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DLN: 93491299005047

OMB No 1545-0052

2016

Return of Private Foundation

Department of the Treasury

Form 990-PF

Internal Revenue Service

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 instructions is at www.irs.gov/form990pf.

Open to Public Inspection

or	caler	ndar year 2016, or tax year beginning 01-01-20)16 , aı	nd er	nding 12-31-	2016	
		indation NDA FOUNDATION			A Employer Id	entification numbe	er
- 11	L GLIVA	ADA I CONDATION			65-6332116		
		d street (or P O box number if mail is not delivered to street address)	Room/suite		B Telephone nu	mber (see instructio	ns)
P	O BOX :	1004			(561) 266-9860)	
		n, state or province, country, and ZIP or foreign postal code DTTA, ME 045431084	1		C If exemption	application is pendin	ng, check here
G Ch	neck al	I that apply Initial return Initial return of a	former public charity		D 1. Foreign or	ganızatıons, check h	ere
		Final return Amended return				ganızatıons meeting	
		Address change Name change			test, chec	k here and attach co	mputation 🕨 📙
1 C	neck ty	where of organization \mathbf{V} Section 501(c)(3) exempt private	foundation			indation status was n 507(b)(1)(A), chec	
	Section	1 4947(a)(1) nonexempt charitable trust \Box Other taxable	private foundation				
			☑ Cash ☐ Accru	ıal		ation is in a 60-mont	
		from Part II, col (c), \$ 954,818	be on cash basis)		under sectio	n 507(b)(1)(B), chec	ck nere
Da	rt I	Analysis of Revenue and Expenses (The total	<u> </u>				(d) Dishursamenta
ΓŒ	LI	of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b)	Net investment	(c) Adjusted net	(d) Disbursements for charitable
		equal the amounts in column (a) (see instructions))	books		income	ıncome	purposes (cash basıs only
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)					
	2	Check ► ✓ If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments	1,003		1,003		
	4	Dividends and interest from securities	26,510		26,510		
	5a	Gross rents					
	ь	Net rental income or (loss)					
χĘ	6a	Net gain or (loss) from sale of assets not on line 10	28,762				
Revenue	b	Gross sales price for all assets on line 6a 138,709					
ž	7	Capital gain net income (from Part IV, line 2)			28,762		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b c	Less Cost of goods sold	<u> </u>				
	11	Other income (attach schedule)	8,458		8,458		
	12	Total. Add lines 1 through 11	64,733		64,733		
	13	Compensation of officers, directors, trustees, etc	24,100	<u> </u>	11,750		12,35
	14	Other employee salaries and wages	24,100		11,750		12,55
s	15	Pension plans, employee benefits					
Se	16a	Legal fees (attach schedule)					
<u>ē</u>	ь	Accounting fees (attach schedule)	9 500		0		
and Administrative Expenses	С	Other professional fees (attach schedule)	_				
IIVe	17	Interest					
tra tra	18	Taxes (attach schedule) (see instructions)	% 213		213		
<u>=</u>	19	Depreciation (attach schedule) and depletion					
Ē	20	Occupancy					
₹ □	21	Travel, conferences, and meetings					
anc	22	Printing and publications					
Ď.	23	Other expenses (attach schedule)	9,452		8,729		
Operating	24	Total operating and administrative expenses.					
<u>a</u>		Add lines 13 through 23	34,265		20,692		12,35
)	25	Contributions, gifts, grants paid	73,518				73,51
	26	Total expenses and disbursements. Add lines 24 and 25	107,783		20,692		85,86
	27	Subtract line 26 from line 12	===,,==				,
	a	Excess of revenue over expenses and	-43,050				
	ь	disbursements Net investment income (if negative, enter -0-)			44,041		
	c	Adjusted net income(if negative, enter -0-)			,		
	Banar	<u> </u>	<u> </u>	Щ.	- I NI 44300	<u> </u>	000 PE (2016

19,780

25

727,650

831,610

-103,960

727,650

727,650

19,780

25

684,600

831,610

-147,010

684,600

684,600

2

3

4

5

6

727,650

-43,050

684,600

684,600 Form 990-PF (2016)

0

20,871

25

954,818

Investments—corporate bonds (attach schedule)

Accounts payable and accrued expenses

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule)

Land, buildings, and equipment basis -

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶ _

Other increases not included in line 2 (itemize) ▶ _____

Investments—other (attach schedule)

Less accumulated depreciation (attach schedule) ▶ 5,494

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

c

11

12 13

14

15

16

17 18

19

20 21

22

23

24

25

26

28

29

30

31

Part III

2

3

Liabilities

Balances

Fund

ŏ

Assets 27

Net

Part IV Capital Gains and L	osses for Tax on Investment	t Income			
	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)				(d) Date sold (mo , day, yr)
1aSee Additional Data Table					
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) ir (loss)) minus (g)
a See Additional Data Table					
b					
С					
d					
e					
Complete only for assets show	ring gain in column (h) and owned by	y the foundation	on 12/31/69	(1)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col (ı) (j), ıf any	Gains (Col (col (k), but not	h) gain minus less than -0-) or om col (h))
a See Addıtıonal Data Table					
b					
С					
d					
e					
2 Capital gain net income or (ne	1 2	n, also enter in P ss), enter -0- in I		2	28,762
3 Net short-term capital gain or	(loss) as defined in sections 1222(5	5) and (6)			
If gain, also enter in Part I, lir	ne 8, column (c) (see instructions) I	If (loss), enter -C)-	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

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

(a)

Base period years Calendar

year (or tax year beginning in)

2015

2014

2013

2012

2011

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

instructions

Adjusted qualifying distributions

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the

number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

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

56,552

69,652

60,800

51,707

58,270

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

Net value of noncharitable-use assets

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

973,873

950,163

872,850

899,214

1,026,403

2

3

4

5

6 7

8

Yes 🗸 No

(d) Distribution ratio

(col (b) divided by col (c))

Page 3

0 058069

0 067860

0 063989

0 059239

0 064801

0 313958

0 062792

942,981

59,212

59,652

85,868

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440

5a During the year did the foundation pay or incur any amount to

Page **6**

	(1) Carry on propaganda, or otherw(2) Influence the outcome of any sp	pecific public election (see sect	cion 4955), or to carry	☐ Yes ✓	No		
	on, directly or indirectly, any void (3) Provide a grant to an individual	=		· · Yes 🛂	No		
	(4) Provide a grant to an individual	**		∐ Yes ⊻	No		
	ın section 4945(d)(4)(A)? (see ii		· •		No		
	(5) Provide for any purpose other th						
	educational purposes, or for the			∟ Yes 💌	No		
D	If any answer is "Yes" to 5a(1)–(5), Regulations section 53 4945 or in a					ь	
	Organizations relying on a current n	• •	•	•		-	
С	If the answer is "Yes" to question 5a						
	tax because it maintained expenditu			· · □ Yes □	No		
	If "Yes," attach the statement requir	red by Regulations section 53	4945-5(d)	□ les □	10		
6а	Did the foundation, during the year,	receive any funds, directly or	indirectly, to pay premit	ıms on			
	a personal benefit contract?			· 🗌 Yes 🗸			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be	nefit contract?	6	ь	No
7 _	If "Yes" to 6b, file Form 8870	- 4b - 5-, , , d-4, , , , , , , , , , , , , , , , , , ,					
7a h	At any time during the tax year, was If yes, did the foundation receive an			∟ tes 💌		ь	
		Officers, Directors, Trust					
Pa	and Contractors	incers, Directors, Trust	ices, roundation ric	magers, mgmy raid Er	прюус	-3,	
1	List all officers, directors, trustee	es, foundation managers an	nd their compensation	(see instructions).			
	(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred		pense ac her allow	
See /	Additional Data Table	(B) devoted to position		compensation			
2	Compensation of five highest-pai	d employees (other than th	hose included on line 1	L—see instructions). If no	ne, ente	r "NONE	."
Na	(a) ame and address of each employee pa more than \$50,000	Title, and average hours per week	(c) Compensation	Contributions to employee benefit plans and deferred		ense acc er allowa	,
IONI	· '	(-,		(d) compensation			
ION	<u> </u>						
	I number of allers are also as						_
ota	I number of other employees paid over	er \$50,000			Fa 4	000 PF	(2016)

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ucea, etc	
1		
2		
2		
3		
4		
4		
Part IX-B Summary of Program-Related Investments (see	· · · · · · · · · · · · · · · · · · ·	
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	Amount
1		
2		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		▶ 0
<u> </u>		Form 990-PF (2016)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1b

2

За 3b

4

5

85.868

85,428

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440

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

b

2

3

4

5

Page 9

46.709

46,709

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Form	990-PF	(20	016
Pa	rt XIII		

90-PF (20	016)	
XIII	Undistributed Income	(see instructions)

b From 2012. c From 2013. . .

d From 2014.

e From 2015.

XII, line 4 ▶ \$

indicated below:

1 Distributable amount for 2016 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only. **b** Total for prior years Excess distributions carryover, if any, to 2016 From 2011.

(If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2017.

10 Analysis of line 9 a Excess from 2012. .

b Excess from 2013. .

c Excess from 2014. . . .

d Excess from 2015. . .

e Excess from 2016. . .

6 Enter the net total of each column as

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. d Subtract line 6c from line 6b Taxable amount —see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 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 2011 not

same amount must be shown in column (a))

13,708 8,482

13.611 19,764 (a)

Corpus

64,942

39.159 0

104.101

13,708

90.393

(b)

Years prior to 2015

(c)

2015

9.377

f Total of lines 3a through e.

4 Qualifying distributions for 2016 from Part a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions).

c Treated as distributions out of corpus (Election required—see instructions). d Applied to 2016 distributable amount. e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2016

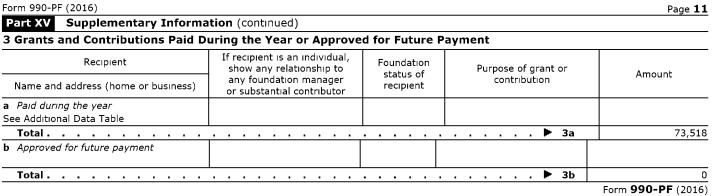
8.482 13,611

19.764

9.377

39.159

See Additional Data Table



Enter gross amounts unless otherwise indicated		Unrelated bu	siness income	Excluded by section	(e) Related or exemp	
-	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
c						
						
-	and contracts from government agencies					
	rship dues and assessments					
	st on savings and temporary cash			14	1,003	
	ments			14	26,510	
	tal income or (loss) from real estate					
	inanced property					
	ebt-financed property	-				
	nvestment income.	-		14	8,458	
	r (loss) from sales of assets other than	 		17	0,436	
invent	ory			14	28,762	
	ome or (loss) from special events					
	rofit or (loss) from sales of inventory evenue a _					
с						
4						
е	of Add columns (b) (d) and (c)		0		C4 722	
e	l Add columns (b), (d), and (e)		0		64,733	
e Subtota Total. Assesse worksh		ns)		13	64,733	64,733
e Subtota Total. A e worksh art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio	ns) e Accomplish income is reporte	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribut	ted importantly to	64,73
eSubtota Total. / ee worksh art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribut	ted importantly to	64,733
eSubtota Total. // e worksh art XVI ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribut	ted importantly to	64,73
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eSubtota Total. // e worksh ort XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribut	ted importantly to	64,73
eSubtota Total. // e worksh art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribut	ted importantly to	64,73
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eSubtota Total. // e worksh art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribut	ted importantly to	64,73
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e Subtota Total. / e worksh art XVI ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribut	ted importantly to	64,733
eSubtota Total. // ee worksh art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribut	ted importantly to	64,733

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Par	t XVI	Ι	Exempt Organiz		ians	icis io c	and mansact	LIUI	is allu Kciai	LIUI	isilips with No	iiciiai it	аыс		
			zation directly or inc e (other than section									ion 501		Yes	No
a Tra	a Transfers from the reporting foundation to a noncharitable exempt organization of										l				
(1) Cash										. [1a(1)		No		
(2) Oth	er ass	sets									[1a(2)		No
b Ot	her tra	ansact	tions												
(1) Sale	es of a	assets to a noncharı	table exemp	t orga	nization.							1b(1)		No
(2) Pur	chase	s of assets from a n	oncharitable	exem	pt organiz	zation						1b(2)		No
(3) Ren	ital of	facılıtıes, equipmen	t, or other a	ssets.								1 b(3)		No
(4) Reir	mburs	sement arrangement	ts								.	1 b(4)		No
(5) Loa	ns or	loan guarantees.									.	1b(5)		No
(6) Perfo	ormar	nce of services or me	embership oi	fund	raising sol	icitations	•		•		.	1b(6)		No
	-		ilities, equipment, m			· ·						. [1c		No
			to any of the above												
			other assets, or serv tion or sharing arrai										3		
	,			,			,		<i>y</i> ,		,				
(a) Lin	e No	(b) Amount involved	(c) Name of	noncha	arıtable exe	mpt organization	_	(d) Description	n of t	ransfers, transactions	, and shar	ing arra	ngemen	its
								-							
								╀-							
								╆							
								┢							
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			ion directly or indire	•		•	•		, ,			_	7		
de	scribed	d in se	ection 501(c) of the	Code (other	than	section 50)1(c)(3)) or in s	ecti	ion 527?			∟	J Yes	✓ N	0
b If	'Yes,"		lete the following so						ı						
		(a) Name of organizatio	n		(1	b) Type of organiz	atio	n		(c) Description	n of relatio	nship		
	Un	der p	enalties of perjury, :	I declare tha	t I ha	ve examın	ed this return.	ınclı	uding accompa	nvir	ng schedules and st	tatement	s. and	to the	best
	of	my kr	nowledge and belief,	, it is true, co											
Sigr	wh	iich pr	reparer has any kno	wledge		ı	•				_				
Here	e 🛦 🛚	***	***				2017-10-25		*****			May the IR with the pi			
		Sian	ature of officer or tr	ustee			Date		— ▶ ∏			(see instr	·		
		31911	active of officer of the	45100			Date		1			(see ilisti), L I	es — N	10
		Pi	rınt/Type preparer's	name	Prep	arer's Sıgr	nature		Date			PTIN			
											Check if self-		P01430)582	
			FREDERICK W BRE	WER					2017-10-25		employed ▶ ☐				
Paic									2017 10-25	_					
Prep	are	r Fir	m's name ► WILL	IAM H BREW	ER C	PA			1			Francis - F7	N F 01	02200	.07
Use	Onl											Fırm's EI	.N ►U1	-03300	JU /
		Fir	m's address ► 85	8 WASHING	ron s	TREET									
			ВА	TH, ME 045	30							Phone no	207) 443-9	9759
			571	, 0 . 0											

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 200 CVR REFINING Р 2013-01-23 2016-06-15 425 ELI LILLY Ρ 2009-08-20 2016-06-15 1025 ENBRIDGE ENERGY PARTNERS Ρ 2014-12-11 2016-10-19 350 EVERSOURCE Ρ 2006-08-08 2016-06-15 Ρ 360 EXXON MOBIL CORP 2006-12-18 2016-06-15 Ρ 115 ISHARES CORE S&P 500 ETF 2016-10-19 Ρ CAPITAL GAINS DIVIDENDS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 1,745 -3,24331,645 17,548 26.672 -13,340 19,950 11,461 32.516 5,268 24,795 9,682 1.386 1,386 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -3,24317,548 -13.34011,461 5,268 9.682 1,386

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter Contributions to (e) other allowances hours per week (b) devoted to position -0-) employee benefit plans and deferred

			compensation	
ROBERT C SANFORD	TRUSTEE	10,000	0	
PO BOX 1084	2 00			

PO BOX 1084 DAMARISCOTTA, ME 045431084	2 00			
DRUSILA SANFORD	TRUSTEE	10,000	0	0
DO DOM 1004	1 300			

DRUSILA SANFORD	TRUSTEE	10,000	0	0
PO BOX 1084 DAMARISCOTTA, ME 045431084	3 00			
KATHERINE EATON	TRUSTEE	300	0	0

PO BOX 1084 DAMARISCOTTA, ME 045431084	3 00			
KATHERINE EATON	TRUSTEE	300	0	0
BISCAY ROAD DAMARISCOTTA, ME 04543	1 00			

DAMARISCOTTA, ME 045431084				
KATHERINE EATON	TRUSTEE	300	0	0
BISCAY ROAD DAMARISCOTTA, ME 04543	1 00			

DAMARISCOTTA, ME 04543				
JONATHON EATON	TRUSTEE	300	0	0
BISCAY ROAD	1 00			

JONATHON EATON	TRUSTEE	300	0	0
BISCAY ROAD DAMARISCOTTA, ME 04543	1 00			

3,500

TRUSTEE

2 00

FREDERICK BREWER

591 EGYPT ROAD

DAMARISCOTTA, ME 04543

ori	orm 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:				
a The name, address, and telephone number of the person to whom applications should be addressed					
	RCARLETON SANFORD PO BOX 1084 DAMARISCOTTA, ME 04543 (207) 563-3847				
b	The form in which applications should be submitted and information and materials they should include				
	APPLICANT SHOULD SUBMIT LETTER REQUESTING FUNDS AND A COPY OF THEIR 990				
С	Any submission deadlines				
	NONE				

NONE

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

NONE

For	m 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:					
a The name, address, and telephone number of the person to whom applications should be addressed						
	DRUSILLA SANFORD PO BOX 1084 DAMARISCOTTA, ME 04543 (207) 563-3847					
b The form in which applications should be submitted and information and materials they should include						
	APPLICANT SHOULD SUBMIT LETTER REQUESTING FUNDS AND A COPY OF THEIR 990					
c	c Any submission deadlines					
	NONE					

NONE d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

NONE

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Purpose of grant or Recipient If recipient is an individual, Foundation Amount show any relationship to status of contribution

Name and address (home or business)	any foundation manager or substantial contributor	recipient	
a Paid during the year			

aid during the year			
HESDA HOSPITAL FOUNDATION	N/A	PUBLIC	DONATION

3a

a Paid during the year				
BETHESDA HOSPITAL FOUNDATION 2815 SOUTH SEACREST BOULEVARD BOYTON BEACH, FL 33435	N/A	PUBLIC CHARITY	DONATION	9,000

BOYTON BEACH, FL 33435				
BIG BROTHERS BIG SISTERS 85 MAIN ST BRUNSWICK, ME 04011	N/A	PUBLIC CHARITY	DONATION	500

85 MAIN ST BRUNSWICK, ME 04011	N/A	CHARITY	DONATION	500
CLC YMCA PO BOX 787 DAMARISCOTTA, ME 04543	N/A	PUBLIC CHARITY	DONATION	10,500

BRUNSWICK, ME 04011				
CLC YMCA PO BOX 787 DAMARISCOTTA, ME 04543	N/A	PUBLIC CHARITY	DONATION	10,500
COASTAL KIDS JACKIES TRAIL	N/A	PUBLIC	CAPITAL EXPENSES	10,000

DAMARISCOTTA, ME 04543	N/A	CHARITY	DONATION	10,500
COASTAL KIDS JACKIES TRAIL DAMARISCOTTA, ME 04543	N/A	PUBLIC CHARITY	CAPITAL EXPENSES	10,000

DAMARISCOTTA, ME 04543		CHARITY		,
COASTAL KIDS JACKIES TRAIL DAMARISCOTTA, ME 04543	N/A	PUBLIC CHARITY	CAPITAL EXPENSES	10,0

COASTAL KIDS JACKIES TRAIL DAMARISCOTTA, ME 04543	N/A	PUBLIC CHARITY	CAPITAL EXPENSES	10

00,1011121120 01101120 111112	1		0 1 2 2 2	
DAMARISCOTTA, ME 04543		CHARITY		
DAMARISCOTTA RIVER ASSOCIATION	N/A	PUBLIC	DONATION	50
110 DELVEDEDE DD	l .	CILADITY/		

DAMARISCOTTA, ME 04545		CHARTI		<u> </u>
DAMARISCOTTA RIVER ASSOCIATION	N/A	PUBLIC	DONATION	500
110 BELVEDERE RD		CHARITY		
DALLA DIGGOTTA DAE 0.4543				1

DAMARISCOTTA RIVER ASSOCIATION	N/A	PUBLIC	DONATION	
110 BELVEDERE RD		CHARITY		
DAMARISCOTTA ME 04543				

U BELVEDEKE KD	1	CHARLLY	
AMARISCOTTA, ME 04543			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year DAMARISCOTTA RIVER ASSOCIATION N/A PUBLIC DONATION 5,000 PO BOX 333 CHARITY DAMARISCOTTA, ME 04543 ELDER CARE NETWORK PO BOX 652 N/A DONATION 10,000 PUBLIC CHARITY DAMARISCOTTA ME 04543

BAHARISCOTTA, HE 04545		CHARTH		
GREAT SALT BAY CSD 559 MAIN STREET DAMARISCOTTA, ME 04543	N/A	PUBLIC ENTITY	DONATION	918
HEALTHY KIDS PO BOX 689 DAMARISCOTTA, ME 04543	N/A	PUBLIC CHARITY	DONATION	2,000

DAMARISCOTTA, ME 04543		LIVITI		
HEALTHY KIDS PO BOX 689 DAMARISCOTTA, ME 04543	N/A	PUBLIC CHARITY	DONATION	2,0

HEALTHY KIDS PO BOX 689 DAMARISCOTTA, ME 04543	N/A	PUBLIC CHARITY	DONATION	2,000
LINCOLN ACADEMY 81 ACADEMY HILL RD	N/A	PUBLIC CHARITY	CAPITAL EXPENSES	20,000

DAMARISCOTTA, ME 04543		CHARITY		
LINCOLN ACADEMY 81 ACADEMY HILL RD	N/A	PUBLIC CHARITY	CAPITAL EXPENSES	20,00

<u>'</u>				
LINCOLN ACADEMY	N/A	PUBLIC	CAPITAL EXPENSES	
81 ACADEMY HILL RD		CHARITY		
NEWCASTLE ME 04553				

3а

LINCOLN ACADEMY	N/A	PUBLIC	CAPITAL EXPENSES	20
81 ACADEMY HILL RD		CHARITY		
NEWCASTLE, ME 04553				

NEWCASTLE, ME 04553	CHARITT	
Total		 73 518

NEWCASTLE, ME 04553		
Total	 	73.518

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LINCOLN ACADEMY N/A PUBLIC DONATION 1,000 81 ACADEMY HILL RD CHARITY NEWCASTLE, ME 04553 MASSASOIT ENGINE COMPANY N/A PUBLIC DONATION 1,500

PO BOX 1206 DAMARISCOTTA, ME 04543		CHARITY		
NAMI MAINE 1 BANGOR STREET AUGUSTA, ME 04330	N/A	PUBLIC CHARITY	DONATION	500
PEMAQUID WATERSHED ASSOCATION 584 MAIN STREET DAMARISCOTTA ME 04543	N/A	PUBLIC CHARITY	DONATION	100

AUGUSTA, ME 04330		CHARITY		
PEMAQUID WATERSHED ASSOCATION 584 MAIN STREET DAMARISCOTTA, ME 04543	N/A	PUBLIC CHARITY	DONATION	100
SKIDOMPHA LIBRARY PO BOX 70	N/A	PUBLIC	DONATION	2,000

PEMAQUID WATERSHED ASSOCATION 584 MAIN STREET DAMARISCOTTA, ME 04543	N/A	CHARITY	DONATION	:
SKIDOMPHA LIBRARY PO BOX 70 DAMARISCOTTA, ME 04543	N/A	PUBLIC CHARITY	DONATION	2,0

Total. 73,518 3a

efile GRAPHIC print - DO NOT P	ROCESS As Filed D	ata -	D	LN: 93491299005047	
TY 2016 Accounting Fe	ees Schedule				
_					
Name: THE GENADA FOUNDATION EIN: 65-6332116					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
TAX PREP FEES	500	0		0	

DLN: 93491299005047

Name: THE GENADA FOUNDATION

EIN: 65-6332116

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Name of Bond	End of Year Book Value	End of Year Fair Market Value
	19,780	20,871

Name: THE GENADA FOUNDATION

EIN: 65-6332116

Name of Stock

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

End of Year Book Value

567,764

End of Year Fair Market Value

836,891

DLN: 93491299005047

TY 2016 Land, Etc.		
Schedule		

DLN: 93491299005047

25

25

1,695

Name: THE GENADA FOUNDATION

FTN: 65-6332116

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EIV 03 0332110				
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
EOUIPMENT	3.824	3,824	0	0

1,670

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	: 93491299005047
TY 2016 Other Expenses Sche	dule			
Name:	THE GENADA FO	NOITADNUC		
EIN: 65-6332116				
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANAGEMENT FEES	8,725	8,725		0
INVESTMENT EXPENSES	4	4		0

723

SUPPLIES

TY	2016	Other	Income	Schedule

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Name: THE GENADA FOUNDATION EIN: 65-6332116

PARTNERSIP DISTRIBUTION

Other Income Schedule								
	Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income				
	NON TAXABLE DISTRIBUTIONS	231	231	231				

8,227

DLN: 93491299005047

8,227

8,227

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491299005047				
TY 2016 Taxes Schedule								
Name: THE GENADA FOUNDATION								
EIN: 65-6332116								
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
FOREIGN TAX WITHHELD	213	213		0				