FOFm 990-PF

Received in Batching Ogden

Return of Private Foundation

OMB No. 1545-0047

	For	n •			4947(a)(1) Trust Trea				2019		
)20			ent of the Treasury Revenue Service		gov/Form990PFfor instr		•		en to Public Inspection		
2	For	ca		or tax year beginning			and ending]	, 20		
9				BERT & HELEN HOL	LAND CHARITABLE	ABLE ANNUITY A Emplo			Employer identification number		
61	_T	'R <u>U</u>	ST 1531						6554587		
APR	Nun	nber	and street (or P.O. box	number if mail is not delivered	to street address)		Room/suite	B Telephone number	r (see instructions)		
H.	P	0	BOX 1280				_				
កាឡ				country, and ZIP or foreign pos	tal code						
<u> </u>								C If exemption applicate pending, check here	tion is		
•			TTLEBORO, V	<u> </u>							
	G (Che	ck all that apply:	Initial return	Initial return	•	ublic charity	The state of the s			
				Final return	Amended ref			2 Foreign organizati 85% test, check h			
02		<u> </u>	ale trans of organic	Address change	/ Name chang			computation .	▶ ∟		
03	"-	\neg		zation: X Section 501	Other taxable pr		in 04	E If private foundation			
04	\perp		market value o		ounting method: X C		rual	under section 507(b	··· ··· ·		
•			of year (from Pa		Other (specify)	asii	, dai	F If the foundation is it	n a 60-month termination		
8			• •		column (d), must be on c	ash basis.)		-			
23	Pa	rt		enue and Expenses (The					(d) Disbursements		
2 0 2020	:		total of amounts i	n columns (b), (c), and (d) ily equal the amounts in	expenses per books	(b) Net inve incom		(c) Adjusted net income	for charitable purposes (cash basis only)		
OCT		1		ts, etc , received (attach schedule) .					i i		
		2		e foundation is not required to ch Sch B							
SCANNED		3	Interest on savings ar	nd temporary cash investments.							
Z		4	Dividends and inte	rest from securities	94,839.	9	4,839.		STMT 1		
Z		5a	Gross rents								
ပ္ထဲ	-	b	Net rental income or		100	<u> </u>					
S	E	6a b	Net gain or (loss) from Gross sales price for a	n sale of assets not on line 10 all 278 , 289	-408.						
	Revenue	-	assets on line 6a	come (from Part IV, line 2).					1		
8	2	7 8	. •	ital gain					E .		
ည စ		9	· · · · · · · · · · · · · · · · · · ·	ons							
Received in Batching Ogde	1	Ōа	Gross sales less returnand allowances	ns					Ì		
2 8		ь	Less Cost of goods so						1		
<u> </u>		C	Gross profit or (loss	s) (attach schedule)					<u> </u>		
g	1	1	Other income (atta	ch schedule)							
~	!	2	Total. Add lines 1:	through 11	94,431.		4,839.		<u> </u>		
AUG 7 6 2020		3	Compensation of office	cers, directors, trustees, etc	25,644.	2	5,644.				
- 3 }	ě 1	4	• •	laries and wages			NONE	NONE			
6 2		5	Pension plans, emp	ployee benefits schedule) OHA93			NONE	NONE			
2	֓֓֞֩֟֓֞֓֟֓֓֟֟֡֟֡֟֡֟֡֟֡							<u>. </u>			
_	Administrative Expenses	b		ttach schedule)	1,800.	-			1,800		
	Ħ.	С 7	•		1,000.	-					
	st.	8		dule) (see instru ctions). 4 .	2,000.		2,000.				
	ΞΙ,	9		h schedule) and depletion .	27000.				£		
	튄,	20	-								
				, and meetings			NONE	NONE			
	and 2	2		ations			NONE	NONE			
	<u>p</u> 2	3	•	tach schedule)							
	Operating	4	Total operating an	d administrative expenses.			. [
	Je.		Add lines 13 throu	gh 23	29,444.		7,644.	NONE			
	Õ 2	5	Contributions, gifts	, grants paid	215,907.		- ()		215,907		
	2	6		oursements. Add lines 24 and 25	245,351.	2	7,644.	NONE	217,707		
	2	27	Subtract line 26 from		150 000				ţ		
				er expenses and disbursements	150,920.		7 105	· · ·	1		
	- 1	b	Net investment in	come (if negative, enter -0-)	1	b	7,195.				

c Adjusted net income (if negative, enter -0-). .

JSA For Paperwork Reduction Act Notice, see instructions.

BHY909 363L 04/21/2020 10:04:01

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Form **990-PF** (2019) 3

Balance Sheets Attached schedules and amounts in the Beginning of year End of year Part II description column should be for end-of-year (a) Book Value (b) Book Value (c) Fair Market Value amounts only (See instructions.) 560,155. 362,643 362,643 2 3 Accounts receivable Less: allowance for doubtful accounts Pledges receivable ▶ Less, allowance for doubtful accounts Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule) Less: allowance for doubtful accounts > ___ 153,598. 173,003. 147,959. 10a Investments - U.S and state government obligations (attach schedule). . 1,536,005.1,506,045. 3,677,894 478,799. 374,666. 482.174 Investments - corporate bonds (attach schedule) Investments - land, buildings, and equipment basis 11 Less. accumulated depreciation (attach schedule) 12 Investments - other (attach schedule) 13 Land, buildings, and equipment basis Less. accumulated depreciation (attach schedule) 15 Other assets (describe 16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I) 2,643,829. 2,495,446. 4.676.309 17 18 19 Deferred revenue.......... 20 Loans from officers, directors, trustees, and other disqualified persons. . 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe NONE Total liabilities (add lines 17 through 22) Foundations that follow FASB ASC 958, check here Balances and complete lines 24, 25, 29, and 30. 24 Net assets without donor restrictions . . 25 Net assets with donor restrictions Fund Foundations that do not follow FASB ASC 958, check here 🕒 🛛 🗓 and complete lines 26 through 30. 5 2,643,829. 26 Capital stock, trust principal, or current funds 27 Paid-in or capital surplus, or land, bldg., and equipment fund. 28 Retained earnings, accumulated income, endowment, or other funds . . 29 Total net assets or fund balances (see instructions) 2,643,829 2,495,446 e Total liabilities and net assets/fund balances (see 2,643,829 Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with 2,643,829. 1 2 -150,920. 3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 5 2,542. 4 2,495,451.

> 2,495,446. Form **990-PF** (2019)

6

5 Decreases not included in line 2 (itemize) ► ROUNDING

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

Pa	rt IV Capital Gains	s and Losses for Tax on Inve	estment Income	_		
		scribe the kind(s) of property sold (for e		(b) How acquired	(c) Date acquired	(d) Date sold
	2-story b	prick warehouse; or common stock, 200	shs. MLC Co.)	P - Purchase D - Donation	(mo., dav. vr)	(mo., day, yr.)
<u>1</u>	a PUBLICLY TRADED	SECURITIES		<u></u>		
	<u> </u>					
	<u>. </u>					
	<u>d</u>					
	9	(6 December allowed	(g) Cost or other basis		(h) C=:= = :: (!=	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(h) Gain or (lo ((e) plus (f) mini	
	278,289.		278,697.			-408.
	5					
	;				•	
	<u> </u>					
	<u> </u>					
	Complete only for assets sh	nowing gain in column (h) and owned b	by the foundation on 12/31/69.		Gains (Col. (h) ga	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	col.	(k), but not less t Losses (from co	•
_		43 01 12/31/03	over coil (j), it ally			-408.
)					-400.
)					
2	Capital asin ast income	or (not aspital loss) [If ga	ain, also enter in Part I, line 7			
2	Capital gain net income	or (net capital loss) { If (lo	oss), enter -0- in Part I, line 7	2		-408.
3		ain or (loss) as defined in sections		1		
		Part I, line 8, column (c). See ins				
		Index Costing 4040(s) for Ded		3		
•			uced Tax on Net Investment In section 4940(a) tax on net investn			
Was		·	outable amount of any year in the ba	ase perio	d?	Yes X No
1			r; see the instructions before making	ng any en	tries.	
	(a) Base period years	(b)	(c)		(d) Distribution rat	
Cal	endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col. (b) divided by	col. (c))
	2018	213,532.	4,157,061.			0.051366
	2017	201,970.	3,999,281.			0.050502
	2016	194,140.	3,753,044.			0.051729
	2015	190,726.	3,731,658.			0.051110
	2014	193,356.	3,804,720.			0.050820
2	Total of line 1 column (d)		2		0.255527
3		o for the 5-year base period - divid		-		0.233327
3	_	foundation has been in existence i		3		0.051105
	the number of years the	Touridation has been in existence i	in least than 5 years			0.002200
4	Enter the net value of no	oncharitable-use assets for 2019 from	om Part X, line 5	4	4,	334,179.
5	Multiply line 4 by line 3.			5		221,498.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		672.
_				_		222 170
7	Add lines 5 and 6		• • • • • • • • • • • • • • • • • • • •	7		222,170.
8	Enter qualificina distribut	tions from Part XII, line 4		8		217,707.
J			in Part VI, line 1b, and complete 1			

Х

8b

10

VT

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

Par	t VII-A 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	ne		
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	1		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualific			
	person had advisory privileges? If "Yes," attach statement. See instructions	l		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application		Х	
	Website address ► N/A			
14	The books are in care of ► Trust Company of Vermont Telephone no. ► (802) 2	54-940	00	
14	Located at ▶ 86 LINDEN STREET, BRATTLEBORO, VT ZIP+4 ▶ 0530	1		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		Þ	T
	and enter the amount of tax-exempt interest received or accrued during the year	1		
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other autho		Yes	No
	over a bank, securities, or other financial account in a foreign country?			X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name	· ·	l .	-
	the foreign country	0.		
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u></u>
ı aı	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
4	During the year, did the foundation (either directly or indirectly):	-	1.00	110
19	77			
		'		!
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
			Ì	
				1
		' ⁻		
	(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.)			li
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		٠	
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described	" <u></u>		ļ
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	' ''	ł	
_	Organizations relying on a current notice regarding disaster assistance, check here			
C	were not corrected before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a privar	' • 		
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	ا 5.		}
	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
a	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years			
h	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) in	- 1		١. ا
	all years listed, answer "No" and attach statement - see instructions.)			 ر
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
·	` '			
20	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja	at any time during the year?	,		
	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation of	ı		
	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			
	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.)	1		
A-	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes	I -		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize it			1
D	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019			X
	perpose that had not been removed from people of the that any four beginning in zone			

rar	VII-B Statements Regarding Activities f	or Which Form 4	720 May Be Req	uired (continue	ed)				
5a	During the year, did the foundation pay or incur any amo	ount to				Yes	No		
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (sectio	n 4945(e))?	. Yes	X No		i		
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,								
	directly or indirectly, any voter registration drive?								
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes	?	. Yes	X No		ŧ		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in								
	section 4945(d)(4)(A)? See instructions								
	(5) Provide for any purpose other than religious, cl	naritable, scientific,	literary, or educations	ıl	_		1		
	purposes, or for the prevention of cruelty to children or animals? Yes X No								
b	If any answer is "Yes" to 5a(1)-(5), did any of the		• •	•	ed in		ز ا		
	Regulations section 53.4945 or in a current notice regar	ding disaster assistar	ice? See instructions.		5b	ļ			
	Organizations relying on a current notice regarding disas	ster assistance, check	here		. ▶∐		ţ		
c	If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the t		, l		,		
	because it maintained expenditure responsibility for the	grant?		. Yes	_ No		,		
	If "Yes," attach the statement required by Regulations se	ction 53.4945-5(d).					[
6a	Did the foundation, during the year, receive any fur								
	on a personal benefit contract?			. — –	X No	-			
b	Did the foundation, during the year, pay premiums, direct	tly or indirectly, on a	personal benefit contra	act?	<u>6b</u>	- -	X		
_	If "Yes" to 6b, file Form 8870.				ਜ਼ ⋅		Ì		
7a	At any time during the tax year, was the foundation a pa	•		- — –	X No	-			
Ъ	If "Yes," did the foundation receive any proceeds or have	·		onr	· · · <u>7b</u>	╅			
8	Is the foundation subject to the section 4960 tax on pay	- 1			ਹ │		ļ		
Dar	remuneration or excess parachute payment(s) during the VIII Information About Officers, Directo				X No Employees				
	and Contractors		•		• •				
1	List all officers, directors, trustees, and foundatio	n managers and to (b) Title, and average	(c) Compensation.	(d) Contributions to			4		
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit pla and deferred compens		llowance			
Frust	Company of Vermont	Trustee	,						
PO Bo	x 1280, Brattleboro, VT 05302	1	25,644.	ļ	-0-		-0-		
2	Compensation of five highest-paid employees	(other than thos	e included on line	e 1 - see instr	ructions). If	none,	enter		
2	Compensation of five highest-paid employees "NONE."	<u> </u>	e included on lin	(d) Contributions	to		·		
		(b) Title, and average hours per week	e included on line (c) Compensation	(d) Contributions employee benefi plans and deferre	to it (e) Expe		unt,		
	"NONE."	(b) Title, and average		(d) Contributions employee benef	to it (e) Expe	nse accoi	unt,		
(a)	"NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions employee benefi plans and deferre compensation	to it (e) Expe ed other a	nse accoi Ilowance	unt,		
(a)	"NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions employee benefi plans and deferre	to it (e) Expe ed other a	nse accoi	unt,		
(a)	"NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions employee benefi plans and deferre compensation	to it (e) Expe ed other a	nse accoi Ilowance	unt,		
	"NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions employee benefi plans and deferre compensation	to it (e) Expe ed other a	nse accoi Ilowance	unt,		
(a)	"NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions employee benefi plans and deferre compensation	to it (e) Expe ed other a	nse accoi Ilowance	unt,		
(a)	"NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions employee benefi plans and deferre compensation	to it (e) Expe ed other a	nse accoi Ilowance	unt,		
(a)	"NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions employee benefi plans and deferre compensation	to it (e) Expe ed other a	nse accoi Ilowance	unt,		
(a)	"NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions employee benefi plans and deferre compensation	to it (e) Expe ed other a	nse accoi Ilowance	unt,		
(a)	"NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions employee benefi plans and deferre compensation	to it (e) Expe ed other a	nse accoi Ilowance	unt,		
(a)	"NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation NONE	(d) Contributions employee beneficially plans and deferrence compensation NONE	to it (e) Expe ed other a	nse accoi Ilowance	unt,		

3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NO	NE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
MANT	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
NONE	NONE
	-
Total number of others receiving aver \$50,000 for respectively continue	NONE
Total number of others receiving over \$50,000 for professional services	NONE NONE
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1THE TRUST DISTRIBUTIONS TO DARTMOUTH-HITCHCOCK MEDICAL CENTE	
ARE FOR THE STUDY AND TREATMENT OF LEUKEMIA IN THE CT RIVER	
2	
3	
	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	- i
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NONE	
2	
All other program-related investments. See instructions.	
3 NONE	
Total, Add lines 1 through 3	

Par	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	eign founda	ations, *
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	. 1a	4,400,182.
Ь		. 1b	NONE
c			NONE
d			4,400,182.
e			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	. 2	NONE
3	Subtract line 2 from line 1d	. 3	4,400,182.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	:	
	instructions),	. 4	66,003.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		4,334,179.
6	Minimum investment return. Enter 5% of line 5	. 6	216,709.
Par	The contraction of the contract	undations	
1	Minimum investment return from Part X, line 6	. 1	216,709.
2a	Tax on investment income for 2019 from Part VI, line 5 2a 1,344	<u>.</u>	
Ь			
C	Add lines 2a and 2b	. 2c	1,344.
3	Distributable amount before adjustments. Subtract line 2c from line 1	. 3	215,365.
4	Recoveries of amounts treated as qualifying distributions	. 4	NONE
5	Add lines 3 and 4	. 5	215,365.
6	Deduction from distributable amount (see instructions)	. 6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	,	
	line 1	. 7	215,365.
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1	
а			217,707.
ь			
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
	purposes	. 2	NONE
3	,,		
	Suitability test (prior IRS approval required)		NONE
_	Cash distribution test (attach the required schedule)		NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4		217,707.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	i	37 /3
_	Enter 1% of Part I, line 27b. See instructions		N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	<u> </u>	217,707.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when qualifies for the section 4940(e) reduction of tax in those years.	caiculating v	vnetner the foundation

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
Distributable amount for 2019 from Part XI,	Сограз	Tears prior to 2010	2010	215,365
line 7				213,363
Undistributed income, if any, as of the end of 2019			NONE	
a Enter amount for 2018 only		NONE	NONE	
b Total for prior years. 20,20,20		NONE		
a From 2014				
b From 2015 8, 185.				
c From 2016				
d From 2017 6,677.				
e From 2018 8, 017.				
f Total of lines 3a through e	36,223.			
Qualifying distributions for 2019 from Part XII,				
line 4: ▶ \$ 217,707.				
a Applied to 2018, but not more than line 2a			NONE	
b Applied to undistributed income of prior years				
(Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election				
required - see instructions)	NONE			
d Applied to 2019 distributable amount				215,365
e Remaining amount distributed out of corpus	2,342.			
Excess distributions carryover applied to 2019				
(If an amount appears in column (d), the same amount must be shown in column (a).)	NONE			NON
Enter the net total of each column as				
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	38,565.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		NONE		
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)		NONE		
tax has been previously assessed		NONE		
d Subtract line 6c from line 6b. Taxable		NONE		
e Undistributed income for 2018. Subtract line		NONE		
4a from line 2a. Taxable amount - see			NONE	
instructions			NONE	
f Undistributed income for 2019. Subtract lines				
4d and 5 from line 1. This amount must be				NON
distributed in 2020				
Amounts treated as distributions out of corpus	ŀ			
to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be				
required - see instructions)	NONE			
Excess distributions carryover from 2014 not				
applied on line 5 or line 7 (see instructions)	5,616.			
Excess distributions carryover to 2020.	·			
Subtract lines 7 and 8 from line 6a	32,949.			
Analysis of line 9.				
a Excess from 2015 8,185.				
b Excess from 2016				
c Excess from 2017 6,677.				
d Excess from 2018 8,017.				
e Excess from 2019 2,342.				

Check here $\triangleright X$ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

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

c Any submission deadlines:

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

Supplementary information (F4 B	
3 Grants and Contributions Paid Duri	ng the Year or Appl	roved for	Future Payment	<u> </u>
Recipient (harran harinan)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Mary Hitchcock Memorial Hospital Holland Leuk				
ONE MEDICAL DRIVE Lebanon NH 03756	NONE	EXEMPT	MEDICAL RESEARCH	215,907.
ONE MEDICAL DAIVE DEDELOR RE 05/50	HONE	BASSIF I	MIDICAL RESEARCH	213,707.
			1	,
			İ	
			1	
,				
Total				215,907.
b Approved for future payment				
			,	
Total			> 3b	
	 		· · · · · · · · · · · · · · · · · · ·	L

Part XVI-A Analysis of Income-Produ	ucing Acti	ivities			·
Enter gross amounts unless otherwise indicated.	Unrela	ated business income	Excluded by	y section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
•			-		toce mandenons./
a b			<u> </u>		<u> </u>
d			1		
			1		
e			 		
g Fees and contracts from government agencies				-	-
2 Membership dues and assessments			_		
3 Interest on savings and temporary cash investments.					- "
4 Dividends and interest from securities			14	94,839.	
5 Net rental income or (loss) from real estate:					l l
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	-408.	
9 Net income or (loss) from special events · · ·					
10 Gross profit or (loss) from sales of inventory	1				
11 Other revenue: a					
b					
c					
d		_			
e					
12 Subtotal. Add columns (b), (d), and (e)				94,431.	
13 Total. Add line 12, columns (b), (d), and (e)				13	94,431.
(See worksheet in line 13 instructions to verify calculated)		. 			
Part XVI-B Relationship of Activities	to the A	ccomplishment of E	xempt Pur	poses	
Line No. Explain below how each activit	y for which	h income is reported	in column (e) of Part XVI-A contrib	uted importantly to the
▼ accomplishment of the foundation					
					· -
	_				
					
		NOW ADDITORDI	 		
		NOT APPLICABI	<u> </u>		
			<u> </u>		<u> </u>
					
					
	-				
					
					
			_		

Form 9	90-PF (2	2019)				2	0-6554587				Pa	ge 1 :
Part	XVII	Information Re Organizations	egarding Trans	fers to and	Transactions	and R	elationships	With	Nonchar	itable		
1	Did th	e organization direct	ly or indirectly er	ngage in any of	the following	with any	other organiz	ation d	escribed		Yes	No
	in sec	ction 501(c) (other	than section 5	i01(c)(3) organ	nizations) or	in section	n 527, relati	ng to	political			
		zations?						_	•			
а	Transf	ers from the reporting	g foundation to a	noncharitable e	exempt organia	zation of:						
		sh	_							1a(1)		X
	(2) Oth	her assets		. .						1a(2)		Х
ь	Other 1	transactions:										
	(1) Sal	les of assets to a non-	charitable exemp	t organization .						16(1)		X
		rchases of assets fror								15(2)		Х
		ntal of facilities, equip										X
		imbursement arrange										X
	(5) Loa	ans or loan guarantee	es	. .						1b(5)		X
	(6) Per	rformance of services	s or membership	or fundraising s	olicitations					1b(6)		X
		g of facilities, equipm	-	_								Х
		answer to any of th									air m	arke
		of the goods, other										
	value i	in any transaction or	r sharing arrange	ment, show in	column (d) th	e value o	f the goods, o	ther as	sets, or se	ervices	rece	eived
(a) Lir	ne no.	(b) Amount involved	(c) Name of nor	icharitable exempt o	rganization	(d) Descr	ption of transfers,	transacti	ons, and share	ng arra	ngeme	nts
										-		
									•			
-												
			-	-								_
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	Ì						-					
						•			-			
												-
(describ	foundation directly oped in section 501(c)	(other than section					-	tions	Ye	sΣ	No
	,	(a) Name of organization		(b) Type o	f organization		(c) D	escriptio	n of relations	hıp		
			·									
		4										
		penalties of perjury, I declar t, and complete. Declaration of						e best of	my knowledge	and be	dief, it	ıs true
Sign	COLLEC	., and ampiete. Declaration of	X Y			operal lias su)	, miowiedye	r	May the IRC	diperior	thin	rotu
_		Dan 1	1 1/2	<u> </u>	2020	Vice 1	President		May the IRS with the prep			
Here	Sign	nature of officer or trustee		Date		Title			See instructions		Yes	No
	BA	RBARA F FLYNN						L				
Paid		Print/Type preparer's nar	me	Preparer's signatu	nte		Date	Chec	k if P	TIN		

Firm's EIN

Phone no.

Preparer

Use Only

Firm's name

Firm's address

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

STATEMENT

2

20-6554587

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	3,213.	1,375.	465. 1.063	3,040. 1,524.	269 531	94,839.
REVENUE AND EXPENSES PER BOOKS	3,213.	1,375.	40 10 10 10 10 10 10 10 10 10 10 10 10 10	3,040. 1,524.	269 531	94,839.
		2.7500% 09	2.5000%	CORP FD ETF	INFLATION FROT SECS 2.125% 04/2	TOTAL
DESCRIPTION	US BANKCORP DEL	US TREAS NOTES US TREAS NOTES	US TREAS NOTES US TREAS NOTES	UNITED TECHNOLOGIES VANGUARD BOND INDEX	GO & CO	

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

1,800.

CHARITABLE PURPOSES 1,800.

1,800.

TOTALS

TAX PREPARATION FEE

DESCRIPTION

1,800.

EXPENSES PER BOOKS

REVENUE AND 'n,

STATEMENT

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ROBERT & HELEN HOLLAND CHARITABLE ANNUITY

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	NET	INVESTMENT	INCOME	1 1 1 1	2,000.	1 1 1 1 1	2,000.	
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2,000.		2,000.	10 10 10 11 11 11 11 11 11
			DESCRIPTION	! ! ! ! !	FEDERAL ESTIMATES - PRINCIPAL		TOTALS	

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FORM	990PF,	PART	III	- OTHER	INCREASES	IN NET	WORTH	OR FUND	BALANCES
=====	======	=====	====	======:	===== = =	======	======	======	=======

DESCRIPTION

BOA CLASS ACTION PROCCEDS

2018 990PF FEDERAL REFUND

TOTAL

TOTAL

AMOUNT

183.

2,359.