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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491274003101

**2020** 

OMB No. 1545-0052

## **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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

| For                                  | calen              | ndar year 2020, or tax year beginning 01-01-20  | 020         | , an                   | ıd er    | nding 12-31-            | 2020  |   |
|--------------------------------------|--------------------|---|-------------|------------------------|----------|-------------------------|---|---|
|                                      |                    | ndation<br>CREWE FOUNDATION   |             |                        |          | A Employer ide          | entification numbe                            | r   |
|                                      |                    | WE FOUNDATION   |             |                        |          | 38-4008387              |   |   |
|                                      |                    | street (or P.O. box number if mail is not delivered to street address)<br>SSIDE ROAD  | ) Room/su   | ite                    |          | <b>B</b> Telephone nui  | mber (see instruction                         | ns)   |
|                                      |                    |   |             |                        |          | (207) 829-4341          |   |   |
|                                      |                    | , state or province, country, and ZIP or foreign postal code<br>ID FORESIDE, ME 04110   |             |                        |          | <b>C</b> If exemption   | application is pendin                         | g, check here                                   |
| G Ch                                 | eck all            | that apply: $\Box$ Initial return $\Box$ Initial return of a  | former pu   | ublic charity          |          | <b>D 1.</b> Foreign org | janizations, check he                         | ere   |
|                                      |                    | Final return Amended return   |             |                        |          |                         | ganizations meeting<br>k here and attach co   |   |
|                                      |                    | Address change Name change  |             |                        |          |                         | ndation status was t                          | · -   |
|                                      | ,                  | pe of organization: Section 501(c)(3) exempt private  |             |                        |          |                         | 1 507(b)(1)(A), chec                          |   |
|                                      |                    | 4947(a)(1) nonexempt charitable trust  Other taxable  |             |                        |          |                         |   |   |
| of y                                 | /ear (f            | et value of all assets at end rom Part II, col. (c),  ▶\$ 21,220,080  J Accounting method:  □ Other (specify)  (Part I, column (d) must | ✓ Cash      |                        | aı       |                         | tion is in a 60-montl<br>n 507(b)(1)(B), chec |   |
| Pa                                   | rt I               | Analysis of Revenue and Expenses (The total   | (a) Re      | venue and              |          |                         |   | (d) Disbursements                               |
|                                      |                    | of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)                        |             | penses per<br>books    | (b)      | Net investment income   | (c) Adjusted net income                       | for charitable<br>purposes<br>(cash basis only) |
|                                      | 1                  | Contributions, gifts, grants, etc., received (attach schedule)  |             |                        |          |                         |   |   |
|                                      | 2                  | Check ✓ if the foundation is <b>not</b> required to attach  |             |                        |          |                         |   |   |
|                                      | _                  | Sch. B  |             | 227                    |          | 227                     |   |   |
|                                      | 3<br>4             | Interest on savings and temporary cash investments  Dividends and interest from securities  |             | 239,819                | -        | 239,819                 |   |   |
|                                      | <del>т</del><br>5а | Gross rents   |             | 235,015                |          | 239,019                 |   |   |
|                                      | b                  | Net rental income or (loss)   |             |                        |          |                         |   |   |
| a l                                  | 6a                 | Net gain or (loss) from sale of assets not on line 10   | <b>9</b>    | 10,210,985             |          |                         |   |   |
| Revenue                              | b                  | Gross sales price for all assets on line 6a   | _           |                        |          |                         |   |   |
| e K                                  | _                  | 20,455,061  | <u>.</u>    |                        |          |                         |   |   |
| "                                    | 7                  | Capital gain net income (from Part IV, line 2)  |             |                        |          |                         |   |   |
|                                      | 8<br>9             | Net short-term capital gain   |             |                        |          |                         |   |   |
|                                      | 10a                | Gross sales less returns and allowances   |             |                        |          |                         |   |   |
|                                      | b                  | Less: Cost of goods sold  |             |                        |          |                         |   |   |
|                                      | С                  | Gross profit or (loss) (attach schedule)  |             |                        |          |                         |   |   |
|                                      | 11                 | Other income (attach schedule)  | <b>9</b>    | 996,583                |          | 996,583                 |   |   |
|                                      | 12                 | Total. Add lines 1 through 11   |             | 11,447,724             |          | 1,236,739               |   |   |
|                                      | 13                 | Compensation of officers, directors, trustees, etc.   |             | 221,750                |          | 7,404                   |   | 233,675   |
|                                      | 14                 | Other employee salaries and wages   |             |                        |          |                         |   |   |
| es                                   | 15                 | Pension plans, employee benefits  |             | 43,681                 |          | 1,828                   |   | 41,852  |
| Sue                                  | 16a                | Legal fees (attach schedule)  | <b>%</b> J  | 307,251                |          | 294,629                 |   | 12,622  |
| perating and Administrative Expenses | b                  | Accounting fees (attach schedule)   | 92          | 8,000                  |          | 400                     |   | 7,600   |
| e E                                  | C                  | Other professional fees (attach schedule)   | <b>%</b> J  | 204,235                |          | 29,742                  |   | 174,493   |
| ati                                  | 17                 | Interest  | 00.1        |                        |          |                         |   |   |
| <u>  st</u>                          | 18                 | Taxes (attach schedule) (see instructions)  | <b>9</b> 25 | 2,297                  |          | 2,297                   |   |   |
| 듣                                    | 19                 | Depreciation (attach schedule) and depletion  | 95          | 1,980                  |          |                         |   |   |
| A G                                  | 20                 | Occupancy   |             | 37,624<br>9,534        | -        | 1,881                   |   | 35,743<br>9,534                                 |
| 밁                                    | 21<br>22           | Travel, conferences, and meetings   |             | 1,348                  |          |                         |   | 1,348   |
| е<br>Б                               | 23                 | Other expenses (attach schedule)  | <b>9</b> 5) | 276,119                | -        | 684                     |   | 275,570   |
| Ē.                                   | 24                 | Total operating and administrative expenses.  | <u> </u>    |                        |          |                         |   | 2.5,570   |
| era<br>                              |                    | Add lines 13 through 23   |             | 1,113,819              |          | 338,865                 |   | 792,437   |
| o                                    | 25                 | Contributions, gifts, grants paid   |             | 1,226,351              | <u> </u> | •                       |   | 1,226,351                                       |
|                                      | 26                 | <b>Total expenses and disbursements.</b> Add lines 24 and 25  |             | 2,340,170              |          | 338,865                 |   | 2,018,788                                       |
|                                      | 27                 | Subtract line 26 from line 12:  |             | ۷,3 <del>4</del> 0,170 |          | 330,005                 |   | 2,010,788                                       |
|                                      | a                  | Excess of revenue over expenses and   |             |                        |          |                         |   |   |
|                                      | h                  | disbursements Net investment income (if negative, enter -0-)  |             | 9,107,554              |          | 200                     |   |   |
|                                      | b                  | iver investment income (ii negative, enter -0-)   | 1           |                        |          | 897,874                 |   | I   |
| - 1                                  | c                  | Adjusted net income (if negative, enter -0-)  |             |                        |          |                         |   |   |

| Ρæ          | rt 11  | Balance Sheets      | should be for end-of-year amounts only. (See instructions.)                       |               | (a) Book Value  | <b>(b)</b> B | ook Value                                      | (c) Fair Market Value    |
|-------------|--------|---------------------|---|---------------|-----------------|--------------|--|--------------------------|
|             | 1      | Cash—non-interest   | -bearing  |               | 8,128           |              | 46,800   | 46,794                   |
|             | 2      | Savings and tempo   | orary cash investments  |               | 267,633         |              | 134,912  | 134,912                  |
|             | 3      | Accounts receivable | e <b>▶</b>  |               |                 |              |  |                          |
|             |        | Less: allowance for | doubtful accounts   |               |                 |              |  |                          |
|             | 4      | Pledges receivable  | <u> </u>  |               |                 |              |  |                          |
|             | -      | •                   | <br>r doubtful accounts ▶   |               |                 |              |  |                          |
|             | 5      |                     | · · · · · · · · · · · · · · · · · · ·   |               |                 |              |  |                          |
|             | 6      |                     | om officers, directors, trustees, and other                                       | -             |                 |              |  |                          |
|             | •      |                     | s (attach schedule) (see instructions)  |               |                 |              |  |                          |
|             | 7      | •                   | ans receivable (attach schedule) ▶  |               |                 |              |  |                          |
|             | ,      |                     | · · · · · · · · · · · · · · · · · · ·   |               | 10.022          |              |  |                          |
|             | _      |                     | doubtful accounts   |               | 19,833          |              |  |                          |
| ŝ           | 8      |                     | e or use  | -             |                 |              |  |                          |
| Assets      | 9      |                     | and deferred charges  | _             |                 |              |  |                          |
| ĂΙ          | 10a    |                     | and state government obligations (attach schedule)                                | <u> </u>      |                 |              |  |                          |
|             | b      | Investments—corp    | orate stock (attach schedule)   |               | 5,449,246       | <b>%</b> J   | 14,198,488                                     | 14,198,488               |
|             | C      | Investments—corp    | orate bonds (attach schedule)   |               | 884,028         | <b>%</b>     | 6,812,122                                      | 6,812,122                |
|             | 11     | Investments—land    | , buildings, and equipment: basis 🕨   | _             |                 |              |  |                          |
|             |        | Less: accumulated   | depreciation (attach schedule) ▶  | .             |                 |              |  |                          |
|             | 12     | Investments-mort    | tgage loans   |               |                 |              |  |                          |
|             | 13     | Investments—othe    | r (attach schedule)   |               | 5,000,903       |              |  |                          |
|             | 14     | Land, buildings, an | d equipment: basis >686,244   |               |                 |              |  |                          |
|             |        | Less: accumulated   | depreciation (attach schedule) ▶ 1,980  |               |                 |              | 684,264  |                          |
|             | 15     | Other assets (desc  | ribe <b>&gt;</b> )  | 9             | 27,764          | <b>49</b> ,] | 27,764   | 27,764                   |
|             | 16     |                     | e completed by all filers—see the   | <del> -</del> |                 |              |  |                          |
|             |        | ,                   | see page 1, item I)   |               | 11,657,535      |              | 21,904,350                                     | 21,220,080               |
| -           | 17     |                     | and accrued expenses  | +             | , ,             |              | . ,  | , ,                      |
|             | 18     |                     |   | -             |                 |              |  |                          |
| Š.          |        |                     |   | -             |                 |              |  |                          |
| Liabilities | 19     |                     |   | $\vdash$      |                 |              |  |                          |
| 즐ㅣ          | 20     |                     | s, directors, trustees, and other disqualified persons                            | $\vdash$      |                 |              |  |                          |
| <u>∺</u>    | 21     | = =                 | er notes payable (attach schedule)  | -             |                 |              |  |                          |
|             | 22     |                     | )   | -             |                 |              |  |                          |
|             | 23     | lotal liabilities(a | dd lines 17 through 22)   | 4             |                 |              | 0  |                          |
| ş           |        | Foundations that    | follow FASB ASC 958, check here 🕨 🗌   |               |                 |              |  |                          |
| nce         |        | and complete line   | es 24, 25, 29 and 30.   |               |                 |              |  |                          |
| 흥           | 24     | Net assets without  | donor restrictions  |               |                 |              |  |                          |
| ä           | 25     | Net assets with do  | nor restrictions  |               |                 |              |  |                          |
| Fund Bala   |        | Eaundations that    | do not follow FASB ASC 958, check here 🕨 🗹  | , <u> </u>    |                 |              |  |                          |
|             |        |                     | es 26 through 30.   | 1             |                 |              |  |                          |
| 5           | 26     | •                   | principal, or current funds   |               |                 |              |  |                          |
| Assets or   | 27     |                     | urplus, or land, bldg., and equipment fund  |               |                 |              |  |                          |
| SS          |        | ·                   | •   | $\vdash$      | 11,657,535      |              | 21,904,350                                     |                          |
|             | 28     |                     | accumulated income, endowment, or other funds or fund balances (see instructions) | $\vdash$      |                 |              | 21,904,350                                     |                          |
| Ret         | 29     |                     | ,   | $\vdash$      | 11,657,535      |              |  |                          |
|             | 30     |                     | nd net assets/fund balances (see instructions) .                                  |               | 11,657,535      |              | 21,904,350                                     |                          |
|             | rt III | <u> </u>            | nanges in Net Assets or Fund Balances   |               |                 |              |  |                          |
| 1           |        |                     | balances at beginning of year—Part II, column (a), li<br>on prior year's return)  | ne 29         | must agree with |              | L  | 11,657,535               |
| 2           | =      | er amount from Part |   |               |                 | <u> </u>     |  | 9,107,554                |
| 3           |        |                     | uded in line 2 (itemize) ▶  |               |                 | _            | <u>.                                      </u> | 1,139,261                |
| 4           |        |                     |   |               |                 |              | 1  | 21,904,350               |
| 5           |        |                     | n line 2 (itemize) ▶  |               |                 | .            |  | · · ·                    |
| 6           |        |                     | balances at end of year (line 4 minus line 5)—Part II                             | , colu        | mn (b), line 29 | . (          | 5  | 21,904,350               |
|             |        |                     |   |               |                 |              | <br>F  | orm <b>990-PF</b> (2020) |

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|                                     | ee the kind(s) of property sold (e.g.,<br>arehouse; or common stock, 200 sh      |   | (b) How acquired P—Purchase D—Donation     | e Da                                      | (c)<br>te acquired<br>o., day, yr.) | (d) Date sold (mo., day, yr.)                            |
|-------------------------------------|--|---|--|---|-------------------------------------|--|
| 1aSee Additional Data Tabl          | e  |   |  |   |                                     |  |
| b                                   |  |   |  |   |                                     |  |
| c                                   |  |   |  |   |                                     |  |
| d                                   |  |   |  |   |                                     |  |
| e                                   |  |   |  |   |                                     |  |
| <b>(e)</b><br>Gross sales price     | <b>(f)</b> Depreciation allowed (or allowable)                                   | Cost or oplus expe  |  | (h) Gain or (loss) (e) plus (f) minus (g) |                                     |  |
| a See Additional Data Tabl          | e  |   |  |   |                                     |  |
| b                                   |  |   |  |   |                                     |  |
| c                                   |  |   |  |   |                                     |  |
| d                                   |  |   |  |   |                                     |  |
| e                                   |  |   |  |   |                                     |  |
|                                     |  |   |  |   |                                     |  |
| Complete only for assets            | s showing gain in column (h) and ow  | vned by the foundation o                                  | on 12/31/69                                |   | (                                   | I)   |
| <b>(i)</b><br>F.M.V. as of 12/31/69 | (j)<br>Adjusted basis<br>as of 12/31/69  | Excess  | <b>(k)</b><br>of col. (i)<br>. (j), if any | со  | I. (k), but not                     | h) gain minus<br>less than -0-) <b>or</b><br>om col.(h)) |
| a See Additional Data Tabl          | e  |   |  |   |                                     |  |
| b                                   |  |   |  |   |                                     |  |
| c                                   |  |   |  |   |                                     |  |
| d                                   |  |   |  |   |                                     |  |
| e                                   |  |   |  |   |                                     |  |
|                                     |  |   |  |   |                                     |  |
| 2 Capital gain net income           | , , ,  | If gain, also enter in Particle If (loss), enter -0- in F |  | } 2                                       |                                     | -124,111   |
| ·                                   | gain or (loss) as defined in sections<br>ort I, line 8, column (c) (see instruct | ions). If (loss), enter -0                                |  | } 3                                       |                                     | 16,861   |
| ·                                   |  |   |  | , –                                       |                                     | 10,001   |
| _                                   | Under Section 4940(e) for Re   |   |  | Income                                    | }                                   |  |
|                                     | LED ON DECEMBER 20, 2019   | - DO NOT COMPLI   | ETE  |   |                                     |  |
| 1 Reserved                          | a.   | (-)   |  |   | (4)                                 |  |
| (a)<br>Reserved                     | <b>(b)</b><br>Reserved   | (c)<br>Reserved   |  |   | <b>(d)</b><br>Reserved              |  |
|                                     |  |   |  |   |                                     |  |
|                                     |  |   |  |   |                                     |  |
|                                     |  |   |  |   |                                     |  |
|                                     |  |   |  |   |                                     |  |
|                                     |  |   |  |   |                                     |  |
| <b>2</b> Reserved                   |  |   |  | 2   |                                     |  |
| <b>3</b> Reserved                   |  |   | [  | 3   |                                     |  |
| <b>4</b> Reserved                   |  |   | 🗀  | 4   |                                     |  |
| <b>5</b> Reserved                   |  |   | 🗀  | 5   |                                     |  |
| 6 Reserved                          |  |   | -  | 6   |                                     |  |
|                                     |  |   | -  |   |                                     |  |
|                                     |  |   | -  | 7   |                                     |  |
| <b>B</b> Keservea ,                 |  |   |  | 8   |                                     |  |

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| Pai   | t VII-B         | Statements Regard                          | ling   | Activities for Which                  | Form 4720 May Be           | Required (co                  | ontinue     | ed)      |        |               |         | <u> </u> |
|-------|-----------------|--|--------|---------------------------------------|----------------------------|-------------------------------|-------------|----------|--------|---------------|---------|----------|
| 5a    | During the      | year did the foundation p                  | ay o   | r incur any amount to:                | ·                          |                               |             |          |        |               | Yes     | No       |
|       | (1) Carry       | on propaganda, or otherw                   | ise a  | ttempt to influence legisl            | ation (section 4945(e))?   | Г                             | Yes         |          |        |               |         |          |
|       |                 | nce the outcome of any sp                  |        | -                                     |                            | L                             | ⊔ Yes       | ¥        | No     |               |         |          |
|       | on, dir         | rectly or indirectly, any vo               | ter re | gistration drive?                     |                            | г                             | ٦.,         | <b>✓</b> |        |               |         |          |
|       | (3) Provid      | le a grant to an individual                | for t  | avel, study, or other sim             | ilar purposes?             | F                             | ່ Yes       |          | No     |               |         |          |
|       | (4) Provid      | le a grant to an organizati                | on ot  | her than a charitable, etc            | , organization described   | <u></u>                       | <b>」Yes</b> | •        | No     |               |         |          |
|       | in sect         | tion 4945(d)(4)(A)? See ir                 | stru   | ctions                                |                            | г                             | Yes         |          | N.     |               |         |          |
|       | (5) Provid      | le for any purpose other th                | nan r  | eligious, charitable, scien           | tific, literary, or        | L                             | _ Yes       | •        | NO     |               |         |          |
|       | educa           | tional purposes, or for the                | prev   | ention of cruelty to childr           | en or animals?             | г                             | Yes         |          | N      |               |         |          |
| b     | If any ans      | wer is "Yes" to 5a(1)-(5),                 | did a  | ny of the transactions fa             | il to qualify under the ex | ceptions describ              |             | •        | NO     |               |         |          |
|       | Regulation      | ns section 53.4945 or in a                 | curre  | nt notice regarding disas             | ter assistance? See instr  | uctions                       |             |          |        | 5b            |         |          |
|       | Organizati      | ons relying on a current n                 | otice  | regarding disaster assist             | ance check here            |                               | . ▶         |          |        |               |         |          |
| С     | If the ansv     | wer is "Yes" to question 5a                | (4),   | does the foundation clain             | n exemption from the       |                               |             |          |        |               |         |          |
|       | tax becaus      | se it maintained expenditu                 | re re  | sponsibility for the grant?           | ?                          |                               | Yes         | П        | No     |               |         |          |
|       | If "Yes," a     | ttach the statement requi                  | ed b   | y Regulations section 53.             | 4945-5(d).                 | L                             | _ 1es       | Ш        | NO     |               |         |          |
| 6a    | Did the fo      | undation, during the year,                 | rece   | ive any funds, directly or            | indirectly, to pay premi   | ums on                        |             |          |        |               |         |          |
|       |                 | benefit contract?                          |        | , , , , , ,                           |                            |                               | ٦ ٧         | <b>✓</b> | N      |               |         |          |
| b     | Did the fo      | undation, during the year,                 | pay    | premiums, directly or ind             | lirectly, on a personal be | nefit contract? .             | <b>」Yes</b> |          | No     | 6b            |         | No       |
|       | If "Yes" to     | 6b, file Form 8870.                        |        |                                       |                            |                               |             |          |        |               |         |          |
| 7a    | At any tim      | e during the tax year, was                 | s the  | foundation a party to a p             | orohibited tax shelter tra | nsaction?                     | Yes         | <b>7</b> | No     |               |         |          |
| b     | If "Yes", d     | id the foundation receive a                | any p  | roceeds or have any net               | income attributable to the | ne transaction?               |             |          | 110    | 7b            |         |          |
| 8     | Is the four     | ndation subject to the sect                | ion 4  | .960 tax on payment(s) o              | of more than \$1,000,000   | in remuneration               | or          |          |        |               |         |          |
|       | excess par      | rachute payment during th                  | ie ye  | ar?                                   |                            | · • г                         | Yes         | <b>~</b> | No     |               |         |          |
|       |                 | Information About C                        | ffic   | ers, Directors, Trust                 | ees, Foundation Ma         | anagers, Higl                 |             |          |        | vees,         |         |          |
| Pai   | t VIII          | and Contractors                            |        |                                       | •                          |                               | -           |          |        |               |         |          |
| 1     | List all of     | ficers, directors, trustee                 | es, fo | oundation managers ar                 | d their compensation       | . See instruction             | ns          |          |        |               |         |          |
|       | ( ) N           | 1 11                                       | (      | <b>b)</b> Title, and average          | (c) Compensation (If       | (d) Contrib                   |             |          | (e)    | Expen         | se acc  | ount,    |
|       | ( <b>a</b> ) Na | me and address                             |        | hours per week<br>devoted to position | not paid, enter<br>-0-)    | employee bene<br>deferred con |             |          |        |               | lowand  |          |
| See A | Additional D    | ata Table                                  |        |                                       | - ,                        |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
| 2     | Compens         | ation of five highest-pai                  | d en   | ployees (other than t                 | hose included on line      | L—see instruct                | ions). I    | [f no    | ne, er | nter "l       | NONE.   | 71       |
|       |                 |  |        | (b) Title, and average                |                            | (d) Contrib                   | utions t    | ю        |        |               |         |          |
| (a)   |                 | address of each employee ore than \$50,000 | paid   | hours per week                        | (c) Compensation           | employee<br>plans and         |             |          |        |               | se acco |          |
|       | me              | ore than \$50,000                          |        | devoted to position                   |                            | compen                        |             | ۱ ا      | οι     | ner an        | owance  | 25       |
| NON   |                 |  |        |                                       |                            | · ·                           |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
| -     |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
|       |                 |  |        |                                       |                            |                               |             |          |        |               |         |          |
| Tota  | I number of     | other employees paid over                  | er \$5 | 0,000                                 |                            |                               | <b>•</b>    | $\dashv$ |        |               |         |          |
|       |                 | - , .                                      |        |                                       |                            |                               |             |          | For    | m <b>99</b> ( | D-PF (  | 2020)    |

| Form 990-PF (2020)  |  | Page <b>7</b>    |
|---|--|------------------|
| Part VIII Information About Officers, Directors, Training and Contractors (continued)   | ustees, Foundation Managers, Highly Paid                       | l Employees,     |
| 3 Five highest-paid independent contractors for profession  |  | IONE".           |
| (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 service   | ces  |                  |
| Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. 1 | Include relevant statistical information such as the number of | :                |
| organizations and other beneficiaries served, conferences convened, research pa   | apers produced, etc.   | Expenses         |
| 1   |  |                  |
|   |  | 4                |
| 2   |  |                  |
| -   |  | -                |
| -   |  | -                |
| 3   |  |                  |
|   |  |                  |
|   |  |                  |
| 4   |  | _                |
|   |  | 4                |
| Part IX-B Summary of Program-Related Investmen  | ite (egg instructions)   |                  |
| Describe the two largest program-related investments made by the foundation   |  | Amount           |
| <b>1</b> N/A  | ,  |                  |
| 2   |  |                  |
|   |  |                  |
|   |  |                  |
| All other program-related investments. See instructions.  |  |                  |
| 3   |  |                  |
|   |  |                  |
| Total. Add lines 1 through 3  |  | <b>P</b>         |
|   |  | 5 000 PF (3030)  |

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

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

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

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

Amounts set aside for specific charitable projects that satisfy the:

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

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

1

2

3

4

5

b

1a

1b

2

За 3h

4

5

2,018,788

2,018,788

2.018.788

Form 990-PF (2020)

a From 2015. . . . .

**b** From 2016. . . . .

e From 2019. . . . .

c From 2017. . . . d From 2018. . . . . Page 9

| Form | 990-PF  | (202 |
|------|---------|------|
| Pa   | rt XIII |      |

| 9 | 0 | ١- | P | F | ( | 2 | 0 | 2 | 0 |
|---|---|----|---|---|---|---|---|---|---|
|   |   |    |   |   |   |   |   |   |   |

| -PF (20 | 020)                              |        |   |
|---------|-----------------------------------|--------|---|
| 4 4 4 4 | Undistributed Income (see instruc | tions) | _ |
|         |                                   | (a)    |   |

| Undistributed Income (see instruc | tion |
|-----------------------------------|------|
|                                   |      |
|                                   |      |

a Enter amount for 2019 only. . . . . . Excess distributions carryover, if any, to 2020:

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

**d** Applied to 2020 distributable amount. . . . e Remaining amount distributed out of corpus

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

**5** Excess distributions carryover applied to 2020. (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) . . .

9 Excess distributions carryover to 2021.

10 Analysis of line 9: a Excess from 2016. . .

**b** Excess from 2017. .

d Excess from 2019. . e Excess from 2020. .

c Excess from 2018. . . .

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

6 Enter the net total of each column as

**b** Prior years' undistributed income. Subtract line 4b from line 2b . . . . . . . . . . . . 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 2019. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . f Undistributed income for 2021. 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 2015 not

indicated below:

4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ a Applied to 2019, 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). . . . . . . . .

Corpus 1 Distributable amount for 2020 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2020:

2.199.946

1,221,732

3,421,678

971.897

2,449,781

971.897 415,815

241.424

130.127 440,683

415.815 241,424

130.127

440.683

1,221,732

(b)

Years prior to 2019

(d) 2020

(c)

2019

797,056

797,056

Form **990-PF** (2020)

MUST BE A SECTION 501(C)(3) ORGANIZATION

|    | Part XIV Private Operating Foun   | <b>dations</b> (see insti | ructions and Part \    | /II-A, question 9)        |                     |                  |
|----|---|---------------------------|------------------------|---------------------------|---------------------|------------------|
| 1a | If the foundation has received a ruling or d foundation, and the ruling is effective for 2                    |                           |                        |                           |                     |                  |
| b  | Check box to indicate whether the organiza  | tion is a private ope     | rating foundation des  | scribed in section $\Box$ | ] 4942(j)(3) or □   | ] 4942(j)(5)     |
| 2a | Enter the lesser of the adjusted net  | Tax year                  |                        | Prior 3 years             |                     | (e) Total        |
|    | income from Part I or the minimum investment return from Part X for each                                      | (a) 2020                  | <b>(b)</b> 2019        | (c) 2018                  | (d) 2017            | (e) iotai        |
|    | year listed   |                           |                        |                           |                     |                  |
| b  | 85% of line 2a  |                           |                        |                           |                     |                  |
| С  | Qualifying distributions from Part XII,   |                           |                        |                           |                     |                  |
|    | line 4 for each year listed   |                           | +                      |                           |                     |                  |
| a  | directly for active conduct of exempt activities  |                           |                        |                           |                     |                  |
| е  | Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c |                           |                        |                           |                     |                  |
| 3  | Complete 3a, b, or c for the alternative test relied upon:  |                           |                        |                           |                     |                  |
| а  | "Assets" alternative test—enter:  |                           |                        |                           |                     |                  |
|    | (1) Value of all assets   |                           |                        |                           |                     |                  |
|    | (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.  |                           |                        |                           |                     |                  |
| С  | "Support" alternative test—enter:  (1) Total support other than gross   |                           |                        |                           |                     |                  |
|    | investment income (interest,  |                           |                        |                           |                     |                  |
|    | dividends, rents, payments  |                           |                        |                           |                     |                  |
|    | on securities loans (section 512(a)(5)), or royalties)  |                           |                        |                           |                     |                  |
|    | (2) Support from general public   |                           |                        |                           |                     |                  |
|    | and 5 or more exempt  |                           |                        |                           |                     |                  |
|    | organizations as provided in section 4942(j)(3)(B)(iii)   |                           |                        |                           |                     |                  |
|    | (3) Largest amount of support   |                           |                        |                           |                     |                  |
|    | from an exempt organization   |                           |                        |                           |                     |                  |
|    | (4) Gross investment income   |                           |                        | <u> </u>                  |                     |                  |
| Pa | rt XV Supplementary Information assets at any time during t   |                           |                        | foundation had            | \$5,000 or more     | ın               |
| 1  | Information Regarding Foundation Ma   |                           | u ucuons. j            |                           |                     |                  |
|    | List any managers of the foundation who had before the close of any tax year (but only in                     | ave contributed more      |                        |                           |                     | n                |
| b  | List any managers of the foundation who ov  | vn 10% or more of t       | he stock of a corpora  | ation (or an equally l    | arge portion of the |                  |
|    | ownership of a partnership or other entity)   |                           |                        |                           | J .                 |                  |
| 2  | Information Regarding Contribution, G   | rant, Gift, Loan, So      | cholarship, etc., Pro  | ograms:                   |                     |                  |
|    | Check here $\blacktriangleright$ $\square$ if the foundation only ma  | kes contributions to      | preselected charitab   | le organizations and      | does not accept     |                  |
|    | unsolicited requests for funds. If the found other conditions, complete items 2a, b, c,                       | ation makes gifts, gr     | ants, etc. to individu | uals or organizations     | under               |                  |
| a  | The name, address, and telephone number   | or e-mail address o       | f the person to whom   | n applications should     | be addressed:       |                  |
|    | THE BOB CREWE FOUNDATION  |                           |                        |                           |                     |                  |
|    | 250 FORESIDE ROAD   |                           |                        |                           |                     |                  |
|    | CUMBERLAND FORESIDE, ME 04110<br>(207) 829-4341   |                           |                        |                           |                     |                  |
|    | INFO@BOBCREWEFOUNDATION.ORG   |                           |                        |                           |                     |                  |
| b  | The form in which applications should be s  | ubmitted and informa      | ation and materials t  | hey should include:       |                     |                  |
|    | BCF GRANT APPLICATION FORM COMPLETE DIRECTORS, COPY OF 501(C)(3) STATUS.                                      | ED BY A 501(C)(3) O       | RGANIZATION. INCL      | .UDE: ORGANIZATIC         | N NAME, ADDRESS,    | LIST OF BOARD OF |
|    | Any submission deadlines:   |                           |                        |                           |                     |                  |
| •  | DECEMBER 31ST FOR THE FOLLOWING YEA   | AR.                       |                        |                           |                     |                  |
| d  | Any restrictions or limitations on awards, s  |                           | cal areas, charitable  | fields, kinds of instit   | utions, or other    |                  |
| -  | factors:  | , 55                      |                        | ,                         | ,                   |                  |

Form **990-PF** (2020)

| Part X   | VI-A An  | alysis of Income-Producing  |  |                                   |                                   |                        | (e)                               |
|--|--|---|--|-----------------------------------|-----------------------------------|------------------------|-----------------------------------|
| Enter gro                                      | oss amounts (  | unless otherwise indicated.   |  | usiness income                    | Excluded by section               |                        | Related or exempt function income |
| _  | am service re  | evenue:   | (a)<br>Business code                         | <b>(b)</b><br>Amount              | (c)<br>Exclusion code             | (d)<br>Amount          | (See instructions.)               |
|  |  |   |  |                                   |                                   |                        |                                   |
|  |  |   |  |                                   |                                   |                        |                                   |
|  |  |   |  |                                   |                                   |                        |                                   |
|  |  |   |  |                                   |                                   |                        |                                   |
|  |  | cts from government agencies  |  |                                   |                                   |                        |                                   |
| 3 Inter  | est on saving  | and assessments   |  |                                   | 14                                | 337                    |                                   |
|  |  | erest from securities   |  |                                   | 14                                | 239,819                |                                   |
|  |  | or (loss) from real estate:   |  |                                   |                                   |                        |                                   |
|  | •  | ed property   |  |                                   |                                   |                        |                                   |
|  |  | or (loss) from personal property income.  |  |                                   |                                   |                        |                                   |
|  |  | n sales of assets other than  |  |                                   |                                   |                        |                                   |
|  |  |   |  |                                   | 14                                | 10,210,985             |                                   |
|  | ,  | ss) from special events:<br>ss) from sales of inventory   |  |                                   |                                   |                        |                                   |
|  | er revenue:  | assy from sales of inventory  |  |                                   |                                   |                        |                                   |
|  | YALTIES  |   |  |                                   | 15                                | 993,583                |                                   |
| D BO   | OK SALES   |   |  |                                   | 25                                | 3,000                  |                                   |
| c  |  |   |  |                                   |                                   |                        |                                   |
| d  |  |   |  |                                   |                                   |                        |                                   |
| d<br>e   |  |   |  |                                   |                                   | 44 447 724             |                                   |
| d<br>e<br>12 Subt<br>13 Tota<br>(See           | otal. Add colu<br>II. Add line 12<br>worksheet in  | umns (b), (d), and (e)  | ulations.)                                   |                                   |                                   | 11,447,724<br><b>3</b> | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See           | otal. Add columber of the colu | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |
| d<br>e<br>12 Subt<br>13 Tota<br>(See<br>Part X | otal. Add column Add Ine 12 worksheet in VI-B Rel  | umns (b), (d), and (e).  2, columns (b), (d), and (e).  line 13 instructions to verify calculationship of Activities to the below how each activity for which complishment of the foundation's expressions. | ulations.)  he Accomplish  income is reporte | ment of Exempled in column (e) of | pt Purposes f Part XVI-A contribu | 3                      | 11,447,724                        |

| orm 9         | 90-PF (                                      |   |                               |                |                                 |                                      |                         |                           |   |   | Pa       | ge <b>13</b> |
|---------------|--|---|-------------------------------|----------------|---------------------------------|--------------------------------------|-------------------------|---------------------------|---|---|----------|--------------|
| Part          | XVII   | Information Re<br>Exempt Organia  |                               | ransi          | fers To a                       | nd Transact                          | ions and                | l Relatio                 | nships With None                                    | charitable                              |          |              |
|               |  | ganization directly or in-<br>than section 501(c)(3)                              |                               |                |                                 |                                      |                         |                           |   | n 501                                   | Yes      | No           |
|               | •  | from the reporting foun   | -                             | •              |                                 | · ·                                  |                         | •                         |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   | 1a(1)                                   |          | No           |
|               |  | assets  |                               |                |                                 |                                      |                         |                           |   | . 1a(2)                                 |          | No           |
| <b>b</b> Oth  | er tran                                      | sactions:   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
| (1)           | Sales  | of assets to a nonchari   | table exempt                  | t orga         | nization.                       |                                      |                         |                           |   | . 1b(1)                                 |          | No           |
| (2)           | Purch  | ases of assets from a n   | oncharitable                  | exem           | pt organiz                      | ation                                |                         |                           |   | . 1b(2)                                 |          | No           |
| (3)           | Renta  | al of facilities, equipmen  | nt, or other a                | ssets.         |                                 |                                      |                         |                           |   | . 1b(3)                                 |          | No           |
| (4)           | Reim   | bursement arrangemen  | ts                            |                |                                 |                                      |                         |                           |   | 1b(4)                                   |          | No           |
| (5)           | Loans  | s or loan guarantees.   |                               |                |                                 |                                      |                         |                           |   | . 1b(5)                                 |          | No           |
| (6)           | Perfor                                       | mance of services or m  | embership or                  | r fundi        | raising soli                    | citations                            |                         |                           |   | 1b(6)                                   |          | No           |
| <b>c</b> Sha  | aring of                                     | facilities, equipment, n  | nailing lists, d              | other a        | assets, or <sub>l</sub>         | paid employees                       |                         |                           |   | . <u>1c</u>                             |          | No           |
| of t<br>in a  | he goo                                       | ver to any of the above<br>ds, other assets, or servins<br>action or sharing arra | vices given b<br>ngement, sho | y the<br>ow in | reporting f<br>column <b>(d</b> | oundation. If th<br>) the value of t | ne foundat<br>he goods, | ion receive<br>other asse | ed less than fair marke<br>ets, or services receive | et value<br>ed.                         |          | .+-          |
| (a) Line      | NO.  | (b) Amount involved   | (c) Name or                   | noncna         | aritable exen                   | npt organization                     | (a) D                   | escription or             | transfers, transactions, a                          | and snaring arra                        | ngemen   | its          |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  | ndation directly or indire  | •                             |                | •                               | •                                    |                         |                           | _   | _                                       |          |              |
| des           | cribed                                       | in section 501(c) (other  | than section                  | า 501(         | c)(3)) or ii                    | n section 527? .                     |                         |                           | L Yes   | s 🗹 No                                  |          |              |
| <b>b</b> If " | Yes," co                                     | omplete the following so  | chedule.                      |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  | (a) Name of organization  | n                             |                | (Ь                              | <b>)</b> Type of organiza            | ation                   |                           | (c) Description o                                   | of relationship                         |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               |                |                                 |                                      |                         |                           |   |   |          |              |
|               | of m   | er penalties of perjury,<br>y knowledge and belief<br>h preparer has any kno      | , it is true, co              |                |                                 |                                      |                         |                           |   |   |          |              |
| Sign          | , ,  | *****   |                               |                |                                 | 2021-09-22                           |                         | *****                     |   | May the IRS di<br>return                | scuss th | nis          |
| Here          | <b>                                     </b> | Signature of officer or to  | rustee                        |                |                                 | Date                                 | — <b>)</b>              | Title                     |   | with the prepa<br>below<br>(see instr.) | _        |              |
|               | •  | Print/Type preparer's   | name                          | Prepa          | arer's Sign                     | ature                                | Date                    |                           | p-  | <br>TIN                                 |          |              |
|               |  | ,   |                               |                |                                 |                                      | Date                    |                           | Check if self-                                      |   | 0000     |              |
|               |  | JEFFREY RAAB  |                               |                |                                 |                                      | 202                     | 1 00 33                   | employed ▶ ☐  | P00542                                  | 2089     |              |
| Paid          |  | JETT NET NAME   |                               |                |                                 |                                      | 202                     | 1-09-22                   |   |   |          |              |
|               | arer<br>Only                                 |   | YON KERSTE                    | EN OL          | JELLETTE                        |                                      | <u> </u>                |                           | Fi  | rm's EIN ▶01                            | -04401   | L55          |
|               | /  |   | LONG CREE                     | K DR           |                                 |                                      |                         |                           |   |   |          |              |
|               |  |   |                               | VVID *         | AE 04106                        |                                      |                         |                           | Pł  | hone no. (207                           | ) 773-   | 2986         |
|               |  | 1 50  | OUTH PORTLA                   | AND, N         | 15 04106                        |                                      |                         |                           |   | •                                       |          |              |

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation BRISTOL MYERS SQUIBB Р 2020-08-03 2020-07-06 OTIS WORLDWIDE CORP Ρ 2020-08-11 BRISTOL MYERS SQUIBB Р 2019-11-21 2020-01-28 QUALCOMM Ρ 2020-01-22 ISHARES 1-3 YEAR TREASURY Ρ 2020-07-01 Р RAYTHEON TECHNOLOGIES 2020-08-11 Ρ 2020-09-28 OCCIDENTAL PETROL 2020-08-03 Р 2020-10-23 SCHLUMBERGER LTD VANGUARD INTERM-TERM Ρ 2020-10-20 Р 2019-08-12 2020-10-20 VANGUARD INTERM-TERM INV Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 2 2 12,640 12,975 -335 1,057 690 367 85,044 64.730 20,314 986,273 988,400 -2,12725,591 27,384 -1,793 471 802 -331 16,881 101,664 -84,783 673,326 662,262 11,064 136,649 129,750 6,899 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any -335 367 20,314 -2,127-1,793-331 -84,783 11,064 6,899

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (d) (c) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation VANGUARD SHORT TERM TREASURY Ρ 2020-03-23 VANGUARD ST INVESTMENT Ρ 2020-03-23 VANGUARD SHORT TERM BOND Р 2020-09-28 2020-12-02 VANGUARD ST INVESTMENT Ρ 2020-12-31 VANGUARD SHORT TERM INV GRADE Ρ 2020-07-01 2020-12-31 Ρ **VONTIER CORP** 2020-10-23 Ρ 2020-11-25 VANGUARD ULTRA SHORT TERM BOND 2020-07-30 Р 2014-09-11 2020-01-22 WALGREENS BOOTS Ρ 2020-10-23 ABB LTD CARRIER GLOBAL CORP Ρ 2020-08-11 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 402,243 399.500 2,743 -19,176 420,663 439,839 99,278 99,606 -328 318,868 309,912 8,956 681,107 675,584 5,523 14,065 5,799 8,266 395,550 395,500 -50 40,299 47,381 -7,082 73,164 59,732 13,432 11,693 9,277 2,416 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 2,743 -19,176 -328 8,956 5,523 5,799 -50 -7,082 13,432 2,416

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation ISHARES CORE 1-5 YEAR USD Ρ 2020-12-10 ISHARES 1-3 YEAR TREASURY Ρ 2020-11-25 NEWELL BRANDS INC Р 2020-04-29 OCCIDENTAL PETROL Р 2020-10-23 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 304,032 295,488 8,544 371,433 363,132 8,301 16,820 52,375 -35,555 12,985 99,775 -86,790 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) (1)Losses (from col.(h)) (i) as of 12/31/69 (k) over col. (i), if any 8,544

8,301 -35,555 -86,790

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation DANIEL N CREWE PRESIDENT 120,750 27,329 15.00 PO BOX 6112 FALMOUTH, ME 04110 JUDITH C YOUNG 2,000 DIRECTOR n 1.00 PO BOX 6112 FALMOUTH, ME 04110 KEN BLASCHKE **TREASURER** 2,000 1.00 PO BOX 6112 FALMOUTH, ME 04110 CRAIG COOPER DIRECTOR 0 1.00 PO BOX 6112 FALMOUTH, ME 04110 DAVID BACKER **SECRETARY** 1.00 PO BOX 6112 FALMOUTH, ME 04110 MARY BAXTER DIRECTOR 2,000 1.00 PO BOX 6112 FALMOUTH, ME 04110 REID B CREWE DIRECTOR 93,000 15.00 PO BOX 6112 FALMOUTH, ME 04110 CYRUS HAGGE DIRECTOR 2,000

1.00

PO BOX 6112 FALMOUTH, ME 04110

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                       |                            |           |                                  |         |
| 317 MAIN ST317 MAIN ST<br>YARMOUTH, ME 04096 | NONE                       | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 165,000 |
|  |                            |           |                                  |         |

| YARMOUTH, ME 04096   |      |           | PROGRAMS                         |        |
|--|------|-----------|----------------------------------|--------|
| ACLU FOUNDATION<br>121 MIDDLE ST SUITE 303<br>PORTLAND, ME 04101 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 60,000 |
| BACH VIRTUOSI FESTIVAL<br>143 STATE STREET                       | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 500    |

| PORTLAND, ME 04101   |      |           |                                  |     |
|--|------|-----------|----------------------------------|-----|
| BACH VIRTUOSI FESTIVAL<br>143 STATE STREET<br>PORTLAND, ME 04101 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 500 |

Total .

1,206,636

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Recipient If recipient is an individual, show any relationship to status of status of reconstribution Paid During the Year or Approved for Future Payment

| Purpose of grant or contribution | Amount status of contribution | Contrib

| Name and address (home or business)  | or substantial contributor | recipient |                                  |        |
|--|----------------------------|-----------|----------------------------------|--------|
| a Paid during the year   |                            |           |                                  |        |
| BANGOR REGION YMCA<br>SECOND STREET<br>BANGOR, ME 04401                      | NONE                       | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 10,000 |
| BOYS & GIRLS CLUB OF SOUTHERN ME<br>277 CUMBERLAND AVE<br>PORTLAND, ME 04112 | NONE                       | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 3,000  |
| BREAKWATER SCHOOL<br>856 BRIGHTON AVE<br>PORTLAND, ME 04102                  | NONE                       | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 40,000 |

Total . .

1,206,636

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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

recipient

1,206,636

▶ 3a

any foundation manager

Name and address (home or business)

PORTLAND, ME 04101

|  | or substantial contributor |           |                                  |        |
|--|----------------------------|-----------|----------------------------------|--------|
| a Paid during the year   |                            |           |                                  |        |
| CENTER FOR MAINE CONTEMPORARY<br>ART<br>21 WINTER STREET<br>ROCKLAND, ME 04841 | NONE                       | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 1,000  |
| CREATIVE PORTLAND84 FREE STREET<br>PORTLAND, ME 04101                          | NONE                       | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 20,500 |
|  | l                          |           |                                  |        |

| ROCKLAND, ME 04841                                    |      |           |                                  |        |
|---|------|-----------|----------------------------------|--------|
| CREATIVE PORTLAND84 FREE STREET<br>PORTLAND, ME 04101 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 20,500 |
| EQUALITY COMMUNITY CENTER<br>511 CONGRESS STREET      | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 1,200  |

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

Recipient

If recipient is an individual, show any relationship to status of contribution

Purpose of grant or contribution

recipient

1,206,636

▶ 3a

any foundation manager

NEW YORK, NY 10003

| Name and address (home or business)                                       | or substantial contributor | recipient |                                  |       |
|---|----------------------------|-----------|----------------------------------|-------|
| a Paid during the year  |                            |           |                                  |       |
| EQUALITY OF MAINE FOUNDATION<br>511 CONGRESS ST<br>PORTLAND, ME 04101     | NONE                       | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 5,500 |
| EQUALITY OF MAINE FOUNDATION<br>511 CONGRESS STREET<br>PORTLAND, ME 04104 | NONE                       | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 2,500 |
| FRACTURED ATLAS INC<br>228 PARK AVENUE SOUTH                              | NONE                       | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 6,500 |

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   |      |           |                                  |        |
|--|------|-----------|----------------------------------|--------|
| FRANNIE PEABODY CENTER INC<br>30 DANFORTH STREET<br>PORTLAND, ME 04101 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 15,000 |
| FRIENDS OF KATAHDIN WOODS &  | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT          | 10.000 |

| PORTLAND, ME 04101  |      |           |                                  |        |
|---|------|-----------|----------------------------------|--------|
| FRIENDS OF KATAHDIN WOODS &<br>WATERS<br>PO BOX 18177<br>PORTLAND, ME 04112 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 10,000 |
| FULL PLATES FULL POTENTIAL<br>188 STATE STREET STE 407                      | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 40,000 |

1,206,636

| PO BOX 18177<br>PORTLAND, ME 04112   |      |           | 1110010110                       |        |
|--|------|-----------|----------------------------------|--------|
| FULL PLATES FULL POTENTIAL<br>188 STATE STREET STE 407<br>PORTLAND, ME 04101 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 40,000 |

| PO BOX 18177<br>PORTLAND, ME 04112                                     |      |           |                                  |      |
|--|------|-----------|----------------------------------|------|
| FULL PLATES FULL POTENTIAL 188 STATE STREET STE 407 PORTI AND ME 04101 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 40,0 |

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 (nome or business) | or substantial contributor |  |  |
|-------------------------------------|----------------------------|--|--|
| a Paid during the year              |                            |  |  |
|                                     |                            |  |  |

| G&LRPO BOX 180300<br>BOSTON, MA 02118 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 1,200 |
|---------------------------------------|------|-----------|----------------------------------|-------|
| GLSEN110 WILLIAM STREET               | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT          | 1,000 |

| GLSEN110 WILLIAM STREET<br>NEW YORK, NY 10038 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 1,00 |
|---|------|-----------|----------------------------------|------|
| <u> </u>                                      |      |           |                                  |      |

| NEW YORK, NY 10038       | NONE | 501(C)(3) | PROGRAMS                | 1,000 |
|--------------------------|------|-----------|-------------------------|-------|
| GMHC307 WEST 38TH STREET | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT | 500   |

| 1EW TORK, NT 10036                             |      |           | PROGRAMS                         |     |
|--|------|-----------|----------------------------------|-----|
| GMHC307 WEST 38TH STREET<br>NEW YORK, NY 10018 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 500 |

1,206,636

| GMHC307 WEST 38TH STREET | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT | 50 |
|--------------------------|------|-----------|-------------------------|----|
| NEW YORK, NY 10018       |      |           | PROGRAMS                |    |

| NEW YORK, NY 10018       |       |             | PROGRAMS                |  |
|--------------------------|-------|-------------|-------------------------|--|
| GMHC307 WEST 38TH STREET | INONE | [ 501(C)(3) | CONTRIBUTION TO SUPPORT |  |

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

| a Paid during the year   |      |           |                                  |       |
|--|------|-----------|----------------------------------|-------|
| JESSE D BULLENS-CREWE FOUNDATION<br>254 FORESIDE ROAD<br>CUMBERLAND FORESIDE, ME 04110 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 8,000 |

| 254 FORESIDE ROAD<br>CUMBERLAND FORESIDE, ME 04110            |      |           | PROGRAMS                         |        |
|---|------|-----------|----------------------------------|--------|
| LAMBDA LEGAL<br>120 WALL STREET 19TH FL<br>NEW YORK, NY 10005 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 500    |
| MABLE WADSWORTH WOMEN'S HEALTH                                | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT          | 10,000 |

| LAMBDA LEGAL<br>120 WALL STREET 19TH FL<br>NEW YORK, NY 10005                        | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 500    |
|--|------|-----------|----------------------------------|--------|
| MABLE WADSWORTH WOMEN'S HEALTH<br>CTR<br>700 MT HOPE AVE STE 420<br>BANGOR, ME 04401 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 10,000 |

| NEW YORK, NY 10005   |      |           | PROGRAMS                         |           |
|--|------|-----------|----------------------------------|-----------|
| MABLE WADSWORTH WOMEN'S HEALTH<br>CTR<br>700 MT HOPE AVE STE 420<br>BANGOR, ME 04401 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 10,000    |
| Total  |      |           | ▶ 3a                             | 1,206,636 |

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  |      |           |                                  |         |
|---|------|-----------|----------------------------------|---------|
| MAINE COLLEGE OF ART<br>522 CONGRESS STREET<br>PORTLAND. ME 04101 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 282,563 |

| PORTLAND, ME 04101   |      |           | PROGRAMS                         |       |
|--|------|-----------|----------------------------------|-------|
| MAINE EQUAL JUSTICE PARTNERS<br>126 SEWALL STREET<br>AUGUSTA, ME 04330 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 1,000 |

| MAINE EQUAL JUSTICE PARTNERS<br>126 SEWALL STREET<br>AUGUSTA, ME 04330 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 1,000 |
|--|------|-----------|----------------------------------|-------|
| MAINE PUBLIC1450 LISBON STREET<br>LEWISTON, ME 04240                   | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 1,000 |

1,206,636

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| AUGUSTA, ME 04330                                    |      |           | 11100101115                      |       |
|--|------|-----------|----------------------------------|-------|
| MAINE PUBLIC1450 LISBON STREET<br>LEWISTON, ME 04240 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 1,000 |
|  |      |           |                                  |       |

| MAINE PUBLIC1450 LISBON STREET | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT | 1 |
|--------------------------------|------|-----------|-------------------------|---|
| LEWISTON, ME 04240             |      |           | PROGRAMS                |   |

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

|                            | or substantial contributor |           |                         |        |
|----------------------------|----------------------------|-----------|-------------------------|--------|
| a Paid during the year     |                            |           |                         |        |
| MANO EN MANO4 MAPLE STREET | NONE                       | 501(C)(3) | CONTRIBUTION TO SUPPORT | 25,000 |

| MILBRIDGE, ME 04658  |      |           | PROGRAMS                         |         |
|--|------|-----------|----------------------------------|---------|
| MITCHELL INSTITUTE<br>75 WASHINGTON AVENUE<br>PORTLAND, ME 04101 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 130,000 |

| 75 WASHINGTON AVENUE<br>PORTLAND, ME 04101              | NONE | 301(C)(3) | PROGRAMS                         | 130,000 |
|---|------|-----------|----------------------------------|---------|
| MODERN MILITARY ASSOCIATION<br>1725 I STREET NW STE 300 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 500     |

| PORTLAND, ME 04101  |      |           |                                  |     |
|---|------|-----------|----------------------------------|-----|
| MODERN MILITARY ASSOCIATION<br>1725 I STREET NW STE 300<br>WASHINGTON, DC 20006 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 500 |

1,206,636

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| PORTLAND, ME 04101                                      |      |             |                                  |    |
|---|------|-------------|----------------------------------|----|
| MODERN MILITARY ASSOCIATION<br>1725 I STREET NW STE 300 | NONE | ( - ) ( - ) | CONTRIBUTION TO SUPPORT PROGRAMS | 50 |

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

| NH PRS268 MAST ROAD  | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT          | 50  |
|--|------|-----------|----------------------------------|-----|
| NATIONAL LGBTQ TASK FORCE<br>1050 CONNECTICUT AVE NW<br>WASHINGTON, DC 20035 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 500 |
| a Paid during the year   |      |           |                                  |     |

| NH PBS268 MAST ROAD<br>DURHAM, NH 03824      | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 50     |
|--|------|-----------|----------------------------------|--------|
| OGUNQUIT PLAYHOUSE FOUNDATION<br>PO BOX 1510 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 25,000 |

1,206,636

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| DURHAM, NH 03824   |      |           | PROGRAMS                         |       |
|--|------|-----------|----------------------------------|-------|
| OGUNQUIT PLAYHOUSE FOUNDATION<br>PO BOX 1510<br>QGUNQUIT, ME 03907 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 25,00 |

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

or substantial contributor

Total .

| a Paid during the year                            |      |           |                                  |       |
|---|------|-----------|----------------------------------|-------|
| OPERA HOUSE ARTSPO BOX 56<br>STONINGTON, ME 04681 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 5,000 |

| TONINGTON, ME 04001                        |      |           | FROGRAMS                         |  |
|--|------|-----------|----------------------------------|--|
| DUT MAINEPO BOX 1723<br>ROCKLAND, ME 04841 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS |  |
| OUTRIGHT LEWISTON-AUBURN                   | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT          |  |

| OUT MAINEPO BOX 1723<br>ROCKLAND, ME 04841    | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT<br>PROGRAMS | 10,000 |
|---|------|-----------|-------------------------------------|--------|
| OUTRIGHT LEWISTON-AUBURN<br>179 LISBON STREET | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS    | 5,000  |

| ROCKLAND, ME 04841  |      |           | PROGRAMS                         |       |
|---|------|-----------|----------------------------------|-------|
| OUTRIGHT LEWISTON-AUBURN<br>179 LISBON STREET<br>LEWISTON, ME 04240 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 5,000 |

1,206,636

| OUTRIGHT LEWISTON-AUBURN<br>179 LISBON STREET<br>LEWISTON, ME 04240 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 5,00 |
|---|------|-----------|----------------------------------|------|
|   | •    |           |                                  |      |

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

| a Paid during the year                                      |      |           |                                  |        |
|---|------|-----------|----------------------------------|--------|
| PALAVER STRINGS<br>45 EXCHANGE STREET<br>PORTLAND, ME 04101 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 20,000 |
| PLANNED PARENTHOOD OF NORTHERN                              | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT          | 20,000 |

| PORTLAND, ME 04101  |      |           |                                  |        |
|---|------|-----------|----------------------------------|--------|
| PLANNED PARENTHOOD OF NORTHERN<br>NE<br>784 HERCULES DR STE 110<br>COLCHESTER, VT 05446 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 20,000 |
| POINT FOUNDATION<br>6230 WILSHIRE BLVD  | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 1,000  |

| 784 HERCULES DR STE 110<br>COLCHESTER, VT 05446                 |      |           |                                  |       |
|---|------|-----------|----------------------------------|-------|
| POINT FOUNDATION<br>6230 WILSHIRE BLVD<br>LOS ANGELES, CA 90048 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 1,000 |

Total .

1,206,636

Recipient If recipient is an individual, show any relationship to status of contribution contribution contribution status of contribution contributions and Contributions Paid During the Year or Approved for Future Payment contributions Paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions paid During the Year or Approved for Future Payment contributions payment contributions

| Name and address (home or business)                                   | any foundation manager<br>or substantial contributor | recipient | contribution                     |       |
|---|--|-----------|----------------------------------|-------|
| a Paid during the year  |  |           |                                  |       |
| PORTLAND CHAMBER MUSIC FESTIVAL<br>PO BOX 15385<br>PORTLAND, ME 04112 | NONE   | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 5,000 |
| PORTLAND CHAMBER MUSIC FESTIVAL<br>PO BOX 15385<br>PORTLAND, ME 04112 | NONE   | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 175   |
| PORTLAND OVATIONS 50 MONUMENT SQ 2ND FL PORTLAND, ME 04101            | NONE   | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 1,000 |

1,206,636

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 status of contribution

Purpose of grant or contribution

| Name and address (home or business)  | any foundation manager<br>or substantial contributor | recipient |                                  |        |
|--|--|-----------|----------------------------------|--------|
| a Paid during the year   |  |           |                                  |        |
| PORTLAND STAGE COMPANY INC<br>PO BOX 1458<br>PORTLAND, ME 04104            | NONE   | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 10,000 |
| PORTLAND SYMPHONY ORCHESTRA<br>50 MONUMENT SQ 2ND FL<br>PORTLAND, ME 04101 | NONE   | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 35,000 |
| PREBLE STREET TEEN CENTER<br>343 CUMBERLAND AVENUE<br>PORTLAND, ME 04101   | NONE   | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 15,000 |

Total .

1,206,636

▶ 3a

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)

| 054 0111105 V0 0480 B0V 0485                                     | NAME                       | =04(0)(0) |                                  | 7.500 |
|--|----------------------------|-----------|----------------------------------|-------|
| PRO PUBLICA INC<br>155 AVE OF THE AMERICAS<br>NEW YORK, NY 10013 | NONE                       | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 500   |
| a Paid during the year   |                            |           |                                  |       |
| · ·  | or substantial contributor |           |                                  |       |

| NEW TORK, NT 10015                               |      |           |                                  |       |
|--|------|-----------|----------------------------------|-------|
| SEA CHANGE YOGAPO BOX 8135<br>PORTLAND, ME 04104 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 7,500 |
| SOUTHERN POVERTY LAW CENTER                      | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT          | 850   |

| PORTLAND, ME 04104   |      |           | PROGRAMS                         |     |
|--|------|-----------|----------------------------------|-----|
| SOUTHERN POVERTY LAW CENTER<br>400 WASHINGTON AVENUE<br>MONTGOMERY, AL 36104 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 850 |

▶ 3a

1,206,636

| PORTLAND, ME 04104   |      |           | PROGRAMS                         |  |
|--|------|-----------|----------------------------------|--|
| SOUTHERN POVERTY LAW CENTER<br>400 WASHINGTON AVENUE<br>MONTGOMERY, AL 36104 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS |  |

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                                 |      |           |                                  |        |
|--|------|-----------|----------------------------------|--------|
| SPACE GALLERY538 CONGRESS STREET<br>PORTLAND, ME 04101 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 31,000 |
| SPEAK ABOUT IT INCPO BOX 4408<br>PORTLAND, ME 04101    | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 5,000  |
|  |      |           |                                  |        |

| SPEAK ABOUT IT INCPO BOX 4408<br>PORTLAND, ME 04101                     | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 5,000  |
|---|------|-----------|----------------------------------|--------|
| STORM WARRIORS MEDIA<br>FOUNDATION<br>89 ELM STREET<br>CAMDEN, ME 04843 | NONE | 501(C)(3) | CONTRIBUTION TO PROGRAMS         | 10,000 |

| STORM WARRIORS MEDIA<br>FOUNDATION<br>39 ELM STREET<br>CAMDEN, ME 04843 | NONE | 501(C)(3) | CONTRIBUTION TO PROGRAMS | 10,000 |
|---|------|-----------|--------------------------|--------|
|   |      |           |                          |        |

Total .

1,206,636

■ 3a

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

|                        | or substantial contributor |           |                         |     |
|------------------------|----------------------------|-----------|-------------------------|-----|
| a Paid during the year |                            |           |                         |     |
| TEMPOARTPO BOX 4101    | NONE                       | 501(C)(3) | CONTRIBUTION TO SUPPORT | 500 |

| PORTLAND, ME 04101           | NONE | 501(C)(3) | PROGRAMS                | 500     |
|------------------------------|------|-----------|-------------------------|---------|
| UNIVERSITY OF SOUTHERN MAINE | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT | 139,098 |

| UNIVERSITY OF SOUTHERN MAINE<br>96 FALMOUTH STREET<br>PORTLAND, ME 04103 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 139,098 |
|--|------|-----------|----------------------------------|---------|
|  |      |           |                                  |         |

| 96 FALMOUTH STREET<br>PORTLAND, ME 04103 |      |           | PROGRAMS                |       |
|--|------|-----------|-------------------------|-------|
| WATERFALL ARTS256 HIGH STREET            | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT | 5,000 |

| TORTE WID / TIE O 1205                             |      |           |                                  | i     |
|--|------|-----------|----------------------------------|-------|
| WATERFALL ARTS256 HIGH STREET<br>BELFAST, ME 04915 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 5,000 |
|  |      |           |                                  |       |

1,206,636

| BELFAST, ME 04915             |      | . ,, ,    | PROGRAMS                | ·   |
|-------------------------------|------|-----------|-------------------------|-----|
| WATERFALL ARTS256 HIGH STREET | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT | 5,0 |

|                               |      |           |                         | <del> </del> |
|-------------------------------|------|-----------|-------------------------|--------------|
| BELFAST, ME 04915             |      |           | PROGRAMS                |              |
| WATERFALL ARTS256 HIGH STREET | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT | 1 5,         |

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                        |                            |           |                                  |       |
| WATERMAN'S COMMUNITY CENTER<br>99 MAIN STREET | NONE                       | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 2,500 |

| NORTH HAVEN, ME 04853   |      |           | TROCKAMO                         |        |
|---|------|-----------|----------------------------------|--------|
| WATERVILLE CREATES<br>10 WATER STREET<br>WATERVILLE, ME 04901 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 10,000 |

| WATERVILLE CREATES<br>10 WATER STREET<br>WATERVILLE, ME 04901 | NONE | 501(C)(3) | CONTRIBUTION TO SUPPORT PROGRAMS | 10,000    |
|---|------|-----------|----------------------------------|-----------|
| Total   |      |           | ▶ 3a                             | 1,206,636 |

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|--------------------------------------|------------|----------------|--------------|-------------------------|--|--|--|--|
| TY 2020 Accounting Fees Schedule     |            |                |              |                         |  |  |  |  |
|                                      |            |                |              |                         |  |  |  |  |
| Name: THE BOB CREWE FOUNDATION       |            |                |              |                         |  |  |  |  |
| A/K/A CREWE FOUNDATION               |            |                |              |                         |  |  |  |  |
| <b>EIN:</b> 38-4008387               |            |                |              |                         |  |  |  |  |
| Category An                          | nount      | Net Investment | Adjusted Net | Disbursements           |  |  |  |  |
| Category                             | iiouiit    | Income         | Income       | for Charitable Purposes |  |  |  |  |
| ACCOUNTING                           | 8,000      | 400            |              | 7,600                   |  |  |  |  |

| Note: To capture the full content of this document, please select landscape mode (11" $	imes$ 8.5") when printing. |                |               |  |  |  |  |   |
|--|----------------|---------------|--|--|--|--|---|
| TY 2020 Depreciation Sched   | ıle            |               |  |  |  |  |   |
| Name   | : THE BOB CREW | /E FOUNDATION |  |  |  |  |   |
|  | A/K/A CREWE    | FOUNDATION    |  |  |  |  |   |
| EIN  | : 38-4008387   |               |  |  |  |  |   |
| Depreciation Schedu  | e              |               |  |  |  |  | 1 |

DLN: 93491274003101

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|                            | Depreci          | ation Schedule         |                              |                    |                             |   |                          |                        |                                       |
|----------------------------|------------------|------------------------|------------------------------|--------------------|-----------------------------|---|--------------------------|------------------------|---------------------------------------|
| Description of<br>Property | Date<br>Acquired | Cost or Other<br>Basis | Prior Years'<br>Depreciation | Computation Method | Rate /<br>Life (# of years) | Current Year's<br>Depreciation<br>Expense | Net Investment<br>Income | Adjusted Net<br>Income | Cost of Goods<br>Sold Not<br>Included |
| BUILDING                   | 2020-10-23       | 370,572                |                              | S/L                | 39.0000                     | 1,980                                     |                          |                        |                                       |
| LAND                       | 2020-10-23       | 315,672                |                              |                    |                             |   |                          |                        |                                       |

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| Name          | Date Acquired | How Acquired | Date Sold | Purchaser Name | Gross Sales Price | Basis     | Basis Method | Sales Expenses | Total (net) | Accumulated Depreciation |
|---------------|---------------|--------------|-----------|----------------|-------------------|-----------|--------------|----------------|-------------|--------------------------|
| MUSICAL WORKS |               | PURCHASE     |           |                | 15,335,096        | 5,000,000 |              |                | 10,335,096  |                          |

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|--------------------------------------|--|---------------------|
| TY 2020 Investments Corpora          | te Bonds Schedule                                  |                     |
|                                      | THE BOB CREWE FOUNDATION<br>A/K/A CREWE FOUNDATION |                     |

## EIN: 38-4008387 Investments Corporate Bonds Schedule

SCHWAB - CORPORATE BONDS

| Investments Corporate Bonds Schedule |                           |                                  |  |  |  |
|--------------------------------------|---------------------------|----------------------------------|--|--|--|
| Name of Bond                         | End of Year Book<br>Value | End of Year Fair<br>Market Value |  |  |  |
| SCHWAB - CORPORATE BOND FUNDS        | 6,806,989                 | 6,806,989                        |  |  |  |

5,133

5,133

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|--|--------------------------|---------------------|--|--|--|--|--|--|
| TY 2020 Investments Corporate Stock Schedule |                          |                     |  |  |  |  |  |  |
| Name:  | THE BOB CREWE FOUNDATION |                     |  |  |  |  |  |  |
|  | A/K/A CREWE FOUNDATION   |                     |  |  |  |  |  |  |

Investments Corporation Stock Schedule

Name of Stock

End of Year Book
Value

Market Value

14,198,488

14,198,488

SCHWAB - EQUITIES

| efile GRAPHIC print - DO NOT PROCESS | DO NOT PROCESS   As Filed Data - DLN: 93491274003101 |               |                                  |  |  |
|--------------------------------------|--|---------------|----------------------------------|--|--|
| TY 2020 Investments - Other          | Schedule   |               |                                  |  |  |
| Name:                                | THE BOB CREWE FOUNDAT                                | ION           |                                  |  |  |
|                                      | A/K/A CREWE FOUNDATION                               | N             |                                  |  |  |
| EIN:                                 | 38-4008387   |               |                                  |  |  |
| vestments Other Schedule 2           |  |               |                                  |  |  |
| Category/ Item                       | Listed at Cost<br>FMV                                | or Book Value | End of Year Fair<br>Market Value |  |  |
| MUSICAL WORKS OF ROBERT CREWE        | FMV  |               |                                  |  |  |
| SCHWAB - OTHER ASSETS                | FMV  |               |                                  |  |  |

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|-------------------------------------|------------------|----------------------------------|------------------------|---|
| TY 2020 Legal Fees Schedu           | ile              |                                  |                        |   |
|                                     |                  |                                  |                        |   |
|                                     |                  | REWE FOUNDATION<br>LE FOUNDATION | V                      |   |
|                                     | 114. 30-4000307  | <del> </del>                     |                        | 1   |
| Category                            | Amount           | Net Investment<br>Income         | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
| LEGAL                               | 307,251          | 294,629                          |                        | 12,622                                      |

| DLN: 93491274003101 |
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| _                   |
|                     |

Name: THE BOB CREWE FOUNDATION

A/K/A CREWE FOUNDATION

**EIN:** 38-4008387

| Other Assets Schedule |                                   |                             |                                    |  |  |
|-----------------------|-----------------------------------|-----------------------------|------------------------------------|--|--|
| Description           | Beginning of Year -<br>Book Value | End of Year - Book<br>Value | End of Year - Fair<br>Market Value |  |  |
| PIANO ELECTRIC        | 3,564                             | 3,564                       | 3,564                              |  |  |
| ARTWORK               | 4,200                             | 4,200                       | 4,200                              |  |  |
| GRANT SOFTWARE        | 20,000                            | 20,000                      | 20,000                             |  |  |

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| TY 2020 Other Expenses Sche          | dule                                 |                          |                        | _   |
|                                      |                                      |                          |                        |   |
| Name:                                | THE BOB CREW                         | E FOUNDATION             |                        |   |
|                                      | A/K/A CREWE FOUNDATION               |                          |                        |   |
| EIN:                                 | <b>:</b> 38-4008387                  |                          |                        |   |
| Other Expenses Schedule              |                                      |                          |                        |   |
| Description                          | Revenue and<br>Expenses per<br>Books | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements for<br>Charitable<br>Purposes |
| EXPENSES                             |                                      |                          |                        |   |

590

238,824

5,853

27,879 2,175

267

531

575

109

150

238,824 5,853

27,879

2,066

267

531

|                         | EIN: | 38-4008387                           |                          |                      |
|-------------------------|------|--------------------------------------|--------------------------|----------------------|
| Other Expenses Schedule |      |                                      |                          |                      |
| Description             |      | Revenue and<br>Expenses per<br>Books | Net Investment<br>Income | Adjusted N<br>Income |
| EVDENCES                |      |                                      |                          |                      |

BANK AND SERVICE FEES

POSTAGE AND MAILING

**INSURANCE** 

OFFICE EXPENSE

PAYROLL FEES

**TELEPHONE** 

**BOOKS AND SUBSCRIPTIONS** 

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|--------------------------------------|-----------------|------------|---------------------|
| TY 2020 Other Income Sched           | ule             |            |                     |
|                                      | -               |            |                     |
| Name:                                | THE BOB CREWE   | FOUNDATION |                     |
|                                      | A/K/A CREWE FO  | UNDATION   |                     |

| Other Income Schedule |                                   |                          |                     |  |
|-----------------------|-----------------------------------|--------------------------|---------------------|--|
| Description           | Revenue And<br>Expenses Per Books | Net Investment<br>Income | Adjusted Net Income |  |
| ROYALTIES             | 993,583                           | 993,583                  |                     |  |
| BOOK SALES            | 3,000                             | 3,000                    |                     |  |

**EIN:** 38-4008387

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|--------------------------------------|------------------------|--------|---------------------|--|--|
| TY 2020 Other Increases Schedule     |                        |        |                     |  |  |
|                                      |                        |        |                     |  |  |
| Name: THE BOB CREWE FOUNDATION       |                        |        |                     |  |  |
|                                      | A/K/A CREWE FOUNDATION |        |                     |  |  |
| EIN:                                 | 38-4008387             |        |                     |  |  |
| Other Increases Schedule             |                        |        |                     |  |  |
| Description                          |                        | Amount |                     |  |  |
| UNREALIZED GAIN ON INVESTMENTS       |                        |        | 1,139,261           |  |  |

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|---|-----------------|---------------|---------------------|--|--|--|
| TY 2020 Other Notes/Loans Receivable Short Schedule |                 |               |                     |  |  |  |
|   |                 |               |                     |  |  |  |
| Name:   | THE BOB CREV    | WE FOUNDATION |                     |  |  |  |
|   | A/K/A CREWE     | FOUNDATION    |                     |  |  |  |
| EIN:  | 38-4008387      |               |                     |  |  |  |
| Name of 501(c)(                                     | 3) Organization | า             | Balance Due         |  |  |  |
| OTHER LOANS RECEIVABLE                              |                 |               |                     |  |  |  |

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|--|-------------------|--------------------------|------------------------|---|
| TY 2020 Other Professional Fees Schedule |                   |                          |                        |   |
|  |                   |                          |                        |   |
| Name: THE BOB CREWE FOUNDATION           |                   |                          |                        |   |
| A/K/A CREWE FOUNDATION                   |                   |                          |                        |   |
| <b>EIN:</b> 38-4008387                   |                   |                          |                        |   |
| Category                                 | Amount            | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
| INVESTMENT MANAGEMENT                    | 29,742            | 29,742                   |                        |   |
| OTHER PROFESSIONAL FEES                  | 150,143           |                          |                        | 150,143                                     |
| PUBLICITY                                | 24,350            |                          |                        | 24,350                                      |

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|--------------------------------------|----------------------------|--------------------------|------------------------|---|
| TY 2020 Taxes Schedule               |                            |                          |                        | _   |
|                                      |                            |                          |                        |   |
| Name:                                | : THE BOB CREWE FOUNDATION |                          |                        |   |
|                                      | A/K/A CREWE FOUNDATION     |                          |                        |   |
| EIN:                                 | 38-4008387                 |                          |                        |   |
| Taxes Schedule                       |                            |                          |                        | 1   |
| Category                             | Amount                     | Net Investment<br>Income | Adjusted Net<br>Income | Disbursements<br>for Charitable<br>Purposes |
| FOREIGN TAXES ON INVESTMENTS         | 2,297                      | 2,297                    |                        |   |