## **2021 FILING INSTRUCTIONS**

#### MAINE ATTORNEY GENERAL

#### FOR THE YEAR ENDING

December 31, 2022

Prepared by	Baker Newman & Noyes P.O. Box 507 Portland, ME 04112
	A signed copy of Form 990-PF should be sent to the Maine Attorney General's Office on or before the filing date indicated below.
	The Maine Attorney General's Office requires electronic submission.
Filing Date	May 16, 2023
Upload signed copy	https://appengine.egov.com/apps/me/privatefoundationfiling
Special Instructions	Sign and date Form 990-PF, upload to the Maine Attorney General at:
	https://appengine.egov.com/apps/me/privatefoundationfiling

# Form **990-PF**Department of the Treasury Internal Revenue Service

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

or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

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

For	caler	ndar year 2022 or tax year beginning		, and ending		
		foundation deford and Mechanics Sa	vinas		A Employer identification	n number
		ritable Foundation	-·g-		85-167441	2
Nur	nber a	and street (or P.O. box number if mail is not delivered to street	t address)	Room/suite	<b>B</b> Telephone number	
Ρ	.0	. Box 400			(207) 284	-5906
		own, state or province, country, and ZIP or foreign ${ m curn}$ , ${ m ME}$ $04212-0400$	oostal code		C If exemption application is	pending, check here
		all that apply: Initial return	Initial return of a fo	rmer public charity	<b>D</b> 1. Foreign organization	ns check here
•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Final return	Amended return	This public charty	D 11 Foreign organization	10, 01100K 11010
		Address change	Name change		Foreign organizations m check here and attach or	neeting the 85% test, computation
H (	heck	type of organization: X Section 501(c)(3) ex	xempt private foundation		E If private foundation st	atus was terminated
	Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion	under section 507(b)(	1)(A), check here
		· I —	ing method: X Cash	Accrual	F If the foundation is in a	
(fı		Part II, col. (c), line 16) (Part I, colur	ther (specify)	0 \	under section 507(b)(	1)(B), check here
De	\$ irt l	Analysis of Revenue and Expenses			(a) Adimeted and	(d) Disbursements
Pa	Ir L I	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	( <b>b)</b> Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	253,126.		N/A	
	2	Check if the foundation is not required to attach Sch. B Interest on savings and temporary	1 400	1 100		<u> </u>
	3	cash investments	1,487.	1,487	•	Statement 1
	4	Dividends and interest from securities				
		Gross rents  Net rental income or (loss)				
			148,165.			
Jue	l b	Net gain or (loss) from sale of assets not on line 10	210/2001			
Revenue	7	Capital gain net income (from Part IV, line 2)		148,165		
č	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
		Less: Cost of goods sold				
		Gross profit or (loss)				
	11 12	Other income	402,778.	149,652		
	13	Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
ses	16a	Legal fees Stmt 2	275.	0 .	,	275.
per	b	Accounting fees Stmt 3	1,900.	950		950.
Ä		Other professional fees				
ative		Interest				
stra	18 19	Taxes				
пin	20	Occupancy				
Adr		Travel, conferences, and meetings				
pue	22	Printing and publications				
ng	23	Other expenses				
Operating and Administrative Expens	24	Total operating and administrative				1 22-
Dee		expenses. Add lines 13 through 23	2,175.	950		1,225.
_		Contributions, gifts, grants paid	120,000.			120,000.
	26	Total expenses and disbursements.	122,175.	950		121,225.
_	27	Add lines 24 and 25 Subtract line 26 from line 12:	144,113.	930		141,443.
		Excess of revenue over expenses and disbursements	280,603.			
		Net investment income (if negative, enter -0-)	,	148,702		
		Adjusted net income (if negative, enter -0-)			N/A	

223501 12-06-22 LHA For Paperwork Reduction Act Notice, see instructions.

Pa	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	•
	_	Column should be for end-or year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	000 450	100 200	100 200
	2	Savings and temporary cash investments	298,458.	129,328.	129,328.
	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			
	7	disqualified persons			
	7	Other notes and loans receivable			
	•	Less: allowance for doubtful accounts			
Assets	8	Inventories for sale or use			
Ass	9	Prepaid expenses and deferred charges Investments - U.S. and state government obligations Stmt 5	0.	246,058.	246,058.
			0.	240,030.	240,030.
		Investments - corporate stock			
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
	10	Less: accumulated depreciation			
	13	Investments - other			
		Land, buildings, and equipment: basis			
	17	Less: accumulated depreciation			
	15	Other assets (describe			
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	298,458.	375,386.	375,386.
$\dashv$	17	Accounts payable and accrued expenses		0.07000	
- 1	18	Grants payable			
	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
api	21	Mortgages and other notes payable			
<b>□</b>	22	Other liabilities (describe )			
		·			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
ces		and complete lines 24, 25, 29, and 30.			
	24	Net assets without donor restrictions			
3als	25	<u></u>			
Fund Balan		Foundations that do not follow FASB ASC 958, check here X			
윤		and complete lines 26 through 30.	_	_	
	26	Capital stock, trust principal, or current funds	0.	0.	
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds	298,458.	375,386.	
je je	29	Total net assets or fund balances	298,458.	375,386.	
			200 450	275 206	
$\perp$	30	Total liabilities and net assets/fund balances	298,458.	375,386.	
Pa	art	III Analysis of Changes in Net Assets or Fund B	alances		
4 7	Otol	net assets or fund balances at beginning of year - Part II, column (a), line	20		
		st agree with end-of-year figure reported on prior year's return)		1	298,458.
		. C D . L L' . 0.7			280,603.
			~ ~.	atement 4 3	15,000.
					594,061.
		lines 1, 2, and 3 eases not included in line 2 (itemize) <b>Unreailzed Gains</b>	/Losses on Inv		218,675.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co			375,386.
<u>-                                    </u>	Jul	access of faire senances at one of your fine a minus into of 1 art in ou	(8 <i>)</i> ; iiii 20		Form <b>990-PF</b> (2022)

Part IV Capital Gains a	nd Losses for Tax on Ir	nvestment	Income					
	e kind(s) of property sold (for exame thouse; or common stock, 200 shs		,	1	( <b>b)</b> How acquire P - Purchase	d (	c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
	,	3. WEO 00.)			D - Donation	_	(, a), j)	(, aaj, j)
- <u>-</u>	12			-		_		
<u>b</u>				_		_		
<u>c</u>				_		_		
e d				-		+		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other ba				(h) Gain or (loss) (e) plus (f) minus (	
a 496,795.			348	. 630	) .			148,165.
b				,				
C								
d								
e								
Complete only for assets showing	gain in column (h) and owned by	the foundation o	n 12/31/6	9.		(I) G	Gains (Col. (h) gain	minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col. ol. (j), if an			col. (l	k), but not less than Losses (from col. (I	ı -0-) <b>or</b>
a								148,165.
b								
c								
d								
e								
3 Net short-term capital gain or (loss If gain, also enter in Part I, line 8, co Part I, line 8	olumn (c). See instructions. If (loss				}   3		N/A	
	ed on Investment Incon	ne (Section	4940(a	a), 49	40(b), or 49	48 - 9		ons)
1a Exempt operating foundations de	escribed in section 4940(d)(2), che	eck here	and en	nter "N/A	" on line 1.	1		-
Date of ruling or determination le		tach copy of lett				3)	1	2,067.
<b>b</b> All other domestic foundations er				-		´ }		
	col. (b)		-					
2 Tax under section 511 (domestic	section 4947(a)(1) trusts and taxa	able foundations	only; othe	ers, ente	er -0-)	····· )	2	0.
• • • • • • • • • • • • • • • • • • • •							3	2,067.
	section 4947(a)(1) trusts and tax						4	0.
	e. Subtract line 4 from line 3. If ze						5	2,067.
6 Credits/Payments:								
a 2022 estimated tax payments and	d 2021 overpayment credited to 20	022	6a			0.		
<b>b</b> Exempt foreign organizations - ta	x withheld at source		6b			0.		
c Tax paid with application for exte			6c			0.	1	
<b>d</b> Backup withholding erroneously			6d			0.		
7 Total credits and payments. Add							7	0.
8 Enter any <b>penalty</b> for underpaym	ent of estimated tax. Check here	if Form 22	20 is attac	ched			8	96.
	d 8 is more than 7, enter <b>amount</b> (						9	2,163.
10 Overpayment. If line 7 is more th	nan the total of lines 5 and 8, enter						10	
11 Enter the amount of line 10 to be						ınded	11	

## Biddeford and Mechanics Savings

1.	During the bourgest did the foundation through influence and relational state on local local backing and id the relation on intermediate		Yes	No
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	4.	162	X
	any political campaign?	1a		X
	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 <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			37
	Did the foundation file Form 1120-POL for this year?	1c		X
C	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ (2) On foundation managers. \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. \$ U •			l
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
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	o If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	■ By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	
7		7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	ME			
b	olf 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 the 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 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		X
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address www.mechanicssavings.com/community/			
14	The books are in care of Carri Brown, Treasurer Telephone no. (207)	284	-59	06
		212	-04	00
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041 -</b> check here			$\Box$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
		rm <b>99</b> 0	)-PF	(2022)

Part 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) Engag	e in the sale or exchange, or leasing of property with a disqualified person?		1a(1)		X
(2) Borrov	money from, lend money to, or otherwise extend credit to (or accept it from)				
a disqı	ialified person?		1a(2)		X
(3) Furnis	n goods, services, or facilities to (or accept them from) a disqualified person?		1a(3)		X
(4) Pay co	mpensation to, or pay or reimburse the expenses of, a disqualified person?		1a(4)		Х
(5) Transf	er 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
	to pay money or property to a government official? (Exception. Check "No"				
if the f	oundation agreed to make a grant to or to employ the official for a period after				
termin	ation of government service, if terminating within 90 days.)		1a(6)		Х
	er 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		
<b>c</b> Organizatio	ns relying on a current notice regarding disaster assistance, check here				
<b>d</b> Did the fou	ndation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
before the	irst day of the tax year beginning in 2022?		1d		Х
2 Taxes on fa	ilure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
defined in s	ection 4942(j)(3) or 4942(j)(5)):				
a 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		Х
If "Yes," list	· · · · · · · · · · · · · · · · · · ·				
<b>b</b> Are there a	ny years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect				
	assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach				
	see instructions.)	N/A	2b		
c If the provi	sions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.				
	, <u> </u>				
	ndation hold more than a 2% direct or indirect interest in any business enterprise at any time				
during the	/ear?		3a		X
<b>b</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				
• .	69; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to disp	ose			
	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		
	ndation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
	ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose th				
had not be	en removed from jeopardy before the first day of the tax year beginning in 2022?		4b		X

<b>5a</b> During the year, did the foundation pay or incur any amount to:					Yes	No X		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?								
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,								
any voter registration drive?								
(3) Provide a grant to an individual for travel, study, or other similar purposes?								
(4) Provide a grant to an organization other than a charitable, etc., organization described in section								
4945(d)(4)(A)? See instructions								
(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>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify ur								
section 53.4945 or in a current notice regarding disaster assistance? See inst	ructions		N/A	5b				
c Organizations relying on a current notice regarding disaster assistance, check								
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained								
expenditure responsibility for the grant?			N/A	5d				
If "Yes," attach the statement required by Regulations section 53.4945-5(d).								
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on							
a personal benefit contract?				6a		X		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a				6b		X		
If "Yes" to 6b, file Form 8870.								
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?			7a		Х		
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attrib				7b				
8 Is the foundation subject to the section 4960 tax on payment(s) of more than								
excess parachute payment(s) during the year?				8		Х		
Part VII Information About Officers, Directors, Trus	tees, Foundation Ma	nagers, Highly	/					
Paid Employees, and Contractors								
1 List all officers, directors, trustees, and foundation managers and								
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions t employee benefit pla and deferred	) (	( <b>e)</b> Exp	ense		
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	ا ا	allowai			
	1							
See Statement 6	1	0.	0			0.		
	1							
	1							
	1							
	1							
	1							
	1							
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."						
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(-) Companyation	(d) Contributions t employee benefit plan and deferred	) IS 20	( <b>e)</b> Exp	ense		
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	ا ا	allowai	1ces		
NONE			·					
	1							
	1							
				$\top$				
	1			1				
				$\top$				
	1							
				$\top$				
	1							
Total number of other employees paid over \$50,000				Γ'		0		
			Foi	m <b>99</b> 0	)-PF	(2022)		

D1	dueloid and Mechanics Davings		
	naritable Foundation	85-1	L <b>674412</b> Page <b>7</b>
Part VII Informatio Paid Empl	on About Officers, Directors, Trustees, Foundation oyees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid indepe	ndent contractors for professional services. If none, enter "	'NONE."	
(a) Name an	d address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		1	
		1	
		1	
		1	
		1	
Total number of others receiving	over \$50,000 for professional services		C
Part VIII-A   Summary	of Direct Charitable Activities		•
List the foundation's four largest	t direct charitable activities during the tax year. Include relevant statistic	al information such as the	Fymanaa
number of organizations and oth	er beneficiaries served, conferences convened, research papers produc	ced, etc.	Expenses
1 N/A			
2			
3			
4			
Dort VIII D O			
Describe the two largest program	of Program-Related Investments n-related investments made by the foundation during the tax year on lin	200 1 and 2	Amount
37 / 3		les I aliu Z.	Amount
1 N/A			
		+	
2			
All other program-related investr	nents. See instructions.		
3	nonto, ese mondono.		
<u> </u>			

Total. Add lines 1 through 3

P	Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign for	oundations	, see instructions.)
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	86,335.
	Average of monthly cash balances	1b	179,799.
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	266,134.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	266,134.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	3,992.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	262,142.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	13,107.
P	<b>Part X</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations, check here and do not complete this part.)	and certain	
1	Minimum investment return from Part IX, line 6	1	13,107.
2a	Tax on investment income for 2022 from Part V, line 5 2,067.		·
b	Income tax for 2022. (This does not include the tax from Part V.)		
	Add lines 2a and 2b	2c	2,067.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	11,040.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	11,040.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	11,040.
P	Part XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		444
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	121,225.
b	Program-related investments - total from Part VIII-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	121,225.

#### Part XII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	(b) Years prior to 2021	(c) 2021	( <b>d</b> ) 2022
1 Distributable amount for 2022 from Part X,	•	•		
line 7				11,040.
2 Undistributed income, if any, as of the end of 2022:				,
<b>a</b> Enter amount for 2021 only			0.	
<b>b</b> Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2022:				
<b>a</b> From 2017				
<b>b</b> From 2018				
<b>c</b> From 2019				
dFrom 2020 115,729.				
eFrom 2021 169,715.				
f Total of lines 3a through e	285,444.			
4 Qualifying distributions for 2022 from				
Part XI, line 4: \$ 121, 225.				
a Applied to 2021, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus				
(Election required - see instructions)	0.			
<b>d</b> Applied to 2022 distributable amount				11,040.
e Remaining amount distributed out of corpus	110,185.			
Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:	-			
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	395,629.			
<b>b</b> Prior years' undistributed income. Subtract	333,023.			
line 4b from line 2b		0.		
<b>c</b> 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		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2021. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2022. Subtract				
lines 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	0			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2017	0			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2023.	395,629.			
Subtract lines 7 and 8 from line 6a	333,049.			
10 Analysis of line 9:				
a Excess from 2018				
<b>b</b> Excess from 2019 <b>c</b> Excess from 2020 115,729.				
d Excess from 2020 115,729. d Excess from 2021 169,715.				
e Excess from 2022 110 , 185.				
• EV0039 HOHI 5055 TTO 1 TO 2 0				

Part XIII Private Operating F	<b>oundations</b> (see in	structions and Part VI-	A, question 9)	N/A					
1 a If the foundation has received a ruling o	r determination letter that	t it is a private operating							
foundation, and the ruling is effective fo	r 2022, enter the date of	the ruling							
<b>b</b> Check box to indicate whether the found				4942(j)(3) or 49	942(j)(5)				
2 a Enter the lesser of the adjusted net  Tax year  Prior 3 years									
income from Part I or the minimum	(a) 2022	<b>(b)</b> 2021	(c) 2020	(d) 2019	(e) Total				
investment return from Part IX for									
each year listed									
<b>b</b> 85% (0.85) of line 2a									
c Qualifying distributions from Part XI,									
line 4, for each year listed									
<b>d</b> Amounts included in line 2c not									
used directly for active conduct of									
exempt activities									
e Qualifying distributions made directly									
for active conduct of exempt activities.									
Subtract line 2d from line 2c									
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:									
a "Assets" alternative test - enter:									
(1) Value of all assets									
(2) Value of assets qualifying									
under section 4942(j)(3)(B)(i)									
<b>b</b> "Endowment" alternative test - enter									
2/3 of minimum investment return shown in Part IX, line 6, for each year									
listed									
c "Support" alternative test - enter:									
(1) Total support other than gross									
investment income (interest,									
dividends, rents, payments on									
securities loans (section									
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 XIV Supplementary Info			if the foundatior	n had \$5,000 or mo	ore in assets				
at any time during t	he year-see insti	ructions.)							
1 Information Regarding Foundation	n Managers:								
a List any managers of the foundation wh			ributions received by the	foundation before the clo	se of any tax				
year (but only if they have contributed n	iore than \$5,000). (See s	section 507(d)(2).)							
None									
<b>b</b> List any managers of the foundation wh			or an equally large porti	on of the ownership of a pa	artnership or				
other entity) of which the foundation has	a 10% or greater interes	st.							
None									
2 Information Regarding Contributi	on, Grant, Gift, Loan	, Scholarship, etc., Pr	ograms:						
Check here if the foundation	only makes contribution	is to preselected charitab	le organizations and doe	s not accept unsolicited re	quests for funds. If				
Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.									
a The name, address, and telephone num	ber or email address of th	ne person to whom applic	ations should be addres	sed:					
,		, «ppine		-					
See Statement 7									
<b>b</b> The form in which applications should be	e submitted and informa	tion and materials they st	ould include.						
The form in which applications should be	o oabiiiittou anu iiiittiila	aon ana materiais tricy Si	iodia moiduo,						
c Any submission deadlines:									
c Any submission deadlines:									
d Any restrictions or limitations or super-	a quah aa by gaagrankis	al aroon, abaritable fields	kindo of inotitutions	other feeters					
d Any restrictions or limitations on awards	, such as by geographica	ai ai eas, chantadhe neids,	kinus oi ilistitutions, or	ound laciols.					

Supplementary Information (continued) Part XIV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year Avesta Housing Management Corporation N/A PC General Purpose 307 Cumberland Avenue Portland, ME 04101 5,000. Biddeford Food Pantry N/A PC General Purpose 162 Elm Street Biddeford, ME 04005 4,000. Church Community Outreach Services N/A PC General Purpose P.O. Box 1175 Kennebunk, ME 04043 5,000. Community Dental N/A PC General Purpose 190 Park Avenue Portland, ME 04102 4,000. First Congregational Church of N/A General Purpose Scarborough (Food Pantry) 161 Black Point Road Scarborough, ME 04074 4,000. See continuation sheet(s) 3a 120,000. Total **b** Approved for future payment None Total

#### Part XV-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	ded by section 512, 513, or 514	(e)
Enter gross amounts amous other wise indicated.	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1,487.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	148,165.	
9 Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		149,652.	
13 Total. Add line 12, columns (b), (d), and (e)				13	149,652.
(See worksheet in line 13 instructions to verify calculations.)					
Doub VV D. Dolotion obin of Activities to				. D	

## Relationship of Activities to the Accomplishment of Exempt Purposes

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

Charitable Foundation

	Exempt Organ	izations							
1 Did	the organization directly or indi	rectly engage in any o	of the followin	g with any other organization	on described in section	on 501(c)		Yes	No
	er than section 501(c)(3) organ					. ,			
•	nsfers from the reporting found	•							
	Cash		-	=			1a(1)		Х
							1a(2)		X
	Other assetser transactions:						14(2)		
		hla avanant avananinati					46/41		Х
	Sales of assets to a noncharita						1b(1)		X
	Purchases of assets from a no						1b(2)		
	Rental of facilities, equipment,						1b(3)		X
	Reimbursement arrangements						1b(4)		<u> X</u>
(5)	Loans or loan guarantees						1b(5)		X
	Performance of services or me						1b(6)		X
	ring of facilities, equipment, ma						1c		X
<b>d</b> If th	e answer to any of the above is	"Yes," complete the fo	ollowing sche	edule. Column <b>(b)</b> should alv	ways show the fair m	arket value of the goods, o	ther ass	sets,	
	ervices given by the reporting for			ed less than fair market valu	ue in any transaction	or sharing arrangement, sh	now in		
COIL <b>a)</b> Line no	imn (d) the value of the goods, (b) Amount involved			e exempt organization	(4) p	of transfers to the second	hau!		
a)Line no	. (b) Amount involved	(c) Name of	N/A	5 650111pt of gallization	(u) Description	of transfers, transactions, and s	naring ar	rangeme	nts
			M/A						
	ne foundation directly or indirec	-				_	_		7
	ection 501(c) (other than sectio		ction 527?			L	_ Yes	X	No
b If "Y	es," complete the following sch			1 43 7 4 1 11		1.5			
	(a) Name of org	janization		(b) Type of organization	(	c) Description of relationsh	ıp		
	N/A								
	Under penalties of perjury, I declare and belief, it is true, correct, and co					best of my knowledge May	the IRS on with th	discuss 1	:his
Sign	0 0	,	oparor (ourier un			show	<u>vn</u> below	e prepar ? Se <u>e in</u> :	er str.
Here	Carrier. D	sow		03/21/2023	3 Treasure	r	Yes		J No
	Signature of officer or trustee			Date	Title				
	Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check if PTIN			
				/, . ^	l I	self- employed			
Paid	Nicholas E.			70	03/17/23		.310		
Prepa		r Newman	& Noye	S		Firm's EIN 01-049	452	6	
Use C	_								
	Firm's address P.O								
	Por	tland, ME	04112			Phone no. (207)8	79-	210	0
	•					Fo	rm <b>99</b> (	)-PF	(2022)

Part XIV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient Good Shepherd Food Bank N/A PC General Purpose P.O. Box 1807 Auburn, ME 04211 6,000. High Street Congregational Church N/A General Purpose (Food Pantry) 106 Pleasant Street Auburn, ME 04210 4,000. Mainely Character N/A PC General Purpose P.O. Box 11131 Portland, ME 04104 5,000. Mid Coast Hunger Prevention Program N/A PC General Purpose Inc. 12 Tenney Way Brunswick, ME 04011 4,000. My Place Teen Center N/A PC General Purpose 755 Main Street Westbrook, ME 04092 16,667. Pleasant Street Drop-in N/A PC General Purpose 106 Gilman Street Portland, ME 04102 5,000. Saco Food Pantry N/A PC General Purpose P.O. Box 246 Saco, ME 04072 4,000. Safe Voices N/A PC General Purpose P.O. Box 713 Auburn, ME 04212 8,333. Stroudwater Christian Food Pantry N/A PC General Purpose 1520 Westbrook St Portland, ME 04102 4,000. N/A PC Sweetser General Purpose 50 Moody Street Saco, ME 04072 10,000. Total from continuation sheets 98,000.

Part XIV Supplementary Information 3 Grants and Contributions Paid During the Y			T	
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
- Name and address (name of basiness)	or substantial contributor	recipient		
Mbo Dotawy Roundation	NT / 2	D.C.	Riddeford Cage Detary	
The Rotary Foundation One Rotary Center	N/A	PC	Biddeford Saco Rotary Club Red Ribbon	
Sherman Avenue., IL 60201			Committee	5,000
·				
Trinity Jubilee Center	N/A	PC	General Purpose	
247 Bates Street				
Lewiston, ME 04240				4,000
Unitersity of New England	N/A	PC	General Purpose	
11 Hills Beach Road				
Biddeford, ME 04005				5,000
University of Southern Maine	N/A	PC	General Purpose	
Foundation				
P.O. Box 9300				
Portland, ME 04104				5,000
Waterboro Community Pantry	N/A	PC	General Purpose	
P.O. Box 325 East Waterboro, ME 04030				4,000.
nacerboro, Mr 04030				±,000
Westbrook Community Food and Resource	N/A	PC	General Purpose	
Center				
426 Bridge Street				4 000
Westbrook, ME 04092				4,000
Windham Food Pantry and Clothes	N/A	GOV	General Purpose	
Closet				
377 Gray Road Windham, ME 04062				4 000
WINGHAM, ME 04002				4,000
Total from continuation charts				
Total from continuation sheets				

## Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization

Biddeford and Mechanics Savings
Charitable Foundation

Organization type (check one):

Employer identification number 85-1674412

_		
Filers of:	Se	ction:
Form 990 or 99	90-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
Check if your o	organization is cov	vered by the <b>General Rule</b> or a <b>Special Rule.</b>
Note: Only a s	ection 501(c)(7), (8	3), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule		
		g Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	;	
section contr	ons 509(a)(1) and ibutor, during the	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; 1. Complete Parts I and II.
contr literar	ibutor, during the y, or educational	scribed 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 tead of the contributor name and address), II, and III.
year, is che purpo	contributions exclecked, enter here bose. Don't comple	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the <i>lusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., te any of the parts unless the <b>General Rule</b> applies to this organization because it received <i>nonexclusively</i> c., contributions totaling \$5,000 or more during the year\$
answer "No" o	n Part IV, line 2, o	n't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> f 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 juirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2022)

Name of organization
Biddeford and Mechanics Savings
Charitable Foundation

Employer identification number

85-1674412

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Maine Community Bank  254 Main Street, P.O. Box 525  Biddeford, ME 04005	\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
Biddeford and Mechanics Savings
Charitable Foundation

Employer identification number

85-1674412

Part II	Noncash Property (see instructions). Use duplicate copies of P		ı
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<b></b> \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	

Name of organization

Biddeford and Mechanics Savings

Employer identification number

Biddeford and Mechanics Savings Charitable Foundation

85-1674412

Part III				01(c)(7), (8), or (10) that total more than \$1,000 for the year			
	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, c	through (e) and the following	ng line entry. For or	rganizations			
	Use duplicate copies of Part III if additional s	space is needed.	i,,000 or less to the	e year. (Effect this fine. office.)			
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held			
Part I							
		-					
		-					
H		(e) Trans	for of gift				
		(e) ITalis	ler or gift				
	Transferee's name, address, a	nd <b>7</b> IP ± 4	R	elationship of transferor to transferee			
ŀ	Tansieree 3 name, address, ar	10 ZII + 4		elationship of transfer of to transfer ce			
				_			
(a) No.							
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held			
Ī		(e) Trans	fer of gift				
	Transferee's name, address, ar	nd ZIP + 4	R	elationship of transferor to transferee			
(a) No. from	(b) Purpose of gift	(c) Use of	nift	(d) Description of how gift is held			
Part I	(2)1 a.peee e. g	(0) 000 01 ;	j	(a) Decembration of their girl to more			
-		(-) T					
	(e) Transfer of gift						
	Transferee's name, address, a	nd <b>7</b> ID + 4	D	elationship of transferor to transferee			
ŀ	Tansieree 3 name, address, ar	10 ZII + 4		elationship of transfer of to transfer ce			
		_	-				
(a) No.							
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held			
Ī		(e) Trans	fer of gift				
	Transferee's name, address, ar	nd ZIP + 4	R	elationship of transferor to transferee			
Γ							
		_					

## Department of the Treasury Internal Revenue Service

## **Underpayment of Estimated Tax by Corporations**

Form 990-PF

Attach to the corporation's tax return. Go to www.irs.gov/Form2220 for instructions and the latest information. OMB No. 1545-0123

Biddeford and Mechanics Savings Charitable Foundation

**Employer identification number** 85-1674412

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

	Dort I Deguired Annual Dayment		.,,					
<u> </u>	Part I Required Annual Payment						1	
	Total tay (aga instructions)							2,067.
'	Total tax (see instructions)						1	2,007.
2 :	a Personal holding company tax (Schedule PH (Form 1120), lin	ر 26 م	included on line 1	28	. 1			
	<b>b</b> Look-back interest included on line 1 under section 460(b)(2)				1			
	contracts or section 167(g) for depreciation under the income			21	,			
	contracts of socion for (g) for appropriation and of the mooning	, 1010						
(	c Credit for federal tax paid on fuels (see instructions)			20	:			
	d Total. Add lines 2a through 2c						2d	
3	Subtract line 2d from line 1. If the result is less than \$500, <b>do</b>	not c	omplete or file this form.	The corporation	 1			
	does not owe the penalty		-	· ·			3	2,067.
4	Enter the tax shown on the corporation's 2021 income tax ret							
	or the tax year was for less than 12 months, skip this line and	ente	the amount from line 3 o	on line 5			4	
5	Required annual payment. Enter the smaller of line 3 or line	4. If	the corporation is require	d to skip line 4,				
	enter the amount from line 3						5	2,067.
F	Part II Reasons for Filing - Check the boxes belo	w tha	at apply. If any boxes are	checked, the co	rporation	n <b>must</b> file Form 22	20	
	even if it does not owe a penalty. See instructions.							
6								
7								
8		st req	uired installment based o	n the prior year	's tax.			
_	Part III Figuring the Underpayment			<i>a</i> >				
		$\vdash$	(a)	(b)		(c)		(d)
9	Installment due dates. Enter in columns (a) through (d) the							
	15th day of the 4th (Form 990-PF filers: Use 5th month),	ا ۱	05/15/22	06/15	/22	09/15/	22	12/15/22
10	6th, 9th, and 12th months of the corporation's tax year	9	03/13/22	00/13	/ 4 4	09/13/	44	12/13/22
10	Required installments. If the box on line 6 and/or line 7							
	above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions							
	for the amounts to enter. If none of these boxes are checked,	1 1						
	·	10	517.		517.	5	16.	517.
11	enter 25% (0.25) of line 5 above in each column  Estimated tax paid or credited for each period. For	''	3171		<u> </u>	<del>                                     </del>		3174
•	column (a) only, enter the amount from line 11 on line 15.							
	See instructions	11						
	Complete lines 12 through 18 of one column	H						
	before going to the next column.							
12	Enter amount, if any, from line 18 of the preceding column	12						
	Add lines 11 and 12	13						
	Add amounts on lines 16 and 17 of the preceding column	14			517.	1,0	34.	1,550.
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	0.		0.		0.	0.
	If the amount on line 15 is zero, subtract line 13 from line							
	14. Otherwise, enter -0-	16			517.	1,0	34.	
17	Underpayment. If line 15 is less than or equal to line 10,							
	subtract line 15 from line 10. Then go to line 12 of the next							
	column. Otherwise, go to line 18	17	517.		517.	5	16.	517.
18	<b>Overpayment.</b> If line 10 is less than line 15, subtract line 10							
	from line 15. Then go to line 12 of the next column	18						

For Paperwork Reduction Act Notice, see separate instructions.

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Form 2220 (2022)

### Part IV Figuring the Penalty

			(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations; Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers; Use 5th month instead of 4th month.) See instructions	19				
20	Number of days from due date of installment on line 9 to the					
	date shown on line 19	20				
21	Number of days on line 20 after 4/15/2022 and before 7/1/2022	21				
22	Underpayment on line 17 x Number of days on line 21 x 4% (0.04)	22	\$	\$	\$	\$
23	Number of days on line 20 after 6/30/2022 and before 10/1/2022	23				
24	Underpayment on line 17 x Number of days on line 23 x 5% (0.05)	24	\$	\$	\$	\$
25	Number of days on line 20 after 9/30/2022 and before 1/1/2023	25				
26	Underpayment on line 17 x Number of days on line 25 x 6% (0.06)	26	\$	\$	\$	\$
27	Number of days on line 20 after 12/31/2022 and before 4/1/2023	27	See	Attached W	orksheet	
28	Underpayment on line 17 x Number of days on line 27 x 7% (0.07)	28	\$	\$	\$	\$
29	Number of days on line 20 after 3/31/2023 and before 7/1/2023	29				
30	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$	\$
31	Number of days on line 20 after 6/30/2023 and before 10/1/2023	31				
32	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$	\$
33	Number of days on line 20 after 9/30/2023 and before 1/1/2024	33				
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
35	Number of days on line 20 after 12/31/2023 and before 3/16/2024	35				
36	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$	\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
38	<b>Penalty.</b> Add columns (a) through (d) of line 37. Enter the to	tal h	ere and on Form 1120, li	ne 34; or the comparable		
	line for other income tax returns				38	\$ 96.

<sup>\*</sup> Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2022)

## Form 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

	and Mechanics	s Savings		Identifying N	
Charitable				85-16	
(A)	(B)	(C) Adjusted	(D) Number Days	(E) Daily	(F)
*Date	Amount	Balance Due	Balance Due	Penalty Rate	Penalty
		-0-			
05/15/22	517.	517.	31	.000109589	
06/15/22	517.	1,034.	15	.000109589	
06/30/22	0.	1,034.	77	.000136986	1
09/15/22	516.	1,550.	15	.000136986	
09/30/22	0.	1,550.	76	.000164384	1
12/15/22	517.	2,067.	16	.000164384	
12/31/22	0.	2,067.	135	.000191781	5
nalty Due (Sum of Colur	nn F).				9

<sup>\*</sup> Date of estimated tax payment, withholding credit date or installment due date.

212511 04-01-22

Form 990-PF Interest on Savi	ings and Tem	porary Cash	1 Investments	Statement 1
Source	(a Reve: Per B	nue Net	(b) Investment Income	(c) Adjusted Net Income
Charles Schwab portfolio Internal Revenue Service Maine Community Bank		1,407. 66. 14.	1,407. 66. 14.	
Total to Part I, line 3		1,487.	1,487.	
Form 990-PF	Legal	Fees		Statement 2
Description	(a) Expenses Per Books	(b) Net Invest ment Incom	-	
Legal Fees	275.		0.	275.
To Fm 990-PF, Pg 1, ln 16a =	275.		0.	275.
Form 990-PF	Accounti	ng Fees		Statement 3
Description	(a) Expenses Per Books	(b) Net Invest ment Incom	<i>3</i>	
Tax Preparation Fees	1,900.	95	50.	950.
To Form 990-PF, Pg 1, ln 16b	1,900.	95	50.	950.
Form 990-PF Other Increases	in Net Ass	ets or Fund	l Balances	Statement 4
Description				Amount
<u>-</u>				
Checks written in 2022, clear	ed in 2023			15,000.

			01-11		
Form 990-PF U.S. and St	ate/City Gov	vernment 			ement !
Description	U.S. Gov't	Other Gov't	Book Value		Market alue
US Treasury Bills	X		246,05	58 <b>.</b>	246,058
Total U.S. Government Obligati	ons		246,05	58 <b>.</b>	246,058
Total State and Municipal Gove	ernment Oblig	gations			
Total to Form 990-PF, Part II,	line 10a		246,05	58.	246,058
Form 990-PF Part VII - I	ist of Officand Foundat:			State	ement (
Name and Address		e and Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
Betsy Boudreau P.O. Box 400 Auburn, ME 04212-0400	Board 1		0.	0.	0
Terri Cook P.O. Box 400 Auburn, ME 04212-0400	Board 1.0		0.	0.	0
Alan Hahnel P.O. Box 400 Auburn, ME 04212-0400	Board 1.0		0.	0.	0
Keith Jacques P.O. Box 400 Auburn, ME 04212-0400	Board 1.0		& Vice Chair		0
Amy Landry P.O. Box 400 Auburn, ME 04212-0400	Chair 8	& Board 00	Memeber 0.	0.	0
Raymond Martel P.O. Box 400 Auburn, ME 04212-0400	Board 1.0		0.	0.	0
Debra Roy P.O. Box 400 Auburn, ME 04212-0400	Board 1.0		0.	0.	0

Biddeford and Mechanics Savings Charitab			85-1674412	
Wayne Sherman P.O. Box 400 Auburn, ME 04212-0400	Board Member 1.00	0.	0.	0.
Sandy Dolby P.O. Box 400 Auburn, ME 04212-0400	Board Member 1.00	0.	0.	0.
Jeanne Hulit P.O. Box 400 Auburn, ME 04212-0400	President & Board 1.00	Member 0.	0.	0.
Carri Brown P.O. Box 400 Auburn, ME 04212-0400	Treasurer 1.00	0.	0.	0.
Suzanne Carney P.O. Box 400 Auburn, ME 04212-0400	Secretary 1.00	0.	0.	0.
Jon Oxman P.O. Box 400 Auburn, ME 04212-0400	Board Member 1.00	0.	0.	0.
Totals included on 990-PF, Page	ge 6, Part VII	0.	0.	0.

Form 990-PF

Grant Application Submission Information Part XIV, Lines 2a through 2d

Statement

7

Name and Address of Person to Whom Applications Should be Submitted

Carri Brown, Treasurer P.O. Box 400 Auburn, ME 04212-0400

Telephone Number

(207) 791-1248

#### Form and Content of Applications

Potential recipient organizations will be identified and examined by the Board of Directors of the Foundation. The Foundation may require written grant proposals from each potential grant recipient. If the Foundation does require a written grant proposal, the grant proposal will specify the purposes for which the grant will be used, the organization's willingness and commitment to abide by any terms applicable to the grant and will document the organization's exempt status. After receipt of the grant funds, the grant recipient may be required to report annually, and submit a final written report, concerning its use of grant funds. The grant proposals may specify the Foundation's right to withhold and/or recover grant funds in case such funds are, or appear to be, misused. Organizations may also submit direct grant-requests to the Foundation online at https://www.mechanicssavings.com/community/

Any Submission Deadlines

None

#### Restrictions and Limitations on Awards

All recipient organizations are required to be Section 501(c)(3) organizations. The Foundation places particular emphasis on Maine-based organizations operating in Androscoggin, Cumberland, and York Counties, and intends to make grants to such organizations for the purposes of developing and improving local communities. Without limitation, the Foundation anticipates making grants to support public education, community recreational activities and facilities, local library services and services benefitting poor and underprivileged populations. The Foundation will restrict the use of any grants made to a grantee organization to further the charitable purpose of the Foundation. All grants will be subject to periodic reports from the grantee organization to the Foundation detailing the manner in which granted funds have been expended.