## Form 8879-TF

#### IRS *e-file* Signature Authorization for a Tax Exempt Entity

OMB	Nο	1545-0047

For calendar year 2022, or fiscal year beginning ......

....., 2022, and ending ...., 20 ..... Do not send to the IRS. Keep for your records.

2022

Department of the Treasury Go to www.irs.gov/Form8879TE for the latest information. Internal Revenue Service EIN or SSN EDWARD AND MARY ELLEN DARLING Name of filer FAMILY FOUNDATION 84-6769604 Name and title of officer or person subject to tax MARY KATHLEEN FRASER TRUSTEE Part I Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. 1a Form 990 check here **b Total revenue,** if any (Form 990, Part VIII, column (A), line 12) 1b 2a Form 990-EZ check here ..... b Total revenue, if any (Form 990-EZ, line 9) \_\_\_\_\_ 2b 3a Form 1120-POL check here ..... x 4a Form 990-PF check here ..... b Tax based on investment income (Form 990-PF, Part V, line 5) 4b 5a Form 8868 check here ..... b Balance due (Form 8868, line 3c) 5b 6a Form 990-T check here ..... b Total tax (Form 990-T, Part III, line 4) 6b 7a Form 4720 check here ..... 8a Form 5227 check here b FMV of assets at end of tax year (Form 5227, Item D) ...... 8b 9a Form 5330 check here ..... **b** Tax due (Form 5330, Part II, line 19) **9b** 10a Form 8038-CP check here .... Amount of credit payment requested (Form 8038-CP, Part III, line 22) . . 10b Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that |X| I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) , (EIN) and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only I authorize to enter my PIN as my signature Enter five numbers, but FRO firm name do not enter all zeros on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. 03/17/23 **Certification and Authentication** 

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

01195200153

Do not enter all zeros

03/17/23

I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

ERO's signature \_

# Form **990-PF**

#### **Return of Private Foundation**

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

OMB No. 1545-0047 **2022**Open to Public Inspection

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public. Go to <a href="https://www.irs.gov/Form990PF">www.irs.gov/Form990PF</a> for instructions and the latest information.

For	calend	aar year 2022 or tax year beginning , a	ana enaing				
		foundation			A Emp	loyer identification nun	nber
		RD AND MARY ELLEN DARLING			0.4	6760604	
		LY FOUNDATION  and street (or P.O. box number if mail is not delivered to street add	droce) E	Room/suite		-6769604 hone number (see instru	uctions)
		WILSON ST	11655)	COOIT/Suite		7-989-6400	ictions)
	_	wn, state or province, country, and ZIP or foreign postal code					
E	BREW	ER ME 04412			C If exe	emption application is per	nding, check here
G	Check a	all that apply: Initial return Initial retur	rn of a former public	charity	<b>D</b> 1. Fo	oreign organizations, chec	ck here
		Final return Amended	return		<b>2.</b> Fo	oreign organizations meet	ting the
		Address change Name cha	ange			5% test, check here and	_
н	Check t	type of organization: X Section 501(c)(3) exempt private	foundation		E If priv	vate foundation status wa	s terminated under
Ä.			e private foundation			on 507(b)(1)(A), check he	
┰		rket value of all assets at J Accounting method:		crual	F If the	foundation is in a 60-mo	nth termination
		l —				r section 507(b)(1)(B), ch	I
	ne 16)	\$ 2,634,021 (Part I, column (d), must	be on cash basis.)				
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(In) Night in		(-) A.P. atada at	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(b) Net in inco		(c) Adjusted net income	for charitable purposes
	т.	.,,					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	192,621				
	2	Check if the foundation is not required to attach Sch. B	75	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	750		
	3	Interest on savings and temporary cash investments	750 56,731		750 56,731		
	4	Dividends and interest from securities	36,/31	•	36,/31		
	5a	Gross rents					
e	b	Net rental income or (loss)	-86,039				
en	6a	Net gain or (loss) from sale of assets not on line 10  Gross sales price for all assets on line 6a 607,020	-80,033				
Revenue	b				0		
œ		Capital gain net income (from Part IV, line 2)			0	0	
	8	Net short-term capital gain				0	
	9	Income modifications					
	10a b	Gross sales less returns and allowances  Less: Cost of goods sold					
	C	Less: Cost of goods sold  Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	164,063	1	57,481	0	
	13	Compensation of officers, directors, trustees, etc.	(				
šės	14	Other employee salaries and wages					
SUS	15	Pension plans, employee benefits					
xpenses		Legal fees (attach schedule)					
Ш		Accounting fees (attach schedule) STMT 1	1,220	)	610		610
<u>š</u>	С	Other professional fees (attach schedule) STMT 2	29,529		29,529		
rat	17	Interest					
ist	18	Taxes (attach schedule) (see instructions) STMT 3	2,594		35		
Administrative	19	Depreciation (attach schedule) and depletion					
Þ	20	Occupancy					
70	21	Travel, conferences, and meetings					
and	22	Printing and publications					
0	23	Other expenses (att. sch.) STMT 4	39	9	39		
Ē	24	Total operating and administrative expenses.					
era		Add lines 13 through 23	33,382		30,213	0	610
Operating	25	Contributions, gifts, grants paid	140,250				140,250
_	26	Total expenses and disbursements. Add lines 24 and 25	173,632		30,213	0	140,860
	27	Subtract line 26 from line 12:					
	а	Excess of revenue over expenses and disbursements	-9,569				
	b	Net investment income (if negative, enter -0-)			27,268		

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

	Part		Beginning of year	End o	f year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing		3,742	
	2	Savings and temporary cash investments	159,157	266,755	266,755
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att. schedule)			
		Less: allowance for doubtful accounts 0			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule) SEE STMT 5	2,072,428	1,517,200	
	С	Investments – corporate bonds (attach schedule) SEE STMT 6	853,154	846,325	846,325
	11	Investments – land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach sch.)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach sch.)			
	15	Other assets (describe )			
	16	Total assets (to be completed by all filers – see the	2 224 522	0 604 000	0 604 001
_	4-	instructions. Also, see page 1, item I)	3,084,739	2,634,022	2,634,021
	17	Accounts payable and accrued expenses			
s	18	Grants payable			
Ë	19	Deferred revenue			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
	22 23	Other liabilities (describe )  Total liabilities (add lines 17 through 22)	0	0	
_	23	Foundations that follow FASB ASC 958, check here	0		
Ś		and complete lines 24, 25, 29, and 30.			
ces	24	Not popoto without donor rostrictions			
ᇐ	25	Net assets with donor restrictions  Net assets with donor restrictions			
Ä		Net assets with donor restrictions  Foundations that do not follow FASB ASC 958, check here			
밀		and complete lines 26 through 30.			
Net Assets or Fund Balan	26	Capital stock, trust principal, or current funds	3,084,739	2,634,022	
ō	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
ets	28	Retained earnings, accumulated income, endowment, or other funds			
SS	29	Total net assets or fund balances (see instructions)	3,084,739	2,634,022	
¥ /	30	Total liabilities and net assets/fund balances (see			
ž		instructions)	3,084,739	2,634,022	
	Part				
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 29 (mus	st agree with		
	end-	of-year figure reported on prior year's return)		1	3,084,739
		r amount from Part I, line 27a			-9,569
3	3 Othe	r increases not included in line 2 (itemize)		3	
4	• Add	lines 1, 2, and 3			3,075,170
					441,148
6	<b>T</b> otal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b	o), line 29	6	2,634,022

Pa	art IV Capital Gains an	nd Losses for Tax on Investm	ent Income			
		kind(s) of property sold (for example, real ouse; or common stock, 200 shs. MLC Co.		(b) How acquired P – Purchase D – Donation	(c) Date acqui (mo., day, yr	
1a	PUBLICLY TRADED	SECURITIES		P		
b	CAPITAL GAIN DI	STRIBUTIONS				
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	1,	other basis nse of sale		Gain or (loss) olus (f) minus (g))
a	605,129			693,059		-87,930
b	1,891					1,891
С						
d						
e						
	Complete only for assets showing	gain in column (h) and owned by the	foundation on 12/31/6	69.	(I) Gains	(Col. (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	1 ' '	s of col. (i) (j), if any	col. (k), bu	ut not less than -0-) <b>or</b> es (from col. (h))
a						-87,930
b						1,891
С						
d						
е						
1 E		apital loss)  If gain, also enter in If (loss), enter -0- in s) as defined in sections 1222(5) and column (c). See instructions. If (loss),	n Part I, line 7		3	-86,039
Pa	art V Excise Tax Base	ed on Investment Income (Se	ction 4940(a), 49	940(b), or 4948-	see instruc	tions)
1a		described in section 4940(d)(2), check	here and ent	er "N/A" on line 1.		•
		letter: (attach co		sary—see instructio	ns) 1	379
b		enter 1.39% (0.0139) of line 27b. Exen				
		2, col. (b)				
2	Tax under section 511 (domesti	ic section 4947(a)(1) trusts and taxable	foundations only; ot	hers, enter -0-)	2	0
3	Add lines 1 and 2				2	379
4		ic section 4947(a)(1) trusts and taxable				0
5		ome. Subtract line 4 from line 3. If zero	or loss optor O		5	379
6	Credits/Payments:					
а		nd 2021 overpayment credited to 2022	2 6	a   1	,300	
b	Exempt foreign organizations –	tana anistala al al anti-anisa	61			
С		ension of time to file (Form 8868)		c		
d	Backup withholding erroneously			1		
7	Total credits and payments. Add				7	1,300
8		ment of estimated tax. Check here	if Form 2220 is atta	ched		
9		nd 8 is more than line 7, enter <b>amount</b>	- owod		0	
10		than the total of lines 5 and 8, enter th			10	921
11		e: Credited to 2023 estimated tax	92	1 Refunded		

Pa	rt VI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ (2) On foundation managers. \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	● By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	ME			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See instructions for Part XIII. If "Yes,"			
	complete Part XIII	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			l
	names and addresses	10		X
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address N/A			
14	The books are in care of MARY KATHLEEN FRASER  Telephone no. 207-9	89-	5400	<u>.</u>
	652 WILSON ST			
	Located at BREWER ME ZIP+4 04412	<b>.</b>		٠٠٠.
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here			L
40	and enter the amount of tax-exempt interest received or accrued during the year		V.	
16	At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			

Pa	art VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			Х
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified	1a(1)		
	person?	1a(2)		X
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		X
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		X
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	1a(5)		х
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation			
	agreed to make a grant to or to employ the official for a period after termination of government service, if			
	terminating within 90 days.)	1a(6)		х
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
С	Organizations relying on a current notice regarding disaster assistance, check here			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2022?  N/A	1d		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2022, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for			
	tax year(s) beginning before 2022?	2a		Х
	If "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement – see instructions.)  N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	3a		X
b	If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2022.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable			
	purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize			
	its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning			
	in 2022?	4b	1	X

Pa	art VI-B	Statements Regarding	Activities for Which Form	4720 May Be F	Required (con	tinued)			
5a	During the	ear did the foundation pay or in	ncur any amount to:					Yes	No
	(1) Carry o	n propaganda, or otherwise att	empt to influence legislation (section	4945(e))?			5a(1)		X
			public election (see section 4955); or						
	indirect	y, any voter registration drive?					5a(2)		X
	(3) Provide	a grant to an individual for trav	vel, study, or other similar purposes?				5a(3)		X
			er than a charitable, etc., organization						
	(4)(A)?	See instructions					5a(4)		X
	(5) Provide		igious, charitable, scientific, literary, c						
	the pre	vention of cruelty to children or	animals?				5a(5)		X
b	If any answ	er is "Yes" to 5a(1)-(5), did any	of the transactions fail to qualify und						
	in Regulation	ns section 53.4945 or in a curi	rent notice regarding disaster assista	nce? See instruction	ns	N/A	5b		
С	Organizatio	ns relying on a current notice re	egarding disaster assistance, check h	nere					
d			es the foundation claim exemption from						
	maintained	expenditure responsibility for th	e grant?			N/A	5d		
	If "Yes," att	ach the statement required by	Regulations section 53.4945-5(d).						
6a	Did the four	ndation, during the year, receive	e any funds, directly or indirectly, to p	ay premiums on a p	personal				
	benefit con						6a		X
b	Did the fou	ndation, during the year, pay pr	emiums, directly or indirectly, on a pe	ersonal benefit cont	ract?		6b		X
	If "Yes" to 6	b, file Form 8870.							
7a	At any time	during the tax year, was the fo	undation a party to a prohibited tax s	helter transaction?			7a		X
b	If "Yes," did	the foundation receive any pro	ceeds or have any net income attribu	utable to the transac	ction?	<b>N/A</b>	7b		
8	Is the found	lation subject to the section 496	60 tax on payment(s) of more than \$7	1,000,000 in remune	eration or				
	excess para		ear?				8		X
Pa	art VII	_	cers, Directors, Trustees, Fo	oundation Mana	agers, Highly	Paid Employ	ees,		
		and Contractors							
1	List all office	ers, directors, trustees, and for	oundation managers and their com	pensation. See in	structions.		1		
				(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Ex	pense a	ccount
		(a) Name and add	ress	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		r allowa	
				•	,	compensation			
	LENN GOODW			TRUSTEE					
		CR AVE SUITE 5	ME 04401	0.10	0	С	1		
	ARY KATHLE			TRUSTEE	_	_			
	52 WILSON		ME 04412	0.10	0	С	1		
	ARY FRANCE			TRUSTEE	_	_			
65	52 WILSON	ST	ME 04412	0.10	0	С	1		
2	"NONE."	tion of five highest-paid empl	oyees (other than those included o	on line 1 – see ins	tructions). If non	e, enter			
	NONE.					(4) Contributions to	Ι		
	(=)	Name and address of sock applaces as	d more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e) Ex	pense a	ccount,
	(a)	Name and address of each employee pair	d more than \$50,000	devoted to position	(c) Compensation	plans and deferred compensation	othe	r allowa	nces
	·					compensation			
NC	ONE								
Tota	I number of	other employees paid over \$50,	000	1	1				- 0
1 Ula		unon employees palu uvel 300.	000				i		·

Part VII Information About Officers, Directors, Trustees, Foundation Managers, and Contractors (continued)	, Highly Paid Empl	loyees,
3 Five highest-paid independent contractors for professional services. See instructions. If	none, enter "NONE	,,
	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such a organizations and other beneficiaries served, conferences convened, research papers produced, etc.	s the number of	Expenses
1 N/A		
2		
3		
4		
Part VIII-B Summary of Program-Related Investments (see instructions)	<u> </u>	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
2		
<b>-</b>		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part IX see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: Average monthly fair market value of securities 2,659,219 1a а Average of monthly cash balances 1b Fair market value of all other assets (see instructions) С 1c Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) <u>1e</u> Acquisition indebtedness applicable to line 1 assets 2 2 Subtract line 2 from line 1d 2,752,381 3 Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see 41,286 2,711,095 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Minimum investment return. Enter 5% (0.05) of line 5. 135,555 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part X and certain foreign organizations, check here | and do not complete this part.) 135,555 Minimum investment return from Part IX, line 6 379 2a Tax on investment income for 2022 from Part V, line 5 Income tax for 2022. (This does not include the tax from Part V.) Add lines 2a and 2b 2c С Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 4 4 135,176 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 6 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, 135,176 7 line 1. Part XI Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 140,860 а Program-related investments – total from Part VIII-B 1b b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 3 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b b 140,860 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4...

Pa	rt XII Undistributed Income	(see instructions)				
			(a) Corpus	(b) Years prior to 2021	<b>(c)</b> 2021	(d) 2022
1	Distributable amount for 2022 from Part >	( line 7				135,176
2	Undistributed income, if any, as of the en					
	Enter amount for 2021 only					
b	Total for prior years: 20 , 20	. 20				
3	Excess distributions carryover, if any, to 2					
а	From 2017					
b						
С	From 2019					
d						
е	From 2021 [	36,612				
	Tatal of Page On the seconds of		36,612			
4	Qualifying distributions for 2022 from Par	t XI,				
	line 4: \$140,860					
	Applied to 2021, but not more than line 2					
b	Applied to undistributed income of prior y					
	(Election required – see instructions)					
С	Treated as distributions out of corpus (El					
	required – see instructions)					125 176
	Applied to 2022 distributable amount		F 604			135,176
	Remaining amount distributed out of corp		5,684			
5	Excess distributions carryover applied to					
	(If an amount appears in column (d), the					
6	amount must be shown in column (a).)					
6	Enter the net total of each column as indicated below:					
_	Corpus. Add lines 3f, 4c, and 4e. Subtract	t ling 5	42,296			
	Prior years' undistributed income. Subtraction		12,250			
b	ling 4h from ling 9h					
c	Enter the amount of prior years' undistrib	uted				
Ŭ	income for which a notice of deficiency ha					
	been issued, or on which the section 494					
	toy has been provingably assessed					
d	Subtract line 6c from line 6b. Taxable					
	amount – see instructions					
е	Undistributed income for 2021. Subtract I	ine				
	4a from line 2a. Taxable amount – see					
	instructions					
f	Undistributed income for 2022. Subtract I					
	4d and 5 from line 1. This amount must be	e				
	distributed in 2023					0
7	Amounts treated as distributions out of co					
	to satisfy requirements imposed by section	on				
	170(b)(1)(F) or 4942(g)(3) (Election may					
	required—see instructions)					
8	Excess distributions carryover from 2017					
	applied on line 5 or line 7 (see instruction					
9	Excess distributions carryover to 2023					
	Subtract lines 7 and 8 from line 6a		42,296			
10	Analysis of line 9:					
а	Excess from 2018					
b	Excess from 2019					
С.	Excess from 2020	36,610				
d	Excess from 2021	36,612				
е	Excess from 2022	5,684				

N/A

DAA

Pa	art XIII Private Operating Fou	<b>indations</b> (see ii	<u>nstructions and Pai</u>	<u>rt VI-A, question 9)</u>		
1a	If the foundation has received a ruling or foundation, and the ruling is effective for		·	ating		
b	Check box to indicate whether the foundation		~	ibed in section 49	42(j)(3) or 4942	(i)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	J/(2)	
	income from Part I or the minimum	(a) 2022	<b>(b)</b> 2021	(c) 2020	<b>(d)</b> 2019	(e) Total
	investment return from Part IX for					
	each year listed					
b	85% (0.85) of line 2a					
С	Qualifying distributions from Part XI,					
	line 4, for each year listed					
d	Amounts included in line 2c not used 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					
h	section 4942(j)(3)(B)(i)  "Endowment" alternative test – enter 2/3					
b	of minimum investment return shown in					
	Part IX, 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		1			
Pa	art XIV Supplementary Inform	• •	•	the foundation ha	d \$5,000 or more	in assets at
	any time during the ye		ctions.)			
1	Information Regarding Foundation Ma	•	the accept of the second		harden formale Con	
а	List any managers of the foundation who				-	
	before the close of any tax year (but only <b>N/A</b>	ii triey have continot	ited more than \$5,000)	. (See Section 507(d)(2)	.)	
	List any managers of the foundation	who own 10% or r	more of the stock of	a corporation (or an e	equally large portion	of the
	ownership of a partnership or other entity			• ,	squally large pertion	
	N/A	,				
2	Information Regarding Contribution, G	rant, Gift, Loan, So	holarship, etc., Progr	ams:		
	Check here X if the foundation only	makes contributions	s to preselected charital	ble organizations and d	oes not accept	
	unsolicited requests for funds. If the foun	dation makes gifts, g	grants, etc., to individua	ls or organizations unde	er other conditions,	
	complete items 2a, b, c, and d. See instr	uctions.				
а	The name, address, and telephone numb	er or email address	of the person to whom	applications should be	addressed:	
	N/A					
b	The form in which applications should be	submitted and inform	mation and materials th	ey should include:		
	N/A					
С	Any submission deadlines:					
_	N/A			talaa 12aaa 60 69 6		
d	Any restrictions or limitations on awards,	such as by geograp	nicai areas, charitable f	ieids, kinds of institution	ns, or other	
	factors:					

Form 990-PF (2022) EDWARD AND MARY ELLEN DARLING 84-6769604 Page **11** Part XIV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year HUSSON UNIVERSITY 1 COLLEGE CIRCLE NONE PC BANGOR ME 04401 **PUBLIC** SUPPORT 30,000 BANGOR AREA HOMELESS SHELTER 263 MAIN ST NONE PC BANGOR ME 04401 PUBLIC SUPPORT 20,000 ST JOHN'S CATHOLIC SCHOOL 37 PLEASANT ST PC NONE BRUNSWICK ME 04011 **PUBLIC** SUPPORT 5,000 SARAH'S HOUSE PC 346 MAIN RD NONE HOLDEN ME 04429 SUPPORT PUBLIC 5,000 GOOD SHEPPERD FOOD BANK 11 PENOBSCOT MEADOW DR PC NONE HAMPDEN ME 04444 PUBLIC SUPPORT 20,000 ST JOSEPH HOSPITAL PC 360 BROADWAY NONE BANGOR ME 04401 PUBLIC SUPPORT 15,000 BANGOR AREA RECOVERY NETWORK 142 CENTER ST NONE PC BREWER ME 04412 PUBLIC SUPPORT 2,500 JOHN BAPST MEMORIAL HS 100 BROADWAY NONE PC BANGOR ME 04401 **PUBLIC** SUPPORT 10,000 ALZHEIMERS DISEASE RESEARCH 322 EIGHTH AVENUE 16TH FL NONE PC NEW YORK NY 10001 PUBLIC SUPPORT 25,000 ST JUDE RESEARCH HOSPITAL 501 ST JUDE PLACE NONE PC MEMPHIS TN 38105 PUBLIC SUPPORT 1,500 140,250 Total За **b** Approved for future payment N/A

3b

**Total** 

F	Part XV-A	Analysis of Income-Producing Act	ivities				
Ent	er gross amo	unts unless otherwise indicated.		d business income	Excluded	d by section 512, 513, or 514	(a)
			(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1	Program ser	vice revenue:			Code		(See instructions.)
	a						
	b						
	c						
	d						
	_						
	f						
	g Fees and	d contracts from government agencies					
2	Membership	dues and assessments			14	750	
		avings and temporary cash investments			14	56,731	
		d interest from securities come or (loss) from real estate:			<u> </u>	36,731	
3							
	<ul><li>a Debt-fina</li><li>b Not debt</li></ul>	nced property					
6	Net rental in	-financed property come or (loss) from personal property					
		ment income					
8	Gain or (loss	) from sales of assets other than inventory			18	-86,039	
		or (loss) from special events			<del>                                     </del>	30,002	
10	Gross profit	or (loss) from sales of inventory					
11	Other revenu	ie: a					
	d						
	е						
12	Subtotal. Add	d columns (b), (d), and (e)		0		-28,558	0
						40	-28,558
13	Total. Add lin	ne 12, columns (b), (d), and (e)				13	-20,558
<b>13</b> (S∈	Total. Add line worksheet i	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calculations.)					-20,550
<b>13</b> (S∈	Total. Add lin	n line 13 instructions to verify calculations.)  Relationship of Activities to the A	complishm	ent of Exempt P	urpose	es	
13 (S∈ F	Total. Add line worksheet i	n line 13 instructions to verify calculations.)	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	
13 (S∈ F	Total. Add ling we worksheet in Part XV-B	n line 13 instructions to verify calculations.)  Relationship of Activities to the Activities to the Activities below how each activity for which income	complishm	ent of Exempt P	urpose A contrib	es outed importantly to the	

Form 99	0-PF (202	22) <b>EDWARD A1</b>	VD MAR	Y ELLEN D	ARL]	ING	84-6769604			Pag	ge <b>13</b>
Part 2	XVI	<del></del>					ns and Relationships W	ith Noncharitab	le Ex		
<b>1</b> Did			lirectly engag	ge in any of the fol	lowing	with any	other organization described			Yes	No
	_	01(c) (other than section		-	_	-	=				
org	ganization	s?									
<b>a</b> Tra	ansfers fro	om the reporting found	lation to a n	oncharitable exemp	ot orga	nization o	f:				
(1)	Cash								1a(1)		X
(2)	Other a								1a(2)		X
<b>b</b> Otl	her trans	actions:									
		f assets to a noncharit							1b(1)		X
(2)	Purchas	es of assets from a n	oncharitable	exempt organization	on				1b(2)		X
(3)	Rental of	of facilities, equipment,	or other as	sets					1b(3)		X
(4)	Reimbu	rsement arrangements	8						1b(4)		X
	Loans o	r loan guarantees							1b(5)		X
(6)	Perform	ance of services or m	embership o	or fundraising solici	tations				1b(6)		X
									1c		X
		•					mn (b) should always show the				
			-		-		the foundation received less the				
							the goods, other assets, or ser				
	ine no.	(b) Amount involved	(c) Nam	ne of noncharitable exem	pt organi	zation	(d) Description of transfers,	transactions, and sharing a	rrangeme	ents	
N/A											
2a ls	the found	ation directly or indirec	tly affiliated	with or related to	one o	r more tax	r-exempt organizations				
		section 501(c) (other	•	•			COXOTTPE OTGATILLATIONS		Пу	es X	l No
		nplete the following so		. 001(0)(0)) 01 111 00	0000011	<b></b> · · · · · · · · · · · · · · · · · ·			ш.		]
		a) Name of organization		(b) Type of o	organizati	on	(c) Desc	ription of relationship			
N/.	A										
							dules and statements, and to the best of which preparer has any knowledge.	f my knowledge and belief	, it is tru	е,	
	conect, ai	iu complete. Declaration of p	лерагет (оптег т	man taxpayer) is baseu	UII all IIII	Offiation of	which preparer has any knowledge.	May the IRS dis	cuss this	return	
Sign								with the prepare	r shown b		٦,,,
Here								See instructions		Yes	No
							TRUSTEE				
	Signature	of officer or trustee				Date	Title				
	Print/Ty	pe preparer's name			Prepa	rer's signatu		Date		Check	if
Paid										self-em	ployed
Preparer			CPA								
Use Onl	Firm's n								1758		
JUG OIII	Firm's a	address 12 ST	CILLWA'	TER AVE ST	re 5	<u>,                                    </u>		Firm's EIN 83-	-077	207	б

207-990-4585 Form **990-PF** (2022)

Firm's EIN

Phone no.

BANGOR, ME

04401

Part XIV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year BIRCH BAY RETIREMENT VILLAGE 25 VILLAGE INN RD NONE PC SPONSORSHIP BAR HARBOR ME 04609 750 TUNNEL TO TOWERS FOUNDATION 2361 HYLAN BLVD NONE PC STATEN ISLAND NY 10306 PUBLIC SUPPORT 2,500 WOUNDED WARRIOR PROJECT NONE PC 4899 BELFORT ROAD JACKSONVILLE FL 32256 PUBLIC SUPPORT 1,500 SHRINERS HOSPITALS CHILDREN PC 51 BLOSSOM ST NONE BOSTON MA 02114 PUBLIC SUPPORT 1,500 Total 3a **b** Approved for future payment N/A 3b Total

# Schedule B (Form 990)

**Schedule of Contributors** 

2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

Employer identification number

Name of the organization

EDWARD AND MARY ELLEN DARLING FAMILY FOUNDATION

84-6769604

Organization type (check one	s):
Filers of:	Section:
Form 990 or 990-EZ	501(c)( ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
	overed by the <b>General Rule</b> or a <b>Special Rule</b> . , (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See
General Rule	
	ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 property) from any one contributor. Complete Parts I and II. See instructions for determining a tributions.
Special Rules	
regulations under secti 16b, and that received	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % support test of the ions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
contributor, during the literary, or educational	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering stead of the contributor name and address), II, and III.
contributor, during the contributions totaled m during the year for an <b>General Rule</b> applies	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one year, contributions exclusively for religious, charitable, etc., purposes, but no such one than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the to this organization because it received nonexclusively religious, charitable, etc., contributions and during the year
Caution: An organization that must answer "No" on Part IV,	isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line t the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2022)

Employer identification number

EDWARD AND MARY ELLEN DARLING 84-6769604 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) Total contributions Name, address, and ZIP + 4 Type of contribution No. 1.... EDWARD DARLING Person 208 CENTENNIAL PARK DRIVE **Payroll** 20,000 Noncash FL 32124-5102 DAYTONA BEACH (Complete Part II for noncash contributions.) (a) (c) No. Name, address, and ZIP + 4 Total contributions Type of contribution 2.... MARY FRASER Person 10 WILLOW WAY Payroll 45,263 Noncash **BREWER** (Complete Part II for noncash contributions.) (b) (c) (a) Name, address, and ZIP + 4 Total contributions Type of contribution No. 3 KEVIN & MARY F.D. KELLY Person 158 CLARK HILL ROAD Payroll 90,526 Noncash HOLDEN ME 04429 (Complete Part II for noncash contributions.) (a) (c) (d) Name, address, and ZIP + 4 Type of contribution No. **Total contributions** 4.... SUSAN DARLING Person PO BOX 582 Payroll 36,832 Noncash BAR HARBOR ME 04609 (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution Name, address, and ZIP + 4 No. **Total contributions** Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.)

## **Federal Statements**

#### Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	 Total	_ Inve	Net estment	 usted let	_	aritable urpose
ACCOUNTING FEES	\$ 1,220	\$	610	\$ 	\$	610
TOTAL	\$ 1,220	\$	610	\$ 0	\$	610

#### Statement 2 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	 Total	_In	Net vestment_	,	usted Net	aritable urpose
MANAGEMENT FEES SPDR GOLD FEES	\$ 29,529	\$	29,529	\$		\$
TOTAL	\$ 29,529	\$	29,529	\$	0	\$ 0

### Statement 3 - Form 990-PF, Part I, Line 18 - Taxes

Description	<u></u>	Total	_	Net estment	,	usted Net	aritable irpose
FOREIGN TAXES EXCISE TAX	\$	35 2,559	\$	35	\$		\$
TOTAL	\$	2,594	\$	35	\$	0	\$ 0

#### Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	 Total	Net stment	Adjuste Net	ed 	ritable rpose
EXPENSES	\$	\$	\$		\$
MISCELLANEOUS	 39	 39			
TOTAL	\$ 39	\$ 39	\$	0	\$ 0

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## **Federal Statements**

### Statement 5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
STOCK REAL ASSETS	\$ 2,072,428	\$ 1,500,634 16,566	MARKET MARKET	\$ 1,500,634 16,566
TOTAL	\$ 2,072,428	\$ 1,517,200		\$ 1,517,200

### Statement 6 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Description	E	Beginning of Year	 End of Year	Basis of Valuation	_	Fair Market Value
FIXED INCOME	\$	853,154	\$ 846,325	MARKET	\$	846,325
TOTAL	\$	853,154	\$ 846,325		\$	846,325

84-6769604

# **Federal Statements**

## Statement 7 - Form 990-PF, Part III, Line 5 - Other Decreases

	Description	Amount
UNREALIZED	LOSS	\$ 441,148
TOTAL		\$ 441,148

Form <b>990-PF</b>	Underd	listribution and Exce	ss Distributions for Part X		2022
	For calendar year	2022, or tax year beginning	, ending		
Name					
EDWARD AND	MARY ELLEN	DARLING		Employer Id	lentification Number
FAMILY FOID	MDATTON			84-676	9604

# Undistributed Income Carryovers Form 990-PF, Part XII

	Pri	ior Undistributed Inc	ome		Next Year (	Carryover
Tax Year	Nontaxable or Previously Taxed	Taxable in 2022	Total per Year	Current Year Decreases	Nontaxable or Previously Taxed	Taxable in 2023
Years prior						
20 18						
20 19						
20 20						
2021						
2022			135,176	135,176		
Total Carryove	er to Next Year					0

<sup>\*</sup> Carryover amount includes 4942(a) amounts

# Excess Distribution Carryovers Form 990-PF, Part XII

	Current Year	Next Year
Preceding Tax Year Excess Distributions	Decreases	Carryover
2017		
2018		
2019		
2020		
2021 36,612		36,612
Current Year Excess Distribution Generated	5,684	
Total Carryover to Next Year		42,296