Internal Revenue Service

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

OMB No 1545-0052

2018 Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990PF for instructions and the latest information. Open to Public Inspection For calendar year 2018 or tax year beginning , 2018, and ending

Name of foundation					A Employer identification number									
POND FAMILY FOUNDATION					20-1131673									
Ξ'n	umber a	and street (or PO box n	un	nber if mail is not d	elivered	to stree	et address)		R	oom/suite	B Telephone number (see instructions)			
200	<u>/о</u> к	IRK POND TREAS	S	3 CANTER L	ANE						(207)7	67-4421		1
		wn, state or province, co				tal code					C If exemption application is pending, check here			
C C	APE :	ELIZABETH, ME	۰ ٥	4107							l a cxcp.	ion application to perforing	oneon n	··· (
S-C		all that apply		Initial return			Initial return	of a former public of	hari	ty	D 1. Foreig	n organizations, check he	re · ·	▶□
MA				Final return		П	Amended re	turn		-	2 50000	a escapizatione most so the	950/ 4	
_				Address chang	qė	П	Name chan	ge		- 1		n organizations meeting there and attach computate		
HK	Check	type of organization		X Se	ection 5	01(c)(3		ate foundation	7	11	ĺ	·		
12	ב	ion 4947(a)(1) nonexe	em	_		, ,,		taxable private foun	datu			foundation status was terr 07(b)(1)(A), check here		
12		arket value of all asset	_			countir	ng method	X Cash	$\neg \neg$	Accrual	i	(// // /·		
1		year (from Part II, col					(specify)	<u> </u>			1	ndation is in a 60-month te ction 507(b)(1)(B), check h		
10	ار (16) (ne			,614,513	(Part	•		e on cash basis)						
	rt'l	, , , , , , , , , , , , , , , , , , , 										<u> </u>	(d) D:	churcomonto
<u> </u>	100	amounts in columns (•	•		(a) Revenue and expenses per	į	(b) Net	nvestment	(c) Adjusted net	for	sbursements charitable
		the amounts in colum				555, 5	, qua.	books		i in	come	income		urposes h basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)						و محمور شي الجنائية	man managaran		****************************	The control of the co				
_	2	Check ► X if the						Total and the second se	7, 1	Total Control of the St.	er er statet state Linguistatet state	The second control of the control of	10-4-128 10-4-128	aman in reprint de print de De projektor diname
2	3	Interest on savings a						August 15 6 2 7 1 - 1 2 2 2 2	" - پخو ما	= ~ ***	- '#\$ + "J' <u>*</u> * * *	Transit - 1 - marker 1 - 1 - marker 1/2/2-		artinakarak Kutankarak
/_	4							105			105 104		A 35 3	
11		Dividends and intere	:51	from securities	• • •			105,	134		105,134	1 RECO	\$75,5 1_1 \$75,5 1	50 1 2 2 0 7 2 4 7 4 7 5 1 10 1 2 2 0 7 7 0 - 8 1 4 1 4
Υ	5a	Gross rents · · ·	•						"J"	Charles Tilberth		O CONTRACTOR		singin nanifest and all
1	b	Net rental income or	•	· ———		40		1 1 1 1 1 1 1		* more 7. Kim 's		0/- Ap		
ne	6a	Net gain or (loss) fro			ot on III			(52,	319)		Later and Later	4 - 4 - 4	72.2
ē	-0	Gross sales price for all assets on line 6a 364,198			**************************************	Ö.	ingerie vertiere	The state of the s		7/9	(9)			
Revenue	′	Capital gain net income (from Part IV, line 2)					-,=-	an specific		UGA:	\$ Y 35' 1	9/		
	8	Net short-term capital gain				The second of th	<u></u>	BUT ENTER OF THE	PAGENT-HEL-E- RE-LUCKER KEN	OF W	> VQ	0 /		
	9	Income modifications				(4) (4)	States and	**************************************	William Artifecture and the	7 · · · · · · · · · · · · · · · · · · ·	1			
	10a					THE THE PARTY THE	SIF SIFE	A TOTAL STATE	รั±ร์า แก้ ใช้เพื่อใช้ เปราสาที่เอาไทย	The walk of the transfer of the state of the		7 * * * * * * * * * * * * * * * * * * *		
	Ь	Less Cost of goods							<u> </u>	THE CONTRACTOR OF THE PROPERTY			· · · · · · · · · · · · · · · · · · ·	<u> </u>
	С.	Gross profit or (loss)		,						F. F. F. F. C. J.	TELT E VERE	 -		
	11	Other income (attack		•			• • • • •			 			\$ 1.38E. 7	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	12	Total. Add lines 1 thi	_				• • • • •	52,8	315		105,134	·	(\$,75,00°)	
S	13	Compensation of off			stees, e	etc .		56,0	000		22,400		<u> </u>	33,600
Expenses	14	Other employee sala	arıe	es and wages			• • • • •					·		
ē	15	Pension plans, empl	•											
×	16a	Legal fees (attach so	che	edule) · · · ·			· STM107	1,8	324		1,824			
	Ь	Accounting fees (atta		•										
and Administrative	C	Other professional fe		•	•		· STM109	49,7	749		19,430		L	30,319
tra	17	Interest · · · ·	• •											
nis	18	Taxes (attach sched			•			14,6	570		14,670		E	
Ē	19	Depreciation (attach												
Ad	20	Occupancy · · ·	•											
Þ	21	Travel, conferences,	ar	nd meetings .										
a	22	Printing and publicat	ıor	ns · · · · ·										
ing	23	Other expenses (atta	ach	n schedule) 🕠	··st	M103			35		35	·		
Operating	24	Total operating and	i a	dministrative ex	kpense	es.						_	,	
bei	_	Add lines 13 through	23	3				122,2			58,359	1	<u>'-</u>	63,919
0	25	Contributions, gifts, g	gra	ints paid · ·				238,3	300		AND THE STREET			238,300
	26	Total expenses and	d	isbursements. A	Add line	s 24 an	nd 25 -	360,5	78		58,359			302,219
	27	Subtract line 26 from	וול ר	ne 12						Tariff Tariff				
	а	Excess of revenue	οv	er expenses an	d disb	ursem	ents · ·	(307,7	63)			医疗剂	
	b	Net investment inco									46,775			4. P
	С	Adjusted net incom										0	73	

Page 2

Form **990-PF** (2018)

Part II. Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of year			
<u> </u>	K- 7 TE.	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 · · · · · · · · · · · · · · · · · · ·	43,201	13,063	13,063
	2	Savings and temporary cash investments	111,403	26,846	26,846
	3	Accounts receivable			
- }		Less allowance for doubtful accounts			
	4	Pledges receivable	医管理性性病 医性病性		
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
ŀ	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts	HE H W. L. ZAMEN, SHOWN THEIR SPECIAL AND MAKE HE MANAGEMENT.	MANY IN REPORTED TO SHIRE MANUALLY THE THE TANK THE	h
S	8	Inventories for sale or use			
SSets	9	Prepaid expenses and deferred charges			
₹	10a	Investments - U S and state government obligations (attach schedule)			
1	b	Investments - corporate stock (attach schedule) STM137	2,614,509	2,359,600	4,958,234
		Investments - corporate bonds (attach schedule) sTM138	571,662	626,035	616,370
	11	Investments - land, buildings, and equipment basis	The latest the second		
ĺ		Less accumulated depreciation (attach schedule)	Charles Carles and Parks In the No. 18 1 1-15		
ļ	12	Investments - mortgage loans · · · · · · · · · · · · · · · · · · ·			
-	13	investments - other (attach schedule)			
	14	Land, buildings, and equipment basis		Continued for the fields	
		Less accumulated depreciation (attach schedule)	1336 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		a
ĺ	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
-		instructions Also, see page 1, item ()	3,340,775	3,025,544	5,614,513
7	17	Accounts payable and accrued expenses	3,340,173	3,023,344	
	18	Grants payable			
	19	Deferred revenue · · · · · · · · · · · · · · · · · · ·			
3 I	20	Loans from officers, directors, trustees, and other disqualified persons		-	
<u> </u>	21	Mortgages and other notes payable (attach schedule)			
֓֞֞֞֜֞֞֞֞֞֞֞֡֞֡֞֡֞֡֞֞֞֞֞֞֞֡֞֡֡֡֡֡	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	0	
┪		Foundations that follow SFAS 117, check here X			
ဂ္		and complete lines 24 through 26, and lines 30 and 31.			
ا <u>ځ</u>	24	Unrestricted	3,340,775	3,025,544	
5	25	Temporanly restricted	3,340,173	3,023,344	
×۱	26	Permanently restricted			
3		Foundations that do not follow SFAS 117, check here			
3		and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund	· ·		
Z	29	Retained earnings, accumulated income, endowment, or other funds			
۲		Total net assets or fund balances (see instructions)	2 240 775	2 025 544	
5		Total liabilities and net assets/fund balances (see	3,340,775	3,025,544	
-	J 1	instructions)	2 240 375	2 005 544	
_ aï	t III.		3,340,775	3,025,544	1) ราง เราะนาการสาราชาวัตราชา
		net assets or fund balances at beginning of year - Part II, column (a), line 30		 	T
			=		
		F-year figure reported on prior year's return)			3,340,775
				· · · · · · · · · · · · · · · · · · ·	(307,763)
		increases not included in line 2 (itemize)		3	2 222 215
		nes 1, 2, and 3		4	3,033,012
		ases not included in line 2 (itemize) STM116	umn (h) line 20	5	7,468
- 1	uldi F	net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (b), lıne 30 🛚 · · · · ·	6	3,025,544

Part IV Capital Gains	and Losses for Tax on Inves	stment Incom	е					
(a) List and descr 2-story brick war	ribe the kind(s) of property sold (for example, rehouse, or common stock, 200 shs MLC Co	real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)			
1a FROM HM PAYSON F	EPORT		P	VARIOUS	VARIOUS			
<u>b</u>								
С		. <u> </u>						
d	·	 	 		-			
<u>e</u>	, , , , , , , , , , , , , , , , , , , 							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o	other basis nse of sale	(h) Gain or (loss) ((e) plus (f) minus (g))				
a 364,198			416,517		(52,319)			
<u> </u>								
<u>C</u>								
<u>d</u> ө								
	wing gain in column (h) and owned by the	o foundation on 12	2/31/60					
Complete only for assets sho					Col (h) gain minus ot less than -0-) or			
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col ((from col (h))			
<u>a</u>					(52,319)			
<u>b</u>				<u> </u>				
d								
θ ,								
	f If gain, also	enter in Part I, line	e 7					
2 Capital gain net income or (ne	et capital loss)	nter -0- in Part I, line	>	2	(52,319)			
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) an	*						
If gain, also enter in Part I, line	e 8, column (c) See instructions If (loss	s), enter -0- ın	1					
				3	(41,239)			
Part V Qualification L	Inder Section 4940(e) for Red	duced Tax on	Net Investme	ent Income				
(For optional use by domestic priv	rate foundations subject to the section 4	940(a) tax on net in	vestment income)				
f section 4940(d)(2) applies, leave	e this nart blank							
in occitori 4540(d)(2) applics, icuvi	s this part blank							
	section 4942 tax on the distributable amo		the base period?		∐ Yes X No			
	alify under section 4940(e) Do not comp							
	in each column for each year, see the ii	nstructions before r	making any entnes	·	(d)			
(a) Base period years Calendar year (or tax year beginnii	ng in) Adjusted qualifying distributions	Net value of	(c) nonchantable-use as		stribution ratio) divided by col (c))			
2017	225,0	00	5,491,1	L71C	.040975			
2016	249,43		<u>5,038,2</u>		.049506			
2015	292,21		4,644,7		.062929			
2014			4,666,8		.052779			
2013	172,9	09	4,069,9	922 0	.042485			
0 =								
				· · 2	.248674			
	he 5-year base period - divide the total of			3 G	040705			
the number of years the found	dation has been in existence if less than	o years			.049735			
A. Enter the net value of neacher	ritable-use assets for 2018 from Part X,	lino 5		4	6 151 770			
- Enter the net value of nonchar	illable-use assets for 2010 from Part A,	mies		· · 	6,151,779			
5 Multiply line 4 by line 3 · ·				5	305,959			
5 Wildingly line 4 by line 5								
6 Enter 1% of net investment in	come (1% of Part I, line 27b)			6	468			
- Enter 170 of the University IIII	50.115 (170 011 dit 1, mic 270)			- - - - - - - - - -				
7 Add lines 5 and 6				7	306,427			
8 Enter qualifying distributions fr	rom Part XII, line 4			8	302,219			
	han line 7, check the box in Part VI, line							
Part VI instructions		. •						

- -					_	
			1316			Page 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	ee in	ISTRUC	tions) - ५५५ <u>-</u> न्	- in (4
1a	Exempt operating foundations described in section 4940(d)(2), check here		يند آيو ــ	1 ja	-: <u>, (\$4-€</u> 3 -: ,	
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)		## X " * "		17°C, 1	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			F -Torbe	936
_	lacksquare	£2				
С		السيقي	الله الله الله الله الله الله الله الله		1 47	
2	Part I, line 12, col (b)					_
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				<u>936</u>
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	85 A 75		- July	<u>936</u>
6	Credits/Payments	fl,t		angana a- (a magana an galari		
а	2018 estimated tax payments and 2017 overpayment credited to 2018 · · · 6a 7,200	ri i				7,541,15 T H
b	Exempt foreign organizations - tax withheld at source 6b			ا مان الله الله الله الله الله الله الله ال	_K	
C	Tax paid with application for extension of time to file (Form 8868) 6c	20 L	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
_d	Backup withholding erroneously withheld					***************************************
7	Total credits and payments Add lines 6a through 6d	7				<u>,200</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
11		10			6	<u>,264</u>
	Enter the amount of line 10 to be Credited to 2019 estimated tax ► 6, 264 Refunded ► 1:VIII-A Statements Regarding Activities	<u>'''</u>				
1a			$\overline{}$	10 B-201	Yes	No
'4	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		F	1a	163	X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the		•			
	Instructions for the definition			1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		`	100 mg mg 78 1		<u> </u>
	published or distributed by the foundation in connection with the activities		1.		ก็กับที่วิง รับรับยู่	
c	Did the foundation file Form 1120-POL for this year?			1c		ا <u>ئىدى</u> X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		·	1,5,1	٠ <u>٠</u> , ٠	aria
-	(1) On the foundation > \$ (2) On foundation managers > \$		[
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		1			***************************************
-	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		Ī	_5545 3	5.5	-2.54.31
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		1			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		, ,	3	acada and a	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	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				2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

7

X

8b

9

10

10

By language in the governing instrument, or

conflict with the state law remain in the governing instrument?

• By state legislation that effectively amends the governing instrument so that no mandatory directions that

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See instructions for Part XIV)? If "Yes,"

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

8a Enter the states to which the foundation reports or with which it is registered. See instructions.

(or designate) of each state as required by General Instruction G? If "No," attach explanation

Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV .

Form	n 990-PF (2018) POND FAMILY FOUNDATION	20-1131	573	1	Page 5
Pa	rt: 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		30	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	Х	
	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				
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 2018, did the foundation have an interest in or a signature or other authority	<u> </u>		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		21.0		
	the foreign country				1.C. T.
Pa	rt:VII-B Statements Regarding Activities for Which Form 4720 May Be Required			······	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		1 24 1 1	Yes	No
1a	During the year, did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a				j-19
	disqualified person?	X No	, , , ,		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	 1			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	-	1 1 1	- 1- 1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		757		* '2
	the benefit or use of a disqualified person)? Yes	X No	4 4 4	ائی ایا استان ا	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the				11.
	foundation agreed to make a grant to or to employ the official for a period after		35 rd		13 % W
	termination of government service, if terminating within 90 days)	X No			- المارية
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in		77.75	۔ تیا رائیسا	
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		1b	48083	X
	Organizations relying on a current notice regarding disaster assistance, check here	• 🗍	- 7.5.		3 1 75,
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	_		Androit Record	, in p. 150
	were not corrected before the first day of the tax year beginning in 2018?		1c	me Antarateur	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		Z, L		47.77
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		1, 180, 1 X	HEUE.	10 m
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and		Mar 155, -2-1-5		
	6e, Part XIII) for tax year(s) beginning before 2018? Yes	X No			
	If "Yes," list the years , , , ,	_	₹ \$5.70 a		
b					*i, "ij
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		A		
	all years listed, answer "No" and attach statement - see instructions)		2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		73 5		4 1 2 4 1 2 1 2 1 2
	•		, la cha		ه کاسو پید سو ایسو پید سو
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			1	1 2 2
	at any time during the year?	X No	- 1		
Ь	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or	_		Ĭ,÷.	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		-	1. í. 1. ₇ . ".	
	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 penod? (Use Schedule C, Form 4720, to determine if the				
	foundation had excess business holdings in 2018)		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		- ; ,4	, <u>, , , , , , , , , , , , , , , , , , </u>	1,000
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?		4b		X

	990-PF (2018) POND FAMILY FOUNDAT		Which Forn	n 4720	May Re I	2001ii		20-1131	L673	F	age 6
5a	During the year, did the foundation pay or incur any arr		Timon I on	1 47 20	may be	toquii	cu (oor	macaj	HF - GT - 17-15	Yes	No
Ja	(1) Carry on propaganda, or otherwise attempt to influ		uslation (soction	104E/a	.\\2		Yes	X No	1, 21, 1 - 1 - 1	163 -3.43	7500 C
	(2) Influence the outcome of any specific public electric	_	•				∐ 'es	M NO			
	• • • •	•			•		Yes	X No			
	directly or indirectly, any voter registration drive?						\vdash	123	Mic		
	(3) Provide a grant to an individual for travel, study, or						Yes	X No	τα ^{ββ} 3 γ ε τ" σ ₂₀ ς		
	(4) Provide a grant to an organization other than a cha						П v	₩.	روان المراقع المراقع المراقع المراقع		
							Yes	X No			
	(5) Provide for any purpose other than religious, chan purposes, or for the prevention of cruelty to children				itional		Yes	X No			
h	If any answer is "Yes" to 5a(1)-(5), did any of the transa							71 110			
									5b	*xxiXmz-#	Binnesh R.K.
in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions · · · · · · · · · · · · · · · · · · ·							44. 1 Th:	, , <u></u>	5041		
С	If the answer is "Yes" to question 5a(4), does the found							🗀	2, 2, 2		
·	•		iim exemption i	ioni ine	ldX		Yes	□No	3		Tarrel
	because it maintained expenditure responsibility for the	•	2.4045.5(4)				res	Шио	,		MU
6-	If "Yes," attach the statement required by Regulations s								, , , , , , , , , , , , , , , , , , ,		
6a	Did the foundation, during the year, receive any funds,						П v	X No			
h	on a personal benefit contract?						Yes	X No			
b	Did the foundation, during the year, pay premiums, dire	ectly or in	directly, on a pe	ersonal t	enefit contra	cty			6b	2 2 2 2	X
_	If "Yes" to 6b, file Form 8870						П.,	ਹਾ	, J. 1825.		###J
7a	At any time during the tax year, was the foundation a p	-	-				Yes	X No	THE STREET STATES	жижини	
b	If "Yes," did the foundation receive any proceeds or ha	-				ion?			7b	- J. P. J. P. T. 4	
8	Is the foundation subject to the section 4960 tax on page						ω		1,13	1 7 7	李洁
(Dai	remuneration or excess parachute payment(s) dunng t							X No	[] [] [] [] [] [] [] [] [] []	K W -	4
<u>"</u> Pa	t VIII	ectors,	Trustees,	rouna	ation ivial	nager	s, High	y Paid i	Embio	yees	,
	and Contractors										
_1	List all officers, directors, trustees, and foundation										
	(a) Name and address		e, and average rs per week		ompensation not paid,		Contribution Contr		(e) Expe	ense ac allowan	
<u>See</u>	990_OFOV	devot	ed to position	en	ter -0-)	and de	ferred com	pensation	- Outer a	211044411	
ANN	ST JOHN POND	PRESI	DENT AND I	STMA	.01				ı		
3 C	ANTER LANE, CAPE ELIZ., ME 04107	<u> </u>	14.00		55,000			0			_0_
KIR	C POND ,	TREAS	URER AND I	STMA	.02			İ			
<u>3 C</u>	ANTER LANE, CAPE ELIZ., ME 04107		1.00		1,000		_	0			_0_
KYL	POND	DIREC	TOR								
62	JPLAND ROAD, NEWTON, MA 02468		0.20		0			0			0_
JOE:	POND	DIREC	TOR			İ					
20 2	ARBORSIDE DR, FALMOUTH, ME 04105		0.20		٠ 0			0			_0_
2	Compensation of five highest-paid employees (other	er than t	hose included	on line	1 - see instr	uctions). If none	, enter			
	"NONE."									_	
	(a) Name and address of each employee paid more than \$50,	000	(b) Title, and a hours per w devoted to po	eek	(c) Comper	sation	employe plans and	butions to e benefit d deferred ensation	(e) Expe other a	nse acc illowan	
NON			_								
01.	, ,							1			
]]				
											
			-								
			}				}	1			
							 				
Total	number of other employees paid over \$50,000				· • • • • • •			Þ			

Form 990-PF	(2018) POND FAMILY FOUNDATION	20	-1131673 Page 7
Part VIII	Information About Officers, Directors, Trustees, Fo and Contractors (continued)	undation Managers, Highly	Paid Employees,
3 Five hig	hest-paid independent contractors for professional services. See in	structions. 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	of others receiving over \$50,000 for professional services		·
Part IX-A	Summary of Direct Charitable Activities		
	ation's four largest direct charitable activities during the tax year. Include relevant st and other beneficianes served, conferences convened, research papers produced,		Expenses
1			
2 .			
3			
4	•		

Fait 1X-b Summary of Program-Related investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
	C
2	
All other program-related investments. See instructions	İ
3	
·	
Total. Add lines 1 through 3	. •
EEA	Form 990-PF (2018)

EEA

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undati	ons,
	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	6,171,264
b	Average of monthly cash balances	1b	74,197
С	Fair market value of all other assets (see instructions)	1c	0
ď	Total (add lines 1a, b, and c)	1d	6,245,461
6	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) · · · · · · · · · · · · · · · · · · ·		
2	Acquisition indebtedness applicable to line 1 assets	2	00
3	Subtract line 2 from line 1d	_3	6,245,461
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	Instructions) · · · · · · · · · · · · · · · · · · ·	4	93,682
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	6,151,779
6	Minimum investment return. Enter 5% of line 5	6	307,589
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four	ndation	ns
	and certain foreign organizations, check here ▶ and do not complete this part)		<u> </u>
1	Minimum investment return from Part X, line 6	1	307,589
2a	Tax on investment income for 2018 from Part VI, line 5		
Ь	Income tax for 2018 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	936
3	Distributable amount before adjustments Subtract line 2c from line 1	3	306,653
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	306,653
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	306,653
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	302,219
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 chantable 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	302,219
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	_6	302,219
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo	undatio	on
	qualifies for the section 4940(e) reduction of tax in those years		

	1		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part 3	KI,				306,653
2	Undistributed income, if any, as of the en	d of 2018			St. 1-20-20-20-40-1 0 1344	
а	Enter amount for 2017 only · · · · ·					
b	Total for prior years	,				
3	Excess distributions carryover, if any, to 2	2018		The state of the s		
а	From 2013					
þ	From 2014	-				
С	From 2015	24,880				
d	From 2016	2,512				
е	From 2017		Harrison Control of the Control of t			
f	Total of lines 3a through e		27,392			
4	Qualifying distributions for 2018 from Par	t XII,				
	line 4 ▶ \$ 302,219					
а	Applied to 2017, but not more than line 2	а			N. W. Y. Talda. P	
b	Applied to undistributed income of prior y	ears				
	(Election required - see instructions)			_F		
C	Treated as distributions out of corpus (El	ection	:		Committee of the control of the cont	
	required - see instructions) · · · · ·				The state of the s	
d	Applied to 2018 distributable amount			And the second s	다는 그리는 말이 되었다면 보다는 것이 있다는 것이다. 다른 그리는 말이 되었다면 보다는 것이 없는 것이다.	302,219
е	Remaining amount distributed out of corp			Control of the contro	Control of the second of the s	
5	Excess distributions carryover applied to		4,434			4,434
	(If an amount appears in column (d), the	same				
	amount must be shown in column (a))			The first have the first first from the contract of the first first from the contract of the first from the contract of the first from the contract of the first from the contract of the first from the contract of the first from the contract of the first from the contract of the first from the contract of the contract		
6	Enter the net total of each column as					
	indicated below:					
a	Corpus Add lines 3f, 4c, and 4e Subtrac		22,958	TARLE TO THE SHEET OF THE		
b	Prior years' undistributed income Subtra	act				
_	line 4b from line 2b · · · · · · ·	utod	ra vogenska an <u>ava</u> vogetoral anavala			Antigraphy of the second of th
C	Enter the amount of pnor years' undistrib					
	income for which a notice of deficiency has been issued, or on which the section 494					
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxable					
u	amount - see instructions · · · · ·			,		
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	ne e				
	distributed in 2019					- 0
7	Amounts treated as distributions out of co	orpus			The second secon	
	to satisfy requirements imposed by section	on				
	170(b)(1)(F) or 4942(g)(3) (Election may	be				
	required - see instructions) · · · · ·			The state of the s	The state of the s	A Transcription of the property of the control of t
8	Excess distributions carryover from 2013	3 not				
	applied on line 5 or line 7 (see instruction					The factor of the control of the con
9	Excess distributions carryover to 2019	9.				
	Subtract lines 7 and 8 from line 6a .		22,958	A CONTROL OF THE CONT		
10	Analysis of line 9					
а	Excess from 2014			Contract of the second	The state of the s	
b	Excess from 2015	. 20,446] # " # " " " " " " " " "			
С	Excess from 2016 · · · · ·	2,512				
d	Excess from 2017 · · · · ·					
_	Evenes from 2019		1 mg, 4 % at a 2 March 25 March 2 March 25 March	i range menden and the contract of the contrac	 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	1 C

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POND FAMILY FOUNDATION

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Page **10**

Par	XIV. Private Operating Foun	dations (see ins	tructions and Part	VII-A, question 9)	20 11310	
,1a	If the foundation has received a ruling or d	eternination letter tha	t it is a private operating			
	foundation, and the ruling is effective for 2	018, enter the date of	the ruling · · · ·		>	/
b	Check box to indicate whether the foundat	ion is a private operati	ing foundation describe	d in section 494	2(j)(3) or 4942(j)	5)
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years		
	income from Part I or the minimum investment return from Part X for	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	each year listed			<u>:</u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
b	85% of line 2a	· ·				
_	Oughtung distributions from Bod VII					
С	Qualifying distributions from Part XII, line 4 for each year listed		1			}
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities •		1892			
θ	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c · · ·					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
_	(1) Value of all assets					
	(2) Value of assets qualifying under					
b	section 4942(j)(3)(B)(i)					ļ <u>.</u>
J	"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			Ï		
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization			 	<u> </u>	
Part	XV Supplementary Informat	ion (Complete 4)	hio nort only if th	o foundation has	1 ¢5 000 or more	in accets at
rait	any time during the year			e iounuation nat	1 \$5,000 OF INOTE	III a55615 at
1	Information Regarding Foundation Ma		115./			
l a	List any managers of the foundation who	•	than 2% of the total co	ontributions received by	the foundation	
	before the close of any tax year (but only				the loungation	
		-				
	KIRK POND					
ь	List any managers of the foundation who	own 10% or more of the	ne stock of a compratio	n (or an equally large n	ortion of the	
~	ownership of a partnership or other entity)		•			
	•		-			
	NONE					
2	Information Regarding Contribution, G	rant, Gift, Loan, Sch	olarship, etc., Progran	ns:		
	<u> </u>		preselected chantable		s not accept	
	unsolicited requests for funds if the found		•	-		
	complete items 2a, b, c, and d See instru		, ,	J	•	
а	The name, address, and telephone numb	er or email address of	the person to whom ap	plications should be ac	Idressed	
	990APP					
b	The form in which applications should be	submitted and informa	ition and materials they	should include		
	Any submission doedlines					
С	Any submission deadlines					
d	Any restrictions or limitations on awards, s	such as by geographic	al areas, charitable field	ds, kinds of institutions,	or other	
	factors					

Form 990-PF (2018) POND FAMILY FOUNDATION
Part XV Supplementary Information (continued)

3 Grants and Contributions Poundation

Grants and Contributions Paid During th	e Year or Approve	d for Future P	ayment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	rospicin		
a Paid during the year				
CONGRGATION BET HA'AM				
81 WESTBROOK STREET				
SOUTH PORTLAND, ME 04106		PC	OUTREACH	2,000
CAPE ELIZ. CHURCH OF THE NAZARENE				
499 OCEAN HOUSE RD		[[
CAPE ELIZABETH, ME 04107		PC	GENERAL	2,000
CAPE ELIZ. UNITED METHODIST CHURCH				
280 OCEAN HOUSE RD			MISSIONS AND	
CAPE ELIZABETH, ME 04107		PC	MINISTRIES	2,000
FIRST CONGREGATIONAL CHURCH, UCC				
301 COTTAGE RD			COMMUNITY CRISIS	
SOUTH PORTLAND, ME 04107		PC	MINISTRIES	25,000
MAINE BEHAVIORAL HEALTHCARE		6		
78 ATLANTIC PLACE				
SOUTH PORTLAND, ME 04106		PC	GENERAL	69,050
MAINE MEDICAL CENTER				
22 BRAMHALL ST				
PORTLAND, ME 04101		PC	GENERAL	11,000
COLBY COLLEGE MUSEUM OF ART				
5600 MAYFLOWER HILL DRIVE			1	
WATERVILLE, ME 04901		PC	GENERAL	1,000
LAMBDA CHI ALPHA EDUCATIONAL FDN				
11711 N. PENNSYLVANIA ST, STE 250				
CARMEL, IN 46032		PC	GENERAL	25,000
Total			▶ 3a	
b Approved for future payment				
			▶ 3b	
Total			▶ _ 3b	

Enter gross amounts unless otherwise indicated		d business income	Excluded by	section 512, 513, or 514	(e)
_	(a) Business	(b) Amount	(c)	(d)	Related or exempt function income (See instructions)
1 Program service revenue	code				
a					
b					
d					
Δ	-			 	
+	 			 	
g Fees and contracts from government agencies					<u> </u>
2 Membership dues and assessments · · · · · · ·	1				
3 Interest on savings and temporary cash investments •	_			-	<u> </u>
4 Dividends and interest from securities			14	105,134	
5 Net rental income or (loss) from real estate	ENGINEE S	The state of the s	NATE OF BEING		
a Debt-financed property	7				
b Not debt-financed property		··· · -			
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	(52,319	
9 Net income or (loss) from special events				1	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e) · · · · · ·	April 10 miles of the second			52,815	
13 Total. Add line 12, columns (b), (d), and (e)				13	52,815
Explain below how each activity for which incomplishment of the foundation's exempt p	ome is reporte	d in column (e) of Pai	rt XVI-A contrib	outed importantly to the	ns)
					
		<u> </u>			
		_			
			 -		
					
			· - .		
					
			 .		
					
					
			_		

207-775-7271

Form 990-PF (2018)

POND FAMILY FOUNDATION 20-1131673 Page 13 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt **Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of 1a(1) (2) Other assets 1a(2) **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule (a) Name of organization (c) Description of relationship (b) Type of organization Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign May the IRS discuss this return with the preparer sho Here PRESIDENT AND DIRECTOR Yes Signature of officer or truste Print/Type preparer's name Date Paid Mıchael J Quınlan 03-30-2019 Preparer DI-0. Firm's EIN Jensen Baird Gardner Firm's name

Use Only

Firm's address

Ten Free Street

Portland ME 04101

orm 990-PF (2018) POND FAMILY FOUNDA		· · ·	20-1131673	Page 1
Part XV: Supplementary Information (conti				
Grants and Contributions Paid During th	e Year or Approve	d for Future P	ayment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year			1	
RONALD MCDONALD HOUSE			1	
250 BRACKETT ST				
PORTLAND, ME 04102		PC	GENERAL	1,000
PINE TREE LEGAL ASSTNCE				
88 FEDERAL STREET				
PORTLAND, ME 04101		PC	GENERAL	10,000
ST ALBANS CHURCH				
885 SHORE RD				
CAPE ELIZABETH, ME 04107		PC	OUTREACH	2,000
SIMPLE GIFTS				
P.O. BOX 2684		-		
SOUTH PORTLAND, ME 04116		PC	GENERAL	500
SOOTH FORTLAND, ME 04116			GENERAL	300
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
BOYS AND GIRLS CLUBS OF SOUTHERN ME				
277 CUMBERALND AVENUE				
PORTLAND, ME 04101		PC	GENERAL	2,000
-				-,
BUCKINGHAM, BROWNE & NICHOLS SCHOOL				
80 GERRYS LANDING ROAD				
CAMBRIDGE, MA 02138		PC	GENERAL	5,000
Total			▶ 3a	
b Approved for future payment	[
Tabel			3b	
Total				

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POND FAMILY FOUNDATION 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 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					
FAMILY HOPE					
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	1,000	
BEAVER COUNTRY DAY SCHOOL					
791 HANMMOND STREET				,	
CHESTNUT HILL, MA 02467-2300		PC	ANNUAL FUND	2,500	
G.E. SINGI 11121, PA 0240, 2300			THITOPID TOND	2,300	
CAPE ELIZABETH EDUCATION FOUNDATION					
PO BOX 6225					
CAPE ELIZABETH, ME 04107		PC	GENERAL	1,000	
CRADLES TO CRAYONS					
155 NORTH BEACON STREET					
BRIGHTON, MA 02135		PC	GENERAL	250	
CONGRGATION ETZ CHAIM		<u>{</u>	f		
267 CONGRESS STREET					
PORTLAND, ME 04101		PC	GENERAL	2,000	
FRIENDS OF BAXTER STATE PARK		ļ	VOLIMIT		
PO BOX 322		PC	YOUTH CONSERVATION	500	
BELFAST, ME 04915		•	CONSERVATION]	
FRIENDS OF CASCO BAY					
43 SLOCUNM DRIVE					
SOUTH PORTLAND, ME 04106		PC	GENERAL	1,000	
<u> </u>					
Total					
b Approved for future payment					
			ļ		
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 Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
H.O.M.E.				
PO BOX 10				
ORLAND, ME 04472		PC	GENERAL	1,000
JUNIOR ACHIEVEMENT				
565 CONGRESS STREET, SUITE 306				
PORTLAND, ME 04101		PC	GENERAL	1,000
V				
MIDCOAST LITERACY				
34 WING FARM PARKWAY		, na	READ TOGETHER	1 000
BATH, ME 04530		PC	PROGRAM	1,000
MY SISTER'S KEEPER				
280 OCEAN HOUSE ROAD				
CAPE ELIZABETH, ME 04107		PC	GENERAL	1,000
,				,
NEWTON TURKEY TROT				
Unknown			NEWTON FOOD	
NEWTON CENTER, MA 02459		PC	PANTRY	1,000
PHILLIPS COMMUNITY COLLEGE FOUNDATI				
2807 HWY 165 S BOX A				
STUTTGART, AR 72160		PC	SCHOLARSHIP	5,000
REGIONAL SCHOOL UNION 87		!	CARMEL ELEMENTARY	11
50 PLYMOUTH ROAD			SCHOOL, GRADE TWO	
CARMEL, ME 04419		PC	Benoon, Grand Two	1,000
G1411				
HOPE/SEBASTIAN HUMANE SDOCIETY				
3800 KELLEY HIGHWAY				
FORT SMITH, AR 72917		PC	GENERAL	500
Total		· · · · · · · · · ·		
b Approved for future payment				
	ľ			
]			
			<u> </u>	
]			
Total		<u></u> <u></u>	<u> </u>	

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	e 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				
ST BARTHOLOMEW CHURCH				
8 TWO LIGHT ROAD				
CAPE ELIZABETH, ME 04107		PC	GENERAL	2,000
STRIVE				
28 FODEN ROAD				
SOUTH PORTLAND, ME 04106		PC	GENERAL	2,000
USM FOUNDATION				
			PROMICE	
PORTING AND CALLOA		70	PROMISE	E 000
PORTLAND, ME 04104		PC	SCHOLARSHIP	5,000
WEX CARES FOUNDATION				
97 DARLING AVE				
SOUTH PORTLAND, ME 04106-2301		PC	GENERAL	12,000
			}	
]	
•				
Total				238,300
b Approved for future payment				
Total			▶ _3b	

Form 990_OfOv (2018) POND FAMILY FOUNDATION List of Officers, Directors, Trustees, and Key Employees 1 List'all officers, directors, trustees, and key employees for the year officers.

1 List all oπicers, directors, trustees, and key employees for the y	ear even if they were	not compensated.		
(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Form W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
ERIN POND FRIEDLAND DIRECTOR				
		1 _	1	
1125 PARK AVE. APT. 11B, NY, NY 10128	0.20	0	0	0
				
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Federal Supporting Statements 2018 PG01 Name(s) as shown on return Tax ID Number POND FAMILY FOUNDATION 20-1131673 FORM 990PF - PART VIII STATEMENT #A01 COMPENSATION EXPLANATION NAME ANN ST JOHN POND **EXPLANATION** FOR SERVICES RENDERED AS PRESIDENT OF CORPORATION AND OVERSEEING GRANT MAKING. PG01 FORM 990PF - PART VIII STATEMENT #A02 COMPENSATION EXPLANATION NAME KIRK POND **EXPLANATION** FOR SERVICES RENDERED AS TREASURER. PG01 FORM 990PF - PART III - LINE 5 STATEMENT #116 OTHER DECREASES SCHEDULE MISCELLANEOUS ADJUSTMENTS 2,142 BOND PREMIUM AMORTIZATION 5,326 7,468 TOTAL

Federal Supporting Statements 2018 PG01 Name(s) as shown on return Tax ID Number <u>20-113</u>1673 POND FAMILY FOUNDATION FORM 990PF - PART II - LINE 10(B) STATEMENT #137 INVESTMENTS: CORPORATE STOCK SCHEDULE **CATEGORY** BOY BOOK VALUE EOY FMV HMPAYSON MANAGED ACCT. COM/OTH 2,614,509 2,359,600 4,958,234 TOTALS <u>2,614,509</u> <u>2,359,600</u> <u>4,958,234</u> PG01 FORM 990PF - PART II - LINE 10(C) STATEMENT #138
INVESTMENTS: CORPORATE BOND SCHEDULE **CATEGORY** BOY BOOK VALUE EOY FMV 571,662 626,035 616,370 HM PAYSON MANAGED ACT

> FORM 990PF - PART I - LINE 6(A) STATEMENT #139 GAIN(LOSS) FROM SALE OF OTHER ASSETS SCHEDULE

PG01

<u>571,662</u> <u>626,035</u> <u>616,370</u>

TOTALS

		Federal St	Federal Supporting Statements	ments	2018 PG01
Name(s) as shown on return POND FAMILY FOUNDATION					1 P C
	FORM 990P	FORM 990PF - PART I - LINE 2:	- LINE 23 - OTHER EXPENSES SCHEDULE	SCHEDULE	STATEMENT #103~
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE	
CORPORATE ANNUAL REPORT FEE TOTALS	35	35	0	0	
	FORM 990P	FORM 990PF - PART I - LINE 10	- LINE 16(A) - LEGAL FEES SCHEDULE	нероте	PG01 STATEMENT #107~
DESCRIPTION JENSEN BAIRD	REVENUE AND EXPENSES 1,824	NET INVESTMENT 1,824	ADJUSTED NET INCOME	CHARITABLE PURPOSE 0	
TOTALS	1,824	1,824	0	0	
	,				
2 112					

		Federal Su	Federal Supporting Statements	nents	2018 PG01
Name(s) as shown on return POND FAMILY FOUNDATION					ı⊼ N
	FORM 990PF - PART I	- LINE 16(C)	- OTHER PROFESSIONAL FEES SCHEDULE	FEES SCHEDULE	STATEMENT #109~
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARI TABLE PURPOSE	
HM PAYSON DONNA BETTS DIANE LOVEJOY	15,902 33,688 159	15,902 3,369	0 0	30,319	
TOTALS	49,749	19,430	0	30,319	
					PG01
	FORM 9	FORM 990PF - PART I - LIN	- LINE 18 - TAXES SCHEDULE	ar.	STATEMENT #110~
DESCRIPTION IRS EXCISE TAX FOREIGN TAXES IRS ESTIMATED TAX PAYMENTS TOTALS	AND EXPENSES 1,588 682 12,400 14,670	NET INVESTMENT 1,588 682 12,400 14,670	ADJUSTED NET INCOME 0 0 0 0	CHARITABLE PURPOSE 0 0 0	

1	Federal Supporting Statements	2018 PG01
Name(s) as shown on return		Your Social Security Number
POND FAMILY	FOUNDATION	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 OUALIFY AS PUBLIC CHARITIES.

HMPayson

Account Summary Statement Page 2

December 01, 2018 To December 31, 2018

Account Number

Fond Fam, 14 Foundation EIN: 20-113/673 2018 990-14 Part I

Account Activity Summary

•	This Period	Year To Date	Realized C	apital Gains / Loss	es
Beginning Market Value	6,059,747.49	5,978,223.67		This Period	Year To Date
Dividend Income	13,763 12	84,880 58	Long Term	0 00	11,079 90-
Interest Income	39 72	19,758 05	Short Term	0 00	41,239 15-
Cash Deposits Pymts To/for Beneficiaries Trust Fees Withdrawals And Distributions Taxes And Other Expenses Change In Market Value	13,802 84 10,000 00 - 1,275.24 - 13,802 84 - 1,800.00 - 459.025 52 -	104,442 31 302,000 00- 15,901 51- 104,638 63- 13,988 00- 149,326 90-	Total Gains / Losses	0.00	52,319.05-
Ending Market Value	5,601,449.57	5,601,449.57			

Asset Statement

Description	Total Market/ Total Cost	Market Price/ Cost Price	Est Annual Income/ Gain / Loss	Current Yield
Cash And Cash Equivalents				
FDIC INSURED MONEY MARKET DEPOSIT ACCOUNT	26,845 59 26,845 59	1 00 1 00	547 65	2 04
* Total Cash And Cash Equivalents	26,845.59 26,845.59	/	547.65 0.00	2.04

Bond Quality Summary

