Form **990-PF**

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

| D | epartr ternal | ment of the Treasury | ➤ Do not enter so ➤ Go to www.irs | | - | | • | • | | Open to Public Inspection |
|----------|---|---|--|--------------|---------------------|---|---------------|------------------|---|---|
| _ | | | or tax year beginning | goviio | | | , and endin | | OII. | , 20 |
| | | of foundation | or tax year beginning | | | , 2017 | , and endin | | Employerident | <u>-</u> |
| | LOI | IISE GOILDING | G FBO PREACH AID | SOC | נו/ נו | | | | | -6029683 |
| | | | ox number if mail is not delivered | | | | Room/suite | В | | ber (see instructions) |
| | | · | | | , , | | | | rotophone num | DO: (000 111011 de(110113) |
| | 125 | . עורטע פייססיי | r, P.O. BOX 1100 | | | | | | 2 | 07 ((7 3003 |
| | | | e, country, and ZIP or foreign po | stal code | | | <u> </u> | + | | <u>07-667-388</u> 3 |
| | , | rom, state or province | o, dodnia y, dna zir or foreign po | olor code | | | | l c | If exemption applic | cation is |
| | ד זים | CMODTH ME | N/COE 1100 | | | | | | pending, check he | re |
| _ | | SWORTH, ME (eck all that apply: | | | I lauk al anti-una | -f - f | | _ | | |
| u | Cite | еск ан тат арріу: | Initial return | | _ | of a former p | iublic charit | ^y p | | ations, check here 🕨 🔃 |
| | | | H | <u> </u> | Amended re | | | | | ations meeting the here and attach |
| ᆸ | Cha | ack two of avenue | Address change | (-)(2) - | Name chang | | | | | ▶ □ |
| ï | _ | | ation X Section 501 | | | | A 1 | ` ∫ [E | If private foundation | on status was terminated |
| Ţ | | | onexempt charitable trust | | ther taxable pr | | | 4 | | (b)(1)(A), check here . > |
| • | | r market value o | | _ | method X C | ash Acc | rual | F | If the foundation is | s in a 60-month termination |
| | | of year (from Par | | ther (s | | | • | _ | under section 507 | (b)(1)(B), check here . > |
| | | | | | (d) must be on ca | ish basis.) | | | | 1 (05) |
| L | art | Analysis of Rev | enue and Expenses (The n columns (b), (c), and (d) | l (a) | Revenue and | (b) Net inve | estment | (c) | Adjusted net | (d) Disbursements for charitable |
| | | may not necessari | ly equal the amounts in | e> | penses per books | incom | | (0) | income | purposes |
| | | column (a) (see in | structions)) | | | | | | | (cash basis only) |
| | 1 | | s, etc., received (attach schedule) .ee foundation is not required to | L | | · | | ~ | | |
| | 2 | | ch Sch B | | | | | | | |
| | 3 | Interest on savings an | d temporary cash investments. | | | | | | *************************************** | |
| | 4 | Dividends and inter | rest from securities | | 20,105. | 1 | 9,555. | | | |
| | 5a | Gross rents | · · · · · · · · · · · · · · · · · · · | | ····· | *************************************** | | are Wrate | 250 700 | |
| | | Net rental income or (| loss) | <u> </u> | | | | | | ا. ن ـــــــــــــــــــــــــــــــــــ |
| Revenue | 6a b | | sale of assets not on line 10 | | 15,306, | | | | | , , |
| ē | " | assets on line 6a | | ļ | | | | | | |
| ٠ | 7 | Capital gain net inc | ome (from Part IV, line 2) . | | | 1 | 5,306. | | | |
| _ | 8 | Net short-term capi | | | | *************************************** | | | | |
| | 102 | Income modificatio Gross sales less return | ns RECEIVED | | | | | | · | . , , |
| | l | and allowances | <u> </u> | 78 | <u> </u> | - | | | ***************** | ar annual control operator and the control of |
| | Ь | Less Cost of goods st | NOV 0.5-2018 | 18 | | | | | | |
| | C | Gross profit or (loss |) (attach schedule) | 18 | | ·*·*···· | | | | |
| | 11 | Other income (attac | ch schedule DEN; UT | | 6. | | 6. | | | |
| _ | 12 | Totali / taa iii taa ii | | | 35,417. | | 4,867. | | | |
| s | 13 | | ers, directors, trustees, etc | ļ | 6,936. | | 3,468. | | | 3,468. |
| Se | 14 | | aries and wages | | | | NONE | | NON: | |
| 틸 | 14 15 16a b c 17 18 19 | Pension plans, emp | | | | *************************************** | NONE | | NON: | <u> </u> |
| 쑀 | 16a | Legal fees (attach s | | | | ••••• | | | | |
| ان | þ | | tach schedule)STMT. 1 | | 395. | | 198. | | NON | <u> </u> |
| 릙 | Ç | | fees (attach schedule) | ļ | | | | | | |
| ايّ | 17 | Interest | | | | | | | . | - |
| E | 18 | | lule) (see instru Sticks) . 2 . | ļ | 642. | | 490. | | | |
| Ē | 19 | | schedule) and depletion. | | | | | | | ļ <u></u> |
| P | 20 | | • | | | | | | | |
| 힑 | 21 22 | | and meetings | | | | NONE | | NONI | |
| | | | ations | | | | NONE | | NON | E |
| eu. | 23 | • | ach schedule) STMT. 3. | | 124. | | 124. | | · | |
| perating | 24 | · | d administrative expenses. | |] | | | | | |
| ē | | - | jh 23 | | 8,097. | | 4,280. | | NON | |
| 기 | 25 | | grants paid | | 15,882. | | | | , | <u>15,882</u> . |
| ┪ | 26 | | ursements Add lines 24 and 25 | | 23,979. | | 4,280. | | NON | E 19,548. |
| | 27 | Subtract line 26 fro | m line 12 | | | | | - | | |
| | | | expenses and disbursements | | 11,438. | | | | | |
| | | | ome (if negative, enter -0-) | | | 3 | 0,587. | | | |
| \perp | С | Adjusted net incom | ne (if negative, enter -0-). | | | | | | | |

JSA For Paperwork Reduction Act Notice, see instructions.
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Form **990-PF** (2017)

| Pari | Attached schedules and amounts in the description column should be for end-of-year | Beginning of year | End o | f year |
|---|--|-----------------------------|-----------------------|-----------------------|
| | amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| 1 | 1、Cash - non-interest-bearing | 80. | | |
| 2 | 2 Savings and temporary cash investments | 48,259. | 31,730. | 31,730 |
| 3 | Accounts receivable ▶ | | | |
| l | Less allowance for doubtful accounts ▶ | | | |
| 4 | , | | | |
| | Less allowance for doubtful accounts | | | |
| | | <u> </u> | | |
| 6 | Receivables due from officers, directors, trustees, and other | | | |
| | disqualified persons (attach schedule) (see instructions) | | | |
| 7 | | | | |
| | Less allowance for doubtful accounts ▶ NONE | | | |
| इं इ | Inventories for sale or use | | | |
| Assets | Prepaid expenses and deferred charges | | | |
| ⋖ 10 | | | | |
| | b Investments - corporate stock (attach schedule) . STMT .4 | 363,129. | 359,530. | 516,281 |
| | c Investments - corporate bonds (attach schedule) . STMT .6 | 161,028. | 162,000. | 159,400 |
| 11 | and equipment basis | | | |
| | Less accumulated depreciation (attach schedule) | | | |
| 12 | | | | |
| 13 | | | 30,924. | 33,196 |
| 14 | equipment basis | | | |
| | Less accumulated depreciation (attach schedule) | | | |
| 15 | Other assets (describe) | | | |
| 16 | | | | |
| ┵. | instructions Also, see page 1, item I) | 572,496. | 584,184. | 740,607 |
| 17 | Accounts payable and accrued expenses | | | |
| 18 | Grants payable | | | |
| <u>8</u> 19 | Deferred revenue | | | |
| apilities 20 21 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| | | | | ŀ |
| <u>ا</u> 22 | Other liabilities (describe) | | | |
| | | | | |
| 23 | | | NONE | |
| | Foundations that follow SFAS 117, check here ▶ | | | |
| auces 24 | and complete lines 24 through 26, and lines 30 and 31. | | | j |
| E 24 | | | | ļ |
| eg 25 | | - | | |
| 일 26 | Permanently restricted | | | Ì |
| 칠 | Foundations that do not follow SFAS 117, check here ► X | | | |
| 5 | and complete lines 27 through 31. | | | |
| Net Assets or Fund E 28 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 | Capital stock, trust principal, or current funds | 572,496. | 584,184. | |
| 등 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | |
| Š 29 | Retained earnings, accumulated income, endowment, or other funds | | | |
| الة 30 | Total net assets or fund balances (see instructions) | 572,496. | 584,184. | |
| Z 31 | | [| | |
| 5 . | instructions) | 572,496. | 584,184. | |
| | Analysis of Changes in Net Assets or Fund Balan | | | |
| | otal net assets or fund balances at beginning of year - Part II | | | FEO 406 |
| | nd-of-year figure reported on prior year's return) | | | 572,496. |
| | nter amount from Part I, line 27a | | | 11,438. |
| | ther increases not included in line 2 (itemize) SEE STAT | | 3 | 1,507. |
| | dd lines 1, 2, and 3 | | | 585,441. |
| | ecreases not included in line 2 (itemize) SEE STAT | | 5 | 1,257. |
| 0 10 | otal net assets or fund balances at end of year (line 4 minus lin | ie 5) - Part II, column (b) |), line 30 6 | 584,184. |

| Pa | rt IV Capital Gains | and Losses for Tax on Inv | vestment Income | | | 1 dgc O |
|----------|--|--|---|---|--|----------------------------------|
| | | scribe the kind(s) of property sold (for rick warehouse; or common stock, 20 | | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
| 1 a | PUBLICLY TRADED | SECURITIES | | | | |
| t |) | | | | | |
| | | | | | | |
| | | | | | | |
| e | <u>. </u> | (n) D | (a) Cost or other have | | 42.2 | |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | (h) Gain or (lo ((e) plus (f) min | |
| a | | | 157,830. | | | <u> 15,306.</u> |
| <u>b</u> | | | | - | | |
| | | | | | | |
| e | | | | - | | |
| | | lowing gain in column (h) and owned | by the foundation on 12/31/69 | <u></u> | | |
| | (i) FMV5 12/21/00 | (j) Adjusted basis | (k) Excess of col (i) | | Gains (Col. (h) ga (k), but not less ti | |
| | (i) FMV as of 12/31/69 | as of 12/31/69 | over col (j), if any | | Losses (from col | (h)) |
| a | | | | | | 15,306. |
| b | · | | | | | |
| <u>c</u> | | | | | | |
| d | | | | | | |
| <u> </u> | | - 16 | <u> </u> | | | |
| 2 | Capital gain net income | Or inet canital loss! | gain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7 | 2 | | _15,306. |
| 3 | Net short-term capital or | ain or (loss) as defined in sections | , | - | <u> </u> | _15,306. |
| • | | | estructions. If (loss), enter -0- in | | | |
| | | · · · · · · · · · · · · · · · · · · · | • | 3 | | |
| Pai | | | duced Tax on Net Investment in | ncome | | |
| Was | | the section 4942 tax on the distri | butable amount of any year in the b | ase period | 17 <u>X</u> | Yes No |
| | | 't qualify under section 4940(e). [| | | | |
| 1 | (a) | | ar; see the instructions before makin | ig any eni | ries. | |
| Cale | Base period years endar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | | Distribution rat (col. (b) divided by | |
| | 2016 | | | | (a) (b) divided by | 201 (0)1 |
| | 2015 | | | | | |
| | 2014 | | | | | |
| | 2013 | | | | | |
| | 2012 | | | | | |
| _ | | | | | | |
| 2 | | | | 2 | | |
| 3 | | | de the total on line 2 by 5.0, or by | | | |
| | the number of years the | foundation has been in existence | ıf less than 5 years | 3 | | |
| 4 | Enter the net value of no | oncharitable-use assets for 2017 f | rom Part X, line 5 | 4 | · | |
| 5 | Multiply line 4 by line 3. | | | 5 | | |
| 6 | Enter 1% of net investme | ent income (1% of Part I, line 27b) | | 6 | | |
| 7 | Add lines 5 and 6 | | | 7 | | |
| 8 | Enter qualifying distribut If line 8 is equal to or generated VI instructions. | reater than line 7, check the bo | x in Part VI, line 1b, and complete | that part | using a 1% ta | x rate. See the |

| • | , | | | |
|----|---|----------|--------------|---------------|
| | 990-PF (2017) 01-6029683 VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | inetr | | Page 4 |
| | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 | IIISLIC | uction | " |
| 1a | Date of ruling or determination letter (attach copy of letter if necessary - see instructions) | | | |
| h | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | 6 | <u></u> |
| - | here and enter 1% of Part I, line 27b | | | 1 |
| c | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of | | | j |
| · | Part I, line 12, col (b) | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) | | N | IONE |
| 3 | Add lines 1 and 2 | | | 12. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) | | | IONE |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0 | | | 512. |
| 6 | Credits/Payments | | | i |
| а | 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 273 . | | | |
| b | Exempt foreign organizations - tax withheld at source 6b NONE | | | 1 |
| С | Tax paid with application for extension of time to file (Form 8868) 6c NONE | | | |
| d | Backup withholding erroneously withheld | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | | 2 | <u> 273 .</u> |
| 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 | | | <u> 339.</u> |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | |
| 11 | Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ NONE Refunded ▶ 11 | | | |
| | t VII-A Statements Regarding Activities | | Τ., | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | 10 | Yes_ | No X |
| | participate or intervene in any political campaign ⁷ | 1a | | |
| D | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the | 16 | İ | X |
| | Instructions for the definition | | | |
| | published or distributed by the foundation in connection with the activities. | | | |
| c | Did the foundation file Form 1120-POL for this year? | 1c | 1 | X |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | |
| _ | (1) On the foundation > \$(2) On foundation managers > \$ | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | - | | |
| | on foundation managers. > \$ | | <u>.</u> | |
| 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 | | | 1 1 |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of | | <u> </u> | |
| | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 | | <u>X</u> |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a_ | ļ | X |
| 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 | | X |
| | If "Yes," attach the statement required by General Instruction T | | | į j |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | |
| | By language in the governing instrument, or | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that | 6 | X | |
| _ | conflict with the state law remain in the governing instrument? | 7 | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV | – | <u>^`</u> | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions ME ME | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | |
| | (or designate) of each state as required by General Instruction G?If "No," attach explanation | 8b | X | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | | |
| | 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," | 1 | | |
| | complete Part XIV | 9_ | <u> </u> | <u>X</u> |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | |
| | names and addresses | 10 | <u> </u> | X |

| Par | t 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 section 512(b)(13)? If "Yes," attach schedule See instructions | 11 | | l 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 |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address ► N/A | | | <u> </u> |
| 14 | The books are in care of ► BAR HARBOR TRUST SERVICES Telephone no ► (207) 667 | -388 | 3 | |
| • • | Located at ► 135 HIGH ST., P O BOX 1100, ELLSWORTH, ME ZIP+4 ► 04605- | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | | | <u> </u> |
| 13 | and enter the amount of tax-exempt interest received or accrued during the year | | – | |
| 16 | At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority | | Yes | No |
| | over a bank, securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of | $\overline{}$ | | -î |
| | the foreign country | ļ | | |
| Pari | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | <u> </u> | | |
| ı aı | | | Yes | No |
| 4- | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | 163 | 140 |
| ıa | During the year, did the foundation (either directly or indirectly) | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | | |
| | disqualified person? Yes X No | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | i | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for | | | |
| | the benefit or use of a disqualified person)? Yes X No | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the | | | ĺ |
| | 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) | | | |
| Ь | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | <u> </u> | | ابب-ا |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 1b | | <u>X</u> |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that | <u> </u> | | ليب |
| | were not corrected before the first day of the tax year beginning in 2017? | 1c | | <u> X</u> |
| 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)) | | | ŀ |
| а | At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and | | | 1 |
| | 6e, Part XIII) for tax year(s) beginning before 2017? | | | |
| | If "Yes," list the years ► | | | - 1 |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to | l | | |
| | all years listed, answer "No" and attach statement - see instructions) | 2b | | X |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| | <u> </u> | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | | | |
| | at any time during the year? | | | |
| b | 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 | igsquare | | |
| | foundation had excess business holdings in 2017.} | 3Ь | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | <u>X</u> |
| 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 2017? | 4b | لــــــــــــــــــــــــــــــــــــــ | X |
| | Fo | rm 99 9 | 0-PF | (2017) |

JSA

01-6029683

| Par | t VII-B Statements Regarding Activities | for Which Form | 4720 May Be Req | uired (continued) | | | |
|-------------|--|---------------------------------------|-----------------------------|---|-------------------|--------------|------------|
| 5a | During the year, did the foundation pay or incur any am | ount to | <u> </u> | | | Yes | No |
| | (1) Carry on propaganda, or otherwise attempt to influ | ence legislation (section | on 4945(e))? | . Yes X N | lo | | |
| | (2) Influence the outcome of any specific public e | - | | | | - | |
| | directly or indirectly, any voter registration drive? | | | Yes X N | lo | | |
| | (3) Provide a grant to an individual for travel, study, or | | | | lo - | | 1 |
| | (4) Provide a grant to an organization other than | • • | | | | İ | |
| | section 4945(d)(4)(A)? See instructions | | | | lo l | | |
| | (5) Provide for any purpose other than religious, (| | | | | | |
| | purposes, or for the prevention of cruelty to children | | • • | | lo | | 1 |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the | | | | , | ļ | |
| _ | Regulations section 53 4945 or in a current notice rega | | | | | - | |
| | Organizations relying on a current notice regarding disa | | | | .i ~~ | | - |
| • | If the answer is "Yes" to question 5a(4), does the | • | | | | | ŀ |
| · | because it maintained expenditure responsibility for the | | • | | | | |
| | If "Yes," attach the statement required by Regulations s | • | | res r | | | |
| 6a | Did the foundation, during the year, receive any fu | | roothy to nay promuu | me. | | | |
| Va | on a personal benefit contract? | • | | | | | |
| ь | Did the foundation, during the year, pay premiums, dire | | | | 6b | | X |
| U | If "Yes" to 6b, file Form 8870. | city of manecity, on a | personal benefit contra | ictr | . 60 | | |
| 7a | At any time during the tax year, was the foundation a p | arty to a prohibited tax | chalter transaction? | . Yes XN | _ | | |
| b | If "Yes," did the foundation receive any proceeds or hav | | | | | | |
| | Information About Officers, Director | | | | | L | Ь |
| | and Contractors | | _ | - | | | |
| | List all officers, directors, trustees, foundation m | (b) Title, and average | compensation. See | (d) Contributions to | | | |
| | (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | employee benefit plans and deferred compensation | (e) Expension | se accou | unt, es |
| | | devoted to position | enter -0-) | and deterred compensation | - | | |
| SEE | STATEMENT 10 | - | 6,936. | | | | |
| | D STATES TO STAT | | 0,250. | | | _ | |
| | | - | | | | | |
| | | | | | | | |
| | | • | | | | | - |
| | | | | | | | |
| | | = | | | | | |
| 2 | Compensation of five highest-paid employees | (other than thos | se included on line | e 1 - see instructi | ons). If n | one, | enter |
| | "NONE." | | , - | | | | |
| (2) | Name and address of each ampleuse had more than 650,000 | (b) Title, and average hours per week | (a) Composition | (d) Contributions to employee benefit | (e) Expens | se accou | unt, |
| (0) | Name and address of each employee paid more than \$50,000 | devoted to position | (c) Compensation | plans and deferred compensation | other all | owance | es |
| | | | | | | | |
| NON | 3 | ` | NONE | NONE | ۱ N | ONE | |
| | | | | | | | |
| | | • | | | | | |
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| | | <u> </u> | | | | | |
| | | · | | | | | |
| Total | number of other employees paid over \$50,000 | | | | N | ONE | |
| | | | | | Form 99 | | (2017) |

| 3 Five highest-paid independent contractors for professional services. See instructions | If none, enter "NONE." |
|---|-------------------------------------|
| (a) Name and address of each person paid more than \$50,000 | b) Type of service (c) Compensation |
| NONE | NOVE |
| NONE | NONE |
| | |
| | |
| | |
| | |
| | |
| otal number of others receiving over \$50,000 for professional services | NONE |
| | NONE |
| Part IX-A Summary of Direct Charitable Activities | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informat organizations and other beneficiaries served, conferences convened, research papers produced, etc. | on such as the number of Expenses |
| 1 NONE | |
| | |
| 2 | |
| | , |
| | |
| 3 | |
| | |
| 4 | |
| | |
| Part IX-B Summary of Program-Related Investments (see instructions) | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
| 1 NONE | |
| | |
| 2 | |
| | |
| All other program related investments See instructions | |
| All other program-related investments See instructions 3 NONE | |
| | |
| otal. Add lines 1 through 3 | |
| | |

| Par | t X | Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.) | ıgn four | ndations, |
|-----|--------|---|-----------|---------------------------------------|
| 1 | Fair | market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purp | oses | | |
| а | Aver | age monthly fair market value of securities | 1a | 647,457. |
| b | Aver | age of monthly cash balances | 1b | 54,196. |
| C | Fair | market value of all other assets (see instructions) | 1c | NONE |
| d | Tota | I (add lines 1a, b, and c) | 1d | 701,653. |
| е | Redu | iction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (a | attach detailed explanation) | | |
| 2 | Acqu | usition indebtedness applicable to line 1 assets | 2 | NONE |
| 3 | Subt | ract line 2 from line 1d | 3 | 701,653. |
| 4 | | deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see | | |
| | ınstr | uctions) | 4 | 10,525. |
| 5 | | value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 691,128. |
| 6 | Minir | mum investment return. Enter 5% of line 5 | 6 | 34,556. |
| Par | ΧI | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part.) | dations | • |
| 1 | Mıniı | mum investment return from Part X, line 6 | 1 | 34,556. |
| 2a | Tax | on investment income for 2017 from Part VI, line 5 2a 612 . | | |
| b | Incor | me tax for 2017. (This does not include the tax from Part VI.) 2b | | |
| C | | lines 2a and 2b | 2c | 612. |
| 3 | | ibutable amount before adjustments. Subtract line 2c from line 1 | 3 | 33,944. |
| 4 | | veries of amounts treated as qualifying distributions | 4 | NONE |
| 5 | | lines 3 and 4 | 5 | 33,944. |
| 6 | | iction from distributable amount (see instructions) | 6 | NONE |
| 7 | | ibutable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, | <u> </u> | ROND |
| • | | 1 | 7 | 33,944. |
| Dor | | | | |
| | All | Qualifying Distributions (see instructions) | | |
| 1 | | unts paid (including administrative expenses) to accomplish charitable, etc., purposes. | | |
| а | | nses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 19,548. |
| b | | ram-related investments - total from Part IX-B | 1b | · · · · · · · · · · · · · · · · · · · |
| 2 | Amo | unts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| | | oses | 2 | NONE |
| 3 | Amo | unts set aside for specific charitable projects that satisfy the | | |
| а | Suita | bility test (prior IRS approval required) | 3a | NONE |
| b | Cash | distribution test (attach the required schedule) | 3b | NONE |
| 4 | Qualif | fying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 19,548. |
| 5 | Foun | dations that qualify under section 4940(e) for the reduced rate of tax on net investment income. | | <u> </u> |
| | | 1% of Part I, line 27b See instructions | 5 | N/A |
| 6 | | sted qualifying distributions. Subtract line 5 from line 4 | 6 | 19,548. |
| | Note | : The amount on line 6 will be used in Part V, column (b), in subsequent years when ca | lculating | whether the foundation |
| | | qualifies for the section 4940(e) reduction of tax in those years. | | |

Form **990-PF** (2017)

Page 9

| Pa | rt XIII Undistributed Income (see instr | ructions) | | | |
|----|--|---------------|----------------------------|-------------|---------------------------------------|
| _ | Destributable amount for 2017 from Day VI | (a) Corpus | (b) Years prior to 2016 | (c) 2016 | (d) 2017 |
| ' | Distributable amount for 2017 from Part XI, | | | | |
| _ | line 7 | | | | 33,944. |
| | Undistributed income, if any, as of the end of 2017 | | • | 22 022 | |
| | Enter amount for 2016 only. | | NONE | 23,032. | <u> </u> |
| | Total for prior years 20,20,20 | | NONE | | |
| | Excess distributions carryover, if any, to 2017 From 2012 NONE | | | | |
| | 17017 | | | | |
| | 17017 | | | | |
| _ | MONT | | | | |
| | MONT | | | | |
| | | NONB | | | |
| | Total of lines 3a through e | NONB | | | |
| 4 | Qualifying distributions for 2017 from Part XII, line 4 > \$ 19,548. | | ļ | ···- | |
| а | Applied to 2016, but not more than line 2a | | | 19,548. | |
| b | Applied to undistributed income of prior years (Election required - see instructions) | | | | |
| _ | Treated as distributions out of corpus (Election | | | | · · · · · · · · · · · · · · · · · · · |
| · | required - see instructions) | NONB | | | |
| d | Applied to 2017 distributable amount | | | | NONE |
| | Remaining amount distributed out of corpus | NONB | | | 1 |
| | Excess distributions carryover applied to 2017 | NONB | | | NONE |
| | (If an amount appears in column (d), the same | | | | |
| 6 | amount must be shown in column (a)) Enter the net total of each column as | } | | | |
| Ŭ | indicated below: | | | | Į |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | NONE | | | |
| b | Prior years' undistributed income Subtract | | | | ! |
| | line 4b from line 2b | | NONE | | |
| 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) | | | | i |
| | tax has been previously assessed | | NONE | , | |
| d | Subtract line 6c from line 6b Taxable | | | | |
| _ | amount - see instructions | | NONE | | <u> </u> |
| е | Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see | | | | |
| | instructions | - | | 3,484. | <u> </u> |
| f | Undistributed income for 2017 Subtract lines | | | | |
| | 4d and 5 from line 1 This amount must be | | | | 22 044 |
| | distributed in 2018 | | | | 33,944. |
| 7 | Amounts treated as distributions out of corpus | ŀ | | | 1 |
| | to satisfy requirements imposed by section | | | |] |
| | 170(b)(1)(F) or 4942(g)(3) (Election may be | NONIE | | | - |
| | required - see instructions) | NONB | | | |
| 8 | Excess distributions carryover from 2012 not | NONB | | | ì |
| _ | applied on line 5 or line 7 (see instructions) | NONE | | | |
| 3 | Excess distributions carryover to 2018. | NONE | | | } |
| 10 | Subtract lines 7 and 8 from line 6a | IVOING | | | <u>-</u> |
| | Analysis of line 9 Excess from 2013 NONE | | } | | ļ |
| | Excess from 2014 NONE | | | | İ |
| | Excess from 2015 NONE | | | | F |
| | Excess from 2016 NONE | | | | ŀ |
| | Excess from 2017 NONE | | | | { |
| | NONE | | | | |

| Pa | rt XIV Private Op | erating Foundations | lega instructions a | | on 91 | | NOT ADDITIONED |
|-----|--|-----------------------------|----------------------------|-------------------------|-----------------|----------------|----------------------|
| | | | | | | | NOT APPLICABLE |
| Та | If the foundation has | | | | | | |
| | foundation, and the ruling | g is effective for 2017, en | ter the date of the ruling | • • • • • • • • • • • • | ▶ | | |
| b | Check box to indicate v | whether the foundation | is a private operating | foundation described in | section | 4942(j)(3 | 3) or 4942(j)(5) |
| 2. | Enter the lesser of the ad- | Tax year | | Prior 3 years | | | (2) 7 - 2 - 1 |
| Ła | justed net income from Part | (a) 2017 | (b) 2016 | (c) 2015 | (d) 201 | 4 | (e) Total |
| | I or the minimum investment | | | | | | |
| | return from Part X for each year listed | | | | | | |
| _ | • | | | _ | - | / - | |
| D | 85% of line 2a | | | | / | | |
| С | Qualifying distributions from Part | | | | | 1 | |
| | XII, line 4 for each year listed | | | | | | |
| u | 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 | | | | | | |
| | (1) Value of all assets (2) Value of assets qualifying | | | -/ | | · · · | |
| | under section | | | / | | | |
| | 4942(j)(3)(B)(i) | | | / | | | |
| D | "Endowment" alternative test- enter 2/3 of minimum invest- | | / | | | | |
| | ment return shown in Part X, | | | | | | |
| | line 6 for each year listed | | | | | | |
| C | "Support" alternative test - enter | | | | ļ | | |
| | (1) Total support other than | | | | | | |
| | gross investment income (interest, dividends, rents, | | | | | | |
| | payments on securities | | / | | | | |
| | loans (section 512(a)(5)), | | / | | | 1 | |
| | or royalties) | - | | - | | | |
| | public and 5 or more | | | | | | |
| | exempt organizations as provided in section 4942 | | | | | | |
| | (j)(3)(B)(m) | | / | | | - | |
| | (3) Largest amount of sup- port from an exempt | / | | | | | |
| | organization | / | | | | | |
| | (4) Gross investment income. | 7.11 | | | | | |
| Pai | | tary Information (C | | only if the foundat | tion had \$5, | 000 or 1 | more in assets at |
| | | uring the year - see | | | | | |
| | Information Regarding | _ | | | | | |
| а | List any managers of | the foundation who h | lave contributed more | e than 2% of the tota | ıl contribution | s received | by the foundation |
| | before the close of any | tax year (but only if th | ey have contributed in | nore than \$5,000) (Se | ee section 507 | 7(d)(2)) | |
| | N/A | | | | | | |
| b | List any managers of | the foundation who | own 10% or more of | the stock of a corpo | oration (or ar | equally | large portion of the |
| | ownership of a partner | | | | | | 3 7 |
| | | | | | | | |
| | N/A | • | | | | | |
| 2 | Information Regarding | Contribution Grant | Gift Loan Scholarchi | n etc Programs: | | | |
| _ | | | | • | | | |
| | Check here ► X If the | he foundation only r | nakes contributions | to preselected charm | table organiz | ations an | d does not accept |
| | unsolicited requests for | | | nts, etc., to individua | ls or organiza | itions und | er other conditions, |
| | complete items 2a, b, c | | | | | | |
| а | The name, address, and | d telephone number o | r email address of the | person to whom appli | cations shoul | d be addre | essed. |
| | | | | | | | |
| b | The form in which appl | ications should be sub | mitted and informatio | n and materials they s | hould include | • | |
| | | | | | | | |
| | | | | | | | |
| С | Any submission deadling | nes: | | | | <u>-</u> | |
| | | | | | | | |
| | | | | | | | |
| Ч | Any restrictions or lii | mitations on awards | such as by geogra | phical areas charital | hle fields ki | nds of in | stitutions or other |
| • | factors. | madons on awalds, | such as by geogra | pinioai arcas, citalita | DIG HEIUS, KI | iiua Oi III | actuations, or other |

| Part XV Supplementary Information (| continued) | | | |
|---|----------------------------|-------------------------|----------------------------------|----------|
| 3 Grants and Contributions Paid Durin | g the Year or Appr | oved for I | Future Payment | <u> </u> |
| 3 Grants and Contributions Paid Durin Recipient Name and address (home or business) | show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | Contribution | |
| a Paid during the year | | | | |
| DDDA GUUDA G. A.T.D. GOGTERWA OR AND THE TWO LAWS | | 1 | | |
| PREACHER'S AID SOCIETY OF NEW ENGLAND | | 20 | FOR ORGANIZATION'S GENERAL | |
| 14 EATON SQUARE, ROOM 1 NEEDHAM MA 02492-234 | NONR | PC | PURPOSES | 15,882. |
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| Total | | | ▶ 3a | 15,882. |
| b Approved for future payment | | | | |
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| | | | | |
| Total | | | ▶ 3b | |

Analysis of Income-Producing Activities

| ter gross am | nounts unless otherwise indicated | (0) | (b) | 1-1 | (4) | Related or exemp |
|--|---|----------------------|--------------------|---|--|--------------------------------------|
| Program se | ervice revenue. | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions |
| = | | | | | | 1000 |
| _ | | | | | | |
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| d | | | | | | |
| e | | | | | | |
| f | | | | <u> </u> | <u>. </u> | |
| g Fees and | d contracts from government agencies | | | | | |
| Membershi | ip dues and assessments | | · | | | |
| Interest on s | avings and temporary cash investments • | | | 1 | | |
| | and interest from securities | | | 14 | 20,105. | |
| | income or (loss) from real estate | | | | | |
| | nanced property | | | - | | |
| | ot-financed property | | | | | |
| | ncome or (loss) from personal property | | | 1 | 6. | |
| | stment income | | | 18 | 15,306. | - |
| | s) from sales of assets other than inventory | | | 1.10 | 15,500. | |
| | e or (loss) from special events · · · t or (loss) from sales of inventory | | | - | | |
| • | nue a | | | | | |
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| | | | | | | |
| | | | | | | , <u>-</u> |
|) | | | | | 35,417. | |
| | dd columns (b), (d), and (e) | | | | J J , T L / 1 | |
| Subtotal A Total. Add worksheet rt XVI-B | Explain below how each activity | ilations) to the Ac | ccomplishment of E | xempt Puri | ooses of Part XVI-A contribution | 35,4 |
| Total. Add worksheet rt XVI-B ne No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculated Relationship of Activities | ilations) to the Ac | ccomplishment of E | xempt Puri | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Total. Add e worksheet rt XVI-B | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ac | ccomplishment of E | xempt Puri | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Total. Add worksheet rt XVI-B | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ac | ccomplishment of E | xempt Puri | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Total. Add worksheet rt XVI-B | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ac | ccomplishment of E | xempt Puri | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Total. Add worksheet rt XVI-B | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ac | ccomplishment of E | xempt Puri | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Fotal Add worksheet T XVI-B e No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ac | ccomplishment of E | xempt Puri | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Fotal Add worksheet T XVI-B e No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ac | ccomplishment of E | xempt Purj | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Total Add worksheet T XVI-B e No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ac | ccomplishment of E | xempt Purj | ooses of Part XVI-A contribution | 35,4 |
| oubtotal A otal. Add worksheet t XVI-B e No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ac | ccomplishment of E | xempt Purj | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Fotal Add worksheet T XVI-B e No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ac | ccomplishment of E | xempt Purj | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Fotal Add worksheet T XVI-B e No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ac | ccomplishment of E | xempt Purp n column (e by providing | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Fotal Add worksheet T XVI-B e No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ae | ccomplishment of E | xempt Purp n column (e by providing | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Fotal Add worksheet T XVI-B e No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ae | ccomplishment of E | xempt Purp n column (e by providing | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Total Add worksheet T XVI-B e No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ae | ccomplishment of E | xempt Purp n column (e by providing | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Total Add worksheet T XVI-B e No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ae | ccomplishment of E | xempt Purp n column (e by providing | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Total Add worksheet T XVI-B e No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ae | ccomplishment of E | xempt Purp n column (e by providing | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Fotal Add worksheet T XVI-B e No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ae | ccomplishment of E | xempt Purp n column (e by providing | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Fotal Add worksheet T XVI-B e No | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ae | ccomplishment of E | xempt Purp n column (e by providing | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Total Add worksheet rt XVI-B | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ae | ccomplishment of E | xempt Purp n column (e by providing | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Total Add worksheet rt XVI-B | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ae | ccomplishment of E | xempt Purp n column (e by providing | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Fotal Add worksheet T XVI-B | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ae | ccomplishment of E | xempt Purp n column (e by providing | ooses of Part XVI-A contribution | 35,4 |
| Subtotal A Total. Add worksheet rt XVI-B | line 12, columns (b), (d), and (e) t in line 13 instructions to verify calcurationship of Activities Explain below how each activity | ilations) to the Ae | ccomplishment of E | xempt Purp n column (e by providing | ooses of Part XVI-A contribution | 35,4 |

| Part | XVII | Exempt Orga | | ransiers to | ano iransa | ictions | s and Relat | ionsnips vi | vitn ivonc | narıı | able | |
|---------|----------|--|-------------------|-------------------|---|---------------|---------------------|--------------------|------------------|---------|-----------|---------|
| 1 | Did th | e organization direct | | engage in ar | ny of the follo | wing w | th any other | organization | described | | Yes | No |
| | ın sec | ction 501(c) (other | than section | 501(c)(3) | organizations) | or in | section 527 | , relating to | political | | | |
| | _ | zations? | | | | | | | | | | |
| a | Transf | ers from the reportin | g foundation to | o a noncharita | ble exempt or | ganızatı | ion of [.] | | | | | |
| | | sh | | | | | | | | | | X |
| | | her assets | | | | | | | | 1a(2) | | X |
| | | transactions | | | | | | | | | · | |
| | | les of assets to a non | | | | | | | | | - | X |
| | | rchases of assets from | | | - | | | | | 1b(2) | | X |
| | | ntal of facilities, equi imbursement arrangi | • | | | | | | | | \dashv | X |
| | | ans or loan guarantee | | | | | | | | | | X |
| | | formance of services | | | | | | | | | | X |
| c | Sharın | g of facilities, equipm | nent, mailing lis | sts, other asse | ts, or paid em | ployees | : | | | 1c | | Χ |
| | | answer to any of th | | | | | | | | | | |
| | | of the goods, other | | | | | | | | | | |
| | | in any transaction of | | | | | | | | | _ | |
| (a) Lin | e no | (b) Amount involved | (c) Name of | noncharitable exe | empt organization | | (d) Description of | transfers, transac | tions, and shar | ng arra | ngeme | nts |
| | -+ | | - | | | | - | | " " | | | |
| | -+ | | | | | <u> </u> | | | | | | |
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| (| describ | foundation directly ped in section 501(c) complete the follow | (other than se | | | | | | | Y6 | s X | No |
| | 1 163, | (a) Name of organizatio | | (b) T | Type of organization | n . | · | (c) Descript | on of relations | hin | | |
| | | • | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | 1., | | | | |
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| | | penetites of perjury, I declar transcomplete Declaration of | | | | | | | of my knowledge | and b | elief, it | is true |
| Sign | | /w/. | (1) | 1 10/ | 04/2010 | . | ממשטנותי | | May the IRS | | | return |
| Here | Sta | nature of officer or trustee | · // / | V 10/ Date | 04/2018 | Title | RUSTEE | | with the prep | | | elow? |
| | / | R HARBOR TRUS | T SERVICES | | | Title | • | | See instructions | | Yes | No |
| | ם ח | Print/Type preparer's na | | Reparer's s | signature | | Date | Che | eck of P | TIN | | |
| Paid | | JOSEPH B HUL | | N// | 0/11 | \mathcal{M} | 10/0 |)4/2018 self | ~~ □ " | | 3585 | 0 |
| Prepa | arer | | NST & YOU | NG U.S. L | LP | | | Firm's EIN | | | | |
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| | | | ANDVIEW H | | | 43212 | <u> </u> | Phone no | 614-23 | 2-7 | 290 | |
| | | | | · | | | | | For | . 990 | PF / | 20171 |

FORM 990PF, PART I - ACCOUNTING FEES

| CHARITABLE PURPOSES | 198. |
|---|--|
| ADJUSTED NET INCOME | NONE |
| NET INVESTMENT INCOME | 198. |
| REVENUE AND EXPENSES PER BOOKS | 395. |
| | (NON-ALLOC TOTALS |
| DESCRIPTION | TAX PREPARATION FEE (NON-ALLOC TOTALS |

STATEMENT

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STATEMENT

| TAXES | ==== |
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| , PART | |
| 990PF | |
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| NET INVESTMENT INCOME | 419. 29. 42. 42. 490. |
|---|---|
| REVENUE AND EXPENSES PER BOOKS | 419. 152. 29. |
| DESCRIPTION | FOREIGN TAXES FEDERAL ESTIMATES - PRINCIPAL FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED TOTALS |

FORM 990PF, PART I - OTHER EXPENSES

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STATEMENT

| 43 |
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| NET INVESTMENT INCOME | | 12, |
|---|------|-------------------------------|
| REVENUE AND EXPENSES PER BOOKS | | 124. |
| DESCRIPTION | | OTHER NONALLOCABLE EXPENSES - |

TOTALS

124.

| ENDING FMV | 23,541. 23,547. 21,065. 22,355. | 42,770. | 11,790. 4,416. 17,072. 23,338. 14,669. 21,800. 9,327. | 6,664. | 26,415. 19,815. | 5,188. 25,295. 19,954. 18,774. |
|----------------------|--|---------|---|--------|--------------------|---|
| ENDING BOOK VALUE | 14,819. 8,421. 15,967. 10,300. | 14,025. | 10,710. 4,215. 10,937. 15,396. 12,449. 15,055. 7,265. | 6,685. | 14,518. 12,996. | 4,882. 19,849. 13,705. 13,971. |

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LOUISE GOULDING FBO PREACH AID SOC U/W

01-6029683

FORM 990PF, PART II - CORPORATE STOCK

| DESCRIPTION | ENDING BOOK VALUE | ENDING FMV |
|--|----------------------------|--------------------|
| W.P. CAREY INC EATON CORP PLC ALLIED WRLD ASSUR COM HLDG A | 12,121. | 18,567. |
| LYONDELLBASELL INDUSTRIES N AMERICAN INTL GROUP INC WTS AMERICAN INTEL GROUP INC | 4,797. 9,619. | 3,805. 8,937. |
| FAIRFAX FINANCIAL HOLDING LAFARGEHOLCIM LTD | 9,00,4,0 | 21,744. 15,694. |
| FRIMOKIS SVCS CORF MILLICOM INTL CELLULAR NEW LYONDELLBASELL INDUSTRIES N | 16,277 16,277 13,509 | 20,22 18,75 |
| TOTALS | 359,530 | 516,281. |

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LOUISE GOULDING FBO PREACH AID SOC U/W

01-6029683

FORM 990PF, PART II - CORPORATE BONDS

| DESCRIPTION | | ENDING BOOK VALUE | ENDING FMV |
|---|--------|----------------------|-------------------|
| AMERICAN HOMES 4 RENT 1.25% BLOCK FINL 4.125% 10/01/20 DANA HOLDG CORP 5.375% 09/15/2 | | 10,025. | 10,308. |
| IOWA FIN AUTH 5.5% 12/01/22 LKO CORP 4.75% 05/15/23 | | 9,995. | 10,197. |
| MEAD JOHNSON 3% 11/15/20 MURPHY OII, CORP 4% 06/01/22 | | 10,043. | 10,150. |
| NUSTAR LOGISTICS LP 4.8% 09/01 IAMGOLD CORP 6.75% 10/01/20 | | 10,049. | 10,150. |
| DOUBLELINE TOTAL RETURN BOND F CHENIERE ENERGY INC 4.25% 03/1 | | 75,000. | 71,194. |
| KENNEDY WILSON INC 5.875% 04/0 | | 10,356. | 10,325. |
| MATTEL INC 2.35% 05/06/19 BARCLAYS BANK PLC 2% 07/27/22 | | 9,825. 9,954. | 9,874. 9,883. |
| | TOTALS | 162,000. | 159,400. |

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|---|---|---------------|---------|
| | COST/ FMV | ENDING | ENDING |
| DESCRIPTION | CORF | BOOK VALUE | FMV |
| 1 1 1 1 1 1 1 1 | 1 1 1 1 1 1 | 1 1 1 1 1 1 1 | !!! |
| VANGUARD INFLACTION PROTECTED LAZARD LTD SHS A | υυ | 15,000. | 14,821. |
| | | | |
| | TOTALS | 30,924. | 33,196. |
| | | | |

01-6029683

FORM 990PF, PART II - OTHER INVESTMENTS

LOUISE GOULDING FBO PREACH AID SOC U/W

| FORM | 990PF, | PART | III - | OTHER | INCREASES | IN | NET | WORTH | OR | FUND | BALANCES |
|------|--------|------|-------|-------|-----------|----|-----|-------|----|------|----------|
| | | | | | | | | | | | |

DESCRIPTION AMOUNT 2016 INCOME POSTED IN 2017 370. ROC IN 2017 1,009. 128. INCOME DIFF FROM LP K1 TOTAL 1,507. ==========

1,257.

| FORM 990P | F, PART | III · | - OTHER | DECREASES | IN NET | WORTH | OR | FUND | BALANCES | |
|-------------|---------|-------|---------|-----------|--------|--------|-----|------|----------|------|
| ======= | ===== | ====: | ====== | ======= | ====== | ====== | === | ==== | ====== | |
| DESCRIPTION | ON | | | | | | | | AMOUNT | 1 |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 2017 INCO | ME POST | ED IN | 2018 | | | | | | | 385. |

RETURN OF CAPITAL IN 2017 FOR 2016 719.
ACCRUED INT PAID IN 2017 FOR 2018 48.
ROUNDING 1.
ACCRUED INTEREST CARRYOVER 104.

TOTAL

STATEMENT 9

01-6029683

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

BAR HARBOR TRUST SERVICES

ADDRESS:

135 HIGH ST., PO BOX 1100

ELLSWORTH, ME 04605

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

COMPENSATION EXPLANATION:

TRUSTEE FEES

TOTAL COMPENSATION:

6,936.

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