# **Return of Private Foundation**

OMB No 1545-0052

DLN: 93491127003319

2018

Open to Public Inspection

Form 990-P	
Department of the Treasur	١.

Internal Revenue Service

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.
 Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

or	caler	ndar year 2018, or tax year beginning 01-01-2	018 , a	nd ending 12-31-	2018				
		indation RVEST FOUNDATION INC		A Employer id	entification numbe	er			
3 (	X C HAP	EVEST FOUNDATION INC		20-0443423					
		f street (or P O box number if mail is not delivered to street address NINGHAM ST	) Room/suite	<b>B</b> Telephone nu	mber (see instructio	ns)			
۷.	004 14 0	INGIIAN ST		(802) 462-2260	(802) 462-2260				
		, state or province, country, and ZIP or foreign postal code VT 05753		<b>C</b> If exemption	application is pendir	ng, check here			
i Ch	eck al	l that apply 🔲 Initial return 🔲 Initial return of a	former public charity	<b>D 1.</b> Foreign or	ganizations, check h	ere			
		$\Box$ Final return $\Box$ Amended return	ı		ganizations meeting				
		Address change Name change		·	k here and attach co	· -			
<b>I</b> Ch	eck ty	pe of organization $lacksquare$ Section 501(c)(3) exempt private	foundation		ındatıon status was n 507(b)(1)(A), che				
	Section	n 4947(a)(1) nonexempt charitable trust 🔲 Other taxab	le private foundation						
of '	year (f	xet value of all assets at end from Part II, col (c),  ▶\$ 6,305,971  J Accounting method  □ Other (specify) (Part I, column (d) must	Cash Accru		ation is in a 60-mont n 507(b)(1)(B), chec				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Devenue and			(d) Disbursements			
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b) Net investment income	(c) Adjusted net income	for charitable purposes			
		equal the amounts in column (a) (see instructions) )	books			(cash basis only)			
	1	Contributions, gifts, grants, etc , received (attach schedule)	309,200						
	_	´—	303,200						
	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch B							
	3	Interest on savings and temporary cash investments	208	3 208					
	4	Dividends and interest from securities	150,741	150,741					
	5a	Gross rents							
	b	Net rental income or (loss)	_						
Пе	6a	Net gain or (loss) from sale of assets not on line 10	264,899	P					
Revenue	b	Gross sales price for all assets on line 6a							
Ş	7	Capital gain net income (from Part IV, line 2)	4	264,899					
_	8	Net short-term capital gain		204,033					
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	b	Less Cost of goods sold							
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)	21,370	136					
	12	Total. Add lines 1 through 11	746,418	415,984					
	13	Compensation of officers, directors, trustees, etc	· ·	·					
	14	Other employee salaries and wages							
Ņ	15	Pension plans, employee benefits							
15E	16a	Legal fees (attach schedule)							
<u> </u>	ь	Accounting fees (attach schedule)	1,125	5 1,125					
Operating and Administrative Expenses	С	Other professional fees (attach schedule)							
II A G	17	Interest							
2	18	Taxes (attach schedule) (see instructions)	<b>9</b> 413	3 413					
Ê	19	Depreciation (attach schedule) and depletion							
Ē	20	Occupancy							
¥	21	Travel, conferences, and meetings							
	22	Printing and publications							
₹.	23	Other expenses (attach schedule)							
	24	Total operating and administrative expenses.							
<u>.</u>		Add lines 13 through 23	1,538	1,538					
5	25	Contributions, gifts, grants paid	320,006	5		320,006			
	26	Total expenses and disbursements. Add lines 24 and							
		25	321,544	1,538		320,006			
	27	Subtract line 26 from line 12							
	а	Excess of revenue over expenses and disbursements	424,874	1					
	ь	Net investment income (If negative, enter -0-)		414,446					
	С	Adjusted net income (if negative, enter -0-)							
or	Daner	work Reduction Act Notice, see instructions.		Cat No. 11390)	/ Fo	rm 000-DE (2019			

6,208,291

6,297,835

5,398

5,398

6,292,437

6,292,437

6,297,835

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5,961,865

6,305,971

89

89

6,305,882

6,305,882

6,305,971

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6,292,437

6,717,311

411,429

6,305,882 Form **990-PF** (2018)

424,874

5,961,865

6,305,971

	5
	6
	7
2	8
Assets	9
As	10a
	b
	С

11

12

13 14

15

16

17

18

19 20

21

22

23

24

25

28

29

31

Part III

2

3

4

Liabilities

Balances

Fund 26

ō

Assets 27

Net 30 Less allowance for doubtful accounts

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Accounts payable and accrued expenses .

Other assets (describe > \_

Other liabilities (describe -\_

Unrestricted . . . . .

Permanently restricted . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Temporarily restricted

Grants payable

Investments—U S and state government obligations (attach schedule)

Investments—corporate stock (attach schedule) . . . . . . . .

Investments—corporate bonds (attach schedule) . . . . . . .

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . .

Prepaid expenses and deferred charges . . . . . .

Investments—land, buildings, and equipment basis ▶ \_

Less accumulated depreciation (attach schedule) ▶

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds . . . . . . . . . .

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Capital Gallis	and Losses for Tax on Theese	inent income				
	e the kınd(s) of property sold (e g , irehouse, or common stock, 200 shs		<b>(b)</b> How acquire P—Purchas D—Donatio	e l Da	(c) ite acquired o , day, yr )	(d) Date sold (mo , day, yr )
1aSee Additional Data Table	e					
b						
С						
d						
e						
(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or d	g) other basis ense of sale		Gain o	h) r (loss) ) minus (g)
a See Additional Data Table	<u> </u>					, (3)
b						
С						
d						
	showing gain in column (h) and ow	ned by the foundation o	on 12/31/60			1\
Complete only for assets	(j)	<u> </u>	(k)			<b>l)</b> h) gain minus
<b>(i)</b> F M V as of 12/31/69	Adjusted basis as of 12/31/69	Excess	of col (ı) (j), ıf any	со	ıl (k), but not	less than -0-) <b>or</b> om col (h))
a See Additional Data Table	e					
b						
С						
d						
e						
·	gain or (loss) as defined in sections art I, line 8, column (c) (see instructions)		art Î, line 7	} 2		264,899
	Jnder Section 4940(e) for Re				•	
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	t investment ir	ncome )		
If section 4940(d)(2) applies, le	eave this part blank					
If "Yes," the foundation does no	e section 4942 tax on the distributa ot qualify under section 4940(e) Do	not complete this part	<u> </u>		Y	es 🗹 No
	nount in each column for each year,	see instructions before	making any er	ntries		
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	<b>(c)</b> Net value of noncharitabl	e-use assets	(col	(d) Distribution rat (b) divided by c	
2017	290,206		5,696,810			0 050942
2016	262,278		5,011,136			0 052339
2015	251,938		4,803,819			0 052445
2014	219,619		4,268,244			0 051454
2013	189,210		3,602,029			0 052529
2 Total of line 1, column (	d)			2		0 259709
number of years the four	ofor the 5-year base period—divide adation has been in existence if less	the total on line 2 by 5 than 5 years		3 4		0 051942
	ncharitable-use assets for 2018 fron	·	⊢			6,305,455
5 Multiply line 4 by line 3	(10) (5)		$\dots \mapsto \vdash$	5		327,518
	ent income (1% of Part I, line 27b)		$\cdots \cdots \vdash$	6		4,144
			$\cdot$ $\cdot$ $\cdot$ $\vdash$	7		331,662
	ons from Part XII, line 4 , eater than line 7, check the box in Pa		 plete that part	using a 1 <sup>c</sup>	% tax rate Se	320,006 e the Part VI
mon actions					Fr	orm <b>990-PF</b> (2018)

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1201	Statements Regard	uing	Activities for which	FORM 4720 May Be	Required (Continue	u)			
5a	During the year did the foundation	pay o	r incur any amount to					Yes	No
	(1) Carry on propaganda, or other	wise a	ttempt to influence legisl	ation (section 4945(e))?	☐ Yes	<b>✓</b> 1	No		
	(2) Influence the outcome of any s	pecifi	c public election (see sect	tion 4955), or to carry					
	on, directly or indirectly, any vo	oter re	egistration drive?		· · · Pes	<b>✓</b> 1	No		
	(3) Provide a grant to an individual	l for t	ravel, study, or other sım	ılar purposes?	☐ Yes	<b>✓</b> 1	No		
	(4) Provide a grant to an organizat in section 4945(d)(4)(A)? See i			· -		<b>✓</b> 1	.		
	(5) Provide for any purpose other t				· · L Yes		No		
	educational purposes, or for the	e prev	ention of cruelty to childi	ren or animals?		<b>✓</b> ,	.		
b	If any answer is "Yes" to 5a(1)-(5)	, dıd a	any of the transactions fa	all to qualify under the ex	cceptions described in	<b>Y</b>	No		
	Regulations section 53 4945 or in a		=				5b		
	Organizations relying on a current i								
c	If the answer is "Yes" to question 5	a(4),	does the foundation clain	n exemption from the		ш			
	tax because it maintained expendit			•	· · □	П.	.		
	If "Yes," attach the statement requi		· · · · · ·		· · L Yes	ш	No		
6a	Did the foundation, during the year	, rece	ive any funds, directly or	indirectly, to pay premi	ums on				
	a personal benefit contract?				· 🗆 🗆 vas	<b>✓</b> 1	Na		
b	Did the foundation, during the year	, pay	premiums, directly or inc	lirectly, on a personal be	nefit contract?		МО   6Ь		No
	If "Yes" to 6b, file Form 8870								
7a	At any time during the tax year, wa	s the	foundation a party to a p	prohibited tax shelter tra	nsaction?		.		
b	If yes, did the foundation receive a				∟ Yes	<b>V</b>	NO   7b		
8	Is the foundation subject to the sec		•						
	excess parachute payment during t								
	Information About				Yes		No —		
Pa	and Contractors	OIIIC	ers, Directors, Trust	ices, roundation ma	illagers, nighty Far	u EIII	pioyees	γ,	
1	List all officers, directors, truste	es fo	oundation managers ar	nd their compensation	See instructions				
	List all officers, all cetors, traste		<b>b)</b> Title, and average	(c) Compensation (If		<del>.</del> Т			
	(a) Name and address	`	hours per week	not paid, enter	employee benefit plans	and	(e) Expe	ense acc allowan	
			devoted to position	-0-)	deferred compensation	on			
See	Additional Data Table	_							
		-							
2	Compensation of five highest-pa	id en	nployees (other than t	hose included on line	1—see instructions). I	f non	e, enter	"NONE	. "
, ,	N		(b) Title, and average		(d) Contributions t				
(a)	Name and address of each employee more than \$50,000	paid	hours per week	(c) Compensation	employee benefit plans and deferred		(e) Expe	nse acci Ilowanc	
	more than \$50,000		devoted to position		compensation	•	Ochici e	o	.03
NON	 E								
	I mumahan af athan arradana a		0.000						
TOTA	I number of other employees paid ov	/er \$5	0,000		· · · · · •		F 01	10 55	/2012
							Form 99	7U-PF	(∠018

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Part VIII Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Highly I	Paid Employees,
3 Five highest-paid independent contractors for professional s	services (see instructions). If none, ente	er "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.		<u> </u>
Part IX-A Summary of Direct Charitable Activities	de velevent statistical information such as the number	of
List the foundation's four largest direct charitable activities during the tax year Inclu organizations and other beneficiaries served, conferences convened, research papers	s produced, etc	Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	A
Describe the two largest program-related investments made by the foundation du <b>1</b> N/A	uring the tax year on lines 1 and 2	Amount
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		. •
		Form <b>990-PF</b> (2018)

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

3a 3h

4

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320,006

320,006

Form 990-PF (2018)

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

the section 4940(e) reduction of tax in those years

4

5

Page 9

306.984

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0-PF	(2	018	)	
W II	_	-		_

**b** Total for prior years

From 2013. . . . .

**b** From 2014. . . . c From 2015. .

e From 2017. . . . .

d From 2016. . . .

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e. . . . . . . .

**d** Applied to 2018 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . . . f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 . . . . . 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 2013 not

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . .

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . .

d Excess from 2017. . .

e Excess from 2018. .

c Excess from 2016. . . .

**b** Excess from 2015. .

6 Enter the net total of each column as

indicated below:

4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$ a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election 

11.197 16,969

17.995

17.275 13,563

16.969 17,995

17.275

13.563

13.022

Form 990-PF (20	018)
Part XIII	Und

Form 990-PF (2	018)
Part XIII	Undi

- istributed Income (see instructions) (a) (b) (c)
- (d)
- Years prior to 2017 2017 2018 Corpus

76.999

13.022

90,021

11.197

- 1 Distributable amount for 2018 from Part XI, line 7
- 306,984 2 Undistributed income, if any, as of the end of 2018
- a Enter amount for 2017 only. . . . . .

factors



ter gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	( <b>d)</b> Amount	function income (See instructions )
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments					208
Dividends and interest from securities					150,741
Net rental income or (loss) from real estate					
a Debt-financed property					
<b>b</b> Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than					
inventory					264,899
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
a RENTAL					10
<b>b</b> OTHER					126
c WILLIAMS PTRS					22,692
d SPECTRA ENERGY					16,071
e PARTNERSHIP HOLDINGS					-17,529
e PARTNERSHIP HOLDINGS 2 Subtotal Add columns (b), (d), and (e)					-17,529 437,218
Subtotal Add columns (b), (d), and (e)			13		-17,529 437,218 437,218
2 Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions to verify calci	ulations )			3	437,218
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)	ulations )			3	437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second section of the second section of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation the foun	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculart XVI-B  Relationship of Activities to the second se	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
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Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second section of the section of the section of the second section of the secti	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second section of the section of the section of the second section of the secti	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculart XVI-B  Relationship of Activities to the second section of the section of the second section of the section of the second section of the secti	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second se	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate XVI-B  Relationship of Activities to the second se	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate XVI-B  Relationship of Activities to the second se	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate XVI-B  Relationship of Activities to the second se	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second se	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculate XVI-B  Relationship of Activities to the second se	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculated the No.  Explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation the foundat	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculated the No.  Explain below how each activity for which the accomplishment of the foundation's explain below the foundation's explain below the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation the foundation's explain the foundation the founda	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculant XVI-B  Relationship of Activities to the second se	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218
Subtotal Add columns (b), (d), and (e).  Total. Add line 12, columns (b), (d), and (e).  (See worksheet in line 13 instructions to verify calculart XVI-B  Relationship of Activities to the second section of the foundation of the	ulations ) he Accomplish i income is reporte	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	437,218 437,218

. ,	
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable
1111	Exempt Organizations

4.	r VATT	Exempt Organia	zations							
<b>1</b> D	d the or	ganization directly or in than section 501(c)(3)	dırectly engage					501	Yes	No
a Tr	ansfers	from the reporting foun								
(1	L) Cash			1a(1)		No				
(2	2) Other	rassets						. 1a(2)		No
<b>b</b> 0	ther tran	isactions								
(1	<b>L)</b> Sales	of assets to a nonchari	table exempt o	rganızatıon.				. 1b(1)		No
-	-	nases of assets from a n						. 1b(2)		No
-	-	al of facilities, equipmer						. 1b(3)		No
		bursement arrangemen						1b(4)		No
•	•	s or loan guarantees.						. 1b(5)		No
•	•	mance of services or m		-				1b(6)		No
	-	facilities, equipment, n	-	-				1c		No
of ın	the goo	wer to any of the above ds, other assets, or sernsaction or sharing arra  (b) Amount involved	vices given by t ngement, show	he reporting in column (c	foundation If the	foundation receive goods, other asse	ed less than fair marke	et value ed	ngemen	ts
		`,	, ,							
		ndation directly or indire					_	<b>□</b>		
		ın section 501(c) (other		01(c)(3)) or i	in section 527? .		ШYes	✓ No		
b If	"Yes," c	omplete the following so		1 4	L X T 6	1	(-) D	£		
		(a) Name of organization	on	(1	<b>b)</b> Type of organization	on	(c) Description o	r relationship		
-	of m	er penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, corre							
Sig: Her		*****			2019-05-07	*****		May the IRS di return with the prepa		
	<b> </b>	Signature of officer or to	rustee		Date	Title		below (see instr )? [	Yes	□ No
		Print/Type preparer's	name Pr	reparer's Sıgr	nature	Date	Check if self-	TIN DO1 202	246	
Paid		STEVEN M MISASI	СРА			2019-05-03	employed ▶ 🔲	P01283	,340	
	parer Only		BLE TRAIL FINA	NCIAL		•	Fil	rm's EIN ▶81	-15249	23
			BOX 30							
		MI	MIDDLEBURY, VT 057530030						) 388-6	5300

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) How acquired (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation VANGUARD ST COVERED Р 2018-10-02 2018-05-23 VANGUARD LT COVERED Ρ 2015-01-01 2018-07-01 BANK OF AMERICA Р 2015-01-01 2018-10-02 DEERE & CO Ρ 2009-01-28 2018-10-03 JOHNSON & JOHNSON Ρ 2015-01-01 2018-12-17 Р PROCTOR & GAMBLE 2007-07-20 2018-10-02 Р SPECTRA ENERGY PTRS 2015-01-01 2018-12-18 Р WILLIAMS PARTNERS 2015-01-01 2018-08-13 Ρ SPECTRA ENERGY ADJ 2015-01-01 2018-12-18 WILLIAMS PATS ADJ Р 2018-08-13 2015-01-01 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 257 244 13 267,851 330,318 62,467 14,747 16,581 -1,83431,440 7,554 23,886 140,582 64,848 75,734 12,479 4,374 16,853 35,496 31,567 3,929 47,494 54,131 -6,637 14,949 14,949 15,646 15,646 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 13 62,467 -1,83423,886 75,734 4,374 3,929 -6,637 14,949 15,646

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week Contributions to (e) other allowances not paid, enter (b) devoted to position -0-) employee benefit plans and deferred compensation CHARLES W GRIGG PRESIDENT 000 00 2504 N BINGHAM ST CORNWALL, VT 05753 SUSAN K GRIGG VP/SECY/TREA 000 00 2504 N BINGHAM ST SALLY G OLMSTED TRUSTEE ٥ ٥ 000 00 167 FOWLER RD ADAMONT, VT 05640

CORNWALL, VT 05753				
DONALD W GRIGG	TRUSTEE	0	0	(
5208 PINEY HOLLOW CT DURHAM, NC 27705	1 000 00			

TRUSTEE 000 00

LAURIE D GRIGG

1051 JACK HILL RD E CALAIS, VT 05650

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
ADDISON COUNTY PARENT CHILD PO BOX 646	NONE	501C3	GENERAL FUNDS	15,000

MIDDLEBURY, VT 05753			
BLACKNALL MEMORIAL1902 PERRY ST	NONE	501C3	OPERATIONS

Total .

BLACKNALL MEMORIAL1902 PERRY ST	NONE	501C3	OPERATIONS	10
DURHAM, NC 27703				
,				1
				1

BLACKNALL MEMORIAL1902 PERRY ST DURHAM, NC 27703	NONE	501C3	OPERATIONS	10,000
BUCKNELL UNIVERSITYLEWISBURG	NONE	501 C3	SUPPORT EDUCATION	3 000

DURHAM, NC 27/03				
BUCKNELL UNIVERSITYLEWISBURG	NONE	501 C3	SUPPORT EDUCATION	3,00

BUCKNELL UNIVERSITYLEWISBURG LEWISBURG, PA 17837	NONE	501 C3	SUPPORT EDUCATION	3,000

SUCKINELL DIVIVERSITTLEWISBURG	NONE	DUT C3	SUPPORT EDUCATION	
EWISBURG, PA 17837				

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CAPSTONE COMMUNITY ACTION NONE 501C3 GENERAL 10,000 20 GARLE PLACE

BARRE, VT 05641				
CVUSSMIDDLEBURY MIDDLEBURY, VT 05753	NONE	501C3	OPERATIONS	25,000
DOCTORS WITHOUT BORDERS	NONE	501C 3	PROVIDE MEDICAL HELP FOR	1,000

Total			▶ 3a	320,006
DOCTORS WITHOUT BORDERS NEW YORK NEW YORK, NY 10001	NONE	501C 3	PROVIDE MEDICAL HELP FOR NEEDY	1,000
MIDDLEBURY, VI 05/53				

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
DUKE UNIVERSITYBOX 90581 DURHAM, NC 27701	NONE	501C3	SUPPORT EDUCATION	3,000

URHAM, NC 27701			
URHAM TECHNICAL COLLEGE	NONE	501C3	OPERATIONS

Total .

DURHAM TECHNICAL COLLEGE	NONE	501C3	OPERATIONS	3,000
1637 LAWSON ST				
DURHAM, NC 27703				

1637 LAWSON ST DURHAM, NC 27703				
ELDER SERVICESMIDDLEBURY	NONE	501C3	OPERATIONS	15,000

DURHAM, NC 27703				
ELDER SERVICESMIDDLEBURY	NONE	501C3	OPERATIONS	15,000

201111111111111111111111111111111111111				
ELDER SERVICESMIDDLEBURY	NONE	501C3	OPERATIONS	15,000
MIDDLEBURY, VT 05753				-

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

any foundation manager

or substantial contributor

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
EMILY K CENTER904 WEST CHAPEL ST DURHAM, NC 27701	NONE	501C3	GENERAL FUNDS	4,000
FAMILY CENTER OF WASHINGTON	NONE	501C3	GENERAL FUNDS	10,000

recipient

FAMILY CENTER OF WASHINGTON COUNTY 383 SHERIDAN DR MONTPELIER, VT 05602	NONE	501C3	GENERAL FUNDS	
CIDLS & BOYS FIRST MENTORING	NONE	E01C2	CENERAL	

383 SHERIDAN DR MONTPELIER, VT 05602				
GIRLS & BOYS FIRST MENTORING 73 MAIN ST	NONE	501C3	GENERAL	8,0

MONTPELIER, VT 05602				
GIRLS & BOYS FIRST MENTORING 73 MAIN ST MONTPELIER, VT 05602	NONE	501C3	GENERAL	8,000

HOIVIT ELIEN, VI 03002				
GIRLS & BOYS FIRST MENTORING 73 MAIN ST MONTPELIER, VT 05602	NONE	501C3	GENERAL	8,000
Total			▶ 3a	320,006

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

GOLDEN DOOR SCHOLARS 1101 521 CORPORATE CTR FORT MILLS, SC 29707	NONE	501C3	GENERAL FUNDS	6,000
HABITAT FOR HUMANITYMIDDLEBURY	NONE	501C 3	BUILD AFFORDABLE HOUSING	5,000

HABITAT FOR HUMANITYMIDDLEBURY MIDDLEBURY, VT 05753	NONE	501C 3	BUILD AFFORDABLE HOUSING	5
HAITI OUTREACH MINISTRIESSUMMER	NONE	501 C3	HELP REBUILD HOMES IN HAITI	2

Total . . . .

MIDDLEBURY, VT 05753				
HAITI OUTREACH MINISTRIESSUMMER SUMMER, ME 04292	NONE	501 C3	HELP REBUILD HOMES IN HAITI	2,000

·				1
HAITI OUTREACH MINISTRIESSUMMER SUMMER, ME 04292	NONE	501 C3	HELP REBUILD HOMES IN HAITI	2,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

Name and address (home or business)

recipient

	or substantial contributor			
a Paid during the year				
HOUSING FOR NEW HOPE 18 WEST COLONY PL DURHAM, NC 27705	NONE	501C3	GENERAL FUNDS	2,000

DORHAM, NC 27703				
HUNGER FREE VT38 EASTWOOD DR SO BURLINGTON, VT 05403	NONE	501C3	CHILDRENS NUTRITION	5,000
INSTITUTE FOR SUSTAINABLE COMMUNITI	NONE	501C3	GENERAL	10,000

SO BURLINGTON, VT 05403	NONE	501C3	CHILDRENS NOTRITION	3,000
INSTITUTE FOR SUSTAINABLE COMMUNITI 535 STONE CUTTERS WAY MONTPELIER, VT 05602	NONE	501C3	GENERAL	10,000
Total			▶ 3a	320,006

BURLINGTON, VT 05403				,
TITUTE FOR SUSTAINABLE IMUNITI STONE CUTTERS WAY NTPELIER, VT 05602	NONE	501C3	GENERAL	10,

Purpose of grant or Recipient If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MOTHERS & CHILDRENPO BOX 14469 NONE 501C3 OPERATING FUNDS 2,000 RALFIGH, NC 27620

TOTAL ETGIT, THE ETGES				
OPERA COMPANY OF MIDDLEBURY MIDDLEBURY MIDDLEBURY, VT 05753	NONE	501C3	GENERAL	2,000
PENNYWISE FOUNDATION	NONE	501C3	GENERAL	8,000

MIDDLEBURY, VT 05753				
PENNYWISE FOUNDATION 25 OLD PLUMB RD ESSEX JUNCTION, VT 05452	NONE	501C3	GENERAL	8,000
Total			▶ 3a	320,006

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
UNIVERSITY OF VT MEDICALPORTER DR MIDDLEBURY, VT 05753	NONE	501C3	GENERAL FUNDS	10,000

IIDDLEBURY, VI 05/53			
OPULATION MEDIA CENTER O BOX 547	NONE	501C3	OPERATING FUNDS

POPULATION MEDIA CENTER	NONE	501C3	OPERATING FUNDS	3
PO BOX 547				
SHELBURNE, VT 05482				

SHELBURNE, VT 05482				
REALITY MINISTRIESDURHAM	NONE	501 C3	PROVIDE AID FOR NEEDY	2,00

SHELBURNE, VI US482				
REALITY MINISTRIESDURHAM DURHAM, NC 27701	NONE	501 C3	PROVIDE AID FOR NEEDY	2,000

<u> </u>				
REALITY MINISTRIESDURHAM DURHAM, NC 27701	NONE	501 C3	PROVIDE AID FOR NEEDY	2,000

DURHAM, NC 27701	NONE	301 03	THOUSE MEST ON NEEDT	2,00
Total			▶ 3a	320,006

Purpose of grant or Recipient If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year STEP UP DURHAM1307 W KNOX ST NONE 501C3 OPERATING FUNDS 3,000

THROUGH PARTNERSHIP HOLDINGS VARIOUS CORNWALL, VT 05753	NONE	501C3	OPERATING EXPENSES	6
DURHAM, NC 27705				

CONNVALL, VI 03733				
TOWN HALL THEATRE 68 SOUTH PLESANT ST MIDDLEBURY, VT 05753	NONE	501C3	GENERAL FUNDS	16,000
Total			▶ 3a	320,006

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
TRIANGLE LAND CONSERVANCY RALEIGH	NONE	501 C3	SUPPORT CONSERVATION PROJECTS	1,000

RALEIGH, NC 27601				
TRINITY SCHOOLDURHAM DURHAM, NC 27701	NONE	501 C3	SUPPORT EDUCATION	12,000

TRINITY SCHOOLDURHAM DURHAM, NC 27701	NONE	501 C3	SUPPORT EDUCATION	12,000
TURNING POINT CENTER 465 MAIN ST	NONE	501C3	OPERATIONS	8 000

DURHAM, NC 27701				
TURNING POINT CENTER465 MAIN ST BENNINGTON, VT 05201	NONE	501C3	OPERATIONS	8,000

TURNING POINT CENTER465 MAIN ST NONE 501C3 OPERATIONS BENNINGTON, VT 05201	8,0
--	-----

BENNINGTON, VI 05201		
Total	 ▶ 3a	320,006

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UNION OF CONCERNED SCIENTISTS NONE 501C3 OPERATING FUNDS 5,000 2 BRATTELE SO

CAMBRIDGE, MA 02138				
UNITED WAYCOURT ST MIDDLEBURY, VT 05753	NONE	501C3	OPERATING FUNDS	5,000
VERMONT HORSE-ASSISTED THERAPY 307 CULVER HILL RD	NONE	501C3	GENERAL FUNDS	7,000

320,006

▶ 3a

MIDDLESEX, VT 05602

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
VERMONT WORKS FOR WOMEN 22A MALLETS BAY AVE	NONE	501C3	GENERAL	3,000

/T LAND TRUSTMONTPELIER	NONE	501 C3	SUPPORT CONSERVATION	
22A MALLETS BAY AVE WINOOSKI, VT 05404				

,			
/T LAND TRUSTMONTPELIER 4ONTPELIER, VT 05633	NONE	501 C3	SUPPORT CONSERVATION PROJECTS

VT LAND TRUSTMONTPELIER MONTPELIER, VT 05633	NONE	501 C3	SUPPORT CONSERVATION PROJECTS	3,000
VT PUBLIC PADIOBURLINGTON	NONE	501 C3	SUPPORT PUBLIC RADIO	25,000

MONTPELIER, VI 05633			PROJECTS	
VT PUBLIC RADIOBURLINGTON BURLINGTON VT 05401	NONE	501 C3	SUPPORT PUBLIC RADIO	25,000

VT PUBLIC RADIOBURLINGTON	NONE	501 C3	SUPPORT PUBLIC RADIO	25,0
BURLINGTON, VT 05401				

VI FUBLIC RADIOBORLING ON	INONE	1 201 62	30FFORT FUBLIC RADIO	23
BURLINGTON, VT 05401				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
WOMENSAFEPO BOX 67 MIDDLEBURY, VT 05753	NONE	501C3	CAPITAL CAMPAIGN	10,000

DDLEBURY, VT 05753			
NNAHS HOUSE INC 9 OLD COUNTRY RD	NONE	501C3	GENERAL

Total .

HANNAHS HOUSE INC 859 OLD COUNTRY RD	NONE	501C3	GENERAL	5
WAITSFIELD, VT 05673				

HANNAHS HOUSE INC 859 OLD COUNTRY RD WAITSFIELD, VT 05673	NONE	501C3	GENERAL	5,000
DEFLICEE AID DROIECTRO BOY 6068	NONE	50103	CENEDAL	5 000

WAITSFIELD, VT 05673				
REFUGEE AID PROJECTPO BOX 6068	NONE	501C3	GENERAL	5,
ALDEDT LEA MAN ECOOT			l .	

WAITSTILLD, VT 03073				
REFUGEE AID PROJECTPO BOX 6068 ALBERT LEA, MN 56007	NONE	501C3	GENERAL	5,000

•				
REFUGEE AID PROJECTPO BOX 6068	NONE	501C3	GENERAL	5
ALBERT LEA, MN 56007				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or husiness)

Total .

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
CHARTER HOUSE 27 NORTH PLEASANT ST MIDDLEBURY, VT 05753	NONE	501C3	GENERAL	20,000

THE CARTER CENTER 453 FREEDOM PKWAY ATLANTA, GA 30307	NONE	501C3	GENERAL	1,000
VERMONT BURLIC TV	NONE	E01C3	CENERAL	1 000

453 FREEDOM PKWAY ATLANTA, GA 30307				
VERMONT PUBLIC TV 105 WEST VIEW RD COLCHESTER, VT 05446	NONE	501C3	GENERAL	1,000

Recipient

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor

| Purpose of grant or contribution recipient | Contribution | Contr

a Paid during the year				
OPEN DOOR CLINIC100 PORTER DR MIDDLEBURY, VT 05753	NONE	501C3	GENERAL	1,000
OLD WEST CHURCH ASSOCPO BOX 73 CALAIS, VT 05648	NONE	501C3	GENERAL	10,000
PLANNED PARENTHOOD FEDERATION	NONE	501C3	GENERAL	5.000

CALAIS, VT 05648	NONE	30103	SEITERVIE	10,000
PLANNED PARENTHOOD FEDERATION OF AM 123 WILLIAM ST NEW YORK, NY 10038	NONE	501C3	GENERAL	5,000
Total			▶ 3a	320,006

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor Devel division - Marchine

a Paid during the year				
WYCF PILOT HILL FUND1472 N 5TH ST LARAMIE, WY 82072	NONE	501C3	GENERAL	5,000

320,006

IKAPIL, WI 02072			
MPBELL UNIVERSITYPO BOX 97	NONE	501C3	GENERAL
JIES CREEK, NC 27506			

LAKAPIL, WI 02072				
CAMPBELL UNIVERSITYPO BOX 97	NONE	501C3	GENERAL	5,000
BUIES CREEK, NC 27506				

efile GRAPHIC print - DO NOT P	ROCESS As Filed I	Data -	D	LN: 93491127003319	
TY 2018 Accounting Fe	es Schedule	_			
_					
Name: S & C HARVEST FOUNDATION INC EIN: 20-0443423					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
TAX PREPARATION	1,125	1,125			

enie GRAPHIC PHIIL - DO NOT PROCESS	AS Fileu Data -	DLN. 9349112/003319
TY 2018 Investments Corpora	te Stock Schedule	
·		
Name:	S & C HARVEST FOUNDATION	INC

**EIN:** 20-0443423 Investments Corneration Stock Schedule

Investments Corporation Stock Schedule				
Name of Stock	C	End of Year Book Value	End M	
VARIOUS SECURITIES		5,961,865		

nd of Year Fair

Market Value

5,961,865

DI N. 93491127003319

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efile GRAPHIC print - DO NOT PROCESS	DLN: 93491127003319
TY 2018 Other Decreases Schedule	
Name: S & C HARVEST FOUNDATION INC	
<b>EIN:</b> 20-0443423	
Description	Amount
2018 FEDERAL EXCISE TAX	8,289
2018 FEDERAL EXCISE TAX UNREALIZED LOSS ON INVESTMENTS	8,289 379,390

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491127003319	
TY 2018 Other Expenses Schedule					
Name:	S & C HARVEST	FOUNDATION IN	IC		
EIN:	20-0443423				
Other Expenses Schedule				·	
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
EXPENSES					
CHARITY WATCH					
CONT FROM PASS PTP'S					
SUPPLIES					

erile GRAPHIC	<u>print - DO NOI</u>	PROCESS .	AS FIIEU Data -	DLN: 9349112/003319
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	_			

### TY 2018 Other Income Schedule

Name: S & C HARVEST FOUNDATION INC

**EIN:** 20-0443423

Other Income Schedule					
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		
RENTAL	10	10			
OTHER	126	126			
WILLIAMS PTRS	22,692				
SPECTRA ENERGY	16,071				
PARTNERSHIP HOLDINGS	-17.529				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DI	N: 93491127003319	
TY 2018 Other Liabilities Schedule					
Name:	S & C HARVES	ST FOUNDATI	ON INC		
EIN:	20-0443423				
Description	n		Beginning of Year - Book Value	End of Year - Book Value	
FEDERAL EXCISE TAX PAYABLE			5,398	89	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491127003319		
TY 2018 Taxes Schedule						
	: S & C HARVI : 20-0443423	EST FOUNDATION	INC			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
Category  FOREIGN TAXES PAID PTP'S	Amount 57		_	for Charitable		

efile GRAPHIC print - DO	NOT PROCESS As Filed Data	1 -		DLN: 93491127003319
Schedule B	Sche	dule of Contributors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		n to Form 990, 990-EZ, or 990-PF s gov/Form990 for the latest inform	nation	2018
Name of the organizatio S & C HARVEST FOUNDATI			Employer id	dentification number
Organization type (chec	(one)		20-0443423	
	,			
Filers of:	Section:			
Form 990 or 990-EZ	☐ 501(c)( ) (enter number	r) organization		
	☐ 4947(a)(1) nonexempt ch	haritable trust <b>not</b> treated as a p	rivate foundation	
	☐ 527 political organization	n		
Form 990-PF	☑ 501(c)(3) exempt private	foundation		
	☐ 4947(a)(1) nonexempt ch	haritable trust treated as a priva	te foundation	
	501(c)(3) taxable private	foundation		
	on filing Form 990, 990-EZ, or 99 property) from any one contributor			
Special Rules				
under sections 50 received from any	n described in section 501(c)(3) fi 9(a)(1) and 170(b)(1)(A)(vi), that c one contributor, during the year, t 1h, or (ii) Form 990-EZ, line 1 Co	checked Schedule A (Form 990 total contributions of the greater	or 990-EZ), Part II, line 13,	, 16a, or 16b, and that
during the year, to	n described in section 501(c)(7), (tal contributions of more than \$1,0 e prevention of cruelty to children	000 exclusively for religious, cha	aritable, scientific, literary, o	
during the year, c If this box is chec purpose Don't co	n described in section 501(c)(7), (ontributions exclusively for religioused, enter here the total contribution mplete any of the parts unless the e, etc., contributions totaling \$5,00	us, charitable, etc., purposes, but ons that were received during the <b>General Rule</b> applies to this or	t no such contributions tota e year for an <i>exclusively</i> re ganization because it rece	aled more than \$1,000 eligious, charitable, etc , elived <i>nonexclusively</i>
990-EZ, or 990-PF), but i	that isn't covered by the General i must answer "No" on Part IV, line m 990PF, Part I, line 2, to certify t	e 2, of its Form 990, or check th	e box on line H of its	
For Paperwork Reduction Action Form 990, 990-EZ, or 990	t Notice, see the Instructions PF	Cat No 30613X	Schedule B (Form 990	D, 990-EZ, or 990-PF) (2018)

Name of organization

**Employer identification number** 

S & C HARVEST FOL	JNDATION INC	20-0443423	
Part I	Contributors (See instructions) Use duplicate copies of Part I if add	itional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GRIGG FAMILY CHARITABLE LEAD TRUST 2504 N BINGHAM ST  CORNWALL, VT 05753	\$ 66,484	Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CHARLES W SUSAN GRIGG 2504 N BINGHAM ST  CORNWALL, VT 05753	\$ 82,987	Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	GRIGG FAMILY LEAD TRUST 2011 2504 N BINGHAM ST  CORNWALL, VT 05753	\$ 50,247	Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	GRIGG FAMILY CHARITABLE LEAD TR 201 2504 N BINGHAM ST  CORNWALL, VT 05753	\$ 50,311	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	GRIGG 2015 CHARITABLE LEAD TRUST 2504 N BIGNHAM ST  CORNWALL, VT 05753	\$ 59,171	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-			Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization S & C HARVEST FOUNDATION INC

Part II

number

20-0443423 Noncash Property (See Instructions) Use duplicate copies of Part II if additional space is needed (c) (b) (d)

(a) FMV (or estimate) No. from Description of noncash property given Date received Part I (See instructions) See Additional Data Table \$ (c) (a) (b) (d) FMV (or estimate) No. from Description of noncash property given Date received Part I (See instructions) (a) (c) (b) (d) No. from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) \$ (a) (c) (b) (d) No. from FMV (or estimate) Description of noncash property given Date received Part I (See instructions)

(a) (c) (d) (b) No. from FMV (or estimate) Date received Description of noncash property given Part I (See instructions) \$ (c) (a) (b) (d) FMV (or estimate) No. from Description of noncash property given Date received Part I (See instructions)

\$ Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

## **Additional Data**

### Software ID:

**Software Version:** 

**EIN:** 20-0443423

Name: S & C HARVEST FOUNDATION INC

Form 990 Schedule B. Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u>1</u>	100 SHS NEXTERA	\$ 17,68 <u>3</u>	2018-11-26
<u>3</u>	100 GENUINE PART CO	<u> </u>	2018-11-26
<u>5</u>	200 SHS HONEYWELL	\$ 28,661	2018-11-26
<u>1</u>	100 SHS UNION PACIFIC	<u>\$ 14,338</u>	2018-11-26
<u>3</u>	100 UNION PACIFIC	<u>\$ 14,338</u>	2018-11-26
<u>5</u>	200 WALT DISNEY	\$ 22,510	2018-11-26
<u>1</u>	100 SHS BOEING	<u> </u>	2018-11-26
<u>4</u>	200 CSX CORP	\$ 14,122	2018-11-26
<u>2</u>	500 SHS ASML HOLDING	\$ 82,987	2018-11-26
<u>4</u>	198 EVERGY INC	\$ 11,693	2018-11-26

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (c) (a) (d) (b) FMV (or estimate) No. from Part I Description of noncash property given Date received (See instructions) 70 SHS ASML HOLDINGS \$ 11,618 2018-11-26 300 COCA COLA 2018-11-26 \$ 14,685 100 ATMOS ENERGY \$ 9,732 2018-11-26 200 MODELEZ INTL \$8,811 2018-11-26