Form '990-PF

Return of Private Foundation

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

OMB No 1545-0052

2016

Do not enter social security numbers on this form as it may be made public.

			nue Service Information about Form 990-PF and its ser					n to Public Inspection
				1/2016	, and	ending	7/31/201	
			undation			A Employer	Identification numbe	r
·			D LITTLE HIGH SCHOOL ALUMNI ASSOC. d street (or P O box number if mail is not delivered to street address)	Tp	om/suite		04 0000500	
			·	700	JITI/Suite	B Tolophone	01-6029596 number (see instruction	
			ND TRUST COMPANY, LLC - TWO CITY CENTER n, state or province, country, and ZIP or foreign postal code			B relephone	number (see instruction	nis)
		RTLA		04101			207-558-622	4
	_		untry name Foreign province/state/county	Foreign pos	etal code	0 11		
1/1/	. 0.	eigii w	Total province state country	i oreign po	361 0000	C n exempli	on application is pendi	ng, cneck nere ▶∐
	G	Chec	call that apply: Initial return Initial return	of a former public	oborit.	D 1. Foreign	organizations, check	here 🕨 🗀
		J.,.J.	Final return Amended ret		Chanty	•	_	_
			Address change Name change				i organizations meeting iere and attach compu	
	H	Chec	type of organization: Section 501(c)(3) exempt pri		02)		oundation status was t	_
	_		on 4947(a)(1) nonexempt charitable trust Other taxa	1	i J		7(b)(1)(A), check here	. ▶□
			narket value of all assets at J Accounting method:					
				☑ Casii ☐	Accrual		dation is in a 60-month	
				on cach hase)		under sect	ion 507(b)(1)(B), chec	k here
				On cash basis /		<u> </u>		(d) Disbursements
		art I	Analysis of Revenue and Expenses (The total of Tamounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and	(b) Ne	t investment	(c) Adjusted net	for chantable
		ł	equal the amounts in column (a) (see instructions))	expenses per books	ır	ncome	ıncome	purposes
		- <i> </i>			+			(cash basis only)
			oContributions, gifts, grants, etc., received (attach schedule)		+			
			Check X if the foundation is not required to attach Sch. B		+		 	
		4	Interest on sayings and temporary cash investments Dividends and interest from securities	3,81	8	3,818		
		5a	Gross rents		┪—	3,010		
		b.	Net rental income or (loss)	-	+ -			
	•	6a	Net gain or (loss) from sale of assets not on line 10	51:	3			
	Revenue	Ь	Gross sales price for all assets on line 6a 92,568	<u></u>	1			
-	Š	7	Capital gain net income (from Part IV, line 2)		<u> </u>	513	· · · · · · · · · · · · · · · · · · ·	
SAMES	Re	8	Net short-term capital gain					
		9	Income modifications					
2		10a	Gross sales less returns and allowances					
(5 <u>6</u>		b	Less. Cost of goods sold					
ڗؙٵ		С	Gross profit or (loss) (attach schedule)					
٠		11	Other income (attach schedule)					
jan		12	Total. Add lines 1 through 11	4,33	1	4,331	0	
~- &	စ္ဆ	13	Compensation of officers, directors, trustees, etc	1,72	3	861		862
₩	penses	14	Other employee salaries and wages					
. Š	96	15	Pension plans, employee benefits	<u></u>				
	_	16a	Legal fees (attach schedule)					
38	9	b	Accounting fees (attach schedule)	42	5	213		212
	Operating and Administrative Ex	_ C	Other professional fees (attach schedule)		+			
	tra	17	Interest					
Ν.	nis	18	Taxes (attach schedule) (see instructions)		9	9		
1	Ē	19	Depreciation (attach schedule) and depletion					
121017	Ad	20 21	Occupancy		+			
$\tilde{\lambda}$	ַס	22	Printing and publications		+			
~	ē	23	Other expenses (attach schedule)		+			
	пg	24	Total operating and administrative expenses.		 			
6	ati		Add lines 13 through 23	2,15	7	1,083	0	1,074
\mathcal{C}	96	25	Contributions, gifts, grants paid	2,00		.,555		2,000
10	Ö	26	Total expenses and disbursements. Add lines 24 and 25.	4,15		1,083	0	
06720	—	27	Subtract line 26 from line 12:	7,10	+	1,003		3,074
<i>~</i>		a a	Excess of revenue over expenses and disbursements	17	4			
		b	Net investment income (if negative, enter -0-) .		+	3,248		
			Adjusted net income (if negative enter -0-)		 	- 3,0		

For Paperwork Reduction Act Notice, see instructions.

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ъ.	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
	art II	should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
-	4	Pledges receivable >			
		Less. allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			_
		disqualified persons (attach schedule) (see instructions) .			
	7	Other notes and loans receivable (attach schedule)			
		Less. allowance for doubtful accounts			
\$	8	Inventones for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ą	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	165,078	165,285	180,700
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
	_	ınstructions. Also, see page 1, item I)	165,078	165,285	180,700
	17	Accounts payable and accrued expenses			
ωħ	18	Grants payable			
Ë	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iat	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0	0	
60		Foundations that follow SFAS 117, check here ▶ □			
Balances		and complete lines 24 through 26 and lines 30 and 31.			
an	24	Unrestricted			
3al	25	Temporarily restricted	ļ <u>.</u>		}
1	26	Permanently restricted	ļ <u>.</u>		
Net Assets or Fund		Foundations that do not follow SFAS 117, check here			
L.		and complete lines 27 through 31.			
0	27	Capital stock, trust principal, or current funds	165,078	165,285	
e es	28	Paid-in or capital surplus, or land, bldg., and equipment fund	<u> </u>		
88	29	Retained earnings, accumulated income, endowment, or other funds			1
t A	30	Total net assets or fund balances (see instructions)	165,078	165,285	
ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	165,078	165,285	
_	rt III	Analysis of Changes in Net Assets or Fund Balances	\		
1		net assets or fund balances at beginning of year—Part II, column (•		405.000
_		of-year figure reported on prior year's return)		 1	165,078
		amount from Part I, line 27a			174
		r increases not included in line 2 (itemize) RETURN OF CAPI			33
		ines 1, 2, and 3		_	165,285
5	Decre	eases not included in line 2 (itemize) net assets or fund balances at end of year (line 4 minus line 5)—Pa	net II agirma /h\ i	30 5	402.00=
0	rotal	net assets of fund balances at end of year (line 4 minus line 5)—Po	arch, coluinn (b), line	30 . 6	165,285

Part	IV Capital Gains and	<u>d Losses for Tax on Investm</u>	ent Income			
	(a) List and describe the	ne kind(s) of property sold (e.g , real estate ouse; or common stock, 200 shs. MLC Co.),	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr)
1a	See Attached Statement					
b						<u> </u>
<u>c</u>	 -				·	
<u>d</u>						<u> </u>
<u>e</u>	- 			<u> </u>		<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		in or (loss) (f) minus (g)
<u>a</u>				 		
<u>b</u>						
C					-	
e						
	Complete only for assets sh	nowing gain in column (h) and owned	by the foundation	on 12/31/69	(I) Gains (Co	ol (h) gain minus
	(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	col (k), but no	ot less than -0-) or from col. (h))
а						
b			<u> </u>			
<u>c</u>						
<u>d</u>						
<u>e</u>			alaa aataa la Da	-11 to 2 7		
2	Capital gain net income o	r (net capital loss) T If (loss)	also enter in Pa , enter -0- in Pa	rt I, line 7	2	513
3		n or (loss) as defined in sections			1	
	•	l, line 8, column (c) (see instruction	•	iter -0- in }		405
Part		der Section 4940(e) for Redu		et Investment Ir	3	495
		ivate foundations subject to the s				
	tion 4940(d)(2) applies, leave	ve this part blank. section 4942 tax on the distribut	able amount of	any year in the bos	o norad?	☐ Yes ဩ No
If "Ye	s," the foundation does not	qualify under section 4940(e). D	o not complete t	his part.	<u> </u>	
1	Enter the appropriate amo	ount in each column for each yea	r; see the instru		ng any entries.	(d)
Cal	Base period years endar year (or tax year beginning in			(c) of nonchantable-use ass	ets (col (b)	stribution ratio divided by col (c))
	2015		6,804	167,9		0.040523
	2014		881	138,		0.006351
	2013		3,794 1,293	133,4 125,1		0.065902
	2012 2011		5,537	120,		0.034151 0.046077
	2011	<u> </u>	5,557	120,	108	0.046077
2 3)				0.193004
		dation has been in existence if le				0.038601
4	Enter the net value of non	ncharitable-use assets for 2016 fr	om Part X, line s	5	4	170,031
5	Multiply line 4 by line 3 .				. 5	6,563
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)			. 6	32
7	Add lines 5 and 6				7	6,595
8		ons from Part XII, line 4				3,074
		ater 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.					Form 990-PF (2016)

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Part \		ns)
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	65
	here ▶ ☐ and enter 1% of Part I, line 27b	
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of	TO SOLD THE SOLD IN SEC.
	Part I, line 12, col. (b).	م
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2	0 65
3	Add lines 1 and 2	
4 5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	65
6	Credits/Payments:	
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 65	2-1
b	Exempt foreign organizations—tax withheld at source	
c	Tax paid with application for extension of time to file (Form 8868) 6c	
d	Backup withholding erroneously withheld 6d	
7	Total credits and payments. Add lines 6a through 6d	65
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10	0
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax ► Refunded ► 11	0
	VII-A Statements Regarding Activities	COMPANY AND ALL
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Yes No
	participate or intervene in any political campaign?	1a X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	
	published or distributed by the foundation in connection with the activities.	
С	Did the foundation file Form 1120-POL for this year?	1c X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	
_	(1) On the foundation. ▶\$ (2) On foundation managers ▶\$	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	
	on foundation managers. \$	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 X
	If "Yes," attach a detailed description of the activities.	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 X X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X 4b N/A
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	5 X
5	If "Yes," attach the statement required by General Instruction T.	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	
•	By language in the governing instrument, or	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	
	conflict with the state law remain in the governing instrument?	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 X
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	
	ME	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	
	or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If	
40	"Yes," complete Part XIV	9 X
10	names and addresses	. 10 X
	mando and additioned in the second se	1.7_

Par	VII-A 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		×
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 ▶ PORTLAND TRUST COMPANY, LLC - Portla Telephone no. ▶ 207-55	8-6224	· - <i>-</i>	
	Located at ► TWO CITY CENTER PORTLAND ME ZIP+4 ► 04101			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ 🗆
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	L	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Pari	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
- 41	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	T^{-}	Yes	No
1a	During the year did the foundation (either directly or indirectly):			
14	(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?			
	(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? \boxed{x} Yes $\boxed{\ }$ 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)?			
	(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.)			
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)? Organizations relying on a current notice regarding disaster assistance check here	1b		<u> </u>
_	—			
С	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?	1c		٦
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_15_, 20, 20			1
b	Are there any years listed in 2a for which the foundation is not 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.)	2b	N/A	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a	▶ 20, 20, 20, 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or		ľ	' i
-	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 determine if the			
	foundation had excess business holdings in 2016.)	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016? .	4b	لييا	_X_

Part	VII-B	Statements Regarding Activities f			20 Ma	y Be Req	<u>uired (</u>	continue	ed)			
5a		the year did the foundation pay or incur an y on propaganda, or otherwise attempt to			(sectio	n 4945(e))	? .	Yes	X No			
		ence the outcome of any specific public el ctly or indirectly, any voter registration drive						Yes	X No			
	(3) Prov	ride a grant to an individual for travel, stud	y, or ot	her similar pu	ırposes	?		X Yes	☐ No	i		
		ride a grant to an organization other than a ion 4945(d)(4)(A)? (see instructions)						☐ Yes	⊠ No			
		vide for any purpose other than religious, cooses, or for the prevention of cruelty to ch						☐ Yes	X No			
b	If any a	nswer is "Yes" to 5a(1)–(5), did any of the	transa	ctions fail to	qualify (under the e	xceptio	ns descri	bed ın	1		<u>i</u>
	_	ions section 53.4945 or in a current notice	_	_						5b		X
С	If the ar	cations relying on a current notice regarding iswer is "Yes" to question 5a(4), does the e it maintained expenditure responsibility for	founda	tion claim ex	emptior	from the ta	ax	 ∏Yes	► □			
		attach the statement required by Regulat							_			i.
6a	Did the on a pe	foundation, during the year, receive any fursional benefit contract?	ınds, di	rectly or indir	ectly, to	o pay prem	iums 	☐ Yes	⊠ No			
b		foundation, during the year, pay premiums to 6b, file Form 8870.	, direc	tly or indirect	ly, on a	personal b	enefit c	ontract?		6b		X
7a		me during the tax year, was the foundation a pa		prohibited tax	chaltar t	rancaction?		Yes	X No			1
b		did the foundation receive any proceeds							_	_	N/A	
Part	VIII	Information About Officers, Directo								ploye	es,	
		and Contractors										
1	List all	officers, directors, trustees, foundation										
		(a) Name and address	hou	e, and average rs per week ed to position	(lf r	mpensation not paid, nter -0-)	emplo	Contribution byee benefit erred compe	plans	(e) Expe	nse ac allowar	
		RUST COMPANY, LLC - Portla	TRUS									
<u>TWO</u>	CITY CE	NTER PORTLAND, ME 04101		1.00		1,723						
2	Compe "NONE	nsation of five highest-paid employees	(other	than those	include	ed on line	—see 	instructi	ons). If	none,	ente	r
	(a) Name	and address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to p	veek	(c) Comper	sation	(d) Contrib employee plans and compens	benefit deferred		ense ac allowar	-
NONE	Ę											
Total	number	of other employees paid over \$50,000 .							•		A DE	
									_		a de	100.00

I IVA	
	Į.
	1
2	
	1
All other program-related investments See instructions	
3	
	Ī
	ł
Total. Add lines 1 through 3	<u> </u>

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

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

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.

Amounts set aside for specific charitable projects that satisfy the:

3

5

3,074

3.074

2

3a

3b 4

5

6

Fari	Vill Undistributed income (see instructions)		, 		
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years pnor to 2015	(c) 2015	(d) 2016
	line 7		↓ _		8,437
2	Undistributed income, if any, as of the end of 2016:		İ		
а	Enter amount for 2015 only		ļ	5,774	
	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2016:		 		
_	From 2011		l .	}	
a			1		
b	From 2012		1		
C	From 2013)		
d	From 2014				
e	From 2015			1	
f	Total of lines 3a through e	(
4	Qualifying distributions for 2016 from Part XII,				
•					
_	` 		}	2 074	
	Applied to 2015, but not more than line 2a		 	3,074	
b	Applied to undistributed income of prior years	1	i		
	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election				
	required—see instructions)]		
d	Applied to 2016 distributable amount				
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2016 .			<u> </u>	
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)		ì		
_			1		
6	Enter the net total of each column as				
	indicated below:		4		
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5)		
þ	Prior years' undistributed income. Subtract		Į.		
	line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				'
	been issued, or on which the section 4942(a)		1		·
	· · · · · · · · · · · · · · · · · · ·				
	tax has been previously assessed		 		
a	Subtract line 6c from line 6b. Taxable		Į į		
	amount—see instructions		<u> </u>		
е	Undistributed income for 2015. Subtract line		\		
	4a from line 2a. Taxable amount—see				
	instructions			2,700	
f	Undistributed income for 2016. Subtract lines				
	4d and 5 from line 1. This amount must be		}	İ	
	distributed in 2017				8,437
7	Amounts treated as distributions out of corpus		 		0,437
•	to satisfy requirements imposed by section				
	• • •			<u> </u>	
	170(b)(1)(F) or 4942(g)(3) (Election may be		}		
_	required—see instructions)				
8	Excess distributions carryover from 2011 not		1)
	applied on line 5 or line 7 (see instructions)		ļ		
9	Excess distributions carryover to 2017.			Ţ	7
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
a	Excess from 2012				
<u>_</u>	Excess from 2013				Í
_	Excess from 2014				
ن س	Evenes from 2015				
a	Excess from 2015		1		
<u>e</u>	Excess from 2016		<u> </u>		

Form 9	90-PF (2016) EDWARD LITTLE HIG	SH SCHOOL ALUM	MNI ASSOC.	·	01-602	29596 Page 10
Part	XIV Private Operating Foundation	ons (see instruct	ions and Part VII	-A, question 9)		N/A
1a	If the foundation has received a ruling of	or determination le	etter that it is a priva	ate operating		
	foundation, and the ruling is effective for			_		
b	Check box to indicate whether the foundation	on is a private operat	ing foundation descr	bed in section	4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) 10tal
	each year listed					0
b	85% of line 2a			<u> </u>	/	0
C	Qualifying distributions from Part XII,		į			
	line 4 for each year listed				1	0
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities .					0
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the		i			
	alternative test relied upon:		/	'		
а	"Assets" alternative test—enter:		/			
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed					0
С	"Support" alternative test—enter:					
	(1) Total support other than gross	/	1			
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					0
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from					
	an exempt organization /					0
	(4) Gross investment income					0
Part		•	•	foundation had	l \$5,000 or more	e in assets at
	any time during the year—		<u>s.) </u>			
1	Information Regarding Foundation		d mare than 00/ at			
а	List any managers of the foundation who before the close of any tax year (but or					ne roungation
	before the close of any tax year (but or	ily il tiley llave col	idibated more than	ι φυ,υυυ <i>).</i> (υσε sec	(d)(2).)	
b	List any managers of the foundation wh	no own 10% or mo	ore of the stock of s	corporation (or an	equally large por	tion of the
U	ownership of a partnership or other ent					uon or the
	ownership of a paralelanip of outer one	aty or whom are	ondation has a 10	,, or greater intere	. .	
	Information Regarding Contribution	. Grant. Gift. Loa	n. Scholarship. et	c Programs:		
	Check here ▶ ☐ If the foundation or		-	_	zations and does	not accept
	unsolicited requests for funds. If the founder other conditions, complete items		fts, grants, etc. (se	e instructions) to in	idividuals or orgar	nizations
	The name, address, and telephone nur		trace of the person	to whom application	one should be add	Iroccod:
а	The hame, address, and telephone hur	mber of e-mail dut	aross or the person	го жиот аррисац	ons should be add	11 C33CU
EDW.	ARD LITTLE HS GUIDANCE OFFICE P	O BOX 1086 AUE	BURN, ME 04211 (207) 333-6652		
	The form in which applications should l				ınclude:	
PERS	SONAL, ACADEMIC AND FINANCIAL R	RECORDS SHOUL	D BE INCLUDED			
	Any submission deadlines		DE MOLODED			
NON	-					
	Any restrictions or limitations on award	ls, such as by geo	graphical areas, ch	naritable fields, kind	ls of institutions. o	r other
	factors:	, 3	- ,	,		
GRAI	DUATES OF EDWARD LITTLE HIGH S	CHOOL IN GOOD	STANDING			

3 Grants and Contributions Paid During	g the Year or Approve	ed for Futur	re Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or		Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution		
a Paid during the year					
See Attached Statement				Ì	
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Total		<u> </u>		3a	2,000
b Approved for future payment			<u> </u>		2,000
NONE		ì		i	
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Total	<u> </u>	<u>.</u>		3b	0

Ente	er gros	s amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by secti	on 512, 513, or 514	(⊖)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
T		ram service revenue:					
	L .				-		
					 		
	ď						
	е —			· ·······			
	f						
	g F	ees and contracts from government agencies					
2	_	bership dues and assessments					
3		st on savings and temporary cash investments .					
4	Divid	ends and interest from securities			14	3,818	
5	Net r	ental income or (loss) from real estate:					
		Pebt-financed property					
	b N	lot debt-financed property					
6	Net r	ental income or (loss) from personal property					
7	Othe	r investment income					
8		or (loss) from sales of assets other than inventory			18	513	
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11	Othe	r revenue: a					
	p _						
							
	d _						
40	e	atal Add salves (b) (d) and (a)			<u> </u>	4 224	
		otal Add columns (b), (d), and (e)			<u>'I </u>	4,331 13	<u>0</u> 4,331
		sheet in line 13 instructions to verify calculation				13	4,331
	rt XVI			ent of Exempt	Purposes		
	e No.	Explain below how each activity for which incom				I importantly to the	
	▼	accomplishment of the foundation's exempt purp	poses (other than	by providing fund	is for such purpos	ses) (See instructi	ons.)
		Not Applicable			. <u> </u>		
							
				·			
		 					
							
		 					
		 					
				·			
					· -		
						·	
				-			
						For	m 990-PF (2016)

Use Only

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a nonchantable exempt organization of: 1a(1) Х 1a(2) Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets . . . 1b(3) (4) Reimbursement arrangements 1b(4) 1b(5) 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements Not Applicable Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations 🔲 Yes 🗓 No described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return with the preparer shown below 12/13/2017 **PRESIDENT** Here (see instructions)? XYes No Signature of officer or trustee Date Title Print/Type preparer's name Preparer's signature Check I if Paid Matte 1 Stay MATTHEW STUMP 12/13/2017 self-employed P00390998 Preparer ► CCH TRUST US Firm's EIN ► 54-1484602 Firm's name

Firm's address > 225 CHASTAIN MEADOWS CT, KENNESAW, GA 30144

440-320-3438

Phone no

	LUMNI ASSOC.			01-602	
Continuation of Part XV, Line	e 3a (990-PF) -	Grant	ts and Cont	ributions Paid	During the Year
Recipient(s) paid during the year					
Name					
THOMAS COLLEGE					
Street					
180 W RIVER RD					
City	Ì		Zip Code	Foreign Count	try
WATERVILLE	Fdeti Ct-t	ME	04901		
Relationship NONE	Foundation Status PC				
Purpose of grant/contribution	PC				Amount
SCHOLARSHIP					1,000
		 _			<u> </u>
Name UNIVERSITY OF NEW ENGLAND					
Street					
11 Hills Beach RD					
City		State	Zip Code	Foreign Coun	try
BIDDEFORD		ME	04005		
Relationship	Foundation Status				
NONE	PC				Ta
Purpose of grant/contribution					Amount
SCHOLARSHIP					1,000
Name					
Street					
City	_ 	State	Zip Code	Foreign Coun	trv
Oily		0.0.0	i	i orongin ocum	<i>y</i>
Relationship	Foundation Status				
	<u> </u>				
Purpose of grant/contribution					Amount
				·	<u> </u>
Name					
Street					
Olt :		State	Zip Code	Foreign Coun	
City	!	State	Zip Code	Foreign Coun	
			l	_	9
Relationship	Foundation Status		<u> </u>		
Relationship	Foundation Status		<u> </u>		
Relationship Purpose of grant/contribution	Foundation Status				Amount
	Foundation Status				
	Foundation Status				
Purpose of grant/contribution	Foundation Status				
Purpose of grant/contribution	Foundation Status				
Purpose of grant/contribution Name Street	Foundation Status				Amount
Purpose of grant/contribution Name	Foundation Status		Zip Code	Foreign Coun	Amount
Purpose of grant/contribution Name Street City			Zip Code	Foreign Coun	Amount
Purpose of grant/contribution Name Street	Foundation Status Foundation Status		Zip Code	Foreign Coun	Amount
Purpose of grant/contribution Name Street City Relationship			Zip Code	Foreign Coun	Amount
Purpose of grant/contribution Name Street City			Zip Code	Foreign Coun	Amount
Purpose of grant/contribution Name Street City Relationship Purpose of grant/contribution			Zip Code	Foreign Coun	Amount
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Purpose of grant/contribution Name Street City Relationship Purpose of grant/contribution Name Street City	Foundation Status	State			Amount

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Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

1

			513	9			aln	8	24	114	172	98	8	-52	77	.157	24	Z	470	920	÷
	Net Gain	ór Loss				_	Net Galn	or Loss							1						
	ĬŸ.	ór						Adjustments													
	sls, Expenses,	d Adjustments	92,055	0		-	_	Depreclation							-						
	Cost or Other Basis, Expenses	Depreciation and Adjustments		•		Expense of Sale	and Cost of	Improvements													
	28	18	82,588	0			Valuation	Method													
	Gross	Sales					Cost or	Other Basis	3,200	15,000	2,482	3,229	15,002	1,232	583	2,059	3,229	1,290	12,918	27,723	4,108
	Totals		Capital Gains/Losses	Other sales		-	Gross Sales	Price	3,224	15,114	2,653	3,144	14,337	1,181	291	1,902	3,254	1 344	13,388	28,343	4,105
			ö				Date	Sold	12/12/2018	12/12/2016	11/8/2016	11/10/2016	11/10/2016	11/18/2016	11/18/2016	11/18/2016	10/11/2016	10/24/2016	8/8/2016	9/22/2018	3/8/2017
						_	Date	Acquired	12/22/2015	12/23/2015	5/13/2016	12/18/2015	7/15/2016	5/23/2018	10/11/2016	11/8/2016	12/18/2015	5/23/2016	12/18/2015	6/18/2015	5/23/2016
							Acquisition	Method													
					Check X If	Purchaser	s s	Business													
JUINEL HIGH INVENTOR								Purchaser													
CI ASSETS						Check X	to include	in Part IV	×	 ×	 ×	×	×	×	×	×	×	×	×	×	×
AIRC HOLL SEC		Amount	18	0			-	CUSIP #	922031836	922031836	464286533	46429B689	73937B654	922908553	464287465	464287234	46429B689	73937B647	46429B689	24610C857	922908553
art I, Line o (880-rr) - Gallizoss from Sale of Assets Ciner Tildii Inventory			Long Term CG Distributions	Short Term CG Distributions				Description	1 VANGUARD S/T INVEST GR-4	2 VANGUARD S/T INVEST GR-A	3 ISHARES EDGE MSCI MIN VO	4 ISHARES EDGE MSCI MIN VO	5 POWERSHARES S&P 500 HIG	6 VANGUARD REIT ETF	7 ISHARES MSCI EAFE ETF	8 ISHARES MSCI EMERGING M	9 ISHARES EDGE MSCI MIN VO	10 POWERSHARES S&P MIDCAL	11 ISHARES EDGE MSCI MIN VO	12 DELAWARE VALUE FUND-I	13 VANGUARD REIT ETF

Part I, Line 16b (990-PF) - Accounting Fees

`	425	213	0	212
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net	Disbursements for Chantable Purposes (Cash Basis Only)
1 TAX PREP FEES	425	213		212

Part I, Line 18 (990-PF) - Taxes	9	9		<u> </u>
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1 FOREIGN TAXES	9	9		

Part II, Line 13 (990-PF) - Investments - Other

		165,078	165,285	180,700
	Basis of	Book Value	Book Value	FMV
Asset Description	Valuation	Beg. of Year	End of Year	End of Year
1 SEE ATTACHED HOLDINGS REPORT			165,285	

Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

495	l sa	/ Over	Losses	24	114	172	98	\$64	-52	-21	-157	24	3	470	620	9
_	, Gains M	Excess FM	Adj Basis or													
	Excess of FMV	Over	Adjusted Basis		 											
0	Adjusted Basis	as of	12/31/69	0	0	0	0	0	0	0	0	0	0	0	0	0
0	FMV	as of	12/31/89	0	0	0	0	0	0	0	0	0	0	0	0	0
495			Gain or Loss	24	114	172	98-	499	-52	-21	-157	24	Z	470	620	
92,055	Cost or Other	Basis Plus	Expense of Sale	3,200	15,000	2,482	3,229	15,002	1,232	583	2,059	3,229	1,290	12,918	27,723	4,108
0			Adjustments													
0		Depreciation	Allowed		 											
92,550		Gross	Sales Price	3,224	15,114	2,653	3,14	14,337	1,181	561	1,902	3,254	1,344	13,388	28,343	4,105
		Date	Sold	12/12/2016	12/12/2016	11/8/2016	11/10/2016	11/10/2016	11/18/2016	11/18/2016	11/18/2016	10/11/2016	10/24/2016	8/8/2016	9/22/2016	3/8/2017
		Date	Acquired	12/22/2015	12/23/2015	5/13/2016	12/18/2015	7/15/2016	5/23/2016	10/11/2016	11/8/2016	12/18/2015	5/23/2018	12/18/2015	6/18/2015	5/23/2016
		Acquisition	Method													
0			CUSIP#	922031836	922031836	464286533	46429B689	73937B654	922908553	464287465	464287234	46429B689	73937B647	46429B689	24810C857	922908553
Short Term CG Distributions			Description of Property Sold	VANGUARD S/T INVEST GR-4	VANGUARD S/T INVEST GR-A	ISHARES EDGE MSCI MIN VO	HARES EDGE MSCI MIN VO	POWERSHARES S&P 500 HIG	VANGUARD REIT ETF	SHARES MSCI EAFE ETF	SHARES MSCI EMERGING M	SHARES EDGE MSCI MIN VO	POWERSHARES SAP MIDCAL	ISHARES EDGE MSCI MIN VO	DELAWARE VALUE FUND-I	VANGUARD REIT ETF
	92,550 0 0 92,055 0 0 0	92,550 0 0 92,055 495 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 92,550 0 0 92,055 495 0 0 0 Cost or Other Cost or Other FM V Adjusted Basis Excess of FMV Gains Minus Acquisition Date Gross Depreciation Basis Plus as of Acquisition Over Excess FMV O	0 92,550 0 92,055 495 0 <	Cutor Cuto	Cube Date Date Cube Date Cube Date Cube Cube Date Cube CUSIP # Method Acquisition Date Gross Date Gross Date Acquisition Date Gross Date Cost or Other Expense of Sales Plus FM V Adjusted Basis Excess of FMV Gains Minus 922031894 Welthood Sales Plice Allowed Adjustments Expense of Sale as of action or Other Adjusted Basis Adjusted B	CUSIP # Acquisition Date Package Gardustinants Date Package Acquisition Date Prices Date Package Depreciation and Package Acquisition Date Prices Date Package Depreciation and Package Adjusted Basis and Packa	CUSIP # Acquireflor Acquireflor Date Acquireflor One One Operation of the control or or or or or or or or or or or or or	CUSIR # Acquisition Date Gross Date Gross Date Cost or Other Expense or Other FM V Adjusted Basis Excess of FMV Gains Minus CUSIR # Acquisition Date Sales Prise Date Adjusted Basis Excess of FMV California Cover Cover Excess of FMV Cover Cover Cover Excess of FMV Cover Cover Cover Excess of FMV Cover Cover Cover Excess of FMV Cover Cover Cover Cover Excess of FMV Cover Cover Cover Cover	CUSIP # Acquieiton Date Gross Date Gross Date Gross Date Gross Date Cost or Other Excess of FMV California as of Gain or Loss FM V Adjusted Basis Excess of FMV Gains Minus CUSIP # Acquieition Date Sales Price Adjusternents Expense of Sale of Sales Price Adjusted Basis Adjusted Basis <t< td=""><td>CUSIP # Acquisition Date of 22,550 O cost or Other of 22,055 495 O cost or Other of 22,055 FM V Adjusted Basis Excess of FMV Calina Minus CUSIP # Acquisition Date of Cost or Other</td><td>CUSIP # Acquisition Acquisition Acquisition Date Date Date Acquisition Garcas Date Date Date Date Acquisition Date Date Date Date Date Date Date Date</td><td>CUSIR # Acquireflor Date Gross Date Gross Date Cost or Other Expense of Sales Pins F M V Adjusted Basis Excess of FMV Calins Minus CUSIR # Acquireflor Acquireflor Sales Profit Adjusted Basis Adjusted Basis or Cost or Other Expense of Sales Pins F M V Adjusted Basis Adjusted Basis or Loss 922031836 12/22/2015 12/12/2016 3.224 Adjusted Basis or Loss 114 0 <t< td=""><td>CUSIP # Acquisition Date Gross Date Date Gross Date Cost or Other Excess of FMV Calina Minus Excess of FMV Calina Minus Calina Minus Excess of FMV Calina Minus Cost or Other Excess of FMV Calina Minus Excess of FMV Calina Minus Cost or Other Excess of FMV Calina Minus Cost or Other Excess of FMV Cost or Other Excess of FMV Column Cover Excess of FMV Cover Cover Cover Excess of FMV Cover Excess of FMV Cover Excess of FMV Cover</td><td>CUSIP # Acquisition Date Date Date Gross of FMV Cost or Other Rease Plus Cost or Other Excess of FMV Calibrated Basis Adjusted Basis</td></t<></td></t<>	CUSIP # Acquisition Date of 22,550 O cost or Other of 22,055 495 O cost or Other of 22,055 FM V Adjusted Basis Excess of FMV Calina Minus CUSIP # Acquisition Date of Cost or Other	CUSIP # Acquisition Acquisition Acquisition Date Date Date Acquisition Garcas Date Date Date Date Acquisition Date Date Date Date Date Date Date Date	CUSIR # Acquireflor Date Gross Date Gross Date Cost or Other Expense of Sales Pins F M V Adjusted Basis Excess of FMV Calins Minus CUSIR # Acquireflor Acquireflor Sales Profit Adjusted Basis Adjusted Basis or Cost or Other Expense of Sales Pins F M V Adjusted Basis Adjusted Basis or Loss 922031836 12/22/2015 12/12/2016 3.224 Adjusted Basis or Loss 114 0 <t< td=""><td>CUSIP # Acquisition Date Gross Date Date Gross Date Cost or Other Excess of FMV Calina Minus Excess of FMV Calina Minus Calina Minus Excess of FMV Calina Minus Cost or Other Excess of FMV Calina Minus Excess of FMV Calina Minus Cost or Other Excess of FMV Calina Minus Cost or Other Excess of FMV Cost or Other Excess of FMV Column Cover Excess of FMV Cover Cover Cover Excess of FMV Cover Excess of FMV Cover Excess of FMV Cover</td><td>CUSIP # Acquisition Date Date Date Gross of FMV Cost or Other Rease Plus Cost or Other Excess of FMV Calibrated Basis Adjusted Basis</td></t<>	CUSIP # Acquisition Date Gross Date Date Gross Date Cost or Other Excess of FMV Calina Minus Excess of FMV Calina Minus Calina Minus Excess of FMV Calina Minus Cost or Other Excess of FMV Calina Minus Excess of FMV Calina Minus Cost or Other Excess of FMV Calina Minus Cost or Other Excess of FMV Cost or Other Excess of FMV Column Cover Excess of FMV Cover Cover Cover Excess of FMV Cover Excess of FMV Cover Excess of FMV Cover	CUSIP # Acquisition Date Date Date Gross of FMV Cost or Other Rease Plus Cost or Other Excess of FMV Calibrated Basis Adjusted Basis	

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

									1 723		
Name	Check "X"	Street	å	State	Zin Code	Foreign Country		Avg Hrs			Expense
VIANDA TOLIGE CIAN ITOOR		CULTUDO STILL CARE	2000			Talling Likeling	Dill	LOI WOOK	Colliberisation	Denems	Account
PORTLAND IROST COMPANY,	<u>.</u>	I WO CITY CENTER	PORTLAND	AE O	4101		TRUSTEE	1 00	1,723		
					_			-			•
,				_			_	_	_	_	

Part VI, Line 6a (990-PF) - Estimated Tax Payments

		Date	Amount
1	Credit from prior year return	1	65
2	First quarter estimated tax payment	2	
3	Second quarter estimated tax payment	3	
4	Third quarter estimated tax payment	4	
5	Fourth quarter estimated tax payment	5	
6	Other payments	6	
	Total		65

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Part XIII, Line 2a, Column C (990-PF) - Prior Year Undistributed Income		
.1 Distributable amounts for 2015 that remained undistributed at the beginning of the 2016 tax year	1	5,774
2	2	
3	3	
4	4	
5	5	
<u></u>		
<u> </u>	🐧	
10 Total	3	5 774

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