Form 990-T	8	Exempt Organization Bus	sine	ss Income T	ax Returr	1	OMB No 1545-0687					
		(and proxy tax und	ler se	ection 6033(e))			2018					
	For ca	lendar year 2018 or other tax year beginning	_	ZU 10								
Department of the Treasury Internal Revenue Service	>	► Go to www.irs.gov/Form990T for ir Do not enter SSN numbers on this form as it may		Open to Public Inspection for 501(c)(3) Organizations Only								
A Check box if address changed		Name of organization (Land Check box if name of	(Emp	oyer identification number loyees' trust, see uctions)								
B Exempt under section	Print	Alfond Scholarship Fou		26-1765514								
\mathbf{X} 501(\mathbf{a})	Type	Number, street, and room or suite no. If a P.O. bo	E Unrelated business activity code (See instructions)									
408(e)220(e)	Туре	482 Congress Street, S	uit	e 303								
408A530(a) 529(a)		City or town, state or province, country, and ZIP of Portland, ME 04101										
C Book value of all assets at end of year												
at the or your	trust	Other trust										
H Enter the number of the	related											
trade or business here					complete Parts I-V.							
describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or												
business, then complete		· · · · · · · · · · · · · · · · · ·										
		poration a subsidiary in an affiliated group or a parei	nt-subs	idiary controlled group?	▶ L	Ye	es L No					
		tifying number of the parent corporation.										
		Colleen Quint				207-347-8638						
Part I Unrelate	d Tra	de or Business Income		(A) Income	(B) Expenses		(C) Net					
1a Gross receipts or sal	es											
b Less returns and allo		c Balance	1c									
2 Cost of goods sold (2									
3 Gross profit. Subtract			3									
4a Capital gain net incoi	•	•	48									
- , -,		Part II, line 17) (attach Form 4797)	4b									
c Capital loss deductio			4c									
	•	ship or an S corporation (attach statement)	5									
6 Rent income (Sched	•		6									
7 Unrelated debt-finan		,	7									
	•	and rents from a controlled organization (Schedule F)	8									
 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) 												
•	-	•	10									
11 Advertising income (12 Other income (See in		•	12									
· ·		•	13	0.	•							
13 Total, Combine line	one N	ot Taken Elsewhere (See instructions fo					<u> </u>					
(Except for	contrib	utions, deductions must be directly connecte			s income)							
· · · · · · · · · · · · · · · · · · ·		rectors, and trustees (Schedule K)				14						
15 Salaries and wages						15						
16 Repairs and mainte	nance					16						
17 Bad debts						17						
18 Interest (attach sch	eaule) (s	ee instructions)				18						
19 Taxes and licenses	(Ca	a materiations for limitation sulpay				19						
		e instructions for limitation rules)		Last		20						
21 Depreciation (attach				21		22b						
	iaimeo o	n Schedule A and elsewhere on return	228									
23 Depletion	farrad aa	macanation plans				23						
24 Contributions to de		AUTO CONTRACTOR DIGITS	***************************************				<u> </u>					
25 Employee benefit pr26 Excess exempt expenses		chedule I)	RECEIVED									
27 Excess readership of			()									
			- 1	® NOV 2 5 2	27	· · · · · · · · · · · · · · · · · · ·						
	(m)											
O TOTAL TOTA							0.					
		ncome. Subtract line 31 from line 30	., , 4	10 (see in a serious) 4	<u> </u>	31 32	0.					
		rwork Reduction Act Notice, see instructions.		·····			Form 990-T (2018)					



Part I	II Total Unrelated Business Taxable Income					_		
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (se	33			0.			
34	Amounts paid for disallowed fringes	34		1,6	80.			
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instru	35						
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the si							
	lines 33 and 34				36	1	1,6	80.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)				37		1,0	
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 3	36.						
•	enter the smaller of zero or line 36	,			38		6	80.
Part I	V Tax Computation				1			
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	···			▶ 39			43.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount of	nn line 38	3 from	•	 "	 		
70	Tax rate schedule or Schedule D (Form 1041)	311 11110 00	, 0		▶ 40			
41	Proxy tax. See instructions	<u> </u>						
42	Alternative minimum tax (trusts only)			_	42			
43	Tax on Noncompliant Facility Income. See instructions				43			
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies				44	· · · · · ·		43.
Part \		-			1 77			13.
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a			T	I		
	Other credits (see instructions)	45b			\dashv			
	General business credit. Attach Form 3800	45c		_		ļ		
	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d			\dashv			
	Total credits. Add lines 45a through 45d	404			45e			
46	Subtract line 45e from line 44				46		1	43.
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 886	se 🗀	Other (a	ttach schedule				
48	Total tax. Add lines 46 and 47 (see instructions)		Other (a	ttach schedule	48		1	43.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2				49			-0 .
	Payments: A 2017 overpayment credited to 2018	50a			13			
	2018 estimated tax payments	50b						
	Tax deposited with Form 8868	50c			-			
	·							
	d Foreign organizations: Tax paid or withheld at source (see instructions) 50d							
	e Backup withholding (see instructions) f Credit for small employer health insurance premiums (attach Form 8941) 506 506							
	Other credits, adjustments, and payments: Form 2439	301		-				
¥	Form 4136 Other Total	50g						
51	Total payments. Add lines 50a through 50g	Joy			51			
					52			
53	52 Estimated tax penalty (see instructions). Check if Form 2220 is attached Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed							43.
54								
55								
Part \		n (see			> 55	<u> </u>		
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature of				_		Yes	No
**	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization		-				1 1 1	
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the f							
	here >		 ,					
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or tra	nsferor t	o. a fore	ion trust?			\vdash	
•	If "Yes," see instructions for other forms the organization may have to file.							
58	Enter the amount of tax-exempt interest received or accrued during the tax year >\$							
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and st	tatements,	and to th	e best of my k	nowledge a	nd belief, it is	true	
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which prepare	ar has any	knowledg) 0				
Here	Preside	nt.			-	S discuss thi or shown belo		with
Signature of officer Date Title					instruction:			No
-	Print/Type preparer's name Proparet's signature Date	e.	T	heck	ıf PTI			
D-::	Richard E. Emerson,	•		elf- employe		••		
Paid	The CDA CVA Nuclear L. Callon His	/08/		on omploye		00095	846	
Pared Company				Firm's EIN		1-046		3
Use Only 130 Middle Street								
	Firm's address > Portland ME 04101			Phone no	207-	775-3	496	