PAR	100,000 0000	\$108 59	\$100,169 14	\$108,593 00	
646046MS8	NEW JERSEY ST CTFS 5 00% 06/15/2023	100,000 0000	\$105 23	\$105,663 48	\$105,234 00	
64605LY85	NEW JERSEY EDU FC AUTH 4 375% 09/01/2020 CALLABLE 09/01/2016 @PAR	250,000 0000	\$100 55	\$258,400 22	\$251,377 50	
646065JB9	NEW JERSEY PRNCTN UNIV 4 50% 07/01/2037 CALLABLE 07/01/2017	100,000 0000	\$103 42	\$104,000 54	\$103,416 00	
646065TG7	NEW JERSEY WP UNIV 4 375% 07/01/2025 CALLABLE 07/01/2018 @PAR	100,000 0000	\$106 09	\$101,706 51	\$106,091 00	
646065VD1	NEW JERSEY EDU FAC AUTH 4 25% 07/01/2026 CALLABLE 07/01/2018 @PAR	200,000 0000	\$107 18	\$208,080 39	\$214,350 00	

<sup>\*</sup> All or part of value is unknown

# BATH SAVINGS TRUST COMPANY

For the Account of:

Account Number: 50089900

# **BURNS FAMILY FOUNDATION INC**

From 6/1/2016 To 6/30/2016

· — — —		Units/Shares		Total	Market
Symbol	Asset Description	or Face Value	Unit Price	Cost	Value
646066FP0	NEW JERSEY ED FAC AUTH 4 00% 07/01/2017 REFUNDED PORTION OF 64605L3D8	165,000 0000	\$100 00	\$171,001 62	\$165,000 00
646066GL8	NEW JERSEY ED FAC AUTH 4 00% 07/01/2017 NON-REFUNDED PORTION OF 64605L3D8	85,000 0000	\$100 21	\$88,091 75	\$85,174 25
726345JP7	PLAINFIELD NJ SER A 4 125% 09/15/2021 CALLABLE 09/15/2016 @PAR	100,000 0000	\$100 70	\$101,367 28	\$100,701 00
730604JP1	POINT PLEASANT NJ W&S 3 25% 07/15/2022	50,000 0000	\$109 28	\$49,654 00	\$54,640 00
743549BW6	PROSPECT PARK NJ 3 00% 08/01/2021 CALLABLE 08/01/2020 @PAR	100,000 0000	\$106 35	\$101,730 24	\$106,354 00
754025FX7	RARITAN TWP NJ 3 00% 08/01/2021 CALLABLE 08/01/2020 @PAR	100,000 0000	\$107 80	\$102,524 89	\$107,795 00
765871EB0	RIDGEFIELD NJ 3 00% 08/15/2020	25,000 0000	\$107 66	\$25,775 40	\$26,914 00
825128CF6	SHORE NJ SCH DIST 4 00% 09/15/2026 CALLABLE 09/15/2019 @PAR	30,000 0000	\$108 74	\$30,915 49	\$32,622 30
979149EZ0	WOODBURY CITY NJ 4 00% 11/01/2026 CALLABLE 11/01/2019 @PAR	20,000 0000	\$109 46	\$20,446 15	\$21,892 40
80 Negotiable C	Cert of Deposit		Total	\$2,387,982 40	\$2,411,235 40
	<del></del>	100 000 0000	8402.40	\$100 000 00	\$400 47E 00
02587CED8	AMERICAN EXP BK UT 2 35% 07/29/2020 NON-CALLABLE	100,000 0000	\$103 48	\$100,000 00	\$103,475 00
02587DXN3	AMERICAN EXP CENT BK NY 1 65% 04/30/2019 NON-CALLABLE	50,000 0000	\$101 51	\$50,000 00	\$50,756 50
17284CC85	CIT BANK UT 3 25% 05/14/2024 NON- CALLABLE	100,000 0000	\$108 31	\$101,870 00	\$108,311 00
17284DCP5	CIT BANK 3 20% UT 06/17/2025 CALLABLE 12/17/2015	50,000 0000	\$100 08	\$50,000 00	\$50,041 00
36157PWE5	GE CAPITAL RETAIL BK 3 25% 02/07/2024 NON-CALLABLE	100,000 0000	\$107 95	\$101,800 00	\$107,949 00
38148JNZ0	GOLDMAN SACHS BANK 2 95% 03/25/2025 NON-CALLABLE	100,000 0000	\$106 96	\$100,000 00	\$106,960 00
87165FCA0	SYNCHRONY BANK UT 3 00% 07/18/2024 NON-CALLABLE	50,000 0000	\$108 02 	\$51,044 04	\$54,010 50
			Total	\$554,714 04	\$581,503 00
01 BATH SAVIN MARKET FUND	NGS MONEY				
BSIMM0006	BSTC & CO FIDUCIARY INVESTED CASH	249,531 3100	\$1 00 —	\$249,531 31	\$249,531 31
40 Davi 5-4-4	la cadasant Tarata		Total	\$249,531 31	\$249,531 31
	Investment Trusts			2400 222 22	
WRI	WEINGARTEN REALTY INVESTORS	3,000 0000	\$40 82 Total	\$108,698 02 \$108,698 02	\$122,460 00 \$122,460 00
ash					
	Cash		- ·	\$0 00	\$0.00
Grand Total				\$9,351,800 53	\$9,742,275 35
				Ex-Dividends Accrued Income	\$5,811 50 \$54 909 99
				Acqued income	\$54,909 99 \$9,802,996 84