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

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

OMB No 1545-0052

		evenue Service	► Information about Fo	orm 990-PF and its separate	e instructions is at WWW.lr	s.gov/form990pf.	Open to Public Inspection
For	cale	ndar year 2016 or ta			, and ending	AUG 31, 2017	
		of foundation				A Employer identification	n number
7	HE	HORACE W	ILLIAMS MEMOR	IAL FUND			
KENNEBEC SAVINGS BANK, AGENT FOR TRUS!					TEE	01-6008547	<u></u>
Nu	mber a	and street (or P O box n	umber if mail is not delivered to stree	et address)	Room/suite	B Telephone number	
150 STATE STREET						207 622-47	<u> 166</u>
			ce, country, and ZIP or foreign	postal code		C If exemption application is p	ending, check here
	UG	USTA, ME	04332]	
G	Chec	k all that apply:	Initial return	Initial return of a	former public charity	D 1. Foreign organizations	s, check here
			Final return	Amended return		2 Foreign organizations me	coting the 85% test
			Address change	Name change		Foreign organizations me check here and attach co	omputation
H	_	k type of organization		exempt private foundation		E If private foundation sta	
<u> </u>			nexempt charitable trust	Other taxable private found		under section 507(b)(1))(A), check here
		arket value of all asse	· —	iting method: X Cash	Accrual	F If the foundation is in a	
		Part II, col (c), line		Other (specify)	, , ,	under section 507(b)(1))(B), check here
	\$		501,444. (Part I, col	lumn (d) must be on cash	basis.)	 	<u> </u>
<u>P</u>	art	(The total of amounts)	in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(d) Disbursements for charitable purposes
	T -		amounts in column (a))	exhenses her monks	income		(cash basis only)
	1		, grants, etc., received		 	N/A	
	2	Interest on savings and cash investments	oundation is not required to attach Sch. B.d. temporary	61.	61.		STATEMENT 1
	3			11,582		 	STATEMENT 1 STATEMENT 2
	4	Dividends and inter	est from securities	11,362	11,302	 	STATEMENT Z
		a Gross rents			 		
	١.	Net rental income or (lo		667.	 	 	
e	0	Gross sales price for al	sale of assets not on line 10 130 , 222 .		' 		
Revenue	7	assets on line 6a Capital gain net income			667.	 	
å	8	Net short-term capi	·				
	٦	Income modificatio	· ·			 	
	102	Gross sales less return and allowances			 	 	
	1.	Less Cost of goods so	ıd ——————	 			
		Gross profit or (loss				 	
		Other income	,		 	 	
	12	Total. Add lines 1 t	hrough 11	12,310.	12,310.	<u> </u>	
	13	Compensation of office	rs, directors, trustees, etc	3,653			1,827.
	14	Other employee sale	aries and wages				
	15	Pension plans, emp	loyee benefits				
ses	16a	Legal fees					<u> </u>
ë	Ь	Accounting fees	STMT 3	625.	313.		312.
Expen	C	Other professional f	ees		The state of the s	DEN/EB	
Operating and Administrative	17	Interest			I RE	CEIVED	
rat	18	Taxes	•		1,5	191	
nist	19	Depreciation and de	pletion		NOV		
Ē	20	Occupancy			Till Till	(3)	
¥	21	Travel, conferences	-		محمدا ا	L4- 1	
auc	22	Printing and publica	itions _		I UGIL	EN, III	
<u>n</u> g	23	Other expenses					
rati	24	Total operating and					
ಕ್ಷಿ		expenses. Add line	v	4,278.		·	2,139. 22,875.
9	1	Contributions, gifts,		22,875	<u> </u>		22,875.
	26	Total expenses and		05.450			05 014
		Add lines 24 and 25		27,153.	2,139.	·	25,014.
		Subtract line 26 from					
			expenses and disbursements	-14,843	10 171		
			Ome (if negative, enter -0-)		10,171.		
	L_C	Adjusted net incom	IC (if negative, enter -0-)	1	ŀ	N/A	L

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see Instructions.

AGENT FOR TRUSTEE 01-6008547 KENNEBEC SAVINGS BANK, Form 990-PF (2016) Beginning of year End of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (c) Fair Market Value (b) Book Value (a) Book Value 1 Cash - non-interest-bearing 14,208. 6,921. 6,921. 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 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 296,425. 364,610. 293,567 STMT 5 b Investments - corporate stock 128,411. 129,913. 136,486 STMT 6 c Investments - corporate bonds 11 Investments - land, buildings, and equipment, basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment: basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 431,757 501,444. 444,261 instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) 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 ightharpoons XFoundations that do not follow SFAS 117, check here and complete lines 27 through 31. 346,712 346,712 27 Capital stock, trust principal, or current funds 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 97,549. 85,045 29 Retained earnings, accumulated income, endowment, or other funds 444,261. 431,757 30 Total net assets or fund balances 431,757 444,261 31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	444,261.
9	Enter amount from Part I, line 27a	2	-14,843.
_	Other increases not included in line 2 (itemize) SEE STATEMENT 4	3	2,339.
	Add lines 1, 2, and 3	4	431,757.
	Decreases not included in line 2 (itemize)	5	0.
_	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	431,757.
	Total not assets of fund buildings at one of your fine of fine of	_	5 000 DE (0010)

KENNEBEC SAVINGS BANK, AGENT FOR TRUSTEE

			SAVINGS BA			TR	<u>UST</u>	EE	0	1-600	8547	Page 3
L	Part IV Capital Gains a				t Income							
			(s) of property sold (e.g. common stock, 200 shs			(b) P D	How ac - Purc - Dona	cquired hase ation	(c) Date (mo., d	acquired ay, yr.)	(d) Dat (mo., d	
_	SHORT TERM SECU							P	VARI		VARI	
_	LONG TERM SECUE							P	VARI	ous	VARI	ous
	CAPITAL GAINS I	DIVIDE	ENDS			<u> </u>						
	<u> </u>					—						
_	·					Ц,					<u> </u>	
	(e) Gross sales price		oreciation allowed or allowable)		st or other basis expense of sale					ain or (loss s (f) minus	(g)	
					16,91							-781.
_					112,64	5.					1	,293.
_	155.											155.
_												
_	Complete only for assets showing	nain in col	umn (h) and owned by	the foundation	on 12/31/60				N Coine (C	'ol (b) gara	minue	
_	Complete only for assets showing		Adjusted basis		cess of col. (1)			col	. (k), but r	Col. (h) gain not less tha	n -0-) or	
	(i) F.M.V. as of 12/31/69		of 12/31/69		col. (j), if any				Losses	(from col. ((h))	
_												-781.
-						_					1	,293.
_	;											155.
_	1											
_												
2	Capital gain net income or (net cap	oital loss)	If gain, also enter If (loss), enter -0	n Part I, line	7 7	Ì	2					667.
	Net short-term capital gain or (loss	•	•		•	,						
Ü	If gain, also enter in Part I, line 8, c		1 III SECTIONS 1222(3) an	iu (0 <i>)</i> .		J						
	If (loss), enter -0- in Part I, line 8					ľ	3			N/A		
L	Part V Qualification Ur	nder Se	ction 4940(e) for	Reduced	Tax on Net	: Inv	estn	nent Inc	ome			
(Fo	or optional use by domestic private i	foundations	subject to the section 4	1940(a) tax on	net investment ir	come	e.)					
If s	section 4940(d)(2) applies, leave thi	s nart blank										
	,	•										[37]
	as the foundation liable for the section				•	riod?					Yes	X No
	Yes," the foundation does not qualif Enter the appropriate amount in ea					ntrios		.		_		
÷	(a)	T COIGITAL		ISH delions be	Tore making any e						(d)	
	Base period years Calendar year (or tax year beginning	(In)	(b) Adjusted qualifying dis	tributions	Net value of no	(c) oncha		use assets	- 1	Distrit (col. (b) div	(d) oution ratio vided by col.	(c))
—	2015	9 ""/		2,550.	L		45	7,430		(001. (0) 01.		$\frac{67}{27436}$
_	2014			5,725.				5,855		 -		46821
_	2013			3,472.				0,043		-		48107
_	2012			2,000.				5,673			.0	46935
_	2011		1	2,500.	-		24	1,069			.0	51852
2	Total of line 1, column (d)								2	_	. 2	<u> 21151</u>
3	Average distribution ratio for the 5-	-year base p	period - divide the total o	on line 2 by 5,	or by the number	of ye	ars				_	
	the foundation has been in existent	ce if less tha	n 5 years						3		<u>. 0</u>	<u>44230</u>
4	Enter the net value of noncharitable		o for 0016 from Dort V	luna E					4		482	,225.
7	Enter the net value of noncharitable	ช-นระ สรรษเ	S TOT 20 TO HOTH PART A,	iiile o		-			- -		402	, 225 •
5	Multiply line 4 by line 3								5		21	,329.
•	Walapiy iiio 1 by iiio 0								<u> </u>			<u>,</u>
6	Enter 1% of net investment income	e (1% of Pa	rt I, line 27b)						6			102.
		-	•		-							
7	Add lines 5 and 6				-				7_		21	<u>,431.</u>
0	Enter qualifying distant in the first	Don't VII 1	~ <i>4</i>								25	,014.
0	Enter qualifying distributions from	•		1h and come	Note that neet we!-		0/_ +nv :	rato	8	<u> </u>		, 014.
	If line 8 is equal to or greater than I See the Part VI instructions.	mie 7, cileci	v are box in raft vi, illie	10, and comp	note mat part usin	ıya I	/0 LdX	. u.e.				

THE HORACE WILLIAMS MEMORIAL FUND

Form 990-PF (2016) KENNEBEC SAVINGS BANK, AGENT FOR TRUS			008547	F	Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b)		948 - 9	see instru	ction	าร)
1a Exempt operating foundations described in section 4940(d)(2), check here land enter "N/A" on line	e 1.				
Date of ruling or determination letter: (attach copy of letter if necessary-see inst					i
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter	er 1%	1		1	02.
of Part I, line 27b	}	′			1
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 1	2, col. (b). 📗				ا
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2			<u> </u>
3 Add lines 1 and 2		3		1	02.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4			<u>0.</u>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		1	02.
6 Credits/Payments:		•			1
a 2016 estimated tax payments and 2015 overpayment credited to 2016					
b Exempt foreign organizations - tax withheld at source					í
c Tax paid with application for extension of time to file (Form 8868)	·	1			
d Backup withholding erroneously withheld					
7 Total credits and payments. Add lines 6a through 6d		7			0.
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		1	02.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶	10_			
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	Refunded ►	11			
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it pa	articipate or intervene	ın		Yes	
any political campaign?			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instruct			1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of a	ny materials publish	ed or		i	1
distributed by the foundation in connection with the activities					
c 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:					Ì
(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	<u> </u>				ĺ
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	d on foundation			i	i
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.				l	ļ
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article	les of incorporation, o	r			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	-		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	-		4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/I			
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					1
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				Ì	!
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, o	col (c), and Part XV		7	Х	
8a Enter the states to which the foundation reports or with which it is registered (see instructions)				ļ	1
ME	7				
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	4046/1/51		8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)		ndar			- . _J
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part 3			9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their name	es and addresses		10 Form 990		

	990-PF (2016) KENNEBEC SAVINGS BANK, AGENT FOR TRUSTEE 01-6008	3547		Page !
Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		ł	}
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		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		X
	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address ► N/A			
	The books are in care of ► KENNEBEC SAVINGS BANK Telephone no. ► 207 62			
	Located at ► 150 STATE ST., AUGUSTA, ME ZIP+4 ►04	1332		
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		· / 3 ►	٠ا
	and enter the amount of tax-exempt interest received or accrued during the year	<u>N</u>	/A	
	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	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	l		
	foreign country Tt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		
		т	Yes	Ma
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly):	<u> </u>	res	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	i i	ĺ	!
	a disqualified person?)		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			İ
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1		
	for the benefit or use of a disqualified person)?	1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	1	1	
	if the foundation agreed to make a grant to or to employ the official for a period after	1	1	
	termination of government service, if terminating within 90 days.)	1		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here	H		_==
	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?	10		X
	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)):		[
	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	Į į		
	pefore 2016?]		'
1	f "Vog " light the years]	' j	
b A	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect]	' Ì	
	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		
c I	f the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
)]	1	,
3a [Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time)]	ł	
	during the year?)	}	
b I	f "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after		ł	ļ
	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		ł	1
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	} }	1	
	Form 4720, to determine if the foundation had excess business holdings in 2016) N/A	3ь		- 4
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	old the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	ad not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	_	X
		QQC	-PF	2016)

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Rart VII-B Statements Regarding Activities for Which I	form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				THE RESERVE
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y6	es 🗶 No 🔝	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,	, *	
any voter registration drive?			es 🗶 No 🗓	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es 🗶 No 🎍	
(4) Provide a grant to an organization other than a charitable, etc., organizatio			}	
4945(d)(4)(A)? (see instructions)	Y	es 🗶 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo]	
the prevention of cruelty to children or animals?			es 🗶 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the excentions described i			
section 53.4945 or in a current notice regarding disaster assistance (see instru		ii riogalations	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				\$ \$ \$S \$\$ \$257
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		pod		
			es 🗀 No 🕌	
expenditure responsibility for the grant?		/A	55 NO]	
If "Yes," attach the statement required by Regulations section 53 494s			Î	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es 🗓 No	
a personal benefit contract?		L 1 T C		
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			िक् र ा	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		. L Ye		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII	ees, Foundation Ma	nagers, Highly	y	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	() Fyransa
(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	(e) Expense account, other allowances
KENNEBEC SAVINGS BANK	AGENT		compensation	
PO BOX 50		!		
AUGUSTA, ME 04332	1.00	3,653.	0.	0.
	TRUSTEE	3,033.	- -	
PO BOX 50				
AUGUSTA, ME 04332	0.00	0.	о.	0.
ANDREW E. SILSBY	TRUSTEE	 	· · ·	
PO BOX 50	INOSIEE	}		ļ
AUGUSTA, ME 04332	0.00	0.	0.	0.
	TRUSTEE	· · · · ·	<u> </u>	·
	TRUSTEE			
PO BOX 50	0.00	1	١ ,	1
AUGUSTA, ME 04332	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc		enter NONE.	(d) Contributions to	(a) Eynense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
		ı	Į	1
		 		
		1	ļ	1
		 		
		1	}	}
	 	 		
		1])
	 	 	 	
	ļ	1]]
Total number of other employees paid over \$50,000	L	<u> </u>		0
יייים אינים אינים פון אינים אי			Form	990-PF (2016)
			FUIII	JJU-I I (2010)

623561 11-23-16

Total. Add lines 1 through 3

Form 990-PF (2016) KENNEBEC SAVINGS BANK, AGENT FOR TRUSTEE	01-60085 47 Pa	ge 8
Part X. Minimum Investment Return (All domestic foundations must complete this part. Foreign	n foundations, see instructions)	
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
Average monthly fair market value of securities .	1a 479,00	14.
b Average of monthly cash balances	1b 10,56	· 5 •
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d 489,56	9.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	<u>0.</u>	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3 489,56	<i>.</i> 9.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 7,34	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 482,22	
6 Minimum investment return. Enter 5% of line 5	6 24,11	<u>.1.</u>
Part ★1 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation foreign organizations check here and do not complete this part.)	ons and certain	
1 Minimum investment return from Part X, line 6	1 24,11	1.
	02.	
b Income tax for 2016. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	10 10	2.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3 24,00	9.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5 24,00	9.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 24,00	
Part XII Qualifying Distributions (see instructions)		
	15. 3	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	25 01	
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 25,01	-4 ·
b Program-related investments - total from Part IX-B		<u> </u>
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b 35 01	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 25,01	<u>.4.</u>
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1 - 1	١.
income. Enter 1% of Part I, line 27b	5 10	2.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6 24,91	<u>. 2 .</u>
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	lation qualifies for the section	

Part XIII Undistributed Income (see	e instructions)			
	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				
line 7	ì			24,009.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			8,359.	
b Total for prior years:				
, ,		0.]		
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
b From 2012				
c From 2013	ľ			
d From 2014	İ			
e From 2015				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from			\	
Part XII, line 4: ►\$ 25,014.				
a Applied to 2015, but not more than line 2a			8,359.	
b Applied to undistributed income of prior	į			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				16,655.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2016 (if an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		İ	
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.	į	
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.		į	0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must		ļ		
be distributed in 2017			}	7,354
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by		ì		
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2012				
b Excess from 2013	l			
c Excess from 2014				
d Excess from 2015	{			
e Excess from 2016				

THE HORACE WILLIAMS MEMORIAL FUND KENNEBEC SAVINGS BANK, AGENT FOR TRUSTEE Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) 1 a If the foundation has received a ruling or determination letter that it is a private operating

(b) 2015

Prior 3 years

(c) 2014

foundation, and the ruling is effective for 2016, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section Tax year

(a) 2016

E	01-60	08547	Page 10
_	N/A		
Ţ	4942(j)(3) or4	942(j)(5)	
	(d) 2013	(e) To	ital
ı			
			
		<u> </u>	
	_		
		<u> </u>	

Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

7	Informa	tion Regard	ling Found	lation N	lanagers:
---	---------	-------------	------------	----------	-----------

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

Form 990-PF (2016)

each year listed **b** 85% of line 2a

exempt activities

2 a Enter the lesser of the adjusted net

income from Part I or the minimum investment return from Part X for

c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of

e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year

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

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here 🕨 📖 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

ANDREW SILSBY KENNEBEC SAVINGS BANK, 207 622-5801

PO BOX 50, AUGUSTA, ME 04332

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

NO SPECIAL FORMAT

c Any submission deadlines:

NONE

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

NONE

623601 11-23-16

Page 11

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Purpose of grant or contribution Amount status of recipient any foundation manager Name and address (home or business) or substantial contributor a Paid during the year UNIVERSITY OF MAINE AT ORONO - WALKER PUBLIC CHARITY SCHOLARSHIP AWARDS THOMAS ORONO CENTER ORONO, ME 04469 1,000. HUSSON UNIVERSITY - CHAD PRINCE NONE PUBLIC CHARITY SCHOLARSHIP AWARDS 1 COLLEGE CIR BANGOR, ME 04401 1,750. HUSSON UNIVERSITY - PAIGE WARREN NONE PUBLIC CHARITY SCHOLARSHIP AWARDS 1 COLLEGE CIR BANGOR, ME 04401 1,750. UNIVERSITY OF VERMONT - CODY VEILEUX NONE PUBLIC CHARITY SCHOLARSHIP AWARDS THE UNIVERSITY OF VERMONT BURLINGTON, VT 05405 500. THOMAS COLLEGE - QUINTON STEBBINS NONE PUBLIC CHARITY SCHOLARSHIP AWARDS 180 WEST RIVER ROAD WATERVILLE, ME 04901 1,750. SEE CONTINUATION SHEET(S) ▶ 3a 22,875. b Approved for future payment NONE Total Form **990-PF** (2016)

Enter gross amounts unless otherwise indicated.	Unrelated	business income	Exclude	Excluded by section 512, 513, or 514			
cine gross amounts unless otherwise moleated.		(b)	(C) Exclu-	(d)	(e) Related or exempt		
1 Program service revenue:	(a) Business code	Amount	sion	Amount	function income		
-	Code		1				
a b	- 		-}				
	- 		+-+				
d			╅				
			++				
	-		 				
- Consend analysis from payor mont againsts	_		+-+				
g Fees and contracts from government agencies	 		+				
2 Membership dues and assessments	 		 				
3 Interest on savings and temporary cash	1 !		14	61.			
investments			14	11,582.			
4 Dividends and interest from securities				11,304•	1 3 1 14 1 1 1 1 1 1 1		
5 Net rental income or (loss) from real estate:	197	<u> </u>	1 3		9 1 8 42 C S S S S S S S S S S S S S S S S S S		
a Debt-financed property	├ ──┼						
b Not debt-financed property	<u> </u>		-}}				
6 Net rental income or (loss) from personal							
property	<u> </u>						
7 Other investment income							
8 Gain or (loss) from sales of assets other]		الما				
than inventory			18	667.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory	LL						
11 Other revenue:	1 1		1 1				
a							
b	_ []						
С							
d							
e							
e	77.	0	. 2 2	12,310.			
		0	. 2 2	12,310.			
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0	• 1				
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.				13			
e 12 Subtotal. Add columns (b), (d), and (e)				13	12,310		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B. Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
e 2 Subtotal. Add columns (b), (d), and (e) 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 Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Accor	mplishment of l	Exempt	13 Purposes	12,310		

THE HORACE WILLIAMS MEMORIAL FUND KENNEBEC SAVINGS BANK, AGENT FOR TRUSTEE Form 900-PE (2016)

01-6008547

Part XVII		egarding Trai		and Transactions		hips With Noncha			age 13
1 Did the c			y of the following	g with any other organizat	on described in sect	ıon 501(c) of	T	Yes	No
	•			27, relating to political orga		• •	1		
	s from the reporting found						l l	1 .	l
(1) Cas			•	-			1a(1)		X
(2) Othe	er assets						1a(2)		Х
b Other tra	nsactions;				•	•			
(1) Sale	s of assets to a noncharita	ible exempt organiza	ation				1b(1)		X
(2) Puro	chases of assets from a no	ncharitable exempt	organization		-		1b(2)		X
	tal of facilities, equipment,	· · · · · · · · · · · · · · · · · · ·	_				1b(3)		X
	nbursement arrangements			,			1b(4)		X
(5) Loai	ns or loan guarantees				_		1b(5)		X
(6) Perf	ormance of services or me	embership or fundra	using solicitatio	ons			1b(6)		X
c Sharing	of facilities, equipment, ma	ailing lists, other ass	ets, or paid em	ployees			1c		X
d If the ans	swer to any of the above is	"Yes," complete the	following sche	dule. Column (b) should a	lways show the fair r	narket value of the goods,	other as:	sets,	
				ed less than fair market val					
column ((d) the value of the goods,	other assets, or ser	vices received.						
(a)Line no	(b) Amount involved	(c) Name o	of noncharitable	e exempt organization	(d) Description	of transfers, transactions, and	sharing a	rrangeme	ents
			N/A						
		1			T				
									
			·						
					1				
ın sectior	ndation directly or indirect 1501(c) of the Code (other complete the following sch	r than section 501(d		or more tax-exempt organion 527?	izations described	Ε	Yes	X	_] No
	(a) Name of org			(b) Type of organization	Τ	(c) Description of relations	hip		
	N/A				 				
					1				
Sign Here	elief, it is true, porrect and our	implete peclaration of p	nis peturn/includir infparen(other tha	g accompanying schedules and naxpayer) is based on all infor	d statements, and to the matron of which prepare	r has any knowledge ret sh	y the IRS urn with th own below X Yes	ne prepar v (see ins	er
Sig	nature of officer or trustee			Date '	Title				
Paid	Print/Type preparer's na		Preparer's s	Hobert & hears	Date 10/19/17	check if PTIN self- employed P0	0584	792	
Preparer	Firm's name ► MAC				<u>, , , </u>	Firm's EIN ▶ 01-0			
Use Only									
	Firm's address ► ON	E MARKET GUSTA, MI				Phone no. 207-6	22-4	766	

THE HORACE WILLIAMS MEMORIAL FUND KENNEBEC SAVINGS BANK, AGENT FOR TRUSTEE 01-6008547

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
ST. JOSEPH'S COLLEGE - CODY VEILLEUX 278 WHITES BRIDGE ROAD	NONE	PUBLIC CHARITY	SCHOLARSHIP AWARDS	
STANDISH, ME 04084	 	<u> </u>		1,25
UNIVERSITY OF MAINE AT FARMINGTON - JORDAN BAILEY	NONE	PUBLIC CHARITY	SCHOLARSHIP AWARDS	
224 MAINE STREET FARMINGTON, ME 04938				2,125
UNIVERSITY OF MAINE AT ORONO - JORDAN PELLETIER ORONO CENTER	NONE	PUBLIC CHARITY	SCHOLARSHIP AWARDS	
ORONO, ME 04469	<u> </u>			1,250
UNIVERSITY OF MAINE AT ORONO - SHANAY GILBERT	NONE	PUBLIC CHARITY	SCHOLARSHIP AWARDS	
ORONO CENTER ORONO, ME 04469				1,250
UNIVERSITY OF MAINE AT AUGUSTA - WALKER THOMAS	NONE	PUBLIC CHARITY	SCHOLARSHIP AWARDS	
46 UNIVERSITY DRIVE AUGUSTA, ME 04330				2,125
SPRINGFIELD COLLEGE - DAKOTA CARTER 263 ALDEN STREET	NONE	PUBLIC CHARITY	SCHOLARSHIP AWARDS	
SPRINGFIELD, MA 01109	 	 		1,000
UNIVERSITY OF MAINE AT ORONO - BENJAMIN LEET ORONO CENTER	NONE	PUBLIC CHARITY	SCHOLARSHIP AWARDS	
ORONO, ME 04469				1,750
AUSTIN PEAY STATE UNIVERSITY -	none	PUBLIC CHARITY	SCHOLARSHIP AWARDS	
601 COLLEGE STREET CLARKSVILLE, TN 37044				1,250
CLARK UNIVERSITY - NATHAN HUYNH 950 MAIN STREET	NONE	PUBLIC CHARITY	SCHOLARSHIP AWARDS	1 10
WORCESTER, MA 01610	 	 	 	1,12
HUSSON UNIVERSITY - KASSIE JOLER 1 COLLEGE CIR	NONE	PUBLIC CHARITY	SCHOLARSHIP AWARDS	
BANGOR, ME 04401	<u> </u>	<u> </u>	<u> </u>	75
Total from continuation sheets				16,12

THE HORACE WILLIAMS MEMORIAL FUND KENNEBEC SAVINGS BANK, AGENT FOR TRUSTEE 01-6008547

3 Grants and Contributions Paid During the Y					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	recipient	Contribution	Amyunt	
ROCHESTER INSTITUTE OF TECHNOLOGY -	NONE	PUBLIC CHARTTY	SCHOLARSHIP AWARDS		
ANTHONY TAMBORINI	1012				
1 LOMB MEMORIAL DRIVE	Ì	1		}	
ROCHESTER, NY 14623	<u> </u>	<u> </u>		75	
ST. JOSEPH'S COLLEGE - HUNTER	NONE	PIIBLIC CHARTTY	SCHOLARSHIP AWARDS		
RICHARDSON	10.12				
278 WHITES BRIDGE ROAD)	İ	1	1	
STANDISH, ME 04084		<u> </u>	<u> </u>	75	
ST. JOSEPH'S COLLEGE - KATELYN PINO	NONE	PUBLIC CHARITY			
278 WHITES BRIDGE ROAD	HONE	FUBLIC CHARITI	LW - 10/18/17		
	}	1			
STANDISH, ME 04084	}	1	12:02PM WORKSHEET	7.5	
	 	 	PRIVATE FOUNDATION	75	
		{			
		<u></u>			
		 	 		
	 				
	 	 	 		
	}		}		
	}		}		
	Ţ				
Total from continuation sheets	<u> </u>		L	L	

FORM 990-PF INTERE	ST ON SAVIN	IGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT	1
SOURCE		REVE	(A) REVENUE PER BOOKS 61.		(B) VESTMENT COME	(C) ADJUSTED NET INCOME	
					61.		
TOTAL TO PART I, LI	NE 3		61.		61.		
FORM 990-PF	DIVIDENDS	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	RE	(A) EVENUE BOOKS	(B) NET INVES MENT INCO		
FOREIGN LT ORDINARY ST	1,827. 150. 9,755.	. 15	0. 0. 0. 5.	1,827. 0. 9,755. 0.		0.	
TO PART I, LINE 4	11,737.	15	5.	11,582.	11,58	32.	
FORM 990-PF		ACCOUNTI	NG FEES	 B		STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	(E NET IN MENT I	WEST-	(C) ADJUSTEI NET INCOM		
TAX PREP	_	625.		313.		3:	12.
TO FORM 990-PF, PG	1, LN 16B	625.		313.		3:	12.
FORM 990-PF OTHER	INCREASES	IN NET ASS	ETS OR	FUND BA	LANCES	STATEMENT	4
DESCRIPTION					 -	AMOUNT	
BASIS ADJUSTMENT FEDERAL TAX REFUND						5 1,7	64. 75.
TOTAL TO FORM 990-F	F, PART III	I, LINE 3				2,3	39.

THE HORACE WILLIAMS MEMORIAL FUND KENNEB

FORM 990-PF	CORPORATE STOCK		STATEMENT	5
DESCRIPTION		BOOK VALUE	FAIR MARKE	r
CORPORATE STOCKS		296,425.	364,63	10.
TOTAL TO FORM 990-PF, PART	II, LINE 10B	296,425.	364,63	10.
FORM 990-PF	CORPORATE BONDS		STATEMENT	6
DESCRIPTION		BOOK VALUE	FAIR MARKE	Г
CORPORATE BONDS		128,411.	129,9	13.
TOTAL TO FORM 990-PF, PART	II, LINE 10C	128,411.	129,9	13.