Form -990-PF

Return of Private Foundation

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

2019

Quepartment of the Treasury
Internal Revenue Service

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 2019 or tax year beginning , 2019, and ending 20 Name of foundation A Employer identification number **PROTEIN FOUNDATION** 06-1046591 B Telephone number (see instructions) Number and street (or P O. box number if mail is not delivered to street address) Room/suite 10 MOULTON ST City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ **PORTLAND, MAINE 04101** G Check all that apply: ☐ Initial return Initial return of a former public charity D 1. Foreign organizations, check here ☐ Amended return ☐ Final return 2. Foreign organizations meeting the 85% test Address change Name change check here and attach computation Check type of organization: Section 501(c)(3) exempt private foundation of E If private foundation status was terminated under Section 4947(a)(1) nonexempt charitable trust

Other taxable private foundation section 507(b)(1)(A), check here If the foundation is in a 60-month termination end of year (from Part II, col. (c), under section 507(b)(1)(B), check here ▶ 🔲 ☐ Other (specify) 105,590 (Part I, column (d), must be on cash basis.) line 16) ▶ \$ Part I Analysis of Revenue and Expenses (The total of (d) Disbursements for charitable (a) Revenue and (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal expenses per books purposes the amounts in column (a) (see instructions).) (cash basis only) 1 Contributions, gifts, grants, etc., received (attach schedule) 350,000 2 Check ▶ ☐ if the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 0 0 0 4 Dividends and interest from securities 0 0 Gross rents 5a 0 0 0 b Not rontal income or (loss) SCANNED NOV 1 6 2021 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) . . 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) . O 11 Other income (attach schedule) . . 12 Total. Add lines 1 through 11 . 0 0 350,000 13 Compensation of officers, directors, trustees, etc. 84,356 0 O 84,356 Operating and Administrative Expenses 14 Other employee salaries and wages . . . 0 0 0 15 Pension plans, employee benefits 0 0 35,705 35,705 16a Legal fees (attach schedule) 0 0 0 b Accounting fees (attach schedule) 0 0 0 Other professional fees (attach schedule) . 0 0 0 17 Interest a 0 0 Taxes (attach schedule) (see instructions)
Depreciation (attach schedule) and deplet 18 0 0 19 epletion . 0 0 Ω 20 Occupancy Travel, congerence, and meeting 0 0 21 0 7,481 0 7,481 22 Printing and publications 0 0 0 Other expenses fattach schedule 23 0 0 8,091 8,091 24 Total operating and administrative expenses. Add lines 13 through 23 135,633 135,633 25 Contributions, gifts, grants paid 180,000 180,000 26 Total expenses and disbursements. Add lines 24 and 25 315,633 315,633 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements 34,367 Net investment income (if negative, enter -0-) . 0 Adjusted net income (if negative, enter -0-)

Part If		Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year	
· -		should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash—non-interest-bearing	71,233	105,590	105,590	
ĺ	2	Savings and temporary cash investments	0	0	0	
	3	Accounts receivable ▶ 0				
		Less: allowance for doubtful accounts ▶0	0	0	0	
	4	Pledges receivable ► U				
ļ		Less: allowance for doubtful accounts ▶ 0	0	0		
	5	Grants receivable	0	0	0	
	6	Receivables due from officers, directors, trustees, and other				
ļ		disqualified persons (attach schedule) (see instructions)	0	0	0	
	7	Other notes and loans receivable (attach schedule) ▶ 0		. 'h		
		Less: allowance for doubtful accounts ▶ 0	0	0	0	
\$	8	Inventories for sale or use	0	0	0	
Assets	9	Prepaid expenses and deferred charges	0	0	0	
AS	10a	Investments – U.S. and state government obligations (attach schedule)	0	0	0	
	b	Investments—corporate stock (attach schedule)	0	0	0	
	С	Investments—corporate bonds (attach schedule)	0	0	0	
	11	Investments—land, buildings, and equipment: basis ▶ 0				
		Less: accumulated depreciation (attach schedule) ▶ 0	O	0	0	
	12	Investments—mortgage loans	0	0	0	
	13	Investments—other (attach schedule)	0		0	
	14	Land, buildings, and equipment: basis ▶0				
		Less: accumulated depreciation (attach schedule) ▶ 0	0	0	. 0	
	15	Other assets (describe ▶ 0)	0	0	0	
	16	Total assets (to be completed by all filers-see the				
		instructions. Also, see page 1, item l)	71,223	105,590	105,590	
	17	Accounts payable and accrued expenses	0	0		
Ç)	18	Grants payable	0	0	<u> </u>	
Liabilities	19	Deferred revenue	0	0	<u> </u>	
<u>=</u>	20	Loans from officers, directors, trustees, and other disqualified persons	0	0		
ia i	21	Mortgages and other notes payable (attach schedule)	0	0		
_	22	Other liabilities (describe ▶ 0	0	0		
	23	Total liabilities (add lines 17 through 22)	0	0		
alances		Foundations that follow FASB ASC 958, check here				
<u> </u>		and complete lines 24, 25, 29, and 30.				
aga	24	Net assets without donor restrictions	71,223	105,590		
8	25	Net assets with donor restrictions	0	0		
Ĕ		Foundations that do not follow FASB ASC 958, check here ►				
ĭ		and complete lines 26 through 30.				
9	26	Capital stock, trust principal, or current funds	ļ			
şţ	27	Paid-in or capital surplus, or land, bldg., and equipment fund				
SS 6	28	Retained earnings, accumulated income, endowment, or other funds		105 500		
Net Assets or Fund B	29 30	Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see		105,590		
Š	30	instructions)	71,223	105,590		
	rt III	Analysis of Changes in Net Assets or Fund Balances	1 1,223	105,550	L	
		Il net assets or fund balances at beginning of year—Part II, colu	mn (a), line 29 (mus	t agree with		
•		of year figure reported on prior year's return)			71,223	
2		er amount from Part I, line 27a			34,367	
3		- to a control of the first transfer of the control			0	
4		lines 1, 2, and 3		4	105,590	
5				5	0	
6	Tota	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 29 6	105,590	

Part	Capital Gains and	Losses for Tax on Investm	nent Income				
`	(a) List and describe the kir 2-story brick warehou	(c) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr)				
1a	PART IV NOT APPLICABI	LE					
<u>b</u>							
<u>c</u>	<u> </u>		 ;				
<u>d</u>			·				
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		iain or (loss) s (f) minus (g))	
a							
b							
<u>c</u>							
<u>d</u>							
<u>е</u>	Complete only for excets she	was agin in column (b) and award	bu the foundation	on 10/21/60			
	Complete only for assets stic	owing gain in column (h) and owned				Col (h) gain minus	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	col (k), but not less than -0-) or Losses (from col (h))		
<u>a</u>							
b					ļ		
<u>c</u>				·····		······································	
<u>d</u>						 	
е							
2	Capital gain net income o		also enter in Pa , enter -0- in Pa		2		
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c). See instru	ctions. If (loss)	, enter -0- ın)			
		<u> </u>			3	·	
Part		ler Section 4940(e) for Reduivate foundations subject to the					
If sect	tion 4940(d)(2) applies, leav	e this part blank. section 4942 tax on the distribu	table amount of	any year in the l	ŕ	☐ Yes 🗹 No	
		qualify under section 4940(e). Do					
		ount in each column for each yea	ar; see the instru	uctions before m	aking any entrie:	_	
Cale	(a) Base penod years endar year (or tax year beginning in	(b) Adjusted qualifying distribution	s Net value o	(c) f noncharitable-use a		(d) distribution ratio b) divided by col (c))	
	2018	PART V NOT APPLICA	ABLE				
	2017						
	2016			·			
	2015			·· ···		 	
	2014						
_	-						
2	Total of line 1, column (d)						
3		for the 5-year base period—divoundation has been in existence					
4	Enter the net value of non	charitable-use assets for 2019 f	rom Part X, line	5	. 4		
5	Multiply line 4 by line 3				. 5		
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		. 6		
7	Add lines 5 and 6				. 7		
8		ons from Part XII, line 4					
	If line 8 is equal to or great Part VI instructions.	ater than line 7, check the box in	n Part VI, line 1b	, and complete	that part using a	1% tax rate. See the	

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see i	nstru	ction	าร)		
(1a	Exempt operating foundations described in section 4940(d)(2), check here ▶□ and enter "N/A" on line 1.)		-	Ĭ		
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)					
b	(
	here ► ☐ and enter 1% of Part I, line 27b					
С	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		PA	RT VI		
3	Add lines 1 and 2			NOT		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	AF	PPLIC	ABLE		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0					
6	Credits/Payments:			- 1		
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a			- 1		
b	Exempt foreign organizations—tax withheld at source			1		
C	Tax paid with application for extension of time to file (Form 8868) 6c			1		
_d	Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d					
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10 Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11					
	VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Γ Τ	Yes	No		
ıa	participate or intervene in any political campaign?	1a	.00	√		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the					
	instructions for the definition	1b		<u> </u>		
	published or distributed by the foundation in connection with the activities.					
С	Did the foundation file Form 1120-POL for this year?	1c		✓		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$0 (2) On foundation managers. ▶ \$0					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
_	on foundation managers. ▶ \$0					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		-		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	_				
4	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3		-		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b				
b 5	If "Yes," has it filed a tax return on Form 990-T for this year?	5		1		
•	If "Yes," attach the statement required by General Instruction T.	H				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
-	By language in the governing instrument, or			ĺ		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that					
	conflict with the state law remain in the governing instrument?	6	1			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	✓			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶					
	CONNECTICUT - NO FILING REQUIRED BY ATTORNEY GENERAL OFFICE					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	✓			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"	_		,		
	complete Part XIV	9				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		ار			
	names and addresses	10				

rait	Statements Regarding Activities (continued)	,		
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	40		/
13	person had advisory privileges? If "Yes," attach statement. See instructions	12		_
	Website address ► www.proteinfoundation.org			L
14		7-771-	0965	
	Located at ▶ 10 Moulton St, Portland, Maine ZIP+4 ▶	0410	1	<u></u> -
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 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Part	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.		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 (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes \subseteq No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		1
С	Organizations relying on a current notice regarding disaster assistance, check here			
U	were not corrected before the first day of the tax year beginning in 2019?	1c		1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
За	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
-	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or	1		
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the]
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	1		
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	<u> </u>		Ė
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		1

Part	VII-B Statements Regarding Activities	for Which Form	4720 May B	e Require	d (continued)			
5a	a similar year, and a similar part of the simi							
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . Yes No							
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,							
	directly or indirectly, any voter registration drive?							- 1
(3) Provide a grant to an individual for travel, study, or other similar purposes?							ľ	
	(4) Provide a grant to an organization other than a charitable, etc., organization described in							
	section 4945(d)(4)(A)? See instructions						l	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?							
						- 1	ļ	
b	If any answer is "Yes" to 5a(1)-(5), did any of the							
	in Regulations section 53.4945 or in a current no					5b		 i
•	Organizations relying on a current notice regarding disaster assistance, check here							
С	because it maintained expenditure responsibility for the grant?							
If "Yes," attach the statement required by Regulations section 53.4945-5(d).								
6a	Did the foundation, during the year, receive any			nremiums				
Ų.	11 70 10				☐ Yes ✓ No	1	į	
b	Did the foundation, during the year, pay premium			onal benefi		6b		
-	If "Yes" to 6b, file Form 8870.	,, oro	,, s p o.o.		··			<u> </u>
7a	At any time during the tax year, was the foundation	a party to a prohibit	ed tax shelter tr	ansaction?	☐ Yes 🗹 No			}
b	If "Yes," did the foundation receive any proceeds					7b		
8	Is the foundation subject to the section 4960 tax							
	remuneration or excess parachute payment(s) du							
Par	VIII Information About Officers, Direct	tors, Trustees, F	oundation M	anagers,	Highly Paid E	mploy	ees,	
	and Contractors							
	List all officers, directors, trustees, and found					•		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensate (If not paid,	emplo	Contributions to byee benefit plans	(e) Exper	nse acc illowant	
Malta	Paker 10 Maulton St. Dortland MC 04101	devoted to position	enter -0-)	and der	erred compensation			
	Baker, 10 Moulton St, Portland, ME 04101	Trustee 5 hrs	1					^
	uchella, 10 Moulton St, Portland, ME 04101 allagher, 10 Moulton St, Portland, ME 04101	Trustee 5 hrs	 		<u>U</u>		.	
	en Lanfer, 10 Moulton St, Portland, ME 04101	Trustee 5 hrs Trustee 7 hrs			0			0
	Rogers, 10 Moulton St, Portland, ME 04101							
	Starvel, 10 Moulton St, Portland, ME 04101	Trustee 7 hrs Trustee 5 hrs		0	o			0
	alker, 10 Moulton St, Portland, ME 04101		 		<u></u>			
		Trustee 5 hrs Managing.Dir. 40 hrs	Owen \$84	.355	Owen \$29.200			0
2	Compensation of five highest-paid employed	es (other than tho	se included o		see instructions	s). If no	one, e	enter
	"NONE."							
		(b) Title, and	average	-	(d) Contributions to employee benefit	(e) Expe	nse acc	nunt
	a) Name and address of each employee paid more than \$50,00	hours per devoted to p		mpensation	plans and deferred		ilowan	
					compensation			
None								
			ĺ					
Total	number of other employees paid over \$50,000 .	<u> </u>	· • · · ·	<u> </u>	>		0	
						Form 99	0-PF	(2019)

Par	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	iployees,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
		·····
	al number of others receiving over \$50,000 for professional services	
Pai	rt IX-A Summary of Direct Charitable Activities	T
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	Identify candidates for grants which have tax-exempt purposes that accord with Protein's mission	
	and tax-exempt purposes (site visitation, interviews and evaluation of grant application.)	
_		88,161
2	Carry-out grant "expenditure responsibility" over activites of grantees.	
		27,127
3	Provide counselling, advise and coaching to grantees vis-a-vis ministry strategies, organization and admin.	27,127
		20,345
4		
	Current of Discussive Deleted Investments (see instructions)	<u> </u>
	rt IX-B Summary of Program-Related Investments (see instructions) escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	None	1
•	NOTO	
2		
	Il other program-related investments. See instructions	
3	None .	
Tots	al. Add lines 1 through 3	
		Form 990-PF (2019)

Part	see instructions.)	gn tound	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
_	purposes: Average monthly fair market value of securities	10	_
a	Average of monthly cash balances	1a	0
b	Fair market value of all other assets (see instructions)	1b	67,615
c d	Total (add lines 1a, b, and c)	1c	07.045
e	Reduction claimed for blockage or other factors reported on lines 1a and	10	67,615
·	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	67.646
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see	-	67,615
•	instructions)	4	67.645
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	67,615
6	Minimum investment return. Enter 5% of line 5	6	
Part			
, ur	and certain foreign organizations, check here ► and do not complete this part.)	odildatioi	13
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	
Part	XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	315,633
b	Program-related investments—total from Part IX-B	1b	010,000
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	(
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	(
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	315,633
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		0.0,000
_	Enter 1% of Part I, line 27b. See instructions	5	(
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	315,633
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	<u> </u>	
	qualifies for the section 4940(e) reduction of tax in those years.	J	

	XIII Undistributed Income (see instruction	ne)			Page 3
	Ondistributed income (see instruction	(a)	(b)	(c)	(d)
	_	Corpus	Years prior to 2018	2018	2019
1	Distributable amount for 2019 from Part XI, line 7				0
2 a	Undistributed income, if any, as of the end of 2019: Enter amount for 2018 only			0	
b	Total for prior years: 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2015				
C	From 2016				
đ	From 2017				
е	From 2018				
f	Total of lines 3a through e	2,324,987			
4	Qualifying distributions for 2019 from Part XII, line 4: ► \$				
а	Applied to 2018, but not more than line 2a .	1.7		0	
b	Applied to undistributed income of prior years (Election required—see instructions)		0	·· = ·····························	
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2019 distributable amount				
e	Remaining amount distributed out of corpus	315,633			
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,640,620			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed				
Ū	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		o o		
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0		
e	Undistributed income for 2018. Subtract line		•	<u></u>	
6	4a from line 2a. Taxable amount—see instructions			O	
f	Undistributed income for 2019. Subtract lines			_	
•	4d and 5 from line 1. This amount must be distributed in 2020				
7	Amounts treated as distributions out of corpus				
•	to satisty requirements imposed by scction 170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)	0	_		
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	264,226			
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	2,376,394			
10	Analysis of line 9:				
а	Excess from 2015				
b	Excess from 2016				}
С	Excess from 2017				
d	Excess from 2018 258,644				
_	Evenes from 2010 215 622		! 1		1

F	, , , , , , , , , , , , , , , , , , ,					
Part	NO-PF (2019) XIV Private Operating Founda	tions (see instr	uctions and Part	VII-A guestion 9))	Page 10
_	If the foundation has received a ruling					<i></i>
•	foundation, and the ruling is effective fo				Part XIV no	ot applicable
b	Check box to indicate whether the four	ndation is a privat	e operating founda	tion described in se	ection 2/4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each year listed	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
b	85% of line 2a					
C	Qualifying distributions from Part XII, line 4, for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets					
b	section 4942(j)(3)(B)(i)					
	Part X, line 6, for each year listed					
C	"Support" alternative test—enter:		X			
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 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					
	(4) Gross investment income	/				
Part				the foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-		ns.)			A1
1	Information Regarding Foundation					
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only ii triey riave t	onthoused more ti	nan \$5,000). (See s	ection 507(a)(2).)	
none b	List any managers of the foundation ownership of a partnership or other e			•		arge portion of the
none	, , ,	77 = 1 3 · · · · · · · · · · · · · · · · · ·				
2	Information Regarding Contribution Check here ▶ ☑ if the foundation unsolicited requests for funds. If the f complete items 2a, b, c, and d. See in	only makes confoundation makes	tributions to prese	elected charitable		
а	The name, address, and telephone nu		dress of the perso	on to whom applica	tions should be a	ddressed:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

b The form in which applications should be submitted and information and materials they should include:

not applicable

c Any submission deadlines:

Total

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to any foundation manager Purpose of grant or status of Amount contribution Name and address (home or business) recipient or substantial contributor a Paid during the year Shelter by Jesus-Lewiston, ME 501c3 Shelter & feeding 10,000 Care Corp-Flower Mt, TX 501c3 Disaster Relief 5,000 Connecting Hope-Barre, VT 501c3 People in poverty 10,000 **Emmaus Teams Christ Church-Gray, ME** 501c3 Ministry of compassion to aged 25,000 **Enough Ministries-Barre, VT** 501c3 **Needy People** 5.000 House of Hope Mission-Beerwick, ME 501c3 Feeding program 10.000 New Hope Women'sw Shelter-Solon, ME 501c3 Homeless women's shelter 10.000 Re-Entry Ministry-Bridgeport, CT 501c3 Rehab addicted women 20.000 Restore Haiti-Franklin, TN 501c3 Enabling Self-sufficiency 3,000 Root Cellar-Lewiston & Portland, ME 501c3 Needy families 30,000 Route One Boston, Boston, MA 501c3 Ministry to sex trafficing victims 15,000 501c3 The Boston Project Ministries, Dorchester, MA **Building community** 10,000 Rise Again Outreach, Loudon NH 501c3 Assist people in poverty 5,000 501c3 Living to Last, Westbrook, ME Helping people help themselves 3,000 Lydia's House of Hope, Somersworth, NH 501c3 Ministry to women (houing-job pre 5,000 **Ludington Grants, Ludington, Mich** 501c3 feeding, shelter, homeles programs 14,000 180,000 Approved for future payment NONE

nter	gross am	ounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by section	on 512, 513, or 514	(e)
	_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1	_	service revenue:					,
	a <u>NONE</u>				 		
	_	·					
	<u> </u>				- · · · · · · · · · · · · · · · · ·	·	
	a		<u> </u>				
	e		1				
	- Feee	and contracts from government agencies					
2	-				 		
		hip dues and assessments					
3		and interest from securities					[
5		income or (loss) from real estate:	1	- 12 11 1, 1 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	11 September 19 accorden	ESSENTE CORRESPONDE DE COMPANS DE COMP	n- 7 -== ar -{-1+q •
•		financed property					
		ebt-financed property					
		income or (loss) from personal property	 		-		· · · · · · · · · · · · · · · · · · ·
		estment income			 		
		ss) from sales of assets other than inventory				 	
	•	ne or (loss) from special events			 		
		ofit or (loss) from sales of inventory			1		
	Other reve	, ,					
	h						
	d						
	e			-			
12	Subtotal.	Add columns (b), (d), and (e)					
						13	
13	Total. Add	d line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculation				13	
13 See	Total. Add	d line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculation	ıs.)			13	
13 See Par Line	Total. Add worksheet t XVI-B	d line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculation	s.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Par Line	Total. Add worksheet t XVI-B	d line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) Accomplishm	ent of Exemp	t Purposes		mportantly to the tions.)
13 See Par Line	Total. Add worksheet t XVI-B	d line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculation Relationship of Activities to the A	s.) Accomplishm	ent of Exemp	t Purposes		mportantly to the ctions.)
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13 See Par Line	Total. Add worksheet t XVI-B	d line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) Accomplishm	ent of Exemp	t Purposes		mportantly to the
13 See Par Line	Total. Add worksheet t XVI-B	d line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) Accomplishm	ent of Exemp	t Purposes		mportantly to the otions.)
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13 See Par Line	Total. Add worksheet t XVI-B	d line 12, columns (b), (d), and (e) t in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) Accomplishm	ent of Exemp	t Purposes		mportantly to the otions.)

Par	- 										ge 13
	XVII	Information Organization		sfers to and Transactio	ns and F	lelationship	s With N	lonchari	itable	Exe	mpt
1	Did 1	the organization o	directly or indirectly e	engage in any of the following	a with an	v other organ	ization de	scribed	'	Yes	No
	in s			501(c)(3) organizations) or							
а	Tran	sfers from the rep	porting foundation to	a noncharitable exempt or	anization	of:					
									1a(1)		<u> </u>
									1a(2)		√
b	Othe	er transactions:									
	(1) 5	Sales of assets to	a noncharitable exe	mpt organization					1b(1)		-
	(2) F	ourchases of asse	ets from a noncharita	ble exempt organization .					1b(2)		1
	(3) F	Rental of facilities,	, equipment, or other	rassets					1b(3)		$\overline{}$
	(4) F	Reimbursement ai	rrangements						1b(4)		√
	(5) l	oans or loan gua	rantees						1b(5)		✓
	(6) F	Performance of se	ervices or membersh	ip or fundraising solicitation	s				1b(6)		✓
C	Shai	ring of facilities, e	quipment, mailing lis	its, other assets, or paid em	ployees				1c		✓_
d				s," complete the following s							
				ces given by the reporting for							
(-) 11-				ement, show in column (d) t							
(a) Lin	e no	(b) Amount involved	(c) Name of nonch	aritable exempt organization	(d) Desci	rption of transfe	rs, transaction	ns, and shar	ing arrai	ngeme	ents
	- +				ļ			······			
			NONE		 						
				·····							
				 							
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	+				-		<u> </u>				
-	-		<u>. </u>		 				<u> </u>		
2a	ls th	ne foundation dire	ectly or indirectly af	filiated with, or related to,	one or m	ore tax-exer	nnt organi	izations			
				ction 501(c)(3)) or in section					□ Yes	s 🗹	No
ь			e following schedule.	(// // / / / / / / / / / / / / / / / /				•	0	ت ،	
		(a) Name of organ		(b) Type of organization			(c) Descriptio	n of relation	ship		
							· · · · · · · · · · · · · · · · · · ·				
				***************************************					•		
											
		· · · · · · · · · · · · · · · · · · ·				·	 				
				d this return, including accompanying				my knowled	ge and b	elief, it	ıs true,
Sigr	con	rect and complete Decl	laration of preparer (other that Digitally sign	n taxpayer) is based on all information	of which prep	parer has any kno	wledge	May the IR	S discus	s this i	meturn
Her		1 +- 1	Baker Date, 2020.0	1		ard Member		with the pro	eparer sh	own be	elow?
- • •	Sig	in wallen	-04'00'	Date Title				See instruct	tions [∫Yes[_No
Paid		Print/Type preparer	r's name	Preparer's signature		Date	Chan	k ıf F	PTIN		
								mployed			
	arer Only					•	Firm's EIN	<u> </u>			
しっせ	Uilly	Firm's address ▶					Phone no				

Schedulè B

(Form 990, 990-EZ. or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Employer identification number

2019

PRUTEI	V FOUNDATION			06-1046591
Organiz	ation type (check or	ne):		
Filers o	f:	Section:		
Form 99	0 or 990-EZ	☐ 501(c)() (enter number) organization	
		☐ 4947(a)(1) nor	nexempt charitable trust not treated as a private for	undation
		☐ 527 political of	organization	
Form 99	00-PF	√ 501(c)(3) exer	mpt private foundation	
		☐ 4947(a)(1) nor	nexempt charitable trust treated as a private founda	ation
		☐ 501(c)(3) taxa	able private foundation	
	nly a section 501(c)(7	-	eneral Rule or a Special Rule. Dization can check boxes for both the General Rule a	and a Special Rule. See
Genera	l Rule			
Ø		r property) from an	90-EZ, or 990-PF that received, during the year, con my one contributor. Complete Parts I and II. See inst	
Special	Rules			
	regulations under se 13, 16a, or 16b, and	ections 509(a)(1) an I that received from	on 501(c)(3) filing Form 990 or 990-EZ that met the 3 nd 170(b)(1)(A)(vi), that checked Schedule A (Form 9 n any one contributor, during the year, total contribu Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line	90 or 990-EZ), Part II, line utions of the greater of (1)
	contributor, during t	he year, total contr	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the ributions of more than \$1,000 exclusively for religious the prevention of cruelty to children or animals. Co	ıs, charitable, scientific,
	contributor, during t contributions totaled during the year for a General Rule applie	he year, contribution If more than \$1,000 In exclusively religion If the this organizations is to this organization.	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the ons <i>exclusively</i> for religious, charitable, etc., purpos 0. If this box is checked, enter here the total contribus, charitable, etc., purpose. Don't complete any clion because it received <i>nonexclusively</i> religious, chart	ses, but no such utions that were received of the parts unless the aritable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

PROTEIN FOUNDATION

06-1046591

PROTEIN	FOUNDATION		06-1046591
Part I	Contributors (see instructions). Use duplicate co	ppies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1	HOUSE OF FLAVORS 110 NORTH WILLIAM STREET LUDINGTON, MICHIGAN 49431	\$ 250,000	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

	(Form 990, 990-EZ, or 990-PF) (2019)	· · · · · · · · · · · · · · · · · · ·	Page
	rganization		Employer identification number
·	FOUNDATION		06-1046591
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
	PART II - NONE		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Name of organization **Employer identification number PROTEIN FOUNDATION** 06-1046591 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held None for Part III (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

PROTEIN FOUNDATION

06-1046591

SCHEDULE IN SUPPORT OF FORM PF990 -- 2019

Part X -- Line 4 -- Explanation of "cash deemed held for charitable purpose"

The amount of cash deemed held for charitable purpose of \$67,615 will be used to compensate the Managing Director for duties performed and for grants in 2019.

PROTEIN FOUNDATION

06-1046591

SCHEDULE IN SUPPORT OF FORM PF990 -- 2018

Part I -- Line 23 - Other Exp

Expenses incrurred to increase knowledge about activities of grantees described in Part IX-A (principally site visitations)

S

8,091