Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Name of foundation

For calendar year 2017 or tax year beginning

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

2017, and ending

20**17**

20

A Employer identification number Francis T. and Louise T. Nichols Foundation 01-0493311 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) PO Box 1210 207-947-0111 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ Bangor, ME 04402-1210 Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply: ☐ Initial return ▶ [] □ Amended return Final return 2. Foreign organizations meeting the 85% test, □ Address change □ Name change check here and attach computation ▶□ If private foundation status was terminated under H Check type of organization: ☐ Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ▶ 🗍 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method: ✓ Cash ☐ Accrual F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col. (c), Other (specify) ▶ □ line 16) ▶ \$ (Part I, column (d) must be on cash basis.) 36,327,545 Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal expenses per books income ıncome purposes the amounts in column (a) (see instructions)) (cash basis only) Mac exit Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► ☐ if the foundation is **not** required to attach Sch. B . Yas 3 Interest on savings and temporary cash investments 14,274 14,274 14,274 Dividends and interest from securities 4 535,343 535,343 535,343 5a Net rental income or (loss) \$ 5 ... 7、石煤电 Net gain or (loss) from sale of assets not on line 10 6a 437,465 Gross sales price for all assets on line 6a 2.281,758 AMS XXC 1/2/8/198 Capital gain net income (from Part IV, line 2) . 437,465 Net short-term capital gain . . 370.38 A PLACE TO THE PARTY OF THE PAR Income modifications Call him 等的複数的**数**数 13.7%数的形式。 10a Gross sales less returns and allowances WELFALL STATES Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) . Other income (attach schedule) C.G.Distri-11 942 942 942 butions 12 Total. Add lines 1 through 11 988.024 988.024 550,559 Compensation of officers, directors trustees, etc. 13 121,703 121,703 121,703 121,703 Operating and Administrative Expenses Other employee salaries and wages ... 14 Pension plans employee benefits 15 Legal fees (attach schedule) 2 .1 .2018 16a Accounting fees (attach schedule) Other professional (es (attach, schedule) 40,315 40.315 40.315 40,315

17 18

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27

For Paperwork Reduction Act Notice, see instructions.

Subtract line 26 from line 12:

Taxes (attach schedule) (see instructions)

Travel, conferences, and meetings

Other expenses (attach schedule)

Printing and publications

Depreciation (attach schedule) and depletion .

Total operating and administrative expenses. Add lines 13 through 23

Contributions, gifts, grants paid

Total expenses and disbursements. Add lines 24 and 25

Excess of revenue over expenses and disbursements

Net investment income (if negative, enter -0-) .

Adjusted net income (if negative, enter -0-)



10.453

<u>172,</u>471

1,700,000

1,872,471

(884,447)

10,453

172,471

172,471

815,553

10,453

172,471

172,471

378.088



10,453

172,471

1,700,000

1,872,471

	art II	Relance Shoots Attached schedules and amounts in the description column	Beginning of year	End o	f year
LE		Balance Sheets Attached schedules and amounts in the description column 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	3,238,455	2,064,156	2,064,156
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts Pledges receivable			
	4			,	,
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	l	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶		1 A 7 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		Less allowance for doubtful accounts ▶			
ध	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			<u></u>
As	10a	Investments – U.S. and state government obligations (attach schedule)	105,512	105,512	105,122
	ь	Investments—corporate stock (attach schedule)	14,905,935	15,983,998	
	С	Investments—corporate bonds (attach schedule)	2,923,869	2,408,414	
	11	Investments—land, buildings, and equipment: basis ▶			
	''	Less: accumulated depreciation (attach schedule) ▶			<u> </u>
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment. basis ▶		A CALL YET TO A	8407578-18. 1998. CAS
		Less accumulated depreciation (attach schedule) ▶			
	15				
	16	Other assets (describe Total assets (to be completed by all filers—see the	-		
	.	instructions. Also, see page 1, item I)	21,173,771	20,562,080	36,327,545
_	17	Accounts payable and accrued expenses	21,173,771	20,302,000	
	18	Grants payable			
es	19	Deferred revenue			
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons	<u> </u>		
Liabilities	21	Mortgages and other notes payable (attach schedule)			
Ë	22	* -	- -		
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)	0		
	23				
S	 	Foundations that follow SFAS 117, check here Dand complete lines 24 through 26, and lines 30 and 31.			
ၓၟ		•			
ā	24	Unrestricted			
nd Balances	25	Temporarily restricted			
ğ	26	Permanently restricted	<u> </u>		
		Foundations that do not follow SFAS 117, check here ►			
Net Assets or Fu		and complete lines 27 through 31.			******
S	27	Capital stock, trust principal, or current funds	21,173,771	20,562,080	
ë	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
155	29	Retained earnings, accumulated income, endowment, or other funds	21,173,771	20,562,080	
it /	30	Total net assets or fund balances (see instructions)	21,173,771	20,562,080	
ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	21,173,771	20,562,080	
	art III	Analysis of Changes in Net Assets or Fund Balances		t cargo with	
1		al net assets or fund balances at beginning of year-Part II, colu			<u>.</u> .
		-of-year figure reported on prior year's return)		<u> </u>	21,173,771
		er amount from Part I, line 27a			(884,447)
					272,756
_				4	20,562,080
5	Dec	reases not included in line 2 (itemize) in net assets or fund balances at end of year (line 4 minus line 5)—	D-4111 /51	5	
	lota	ir net assets or fund balances at end of year (line 4 minus line 5)—	rari ii, column (b), III	ne 30 6	20,562,080

Part IV

Capital Gains and Losses for Tax on Investment Income

		d(s) of property sold (for example, real e e, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation		e acquired day, yr)	(d) Date sold (mo , day, yr)
1a	See Schedule Attached			0000000			
b							
С							
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			n or (loss) f) minus (g))
a							
b							
c							
d							· · · · · · · · · · · · · · · · · · ·
е	·						
	Complete only for assets show	wing gain in column (h) and owned	by the foundation	on 12/31/69.			(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	c		t less than -0-) or rom col (h))
a							
b							
С							·
d							
е							
2	Capital gain net income or	Inet capital loss) (also enter in Pa , enter -0- ın Pa		2		437,688
3		n or (loss) as defined in sections I, line 8, column (c). See ınstru					
					з		(223
Part		er Section 4940(e) for Redu				 1e	(223
If "Yes	s," the foundation doesn't q	section 4942 tax on the distribu ualify under section 4940(e). Do	not complete t	hıs part.	•		☐ Yes ☐ No
1		unt in each column for each yea	ar; see the instru	uctions before ma	akıng ar	ny entries.	-
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution:	s Net value o	(c) f noncharitable-use a	ssets		(d) ribution ratio divided by col. (c))
	2016	1,82	5,025	34,21	3,759		0.05334
	2015	1,67	1,411	32,86	0,249		0.05086
	2014	1,54	6,166	33,88	9,762		0.045623
	2013	98	1,924	31,83	4,872		.03084
	2012	84	1,842	17,70	8,630		_04750
2	Total of line 1, column (d)					2	0.22816
3	•	for the 5-year base period—div undation has been in existence		•	· 1	3	0.04563
4	Enter the net value of none	charitable-use assets for 2017 for	rom Part X, line	5	.	4	35,701,735
5	Multiply line 4 by line 3 .					5	1,629,070
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)			6	8,156
7	Add lines 5 and 6				. [7	1,637,226
8		ns from Part XII, line 4 ter than line 7, check the box ir				B t using a 1	1,872,471

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—s	ee instr	uctio	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		8,156	
	here ► ✓ and enter 1% of Part I, line 27b		0,100	-
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).	*		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
3	Add lines 1 and 2		8,156	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		8,156	
6	Credits/Payments.			\$2. (·)
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6a		, , ,	Ž v 1
b	Exempt foreign organizations—tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) . 6c 6c			
d	Backup withholding erroneously withheld 6d		M.	1- 2-
7	Total credits and payments. Add lines 6a through 6d			
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		8,156	
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 2018 estimated tax ▶ Refunded ▶ 11			
	VII-A Statements Regarding Activities	1598 C%S	15.	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign?	· · ·	Yes	No
.		1a_	ļ	✓_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See t 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 material	als 📜	4,14	1 (64)
	published or distributed by the foundation in connection with the activities.	333		
С	Did the foundation file Form 1120-POL for this year?	1c		✓_
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	183	- 77	
	(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. ▶ \$	d		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		✓ 8.354
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	of 3		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	 	<u>√</u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u>√</u>
	If "Yes," attach the statement required by General Instruction T.	÷",	14	16
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	ľ	``	1
	By language in the governing instrument, or	ĺ		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions the	nat		
	conflict with the state law remain in the governing instrument?	6	1	
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 X	√ 7	1	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gener	rai		
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	ļ	1	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	0.5	+	-
•	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes			
	complete Part XIV	´' 9		16
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the			-
	names and addresses			✓

Pari	VII-A Statements Regarding Activities (continued)			
		<u> </u>	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		1
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address ▶			
14	The books are in care of ▶ Calvin E. True Telephone no. ▶ 20	7-947	0111	
	Located at ▶ 80 Exchange Street PO Box 1210 Bangor ME ZIP+4 ▶ 0	4402-1	210	<u></u>
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		•	▶ □
16	and enter the amount of tax-exempt interest received or accrued during the year ▶ <u>15 </u> At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
10	over a bank, securities, or other financial account in a foreign country?	16	1.00	/
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name o			Ş: -3
	the foreign country ▶	1		
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>	
-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	21.2	Yes	No
1a	During the year, did the foundation (either directly or indirectly):	133		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			1
	disqualified person?	N K	300	1.10
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? \Box Yes \Box No			197
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	7 4 7 17		
	the benefit or use of a disqualified person)?	7.4		
	(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	1 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	F 134
	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	1b	13.25	
	Organizations relying on a current notice regarding disaster assistance, check here	1377	50 500	131 ***;
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		11/1/1	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	were not corrected before the first day of the tax year beginning in 2017?	1c	ļ	1
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)):	2 19	1.50 m	20, 30 200 30 4 7
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	5 77.		
_	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			3.3
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			#17C
	(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	ļ	<u> </u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		ŀ	
20	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
3a	at any time during the year?			
h	If "Yes," did it have excess business holdings in 2017 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 2017.)	3b	<u> </u>	L .
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	/
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	 	-
	chantable purpose that had not been removed from jeopardy before the mot day or the tax your beginning in 2017.	170	1	

Part	VII-B Statements Regarding Activities	for V	Vhich Form	4720	May Be R	equire	d (conti	nued)			
5a	During the year, did the foundation pay or incur									Yes	No
	(1) Carry on propaganda, or otherwise attempt to		•	•	• • •	•	Yes Yes	✓ No			
	(2) Influence the outcome of any specific public				•	-	_			1	ļ
	directly or indirectly, any voter registration dr						☐ Yes	☑ No			,
	(3) Provide a grant to an individual for travel, stu							✓ No			
	(4) Provide a grant to an organization other than section 4945(d)(4)(A)? See instructions						_	[] N.			
	(5) Provide for any purpose other than religious,						Yes	☑ No			
	purposes, or for the prevention of cruelty to c						□Yes	[∕] No	, ,		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transa	actions fail to	qualify	under the	excepti				,	,
	Regulations section 53.4945 or in a current notice	regardı	ng disaster as	ssistano	e? See inst	ructions	s		5b		
	Organizations relying on a current notice regarding							▶□		¥	3.44 ?
С	If the answer is "Yes" to question 5a(4), does t						_	_	**		2007 2007 2008
	because it maintained expenditure responsibility		-				Yes	∐ No			TATO TATO
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any					milime				1	
Va	on a personal benefit contract?			-			☐ Yes	✓ No	Period 1		
b	Did the foundation, during the year, pay premium					benefit		_	6b	أششما	
	If "Yes" to 6b, file Form 8870.	·	•	,,	•				1.31%	N. S.	2,818
7a	At any time during the tax year, was the foundation a						☐ Yes			71.	
b	If "Yes," did the foundation receive any proceeds								7b		
Par	Information About Officers, Direct and Contractors	tors,	rustees, F	ounda	tion mana	agers,	Hignly i	aid E	mpioy	ees,	
1	List all officers, directors, trustees, and found	ation r	managers ar	nd their	compens	ation. S	See instru	uctions) <u>.</u>		
		(b) Titl	e, and average	(c) Co	mpensation	(d) (Contribution	s to	(e) Expe	nse ac	count.
	(a) Name and address		irs per week ed to position		f not paid, enter -0-) employee benefit plans and deferred compensation			other allowances			
Susan	Thibault										
	pear St., Charlotte VT 05445	Truste	e 1 hr/wk		0			0	_		0
	n Nichols	Tructo	a 4 babul		0			•			•
	ettingill Rd , Essex Jct VT 05452 E. True	Truste	e 1 hr/wk		U			. 0			0
	x 1210 Bangor ME 04402-1210	Truste	e 5 hrs/wk		121,703			0			0
	a 1210 Benger III. 0 1102 1210	11.000	<u> </u>		121,700						
2	Compensation of five highest-paid employee "NONE."	es (oth	er than thos	se incl	uded on li	ne 1—:	see instr	uction	s). If n	one,	enter
	NOIL.		<u> </u>		1		(d) Contrib	utions to			
	(a) Name and address of each employee paid more than \$50,00	10	(b) Title, and a hours per v		(c) Comper	sation	employee	benefit	(e) Expe	nse acc	count,
			devoted to p	osition			plans and compens		outer	illowan	ces
							·				
Total	number of other employees paid over \$50,000 .	<u> </u>				• •	· · ·		00		/00:==
									Form 99	U-PF	(2017)

Part VIII	Information About Officers, Directors, Trustees, Foundand Contractors (continued)	ndation Managers, Highly Paid Er	nployees,
3 Five	e highest-paid independent contractors for professional services	. See instructions. If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Alterity Fin	ancial Management		
	eet, Suite 201	Investment Advice	40,315
Bangor ME			10,515
92			
			
Total muse	of other receiving over \$50,000 for professional		
I otar num	ber of others receiving over \$50,000 for professional services	<u> </u>	<u> </u>
Part IX-	Summary of Direct Charitable Activities		
	nundation's four largest direct charitable activities during the tax year. Include relevions and other beneficiaries served, conferences convened, research papers produce		Expenses
1			
•••••			
2			
	<u> </u>		
3			
4			
Part IX-	Summary of Program-Related Investments (see inst	tructions)	.L
	he two largest program-related investments made by the foundation during the tax y		Amount
1			
2			
			
	rogram-related investments. See instructions		
3			
Total Add	lines 1 through 3		
	on the contract of the contrac		T .

Form **990-PF** (2017)

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	ign found	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	32,810,833
b	Average of monthly cash balances	1b	3,434,583
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	36,245,410
е	Reduction claimed for blockage or other factors reported on lines 1a and		-
	1c (attach detailed explanation)	استند	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	36,245,410
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	543,68°
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	35,701,739
6	Minimum investment return. Enter 5% of line 5	6	1,785,087
Part	and certain foreign organizations, check here ▶ ☐ and do not complete this part.)	oundation	าร
1	Minimum investment return from Part X, line 6	1	1,785,087
2a	Tax on investment income for 2017 from Part VI, line 5	3 (2.3)	
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	8,156
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,776,931
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,776,931
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	1,776,931
Dart	XII Qualifying Distributions (see instructions)		
rait	Qualitying Distributions (See Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	27547	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	1,872,471
b	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	2	_
3	Amounts set aside for specific charitable projects that satisfy the:	10.75	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	1,872,471
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	8,156
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,864,315
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whether	the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		
		_	OOO DE COLO

Par	Undistributed Income (see instruct	ions)			
1	Distributable amount for 2017 from Part XI, line 7	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
2 a	Undistributed income, if any, as of the end of 2017:				1,776,931
b	Total for prior years: 20 ,20 ,20				
3	Excess distributions carryover, if any, to 2017.				
a b	From 2012	_			
C	From 2014	4			
d	From 2015	┫.			
е	From 2016				•
f 4	Total of lines 3a through e				
	line 4: ▶ \$,		*	
a b	Applied to 2016, but not more than line 2a . Applied to undistributed income of prior years	*			* ,
-	(Election required—see instructions)	* **			
С	Treated as distributions out of corpus (Election				
ď	required—see instructions)				
e	Remaining amount distributed out of corpus	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			1,776,931
5	Excess distributions carryover applied to 2017				4 5 14 14 14
	(If an amount appears in column (d), the same amount must be shown in column (a).)				N. C. N. W.
6	Enter the net total of each column as				
	indicated below:				
a b	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract	्रिक्ट स्थाप के क्रिक्ट			
-	line 4b from line 2b				
С	Enter the amount of prior years' undistributed	100			
	income for which a notice of deficiency has been issued, or on which the section 4942(a)	Carlotte Contraction of			
	tax has been previously assessed		ľ		
d	Subtract line 6c from line 6b. Taxable amount—see instructions	ALEX CARRY AND SE	_		
е	Undistributed income for 2016. Subtract line	3. 2	- > 3/4 4-11		****
	4a from line 2a. Taxable amount-see	, i, x			
f	instructions				
'	4d and 5 from line 1. This amount must be	,			
	distributed in 2018				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)	j			
8	Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	į	Ì	-	
10	Analysis of line 9:				
	Excess from 2013 Excess from 2014	ĺ			
	Excess from 2014 Excess from 2015				
d	Excess from 2016				
е	Excess from 2017				

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Part Part	<u></u>)	
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for				<u></u>	
Ъ	Check box to indicate whether the four		operating founda		ection	(3) or 🕢 4942(J)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax ÿear	 	Prior 3 years		(e) Total
	investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	<u> </u>
_	each year listed			 		ļ
b	85% of line 2a	ļ	\	 		
С.	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter		Į.			
	(1) Value of all assets					
	(2) Value of assets qualifying under					
b	section 4942(j)(3)(B)(i) "Endowment" alternative test—enter 2/3					
_	of minimum investment return shown in			-		
	Part X, line 6 for each year listed "Support" alternative test—enter.		1 //	 		
Ū	(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					
Part	XV Supplementary Information	on (Complete th	nis part only if t	he foundation h	ad \$5,000 or me	ore in assets at
	any time during the year-	-see instruction	ns.)			
1	Information Regarding Foundation					
а	List any managers of the foundation of before the close of any tax year (but of					by the foundation
n/a						
b	List any managers of the foundation ownership of a partnership or other er					rge portion of the
n/a						
2	Information Regarding Contribution					
	Check here ▶ ☐ if the foundation unsolicited requests for funds. If the focomplete items 2a, b, c, and d. See in	oundation makes				
а	The name, address, and telephone nu	imber or email ad	dress of the perso	n to whom applica	tions should be ac	ddressed:
<u>Cal</u> vin	E. True PO Box 1210, Bangor ME 04402-	1210 207-947-0111				
	The form in which applications should			materials they sho	uld include:	
	ations must be writing Any submission deadlines:					
Ocobe						
d	Any restrictions or limitations on aw factors:	vards, such as b	y geographical a	reas, charitable fie	elds, kinds of inst	titutions, or other
n/a						
_						Form 990-PF (2017)

Recipient Name and address (home or business) Read during the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or status of recipient recipient	Amount
Name and address (home or business) any foundation manager or substantial contribution recipient contribution	Amount
a rais caring the year	
See Schedule Attached	
	Ì
Total	3a 1,700,00
b Approved for future payment	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	l
Total	3h

	gross amounts unless otherwise indicated.	Unrelated bu	311633 111001116	Excluded by secti	on 512, 513, or 514	l (e)
	_	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.)
	Program service revenue:			-		
	<u> </u>					
	;	-				
	·					
				1		
	Fees and contracts from government agencies					
	Membership dues and assessments					
	nterest on savings and temporary cash investments					
	Dividends and interest from securities					
	Net rental income or (loss) from real estate:	\$, 3 ₉	1 1 1 2 7 1	43 C. O.		· 2000年
	a Debt-financed property				5/8 . 3m 3868 1 T9887; b.	-39 8 -30 2388/38/30
	b Not debt-financed property					
	Net rental income or (loss) from personal property			 		
	Other investment income					
	Gain or (loss) from sales of assets other than inventory					
	Net income or (loss) from special events					,
	Gross profit or (loss) from sales of inventory					
	Other revenue: a					
	b		-			
	d					
	e					
	Subtotal. Add columns (b), (d), and (e)	5100/22/4/60				
					13	
	I DIAI. AUU IIITE 12. COMITTIS (D). (U). AUU (E)				13	
See	worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.)				
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Firm's address ▶

Part	XVII	Information Organization	n Regarding Tra	insfers to and T	ransaction	ns and R	elationshi	ps W	ith N	lonchai	ritable	e Exe	mpt
1	Did th		directly or indirectly	engage in any of	the followin	g with any	other orga	nızatıd	on de	scribed	Т	Yes	No
•	ın se		other than section										
а	_		porting foundation	to a noncharitable	exempt ora	anization o	of:						
-											1a(1)		1
		ther assets .									1a(2)	-	1
b	Other	transactions:									<u> </u>	,	2
	(1) Sa	ales of assets to	a noncharitable ex	cempt organization	n						1b(1)		√
			ets from a nonchar								1b(2)		1
			, equipment, or oth								1b(3)	1	1
	(4) R	eimbursement a	rrangements								1b(4)		✓
	(5) Lo	oans or loan gua	arantees								1b(5)		1
	(6) P	erformance of se	ervices or members	ship or fundraising	solicitations	3					1b(6)		1
С	Shari	ng of facilities, e	equipment, mailing	lists, other assets,	or paid emp	oloyees .					1c		1
d			of the above is "Y										
			other assets, or ser										
		in any transaction	on or sharing arran	<u> </u>									
(a) Line	e no (b) Amount involved	(c) Name of non	charitable exempt orga	inization	(d) Descri	ption of transfe	ers, tran	saction	ns, and sha	ring arri	angeme	ents
				<u> </u>									
											_		
													
			 										
			 -										
			 										
			 										
2a	le the	foundation dire	ectly or indirectly a	affiliated with or r	elated to o	ne or mor	e tax-exem	nt orr	naniza	ations			
20			501(c) (other than s								7 Yes	. 🗆 .	No
b			e following schedu								00	,	10
		(a) Name of organ			of organization	Τ		(c) Des	criptio	n of relation	nship		
								<u> </u>					
													
							 -						
									-		_		
	Unde	r penaltes of penury_	Lectare that I have exam	ned this return, including	accompanying s	chedules and	statements, and	to the	best of	my knowled	ige and	belief, it	is true,
Sign	Corre	c, and complete Decl	laration of preparer (other	than taxpayer) is based o	n, all information	of which prepa	irer has any kno	wledge.	۱ ۱	May the II	RS discu	ss this	return
Here	1 1	lah (. 1/2	15/15	Zoise Trus	stee				with the p	reparer s	shown b	elow?
.,.,		ature of officer or tru	ustee	Date	Title					See instrui	ctions	∐Yes{	_No
<u></u>		Print/Type preparer		Preparer's signatu	re		Date		Chas	,F	PTIN		
Paid		self prepared]					Checl self-e	k [if mployed			
Prep		Firm's name						Firm's	EIN ▶				
Use	Only	i iiii s name					-	<u> </u>					

Phone no