Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

		idar year 2022 or tax year beginning	Jul 1, 202	2, and (in 30, 20 23
Nan	ne of fou	ndation			A Employe	er identification number	er
		ORO LIONS FOUNDATION				200251	
Nun	nber and	street (or P.O. box number if mail is not delivered to street address)	Room	n/suite	B Telephor	ne number (see instruct	ions)
	BOX				2078	327830	
City	or town,	, state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	ing, check here .
WA	LDOB	ORO ME 04572					
G	Check	call that apply: Initial return Initial return	of a former public	charity	D 1. Foreig	n organizations, check	here
		☐ Final return ☐ Amended i	return		2. Foreig	n organizations meeting	the 85% test.
		☐ Address change ☐ Name char	nge			here and attach compl	· Control of the second
Н	Check	type of organization: X Section 501(c)(3) exempt p	rivate foundation		E If private	foundation status was	terminated under
	Sectio	on 4947(a)(1) nonexempt charitable trust Other tax			section 5	07(b)(1)(A), check here	
I	Fair m	narket value of all assets at J Accounting method	: X Cash A	ccrual	F If the fou	ndation is in a 60-mont	h termination
		f year (from Part II, col. (c), Other (specify)				ction 507(b)(1)(B), chec	
	line 16	6) \$ 73,092. (Part I, column (d), must be					
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and			(.) (.)	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		investment come	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions).)	books				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	22,410.				
	2	Check \square if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	562.		562.	562.	
	4	Dividends and interest from securities					
	5a	Gross rents					
	b	Net rental income or (loss)					
re	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a					
eV	7	Capital gain net income (from Part IV, line 2)					
ď	8	Net short-term capital gain					
	9	Income modifications					
	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)					
	12	Total. Add lines 1 through 11	22,972.		562.	562.	
S	13	Compensation of officers, directors, trustees, etc.					
xpenses	14	Other employee salaries and wages					
oel	15	Pension plans, employee benefits					
Ξ	16a	Legal fees (attach schedule)					
	b	Accounting fees (attach schedule) L-1.6b. Stmt	300.				
aţį	C	Other professional fees (attach schedule)					
str	17	Interest	9.				
<u>:</u>	18 19	Depreciation (attach schedule) and depletion	9.				
E	20	Occupancy					
Ă	21	Travel, conferences, and meetings					
pu	22	Printing and publications					
a	23	Other expenses (attach schedule) See Stmt .	618.				
ij	24	Total operating and administrative expenses.	010.				
rat		Add lines 13 through 23	927.				
Operating and Administrative	25	Contributions, gifts, grants paid	9,222.				9,222.
0	26	Total expenses and disbursements. Add lines 24 and 25	10,149.				9,222.
	27	Subtract line 26 from line 12:					
	а	Excess of revenue over expenses and disbursements	12,823.				
	b	Net investment income (if negative, enter -0-)			562.		
	С	Adjusted net income (if negative, enter -0-)			Maria San	562.	

Part II Balance Sheets Attached schedules and amounts in the description column			Beginning of year		End of year		
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	е	(c) Fair Market Value	
	1	Cash-non-interest-bearing					
	2	Savings and temporary cash investments	60,269.	73,09	92.	73,092.	
	3	Accounts receivable					
		Less: allowance for doubtful accounts					
	4	Pledges receivable					
		Less: allowance for doubtful accounts					
	5	5 Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule)					
		Less: allowance for doubtful accounts					
sts	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
ğ	10a	Investments – U.S. and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule)					
	С	Investments - corporate bonds (attach schedule)					
	11	Investments-land, buildings, and equipment: basis					
		Less: accumulated depreciation (attach schedule)					
	12	Investments-mortgage loans					
	13	Investments - other (attach schedule)					
	14	Land, buildings, and equipment: basis					
		Less: accumulated depreciation (attach schedule)					
	15	Other assets (describe)					
	16	Total assets (to be completed by all filers-see the					
		instructions. Also, see page 1, item l)	60,269.	73,09	32.	73,092.	
	17	Accounts payable and accrued expenses					
S	18	Grants payable					
tie	19	Deferred revenue					
Ε	20	Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	21	Mortgages and other notes payable (attach schedule)					
-	22	Other liabilities (describe)					
	23	Total liabilities (add lines 17 through 22)					
Balances		Foundations that follow FASB ASC 958, check here					
2		and complete lines 24, 25, 29, and 30.					
ala	24	Net assets without donor restrictions					
	25	Net assets with donor restrictions					
E		Foundations that do not follow FASB ASC 958, check here					
교		and complete lines 26 through 30.					
ō	26	Capital stock, trust principal, or current funds					
ts	27	Paid-in or capital surplus, or land, bldg., and equipment fund					
sse	28	Retained earnings, accumulated income, endowment, or other funds	60,269.	73,09			
As	29	Total net assets or fund balances (see instructions)	60,269.	73,09	32.		
Net Assets or Fund	30	Total liabilities and net assets/fund balances (see		_12 _21			
	-4 IIII	instructions)	60,269.	73,09	32.		
	rt III	Analysis of Changes in Net Assets or Fund Balances at net assets or fund balances at beginning of year—Part II, colur	mn (a) line 20 (must	agree with			
1		of year eported on prior year's return)			,	60 260	
0				⊢	1	60,269.	
	Oth	er amount from Part I, line 27a			2	12,823.	
3	٥١١١٥	er increases not included in line 2 (itemize)			3 4	72 000	
5	Doc	lines 1, 2, and 3		1. 1.02 1.02	5	73,092.	
	Tota	reases not included in line 2 (itemize) al net assets or fund balances at end of year (line 4 minus line 5)—F	Part II column (b) line		6	72 002	
0	1012	in her assets of fund balances at end of year (line 4 minus line 5)—F	art II, Column (b), Ilne	223	U	73,092.	

Part IV

	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a						
b						
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		in or (loss) (f) minus (g))
а						
b						
С						
d						
е						
	Complete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/69.	(I) Gains (Co	I. (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col.	s of col. (i) (j), if any	col. (k), but no	t less than -0-) or from col. (h))
а						
b						
С						
d						
е						
2	Capital gain net income of		also enter in Par enter -0- in Par		2	
3	If gain, also enter in Part	in or (loss) as defined in sections I, line 8, column (c). See instru	ctions. If (loss),	enter -0- in	3	
Part	V Excise Tax Based	d on Investment Income (Se	ction 4940(a),	4940(b), or 49	48-see instru	ctions)
1a		ons described in section 4940(d)(2),	, check here		on line 1.	A CONTRACTOR
b	All other domestic found	lations enter 1.39% (0.0139) of line 12, col. (b)	line 27b. Exem	pt foreign organ	nizations,	
2		mestic section 4947(a)(1) trusts a			1000000	0.
3						
4		emestic section 4947(a)(1) trusts a		dations only: othe		
5		nt income. Subtract line 4 from li				
6	Credits/Payments:	, , , , , , , , , , , , , , , , , , ,				
а		ents and 2021 overpayment cred	dited to 2022	6a		
b						
С						
d	Backup withholding error					
7					7	
8		derpayment of estimated tax. Che			hed 8	
9		es 5 and 8 is more than line 7, er			9	
10		more than the total of lines 5 and			10	
11		0 to be: Credited to 2023 estim			efunded 1	
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Capital Gains and Losses for Tax on Investment Income

Part	VI-A Statements Regarding Activities			
	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		×
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		×
	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		×
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		×
	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		×
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		×
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		×
	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	×	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
b	ME If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
D	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	×	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	OD		
3	4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes,"			MEN SE
	complete Part XIII	9	×	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		- ' '	
	names and addresses	10		×
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		×
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		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
	Website address N/A			
14	The books are in care of STANLEY PATON Telephone no. (207)832	-783	32	
	Located at PO BOX 344 WALDOBORO ME ZIP+4 04572			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			
	and enter the amount of tax-exempt interest received or accrued during the year			
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		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			91479 (7) 915 (7)
	the foreign country			

				age C
Par	t 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?	1a(1)		×
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified			
	person?	1a(2)		×
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		×
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		×
	(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)		×
	(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			
L	terminating within 90 days.)	1a(6)	-	×
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .			
1020		1b		
c d	Organizations relying on a current notice regarding disaster assistance, check here			
u	were not corrected before the first day of the tax year beginning in 2022?	1d		×
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	I u		
_	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 XII, lines 6d and 6e) for			
	tax year(s) beginning before 2022?	2a		×
	If "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement – see instructions.)	2b	ALCOHOLD STATE AND	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	20 , 20 , 20 , 20			
3a				
	during the year?	3a		×
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.)	3b		NO CONTRACTOR OF THE PARTY OF T
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable			
	purposes?	4a	CONT.	×
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	41		
	in 2022?	4b orm 99	O DE	X
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Par	Statements Regarding Activities	S IOI W	mich Form	4120	iviay be n	equire	a (continued)					
5a	During the year, did the foundation pay or incur	any am	ount to:						Yes	No		
	(1) Carry on propaganda, or otherwise attempt	to influe	nce legislation	on (sect	ion 4945(e))? .		5a(1)		×		
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or											
	indirectly, any voter registration drive?							5a(2)		×		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?							5a(3)		×		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)											
	(4)(A)? See instructions						5a(4)		×			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for											
	the prevention of cruelty to children or animals?									×		
b	, , , , , , , , , , , , , , , , , , , ,											
	in Regulations section 53.4945 or in a current no	- 2	5 SS			ee instri	actions	5b				
C	Organizations relying on a current notice regard	0										
d	If the answer is "Yes" to question 5a(4), doe											
	maintained expenditure responsibility for the gra							5d		(825-325)		
0 -	If "Yes," attach the statement required by Regul											
6a	Did the foundation, during the year, receive any benefit contract?	tunas,	airectly or in	nairecti	y, to pay p	remium	s on a personal					
								6a		<u>×</u>		
b	Did the foundation, during the year, pay premiur	ns, dire	ctly or indired	ctly, on	a personal	benefit	contract? .	6b		×		
7-	If "Yes" to 6b, file Form 8870.				la - 14 - 14 4 11 - 1			7-		×		
7a b	At any time during the tax year, was the foundation If "Yes," did the foundation receive any proceed	1150					anagation?	7a 7b				
8	Is the foundation subject to the section 4960 ta							70				
O	excess parachute payment(s) during the year?.							8				
Par	t VII Information About Officers, Direct							-	ees.			
	and Contractors	, .	1401000, 1			.50.0,			,			
1	List all officers, directors, trustees, and found	lation r	nanagers an	d their	compens	ation. S	ee instructions.					
	(a) Managarah adalah		e, and average	(c) Co	mpensation	(d) (Contributions to	(e) Expense account,		ount.		
	(a) Name and address		rs per week ed to position	en	not paid, ter -0-)		yee benefit plans erred compensation	other a	allowan	ces		
MEL	ISSA BORBOUR	PRES	IDENT									
921	BREMEN ROAD WALDOBORO ME 04572		1.00		0.		0.			0.		
AUD:	REY ENNAMORATI	SECRE	ETARY									
580	STORER MOUNTAIN RD WALDOBORO ME 04572		1.00		0.		0.			0.		
STA	NLEY PATON	TREAS	SURER									
	BOX 344 WALDOBORO ME 04572		1.00		0.		0.			0.		
		DIREC					VILLIAM BLODGET DIRECTOR					
5000	SLOW MILSS ROAD WALDOBORO ME 04572									0.		
2	0	,			0.			\ I6 =		10000		
_	Compensation of five highest-paid employe	es (oth		se incl		ne 1—:). If no	one, e	10000		
	Compensation of five highest-paid employe "NONE."	es (oth		se incl		ne 1—:	see instructions). If no	one, (10000		
	"NONE."		er than thos	verage	uded on li		(d) Contributions to employee benefit	(e) Exper	nse acc	enter		
			er than thos	verage veek			(d) Contributions to	(e) Exper		enter		
	"NONE." (a) Name and address of each employee paid more than \$50,00		(b) Title, and a	verage veek	uded on li		(d) Contributions to employee benefit plans and deferred	(e) Exper	nse acc	enter		
	"NONE." (a) Name and address of each employee paid more than \$50,00		(b) Title, and a	verage veek	uded on li		(d) Contributions to employee benefit plans and deferred	(e) Exper	nse acc	enter		
NONE	"NONE." (a) Name and address of each employee paid more than \$50,00		(b) Title, and a	verage veek	uded on li		(d) Contributions to employee benefit plans and deferred	(e) Exper	nse acc	enter		
	"NONE." (a) Name and address of each employee paid more than \$50,00		(b) Title, and a	verage veek	uded on li		(d) Contributions to employee benefit plans and deferred	(e) Exper	nse acc	enter		
	"NONE." (a) Name and address of each employee paid more than \$50,00		(b) Title, and a	verage veek	uded on li		(d) Contributions to employee benefit plans and deferred	(e) Exper	nse acc	enter		
	"NONE." (a) Name and address of each employee paid more than \$50,00		(b) Title, and a	verage veek	uded on li		(d) Contributions to employee benefit plans and deferred	(e) Exper	nse acc	enter		
	"NONE." (a) Name and address of each employee paid more than \$50,00		(b) Title, and a	verage veek	uded on li		(d) Contributions to employee benefit plans and deferred	(e) Exper	nse acc	enter		
	"NONE." (a) Name and address of each employee paid more than \$50,00		(b) Title, and a	verage veek	uded on li		(d) Contributions to employee benefit plans and deferred	(e) Exper	nse acc	enter		
	"NONE." (a) Name and address of each employee paid more than \$50,00		(b) Title, and a	verage veek	uded on li		(d) Contributions to employee benefit plans and deferred	(e) Exper	nse acc	enter		
NONE	"NONE." (a) Name and address of each employee paid more than \$50,00		(b) Title, and a	verage veek	uded on li		(d) Contributions to employee benefit plans and deferred	(e) Exper	nse acc	enter		

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3	and Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONI	= 33
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
ION		(o) compensation
	number of others receiving over \$50,000 for professional services	0
art	VIII-A Summary of Direct Charitable Activities	T
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	EDUCATION - PROVIDED SCHOLARSHIPS, STUDENT RECOGNITION AND ASSISTANCE	
	TO STUDENTS IN NEED IN LOCAL SCHOOLS	
		4,716
2	HUNGER - FOOD PANTRY SERVING HUNDREDS IN NEED	
3	DOVEDHY AND GUADING CUIDODH DOD THRIVIDUALC AND DANTITED IN MEED AND	1,815
J	POVERTY AND CHARITY - SUPPORT FOR INDIVIDUALS AND FAMILIES IN NEED AND LOCAL CHARITIES	
	HOCAL CHARTITES	3,137
4	EYECARE - PROVIDED VISION SCREENING AND GLASSES FOR YOUTHS AND ADULTS	3,13,
-	IN NEED	
		650
art	VIII-B Summary of Program-Related Investments (see instructions)	-
De	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1		
2		
AII	ather program related investments. See instructions	
	other program-related investments. See instructions.	
3		
	Add lines 1 through 3	
)ta	- Add lines 1 through 3	

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Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	n foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	
	purposes:	
а	Average monthly fair market value of securities	1a
b	Average of monthly cash balances	1b 66,681.
C		1c
d		1d 66,681.
е	Reduction claimed for blockage or other factors reported on lines 1a and	
	1c (attach detailed explanation)	6
2	Acquisition indebtedness applicable to line 1 assets	2
3	Subtract line 2 from line 1d	3 66,681.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see	
	instructions)	4 1,000.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5 65,681.
6	Minimum investment return. Enter 5% (0.05) of line 5	6 3,284.
Part		undations
	and certain foreign organizations, check here 🗵 and do not complete this part.)	
1	Minimum investment return from Part IX, line 6	1
2a	Tax on investment income for 2022 from Part V, line 5	(A)
b		
C		2c
3	Distributable amount before adjustments. Subtract line 2c from line 1	3
4	Recoveries of amounts treated as qualifying distributions	4
5	Add lines 3 and 4	5
6	Deduction from distributable amount (see instructions)	6
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII,	_
	line 1	7
	t XI Qualifying Distributions (see instructions)	olere t(
1	· · · · · · · · · · · · · · · · · · ·	
a		1a 9,222.
ь		1b
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	
_	purposes	2
3		
a		3a
b		3b 9.222.
4		9, 222. Form 990-PF (2022)
BAA	REV 05/17/23 PRO	10m 330-F i* (2022)

Part	XII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1	Distributable amount for 2022 from Part X, line 7				
2	Undistributed income, if any, as of the end of 2022:				
а	Enter amount for 2021 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2022:				
а	From 2017 0 .				
b	From 2018 0.				
С	From 2019 0.				
d	From 2020 20,106.				
е	From 2021 11,735.				
f	Total of lines 3a through e	31,841.			
4	Qualifying distributions for 2022 from Part XI, line 4: \$ 9, 222.				
а	Applied to 2021, but not more than line 2a .				
b	Applied to undistributed income of prior years				
	(Election required — see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2022 distributable amount				
е	Remaining amount distributed out of corpus	9,222.			
5	Excess distributions carryover applied to 2022				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	41,063.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
С	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		0.		
е	Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount—see instructions				
	Undistributed income for 2022. Subtract lines			0.	
'	4d and 5 from line 1. This amount must be distributed in 2023				0.
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 2017 not				
O	applied on line 5 or line 7 (see instructions).	0.			
9	Excess distributions carryover to 2023.	0.			
J	Subtract lines 7 and 8 from line 6a	11 063			
10		41,063.			
10	Analysis of line 9: Excess from 2018 0.				
a	2.0000				
b	Excess from 2019				
c	Excess from 2020				
d	Excess from 2021				
е	Excess from 2022 9, 222.				

Part	XIII Private Operating Founda	tions (see instru	ctions and Part \	VI-A, question 9)		
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for	2022, enter the da	te of the ruling .		02/08/2013	
b	Check box to indicate whether the four	ndation is a private	operating foundati	ion described in se	ction X 4942(j)(3) or 4942(j)(5)
2a		Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part IX for	(a) 2022	(b) 2021	(c) 2020	(d) 2019	(e) rotar
	each year listed	562.	653.	737.	937.	2,889.
b	85% (0.85) of line 2a	478.	555.	626.	796.	2,455.
C	Qualifying distributions from Part XI,	-	·			
	line 4, for each year listed	9,222.	11,735.	20,106.	18,362.	59,425.
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	9,222.	11,735.	20,106.	18,362.	59,425.
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 IX, line 6, for each year listed	2,189.	1,833.	1,744.	1,814.	7,580.
C	"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					
Part				ne foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year-		s.)			
1	Information Regarding Foundation					
а	List any managers of the foundation value before the close of any tax year (but o					by the foundation
b	List any managers of the foundation ownership of a partnership or other er					ge portion of the
2	Information Regarding Contribution Check here ☐ if the foundation or unsolicited requests for funds. If the fo complete items 2a, b, c, and d. See in	lly makes contrib oundation makes o	utions to presele	cted charitable o		
а	The name, address, and telephone nu	mber or email add	lress of the persor	to whom applica	tions should be ad	dressed:
	See Supplementary Informat:	<u>ion Stat</u> ement	ţ			
b	The form in which applications should	be submitted and	l information and r	materials they sho	uld include:	
С	Any submission deadlines:					
d	Any restrictions or limitations on aw factors:	ards, such as by	geographical are	eas, charitable fie	elds, kinds of inst	itutions, or other

Part XIV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year

3 Grants and Contributions Paid During t	ne tear or Approv	ea for Fu	ture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
MEDOMAK VALLEY HIGH SCHOOL	1	PUBLIC		
320 MANKTOWN ROAD			EDUCATION	
WALDOBORO ME 04572				4,500.
TOWN OF WALDOBORO		N/A	HOLIDAY FOOD	
PO BOX J			1	1
WALDOBORO ME 04572			l	1,500.
SAFE HARBOR CHAPEL		PUBLIC	HUNGER	
50 MILL STREET				1
WALDOBORO ME 04572				1,000.
LIONS INTERNATIONAL		LOBTIC	DISASTER RELIEF	
300 W 22ND STREET				407
OAK BROOK IL 60523				407.
LIONS MAINE DISTRICT 41		POBLIC	MAKE A WISH	
194 FERRY ROAD				500
CHELSEA ME 04330				500.
WALDOBORO HISTORICAL SOCIETY		PORTIC	HISTORICAL	
1164 MAIN STREET		_	PRESERVATION	E00
WALDOBORO ME 04572		D.::DT T.O.		500.
WALDOBORO FOOD PANTRY		PUBLIC	•	
124 FRIENDSHIP ROAD			FAMILIES IN	315.
WALDOBORO ME 04572		DUDT TO	NEED	313.
NEW HOPE MIDCOAST 5 BEACH STREET		PUBLIC	FOOD & HOUSING	
ROCKLAND ME 04861				500.
KOCKLAND ME 04001				300.
Total	<u> </u>		<u> </u>	3a 9,222.
b Approved for future payment				
				İ
				1
Total				3b

P	art XV	-A Analysis of Income-Producing A	ctivities				
Ent	er gros	s amounts unless otherwise indicated.		usiness income	Excluded by sect	ion 512, 513, or 514	(e)
1	Progr	ram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
	а						
	b _						
	_						
	-1						
	е _						
	f						
	g F	ees and contracts from government agencies					
2	Mem	bership dues and assessments					
3		est on savings and temporary cash investments			14	562.	
4	Divid	ends and interest from securities					
5		ental income or (loss) from real estate:					
		ebt-financed property					
		ot debt-financed property					
6		ental income or (loss) from personal property					
7		r investment income					
8		or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events					
10	Gross	s profit or (loss) from sales of inventory					
11	Other	rrevenue: a					
	b _						
	c _						
	d _						
	е _						
		otal. Add columns (b), (d), and (e)				562.	
		Add line 12, columns (b), (d), and (e)				13	562.
		sheet in line 13 instructions to verify calculation			+ D		
	rt XV						
LII	ne No.	Explain below how each activity for which incon of the foundation's exempt purposes (other that					e accomplishmen
		of the foundation's exempt purposes (other than	T by providing far	ids for sacri parp	3303). (000 1113114	0110110.)	
_							
-							
-							
_							
							•
-							

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Part XVI

	in se		directly or indirectly er other than section 5								res	NO
	1000		porting foundation to	a noncharitable evem	nt ora	anization	of:					
			· · · · · · ·							. 1a(1)		~
		ther assets .										×
		r transactions:	(*), (*) * * * (*) (*)		• •					. 1a(2)		×
			a nanaharitahla ayar							d l- (d)		
			a noncharitable exen									×
			ets from a noncharitat									×
			, equipment, or other									×
			rrangements									×
		oans or loan gua										×
			ervices or membership									×
			quipment, mailing list			3.50						×
			of the above is "Yes,									
			ther assets, or service									
			on or sharing arrange									
(a) Line	no. (b) Amount involved	(c) Name of noncha	ritable exempt organization		(d) Descrip	otion of transfe	rs, transa	actions, an	d sharing arr	angeme	ents
										VI		
								1				
	\dashv											
	descr	ribed in section 5 es," complete the	ectly or indirectly affi 501(c) (other than sect e following schedule.	tion 501(c)(3)) or in se	ction 5					. 🗌 Ye	es 🗵] No
		(a) Name of organ	nization	(b) Type of organ	iization			(c) Descr	iption of re	elationship		
	Unde	r penalties of periun. I	declare that I have examined	this return, including accomp	anvina er	hedules and	statements and	to the he	st of my kn	owledge and h	elief. it i	is true.
Sign			aration of preparer (other than						r ·			
1870.				110/21/2022	m D :					the IRS discu		
lere	Sign	ature of officer or true	stee	10/31/2023 Date	Title	EASURER			See	instructions.	⊠Yes	□No
	Jigit	Print/Type preparer		Preparer's signature	11110		Date	——————————————————————————————————————		PTIN		
Paid		096 100 100		Troparer a signature					Check X	if	2005	0
repa	rer	1 1 1 and 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Bachelder, CPA				11/01/2		with the same	yed P0122	-	2
Jse C		Table Today Today	ruce A. Bacheld					Firm's E		-051949		
		Firm's address 28	35 Biscay Road			543		Phone r	no. (20°	7)563-7		
200 0				REV 05/17/23 PE	RO					Form 99	ローピト	(2022)

WALDOBORO LIONS FOUNDATION 46-1200251

Form 990-PF: Return of Private Foundation

Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.

Continuation Statement

Name and Address Information	Form Information	Submission Information	Restrictions
STANLEY PATON	LETTER DESCRIBING AMOUNT AND	N/A	FOCUS ON LOCAL
PO BOX V	PURPOSE OF REQUEST		YOUTH, EYE SIGHT
WALDOBORO, ME 04572			AND HUNGER
PPatonAgency@roadrunner.com			
207-832-7832			

Additional Information From Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description		Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
990 PF		9.			
	Total	9.			

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
РО ВОХ	170.			
SUPPLIES	448.			
Total	610			

Total 618.

2022

Name	Employer Identification No.
WALDOBORO LIONS FOUNDATION	46-1200251

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
otal to Form 990	-PF, Part I, Line 16a				

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BRUCE BACHELDER CPA	TAX PREP	300.			
Total to Form 990-	PF, Part I, Line 16b	300.			

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Total to Form 990-	PF, Part I, Line 16c				

Schedule B (Form 990)

Schedule of Contributors

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.

Name of the organization **Employer identification number** 46-1200251 WALDOBORO LIONS FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF ■ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization
WALDOBORO LIONS FOUNDATION
Employer identification number
46-1200251

Part I	Contributors (see instructions). Use duplicate co	pies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STANLEY BAILEY TRUST FNWM PO BOX 940 DAMARISCOTTA ME 04543	c 10 505	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization

WALDOBORO LIONS FOUNDATION

46-1200251

46-1200251 Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (d) (b) FMV (or estimate) from **Date received** Description of noncash property given Part I (See instructions.) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.)

Name of org	yanızatıon			Employer identification number				
WALDOBO	RO LIONS FOUNDATION			46-1200251				
Part III	(10) that total more than \$1,000 fo	or the year from any of ations completing Par he year. (Enter this int	one contributor. (t III, enter the tota formation once. S	escribed in section 501(c)(7), (8), or Complete columns (a) through (e) and I of exclusively religious, charitable, etc., ee instructions.)				
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held				
_	Transferee's name, address, a	(e) Transfo		ship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held				
			•••••					
	(e) Transfer of gift							
-	Transferee's name, address, a	ind ZIP + 4	Relation	ship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held				
	•••••							
	Transferee's name, address, a	• •	sfer of gift Relationship of transferor to transferee					
	Transieree 3 maine, address, a	ind Zif + 4	Netationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held				
		•••••						
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
Γ								

Form **8879-TE**

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

For calendar year 2022, or fiscal year beginning $\ Jul\ 1$, 2022, and ending $\ Jun\ 30$, 2023

2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information.

Name of filer	EIN or SSN					
WALDOBORO LIONS FOUNDATION	46-1200251					
Name and title of officer or person subject to tax						
STANLEY PATON, TREASURER						
Part I Type of Return and Return Information						
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 .						
processing of the electronic payment of taxes to receive confidential information necessary to answe the payment. I have selected a personal identification number (PIN) as my signature for the electronic electronic funds withdrawal.	return and, if applicable, the consent to					
PIN: check one box only						
☐ I authorize to enter my PIN	as my signature					
	Enter five numbers, but					
	do not enter all zeros					
on the tax year 2022 electronically filed return. If I have indicated within this return that a copagency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the afor 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 significant of the entity of the entity of the entity.	rementioned ERO to enter my PIN on the nature 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 of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.	ate agency(les) regulating charities as part					
Signature of officer or person subject to tax	Date <u>10/31/2023</u>					
Part III Certification and Authentication						
ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 0 1 0 2 5 1 Do not enter	8 8 9 4 7 all zeros					
certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically file am submitting this return in accordance with the requirements of Pub. 4163 , Modernized e-File (Neroviders for Business Returns.						
ERO's signature Date	11/01/2023					
ERO Must Retain This Form — See Instructions Do Not Submit This Form to the IRS Unless Requested						