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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0052

Farras	0010	7 /01	<del></del>	/20		into rubile inspection
For ca	endar year 2016 or tax year beginning	7/01 , 2016,		<u>/30</u>	, 2017	<del>,</del>
FVET.	YN S AND K E BARRETT FOUNDAT	'TON		Α	Employer identification num 26-0472006	nber
	APTAINS WAY	.1014	F	В	Telephone number (see instr	ructions)
	ERY POINT, ME 03905		Ì	_	207-439-4688	•
			T			
			'	С	If exemption application is	pending, check here
G Ch	eck all that apply 🔲 Initial return 🏻 🏻	Initial return of a form	ner public charity	D 1	Foreign organizations, chec	k here ►
	Final return	Amended return	}			لـا
	Address change	Name change		2	! Foreign organizations meeti here and attach computatio	ing the 85% test, check
H Ch		1(c)(3) exempt private f			nere and attach computatio	" - [.]
. [	Section 4947(a)(1) nonexempt charitable	trust 🗌 Other taxable p	orivate foundation	Ε	If private foundation status	
	market value of all assets at end of year J Acc	counting method: X C	ash Accrual		under section 507(b)(1)(A)	, check here
•	m Part II, column (c), line 16)	Other (specify)	L_/	F	If the foundation is in a 60-	month termination
<b>- \$</b>	604,374. (Part I	, column (d) must be or			under section 507(b)(1)(B)	
Part		(a) Revenue and	(b) Net investment	<del>,</del> T	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in	expenses per books	income	`	income	for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)				Ì	purposes (cash basis only)
	(see instructions).)			- 1		(cash basis only)
	Contributions, gifts, grants, etc., received (attach schedule)	51,780.				
	2 Check ► if the foundation is not required to attach Sch B			$\Box$		
	3 Interest on savings and temporary cash investments			- 1	_	
	Dividends and interest from securities	13,237.	13,23	<del>,</del> +	13,237.	<u> </u>
	5 a Gross rents	13,237.	13,43	<del></del>	13,237.	<del></del>
	b Net rental income or (loss)	<del></del>		-		
R	6 a Net gain or (loss) from sale of assets not on line 10	16,584.		$\neg +$		
E	b Gross sales price for all assets on line 6a 130, 066.		<del></del>	_		<del></del>
V E	7 Capital gain net income (from Part IV, line 2)	<del></del>	16,58	4.		
N	8 Net short-term capital gain				0.	
U	9 Income modifications					
E	10 a Gross sales less returns and					
=	allowances b Less Cost of					
691	goods sold					<u></u> ,
_	C Gross profit or (loss) (attach schedule).			}		
• •	11 Other income (attach schedule)					,
•	12 Total. Add lines 1 through 11	81,601.	20,02	13	CFIVEB) 237.	<del></del>
<u>-</u>	13 Compensation of officers, directors, trustees, etc	01,001.	29,02		CEIVHB 237.	<u>_</u>
ഗ	14 Other employee salaries and wages	<u>.</u>	8	@ F 4	מי מחוז מי	
,	15 Pension plans, employee benefits	<del>_</del>		Sil	2011 3	
Α	16 a Legal fees (attach schedule)					
. D M	<b>b</b> Accounting fees (attach sch) See St 1	1,780.			SDEN, UT	
₹ \ \ N	c Other professional fees (attach sch). See St 2	4,655.	4,65	5.1	4,655.	
) g 🕺	17 Interest					
OPERAT	18 Taxes (attach scheduleXsee instrs)					
K R	19 Depreciation (attach			$\neg \uparrow$		,
t i	schedule) and depletion		<del></del>			
N V G E	20 Occupancy 21 Travel, conferences, and meetings	<del></del>	<del></del>			
_	22 Printing and publications.		<del> </del>			
A E N X D P	23 Other expenses (attach schedule)	<del> </del>	<del></del>	-+	<del></del>	
E		[		- 1		
SES	24 Total operating and administrative					
Š	expenses. Add lines 13 through 23	6,435.	4,65	5.	4,655.	
	25 Contributions, gifts, grants paid Part XV	30,000.				30,000.
	26 Total expenses and disbursements. Add lines 24 and 25	20 425	4 65	_	4 CEE	20 000
	27 Subtract line 26 from line 12:	36,435.	4,65	٥٠	4,655.	30,000.
	a Excess of revenue over expenses		}	i		
	and disbursements	45,166.				
	<b>b</b> Net investment income (if negative, enter -0-) .		25,16	6.		
	C Adjusted net income (if negative, enter -0-)				8,582.	

Par	H	Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
		(See instructions )	(a) Book Value	<b>(b)</b> Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	3,575.	27,927.	27,927.
	3				
	}	Less: allowance for doubtful accounts			
	4			····	
	_	Less: allowance for doubtful accounts	<b>├</b>		<del></del>
	5	Grants receivable	ļ		
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)		······································	
S	ŀ	Less: allowance for doubtful accounts			
A S S E T	8	Inventories for sale or use .			- <del></del>
	9	Prepaid expenses and deferred charges	<u> </u>		
S	10:	a Investments — U.S. and state government obligations (attach schedule) Statement 3	161,983.	162,766.	163,096.
		b Investments — corporate stock (attach schedule) Statement 4	265,507.	285,538.	413,351.
	•	c Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans.			<del></del>
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment: basis ►			
		Less: accumulated depreciation (attach schedule)			
		Other assets (describe ► )			
	16	Total assets (to be completed by all filers – see the instructions Also, see page 1, item I)	431,065.	476,231.	604,374.
Ļ	17	,			ļ
A B	18	Grants payable			
I	19		ļ		1
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			1
Ť	21	Mortgages and other notes payable (attach schedule)  Other liabilities (describe ►)	\		į.
Ļ	22	Other habilities (describe)	<del></del>		Į.
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
	-	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			•
NF	24	Unrestricted .	<b>!</b> !		
N F E U T N	25	Temporarily restricted .			
n	26				,
A B A L A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
E L T A	27	Capital stock, trust principal, or current funds	431,065.	476,231.	
SNC	28	Paid-in or capital surplus, or land, bidg., and equipment fund	<u> </u>		
OE	29	Retained earnings, accumulated income, endowment, or other funds			
ŔŚ	30 31	Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances	431,065.	476,231.	,
	3,	(see instructions)	431,065.	476,231.	
Parl	: 111	Analysis of Changes in Net Assets or Fund Balanc			
1	Total	I net assets or fund balances at beginning of year — Part II, coli of-year figure reported on prior year's return).	umn (a), line 30 (must a	gree with	431,065.
		r amount from Part I, line 27a		2	45,166.
		increases not included in line 2 (itemize).		3	
		lines 1, 2, and 3			476,231.
		ases not included in line 2 (itemize).		5	
		I net assets or fund balances at end of year (line 4 minus line 5	) - Part II, column (b), I	ine 30 <b>6</b>	476,231.
DAA		<del></del>			Farm 000 BF (2016)

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	2012	20,364.	405,689.		0.050196
	2011	17,351.	350,076.		0.049564
2	Total of line 1, column (d).			2	0.253737
3	Average distribution ratio for the number of years the foundation	ne 5-year base period — divide the n has been in existence if less than	total on line 2 by 5, or by the 5 years	3	0.050747
4	Enter the net value of nonchar	itable-use assets for 2016 from Pa	t X, line 5	4	574,828.
5	Multiply line 4 by line 3			5	29,171.
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)		6	252.
7	Add lines 5 and 6			7	29,423.
8	Enter qualifying distributions fr	om Part XII, line 4		8	30,000.

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 instructions

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	- see instructio	ns)	
1 a 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>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,	~ · 1		<u>252.</u>
check here. ► X and enter 1% 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)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
foundations only. Others enter -0-)	2		0.
3 Add lines 1 and 2	3		252.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0	)-) 4		0.
<ul><li>5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-</li><li>6 Credits/Payments:</li></ul>	-3		252.
	12.		
b Exempt foreign organizations — tax withheld at source	12.		ı
c Tax paid with application for extension of time to file (Form 8868)			
d Backup withholding erroneously withheld  6 d			į
7 Total credits and payments Add lines 6a through 6d	<del>  -</del>		512.
8 Enter any penalty for underpayment of estimated tax. Check here  If Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9		0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	► 10		260.
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax 260. Refunded	P 11		0.
Part VII-A Statements Regarding Activities			
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	i it	1 a	Yes No
participate or intervene in any political campaign?		I a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		1 ь	X
If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.	1		, ,
c Did the foundation file Form 1120-POL for this year?		1 c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation ►\$  (2) On foundation managers ►\$	0	İ	. [ :
(1) On the foundation ►\$ 0. (2) On foundation managers ►\$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	0	-	i
foundation 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 bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change	95	3	X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a	X
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?		4 b	N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	X
If 'Yes,' attach the statement required by General Instruction T.			.
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		1 1	.
By language in the governing instrument, or		] ]	
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conf with the state law remain in the governing instrument?</li> </ul>	lict		
		7	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 8 a Enter the states to which the foundation reports or with which it is registered (see instructions)	•	<del></del>	_X
ME	·		
<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If 'No,' attach explanation		8 b	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)	(3) or 4942(1)(5	)	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' co.	mplete Part XIV	/ 9	X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their nan and addresses	nes	10	x
BAA	F	orm 990	<b>3-PF</b> (2016)

<u> </u>	Statements Regarding Activities (Continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule (see instructions)	11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address . ► N/A			
14	The books are in care of ► KENNETH BARRETT Telephone no. ► 207-4	<u>39-4</u>	<u>688</u> _	
	Located at ► 16 CAPTAINS WAY KITTERY POINT ME ZIP + 4 ► 03905	· -\*-/\\		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A		
	and enter the amount of tax-exempt interest received or accrued during the year		V	N/A
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			, ,
Par	t VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	1	<u></u>	
·	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?  Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No			!
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			!
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	1		
	(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 termination of government service, if terminating within 90 days )  Yes X No			
b	olf 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)?	1 b	N	/A
	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 before the first day of the tax year beginning in 2016?	1 c		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)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?			
	If 'Yes,' list the years ► 20 , 20 , 20	1	}	<b>,</b>
h	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	1		,
	(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.)	2 b	N	/A
c	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here	<u> </u>	<del>                                     </del>	
	► 20 , 20 , 20 , 20			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			
b	of 'Yes,' did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after 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, Form 4720, to		37	/2
Δa	determine if the foundation had excess business holdings in 2016 )  Did the foundation invest during the year any amount in a manner that would jeopardize its	3 b	N	/A
4 d	charitable purposes?	4 a		X
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	46		X
BAA		orm 90	A DE	

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Part VII-B   Statements Regarding Activiti		4720 May Be Req	uired (continued)		· · · · · · · · · · · · · · · · · · ·
5 a During the year did the foundation pay or incu		40454.33		1	
(1) Carry on propaganda, or otherwise attemp	J		∐ Yes [X	No	<b>i</b> i .
<ul><li>(2) Influence the outcome of any specific public on, directly or indirectly, any voter registra</li></ul>	ition drive?	•		No	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	∐ Yes ∑	No	} } ,
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions	a charitable, etc., organi ) .	zation described	Yes X	] No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	e, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the exceptions disaster assistance	otions	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶	1	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure response	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	No	
If 'Yes,' attach the statement required by Regi	ulations section 53.4945	5–5(d).		<i>-</i>	
6 a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	irectly, to pay premium	S	No	
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirec	tly, on a personal bene	fit contract?	6 b	X
If 'Yes' to 6b, file Form 8870				J	
7 a At any time during the tax year, was the found				No	
b If 'Yes,' did the foundation receive any procee  Part VIII Information About Officers, D				N/A 7b	
and Contractors	irectors, Trustees,	Foundation Manag	gers, mignily raid i	Imployee	ъ,
1 List all officers, directors, trustees, foundation	n managers and their o	compensation (see inst	ructions).		
	(b) Title, and average	(c) Compensation	(d) Contributions to	(2) [	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	l athor o	se account, allowances
See Statement 6	-				
		0.	0.		0.
					<del></del>
2 Compensation of five highest-paid employees (or	ther than those included	on line 1 – see instructio	ns). If none, enter 'NONE		
(a) Name and address of each employee paid more than \$50,000	<b>(b)</b> Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expension	se account, allowances
None			- CONTROLLOGUEN	<del> </del>	
~~~~~					
				1	
				+	
				<del></del>	
Total number of other employees paid over \$50,000	)		•	<u> </u>	0

Form 990-PF (2016) EVELYN S AND K E BARRETT FOUNDATION 26-047	
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	imployees,
3 Five highest-paid independent contractors for professional services (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	
Total number of others receiving over \$50,000 for professional services .	0
Part KA Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 Distributions to five charitable organizations to promote health and	
educational programs for communities. See additional supplemental	
information on Part XV.	30,000.
2	
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
<u>,</u>	<del> </del>
3	
4	
Part X-B Summary of Program-Related Investments (see instructions)	<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
N/A	
2	,
All other program-related investments See instructions	<del></del>
3	
Total. Add lines 1 through 3	0.
BAA	Form <b>990-PF</b> (2016)

see instructions.)	art. Foreign loundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	
a Average monthly fair market value of securities.	1a 565,075
b Average of monthly cash balances	1b 18,507
c Fair market value of all other assets (see instructions)	1 c
d Total (add lines 1a, b, and c)	1d 583,582
e Reduction claimed for blockage or other factors reported on lines 1a and	
1c (attach detailed explanation) . 1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2 0
3 Subtract line 2 from line 1d	<b>3</b> 583,582
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4 8,754
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5 574,828
6 Minimum investment return. Enter 5% of line 5	6 28,741
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private and certain foreign organizations check here ► and do not complete this process.	
1 Minimum investment return from Part X, line 6	1 28,741
2a Tax on investment income for 2016 from Part VI, line 5 . 2a	252.
<b>b</b> Income tax for 2016 (This does not include the tax from Part VI)	
c Add lines 2a and 2b	2c 252
3 Distributable amount before adjustments. Subtract line 2c from line 1	3 28,489
4 Recoveries of amounts treated as qualifying distributions .	4
5 Add lines 3 and 4	5 28,489
6 Deduction from distributable amount (see instructions)	6
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 28,489
Part XII Qualifying Distributions (see instructions)	
<ul> <li>Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:</li> <li>Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26</li> </ul>	1a 30,000
<b>b</b> Program-related investments – total from Part IX-B	1 b
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purpose	es 2
3 Amounts set aside for specific charitable projects that satisfy the	
<ul> <li>Amounts set aside for specific charitable projects that satisfy the</li> <li>Suitability test (prior IRS approval required)</li> </ul>	3 a
<b>b</b> Cash distribution test (attach the required schedule)	3 b
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line	e 4 <b>4</b> 30,000
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5 252
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6 29,748
Note: The amount on line 6 will be used in Part V column (b) in subsequent years when calculating whether	
qualifies for the section 4940(e) reduction of tax in those years.	Form <b>990-PF</b> (2016
	rorm <b>330-PF</b> (2016

#### Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2015	<b>(c)</b> 2015	<b>(d)</b> 2016
1 Distributable amount for 2016 from Part XI, line 7				28,489.
2 Undistributed income, if any, as of the end of 2016:				20,409.
a Enter amount for 2015 only			0.	
<b>b</b> Total for prior years. 20 , 20 , 20	<del> </del>	0.		
3 Excess distributions carryover, if any, to 2016:				
<b>a</b> From 2011 145.				
<b>b</b> From 2012 352.				
<b>c</b> From 2013 349.				
<b>d</b> From 2014 1, 474.				
e From 2015 1, 231.				
f Total of lines 3a through e	3,551.			
4 Qualifying distributions for 2016 from Part XII, line 4. ► \$ 30,000.				
XII, line 4. \$ 30,000.  a Applied to 2015, but not more than line 2a			0.	
• • • • • • • • • • • • • • • • • • • •				<del></del>
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)		0.		·
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2016 distributable amount			_ ···	28,489.
e Remaining amount distributed out of corpus	1,511.			
5 Excess distributions carryover applied to 2016	0.			0.
(If an amount appears in column (d), the same amount 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	5,062.			<del> </del>
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed				
income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		l.		
amount - see instructions		0.		
e Undistributed income for 2015 Subtract line 4a from			_	
line 2a Taxable amount — see instructions		<u> </u>	0.	
f Undistributed income for 2016 Subtract lines		]		
4d and 5 from line 1 This amount must be distributed in 2017	}			0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Electión may be required – see instructions)	0.			
8 Excess distributions carryover from 2011 not				
applied on line 5 or line 7 (see instructions)	145.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	4,917.			
10 Analysis of line 9.	3,517.	<del> </del>		
a Excess from 2012 . 352.				
<b>b</b> Excess from 2013 349.	1		<u>'</u>	
<b>c</b> Excess from 2014 1,474.	1			
<b>d</b> Excess from 2015 1, 231.				
e Excess from 2016 1,511.	l	<u> </u>		

PartXIV Private Operating Foundat			t VII A guestion	26-04/2001	
1 a If the foundation has received a ruling or dete is effective for 2016, enter the date of the	rmination letter that				N/A
<b>b</b> Check box to indicate whether the foundat	•	erating foundation o	described in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year	Tating louridation o	Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2016	<b>(b)</b> 2015	(c) 2014	<b>(d)</b> 2013	(e) Total
<b>b</b> 85% of line 2a		_			<del></del>
<ul> <li>Qualifying distributions from Part XII, line 4 for each year listed</li> </ul>					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c</li> </ul>					
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>b</b> 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization		-		· · · · · · · · · · · · · · · · · · ·	
(4) Gross investment income .					
Supplementary Information assets at any time during th	(Complete this	part only if the	foundation had	\$5,000 or more	e in
1 Information Regarding Foundation Management			·		<del></del>
a List any managers of the foundation who have	contributed more the	nan 2% of the total of	contributions received t	by the foundation bef	ore the
close of any tax year (but only if they have See Statement 7	contributed more	than \$5,000) (See	e section 507(d)(2) )		
h List any managers of the foundation who aver	100/	-tl6	(	nortion of the owner	rahın of
b List any managers of the foundation who own a partnership or other entity) of which the None	foundation has a 1	0% or greater inter	on (or an equally large rest	portion of the owner	rsnip oi
	·	·		· · · · · · · · · · · · · · · · · · ·	
2 Information Regarding Contribution, Grant, Check here ► X if the foundation only ma requests for funds. If the foundation makes gromplete items 2a, b, c, and d	kes contributions to	preselected charitab			
a The name, address, and telephone number of	e-mail address of t	he person to whom a	applications should be	addressed:	
		·			
<b>b</b> The form in which applications should be s	submitted and info	rmation and materi	als they should inclu	de <sup>.</sup>	
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	such as by geograp	phical areas, charita	able fields, kinds of i	nstitutions, or othei	rfactors

Page 11

3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	t	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	
a Paid during the year See Statement 8	or Substantial Contributor			
Total b Approved for future payment			▶ 3a	30,000.
Total .		<u> </u>	▶ 31	J

	A   Analysis of income-r toducing A			·		
Enter gross	amounts unless otherwise indicated	Unrelate	d business income	Excluded by	section 512, 513, or 514	(e)
1 Progra	am service revenue·	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)
a	•					
L		<del></del>				
_						<del></del>
d				† <u> </u>		
е				1 1		
f						
g Fees a	and contracts from government agencies					
-	ership dues and assessments					
	on savings and temporary cash investments					
	ends and interest from securities			14	13,237.	
	ntal income or (loss) from real estate.				, 15,257.	
	inanced property					
	ebt-financed property					
	tal income or (loss) from personal property			<del> </del>		
	investment income					
	(loss) from sales of assets other than inventory			1 1	16,584.	
	come or (loss) from special events			<del>                                     </del>	10,304.	
	profit or (loss) from sales of inventory	<b></b>				
	revenue.				·	,
a	1010111110					
b				+		
c						
d						
e				-		
·	tal Add columns (b), (d), and (e)	<del></del>		<del>                                     </del>	29,821.	
12 Subtot				1 1	29.821.1	
		L				20 021
13 Total.	Add line 12, columns (b), (d), and (e)	\nc \		· · · · · ·	13	29,821.
13 Total. (See worksh	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations		ishment of Evem	at Durnos	13	29,821.
13 Total. (See workst Part XVI-	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See workst Part XVI-	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See workst Part XVI-	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	
13 Total. (See worksh Part XVI- Line No.	Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation.  B Relationship of Activities to the	Accompl	<u>`</u>	<u>-</u>	13 ses	

No

Yes

## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

describ	ed in section 501(c) o ito political organizat	of the Code (oth	her than section	1501(c)(3) organ	nizations) o	r in section 52	27,			1
_	ers from the reporting		a noncharitable	evemnt organiz	ation of:					
(1) Cas	, -	iouridation to a	a nonchantable	exempt organiz	allon or.			1.	a (1)	
	ner assets								2 (2)	X
	ransactions:							<u>  ''</u>	(2)	+^-
	les of assets to a non	charitable ever	nnt organization	<b>-</b>				11	o (1)	X
• •	rchases of assets from							-	(2)	X
• •	ntal of facilities, equip			ilization				<del></del>	3 (3)	X
• •	mbursement arrange	•	assets					<u> </u>	o (4)	X
• •	ŭ							-	o (5)	X
	ans or loan guarantee		n ar fundraiging	collectotions				<u> </u>		$\frac{\Lambda}{X}$
	formance of services g of facilities, equipme				000	•			b (6) I c	X
C Shanng	j or raciilles, equiprii	ent, maining iisi	is, other assets,	, or paid employ	ces				, C	<u></u>
any tra	nswer to any of the a ds, other assets, or ser nsaction or sharing a	rrangement, sh	ow in column (	<b>d)</b> the value of the	ne goods, c	ther assets, o	or services i	received.		
(a) Line no	(b) Amount involved	(c) Name of	f noncharitable exen	npt organization	( <b>d</b> ) De	escription of trans	fers, transaction	ons, and sharin	g arrangeme	ents
N/A		<u> </u>								
		<u> </u>								
		L								
_						-				
			· · · · · · · · · · · · · · · · · · ·							
						_				
	· · · · · · · · · · · · · · · · · · ·									
	_									
describ <b>b</b> If 'Yes,	oundation directly or inc ed in section 501(c) of complete the following	of the Code (ot ing schedule	her than section	n 501(c)(3)) or ıı	n section 5	27? 				X No
	a) Name of organizati	on	<b>(b)</b> Type	e of organization	1	(c)	Description	of relation	ship	
N/A										
			<del>.</del>	<del></del>						
								-		
									<del></del>	
Under correc	penalties of perjury, I declar t, and complete Declaration	re that I have exami i of preparer (other	ined this return, inclu than taxpayer) is bas	iding accompanying s sed on all information	chedules and a of which preparation	statements, and to arer has any knowl	the best of my edge	knowledge and	belief, it is t	rue,
Sign Here	· 1. C. / V C	met	>	9/15/	17 <b>-</b>	trustce	( <u>)</u>	th	ay the IRS d is return with reparer show see instruction	n the n below
Sign	nature of officer or trustee		Le	Date	Title			1   5===	X Yes	No
Paid	William MacI		Preparer's	Clean MM	Ma	Date <b>7-</b> 24- 17	Check self-emplo	yed PTIN	, 005 <u>253</u>	2
Preparer		Villiam M.	MacDonald				Firm's EIN	02-0488		
Use Only		75 Congres		<del></del>					-	
	_	ortsmouth		1			Phone no	603-431	-4746	
BAA	<del> </del>		,						m <b>990-Pi</b>	(2016)

#### 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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

EVELYN S AND K E BARRETT FOUN	DATION	26-0472006
Organization type (check one):	······································	<del> </del>
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a	private foundation
	527 political organization	'
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priv	ato foundation
		ate 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) orga	anization can check boxes for both the General Rule and a S	special Rule See instructions
General Rule		
X For an organization filing Form 990, 990-E2 property) from any one contributor Comple	c, or 990-PF that received, during the year, contributions totate Parts I and II. See instructions for determining a contribu	aling \$5,000 or more (in money or tor's total contributions
Special Rules		
For an organization described in section 50 under sections 509(a)(1) and 170(b)(1)(A)(vi), received from any one contributor, during the Form 990, Part VIII, line 1h, or (ii) Form 990	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, ne year, total contributions of the greater of (1) \$5,000 or (2) 0-EZ, line 1. Complete Parts I and II	ort test of the regulations 16a, or 16b, and that ) 2% of the amount on (i)
For an organization described in section 50 during the year, total contributions of more purposes, or for the prevention of cruelty to	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, list children or animals. Complete Parts I, II, and III.	rom any one contributor, terary, or educational
during the year, contributions exclusively to \$1,000 If this box is checked, enter here the charitable, etc., purpose. Don't complete an	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received or religious, charitable, etc., purposes, but no such contribution total contributions that were received during the year for any of the parts unless the <b>General Rule</b> applies to this organicle, etc., contributions totaling \$5,000 or more during the year	ons totaled more than an <i>exclusively</i> religious, ization becayse
990-PF), but it <b>must</b> answer 'No' on Part IV. Iin	he General Rule and/or the Special Rules doesn't file Sched e 2, of its Form 990; or check the box on line H of its Form filing requirements of Schedule B (Form 990, 990-EZ, or 99	990-F7 or on its Form 990-PF.

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Page

1 of

1 of Part I

Name of organization
EVELYN S AND K E BARRETT FOUNDATION

Employer identification number

26-0472006

Part I of additional space is needed.

(a) Number	. (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Kenneth & Evelyn Barrett  16 Captains Way  Kittery Point, ME 03905	\$ <u>51,780.</u>	Person X Payroll  Noncash  (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions Part II for noncash contributions
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Page

1 to

1 of Part II

Name of organization

EVELYN S AND K E BARRETT FOUNDATION

Employer identification number

26-0472006

N/A	(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. (b) from Description of noncash property given Part I	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(a) No. (b) from Description of noncash property given Part I	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(a) No. (b) from Description of noncash property given Part I	(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
	\$ 	

of Part III

Name of organization

Employer identification number

			FOUNDATION		26-0472006	
Parti III	Exclusivel	y religious,	charitable, etc.	contributions to organizations described in	1 section 501(c)(7	), (8)

or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)

Use duplicate copies of Part III if additional space is needed.

	Ose duplicate copies of Part III II additional	space is needed.	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
~	N/A		
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e)	
	Transferee's name, addres	(e) Transfer of gift is, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
į	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee

$\Delta \Omega$	1	C
ZU	1	O

#### **Federal Statements**

Page 1

26-0472006

#### **EVELYN S AND K E BARRETT FOUNDATION**

Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees

		(a) Expenses per Books	(b) Net Investment <u>Income</u>	(c) Adjusted Net Income	(d) Charitable <u>Purposes</u>
William M MacDonald CPA PA	Total	\$ 1,780. \$ 1,780.	\$ 0.	\$ 0.	\$ 0.

Statement 2 Form 990-PF, Part I, Line 16c Other Professional Fees

•	(a)	(b) Net	(c)	(d)
	Expenses	Investment	Adjusted	Charitable
	per Books	Income	Net Income	<u>Purposes</u>
HM Payson & Co - investment advisor Total	y fee \$ 4,655. \$ 4,655.	\$ 4,655. \$ 4,655.	\$ 4,655. \$ 4,655.	<u>\$ 0.</u>

Statement 3 Form 990-PF, Part II, Line 10a Investments - U.S. and State Government Obligations

U.S. Government Obligations	Valuation	Book	Fair Market
	<u>Method</u>	Value	<u>Value</u>
US Treasury Note, due 8/15/2018 US Treasury Note, due 1/31/2019 US Treasury Note, due 2/15/2020 US Treasury Note, due 5/15/2021 US Treasury Note, due 8/15/2022 US Treasury Note, due 8/15/2023 US Treasury Note, due 8/15/2024 US Treasury Note, due 11/15/2025	Cost Cost Cost Cost Cost Cost Cost Total	\$ 10,429. 19,694. 20,906. 25,840. 23,633. 15,291. 26,234. 20,739. \$ 162,766.	19,965. 21,088. 26,303. 24,663. 15,394. 25,381. 20,004.

Statement 4 Form 990-PF, Part II, Line 10b Investments - Corporate Stocks

Corporate Stocks	Valuation <u>Method</u>	 Book Value	Market alue
Wal Mart Stores Inc. Johnson & Johnson United Technologies Corp. IBM Corp. Oracle Corporation TJX Companies Berkshire Hathaway	Cost Cost Cost Cost Cost Cost	\$ 11,222. 6,703. 9,716. 11,983. 5,922. 3,230. 10,996.	\$ 13,622. 13,229. 17,096. 13,076. 14,039. 14,795. 21,171.

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Statement 4 (continued) Form 990-PF, Part II, Line 10b Investments - Corporate Stocks

Corporate Stocks	Valuation Method	Book Value	Fair Market Value
Corporate Stocks  Travelers Companies Inc. Pfizer Inc. Microsoft Corp. Abbott Laboratories Parker Hannifin Corporation Intel Corp. Abbvie Inc General Dynamics Apple Inc. Danaher Corp.	<u>Method</u>	Book Value \$ 5,329. 10,006. 10,466. 8,485. 7,741. 6,569. 12,505. 7,782. 13,356. 9,062.	Value
Exxon Mobil Wells Fargo & Company Qualcomm Inc Johnson Controls Intl Schlumberger Cummins Amazon Inc. Delphi Automotive PLC Adient PLC Amgen Inc. Fortiv Corp.	Cost Cost Cost Cost Cost Cost Cost Cost	17,688. 12,476. 11,795. 13,620. 8,630. 12,368. 10,957. 9,032. 11,338. 13,248. 13,313.	16,307. 12,744. 9,167. 13,008. 7,242. 19,466. 14,520. 10,956. 11,768. 14,640. 16,281.

# Statement 5 Form 990-PF, Part IV, Line 1 Capital Gains and Losses for Tax on Investment Income

					(h)	How (c	c) Date	(d) Date
T+		(a) Daa					•	
<u> Item</u>			cription				<u>cquired                                    </u>	<u>Sold</u>
1		Johnson Co				ased	Various	Various
2	135 shares	Colgate Pa	almolive		Purch		/21/2011	11/14/2016
3	100 shares	Pepsico			Purch	ased 7	/25/2008	11/14/2016
4	50 shares	Pepsico			Purch		/30/2012	11/14/2016
5	110 shares	Gilead Sci	lences		Purch	ased 2	/20/2015	1/25/2017
6	100 shares	Occidental	l Petroleu	ım	Purch	ased 8	/01/2014	1/25/2017
7	285 shares	CSX			Purch		/08/2012	1/25/2017 1/25/2017
8	200 shares CSX					Purchased 8/30/2012		
9	315 shares	y Fox	Purch	Purchased 7/21/2015				
10	75 shares Procter & Gamble				Purch		/25/2008	5/04/2017
11	40 shares Procter & Gamble				Purch	ased 8	/30/2012	5/04/2017
12	60 shares Procter & Gamble				Purch	ased 11	/06/2015	5/04/2017
13	150 shares BP PLC				Purch	ased 5	/08/2012	5/09/2017
14	175 shares Williams Companies				Purch	Purchased 10/21/2013		5/09/2017
15	19000 par value US Treasury Notes				Purch		/30/2012	6/30/2017
	<b>L</b>		<b>-</b>					
	(e)	(f)	(g)	(h)	(i)	(ţ)	(k)	(1)
	Gross	Depréc.	Cost	Gain		Adj. Bas.		Gain
T	2 1 2 2			4 <del>.</del> 7		10/01/00		/T = = = \

	(e)	(f)	(g)	(h)	(i)	( <u>†</u> )	(k)	(1)
	Gross	Deprec.	Cost	Gain	FMV	Adj. Bas.	Excess	Gain
<u> Item</u>	Sales	Allowed	<u>Basis</u>	(Loss)	12/31/69	12/31/69	(i) - (j)	<u>(Loss)</u>
1	13,813.		14,186.	-373.	,		-	\$ -373.
2	8,999.		5,461.	3,538.				3,538.
3	10,177.		6,801.	3,376.				3,376.
4	5,088.		3,624.	1,464.				1,464.
	·		•	•				

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#### **EVELYN S AND K E BARRETT FOUNDATION**

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Statement 5 (continued)
Form 990-PF, Part IV, Line 1
Capital Gains and Losses for Tax on Investment Income

	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(1)
	Gross	Deprec.	Cost	Gain	FMV	Adj. Bas.	Excess	Gain
Item	Sales	Allowed	<u>Basis</u>	(Loss)	12/31/69	12/31/69	(i)-(j)	(Loss)
5	7,781.		11,244.	-3,463.				\$ -3,463.
6	6,790.		9,456.	-2,666.				-2,666.
7	13,590.		6,227.	7,363.				7,363.
8	9,537.		4,502.	5,035.				5,035.
9	9,634.		10,453.	-819.				-819.
10	6,479.		4,862.	1,617.				1,617.
11	3,456.		2,678.	778.				778.
12	5,184.		4,524.	660.				660.
13	5,288.		6,161.	-873.				-873.
14	5,250.		4,303.	947.				947.
15	19,000.		19,000.	0.				0.
	·		•				Total	\$ 16,584.

Statement 6
Form 990-PF, Part VIII, Line 1
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title a Average H Per Week De	lours	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
Evelyn S. Barrett 16 Captains Way Kittery Point, ME 03905	Trustee 1.00	\$	0.	. \$ 0.	\$ 0.
Kenneth E. Barrett 16 Captains Way Kittery Point, ME 03905	Trustee 1.00		0.	. 0.	0. :
Charles B. Doleac 82 Court Street Portsmouth, NH 03801	Trustee 1.00		0	0.	0.
Peter W. Barrett 11 Dundee Drive Plaistow, NH 03865	Trustee 1.00		0	0.	0.
Richard G. Kaiser 62 North River Road Lee, NH 03861	Trustee 1.00		0	. 0.	0.
		Total 3	3 0	. \$ 0.	\$ 0.

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#### **EVELYN S AND K E BARRETT FOUNDATION**

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Statement 7
Form 990-PF, Part XV, Line 1a
Foundation Managers - 2% or More Contributors

Evelyn S. Barrett Kenneth E. Barrett

#### Statement 8 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of <u>Grant</u>	Amount
Episcopal Relief and Development 815 Second Ave. New York NY 10017	none	PC	Allievate world hunger, promote health, respond to disasters and rebuild communities.	\$ 7,500.
Barbara Bush Children's Hospital 22 Bramhall Street Portland ME 04102	none	PC	Provides a full service children's hospital to meet health care needs for communities in Maine.	5,000.
Time of Wonder Early Learning Center 518 US Route 1 Kittery ME 03904	none	PC	Provides high quality, affordable child care and learning experiences for infants, toddlers and preschool children.	5,000.
Children of the Promise 1020 Highway 71 NE Willmar MN 56201	none	PC	Provides physical, spiritual, emotional, educational and economic care for at-risk children in Haiti.	7,500.
My Place Teen Center 755 Main Street Westbook ME 04092	none	PC	Provides a year round after school program for children ages 10 to 18.	5,000.
			Total	\$ 30,000.