Return of Private Foundation

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 www.irs.gov/Form990PF for instructions and the latest information.

For ca	alen	dar year 2019 or tax year beginning		, and ending				
Nam	e of	foundation	A Employer identification	number				
M/	150	COMA BANK FOUNDATION	22-2816632					
Numl	oer ar	nd street (or P O box number if mail is not delivered to street	B Telephone number					
_6	7 I	NORTH PARK STREET			603-443-86	27		
		own, state or province, country, and ZIP or foreign	postal code		C If exemption application is pe	ending, check here		
_LI	EBZ	ANON, NH 03766-0435	<u></u>					
G C	1eck	all that apply: Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organizations	, check here		
		Final return	Amended return		2 Foreign organizations meeting the 85% test, check here and attach computation			
		Address change	Name change	- //	check here and attach co	mputation		
H C			exempt private foundation	. (*)4	E If private foundation sta			
		ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda		under section 507(b)(1)			
		· I —	ting method: Cash	X Accrual	F If the foundation is in a			
(IIC		Part II, col. (c), line 16) (Part I, col.	Other (specify)	2)	under section 507(b)(1)	(B), check here		
Pai					(-) Advicted not	(d) Disbursements		
ra	-	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)		
$\equiv \top$	1	Contributions, gifts, grants, etc., received	509,084.		N/A	(Cash Dasis Unity)		
1707		Check I if the foundation is not required to attach Sch. B	303,003.					
	3	Interest on savings and temporary cash investments	2,733.	2,733.		STATEMENT 1		
ا ء	4	Dividends and interest from securities	168,878.	168,878.		STATEMENT 2		
1	5а	Gross rents						
		Net rental income or (loss)						
2	6a	Net gain or (loss) from sale of assets not on line 10	<14,691.>	•	PEC	-1) (5-5-		
당	b	Gross sales price for all assets on line 6a1, 205, 336.			NEC	IVED		
¥ã	7	Capital gain net income (from Part IV, line 2)		0.	ထွ	70		
Bevenue Revenue	8	Net short-term capital gain			S MAY 2	2 2020 8		
\$	9	Income modifications	,			2 2020		
9	10 a	Gross sales less returns and allowances	,	•	OGDE	<u> </u>		
	b	Less Cost of goods sold	· · ·		L OODL	14, 01		
l		Gross profit or (loss)						
		Other income	666 004	101 (11				
\rightarrow		Total Add lines 1 through 11	666,004.	<u>171,611.</u>		0		
- 1	13	Compensation of officers, directors, trustees, etc	20,000.	0.		<u> </u>		
		Other employee salaries and wages						
		Pension plans, employee benefits Legal fees						
nse		Accounting fees						
Expens		Other professional fees STMT 3	35,789.	35,789.		0		
		Interest	20,,030					
.2	18	Taxes STMT 4	1,484.	1,484.		0		
Str		Depreciation and depletion						
		Occupancy						
눠		Travel, conferences, and meetings						
		Printing and publications						
1 <u>0</u> a		Other expenses STMT 5	13,530.	0.		0		
atir	24	Total operating and administrative						
per		expenses Add lines 13 through 23	70,803.	37,273.		0		
		Contributions, gifts, grants paid	315,500.			315,500		
		Total expenses and disbursements.						
-	,,,,	Add lines 24 and 25	386,303.	37,273.		315,500		
	27	Subtract line 26 from line 12:	070 700	······································		 		
		Excess of revenue over expenses and disbursements	279,701.	124 222				
- 1	b	Net investment income (if negative, enter -0-)		134,338.	N/A			
ļ		Adjusted net income (if negative, enter -0-)			ı N/A	1		

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ᇛ	Part II Balance Sheets Attached schedules and amounts in the description		Beginning of year	End of year		
L	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
-	1	Cash - non-interest-bearing	4,316.	4,516.	4,516.	
	2	Savings and temporary cash investments	151,722.	111,645.	111,645.	
		Ascounts receivable				
		Less; allowance for doubtful accounts				
	4	Pledges receivable		-		
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other	,			
	-	disqualified persons				
	7	Other notes and loans receivable				
		Less: allowance for doubtful accounts			<u> </u>	
co.	8	Inventories for sale or use				
ssets	9	Prepaid expenses and deferred charges				
As	10a	Investments - U.S. and state government obligations STMT 6	475,185.	725,135.	725,608.	
		Investments - corporate stock STMT 7	78,028.	78,035.	308,039.	
	ı	Investments - corporate bonds			· ·	
	ı	Investments - land, buildings, and equipment basis				
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other STMT 8	5,264,923.	5,355,116.	6,616,385.	
	14	Land, buildings, and equipment: basis				
	' '	Less accumulated depreciation				
	15	Other assets (describe				
		Total assets (to be completed by all filers - see the				
		instructions. Also, see page 1, item I)	5,974,174.	6,274,447.	7,766,193.	
_	17	Accounts payable and accrued expenses				
	18	Grants payable				
w	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			,	
ğ	21	Mortgages and other notes payable				
ڐ	22	Other liabilities (describe)				
	23	Total liabilities (add lines 17 through 22)	0.	0.		
		Foundations that follow FASB ASC 958, check here				
ės		and complete lines 24, 25, 29, and 30				
ဦ	24	Net assets without donor restrictions				
aga	25	Net assets with donor restrictions				
8		Foundations that do not follow FASB ASC 958, check here 🕨 🛣				
Ë		and complete lines 26 through 30				
ō	26	Capital stock, trust principal, or current funds	1,320,865.	1,320,865.		
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
SS	28	Retained earnings, accumulated income, endowment, or other funds	4,653,309.	4,953,582.		
Net Assets or Fund Balanc	29	Total net assets or fund balances	5,974,174.	6,274,447.		
Z		Tatal Labilitation and not constalling a haloman	5,974,174.	6,274,447.		
Ξ	30	Total liabilities and net assets/fund balances		0,2,4,44,6		
世	art	Analysis of Changes in Net Assets or Fund Ba				
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	29			
	•	st agree with end-of-year figure reported on prior year's return)		1	5,974,174.	
		amount from Part I, line 27a		2	279,701.	
-		r increases not included in line 2 (itemize) UNREALIZED (GAIN/LOSS	3	20,572.	
4	Add	lines 1, 2, and 3		4	6,274,447.	
_	Dace	eaces not included in line 2 (itemize).		5	Λ.	

6,274,447. Form **990-PF** (2019)

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

		OMA BANK FUUNDA					Z-Z01	0034	Page .
P	Part IV Capital Gains a	nd Losses for Tax on In	vestment	Income					
,		ne kind(s) of property sold (for exa ehouse; or common stock, 200 sh:		e,	(b) How acquired P - Purchase D - Donation		acquired day, yr.)	(d) Date (mo., da	
	FIDELITY 4292 L	T COVERED			P	VARI	ous	VARIO	ous
		NCOVERED			P	VARI	OUS	VARIO	ous
C									
<u>d</u>									
-e									
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis xpense of sale			Gain or (loss s (f) minus		-
a	1,205,283.		† · · · ·	1,220,02	7.			<14,7	744.>
_ <u>-</u>	F 3								53.
C									
d			1						<u>-</u> .
e			1						
		gain in column (h) and owned by	the foundation	on 12/31/69.		/II Gains //	Col. (h) gain	minus	
	Complete only for assets showing	(j) Adjusted basis	7	cess of col. (I)	─	col. (k), but	not less tha	n -0-) or	
	(i) FMV as of 12/31/69	as of 12/31/69		col. (j), if any		Losses	(from col. ((h))	
_	-			· (//)				<14,7	744.
_ <u>a</u>								/T41	53.
<u>b</u>						_			<u> </u>
<u>d</u>									
<u>e</u>					- 				
2	Capital gain net income or (net cap	oital loss) $ \begin{cases} & \text{if gain, also enter} \\ & \text{if (loss), enter} \end{cases} $	er in Part I, line D- in Part I, line	7 7	} 2	<u></u>		<14,6	91.>
3	Net short-term capital gain or (loss	s) as defined in sections 1222(5) a	nd (6):						
	If gain, also enter in Part I, line 8, o		• •		}				
_	If (loss), enter -0- in Part I, line 8] 3		N/A	\	
LP	Part V Qualification Un	ider Section 4940(e) for	Reduced	Tax on Net	Investment Inc	come			
(Fo	or optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment in	come.)				
.,	40.407.4170)	a and black							
11 5	section 4940(d)(2) applies, leave thi	s part blank.							
Wa	as the foundation liable for the section	on 4942 tax on the distributable ar	nount of any ye	ar in the base per	iod?			Yes	X No
lf "	Yes," the foundation doesn't qualify	under section 4940(e). Do not cor	nplete this part						
1	Enter the appropriate amount in ea	ach column for each year; see the i	nstructions bef	ore making any ei	ntries.				
_	(a) Base period years	(b)			(c)		Dietri	(d) bution ratio	
	Base period years Calendar year (or tax year beginning	بالمراجعة والمراجعة	stributions	Net value of no	ncharitable-use asse	ts	(col. (b) dr	vided by col.	(c))
	2018		7,788.		6,270,94	0.	<u> </u>	.05	0676
	2017		8,186.		5,906,73				8789
_	2016		1,487.	_	5,541,69				18990
_	2015		1,335.		5,765,76				7466
_	2014		0,201.		5,770,42				5092
_			70,2011		3,,,0,42	- 			3032
_	= a 1 at 1 at 1 at 20							2 5	1013
	Total of line 1, column (d)					_2_		• 41	101
3	Average distribution ratio for the 5		on line 2 by 5.0), or by the numb	er of years			^ -	
	the foundation has been in existent	ce if less than 5 years				3_		. 05	0203
4	Enter the net value of noncharitable	e-use assets for 2019 from Part X,	line 5			4	ļ	6,941,	145.
5	Multiply line 4 by line 3					5		348,	466.
6	Enter 1% of net investment income	e (1% of Part I, line 27b)				6		1.	343.
-		,							
7	Add lines 5 and 6					7		349	809
'	Aug illies J aliu U					<u> </u>		327,	
8	Enter qualifying distributions from	Part XII, line 4				8		315.	500.
•	If line 8 is equal to or greater than		e 1b, and comp	lete that part usin	g a 1% tax rate.				
	See the Part VI instructions.	·							

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1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			s)
	_		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		2,6	87.
of Part I, line 27b			,
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-)			<u>0.</u>
3 Add lines 1 and 2		2,6	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			<u>0.</u>
5 Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-		2,6	<u>87.</u>
6 Credits/Payments:	•		
a 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 1,240.			
b Exempt foreign organizations - tax withheld at source 6b 0 •			
c Tax paid with application for extension of time to file (Form 8868)			
d Backup withholding erroneously withheld 6d 0 .		1 0	40
7 Total credits and payments. Add lines 6a through 6d •		1,2	40.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		1,4	47
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1,4	4/.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11 Part 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 participate or intervene in		Yes	No
any political campaign?	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			 -
distributed by the foundation in connection with the activities.			
c Did the foundation file Form 1120-POL for this year?	1c		X
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 •			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
managers. ► \$ 0.			i
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
If "Yes," attach a detailed description of the activities.			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u> </u>	
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
If "Yes," attach the statement required by General Instruction T.			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
By language in the governing instrument, or			
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	_	v	
remain in the governing instrument?	6	X	
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		
On Enter the states to which the foundation reports or with which it is required. Can instructions			
8a Enter the states to which the foundation reports or with which it is registered. See instructions NH			
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	Х	
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	70		`
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	9		\mathbf{x}
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		<u>x</u>
)-PF	(2019)

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Yes	No
As a standard the second did the foundation depote a second section of the second section of	
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	Х
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	T
If "Yes," attach statement. See instructions	Х
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 X	
Website address ► N/A	
14 The books are in care of ► MASCOMA BANK Telephone no. ► 603-443-8627	
Located at ▶67 NORTH PARK STREET, LEBANON, NH ZIP+4 ▶03766	
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 N/A	
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, Yes	No
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 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.	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?	
(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?	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	
(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 N/A	\vdash
Organizations relying on a current notice regarding disaster assistance, check here	\vdash
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	
before the first day of the tax year beginning in 2019?	X
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)):	
a 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 ▶,,,,	
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.) N/A 2b	T
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	
>	
3a 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 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.) N/A 3b	\top
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	
had not been removed from jeopardy before the first day of the tax year beginning in 2019? 4b	X
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Form **990-PF** (2019)

Total number of other employees paid over \$50,000

Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	1	> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers produ	ical information such as the iced, etc	Expenses
1 N/A		,
2		
3		
4		
Dart IV B Common of Drawn Balated Investments		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on I	ines 1 and 2	Amount
1N/A		
2		
All other program-related investments. See instructions. 3		
Total. Add lines 1 through 3	-	0.

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P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations	, see instructions)
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	1a	6,910,749.
b	Average of monthly cash balances	1b	6,910,749. 136,099.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	7,046,848.
	Reduction claimed for blockage or other factors reported on lines 1a and	2	
	1c (attach detailed explanation) 1e 0.	, ## 	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	7,046,848.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	105,703.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,941,145.
6	Minimum investment return Enter 5% of line 5	6	347,057.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	347,057.
2a	Tax on investment income for 2019 from Part VI, line 5 2,687.	1	
b	Income tax for 2019. (This does not include the tax from Part VI.)		•
C	Add lines 2a and 2b	2c	2,687.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	344,370.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	344,370.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	344,370.
匣	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	315,500.
b	Program-related investments - total from Part IX-B	1b	0.
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	315,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	315,500.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies fo	or the section

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,				344,370.
				311,370.
2 Undistributed income, if any, as of the end of 2019			0.	
a Enter amount for 2018 only		•		
b Total for prior years		0		
	,	0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
b From 2015 2,799.				
c From 2016				
d From 2017				
e From 2018 6,643.	2 4 4 2			
f Total of lines 3a through e	9,442.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 315,500.			_	
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				315,500.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	9,442.			9,442.
6 Enter the net total of each column as indicated below:		,		
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'		<u> </u>		
undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				19,428.
7 Amounts treated as distributions out of				19,120.
corpus to satisfy requirements imposed by				
-				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)				
8 Excess distributions carryover from 2014	0.			
not applied on line 5 or line 7	U •			
9 Excess distributions carryover to 2020	0.			į
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				į
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019	<u></u>			

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Form 990-PF (2019) MASCOMA	A BANK FOUND	ATION		22-2	816632 Page 10
Part XIV Private Operating F	oundations (see in	nstructions and Part \	/II-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter tha	at it is a private operating			
foundation, and the ruling is effective for	or 2019, enter the date of	the ruling	▶		
b Check box to indicate whether the foun	idation is a private operat	ing foundation described	1 in section	4942(j)(3) or	4942(j)(5)
2 a Enter-the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4, for each year listed	`				
d Amounts included in line 2c not		 			
			ŀ		
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c		ļ			-
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets		1			
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		"			_
2/3 of minimum investment return shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter:			- 		
(1) Total support other than gross				`	
investment income (interest,					
dividends, rents, payments on					
securities loans (section		Ì			
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	<u> </u>	<u> </u>			
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	ore in assets
at any time during	the year-see insti	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wi	no have contributed more	than 2% of the total cor	ntributions received by the	e foundation before the cl	ose of any tax
year (but only if they have contributed	more than \$5,000). (See :	section 507(d)(2).)	•		-
NONE					
b List any managers of the foundation wi	ho own 10% or more of the	he stock of a corporation	(or an equally large port	ion of the ownership of a	partnership or
other entity) of which the foundation ha			· (or an equally large part		
NONE					
2 Information Regarding Contribut	tion Grant Gift Loan	Scholarship etc. D	Programe:		
Check here 🕨 🔲 if the foundation	only makes contributions	to preselected charitabl	e organizations and does	not accept unsolicited rec	uests for funds. If
the foundation makes gifts, grants, etc.					-
a'The name, address, and telephone num		he person to whom appl	ications should be addres	ssed:	
SARAH MARTEL, 603-44					
67 N. PARK STREET, L	EBANON, NH	03766			
b The form in which applications should SEE ATTACHED GUIDELI		ation and materials they	should include:		
c Any submission deadlines: SEE ATTACHED GUIDELI	NES				
d Any restrictions or limitations on award		al areas, charitable field	s, kınds of institutions. or	other factors:	
GRANTS TO ORGANIZATI					
923601 12-17-19					Form 990-PF (2019)

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye	ar or Approved for Future F	Payment	_	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	CONTIDUCION	
a Paid during the year				
SEE ATTACHED	NONE	PUBLIC	ATTACHED	
				315,500.
	_			
Total	<u> </u>		▶ 3a	315,500.
b Approved for future payment				<u></u>
NONE				
NONE				
	-			
Tabal			▶ 2h	0
1-4-1			= 9⊾ 1	n n

Enter gross amounts unless otherwise indicated.				by section 512, 513, or 514	(e)	
	(a)	(b)	(C) Exclu-	(d)	Related or exempt	
1 Program service revenue:	Business code	Amount	sion	Amount	function income	
a					 	
	-		+ +			
-	-					
d	-					
d						
e			+			
g Fees and contracts from government agencies			+			
2 Membership dues and assessments					_	
3 Interest on savings and temporary cash						
investments	1		14	2.733		
Dividends and interest from securities			14	2,733. 168,878.		
5 Net rental income or (loss) from real estate:			+	100,0701		
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	<14,691.>		
9 Net income or (loss) from special events						
O Gross profit or (loss) from sales of inventory						
1 Other revenue:		•				
a						
b						
c						
d						
е						
2 Subtotal Add columns (b), (d), and (e)		0		156,920.		
13 Total Add line 12, columns (b), (d), and (e)	· · · · · · · · · · · · · · · · · · ·			13	4 = 4 4 4	
(See worksheet in line 13 instructions to verify calculations)	١			13	130/	

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).				
-					

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orm 990 Part >	_				ION nd Transactions a	nd Relationsh	22-281 ips With Nonchar		Pa	ige 13
1 Did	the ord			of the followin	g with any other organizat	unn described in secti	on 501(c)	_L	Yes	No
		· · ·			to political organizations'		on 00 1(0)			
		from the reporting founda	•							
	Cash			, ,	,			1a(1)		X
(2)	Other	assets						1a(2)		X
b Oth	er trans	sactions:								
(1)	Sales	of assets to a noncharita	ble exempt organiza	tion				1b(1)		X
(2)	Purch	ases of assets from a no	ncharitable exempt o	organization				1b(2)		<u> </u>
(3)	Renta	l of facilities, equipment,	or other assets					1b(3)		_X
(4)	Reimt	oursement arrangements						1b(4)		X
		or loan guarantees						1b(5)		X
٠,		mance of services or me	•	_				1b(6)		X
		facilities, equipment, ma						1c_	لــــا	X
or s colu	ervices imn (d	s given by the reporting fo the value of the goods,	oundation. If the fou other assets, or serv	ndation received.	dule. Column (b) should a ed less than fair market va	lue in any transaction	or sharing arrangement, s	show in		
(a) Line no	<u> </u>	(b) Amount involved	(c) Name o		e exempt organization	(d) Description	of transfers, transactions, and	sharing arr	angemen	its
	+			N/A			<u> </u>			
	+									-
	+									
	+		<u></u>							
	+						· · · · · · · · · · · · · · · · · · ·			
	†						·			
	1				-	· · · · · · · · · · · · · · · · · · ·				
		<u>-</u> .								
ın s	ection	idation directly or indirec 501(c) (other than section implete the following sch	n 501(c)(3)) or in se		or more tax-exempt organ	l nizations described	(Yes	X] No
ا ۱۱ و	JU, 00	(a) Name of org			(b) Type of organization		(c) Description of relation	ship		
		N/A								
								_		
Sign Here	and be	lief, it is true, porrect, and copy	plate Declaration of pro		accompanying schedules and taxpayer) is based on all inform	chair	as any knowledge M re sh	ay the IRS of turn with the own below X Yes	P See Ins	er
	Sign	Ature of officer or trustee		Dranararia a	Dafe /	Title	Check If PTIN			
		Print/Type preparer's na JAMES N. G		Preparer's s	iyilat u re	Date	self- employed			
Paid		CPA	ODEREI,	TAMEC	N. GODFREY,	05/04/20		0913	422	
Prepa Use C		Firm's name ► TYL	ER, SIMMS		SAUVEUR CPA		Firm's EIN ► 02-0			
J36 C	-111 y	Firm's address ▶ 19	MORGAN D	RIVE						
		LE	BANON, NH	03766			Phone no. 603-6	53-0	044	

Schedule 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

2019

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

22-2816632 MASCOMA BANK FOUNDATION Organization type (check one) Filers of: Section: ____ 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year 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)

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

MASCOMA BANK FOUNDATION

22-2816632

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	MASCOMA BANK 67 NORTH PARK STREET LEBANON, NH 03766	\$ <u>508,584</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash Complete Part II for noncash contributions)			

Name of organization

Employer identification number

MASCOMA BANK FOUNDATION

22-2816632

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art 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
		\$	
(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. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	·
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Name of organization

Employer identification number

	MA BANK FOUNDATION		22-2816632					
Part III	from any one contributor. Complete columns (a) the	rough (e) and the following line en	section 501(c)(7), (8), or (10) that total more than \$1,000 for the intry. For organizations					
	completing Part III, enter the total of exclusively religious, cha Use duplicate copies of Part III if additional sp	ritable, etc., contributions of \$1,000 or	r less for the year (Enter this info once)					
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-								
		(e) Transfer of git	π					
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee					
(a) No.								
from Part I	(b) Purpose of gift (c) Use of		(d) Description of how gift is held					
}	(e) Transfer of gift							
		(e) Transier or gir	n.					
	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							
	(c) Hallotel Of gift							
_	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee					
	<u> </u>							
	_							
a) No. from	(L) D	/-> L	(4) Description (4)					
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Ī	(e) Transfer of gift							
	(c) Hallotto of gift							
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee					

					VESTMENTS	STATEMENT 1
SOURCE		(A REVE PER B	NUE		(B) VESTMENT COME	(C) ADJUSTED NET INCOME
FIDELITY	_		2,733.		2,733.	
TOTAL TO PART I, LINE 3	_		2,733.		2,733.	
FORM 990-PF DIVID	ENDS ANI	O INTER	EST FR	OM SECUR	ITIES	STATEMENT 2
GROS SOURCE AMOU	S	CAPITAL GAINS IVIDEND		(A) EVENUE R BOOKS	(B) NET INVES MENT INCO	
FIDELITY 168,	878.		0.	168,878.	168,87	8.
TO PART I, LINE 4 168,	878.		0.	168,878.	168,87	8.
FORM 990-PF DESCRIPTION	EXPI	PROFES (A) ENSES BOOKS	(NET I	FEES B) NVEST- INCOME	(C) ADJUSTED NET INCOM	
INVESTMENT MANAGEMENT FEES		35,789.		35,789.		0.
TO FORM 990-PF, PG 1, LN 1	6C :	35,789.		35,789.		0.
FORM 990-PF		TAX	ES			STATEMENT 4
DESCRIPTION	EXP	(A) ENSES BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM	
FOREIGN TAX PAID		1,484.		1,484.		0.

FORM 990-PF	OTHER E	XPENSES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ANNUAL STATE FILING FEE INSURANCE PREMIUMS TAX PREPARATION LETTERHEAD	75. 1,562. 1,351. 2,042.	0. 0. 0.		0. 0. 0.	
FOUNDANT TECHNOLOGY LICENSE FEE	8,500.	0.		0.	
TO FORM 990-PF, PG 1, LN 23	13,530.	0.		0.	

FORM 990-PF U.S. AND ST	'ATE/CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT 6
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
US GOVERNMENT BONDS MUTUAL FUNDS	x		335. 724,800.	335. 725,273.
TOTAL U.S. GOVERNMENT OBLIGATI	ONS	-	335.	335.
TOTAL STATE AND MUNICIPAL GOVE	ATIONS	724,800.	725,273.	
TOTAL TO FORM 990-PF, PART II,	LINE 10A	=	725,135.	725,608.
FORM 990-PF	CORPORATE	STOCK	.,_	STATEMENT 7
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
COMMON STOCK		-	78,035.	308,039.
		-	78,035.	308,039.

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
EXCHANGE TRADE PRODUCTS	COST	5,355,116.	6,616,385.
TOTAL TO FORM 990-PF, PART II, LINE 1	3	5,355,116.	6,616,385.

	LIST OF OFFICERS, I AND FOUNDATION MANA		STAT	EMENT 9
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
GRETCHEN CHERINGTON PO BOX 126 MERIDEN, NH 03770	TRUSTEE 1.00	3,600.	0.	0.
FRANK LEIBLY III PO BOX 12 TAFTSVILLE, VT 05073	TRUSTEE 1.00	3,600.	0.	0.
EDWARD KERRIGAN 9 HENEAGE LANE HANOVER, NH 03755	TRUSTEE 1.00	5,400.	0.	0.
GARY GRAY 728 ROUTE 63 WESTMORELAND, NH 03467	TRUSTEE 1.00	3,800.	0.	0.
DANIEL MCGEE 32 MORSE ROAD LEBANON, NH 03766	TRUSTEE 1.00	3,600.	0.	0.
TOTALS INCLUDED ON 990-PF, PAG	GE 6, PART VIII	20,000.	0.	0.