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OMB No. 1545-0052

2019

## **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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

or	caler	ndar year 2019, or tax year beginning 01-01-20	)19 , aı	nd en	ding 12-31-	2019	
		indation IND PAULINE CALDERWOOD FOUNDATION	A Employer id	entification numbe	r		
V V /	ALIEN A	IND FACILINE CALDERWOOD FOUNDATION			46-5416046		
	ber and	street (or P.O. box number if mail is not delivered to street address)	Room/suite		<b>B</b> Telephone nu	mber (see instructio	ns)
P	J BUX I	1234			(207) 646-4355	i	
		n, state or province, country, and ZIP or foreign postal code 04090			C If exemption	application is pendin	a check here
VVLL	L3, ME				• II exemption	application is perialli	<b>•</b>
G Cł	neck al	I that apply:   Initial return Initial return of a	former public charity	,	<b>D 1.</b> Foreign or	ganizations, check he	ere
		☐ Final return ☐ Amended return				ganizations meeting k here and attach co	
		☐ Address change ☐ Name change			•	undation status was i	· -
		rpe of organization: ✓ Section 501(c)(3) exempt private			under sectio	n 507(b)(1)(A), chec	ck here 🕨 🗀
		1 4947(a)(1) nonexempt charitable trust Other taxable value of all assets at end J Accounting method:	e private foundation  Cash  Accru		E If the founds	ation is in a 60 mont	h tarmination —
of '	year (f	rom Part II, col. (c),	Casii Li Acciu	Jai		ation is in a 60-mont n 507(b)(1)(B), chec	
line	e 16)	>\$ 516,132	be on cash basis.)				
Pa	rt I	Analysis of Revenue and Expenses (The total					(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b) N	let investment income	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see instructions).)	books		income	meome	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	150,660				
	2	Check ▶ ☐ if the foundation is <b>not</b> required to attach					
		Sch. B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	13,734	4	13,734		
	5a	Gross rents	ļ				
e	b	Net rental income or (loss)  Net gain or (loss) from sale of assets not on line 10	62,002	,			
Revenue	6a			-			
eve	b   7	Gross sales price for all assets on line 6a 273,788  Capital gain net income (from Part IV, line 2)		-	62,002		
~	8	Net short-term capital gain			02,002		
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	226,396	5	75,736		
	13	Compensation of officers, directors, trustees, etc.	0		0		(
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits					
ens	16a	Legal fees (attach schedule)	<b>M</b> .1				
X.	b	Accounting fees (attach schedule)	400		0		(
e e	C	Other professional fees (attach schedule)					
<u> </u>	17	Interest					
<u> </u>	18	Taxes (attach schedule) (see instructions)					
<u>=</u>	19	Depreciation (attach schedule) and depletion					
ΑĠ	20 21	Occupancy					
ב	22	Printing and publications					
Operating and Administrative Expenses	23	Other expenses (attach schedule)	359	9	0		
at III	24	Total operating and administrative expenses.	_				
Dec.		Add lines 13 through 23	759	9	0		
5	25	Contributions, gifts, grants paid	73,500				73,500
	26	Total expenses and disbursements. Add lines 24 and					
		25	74,259	1	0		73,500
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	152,137	7			
	ь	Net investment income (if negative, enter -0-)			75,736		
	C	Adjusted net income (if negative, enter -0-)		1			

For	m 990-	PF (2019)			Page <b>2</b>
Pa	rt II	<b>Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year		f year
	1	Cash—non-interest-bearing	(a) Book Value	(b) Book Value	(c) Fair Market Value
	2	Savings and temporary cash investments	5,240	6,166	6,166
	3	Accounts receivable ▶	-,	2,222	
		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 (attach schedule) (see instructions)			
Assets	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
155	10a	Investments—U.S. and state government obligations (attach schedule)			
•	ь	Investments—corporate stock (attach schedule)			
		Investments—corporate bonds (attach schedule)	403,291	509,966	509,966
	11	Investments—Land, buildings, and equipment: basis ▶	+03,231	303,300	303,300
	* *	Less: accumulated depreciation (attach schedule)			
		· · · · · · · · · · · · · · · · · · ·			
	12	Investmentsmortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule) ▶			
	15				
	16	Total assets (to be completed by all filers—see the	400 524	F16 122	F16 122
		instructions. Also, see page 1, item I)	408,531	516,132	516,132
	17	Accounts payable and accrued expenses			
Ş	18	Grants payable			
itie	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe )			
	23	Total liabilities(add lines 17 through 22)	0	0	
8		Foundations that follow FASB ASC 958, check here 🕨 🗌			
ž		and complete lines 24, 25, 29 and 30.			
<u>ala</u>	24	Net assets without donor restrictions			
or Fund Balances	25	Net assets with donor restrictions			
Ξ		Foundations that do not follow FASB ASC 958, check here			
1		and complete lines 26 through 30.			
	26	Capital stock, trust principal, or current funds	408,531	516,132	
Assets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
Ass	28	Retained earnings, accumulated income, endowment, or other funds	0	0	
Net	29	Total net assets or fund balances (see instructions)	408,531	516,132	
Ź	30	Total liabilities and net assets/fund balances (see instructions) .	408,531	516,132	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		al net assets or fund balances at beginning of year—Part II, column (a), line	29 (must agree with en	d-	
		rear figure reported on prior year's return)	•	1	408,531
2		er amount from Part I, line 27a		2	152,137
3		er increases not included in line 2 (itemize)		3	0
4		lines 1, 2, and 3		4	560,668
5		reases not included in line 2 (itemize)		5	44,536
6	100	al net assets or fund balances at end of year (line 4 minus line 5)—Part II, $lpha$	column (b), line 29	6	516,132

Page **3** 

	pe the kind(s) of property sold (e.g., arehouse; or common stock, 200 sha	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)			
1 a SALES OF SECURITIES			D	2019-05-28	2019-06-30		
<b>b</b> SALES OF SECURITIES			D	2019-10-28	2019-06-30		
c							
d							
<u>е</u>							
(e) Gross sales price	( <b>f</b> ) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	(h) Gain or (loss) (e) plus (f) minus (g)			
a 12	20,000	' '	120,000		, (3)		
	53,788		91,786	j	62,002		
c			•		, , , , , , , , , , , , , , , , , , ,		
d							
e							
	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69	<del>                                     </del>	TN .		
(i) F.M.V. as of 12/31/69	(j)	Excess	( <b>k</b> ) s of col. (i) l. (j), if any	Gains (Col. ( col. (k), but not	l) h) gain minus less than -0-) <b>or</b> om col.(h))		
a			(3),	-	(		
b					62,002		
С					·		
d							
If gain, also enter in Pain Part I, line 8  Part V Qualification	gain or (loss) as defined in sections art I, line 8, column (c) (see instructi	ons). If (loss), enter -(	· · · · · }				
(1 of optional use by domestic p	orivate roundations subject to the sec	ction 4940(a) tax on in	et investment meon	ie.)			
	eave this part blank. ne section 4942 tax on the distributa ot qualify under section 4940(e). Do			?	es 🗹 No		
	nount in each column for each year;						
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab		(d) Distribution rat (col. (b) divided by c			
2018	469,095		360,539	, , ,	1.301094		
2017	311,571		251,218		1.240242		
2016	195,656		154,251		1.268426		
2015	73,892		127,694		0.578665		
2014	7,100		41,939		0.169293		
2 Total of line 1, column (	d)		2		4.557720		
number of years the four	o for the 5-year base period—divide ndation has been in existence if less oncharitable-use assets for 2019 fron	than 5 years	3 3		0.911544 479,776		
<b>5</b> Multiply line 4 by line 3			5		437,337		
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		757		
			7		438,094		
	ions from Part XII, line 4 ,		8		583,466		
	eater than line 7, check the box in Pa			ng a 1% tax rate. Se			

(b)

Form	990-PF (2019)							F	Page <b>6</b>
Pa	rt VIII-B Statements Regar	ding	Activities for Which	Form 4720 May Be	Required (continued)				
5a	During the year did the foundation	pay o	r incur any amount to:					Yes	No
	(1) Carry on propaganda, or other	wise a	ttempt to influence legisl	ation (section 4945(e))?	☐ Yes S	/ No	,		
	(2) Influence the outcome of any	specifi	c public election (see sec	tion 4955); or to carry					
	on, directly or indirectly, any v	oter re	egistration drive?		· · 🔲 Yes 🛭	Z No	,		
	(3) Provide a grant to an individua	l for t	avel, study, or other sim	ilar purposes?	☐ Yes 【	Z No	,		
	(4) Provide a grant to an organiza in section 4945(d)(4)(A)? See		•			<b>7</b> 1			
	(5) Provide for any purpose other				· · · · Yes	✓ No	,		
	educational purposes, or for th			* **		7			
b	If any answer is "Yes" to 5a(1)-(5)	•	•		∟ Yes Ľ	∠ No	'		
	Regulations section 53.4945 or in a		= = = = = = = = = = = = = = = = = = = =				5b		
	Organizations relying on a current	notice	regarding disaster assist	ance check here	▶ ┌				
C	If the answer is "Yes" to question 5	ā(4),	does the foundation clair	n exemption from the	L				
	tax because it maintained expendit	ure re	sponsibility for the grant	?	· · □ Yes □	T No			
	If "Yes," attach the statement requ	ired b	y Regulations section 53.	4945-5(d).	L les L	_ 140	'		
6a	Did the foundation, during the yea	r, rece	ive any funds, directly or	indirectly, to pay premiu	ıms on				
	a personal benefit contract?				Yes Y	Z No			
b	Did the foundation, during the yea	r, pay	premiums, directly or inc	lirectly, on a personal be	nefit contract?	I¥0	6b		No
	If "Yes" to 6b, file Form 8870.								
7a	At any time during the tax year, w	as the	foundation a party to a p	prohibited tax shelter tran	nsaction? Yes	/ No	,		
b	If "Yes", did the foundation receive	any p	roceeds or have any net	income attributable to th	e transaction?		7b		
8	Is the foundation subject to the se		1 / 1	. , ,					
	excess parachute payment during	the ye	ar?		· · □ Yes 5	Z No	, L		<u> </u>
Pa	rt VIII Information About and Contractors	Offic	ers, Directors, Trust	tees, Foundation Ma	inagers, Highly Paid	Empl	oyees,	,	
1	List all officers, directors, truste	es, fo	oundation managers ar	nd their compensation.	See instructions				
	6 3 N	(	<b>b)</b> Title, and average	(c) Compensation (If	(d) Contributions to		e) Exper	nse acc	ount,
	(a) Name and address		hours per week devoted to position	not paid, enter -0-)	employee benefit plans au deferred compensation	nal,	other a		
PAUL	INE L CALDERWOOD	TRUS	·	0		0			
	OX 1234	1.00							
	S, ME 04090			_		_			
	N GARFIELD  DX 1234	TRUS		0		이			0
	S, ME 04090								
JAME:	S GARFIELD	TRUS	TEE	0		0			0
	OX 1234	3.00							
	S, ME 04090 AMIN GARFIELD	TRUS	TEE	0		0			
	OX 1234	3.00	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	J		٩			U
	S, ME 04090								
2	Compensation of five highest-pa	aid en	nployees (other than t	hose included on line 1	<del></del>	ione,	enter "	NONE	<u>."                                    </u>
(a)	Name and address of each employed	bien e	(b) Title, and average		(d) Contributions to employee benefit	/,	Expen	SA 2001	nun+
(4)	more than \$50,000	paid	hours per week	(c) Compensation	plans and deferred		other all		
			devoted to position		compensation				
NON	E								
						1			
						1			
						-			
						-			
_	Laurence of all		0.000			-			
lota	I number of other employees paid o	ver \$5	0,000		<u> ▶</u>	Щ_		0 DE	0

Form 990-PF (2019)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, Foundation N and Contractors (continued)	lanagers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional services (see instruc	tions). If none, enter "NOI	NE".
(a) Name and address of each person paid more than \$50,000 (b) Ty	ype of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info organizations and other beneficiaries served, conferences convened, research papers produced, etc.	rmation such as the number of	Expenses
1 THIS SCHOLARSHIP PROGRAM PROVIDES FINANCIAL SUPPORT TO QUALIFIED STUDENTS AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY & HIGH SCHOOL. EACH SCHOLARSHIP AWARD WILL RANGE IN AMOUNT FROM \$3,000 TO \$2 AWARDED TO ANY PARTICULAR STUDENT WILL DEPEND UPON THE STUDENT'S FINANCIAL FOUNDATION'S EVALUATION OF THE STUDENT'S APPLICATION. AWARDS WILL BE GRANTI YEARS PER STUDENT, SO LONG AS THE STUDENT REMAINS ENROLLED AS A FULL-TIME S'ACCREDITED COLLEGE OR UNIVERSITY, MAINTAINS A SUFFICIENT GRADE POINT AVERAGE	AFTER GRADUATION FROM 20,000. THE AMOUNT L NEED AND THE ED FOR UP TO FOUR TUDENT IN AN SE AND PROVIDES THE	
FOUNDATION WITH ANNUAL REPORTS REGARDING THE STUDENT'S ACADEMIC PROGRESS	<u>;</u>	73,500
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2.	Amount
1 INVESTMENTS IN SECURITIES 2		509,966
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		509,966
	<u> </u>	Form <b>990-PF</b> (2019)

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23.989

757

23,232

23.232

23.232

73,500

509,966

583,466

582,709

Form 990-PF (2019)

757

1

2c

3

4

5

6

7

1a

1b

2

За 3h

4

5

757

Form 990-PF (2019)

Part XI

1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	487,082
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	7,306
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	479,776
6	Minimum investment return. Enter 5% of line 5	6	23,989

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign

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

2a

2b

organizations check here 

and do not complete this part.)

Tax on investment income for 2019 from Part VI, line 5. . . . . .

Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

Distributable amount before adjustments. Subtract line 2c from 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

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

23,232

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	•	
t	XIII	

I	Form	990-PF	(20	19)
İ	Da	rt YTTI		Hn

990-PF (20	019)	
t XIII	Undistributed Income	(see instructions)

a From 2014. . . . .

**b** From 2015. . . . . c From 2016. . .

d From 2017. . . . .

e From 2018. . . . .

f Total of lines 3a through e. . . . . . . .

**d** Applied to 2019 distributable amount. . . . e Remaining amount distributed out of corpus

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

**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

applied on line 5 or line 7 (see instructions) . . .

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

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. . .

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

indicated below:

4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ a Applied to 2018, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . .

- 1 Distributable amount for 2019 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2019:
- a Enter amount for 2018 only. . . . . . **b** Total for prior years: 20\_\_\_\_\_\_, 20\_\_\_\_\_\_

  - 5.003
  - Excess distributions carryover, if any, to 2019: 67,511
    - - 187.999
      - 301.290
      - 451,460

1.013.263

560.234

1,573,497

5.003

1,568,494

67.511 187,999

301.290

451.460

560.234

(a)

Corpus

(b)

Years prior to 2018

(c)

2018

SUBMISSION DEADLINE FOR 2019 WAS MARCH 31, 2019

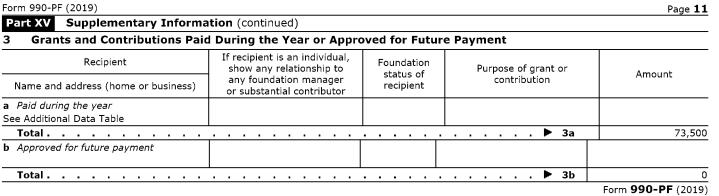
Any restrictions or limitations on awards, such as by geogra

COLLEGE OR UNIVERSITY.

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

factors:

SCHOLARSHIP FUNDS WILL BE AWARDED TO EACH RECIPIENT UPON EVIDENCE OF REGISTRATION AT AN ACCREDITED TWO OR FOUR YEAR



er gross	amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exemp
-	service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income
_	service revenue.	business code	Amount	Exclusion code	Amount	
c						
	·					
	and contracts from government agencies					
_	rship dues and assessments					
	on savings and temporary cash					
Dividen	ds and interest from securities					13,
	tal income or (loss) from real estate:					
	financed property					
	ebt-financed property					
	tal income or (loss) from personal property					
	(loss) from sales of assets other than					
invento	• /					62,0
Net inc	ome or (loss) from special events:					ĺ
	rofit or (loss) from sales of inventory					
	evenue: a					
d						
d e			0		(	75 -
d e			0	1;		
d e Subtota Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations.)			<b>3</b>	
d e Subtota Total.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the	lations.) le Accomplisi	hment of Exem	pt Purposes	3	75,7
d e Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
d e Subtota Total. (See wo Irt XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
d e Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
d e Subtota Total. (See wo rt XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
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Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
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Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
d e Subtota Total. (See wo rt XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
d e Subtota Total. (See wo rt XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
d e Subtota Total. (See wo Irt XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
d e Subtota Total. (See wo Irt XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7
Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex instructions.)  INTEREST INCOME	lations.)  e Accomplisi income is report	hment of Exemple din column (e) of	pt Purposes F Part XVI-A contribu	3	75,7

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		Information Regarding Transfers To and Transactions and Relationships With Noncharit	ahla	
P	art XVII	Exempt Organizations	abic	
L	Did the organ	nization directly or indirectly engage in any of the following with any other organization described in section 501		Π

		Exempt Organia	zations											
		ganization directly or in than section 501(c)(3)									ion 501		Yes	No
<b>a</b> Tra	ınsfers f	rom the reporting foun	dation to a n	oncha	ritable exe	empt organizati	ion o	f:						
(1)	) Cash.										. [	1a(1)		No
(2)	) Other	assets									[	1a(2)		No
<b>b</b> Oth	ner trans	sactions:												
(1)	) Sales	of assets to a nonchari	itable exempt	t orga	nization.							1b(1)		No
		ases of assets from a n		_							- F	1b(2)		No
		l of facilities, equipmer									- F	1b(3)		No
		oursement arrangemen	•								- F	1b(4)		No
		or loan guarantees.							•		- F	1b(5)		No
` '	•	mance of services or m							•		- F	1b(6)		No
		facilities, equipment, n	•		-						- F	1c		No
	-	ver to any of the above			•									NO
of t	the good any tran	ds, other assets, or ser- saction or sharing arra <b>(b)</b> Amount involved	vices given b ngement, sho	y the ow in	reporting f column <b>(d</b>	foundation. If th	he fo	oundation re goods, other	eceive r asse	d less than fair ma	rket value ived.	•	ngement	ts
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							+							
2a Is t	he foun	dation directly or indire	ectly affiliated	d with.	or related	d to, one or mo	re ta	x-exempt o	organi	zations				
		n section 501(c) (other	•			•		•	_		/es 🗸	l No		
		omplete the following so		1 301(	C)(3)) 01 1	11 3000011 327 :	•		• •			1110		
וו ט	res, co	(a) Name of organization		ı	<b>(</b>	) Type of organiz	ation	1		(c) Descriptio	n of relation	nshin		
		(a) Name or organization	// I		( )	ype or organiz	ation			(c) Descriptio	ii oi relacioi	ізпір		
	of m	er penalties of perjury, y knowledge and belief h preparer has any kno	, it is true, co											
Sign Here		<****	_			2020-04-21		***	***		return	e IRS dis		
								— <b>)</b> —			with th below	e prepar	er show	/n
	' S	Signature of officer or t	rustee			Date		Title	<del>)</del>		(see in	str.) 🔽	Yes □	] No
	1	Duint/T		D						<u> </u>	D.T.:			
		Print/Type preparer's	name	Prepa	arer's Sign	nature		Date		Check if self-	PTIN			
										employed ▶ □	F	01247	037	
Paid		DERRICK EMERY C	PA											
	Only	Firm's name ► CUM	MINGS LAMO	NT &	MCNAMEE	PLLC					Firm's EI	N <b>▶</b> 01-	03724	13
use	Only	Firm's address ▶ ON	NE NEW HAM	рситр	E A\/ENIIIE	SUITE 220								
		ininis addiess > Or	AL INEVV DAIVII	LOUIK	LAVENUE	. 50116 230					Disease	(600)	. 420 -	
		PC	RTSMOUTH,	NH 0	3801						Phone no	. (603)	430-6	200

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				
ABIGAIL BRISARD 124 WEDNESDAY HILL ROAD LEE, NH 03861		N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000

		GRADUATION FROM HIGH SCHOOL.	
ALEXIS JACQUES64 ELM STREET SOMERSWORTH, NH 03878	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
ALIZAH CORACCIOS COOPER POAD	N/A	TO SUBBORT OUALIETED	3 000

ALEXIS JACQUES64 ELM STREET SOMERSWORTH, NH 03878	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
ALIZAH CORACCIO9 COOPER ROAD BARRINGTON, NH 03825	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000

		GRADUATION FROM HIGH SCHOOL.	
ALIZAH CORACCIO9 COOPER ROAD BARRINGTON, NH 03825	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
Total		▶ 3a	73.500

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

	-			
ANNE O'DONNELL35 LAUREL LANE SOMERSWORTH, NH 03878		N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
a Paid during the year				
Name and address (nome or business)	or substantial contributor	,		

		SCHOOL.	
BROOKE MARSTON512 RIDGE ROAD MIDDLETON, NH 03861	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
NICOLE KINGDON20 DIAMOND LANE	N/A	TO SUPPORT QUALIFIED	3,000

MIDDLETON, NH 03861	Ź	STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	ŕ
NICOLE KINGDON20 DIAMOND LANE BARRINGTON, NH 03825	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000

73,500

▶ 3a

		UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	
NICOLE KINGDON20 DIAMOND LANE BARRINGTON, NH 03825	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,0

#### 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 any foundation manager contribution status of recipient

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
CAMERON DUCHESNE7 TRAKEY STREET DOVER, NH 03820		N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
ISABELLA SMITH-DAVENPORT 103 RIDGE ROAD FARMINGTON, NH 03835		N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR	3,000

		SCHOOL.	
ISABELLA SMITH-DAVENPORT 103 RIDGE ROAD FARMINGTON, NH 03835	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
EMILY GIBSON31 CARTLAND ROAD LEE, NH 03861	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO	3,000

FARMINGTON, NH 03835		FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	
EMILY GIBSON31 CARTLAND ROAD LEE, NH 03861	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000

73,500

▶ 3a

		OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	
EMILY GIBSON31 CARTLAND ROAD LEE, NH 03861	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH	3,0

#### 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 status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial contributor			
a Paid during the year				
HANNAH VINCENT24 RIVERVIEW ROAD DURHAM, NH 03824		N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
JENNIFER ANN SUWU8 RUEL STREET		N/A	TO SUPPORT QUALIFIED	1,500

		SCHOOL.	
JENNIFER ANN SUWU8 RUEL STREET SOMERSWORTH, NH 03878	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	1,500
JULIANA FERRO17 JUNIPER STREET ROCHESTER, NH 03867	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF	3,000

SOMERSWORTH, NH 03878		STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	
JULIANA FERRO17 JUNIPER STREET ROCHESTER, NH 03867	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000

Total .

73,500

▶ 3a

#### 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 status of contribution any foundation manager recipient Name and address (home or business)

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
JUSTINE MURPHY119 GOOSENECK LANE BARRINGTON, NH 03825		N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
JECCICA KDICTINA	<u> </u>	NI/A	TO CURRORT OUALIETED	3,000

		UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	
JESSICA KRISTINA 12 LINCOLN STREET 8 DOVER, NH 03820	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
KATHERINE HOPPLER25 MEADOW ROAD	N/A	TO SUPPORT QUALIFIED	3,000

12 LINCOLN STREET 8 DOVER, NH 03820		STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	
KATHERINE HOPPLER25 MEADOW ROAD DURHAM, NH 03824	N <sub>2</sub>	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000

73,500

	SCHOOL.	
KATHERINE HOPPLER25 MEADOW ROAD DURHAM, NH 03824 N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,0

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	show any relationship to status of	Purpose of grant or contribution	Amount
Name and address (home or business)		recipient		
a Paid during the year				
PATRICIA LOUIS55 ALDRICH STREET PORTSMOUTH, NH 03801		N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
MADISON PETIT 4543 WHITE MOUNTAIN HIGHWAY SANBORNEVILLE, NH 03872		N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
MOLLY HOGAN13 TANGLEWOOD DRIVE DOVER, NH 03820		N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO	3,000

MADISON PETIT 4543 WHITE MOUNTAIN HIGHWAY SANBORNEVILLE, NH 03872	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,00
MOLLY HOGAN13 TANGLEWOOD DRIVE DOVER, NH 03820	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER	3,00

		PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	
MOLLY HOGAN13 TANGLEWOOD DRIVE DOVER, NH 03820	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR	3,00

Total .

GRADUATION FROM HIGH

▶ 3a

73,500

SCHOOL.

#### 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

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
RAYMOND MILLS 235 GOODWIN ROAD APT D ROLLINSFORD, NH 03869		N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
MARCELLA WONDAL 34 COLD SPRING CIRCLE UNIT 3 ROCHESTER, NH 03839		N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER	3,000

MARCELLA WONDAL 34 COLD SPRING CIRCLE UNIT 3 ROCHESTER, NH 03839	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
GABRIELLE SULEIMAN 55A BAGDAD ROAD DURHAM, NH 03824	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR LINIVERSITY AFTER	3,000

		PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	
GABRIELLE SULEIMAN 55A BAGDAD ROAD DURHAM, NH 03824	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH	3,

Total .

		UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	
GABRIELLE SULEIMAN 55A BAGDAD ROAD DURHAM, NH 03824	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,00

▶ 3a

73,500

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
SOPHIA BRISARD 124 WEDNESDAY HILL ROAD LEE, NH 03861		N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000

		GRADUATION FROM HIGH SCHOOL.	
STEPHANIE LO23 MIDWAY PARK SOMERSWORTH, NH 03878	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
SUMMER BUSCHING	N/A	TO SUPPORT QUALIFIED	3 000

STEPHANIE LO23 MIDWAY PARK SOMERSWORTH, NH 03878	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000
SUMMER BUSCHING 52 CHERRYWOOD DRIVE DOVER, NH 03820	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000

▶ 3a

73,500

		OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	
SUMMER BUSCHING 52 CHERRYWOOD DRIVE DOVER, NH 03820	N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH	3,00

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

recipient

73,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

Name and address (home or husiness)

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
TAIZHANNA CHEVALIER 69 ADELE DRIVE DOVER, NH 03820		N/A	TO SUPPORT QUALIFIED STUDENTS IN NEED OF FINANCIAL AID FOR THE PURPOSE OF ATTENDING A TWO OR FOUR YEAR COLLEGE OR UNIVERSITY AFTER GRADUATION FROM HIGH SCHOOL.	3,000

efile GRAPHIC print - DO NOT P	ROCESS As Filed I	Data -	D	LN: 93491112007050	
TY 2019 Accounting Fees Schedule					
-					
Name: WALTER AND PAULINE CALDERWOOD FOUNDATION EIN: 46-5416046					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING	400	0		0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491112007050
TY 2019 Investments Corpora	te Bonds Sche	dule
Name:	WALTER AND PAU	JLINE CALDERWOOD FOUNDATION
	46-5416046	

<b>EIN:</b> 46-5416046					
Investments Corporate Bonds Schedule					
Name of Bond	End of Year Book	End of Year Fair			
	Value	Market Value			

INVESTMENTS

509,966

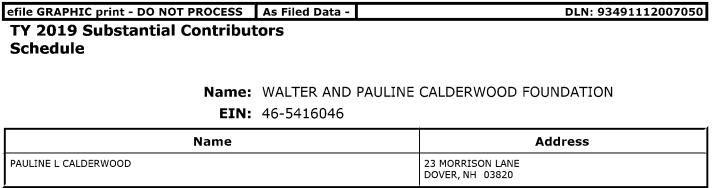
509,966

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491112007050			
TY 2019 Other Decreases Schedule						
Name:	WALTER AND	PAULINE CALDERWOOD FOUN	IDATION			
<b>EIN:</b> 46-5416046						
Description Amount						
UNREALIZED LOSSES ON INVESTMENTS			44,536			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	: 93491112007050	
TY 2019 Other Expenses Schedule					
- -					
Name:	WALTER AND P	AULINE CALDERW	VOOD FOUNDATI	iON	
	46-5416046				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
POSTAGE	111	0	1	0	
ANNUAL REPORT	75	0		0	

173

MISCELLANEOUS



Schedule B	O NOT PROCESS	As Filed Data -   Schedu	le of Contributo	re		OMB No. 1545-0047
(Form 990, 990-EZ, or 990-PF)	► Attach to Form 990, 990-EZ, or 990-PF.					2019
Department of the Treasury Internal Revenue Service	► Go to <u>www.irs.gov/Form990</u> for the latest information.					
Name of the organization WALTER AND PAULINE CA		ΓΙΟΝ			Employer id	lentification number
Organization type (che	eck one):				46-5416046	
Filers of:	Section:					
	Geotion.					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	☐ 527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	☐ 501(c)(3) taxable private foundation					
			F that received, during tomplete Parts I and II. So			
Special Rules						
under sections 5 received from ar	i09(a)(1) and 170(b)(1	1)(A)(vi), that chec ring the year, total	Form 990 or 990-EZ the sked Schedule A (Form 9 I contributions of the greal lete Parts I and II.	990 or 990-EZ), Pa	art II, line 13,	16a, or 16b, and that
during the year,	total contributions of	more than \$1,000	or (10) filing Form 990 o <i>exclusively</i> for religious animals. Complete Parts	, charitable, scient		
during the year, If this box is che purpose. Don't c	contributions exclusive cked, enter here the to complete any of the particular to th	vely for religious, cotal contributions arts unless the <b>Ge</b>	or (10) filing Form 990 or charitable, etc., purposes that were received durin neral Rule applies to th or more during the year.	s, but no such con ng the year for an e is organization be	tributions tota e <i>xclusively</i> re cause it recei	aled more than \$1,000. Higious, charitable, etc.,
Caution: An organization 990-EZ, or 990-PF), but or on its Form 990PF, P990-EZ, or 990-PF).	it <b>must</b> answer "No"	on Part IV, line 2,	of its Form 990; or chec	k the box on line I	H of its Form	
For Paperwork Reduction A for Form 990, 990-EZ, or 99		uctions	Cat. No. 30613X	Schedu	le B (Form 990	, 990-EZ, or 990-PF) (2019)

(b)

(b)

Name, address, and ZIP + 4

(b)

Name, address, and ZIP + 4

(b) Name, address, and ZIP + 4

(b) Name, address, and ZIP + 4

(b)

Name, address, and ZIP + 4

(a) No.

(a)

No.

(a)

No.

(a)

No.

(a) No. **DOVER, NH 03820** 

Employer identification number 46-5416046					
pa	ace is needed.				
	(c) Total contributions	(d) Type of contribution			
		Person			
-		☐ Payroll			
_	\$ 150,660	✓ Noncash			
		(Complete Part II for noncash contributions.)			
	(c) Total contributions	(d) Type of contribution			
		Person			
-		☐ Payroll			
_	\$	Noncash			
		(Complete Part II for noncash contributions.)			
	(c) Total contributions	(d) Type of contribution			
		Person			
1		☐ Payroll			
_	\$	Noncash			
		(Complete Part II for noncash contributions.)			
	(c) Total contributions	(d) Type of contribution			
		Person			
-		☐ Payroll			
_	\$	Noncash			
		(Complete Part II for noncash contributions.)			
	(c) Total contributions	(d) Type of contribution			
		Person			
_		Payroll			
_	\$	☐ Noncash			
		(Complete Part II for noncash contributions.)			
	(c) Total contributions	(d) Type of contribution			
1		Person			
-		☐ Payroll			
	\$	☐ Noncash			
		(Complete Part II for noncash			

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

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)		Page <b>4</b>				
	rganization ND PAULINE CALDERWOOD FOUNDATION		Employer identification number 46-5416046				
Part III	than \$1,000 for the year from any one contributor	r. Complete columns (a) to of exclusively religious, c ctions.) ► \$	ribed in section 501(c)(7), (8), or (10) that total more through <b>(e) and</b> the following line entry. For haritable, etc., contributions of <b>\$1,000 or less</b> for				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	Transferee's name, address, and ZIP 4	(e) Transfer of gift	Relationship of transferor to transferee				
		<u> </u>					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	- (c) Use of gift	(d) Description of how gift is held				
	(e) Transferee's name, address, and ZIP 4		r of gift Relationship of transferor to transferee				
			Schedule B (Form 990, 990-EZ, or 990-PF) (2019)				