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OMB No. 1545-0052

2019

# **Return of Private Foundation**

Form 990-PF

Department of the Treasury

Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
 Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2019, or tax year beginning 01-01-20	)19 , ar	nd ending 12-31	-2019	
		Indation FOUNDATION		A Employer ic	lentification numbe	r
				20-4956488		
		I street (or P.O. box number if mail is not delivered to street address) MERCIAL STREET	Room/suite	<b>B</b> Telephone nu	ımber (see instructio	ns)
		, state or province, country, and ZIP or foreign postal code ME 04856		<b>C</b> If exemption	application is pendin	g, check here
G Ch	eck al	I that apply:	former public charity	D 1. Foreign or	ganizations, check he	ere $\Box$
		Final return Amended return	ronnon parme emante,	_	rganizations meeting	▶ ⊔
		Address change Name change			k here and attach co	
H Ch	eck tv	pe of organization: Section 501(c)(3) exempt private	foundation		undation status was t	
		· · · · · · · · · · · · · · · · · · ·	e private foundation	under section	on 507(b)(1)(A), chec	k nere
		set value of all assets at end  J Accounting method:		F If the found	ation is in a 60-mont	h termination 🖂
		rom Part II, col. (c), ▶\$ 19,542,866		under sectio	on 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Bayanya and			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)				
	2	Check ▶ ☑ if the foundation is <b>not</b> required to attach				
	_	Sch. B				
	3	Interest on savings and temporary cash investments	10			
	4	Dividends and interest from securities	412,722	412,722	:	
	5a b	Net rental income or (loss)				
a)	6a	Net gain or (loss) from sale of assets not on line 10	312,176			
Revenue	b	Gross sales price for all assets on line 6a				
Sev	7	Capital gain net income (from Part IV, line 2)		312,176		
	8	Net short-term capital gain		312,170		
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less: Cost of goods sold				
	С	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	<b>%</b> 86,530	86,530	)	
	12	Total. Add lines 1 through 11	811,438	811,438	3	
	13	Compensation of officers, directors, trustees, etc.	310,897			310,897
	14	Other employee salaries and wages				
Ş	15	Pension plans, employee benefits	44,409	44,409	)	
1156	16a	Legal fees (attach schedule)				
<u>ş</u>	b	Accounting fees (attach schedule)	11,500	11,500	)	
Operating and Administrative Expenses	С	Other professional fees (attach schedule)	<b>9</b> 85,713			85,713
Ĕ	17	Interest	15	15	;	
stra	18	Taxes (attach schedule) (see instructions)	40,781	16,997	,	23,784
Ē	19	Depreciation (attach schedule) and depletion	3,242	3,242		
ŧ	20	Occupancy	1,992	1,992		
Υ	21	Travel, conferences, and meetings	14,224			14,224
ali	22	Printing and publications				
<u>bi</u>	23	Other expenses (attach schedule)	19,722	7,426	j	12,296
rati	24	Total operating and administrative expenses.				
De l		Add lines 13 through 23	532,495	85,581		446,914
0	25	Contributions, gifts, grants paid	372,981			372,981
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	905,476	85,581		819,895
	27	Subtract line 26 from line 12:				
	а	Excess of revenue over expenses and	04.020			
	b	disbursements  Net investment income (if negative, enter -0-)	-94,038	725,857	,	
	c	Adjusted net income (if negative, enter -0-)		/23,63/		
For		work Reduction Act Notice, see instructions.		Cat No. 11390		

Form 990	P-PF (2019)				Page <b>2</b>
Part II	Balance Sheets Attached schedules and amounts in the de		Beginning of year	End o	
1	should be for end-of-year amounts only. (  Cash—non-interest-bearing		(a) Book Value 29,173	<b>(b)</b> Book Value 50,713	(c) Fair Market Value 50,713
2	Savings and temporary cash investments		3,605,933	2,047,193	2,047,193
	Accounts receivable		3,003,933	2,047,193	2,047,193
3	Less: allowance for doubtful accounts				
4	Pledges receivable				
_	Less: allowance for doubtful accounts				
5	Grants receivable				
6	Receivables due from officers, directors, trustees, and o				
	disqualified persons (attach schedule) (see instructions)				
7	Other notes and loans receivable (attach schedule)				
	Less: allowance for doubtful accounts ▶				
হ ৪	Inventories for sale or use				
Assets	Prepaid expenses and deferred charges		10,317	16,432	16,432
<b>🏅</b> 10a	Investments—U.S. and state government obligations (at	tach schedule)			
b	Investments—corporate stock (attach schedule)		3,841,701	4,647,057	4,647,057
С	Investments—corporate bonds (attach schedule)		7,306,050	9,243,858	9,243,858
11	Investments—land, buildings, and equipment: basis $lacktriangle$				
	Less: accumulated depreciation (attach schedule) $ hilder$				
12	Investments—mortgage loans				
13	Investments—other (attach schedule)		3,099,598	3,201,690	3,201,690
14	Land, buildings, and equipment: basis ▶	56,304			
	Less: accumulated depreciation (attach schedule) $\blacktriangleright$ 42,	305	314,508	<b>9</b> 313,999	313,999
15	Other assets (describe >	)	16,303	21,924	21,924
16	Total assets (to be completed by all filers—see the				_
	instructions. Also, see page 1, item I)		18,223,583	19,542,866	19,542,866
17	Accounts payable and accrued expenses				
18	Grants payable				
	Deferred revenue				
Liabilities 20 21	Loans from officers, directors, trustees, and other disqu	alified persons			
ਨ ਲ 21	Mortgages and other notes payable (attach schedule).	· ·			
コ	Other liabilities (describe		5,919	<b>4</b> ,334	
23	Total liabilities(add lines 17 through 22)	, i	5,919	4,334	
	,	. 7	· ·		
Ş	Foundations that follow FASB ASC 958, check here				
) E	and complete lines 24, 25, 29 and 30.				
[ 24	Net assets without donor restrictions		18,217,664	19,538,532	
필 <sup>25</sup>	Net assets with donor restrictions				
<u>.</u> 5	Foundations that do not follow FASB ASC 958, che	ck here 🕨 🔲			
=	and complete lines 26 through 30.				
S 26	Capital stock, trust principal, or current funds				
<b>27</b>	Paid-in or capital surplus, or land, bldg., and equipment	fund			
Š 28	Retained earnings, accumulated income, endowment, or	other funds			
Net Assets or Fund Balances	Total net assets or fund balances (see instructions)		18,217,664	19,538,532	
2 30	Total liabilities and net assets/fund balances (see	instructions) .	18,223,583	19,542,866	

Part III

2

3

4

6

Analysis of Changes in Net Assets or Fund Balances

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

Decreases not included in line 2 (itemize) ▶.

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

18,217,664

1,415,721

19,539,347

19,538,532

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-94,038

815

1 2

3

**4** 5

6

	e the kind(s) of property sold (e.g., rehouse; or common stock, 200 shs	. MLC Co.) P-	(b) v acquired Purchase Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b> See Additional Data Table	e				
b					
c					
d					
e					
<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other b plus expense of		Gain o	<b>h)</b> r (loss) ) minus (g)
a See Additional Data Table	e				
b					
c					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation on 12/	31/69	(	I)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col. over col. (j), if		Gains (Col. ( col. (k), but not	h) gain minus less than -0-) <b>or</b> om col.(h))
a See Additional Data Table	e				
b					
c					
d					
e					
	gain or (loss) as defined in sections 1 rt I, line 8, column (c) (see instructions 1 rt I.	. , , , ,	}	3	312,17
Part V Qualification U	Jnder Section 4940(e) for Re	educed Tax on Net Inve	stment In	come	
	rivate foundations subject to the sec				
if section 4940(d)(2) applies, le Was the foundation liable for th	eave this part blank. e section 4942 tax on the distributal	ble amount of any year in the			es 🗹 No
·	t qualify under section 4940(e). Do				
	nount in each column for each year; T	see instructions before makin	ig any entrie:		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use a		(d) Distribution rati (col. (b) divided by c	ol. (c))
2018	14,856,943	<u>'</u>	6,687		0.804963
2017	15,010,488		5,941		0.936053
2016	17,366,197		8,830		1.013858
2015	18,006,568 19,145,855		1,761		0.949625
2014	· · · · · ·	19,61	1,882	T	0.976238
2 Total of line 1, column (c			2		4.680736
number of years the foun	for the 5-year base period—divide I dation has been in existence if less ncharitable-use assets for 2019 from	than 5 years	3 4		0.936147 18,605,486
<b>5</b> Multiply line 4 by line 3			5		17,417,470
<b>6</b> Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		7,259
<b>7</b> Add lines 5 and 6			7		17,424,729
8 Enter qualifying distributi	ons from Part XII, line 4 ,		8		17,912,500
If line 8 is equal to or greinstructions.	ater than line 7, check the box in Pa	art VI, line 1b, and complete t	hat part usin	ig a 1% tax rate. Se	e the Part VI

	990-F1 (2019)		- 4-20.14	<b>—</b> • • • • • • • • • • • • • • • • • • •	,		P	age (
श्च		ing Activities for Which	Form 4720 May Be	Required (continued)	<i>)</i>			
ā	During the year did the foundation p	·					Yes	No
	(1) Carry on propaganda, or otherw	ise attempt to influence legisl	ation (section 4945(e))?	☐ Yes ि	<b>✓</b> No			
	(2) Influence the outcome of any sp	ecific public election (see sect	tion 4955); or to carry					
	on, directly or indirectly, any vot	er registration drive?		· · 🗌 Yes 🛭	✓ No			
	(3) Provide a grant to an individual	for travel, study, or other sim	ilar purposes?	☐ Yes ☐	▼ No			
	(4) Provide a grant to an organization	on other than a charitable, etc	, organization described		<u> </u>			
	in section 4945(d)(4)(A)? See in	structions		· · □ v [	✓ No			
	(5) Provide for any purpose other th	an religious, charitable, scien	tific, literary, or	· · L Yes	<b>⊻</b> No			
	educational purposes, or for the	prevention of cruelty to childr	en or animals?		<del></del>			
b	If any answer is "Yes" to $5a(1)-(5)$ ,	•		Ceptions described in	<b>⊻</b> No			
	Regulations section 53.4945 or in a	•		•		5b		
	Organizations relying on a current no			_	t			
_	If the answer is "Yes" to question 5a				ШΙ			
	tax because it maintained expenditu	• • •	•		_			
	If "Yes," attach the statement requir			' '	_ No			
	•	· -						
ìа	Did the foundation, during the year,	, , ,						
	a personal benefit contract?			⊔ Yes D	<b>✓</b> No			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be	nefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.							
'a	At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter tra	nsaction? Yes	✓ No			
b	If "Yes", did the foundation receive a	any proceeds or have any net	income attributable to the			7b		
3	Is the foundation subject to the sect	ion 4960 tax on payment(s) o	of more than \$1,000,000	in remuneration or				
	excess parachute payment during th	e year?		· · 🗌 Yes	<b>√</b> N° [			
	Information About O	fficers, Directors, Trust	tees. Foundation Ma			ees.		
Pai	t VIII and Contractors	, 2, 11	,		,	,,		
1	List all officers, directors, trustee	s. foundation managers ar	nd their compensation	See instructions				
	List an officers, an ectors, trustee	(b) Title, and average	(c) Compensation (If	(d) Contributions to	1,,	_		
	(a) Name and address	hours per week	not paid, enter	employee benefit plans a			ise acci	
		devoted to position	-0-)	deferred compensation	י ו	iller ai	lowanic	.63
ee A	Additional Data Table							
2	Compensation of five highest-pai	d employees (other than t	l hose included on line :	l —see instructions). If ⊢	none, er	ter "l	NONE.	71
	<b>, , ,</b>			(d) Contributions to	1			•
a)	Name and address of each employee [	paid (b) Title, and average hours per week	(c) Compensation	employee benefit			se acco	
	more than \$50,000	devoted to position	(c) compensation	plans and deferred	otl	ner all	owance	es
				compensation				
ONI	<u> </u>							
					$\perp$			
nt2	I number of other employees paid ove	r \$50 000.						
Jid	Hamber of other employees paid over		<del></del>		Farr	~ QQ(	0-PF (	2010
					LOL	□ プラし	5-PF (	Z019

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Part VIII Information About Officers, Directors, Trus and Contractors (continued)	tees, Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional	services (see instructions). If none, enter "NOI	NF".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
GOLDMAN SACHS	MANAGE FUNDS	85,713
200 WEST ST 39TH FLOOR NEW YORK, NY 10282	1	
	1	
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities	5	
List the foundation's four largest direct charitable activities during the tax year. Incl organizations and other beneficiaries served, conferences convened, research paper		Expenses
1 NATIONAL FRAGILE X FOUNDATION		50,000
2 MAINE FAMILY PLANNING		25,000
3 PLANNED PARENTHOOD		25,000
4 SMITHSONIAN INSTUTION LIBRARIES		20,000
Part IX-B Summary of Program-Related Investments	(see instructions)	_
Describe the two largest program-related investments made by the foundation of	during the tax year on lines 1 and 2.	Amount
1 GOLDMAN SACHS VARIOUS FUNDS STATEMENTS 137 & 138		13,890,915
2 OTHER INVESTMENTS STATEMENT 118		3,201,690
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		
Total: Add lines I tillough 3		17,092,605
		Form <b>990-PF</b> (2019)

4

5

6

7

1a

1b

2

3a 3b

4

5

923.015

923.015

819,895

17,092,605

17,912,500

17,905,241

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7.259

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

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

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

4 5

6

1

2

3

4

5

b

Part XII

a From 2014. . . . . **b** From 2015. . . . . c From 2016. . . . d From 2017. . . . .

e From 2018. . . . .

a Applied to 2018, but not more than line 2a

e Remaining amount distributed out of corpus

6 Enter the net total of each column as

**b** Prior years' undistributed income. Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . **d** Subtract line 6c from line 6b. Taxable amount —see instructions . . . . . . . . . . . . . e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . 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 satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2020.

10 Analysis of line 9: a Excess from 2015. . . **b** Excess from 2016. . c Excess from 2017. . . .

d Excess from 2018. . . e Excess from 2019. .

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

indicated below:

**5** Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

same amount must be shown in column (a).)

923,015

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P	art XIII	Undistributed Income (see instru	ctions)
1	Distributah	le amount for 2019 from Part XI, line 7	

Undist a Enter **b** Total

	(a) Corpus
butable amount for 2019 from Part XI, line 7	
stributed income, if any, as of the end of 2019:	
amount for 2018 only	
for prior years: 20	

3 Excess distributions carryover, if any, to 2019:

174,778

f Total of lines 3a through e. . . . . . . 4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ 17,912,500

**b** Applied to undistributed income of prior years

(Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . **d** Applied to 2019 distributable amount. . . . .

174,778

819.895

819.895

994,673

994,673

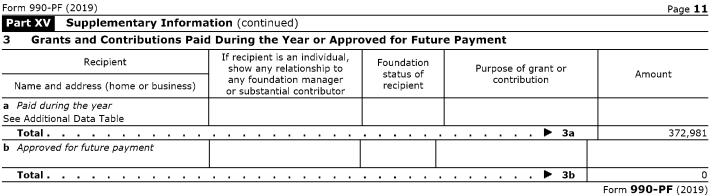
174.778

(b)

Years prior to 2018

(c)

2018



9.000	amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
	and contracts from government agencies					
_	rship dues and assessments					
3 Interest	t on savings and temporary cash			14	256,872	
<b>4</b> Dividen	ds and interest from securities			14	155,860	
	tal income or (loss) from real estate:			<u> </u>		
a Debt-	financed property					
	ebt-financed property					
	tal income or (loss) from personal property					
	nvestment income.					
Gain or invento	(loss) from sales of assets other than				242.476	
	ome or (loss) from special events:			18	312,176	
	profit or (loss) from sales of inventory					
1 Other r	,					
a OTHER	INVEST GAIN			18	86,530	
b						
	al. Add columns (b), (d), and (e).    . Add line 12, columns (b), (d), and (e).    .    .			1 1	811,438	811,438
	orksheet in line 13 instructions to verify calcu			13	·	011,430
Part XVI			ment of Exem	pt Purposes		
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's expressions are supplied to the second s					
	instructions.)					

Form 990-PF (	<u> </u>							Pa	ge <b>13</b>
Part XVII	Information Regardi Exempt Organization	ıs				·			
	panization directly or indirectly than section 501(c)(3) organiz						501	Yes	No
. , .	rom the reporting foundation	•			-				
<b>(1)</b> Cash.							1a(1)		No
(2) Other	assets						1a(2)		No
<b>b</b> Other trans	sactions:								
	of assets to a noncharitable e						1b(1)		No
	ases of assets from a nonchar						. 1b(2)		No
• •	l of facilities, equipment, or of						. 1b(3)		No
	oursement arrangements.						1b(4)	_	No
	or loan guarantees						1b(5)		No
	mance of services or members	•	_				1b(6)		No
_	facilities, equipment, mailing ver to any of the above is "Yes	=					1c_		No
of the good in any tran	ds, other assets, or services gisaction or sharing arrangeme  (b) Amount involved (c) Na	nt, show in	column (d	oundation. If the  the value of the	e goods, other asse	ed less than fair market ts, or services received transfers, transactions, and	•	ingemen	ts
<del></del>									
2a Is the foun	dation directly or indirectly af	filiated with	h or related	I to one or more	tay-eyempt organ	izations			
described i	n section 501(c) (other than somplete the following schedule	ection 501	.(c)(3)) or ir	section 527? .		🗆 Yes	<b>✓</b> No		
	(a) Name of organization		(b	) Type of organizati	on	(c) Description of r	elationship		
of m	er penalties of perjury, I decla y knowledge and belief, it is tr h preparer has any knowledge	ue, correct		,		than taxpayer) is based	d on all info	rmatior	n of
Here 1	*****			2020-11-16	*****		lay the IRS d eturn	iscuss th	IIS
	Signature of officer or trustee			Date	Title	b	vith the prepa elow see instr.)	_	
•	Print/Type preparer's name	Pren	parer's Sign	ature	Date	PTI			
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Check if self-		1205	
Paid	ROBERT G WILKINS EA				2020-11-16	employed ▶ □	P0017	J2 <b>3</b> 3	
Preparer Use Only	Firm's name ► PDQ TAX Si	RVICE INC	C			Firm	n's EIN ▶03	-03064	170
-	Firm's address ► 51 ADAM	S DRIVE							
	ST JOHNS	BURY, VT	05819254	1		Pho	Phone no. (802) 748-3382		3382

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) Date sold (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired (mo., day, yr.) (mo., day, yr.) P-Purchase D-Donation Ρ 2012-12-31 2019-12-31 PUBLICALLY TRADED STOCK Р 2014-12-31 2019-12-31 PUBLICALLY TRADED STOCK Р 2016-12-31 2019-12-31 PUBLICALLY TRADED STOCK Р 2017-12-31 2019-12-31 Ρ PUBLICALLY TRADED STOCK 2018-12-31 2019-12-31 2019-01-31 2019-12-31 PUBLICALLY TRADED STOCK Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 136,106 30,970 105,136 362,365 -50,311 412,676 833,681 831,710 1,971 951,796 841,670 110,126 1,274,294 1,244,845 29,449 8,906,896 8,791,091 115,805 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (i) as of 12/31/69 (k) over col. (j), if any

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation DANIEL DIBNER 🐒 MANAGER 110,185 O 35.00 688 COMMERCIAL STREET ROCKPORT, ME 04856 VICTORIA C DIBNER 🐒 ASST MANAGER 110,185 25 00 OLD LYME, CT 06371 AVALON D FENNESSEY 🛸 DIRECTOR 12,000 5.00 47 EAST MEADOW ROAD

66,527

688 COMMERCIAL STREET ROCKPORT, ME 04856	35.00			
AURORA C DIBNER 🥞	DIRECTOR 5.00	12,000	0	(
16 MANSEWOOD ROAD	] 5.00			

DIRECTOR

35.00

WILTON, CT 06897 BERN L DIBNER 🥞

688 COMMERCIAL STREET ROCKPORT, ME 04856

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

Hame and dadress (nome or business)	or substantial contributor			
a Paid during the year				
FARNSWORTH ART MUSEUM	NONE	PC	SUPPORT FINE ARTS	10,611

FARNSWORTH ART MUSEUM 16 MUSEUM STREET ROCKLAND, ME 04841	NONE	PC	SUPPORT FINE ARTS	10,611
FOSTER CARE TO SUCCESS 23811 CHAGRIN BLVD	NONE	PC	YOUTH MENTORPROGRAMUNDER PRIVILEDGE	10,000

ROCKLAND, ME 04841				
FOSTER CARE TO SUCCESS 23811 CHAGRIN BLVD BEACHWOOD, OH 44122	NONE	PC	YOUTH MENTORPROGRAMUNDER PRIVILEDGE	10,000
FRIENDS OF THE STRAND THEATRE P O BOX 433	NONE	PC	PAID TO UPGRADEDIGITAL SCANNER	10,000

23811 CHAGRIN BLVD BEACHWOOD, OH 44122			PRIVILEDGE	
FRIENDS OF THE STRAND THEATRE P O BOX 433 ROCKLAND, ME 048410433	NONE	PC	PAID TO UPGRADEDIGITAL SCANNER	10,000
Total			▶ 3a	372,981

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NIONE 00

JACKSON LABORATORYP O BOX 254 BAR HARBOR, ME 046090254	NONE	PC	HEALTH SERVICES	10,000
2301 NORTH CENTRAL AVENUE PHOENIX, AZ 85004	NONE	۲۵	INDIANCULTURE OPERATING EXPS	5,000

JACKSON LABORATORYP O BOX 254 BAR HARBOR, ME 046090254	NONE	PC	HEALTH SERVICES	10,00
KNOX COUNTY HEALTH CLINIC 22 WHITE STREET ROCKLAND ME 04841	NONE	PC	FREE HEALTHSERVICE FOR THEPOOR OPERATING	10,00

Total			▶ 3a	372,981
KNOX COUNTY HEALTH CLINIC 22 WHITE STREET ROCKLAND, ME 04841	NONE	PC	FREE HEALTHSERVICE FOR THEPOOR OPERATING	10,000
BAR HARBOR, ME 040090234				

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

a Paid during the year				
MAINE FAMILY PLANNINGP O BOX 587 AUGUSTA, ME 043320587	NONE	PC	FAMILY PLANNINGSERVICES	25,000

AUGUSTA, ME 043320587				
MARITIME AQUARIUM 10 NORTH WATER STREET	NONE	PC	CHILD TEACHING CTR COMPLETEFOR POOR CHILDREN	130

ı	MARITIME AQUARIUM 10 NORTH WATER STREET NORWALK, CT 06854	NONE		CHILD TEACHING CTR COMPLETEFOR POOR CHILDREN	13
	MEALS ON WHEELSAG SLIMMED STREET	NONE	DC.	ODEDATING EVDS	5.00

NORWALK, CT 06854			COMPLETEFOR POOR CHILDREN	
MEALS ON WHEELS46 SUMMER STREET	NONE	PC	OPERATING EXPS	5,000

IORWALK, CT 06854				
MEALS ON WHEELS46 SUMMER STREET	NONE	PC	OPERATING EXPS	5,00

MEALS ON WHEELS46 SUMMER STREET ROCKLAND, ME 048412989	NONE	PC	OPERATING EXPS	5,000

ROCKLAND, ME 048412989		
Total	 	<b>▶ 3a</b> 372,981

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

a Paid during the year

Total . .

MED CED MUCEUM	NONE	D.C.	DESTODE MEDSER HOME FOR	10.000
MEGUNTICOOK ROWINGP O BOX 855 CAMDEN, ME 048430855	NONE	PC	PUBLIC ROWINGEDUCATION	5,000
a Falu during the year				

1					
	MERCER MUSEUM 84 SOUTH PINE STREET DOYLESTOWN, PA 18901	NONE	PC	RESTORE MERCER HOME FOR FURTURE GENERATIONS	10,000
ı					

84 SOUTH PINE STREET DOYLESTOWN, PA 18901			FURTURE GENERATIONS	
NEW HOPE FOR WOMENP O BOX A ROCKLAND, ME 04841	NONE	PC	SUPPORTS WOMENSHELTER	10,000

DOYLESTOWN, PA 18901				
NEW HOPE FOR WOMENP O BOX A ROCKLAND, ME 04841	NONE	PC	SUPPORTS WOMENSHELTER	10,0
				i

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

a Paid during the year				
REEF RELIEFP O BOX 430 KEY WEST, FL 33040	NONE	PC	ENVIRONMENTALRESEARCH	10,000

Y WEST, FL 33040			
VE THE CHILDREN	NONE	PC	CHILD CHARITY

Total .

	SAVE THE CHILDREN 501 KINGS HIGHWAY EAST STE 500 FAIRFIELD, CT 06825	NONE	PC	CHILD CHARITY	1
H	· ·				

SAVE THE CHILDREN 501 KINGS HIGHWAY EAST STE 500 FAIRFIELD, CT 06825	NONE	PC	CHILD CHARITY	1,500
STATION MAINE75 MECHANIC STREET	NONE	PC	MARITIME ANDCHILDEDUCATION	5,000

FAIRFIELD, CT 06825				
STATION MAINE75 MECHANIC STREET ROCKLAND, ME 04841	NONE	PC	MARITIME ANDCHILDEDUCATION PROGRAM	5,000

STATION MAINE75 MECHANIC STREET ROCKLAND, ME 04841	NONE	PC	MARITIME ANDCHILDEDUCATION PROGRAM	5,00

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

, ,	or substantial contributor			
a Paid during the year				
STEPPING STONES MUSEUM FOR CHILDREN MATHEWS PARK 303 WEST AVENUE NORWALK, CT 06850	NONE	PC	EXPENSES FOR CHILDREN PROJECTS	400

NORWALK, CT 06850				
VICTORIA MANSION 109 DANFORTH STREET PORTLAND, ME 04101	NONE	PC	1864 MANSIONRESTORATION	10,000

VICTORIA MANSION 109 DANFORTH STREET PORTLAND, ME 04101	NONE	PC	1864 MANSIONRESTORATION	10,000
WEATHERVANE THEATREP O BOX 127 WHITEFIELD, NH 035980127	NONE	PC	THEATRE PRODUCTIONS	1,000

▶ 3a

372,981

109 DANFORTH STREET PORTLAND, ME 04101				
WEATHERVANE THEATREP O BOX 127 WHITEFIELD, NH 035980127	NONE	PC	THEATRE PRODUCTIONS	1,000

Total .

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

THESON BODES BARABER S BOY 1700	NONE	DC	ARTS AND SHITTIRE	1 000
421 SUMMER STREET SAINT JOHNSBURY, VT 05819	inone.		T SIND IN LIBER	300
ST JOHNSBURY HISTORICAL SOCIETY	NONE	PC	FUNDRAISER	500
1				

SAINT JOHNSBORT, VI 03019				
TUCSON RODEO PARADEP O BOX 1788 TUCSON, AZ 85714	NONE	PC	ARTS AND CULTURE	1,000
DESERT BOTANICAL GARDEN 1201 N GALVIN PARKWAY	NONE	PC	ENVIRONMENTAL	500

372,981

■ 3a

TUCSON RODEO PARADEP O BOX 1788 TUCSON, AZ 85714	NONE	PC	ARTS AND CULTURE	1,00
DESERT BOTANICAL GARDEN 1201 N GALVIN PARKWAY PHOENIX.AZ 85008	NONE	PC	ENVIRONMENTAL	50

Total .

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
MERRYSPRING NATURE CENTER P O BOX 893 CAMDEN. ME 04843	NONE	PC	ENVIRONMENTAL	100

JCSON DESERT ART MUSEUM 000 E TANQUE VERDE ROAD JCSON, AZ 85715	NONE	PC	ARTS AND CULTURE	
	•			

NONE	PC	EDUCATION	6,000
	NONE	NONE PC	NONE PC EDUCATION

500

TUCSON, AZ 85715				
MAINE SCHOOL OF MASONRY 637 RANGELEY ROAD	NONE	PC	EDUCATION	6,00
PHILLIPS, ME 04966				

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

a Paid during the year  WAYFINDER SCHOOLSP O BOX 555 CAMDEN, ME 04843  PC EDUCATION	,	or substantial contributor			
	a Paid during the year				
· ·		NONE	PC	EDUCATION	10,000

,				
THE FIELD MUSEUM OF NATURAL HISTORY 1400 SOUTH LAKE SHORE DRIVE CHICAGO, IL 60605	NONE	PC	ARTS AND CULTURE	5,000
NATIONAL FRAGILE X FOUNDATION	NONE	PC	HEALTHCARE	50,000

HISTORY 1400 SOUTH LAKE SHORE DRIVE CHICAGO, IL 60605				
NATIONAL FRAGILE X FOUNDATION 1861 INTERNATIONAL DR SUITE 200 MC LEAN, VA 22102	NONE	PC	HEALTHCARE	50,00

Total			▶ 3a	372,981
NATIONAL FRAGILE X FOUNDATION 1861 INTERNATIONAL DR SUITE 200 MC LEAN, VA 22102	NONE	PC	HEALTHCARE	50,000
CHICAGO, IL 60605				

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

or substantial contributor

Total .

a Paid during the year				
KNOX COUNTY HOMELESS COALITION P O BOX 1696 ROCKLAND ME 04841	NONE	PC	SOCIAL SERVICES	5,000

EDSHARE INTERNATIONAL 240 CLIFTON SPRINGS ROAD ECATUR, GA 30034	NONE	PC	HEALTHCARE	

3240 CLIFTON SPRINGS ROAD DECATUR, GA 30034				
SMITHSONIAN INSTUTION LIBRARIES P O BOX 37012 MRC 154 WASHINGTON, DC 200137012	NONE	PC	FUND RAISING FOR FUTUREPRESERVATION OF HERITAGE	20,000

10,000

372,981

▶ 3a

DECATUR, GA 30034				
SMITHSONIAN INSTUTION LIBRARIES P O BOX 37012 MRC 154 WASHINGTON, DC 200137012	NONE	PC	FUND RAISING FOR FUTUREPRESERVATION OF HERITAGE	20,00

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

ľ	DI ANNED PARENTHOOD	NONE	DC.	IN CURPORT OF REPRODUCTIVE	35.000
	a Paid during the year				
	Name and address (nome or business)	or substantial contributor	'		

123 WILLIAMS STREET 10TH FLOOR NEW YORK, NY 10038	NONE	PC	HEALTHCARE	25,000
PENOBSCOT MARINE MUSEUM	NONE	PC	SCIENCE AND TECHNOLOGY	5,000

NEW TORK, IVI 10050				1
PENOBSCOT MARINE MUSEUM P O BOX 498 SEARSPORT, ME 04974	NONE	PC	SCIENCE AND TECHNOLOGY	5,00
MAINE MADITIME MUSEUM	NONE	DC.	SCIENCE AND TECHNOLOGY	5.00

P O BOX 498 SEARSPORT, ME 04974				,
MAINE MARITIME MUSEUM 243 WASHINGTON STREET	NONE	PC	SCIENCE AND TECHNOLOGY	5,000

SEARSPORT, ME 04974				
MAINE MARITIME MUSEUM 243 WASHINGTON STREET BATH, ME 04530	NONE	PC	SCIENCE AND TECHNOLOGY	5,000

MAINE MARITIME MUSEUM	NONE	PC	SCIENCE AND TECHNOLOGY	5,000
243 WASHINGTON STREET BATH, ME 04530				
			-	ſ

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or business)	or substantial contributor	recipient	
a Paid during the year			

RAXA RESEARCH FOUNDATION 0 PRINCE PLACE SUITE 203 NEWBURYPORT, MA 01950	NONE	PC	MEDICAL RESEARCH	50,000
ATLANTIC CALMON FEDERATION	NONE	200	ENIVER ON MENTAL	30,000

NEWBURYPORT, MA 01950				
ATLANTIC SALMON FEDERATION FORT ANDROSS SUITE 202 BRUNSWICK, ME 04011	NONE	PC	ENVIRONMENTAL	20,000
		1		

FORT ANDROSS SUITE 202 BRUNSWICK, ME 04011	NONE		ENVIRONMENTAL	20,000
TUCSON BOTANICAL GARDENS 2150 N ALVERON WAY TUCSON. AZ 85712	NONE	PC	ENVIRONMENTAL	500

372,981

BRUNSWICK, ME 04011				
TUCSON BOTANICAL GARDENS 2150 N ALVERON WAY TUCSON, AZ 85712	NONE	PC	ENVIRONMENTAL	500

Total .

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

	or substantial continuator			
a Paid during the year				
UCONN FOUNDATION 10 TALCOTT NOTCH RD SUITE 100	NONE	PC	IN SUPPORT OF THEPROSTHODONTICS DEPT	20,000

10 TALCOTT NOTCH RD SUITE 100 FARMINGTON, CT 06032			THEPROSTHODONTICS DEPT	,
WILDLIFE CONSERVATION SOCIETY	NONE	PC	ENVIRONMENTAL	240

,				
WILDLIFE CONSERVATION SOCIETY	NONE	PC	ENVIRONMENTAL	240
2300 SOUTHERN BLVD				1
BRONX, NY 10460				1

WILDLIFE CONSERVATION SOCIETY	NONE	PC	ENVIRONMENTAL	240
2300 SOUTHERN BLVD				
BRONX, NY 10460				

efile GRAPHIC print - DO NOT PRO	OCESS As Filed D	ata -	DL	N: 93491321049760
TY 2019 Accounting Fee	s Schedule			_
ı	Name: CASCADI	E FOUNDATION		
	<b>EIN:</b> 20-4956	488		
Catagoni	Amount	Not Tryostment	Adiusted Not	Dishursoments
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PDQ TAX SERVICE	11,500	11,500	0	0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491321049760 **TY 2019 Compensation Explanation** Name: CASCADE FOUNDATION **EIN:** 20-4956488

Person Name Explanation DANIEL DIBNER WAGES PAID TO ADMINISTER THE FOUNDATION. CONTROL AND OVERSEE THE ASSETS

VICTORIA C DIBNER ASSIST THE MANAGER IN MANAGING AND OVERSEEING THE FOUNDATIONS ASSETS

AURORA C DIBNER MEET WITH THE MANAGERS FOUR TIMES A YEAR TO ASSIST IN GUIDING THE FOUNDATION ASSETS

MEET WITH THE MANAGERS FOUR TIMES A YEAR TO AID IN GUIDING THE FOUDATION ASSETS

MEET WITH THE MANAGERS FOUR TIMES A YEAR TO AID IN GUIDING THE FOUNDATION ASSETS.

BERN I DIBNER

AVALON D FENNESSEY

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93491321049760 TY 2019 Contractor Compensation Explanation Name: CASCADE FOUNDATION **EIN:** 20-4956488

Explanation

FEES DEDUCTED FROM VARIOUS CUSTOMER FUNDS DURING EACH OTR OF 2019

GOLDMAN SACHS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## **TY 2019 Depreciation Schedule**

Name: CASCADE FOUNDATION

**EIN:** 20-4956488

**Depreciation Schedule** 

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
ACCOUNTING SOFTWARE	2006-04-19	524	524	SL	5	0	0	0	
PRINTER	2007-11-04	617	617	SL	5	0	0	0	
TERA BACKUP UNIT	2008-03-01	420	419	М	5	0	0	0	
VCD MACBO LAPTOP	2008-05-04	2,690	2,690	М	5	0	0	0	
FIREPROOF SAFE	2008-08-25	2,474	2,474	М	7	0	0	0	
RENEW QUICKBOOKS	2008-09-01	1,321	1,321	М	5	0	0	0	
M-TECH LAPTOP	2008-09-12	5,061	4,099	М	5	0	0	0	
MICROSOFT OFFICE	2008-11-06	220	220	М	5	0	0	0	
SIRIUS RADIO	2010-09-05	241	241	SL	5	0	0	0	
GENERATOR	2011-08-29	1,028	1,028	SL	7	0	0	0	
M-TECH LAPTOP	2011-10-21	5,521	5,521	SL	5	0	0	0	
LAND FOR OFFICE	2012-06-01	284,050	0	NDA		0	0	0	
DELL MONITOR	2013-01-11	833	833	SL	5	0	0	0	
CELL PHONE	2013-04-15	334	334	SL	5	0	0	0	
COMPUTER EQUIP	2013-05-29	600	600	SL	5	0	0	0	
APPLE COMPUTER	2013-07-01	1,981	1,981	SL	5	0	0	0	
3 TABLETS	2014-05-08	4,581	4,122	SL	5	459	0	0	
2 TABLETS	2014-05-09	3,599	3,240	SL	5	359	0	0	
BUSH WACKER	2014-06-17	3,596	2,313	SL	7	514	0	0	
REPLACEMENT TREES	2014-12-05	23,215	0	NDA		0	0	0	

Description of

LAPTOP

LAPTOP

Property
EQUIPMENT

EXTERNAL HDS 4

EPSOM PRINTER

APPLE IPAD DIRECTOR

BURNER BOX

Depreciation Schedule

Cost or Other

Basis

2.319

4,594

878

579

1,746

549

2,733

Date

Acquired

2006-05-01

2015-11-24

2015-11-25

2016-01-22

2017-05-11

2018-11-20

2019-03-04

Prior Years'

Depreciation

2,319

2.872 SL

550

207

524 SL

SL

SL

SL

Computation Method

Rate /

Life (# of years)

Current Year's

Depreciation

Expense

919

176

83

349

110

273

Adjusted Net

Income

Net Investment

Income

Cost of Goods

Sold Not

Included

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491321049760
TY 2019 Investments Corpora	ate Bonds Schedule	
Name:	CASCADE FOUNDATION	
EIN:	20-4956488	

EIN: 20-4930400		
Investments Corporate Bonds Schedule		
Name of Bond	End of Year Book Value	End of Year Fair Market Value

PRIVATE CORP BONDS

9,243,858

9,243,858

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 934	91321049760			
TY 2019 Investments Corporate Stock Schedule						
•						
Name:	CASCADE FOUND	ATION				
EIN:	20-4956488					

4,647,057

4,647,057

<b>EIN:</b> 20-4956488		
Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value

GOLDMAN SACHS VARIOUS STOCK FU

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491321049760
<b>T</b> (2010 <b>T</b> )		

### TY 2019 Investments - Other Schedule

Name: CASCADE FOUNDATION

ETN: 20-4056488

EIN: 20-493			
Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
GS TACTICAL TILT PORTFOLIO		1,229,746	1,229,746
GSCAPITAL PARTNERS VI PARALLEL		96,029	96,029
VCFA PRIVATE EQUITY PARTNERS IV		67,343	67,343
GOBAL PRIVATE OPPORTUNITIES PTR OFF		328,307	328,307
WEST STREET CAP PARTNERS VII LP		187,595	187,595
MOUNT KELLETT CAPITAL PTRS		108,000	108,000
OTHER PRIVATE EQUITY		813,655	813,655
GS VINTAGE FUND LP		57,428	57,428
VINTAGEE VII LP OFF SHORE		172,627	172,627
GS INVEST PRIVATE OPPORTUNITIES		108,133	108,133
SILVER POINT DIST OPPORTUNITIES		32,827	32,827

TY 2019 Land, Etc.		
Schedule .		

307,265

Name: CASCADE FOUNDATION

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

LAND

<b>EIN.</b> 20-4930400				
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
COMPUTER & OFFICE EQUIPMENT	49,039	0	49,039	49,039

DLN: 93491321049760

307,265

TY	2019	Other	<b>Assets</b>	Schedule

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Name: CASCADE FOUNDATION EIN: 20-4956488

Other Assets Schedule				
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value	
DAVINCI HORSE SCULPTURE ANTIQUE	5,800	5,800	5,800	
BRONZE ART	3,985	3,985	3,985	
DEPOSIT FOR EXCISE TAX	6,518	12,139	12,139	

DLN: 93491321049760

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 934913210	49760
TY 2019 Other Decreases Scho	edule		
Name:	CASCADE FOUNDATION		
EIN:	20-4956488		
De	escription	Amount	
MEALS 50			815

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491321049760	
TY 2019 Other Expenses Schedule					
Name:	CASCADE FOUN	IDATION			
EIN:	<b>EIN:</b> 20-4956488				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
COMPUTER EXPENSE	799	799	0	0	

816

688

60

3,427

2,452

0

688

60

3,427

2,452

11,480

816 11,480

Other Expenses Schedule		1		
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursen Charit Purpo

MEALS 50

TELEPHONE

SECURITY FEES

HI SPEED INTERNET

MISCELLANEOUS K-1 EXP

OFFICE EXPENSES

Name: CASCADE FOUNDATION

EII	N:	20-4956488
-----	----	------------

CAPITAL GAIN DISTRIBUTIONS

Other Income Schedule			
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INVESTMENT INCOME K-1	53,322	53,322	0

33,208

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491321049760			
TY 2019 Other Increases Schedule					
Name:	CASCADE FOUNDATION				
EIN:	20-4956488				
De	escription	Amount			
UNREALIZED GAINS		1,415,721			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491321049760		
TY 2019 Other Liabilities Schedule						
Name:	CASCADE FOU	NDATION				
EIN:	20-4956488					
Description	n		Beginning of Year - Book Value	End of Year - Book Value		
PAYROLL TAXES MAINE WH			5,919	4,334		

efile GRAPHIC print - DO NOT PROCESS   As Filed Data - DLN: 93491321049760  TY 2019 Other Professional Fees Schedule						
Name: CASCADE FOUNDATION EIN: 20-4956488						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable		

Purposes

85,713

GOLDMAN MANAGEMENT FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLN	N: 93491321049760
TY 2019 Taxes Schedule				
Name: CASCADE FOUNDATION				
EIN	<b>EIN:</b> 20-4956488			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES WITHHELD	798	798	0	0
PAYROLL TAXES	23,784	0	0	23,784
PROPERTY TAXES	1,820	1,820	0	0
EXCISE TAX 2018	14,379	14,379	0	0