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Yorm 990-PF

Return of Private Foundation

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

OMB No 1545 0052 Open to Public Inspection

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 lrs gov/form990pf

For e	cater	idar year 2016 or tax year beginning SEP	1, 2016	, and ending	AUG 31, 2017	
Nar	ne of	foundation			A Employer identification	number
F	RA	NK B. WALKER TRUST				
С	/0	BATH SAVINGS TRUST CO			01-6008118	}
Nur	ber a	nd street (or P.O. box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
1	05	FRONT STREET			207-443-62	296
		own, state or province, country, and ZIP or foreign p	ostat code	- <u> </u>	C if exemption application is a	
		H, ME 04530				
		all that apply Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organization	s, check here
-		Final return	Amended return	,	, and a supplied to the suppli	,
		Address change	Name change		2 Foreign organizations me check here and attach co	eeting the 85% test
H (heck	type of organization X Section 501(c)(3) ex			7	
Ϊ-	_		Other taxable private founda	ation	E If private foundation sta under section 507(b)(1	
l Fa		arket value of all assets at end of year J Accounting		Accrual	7	
			her (specify)	Accidal	F If the foundation is in a under section 507(b)(1	. [
	\$	496,647. (Part I, colu		basis I	ander section 507 (b)(t	MD), check liefe
				_ - :	(a) Advested not	(d) Disbursements
		Analysis of Revenue and Expenses (The total of amounts in columns (b) (c) and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes
					ļ	(cash basis only)
	1	Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch. B			N/A	
		Interest on savings and temporary				· · ·
	3	cash investments	7 701	7 701	 	COLVENIA 1
	4	Dividends and interest from securities	7,721.	7,721		STATEMENT 1
		Gross rents				
	b	Net rental income or (loss)	1 015			
ė		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	1,915.	<u> </u>		
`= દુ	b	Gross sales price for all assets on line 6a 76,392.	-			
CU1/ Revenue	7	Capital gain net income (from Part IV line 2)		1,915		<u>'</u>
5	8	Net short-term capital gain			H RECE!V	ED / '
⊣	9	Income modifications Gross sales less returns				
-	10a	and allowances			8 NOV 14	2017 9
<u>></u>	þ	Less Cost of goods sold				
	C	Gross profit or (loss)			OGDEN	UT -
7	11	Other income				
Z _	12	Total Add lines 1 through 11	9,636.	9,636.		201
ANN H	13	Compensation of officers directors trustees eld	3,907.	<u>3,516</u>	,	391.
٦,	14	Other employee salaries and wages				
ັດ		Pension plans, employee benefits			_	
nses	16a	Legal fees				
8		Accounting fees STMT 2	625.	0.		625.
щ	C	Other professional fees				
š		Interest			<u> </u>	
Operating and Administrative Expe	18	Taxes STMT 3	152.	152.	,	0.
JIS.	19	Depreciation and depletion		 -	<u> </u>	ļ
Ē	20	Occupancy				
¥	21	Travel, conferences, and meetings				
9	22	Printing and publications				
ĝ	23	Other expenses		····-	<u> </u>	<u> </u>
at	24	Total operating and administrative				
<u>8</u>		expenses Add lines 13 through 23	4,684.	3,668.	<u> </u>	1,016. 22,466.
0	25	Contributions, gifts, grants paid	<u>22,466.</u>	<u> </u>		22,466
	26	Total expenses and disbursements				00 400
_		Add lines 24 and 25	27,150.	<u>3,668</u>		23,482.
	27	Subtract line 26 from line 12	<u>-</u>	•		' '
		Excess of revenue over expenses and disbursements	<17,514.	>	 	<u> </u>
		Net investment income (it negative lenter 0.)		5,968.		
_		Adjusted net income (if negative enter -0-)		_ = =	<u>N/</u> A	orm 990-PF (2016)
6235	01 11	23 16 LHA For Paperwork Reduction Act Notice	e, see instructions	a	IC-P	orm 990-PF (2016)

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of ye	
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing			
2 Savings and temporary cash investments	4,237.	23,697.	<u>23,697.</u>
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		ľ	
disqualified persons			
7 Other notes and loans receivable			
Less: allowance for doubtful accounts			
g 8 Inventories for sale or use			
9 Prepaid expenses and deferred charges			·
10a investments - 0.5. and state government obligations			
# 2012	4 309,753.	293,112.	372,639.
c Investments - corporate bonds STMT	5 80,280.	40,052.	40,245.
11 Investments - land, buildings, and equipment basis			
Less accumulated depreciation			
12 Investments - mortgage loans	-		
13 Investments - other STMT (40,328.	60,223.	60,066.
14 Land, buildings, and equipment: basis			
Less accumulated depreciation			
15 Other assets (describe ►			
16 Total assets (to be completed by all filers - see the	434 500	417 004	406 647
instructions. Also, see page 1, item I)	434,598.	417,084.	496,647.
17 Accounts payable and accrued expenses			
18 Grants payable			
g 19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 		
22 Other liabilities (describe >	_/		
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.	-		
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other fund 30 Total net assets or fund balances			
and complete lines 27 through 31.	_		
27 Capital stock, trust principal, or current funds	0.	0.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other fund		417,084.	
30 Total net assets or fund balances	434,598.	417,084.	
-			
31 Total liabilities and net assets/fund balances	434,598.	417,084.	
Part III Analysis of Changes in Net Assets or Fun			
			,
1 Total net assets or fund balances at beginning of year - Part II, column (a), linė 30		121 500
(must agree with end-of-year figure reported on prior year's return)		. 1	434,598. <17,514.>
Enter amount from Part I, line 27a		2 3	<u> </u>
Other increases not included in line 2 (itemize) Add lines 1, 2, and 3		4	417,084.
		5	0.
5 Decreases not included in line 2 (itemize) ► 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Par	t II. column (b), line 30		417,084.
Total for assets of fund balances at one of your finite a finite of all	The Solution (Signification)		Form 990-PF (2016)

.Form 990-PF (2016)

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Part IV Capital Gains a	and Losses for Tax on In	vestmen	t Income					
	ibe the kind(s) of property sold (e.g rehouse; or common stock, 200 shs			(b) Ho P - F D - I	w acquired Purchase Donation	(c) Date a (mo., da	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a								
b SEE ATTACHED	STATEMENT							···
<u>c</u>				 -				
e				-				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		. 		ain or (loss (f) minus (
8								
b						<u> </u>		
C					<u> </u>			
d	· 							
e 76,392.			74,47	7.				1,915.
Complete only for assets showing	g gain in column (h) and owned by t						ol. (h) gaın ıot less thaı	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		col. (j), if any			Losses	(from col. (h))
<u>a</u>								
<u>b</u>								
<u>c</u>								
<u>u</u>								1,915.
· · · · · · · · · · · · · · · · · · ·	C 16 anns also such	- Da 41 line	7	- -				1,313.
2 Capital gain net income or (net cap	oital loss) { If gain, also enter If (loss), enter -0-	IN Part I, line In Part I line	/ 7	 	2			1,915.
, ,	•		•	7				
3 Net short-term capital gain or (loss If gain, also enter in Part I, line 8, o		u (b).						
If (loss), enter -0- in Part I, line 8					3		N/A	_
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inves	stment Inc	come		
f section 4940(d)(2) applies, leave th Was the foundation liable for the secti f "Yes," the foundation does not qualit Enter the appropriate amount in ei	on 4942 tax on the distributable am	mplete this pa	nrt			- 		Yes X No
(a) Base period years Calendar year (or tax year beginnin	g in) Adjusted qualifying dist	tributions	Net value of no	(c) ncharita	ble-use assets		Distrib (col. (b) div	(d) ution ratio ided by col. (c))
2015		4,138.			469,454			.051417
2014		4,355.			486,743	3.		.050037
2013	2	4,245.			482,225	5.		.050277
2012	2	2,758.			471,193			.048299
2011	2	<u>1,998.</u>			438,227	7.		.050198
2 Total of line 1, column (d)						2		.250228
3 Average distribution ratio for the 5 the foundation has been in existen	•	on line 2 by 5,	or by the number	of years	;	3		.050046
Enter the net value of noncharitable	e-use assets for 2016 from Part X, I	ine 5				4		442,469.
Multiply line 4 by line 3						5		22,144.
Enter 1% of net investment income	e (1% of Part I, line 27b)	,				6		60.
7 Add lines 5 and 6						7		22,204.
B Enter qualifying distributions from						8		23,482.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	elete that part usin	g a 1% 1	tax rate.	 _		000 PE (0040)
623521 11-23-16							F	orm 990-PF (2016)

623531 11-23-16

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C/O BATH SAVINGS TRUST CO

P	art VII-A Statements Regarding Activities (continued)		12.4	
			Yes	No
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	<u> </u>	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1		
40	If "Yes," attach statement (see instructions)	12	77	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	X	L
14	The books are in care of ► BATH SAVINGS TRUST COMPANY Telephone no. ► 207-4	13-6	206	
17	Located at ► 105 FRONT STREET, BATH, ME ZIP+4 ► 0			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	<u> </u>		\Box
	and enter the amount of tax-exempt interest received or accrued during the year	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,		Yes	No
	securities, or other financial account in a foreign country?	16] .	Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country	<u></u>		
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	L	Yes	No
1a	During the year did the foundation (either directly or indirectly):		()	ı
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1	1 1	
	(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? Yes X No	ĺ		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1	1 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)?		1 (
] [
	(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			
	termination of government service, if terminating within 90 days.) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1	[]	
υ	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	16		
	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?	1c		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)):	Í	1 1	
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		1 1	
	before 2016?	1		
	If "Yes," list the years -,,			
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.) N/A	2b	 	
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1		
9.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1		
Ja	during the year?]]	
h	If "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 determine if the foundation had excess business holdings in 2016.) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	rm 99 0		<u>X</u>
	Le Le	rm MM		711761

Part VII-B Statements Regarding Activities for Which		Required (contro	01-0009T	10	Page 6		
	TOTAL 4/20 IVIAY DO	nequired (contin	ueo)				
5a During the year did the foundation pay or incur any amount to:	n 404E(a)\)2		es X No				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,							
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No Yes X No							
(4) Provide a grant to an organization other than a charitable, etc., organization		٠٠ بـــــ					
4945(d)(4)(A)? (see instructions)	11 000011000 III 00011011		es X No				
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for							
the prevention of cruelty to children or animals?			es X No	l	- i		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described						
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?	-	N/A	5b			
Organizations relying on a current notice regarding disaster assistance check h	ere		▶□ [
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it mainta	uned					
expenditure responsibility for the grant?	N	I/A 🔲 Ye	8 No	ļ			
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).		Ì		1		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on						
a personal benefit contract?		Ye	8 X No				
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		_	6b	X		
If "Yes" to 6b, file Form 8870.							
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🔀 No 📙				
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b			
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	y				
List all officers, directors, trustees, foundation managers and their	compensation						
List all officers, directors, distees, foundation managers and their		(c) Compensation	(d) Contributions to	(a) F	ynense		
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	accou allov	xpense int, other wances		
BATH SAVINGS TRUST COMPANY	TRUSTEE						
105 FRONT STREET							
BATH, ME 04530	1.00	3,907.	0.		<u> </u>		
			1				
				I			
		 					
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."					
			(d) Contributions to employee benefit plans and deferred	(e) E	xpense		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	and deferred compensation	accou allov	xpense int, other wances		
NONE							
	l						
	<u> </u>						
		}					
							
			1				
- 1		<u> </u>			0		
Total number of other employees paid over \$50,000			Form	990-P	F (2016)		
			1 01111	•	(2010)		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		<u>-</u>
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	e	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	>	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 <u>N/A</u>		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1 N/A		Amount
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	For	0. n 990-PF (2016)

Form 990-PF (2016) C/O BATH SAVINGS TRUST CO 01-6008118 Page 8 Minimum Investment Return (All domestic foundations must complete this part, Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 449,207. a Average monthly fair market value of securities Average of monthly cash balances 1b c Fair market value of all other assets 1c 449,207. d Total (add lines 1a, b, and c) 10 Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 3 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 442,469. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 Minimum investment return. Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 22,123. Minimum investment return from Part X, line 6 60. Tax on investment income for 2016 from Part VI, line 5 Income tax for 2016. (This does not include the tax from Part VI.) Add lines 2a and 2b C 063. Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 22,063. Add lines 3 and 4 5 0. Deduction from distributable amount (see instructions) 6 063. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 23,482. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 Program-related investments - total from Part IX-B 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 23,482. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b

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

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6

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				22.063
line 7				22,063.
2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only			1,665.	
b Total for prior years:			1,005.	
b rotal for prior yours.		0.		
3 Excess distributions carryover, if any, to 2016:		- 0.		
a From 2011				
b From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ►\$23, 482.				
a Applied to 2015, but not more than line 2a			1,665.	
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				21,817.
e Remaining amount distributed out of corpus	0.			<u> </u>
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:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions	}	0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				<u>246.</u>
7 Amounts treated as distributions out of	l l		ŀ	
corpus to satisfy requirements imposed by			Į	
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				e e
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	0.			
Analysis of line 9:				
a Excess from 2012	ł		ł	
b Excess from 2013				
c Excess from 2014		ŀ		
d Excess from 2015		1	1	
e Excess from 2016				- 000 PF

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b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

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

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Form 990 PF (2016) C/O BATH SAVINGS TRUST CO
Part XV Supplementary Information (continued)

Tark A Supplementary information				
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				- · · · ·
DAYS FERRY CONGREGATIONAL CHURCH	NONE	PC	UNRESTRICTED GENERAL	
OLD STAGE ROAD			SUPPORT	
WOOLWICH ME 04579				11,233,
NORTH WOOLWICH METHODIST CHURCH 35 CHOPPS CROSS ROAD	NONE	PC	UNRESTRICTED GENERAL SUPPORT	
WOOLWICH, ME 04579	<u> </u>			11,233.
Tatal	<u> </u>		▶ 3a	22.466
Total b Approved for future payment			Ja	22.466.
NONE				
Total			<u>▶ 3b</u>	m 990-PF (2016)
			FO	ını əəv-r r (2016)

Enter gross amounts unless otherwise indicated.		J b			
-	(a) Business	d business income (b)	(C) Exclu-	ed by section 512, 513, or 514 (d)	(e) Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
8					
b					· · · · · · · · · · · · · · · · · · ·
c					
d					
e			_		
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	7,721.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property			7-7		
b Not debt-financed property					
6 Net rental income or (loss) from personal			1		
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory	İ		18	1,915.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
11 Other revenue:			7		
a	1				
b					
c					
d			 - 		
A	_				
· · · · · · · · · · · · · · · · · · ·		0		9,636.	0
12 Subtotal, Add columns (b), (d), and (e)				13	9,636
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)					
3 Total. Add line 12, columns (b), (d), and (e)	s.)				
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations		muliahment of E		Purnosos	
* * * * * * * * * * * * * * * * * * * *		mplishment of E	xempt	Purposes	
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations	s to the Acco			·	plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities	os to the Acco	column (e) of Part XVI-		·	olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	olishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	blishment of
See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	plishment of
See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	plishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	Dishment of
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	os to the Acco	column (e) of Part XVI-		·	plishment of

623621 11-23-16

	Exempt Organi	•	31013 10 1			sinps with Notion	untabi	•		
1 Did the or			of the following	ng with any other organizati	ion described in sec	tion 501(c) of		Yes	No	
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
	from the reporting founda]		
(1) Cash							1a(1)		X	
(2) Other	r assets						1a(2)		X	
b Other tran	nsactions:						,]	}	
(1) Sales	s of assets to a noncharitat	ole exempt organiza	tion				1b(1)		_X_	
(2) Purci	hases of assets from a nor	icharitable exempt o	organization				16(2)	<u> </u>	X	
(3) Renta	al of facilities, equipment, o	or other assets					1b(3)	ļ	X	
• •	bursement arrangements						1b(4)	ļ	X	
	s or loan guarantees						1b(5)	ļ	X	
(6) Performance of services or membership or fundraising solicitations										
	f facilities, equipment, mai	-					1c	L	X	
			_	edule. Column (b) should a		-		sets,		
	is given by the reporting to 1) the value of the goods, o			ed less than fair market val	ue in any transactio	n or snaring arrangement,	snow in			
(8) Line no	(b) Amount involved			e exempt organization	(d) Description	n of transfers, transactions, an	d shoring on			
(u) Ello llo	(b) / unodit involved	(b) Hamo of	N/A	o exempt organization	(u) bescription	in or transfers, transactions, art	u sharing ar	rangene	mis -	
										
						··				
					- 					
										
		 								
				·						
	<u></u>									
		-		or more tax-exempt organ	izations described	Γ	— ,,,	122	٦.,	
	501(c) of the Code (other	, ,)(3)) or in sect	tion 52/?		l	Yes	LA	No	
b if Yes, co	omplete the following sche (a) Name of orga			(b) Type of organization	T	(c) Description of relation	shin			
	N/A	mization		(b) Type of organization	 	(6) Description of relation	3ilip			
	N/A				 	· · · · · · · · · · · · · · · · · · ·				
					-					
	·				 					
										
				ig accompanying schedules and			ay the IRS o	discuss t	his	
olgii L	elief, it is true, correct, and com	plete Declaration of pre	eparer (other thai	n taxpayer) is based on all inforr	nation of which prepare	res any knowledge	turn with the nown below	e prepar	er [
Here	Queline /	10 Diese	<u></u>	11/8/17	· • ///-		X Yes		No	
Sigr	nature of officer or trustee			Date /	Title	L				
	Print/Type preparer's nar	ne	Preparer's si	ignature	Date	Check X if PTIN				
Paid		~~~~	111.7	4	10/05/15	self- employed	0055	0 4 72		
WIDDIAL INCINE								847 82		
Use Only	Firm's name > WILI	LIAM T. R	ACINE,	CPA		Trumsein > UI~U	44234	04		
Joo Oilly	Firm's address ▶ 10(09 WASHIN	CTON C	TREET		 				
	BA!			T 1/1212 T		Phone no. 207-4	43-5	716		
	<u> </u>						orm 990		(2016)	

Capital Gains and Lo	sses for Tax on Investment Income			, — — — — —
(a) List and 2-story b	d describe the kind(s) of property sol rick warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)
1a BALCHEM CORP			P	05/26/1510/25/16
b HAIN CELESTIAL	GROUP		P	11/24/1504/19/17
c IDEXX LABORATO			P	10/27/1504/28/17
d WEINGARTEN REA	LTY INVESTORS		P	08/26/1408/30/17
e AETNA 1.75%			P	02/21/1405/15/17
JP MORGAN CHAS	E 2.0%		P	02/21/1408/15/17
<u> </u>				
h				
1				
k				
1				
n				
0				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(e) t (µ) Gain or (loss) plus (f) minus (g)
a 7,589.		5,710.		1,879.
b 7,306.		10,796.		<3,490.>
c 8,111.		3,571.		4,540.
d 13,386.		14,400.		<1,014.>
e 20,000.		20,000.		0.
f 20,000.		20,000.		0.
<u>g</u>				
h				
1				
<u> </u>				
<u>k</u>				
1				
<u>m</u>	ļ			
n				
O	l l	ha (
Complete only for assets snowl	ng gain in column (h) and owned by t		(I) Los Gains (eyces)	sses (from col. (h)) of col. (h) gaın over col. (k),
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	but n	oot less than "-0-")
<u>a</u>				1,879.
<u>b</u>				<u><3,490.</u> >
C				4,540.
<u>d</u>				<1,014.>
e	<u> </u>			0.
f			· 	0.
<u>g</u>				
<u>h</u>				
1				
k	 			
1				
m				
n				
0				
	If goin also enter	ın Part I, lina 7		
2 Capital gain net income or (net ca	apital loss) { If gain, also enter if (loss), enter *-0-	"in Part I, line 7	2	1,915.
3 Net short-term capital gain or (los		, I		
If gain, also enter in Part I, line 8,	column (c).	· ·		
If (loss), enter "-0-" in Part I, line 8	3		3	N/A

FORM 990-PF D	IVIDENDS	AND INTE	REST	FROM SECUR	ITIES	STATEMENT	1
	GROSS AMOUNT	CAPITA GAINS DIVIDEN	5	(A) REVENUE PER BOOKS	(B) NET INVE MENT INC		
BATH SAVINGS TRUST CO BOND AMORTIZATION	8,055. <334.>	>	0.	8,055. <33 4 .	8,0 > <3		
TO PART I, LINE 4	7,721.		0.	7,721.	7,7	21.	
FORM 990-PF		ACCOUNT	ING	FEES		STATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) I INVEST- NT INCOME			
ACCOUNTING		625		0.		62	25.
TO FORM 990-PF, PG 1,	LN 16B	625	= =	0.		62	25.
FORM 990-PF		TA	XES			STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) I INVEST- NT INCOME	(C) ADJUSTE		
FOREIGN TAX WITHHELD		152		152.			0.
TO FORM 990-PF, PG 1,	LN 18	152	 	152.			0.
FORM 990-PF		CORPORA	TE S'	rock		STATEMENT	4
DESCRIPTION				воо	K VALUE	FAIR MARKET	ר
					000 110	250 63	
BATH SAVINGS TRUST-SEE	ATTACHED)			293,112.	372,63) ,

FORM 990-PF	CORPORATE BONDS		STATEMENT	5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
BATH SAVINGS TRUST-SEE ATTACHED	D	40,052.	40,24	5.
TOTAL TO FORM 990-PF, PART II,	40,052.	40,24	40,245.	
FORM 990-PF	OTHER INVESTMENTS		STATEMENT	6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
BATH SAVINGS TRUST-SEE ATTACHED	COST	60,223.	60,066	6.
TOTAL TO FORM 990-PF, PART II, LINE 13		60,223.	60,066.	

BATH SAVINGS TRUST COMPANY

For the Account of:

Account Number: 33023000

FRANK B. WALKER TRUST

From 8/1/2017 To 8/31/2017

Asset Allocation

•	Cash & Equivalents	\$23,697 83	4 77%
	Equity	\$359,969 45	. 72 48%
ational————————————————————————————————————	Fixed Income	\$100,311 20	20 20%
Income Cash & Equita	International	\$12,669 20	2 55%
	Total Assets	\$496,647 68	100 00%
	Ex-Dividends	\$500 40	
To the state of th	Accrued Income	\$469.26	
		\$497,617 34	

Activity Summary

Previous Statement Balance	\$417,520 34	\$497,807 46
Interest	\$211 97	\$211 97
Dividends	\$381 25	\$381 25
Realized Gains	\$0 00	
Amortization/Accretion	(\$15 01)	
Net Portfolio Change		(\$1,753 00)
Ending Balance	\$418,098 55	\$496,647 68
Loss-Weingarten sale, trade 8/30/17, cleared 9/5/17	(1,013 98)	
	. 417,084.57	

BATH SAVINGS TRUST COMPANY

For the Account of:

Account Number: 33023000

FRANK B. WALKER TRUST

From 8/1/2017 To 8/31/2017

Statement of Assets

Symbol	Asset Description	Units/Shares	Unit Price	Total Cost	Market
010 Common St	tock				
ABT	ABBOTT LABORATORIES	300 0000	\$50 94	\$12,416 26	\$15,282 00
GOOG L	ALPHABET INC CAP STK CLA	5 0000	\$955 24	\$4,450 58	\$4,776 20
AAPL	APPLE COMPUTER	150 0000	\$164 00	\$15,074 44	\$24,600 00
ADP	AUTOMATIC DATA PROCESSING	175 0000	\$106 47	\$12,213 51	\$18,632 25
BCPC	BALCHEM CORPORATION	200 0000	\$74 96	\$10,783 46	\$14,992 00
BR	BROADRIDGE FINANCIAL SOLUTIONS INC	175 0000	\$78 13	\$11,046 68	\$13,672 75
CHRW	C H ROBINSON WORLDWIDE INC COM	250 0000	\$70 63	\$16,264 39	\$17,657 50
CVS	CVS HEALTH CORPORATION	75 0000	\$77 34	\$7,258 21	\$5,800 50
CELG	CELGENE CORPORATION	150 0000	\$138 93	\$12,438 16	\$20,839 50
CHD	CHURCH & DWIGHT COMPANY INC	300 0000	\$50 17	\$10,139 07	\$15,051 00
DIS	DISNEY/THE WALT/CO	. 100 0000	\$101.20	\$10,041 57	\$10,120 00
ECL	ECOLAB INC	125 0000	\$133 30	\$14,186 82	\$16,662 50
FDS	FACTSET RESEARCH SYSTEMS INC	75 0000	\$157 18	\$10,163 11	\$11,788 50
JKHY	JACK HENRY AND ASSOCIATES INC	200 0000	\$103 07	\$14,077 32	\$20,614 00
HSY	HERSHEY COMPANY	150 0000	\$104 92	\$13,818 23	\$15,738 00
IDXX	IDEXX LABORATORIES, INC	125 0000	\$155 43	\$8,298 23	\$19,428 75
MA	MASTERCARD INCORPORATED	175 0000	\$133 30	\$13,064 42	\$23,327 50
NKE	NIKE INC CL B	250 0000	\$52 81	\$10,621 26	\$13,202 50
SBUX	STARBUCKS CORP	275 0000	\$54 86	\$10,242 81	\$15,086 50
TJX	TJX COS INC NEW	200 0000	\$72 30	\$11,832 25	\$14,460 00
TSCO	TRACTOR SUPPLY COMPANY	150 0000	\$59 51	\$13,385 28	\$8,926 50
TRMB	TRIMBLE INCORPORATED	200 0000	\$38 68	\$6,965 51	\$7,736 00
UTX	UNITED TECHNOLOGIES CORPORATION	150 0000	\$119 72	\$16,168 16	\$17,958 00
			Total	\$264,949 73	\$346,352 45
030 Foreign Stor	ck				·
RHHB Y	ROCHE HOLDINGS	400 0000	\$31 67	\$14,776 38	\$12,669 20
			Total	\$14,776 38	\$12,669 20
200 Corporate B	onds				
021441AE0	ALTERA CORP 2 50% 11/15/2018	20,000 0000	\$101.20	\$20,044 18	\$20,239 40
94973VBC0	WELLPOINT INC IN 1 875% 01/15/2018 NON- CALLABLE-	20,000 0000	\$100 03	\$20,007 69	\$20,006 00
280 Negotiable (Cert of Deposit		Total	\$40,051 87	\$40,245 40
2546726W3	DISCOVER BANK 1 90% 08/03/2020 NON- CALLABLE	20,000 0000	\$100 1 <u>6</u>	\$20,000 00	\$20,031 80
38143AL78	GOLDMAN SACHS BANK 2 00% 10/10/2019	20,000 0000	\$100 59	\$20,222 90	\$20,117 40
38148PEE3	GOLDMAN SACHS BANK 1 20% 04/29/2019	20,000 0000	\$99 58	\$20,000 00	\$19,916 60
01 BATH SAVIN	NGS MONEY	-	Total	\$60,222 90	\$60,065 80
MARKET FUND					
BSIMM0006	BSTC & CO FIDUCIARY INVESTED CASH	23,697 8300	\$1 00	\$23,697.83	\$23,697 83
10 Rasi Ectata	- Investment Trusts		Total	\$23,697 83	\$23,697 83
WRI	WEINGARTEN REALTY INVESTORS	425 0000	\$32 04	\$14,399 84	\$13,617 00
			Total	\$14,399 84	\$13,617 00
Cash					
	Cash			\$0 00	\$0 00

BATH SAVINGS TRUST COMPANY

For the Account of:

Account Number: 33023000

FRANK B. WALKER TRUST

From 8/1/2017 To 8/31/2017

Grand Total	\$418,098 55	\$496,647 68
	Ex-Dividends	\$500 40
	Accrued Income	\$469 26
		\$407 617 34