

Internal Revenue Service

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

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OMB No 1545-0052

2017

		nue Service Go to www.irs gov/Form990	OPF for instructions and	d the lates	t informatio	n. Open	to Public Inspection
For	calen	dar year 2017 or tax year beginning	, 2017, a	and ending	 9		, 20
N	ame of t	foundation			A Employer	identification number	
_P	OND 1	FAMILY FOUNDATION			20-1131	.673	
		and street (or PO box number if mail is not delivered to street address)	Re	oom/suite		number (see instructions)	
		IRK POND TREAS 3 CANTER LANE			(207) 76		
		wn, state or province, country, and ZIP or foreign postal code				on application is pending,	chack here
		ELIZABETH, ME 04107			C il exempli	on application is pending,	check here
			n of a former public char	ıtv	D 1. Foreigi	n organizations, check her	e ▶ 🗍
		Final return Amended r	return //	,	٦	•	
		Address change Name char	·	Я		n organizations meeting there and attach computat	
H	Check t	type of organization X Section 501(c)(3) exempt pri	<del></del>			·	
	1		r taxable private foundati	On V		foundation status was terr 07(b)(1)(A), check here	
Ī	aır ma	rket value of all assets at J Accounting method	E-1	Accrual			
6	end of v	/ear (from Part II, col (c), Other (specify)	٠ ـــ ك			idation is in a 60-month te ition 507(b)(1)(B), check h	
	ne 16)		be on cash basis )		440.		L
	art I	Analysis of Revenue and Expenses (The total of		· · · · ·	<u> </u>		(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net	nvestment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions) )	books		come	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	<del>                                     </del>	<del></del>		<del></del>	-,'
	2	Check ► X if the foundation is <b>not</b> required to attach Sch B · ·	•		· <del></del>		,
	3	Interest on savings and temporary cash investments · · · ·		<del> </del>			
	4	Dividends and interest from securities	106,622		106,622		· · · · · · · · · · · · · · · · · · ·
	5a	Gross rents	100,622		100,022	<del></del>	<u></u>
4	b	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10 · · · · ·	279,348				L
Revenue	b	Gross sales price for all assets on line 6a 1,007,708	219,346				
Je.	7	Capital gain net income (from Part IV, line 2)			279,348	· · · · · · · · · · · · · · · · · ·	
Š	8	Net short-term capital gain			219,348		<del></del>
_	9	Income modifications		<del>                                     </del>			
	10a	Gross sales less returns and allowances		<del> </del>			
	ь	Less Cost of goods sold · · · · · · ·	<del>  - · · · · · · · · · · · · · · · · · · </del>	ļ ———			, , , , , , , , , , , , , , , , , , ,
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	ļ	<del> </del>		<del> </del>	
	12_	•	205 070		205 050		<u></u>
	135	Total. Add lines 1 through 11	385,970		385,970		07.000
S	14		45,000	<del></del>	18,000		27,000
uš	155	Other employee salaries and wages	<del></del>	<del> </del>			
be	16a	Pension plans, employee benefits		<del> </del>	1 704		
Ä	25 P	Legal fees (attach schedule) STM107	1,734		1,734	<del></del>	
Š	يقاله	Accounting fees (attach schedule)		<del></del>		<del></del>	
and Administrative Expenses		Other professional fees (attach schedule) STM109	14,570		14,570		
str	17)	Interest · · · · · · · · · · · · · · · · · · ·		<del> </del>			<del></del>
Ξ	18 20 21 22 22	Taxes (attach sedule) (Ade f) structor (attach schedule) and depletion (2	840		840		
튬	20			<del></del>			
ĕ	(2)	Occupancy OGDEN UT	<del></del>				
밀	<del>(</del> (1)	Travel, conferences, and meetings				_ <del>-</del>	
g	1	Printing and publications				·	
Operating	23	Other expenses (attach schedule) · · · <b>STM1</b> 03 · · · · ·	35	<del> </del>	35		<del></del>
37.2	24	Total operating and administrative expenses					
ğ	25	Add lines 13 through 23	62,179		35,179		27,000
J	)	Contributions, gifts, grants paid	198,000	ļ			198,000
		Total expenses and disbursements. Add lines 24 and 25	260,179	<b></b> _	35,179	<del></del>	225,000
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements .	125,791				
	b	Net investment income (if negative, enter -0-)			350,791		
	С	Adjusted net income (if negative, enter -0-)	1			O	

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2017)

9-21

Pa	irt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	year
_		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	10,970	43,201	43,201
	2	Savings and temporary cash investments	370,889	111,403	111,256
	3	Accounts receivable		-	_
		Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	!	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	1	Less allowance for doubtful accounts			
ets	8	Inventories for sale or use · · · · · · · · · · · · · · · · · · ·			
ssets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule) STM137	2,306,160	2,614,509	5,297,218
	С	Investments - corporate bonds (attach schedule) STM138	524,468	571,662	569,750
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)		^ yes -	
	12	Investments - mortgage loans			<del></del>
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)	-		
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
	ļ	instructions Also, see page 1, item I)	3,212,487	3,340,775	6,021,425
_	17	Accounts payable and accrued expenses	3,212,43,		0,021,425
	18	Grants payable			,
es	19	Deferred revenue · · · · · · · · · · · · · · · · · · ·	<del></del>		,
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			**
abi	21	Mortgages and other notes payable (attach schedule)			*
Ë	22	Other liabilities (describe			*
	23	Total liabilities (add lines 17 through 22)	0	0	> 1
		Foundations that follow SFAS 117, check here X			, ,
Ş		and complete lines 24 through 26, and lines 30 and 31.			* ` .
ances	24	Unrestricted	3,212,487	3,340,775	, ,
alaı	25	Temporarily restricted	3,212,467	3,340,773	, , , , , ,
Ω	26	Permanently restricted	<del> </del>	<del></del>	, ,
or Fund	-0	Foundations that do not follow SFAS 117, check here		<del></del>	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Fu		and complete lines 27 through 31.		!	, ***
ŏ	27	Capital stock, trust principal, or current funds			,
	28	Paid-in or capital surplus, or land, bldg, and equipment fund	<del></del>		,
Assets	29	Retained earnings, accumulated income, endowment, or other funds			
As	30	Total net assets or fund balances (see instructions)	2 212 427	2 240 775	
Net	31	Total liabilities and net assets/fund balances (see	3,212,487	3,340,775	
2	31	•	2 212 427	0.040.555	*
Pa	rt III	Analysis of Changes in Net Assets or Fund Balan	3,212,487	3,340,775	<del></del>
		net assets or fund balances at beginning of year - Part II, column (a), line	·		
			•		0 010 407
		of-year figure reported on prior year's return) · · · · · · · · · · · · · · · · · · ·		<del></del>	3,212,487
		amount from Part I, line 27a		· · · · · · · · · · · · · · · · · · ·	125,791
		increases not included in line 2 (itemize) STM115		3	2,497
		ines 1, 2, and 3		<del></del>	3,340,775
		eases not included in line 2 (itemize)	alvera (h) lua 22	5	
0	iotai	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	3,340,775

Part IV	Capital Gains a	and Losses for Tax on Inve	stment Income	)		
		e the kind(s) of property sold (for example house, or common stock, 200 shs MLC C		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a REPORTED ON HM PAYSON MANAGED ACCT P VAF					VARIOUS	VARIOUS
b						
С			<u>-</u>			
d						
е	<u> </u>					
(e) C	Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o plus expens			ain or (loss) s (f) minus (g))
a	1,007,708		<del></del>	728,360		279,348
b						
e				-		
	e only for assets show	ring gain in column (h) and owned by	the foundation on 12	2/31/69		
	as of 12/31/69	(j) Adjusted basis	(k) Excess	of col (ı)	col (k), but no	Col (h) gain minus ot less than -0-) <b>or</b> (from col (h))
		as of 12/31/69	over col (j	), ir any		. , , , ,
<u>a</u> 			<del> </del>			279,348
C						
<del>U</del>						
e						
	ain net income or (net	t capital loss)	so enter in Part I, line	>		
	,	If (loss), e	enter -0- in Part I, line	e 7	2	279,348
	, •	(loss) as defined in sections 1222(5)	• •	_		
•		8, column (c) See instructions If (lo	• •	}	3	
		nder Section 4940(e) for Re		Net Investme		
		ate foundations subject to the section		•		
	•	•	To To(a) tax on not		<b>-</b> ,	
If section 494	l0(d)(2) applies, leave	this part blank				
Was the four	idation liable for the se	ection 4942 tax on the distributable ar	mount of any year in	the base period?	•	Yes X No
If "Yes," the f	oundation doesn't qua	lify under section 4940(e) Do not co	mplete this part			
1 Enter the	<u>,, , ,                                 </u>	n each column for each year, see the	e instructions before	making any entri	es	
В	(a) sase period years	(b)		(c)	Dis	(d) stribution ratio
Calendar y	ear (or tax year beginning	<del></del>	<u> </u>	noncharitable-use as	(601 (6	) divided by col (c))
	2016	249,4		5,038,2		.049506
	2015 2014	292,2		4,644,7		0.062929
	2014	246,3		4,666,8		0.052779
	2013	172,9 136,4		4,069,9 3,709,1		0.042485
	2012	130,4	117	3,109,1	133 0	7.030/13
2 Total of I	ine 1, column (d)				2	. 244478
	• •	ie 5-year base period - divide the tota				
=		ation has been in existence if less tha		<del>-</del>	3 0	.048896
4 Enter the	net value of nonchar	itable-use assets for 2017 from Part 2	X, line 5		4	5,491,171
5 Multiply I	ne 4 by line 3 · · ·				5	268,496
6 Enter 1%	of net investment inc	come (1% of Part I, line 27b) · · · ·			6	3,508
<b>-</b>	. F. a. a.d. C					
/ Add lines	55 and 6				7	272,004
8 Enter aus	alifyina distributions fr	om Part XII, line 4			8	225,000
		nan line 7, check the box in Part VI, lir				
	structions					

			131673		Page 4	
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see	instructio	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)					
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		7	,016	
	here  and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of	]				
	Part I, line 12, col (b)	į l				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2_			0	
3	Add lines 1 and 2	3			,016	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4			0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5		7	,016	
6	Credits/Payments					
а	2017 estimated tax payments and 2016 overpayment credited to 2017 · · 6a 5,428				ŧ	
b	Exempt foreign organizations - tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d	7		5	,428	
8	Enter any penalty for underpayment of estimated tax. Check here	8			<u></u>	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		1	.,588	
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				
Pai	t 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			Yes	No	
	participate or intervene in any political campaign?		1a		X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the					
	Instructions for the definition		1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities					
С	Did the foundation file Form 1120-POL for this year?		· · 1c		Χ_	
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation > \$ (2) On foundation managers > \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		•			
	on foundation managers > \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X	
	If "Yes," attach a detailed description of the activities				*	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X	
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?		4b			
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					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			_	. * *	
	By language in the governing instrument, or		^	١.		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that					
	conflict with the state law remain in the governing instrument?		6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and	l Part	x∨. 7	X		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions▶			,		
_	ME					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
~	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	-	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		1.5	T	<del></del>	
-	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See instructions for Part XIV)? If "Yes,"				•	
	complete Part XIV · · · · · · · · · · · · · · · · · · ·		9		x	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			1	+	
	names and addresses		10	1	X	
	number and dedicated and the second				<del></del> _	

	SOURCE (2017) POINT FAMILY FOUNDATION 20-1131	573		'age <b>5</b>
Pai	t VII-A   Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of 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_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address N/A			
14	The books are in care of ANN ST JOHN POND Telephone no 207-7	67-4	421	
	Located at ► 3 CANTER LANE, CAPE ELIZ., ME ZIP+4 ► 04107			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-check here	• • •		▶ ∐
	and enter the amount of tax-exempt interest received or accrued during the year   15		·	
16	At any time during calendar year 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			
	the foreign country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1	1	<del></del>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly)			
	(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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?	,		
	construction and an analysis man because			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
h	termination of government service, if terminating within 90 days )	1		
b	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	"		- 23
	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 2017?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and		,	
a	6e, Part XIII) for tax year(s) beginning before 2017? Yes X No		,	
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)		1	
-	(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	1	,
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
-	• • • • • • • • • • • • • • • • • • •			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			İ
	at any time during the year?	1		
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			:
	foundation had excess business holdings in 2017 )	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? • • • • • •	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		1	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
EEA		orm <b>9</b> 9	0-PF	(2017)

	990-PF (2017) POND FAMILY FOUNDAT							20-1131		P	age <b>6</b>
Pa	t VII-B Statements Regarding Activitie		Nhich Forn	n 4720	May Be	Requi	red (co	ntınued,	)		
5a	During the year, did the foundation pay or incur any an	nount to								Yes	No
	(1) Carry on propaganda, or otherwise attempt to influ	uence leg	jislation (sectio	n 4945(e	e))?	[	Yes	X No			
	(2) Influence the outcome of any specific public electi	on (see s	section 4955), d	or to car	ry on,	_		_			
	directly or indirectly, any voter registration drive?					[	Yes	X No			
	(3) Provide a grant to an individual for travel, study, or	r other si	mılar purposes	2		[	Yes	X No			
	(4) Provide a grant to an organization other than a ch	aritable,	etc , organizati	on descr	ribed in	•	_	_			
	section 4945(d)(4)(A)? See instructions					[	Yes	X No			,
	(5) Provide for any purpose other than religious, chan	ıtable, sc	ientific, literary.	or educ	ational		_	_			
	purposes, or for the prevention of cruelty to childre					[	Yes	X No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans			nder the	exceptions d	escribed	 ∣in				
	Regulations section 53 4945 or in a current notice reg				•				5b	~	
	Organizations relying on a current notice regarding dis	_						. ▶ □			
С	If the answer is "Yes" to question 5a(4), does the found							ш			•
_	because it maintained expenditure responsibility for th					[	Yes	No			
	If "Yes," attach the statement required by Regulations	•	3 4945-5(d)			[		□			
6a	Did the foundation, during the year, receive any funds,			nav nrei	milims						
vu	on a personal benefit contract?	-				[	Yes	X No			*
þ	•						'63	A NO	6b		X
-	Did the foundation, during the year, pay premiums, dir If "Yes" to 6b, file Form 8870	ectly of it	idirectly, on a p	ersonai	benefit conti	actr	• • • •		00		
7.	•					ſ	¬ <sub>V</sub>	X No			
_	At any time during the tax year, was the foundation a p	-				•	_		76		
D <sub>O</sub>	If "Yes," did the foundation receive any proceeds or hart VIII Information About Officers, Dire	<u>-</u> _							7b	W000	
га		ectors,	Trustees,	round	iation ivia	nagers	s, nigii	iy Faiu	Empi	yees	<b>'</b> '
	and Contractors										
1 [	ist all officers, directors, trustees, and foundation					,			ı		
	(a) Name and address		e, and average rs per week		ompensation not paid,		Contribution oyee bene		(e) Exp	ense ac allowan	
See	990_OFOV	devot	ed to position	en	nter -0-)	and det	erred com	pensation			
ANN	ST JOHN POND	PRESI	DENT AND	Þ							
3 C.	ANTER LANE, CAPE ELIZ., ME 04107		14.00		45,000			0			0
KIR	K POND	TREAS	URER AND I	Þ							
3 C.	ANTER LANE, CAPE ELIZ., ME 04107		1.00		0			0_			0
KYL:	E POND	DIREC	TOR								
52 1	UPLAND ROAD, NEWTON, MA 02468		0.20		0			0			0
JOE:	L POND	DIREC	TOR								
20 2	ARBORSIDE DR, FALMOUTH, ME 04105		0.20		0			0			0
2 (	Compensation of five highest-paid employees (othe	r than th	ose included	on line	1 - see instr	uctions	. If none	, enter			
"	NONE."										
			(b) Title and (	.vorono			(d) Contr	butions to			
	(a) Name and address of each employee paid more than \$50	,000	(b) Title, and a hours per w	eek ¯	(c) Comper	nsation		e benefit d deferred	(e) Expe	nse aco allowan	
			devoted to po	sition				ensation			
NON	3										
		**									
	<del></del>										
					ļ	-					
			<u> </u>		L					-	
rotal	number of other employees paid over \$50,000 · · ·								)		0

Form 990-PF (2017)

POND FAMILY FOUNDATION

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

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2

3

EEA

All other program-related investments. See instructions

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreign	found	lations,
	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	5,547,707
b	Average of monthly cash balances · · · · · · · · · · · · · · · · · · ·	1b	27,086
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	5,57 <u>4</u> ,793
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) · · · · · · · · · · · · · · · 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	5,574,793
4	Cash deemed held for charitable activities   Enter 1 1/2% of line 3 (for greater amount, see		
	instructions) · · · · · · · · · · · · · · · · · · ·	4	83,622
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	5,491,171
6	Minimum investment return. Enter 5% of line 5	6	274,559
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	undat	lions
	and certain foreign organizations, check here ▶ and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	274,559
2a	Tax on investment income for 2017 from Part VI, line 5 · · · · · · · · 2a 7,016		
b	Income tax for 2017 (This does not include the tax from Part VI )		
C	Add lines 2a and 2b · · · · · · · · · · · · · · · · · ·	2c	7,016
3	Distributable amount before adjustments Subtract line 2c from line 1	3	267,543
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4 · · · · · · · · · · · · · · · · · ·	5	267,543
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	267,543
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	225,000
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	·	
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	225,000
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	<del> </del>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	225,000
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the to	founda	ition
	qualifies for the section 4940(e) reduction of tax in those years		

1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
	line 7				267,543
2	Undistributed income, if any, as of the end of 2017				
a	Enter amount for 2016 only	•			
b	Total for prior years				
3	Excess distributions carryover, if any, to 2017				
a		_			
b	From 2013				
С	From 2014				
d	From 2015				
е	From 2016				
f	Total of lines 3a through e	69,935			
4	Qualifying distributions for 2017 from Part XII,				
	line 4 • \$ 225,000				
а	Applied to 2016, but not more than line 2a · · ·				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)			, in the second	
С	Treated as distributions out of corpus (Election				
	required - see instructions)				,
d	Applied to 2017 distributable amount				225,000
е	Remaining amount distributed out of corpus		*	;	
5	Excess distributions carryover applied to 2017 .	42,543			42,543
	(If an amount appears in column (d), the same		<i>'</i>		- ^ 1 -
	amount must be shown in column (a))				,
6	Enter the net total of each column as			* `	
	indicated below·	» ·	× ,,		
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	27,392	*		
b	Prior years' undistributed income Subtract			· · · · · · · · · · · · · · · · · · ·	
	line 4b from line 2b · · · · · · · · · · · · · · · · · ·				
С	Enter the amount of prior years' undistributed				• ,
	income for which a notice of deficiency has				*
	been issued, or on which the section 4942(a)	, ,		. ,	* ;
	tax has been previously assessed	,			
d	Subtract line 6c from line 6b Taxable	*			
	amount - see instructions · · · · · · · · · · · · · · · · · · ·				
е	Undistributed income for 2016 Subtract line	, ,	¢.		
	4a from line 2a Taxable amount - see				
	instructions		<u> </u>		
f	Undistributed income for 2017 Subtract lines	^			
	4d and 5 from line 1 This amount must be				
	distributed in 2018				o
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)				· ·
8	Excess distributions carryover from 2012 not				à.v
	applied on line 5 or line 7 (see instructions)	L			***
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	27,392			
0	Analysis of line 9				,
а	Excess from 2013 · · · · ·				
b	Excess from 2014 · · · ·				
С	Excess from 2015 24,88	80			
d	Excess from 2016 2,5:				
е	Excess from 2017				•

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POND FAMILY FOUNDATION

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Part	XIV Private Operating Four	idations (see inst	ructions and Part	VII-A, question 9	)	<u></u>		
1a	If the foundation has received a ruling or determination letter that it is a private operating							
	foundation, and the ruling is effective for 2	2017, enter the date of	the ruling		<b>▶</b>			
b	Check box to indicate whether the foundation	ition is a private operat	ing foundation describe	ed in section	4942(j)(3) or 49	42(J)(5)		
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years				
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total		
	each year listed			13				
b	85% of line 2a							
_	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 "Assets" alternative test - enter							
а	(1) Value of all assets · · · · ·							
	(2) Value of assets qualifying under section 4942(i)(3)(B)(i)							
b	"Endowment" alternative test - enter 2/3							
	of minimum investment return shown in Part X, line 6 for each year listed							
С	"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)	<del></del> -			<del></del>			
	(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		tion (Complete tl	nis part only if th	e foundation had	\$5,000 or more in	assets at		
	any time during the yea	r - see instructio	ns.)					
1	Information Regarding Foundation M	anagers:						
а	List any managers of the foundation who							
	before the close of any tax year (but only	if they have contribute	ed more than \$5,000)	(See section 507(d)(2)	)			
	KIRK POND							
b	List any managers of the foundation who		•		portion of the			
	ownership of a partnership or other entit	y) of which the foundat	ion has a 10% or great	ter interest				
	NONE							
2	Information Regarding Contribution,	Grant, Gift, Loan, Sch	nolarship, etc., Progra	ams:				
	Check here 🕨 🔲 if the foundation only	makes contributions to	o preselected charitable	le organizations and do	es not accept			
	unsolicited requests for funds If the four	-	ants, etc , to individuals	or organizations unde	r other conditions,			
	complete items 2a, b, c, and d See instr							
а	The name, address, and telephone num	ber or email address o	the person to whom a	applications should be a	addressed			
	990APP							
b	The form in which applications should be	submitted and information	ation and materials the	y should include				
					<del></del>			
С	Any submission deadlines							
d	Any restrictions or limitations on awards,	such as by geographic	cal areas, charitable fie	elds, kinds of institution	s, or other			
	factors							

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POND FAMILY FOUNDATION

Part XV | Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
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					
a Paid during the year							
CONGRGATION BET HA'AM							
81 WESTBROOK STREET							
SOUTH PORTLAND, ME 04106		PC	GENERAL	2,000			
		-0		_,;;;			
CAPE ELIZ. CHURCH OF THE NAZARENE							
499 OCEAN HOUSE RD							
CAPE ELIZABETH, ME 04107		PC	GENERAL	2,000			
CAFE EHIZABEIN, ME 04107		FC	GENERAL	2,000			
CAPE ELIZ. UNITED METHODIST CHURCH							
280 OCEAN HOUSE RD							
		PC	GENERAL	2,000			
CAPE ELIZABETH, ME 04107		PC	GENERAL	2,000			
FIRST CONGREGATIONAL CHURCH, UCC							
301 COTTAGE RD				05 000			
SOUTH PORTLAND, ME 04107		PC	GENERAL	25,000			
DOUBLE DESCRIPTION OF THE PROPERTY OF THE							
BOWERY BEACH SCHOOL MAINTENANCE TRS							
1 WHEELER RD.							
CAPE ELIZABETH, ME 04107		PC	GENERAL	1,000			
MAINE BEHAVIORAL HEALTHCARE							
78 ATLANTIC PLACE							
SOUTH PORTLAND, ME 04106		PC	GENERAL	40,500			
MAINE MEDICAL CENTER							
22 BRAMHALL ST							
PORTLAND, ME 04101		PC	GENERAL	20,000			
MEADOWBROOK SCHOOL							
51 WEST ST							
FREEPORT, ME 04032		PC	GENERAL	2,500			
		<u> </u>	▶ 3a				
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·					
<b>b</b> Approved for future payment							
Total			▶ 3b				

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the	Year or Approved	for Future P	ayment	
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		
a Paid during the year				
CAMP KETCHA				
336 BLACK POINT ROAD				
SCARBOROUGH, ME 04074		PC	GENERAL	2,000
COLBY COLLEGE MUSEUM OF ART				
5600 MAYFLOWER HILL DRIVE				
WATERVILLE, ME 04901		PC	GENERAL	1,000
TAMBA GUT ALDUA EDUGAMANAT EDV				
LAMBDA CHI ALPHA EDUCATIONAL FDN				
11711 N. PENNSYLVANIA ST, STE 250		70	CD10071	6 000
CARMEL, IN 46032		PC	GENERAL	6,000
RONALD MCDONALD HOUSE				
250 BRACKETT ST				
PORTLAND, ME 04102		PC	GENERAL	1,500
PORTINGO, III 04202		10		1,500
MIDDLEBURY CONG. CHURCH				
1242 WHITTEMORE RD.	}			
MIDDLEBURY, CT 06762		PC	GENERAL	2,000
,				
PINE TREE LEGAL ASSTNCE				
88 FEDERAL STREET				
PORTLAND, ME 04101		PC	GENERAL	1,000
SHALOM HOUSE				
106 GILMAN ST				
PORTLAND, ME 04102		PC	GENERAL	1,000
COLUMN DODMINATE VIOLE GOVOOL				
SOUTH PORTLAND HIGH SCHOOL			DOLLANG BOD	
637 HIGHLAND AVE		DC.	DOLLARS FOR	500
SOUTH PORTLAND, ME 04106		PC	SCHOLARS	500
Total			▶ 3a	
b Approved for future payment				<del></del>
			ļ	
Total		L	▶ 3b	

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the	Year or Approved	d for Future P	ayment	
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		
a Paid during the year				
PORTLAND SYMPHONY ORCHESTRA				
50 MONUMENT WAY				
PORTLAND, ME 04101		PC	GENERAL	500
		10	GENERAL	
SOUTHERN MAINE HEALTH CARE AUXILIAR				
1 MEDICAL CENTER DRIVE				
BIDDEFORD, ME 04005		PC	GENERAL	1,000
BIDDEFORD, ME 04005		PC	GENERAL	1,000
ST ALBANS CHURCH				
885 SHORE RD				
CAPE ELIZABETH, ME 04107		PC	GENERAL	2,000
CAPE EDIDADEIN, ME 04107		PC	GENERAL	2,000
UNIV OF ARKANSAS				
1 UNIV OF ARKANSAS		1		
FAYETTEVILLE, AR 72701-9980		PC	GENERAL	25,000
111111111111111111111111111111111111111				
SIMPLE GIFTS				
P.O. BOX 2684				
SOUTH PORTLAND, ME 04116		PC	GENERAL	500
500111 TORTHER, 122 01210				
ST. FRANCIS XAVIER UNIVERSITY				
P.O BOX 5000				
ANTIGONISH Canada B2G 2W5		PC	GENERAL	25,000
THORNTON ACADEMY				
438 MAIN STREET				
SACO, ME 04072		PC	GENERAL	10,000
WAYSIDE FOOD PROGRAMS				
135 WALTON STREET				
PORTLAND, ME 04103		PC	GENERAL	1,000
	<u> </u>		<u> </u>	
Total			▶ 3a	<u> </u>
b Approved for future payment				
			i	
		i		
Total			<u>►</u> 3b	

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POND FAMILY FOUNDATION

Part XV Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the	Year or Approve	d for Future P	ayment	
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		
a Paid during the year				
ZERVAS ELEMENTARY SCHOOL PTO				
30 BEETHOVEN AVENUE				
WABAN, MA 02468		PC	GENERAL	1,000
92Y NURSERY SCHOOL		1		
1395 LEXINGTON AVENUE				
NEW YORK, NY 10128		PC	GENERAL	1,000
BOYS AND GIRLS CLUBS OF SOUTHERN ME				
277 CUMBERALND AVENUE		7.0		1 500
PORTLAND, ME 04101		PC	GENERAL	1,500
BUCKINGHAM, BROWNE & NICHOLS SCHOOL				
80 GERRYS LANDING ROAD				
CAMBRIDGE, MA 02138		PC	GENERAL	2,500
CARDKIDGE, FA 02130		10	GENERAL	2,300
CHEVERUS HIGH SCHOOL				
267 OCEAN AVENUE				
PORTLAND, ME 04103		PC	GENERAL	2,500
,				,
FAMILY HOPE			ļ :	
PO BOX 1385				
SCARBOROUGH, ME 04070-1385		PC	GENERAL	5,000
HABITAT FOR HUMANITY OF GRTR PRTLND				
659 WARREN AVE				
PORTLAND, ME 04103		PC	GENERAL	500
MAINE CANCER FOUNDATION				
170 US ROUTE 1, SUITE 250				2 222
FALMOUTH, ME 04105		PC	GENERAL	2,000
Total			▶ 3a	
b Approved for future payment				
Takal	<u> </u>	L		
_ Total · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · ·		▶ 3b	

Part XV Supplementary Information (continued)

Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
MCAULEY RESIDENCE				
68 HIGH STREET				
PORTLAND, ME 04101		PC	GENERAL	5,000
MILESTONE FOUNDATION	:			
65 INDIA STREET				
PORTLAND, ME 04101		PC	GENERAL	1,000
WAYFINDER SCHOOLS				
215 GLOUCESTER HILL ROAD				
NEW GLOUCESTER, ME 04260		PC	GENERAL	1,000
Total			▶ 3a	198,000
b Approved for future payment			Jan	198,000
· · · · · · · · · · · · · · · · · · ·				
Total			<b>▶</b> 3h	

EEA

Enter gross amounts unless otherwise indicates			ousiness income	Excluded by sec	ction 512, 513, or 514	(e)
4. December 2011		(a) usiness	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue a		code				
	<u> </u>		<del></del> .	-		
C				+		
d				<del> </del>		
e					· <del></del>	
f						
g Fees and contracts from government	t agencies · · ·					
3 Interest on savings and temporary cash	investments .					
4 Dividends and interest from securities				14	106,622	
5 Net rental income or (loss) from real esta	ate					
a Debt-financed property						
<b>b</b> Not debt-financed property			•			
6 Net rental income or (loss) from persona	al property · · ·					
7 Other investment income						
8 Gain or (loss) from sales of assets other	than inventory			18	279,348	
9 Net income or (loss) from special events	,					
O Gross profit or (loss) from sales of inven	ntory · · · ·					
1 Other revenue a						
b						
с						
d						
e						
2 Subtotal Add columns (b), (d), and (e)					385,970	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and	d (e) • • • • • • • • • • • • • • • • • • •					385,97
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to veri Part XVI-B Relationship of Ac	d (e)  fy calculations )  tivities to the Ac	compli	shment of Exc	empt Purpos	es 13	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to veri Part XVI-B Relationship of Ac  Explain below how each ac	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to verice Part XVI-B Relationship of Action No.  Explain below how each actionship.	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to verice Part XVI-B Relationship of Action No.  Explain below how each actionship.	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to veri Part XVI-B Relationship of Ac Explain below how each act	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es  uted importantly to the	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and see worksheet in line 13 instructions to verification.  Relationship of Ac Explain below how each act	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es  uted importantly to the	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to verice Part XVI-B Relationship of Action No.  Explain below how each actionship.	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es  uted importantly to the	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to verice Part XVI-B Relationship of Action No.  Explain below how each actionship.	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es  uted importantly to the	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to veri Part XVI-B Relationship of Ac Explain below how each act	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es  uted importantly to the	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to veri Part XVI-B Relationship of Ac Explain below how each act	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es  uted importantly to the	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to veri Part XVI-B Relationship of Ac Explain below how each act	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es  uted importantly to the	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to veri Part XVI-B Relationship of Ac Explain below how each act	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es  uted importantly to the	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to veri Part XVI-B Relationship of Ac Explain below how each act	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es  uted importantly to the	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to veri Part XVI-B Relationship of Ac Explain below how each act	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es  uted importantly to the	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and See worksheet in line 13 instructions to veri Part XVI-B Relationship of Ac Explain below how each act	d (e)	complis	shment of Exc I in column (e) of F	empt Purpos Part XVI-A contrib	es  uted importantly to the	

Form 99		Information		NDATION ers to and Transactions	and Rela	tionships V	Vith No		.13167 itable l			ige 13
		Organizatio	·									
<b>1</b> D	id the or	ganization dired	ctly or indirectly engage	in any of the following with ar	ny other orga	anızatıon desi	cribed				Yes	No
ın	section	501(c) (other th	nan section 501(c)(3) or	rganizations) or in section 527	7, relating to	political						
01	rganızatı	ons?										
a Tı	ransfers	from the report	ting foundation to a non	charitable exempt organization	n of							
										1a(1)		X
										1a(2)		X
•	•	sactions					• • • • •			14(2)		
			anaharitahla ayamat a	raanization						45/43		v
				rganization						1b(1)		X
				xempt organization · · ·						1b(2)		X
· -	-		• •	ts · · · · · · · · · · · · · · · · · · ·						1b(3)	_	X
			_	• • • • • • • • • • • • • • • • • • • •						1b(4)		X
		_		• • • • • • • • • • • • • • • • • • • •						1b(5)		X
(6	i) Perfoi	mance of servi	ces or membership or f	fundraising solicitations .						1b(6)		X
			_	er assets, or paid employees						1c		X
				lete the following schedule C								
				en by the reporting foundation								
_			or sharing arrangement	, show in column (d) the value								
(a) Line i	no (b) A	mount involved	(c) Name of nonch	aritable exempt organization	(d) Des	cription of trans	sfers, trans	sactions,	and sha	ring arra	ngeme	nts
						_						
		·										
		-							-			
	_			-								
	_											
					:							
2a Is	the four	ndation directly	or indirectly affiliated wi	th, or related to, one or more	tax-exempt	organizations	3					1
de	escribed	ın section 501(	(c) (other than section 5	i01(c)(3)) or in section 527?					• • •	Ye:	s <u>[X</u>	No
_ b If	"Yes," c	omplete the foll	owing schedule									
	(	a) Name of organ	nization	(b) Type of organizatio	n		(c) Des	cription o	of relation	nship		
			·									
-							-					
•												
	Under ne	enalties of necury 1	declare that I have examined	this return, including accompanying si	chedules and si	atements and to	the hest of	my knowl	edge and	helief it is	s true	
Sian	correct, a	and complete Declar	aration of preparer (other than	taxpayer) is based on all information	of which prepar	er has any knowl	edge	IIIy KIIOWII	edge and	beller, it is	s true,	
Sign	1	. Let		1 11/2/10					May the IR			
Here		un xx	pharan	( 4 30 18		ENT AND I	DIRECT		vith the pre See instruc			ow? □ No
	Sign	ature of officer or		Date /	Title	1	1					
D - ' '		Print/Type prepar	er's name	Preparers signature	1	Date		Check	ıf [ '	PTIN		
Paid		Michael J	Quinlan	1/1/4 / (V)		04-10-20	18	self-emple	oyed P	0135	<u> 511</u> 9	
Prepa	arer	Firm's name	▶ Jensen Baird	Gardner/& Henry			Firm's EIN	<b>&gt;</b>				
Use (		Firm's address	Ten Free Str	<del></del>			Phone no					
<del></del>	•y		Portland ME					207-	775-7	7271		

Federal Supporting Statements **2017** PG01 Name(s) as shown on return POND FAMILY FOUNDATION 20-1131673 FORM 990PF - PART III - LINE 3 STATEMENT #115 OTHER INCREASES SCHEDULE MISCELLANEOUS ADJUSTMENTS 2,497 TOTAL 2,497 PG01 FORM 990PF - PART II - LINE 10(B) STATEMENT #137 INVESTMENTS: CORPORATE STOCK SCHEDULE **CATEGORY** BOY BOOK VALUE EOY FMV HMPAYSON MANAGED ACCT. COM/OTH 2,306,160 2,614,509 5,297,218 2,306,160 2,614,509 5,297,218 TOTALS PG01 FORM 990PF - PART II - LINE 10(C) STATEMENT #138 INVESTMENTS: CORPORATE BOND SCHEDULE **CATEGORY** BOY BOOK VALUE EOY FMV 524,468 571,662 569,750 HM PAYSON MANAGED ACT 524,468 571,662 TOTALS 569,750

		Federal Su	Federal Supporting Statements	nents	7700
Name(s) as shown on return POND FAMILY FOUNDATION					<b>XOU</b> Social Security Number 20–1131673
	FORM 990P1	FORM 990PF - PART I - LINE 2:	- LINE 23 - OTHER EXPENSES SCHEDULE	ЭНЕРОТЕ	STATEMENT #103~
DESCRIPTION CORPORATE ANNUAL REPORT FEE	REVENUE AND EXPENSES 35	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE 0	
TOTALS	35	35	0	0	
	FORM 990PI	FORM 990PF - PART I - LINE 1	- LINE 16(A) - LEGAL FEES SCHEDULE	HEDULE	PG01 STATEMENT #107~
DESCRIPTION JENSEN BAIRD	REVENUE AND EXPENSES 1,734	NET INVESTMENT 1,734	ADJUSTED NET INCOME 0	CHARITABLE PURPOSE 0	
TOTALS	1,734	1,734	0	0	

		Federal St	Federal Supporting Statements	nents	2017	PG01
Name(s) as shown on return POND FAMILY FOUNDATION					Your Social S	Your Social Security Number 20-1131673
	FORM 990PF - PART I		- LINE 16(C) - OTHER PROFESSIONAL FEES SCHEDULE	FEES SCHEDULE	E	STATEMENT #109~
DESCRIPTION	REVENUE AND EXPENSES	NET	ADJUSTED NET INCOME	CHARITABLE PURPOSE		
HM PAYSON TOTALS	14,570	14,570	0	0		•
	PORM	900P - PART 1 - ITA	FORM 990PF - PART I - LINE 18 - MAXES SCHEDITE	<u> B</u>	Ex	PG01
						.011
DESCRIPTION IRS EXCISE TAX FOREIGN TAXES IRS ESTIMATED TAX PAYMENTS	REVENUE AND EXPENSES 0 612 228	NET INVESTMENT 0 612 228	ADJUSTED NET INCOME 0	CHARITABLE PURPOSE 0 0 0		
TOTALS	840	840	0	0		

# Federal Supporting Statements Name(s) as shown on return POND FAMILY FOUNDATION POND FAMILY FOUNDATION 2017 PG01 Your Social Security Number 20-1131673

# FORM 990PF - PART XV - LINE 2 APPLICATION SUBMISSION INFORMATION

# GRANT PROGRAM

GENERAL

# APPLICANT NAME

ANN ST. JOHN POND

### **ADDRESS**

3 CANTER LANE

CAPE ELIZABETH, ME 04107

#### TELEPHONE

207-767-4421

## EMAIL ADDRESS

NSTJOHN46@HOTMAIL.COM

#### FORM & CONTENT

THERE IS NO PRESCRIBED FORM IN WHICH THE APPLICATIONS SHOULD BE SUBMITTED. THE APPLICANT MUST SUBMIT MATERIALS REGARDING ITS IRS TAX EXEMPT STATUS AND EXPLAIN THE PURPOSE FOR THE REQUESTED GRANT.

# SUBMISSION DEADLINE

NO SUBMISSION DEADLINE

# RESTRICTIONS ON AWARD

THE FOUNDATION HAS LIMITED RESOURCES AND LIMITS GRANTS TO TAX EXEMPT ORGANIZATIONS WHICH QUALIFY AS PUBLIC CHARITIES.