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# FORM 990-PF

# **Tax Return Carryovers to 2024**

Disallowing Form	HER CHARITABLE FOUNDATION	Originating Form	Entity/ Activity	Number St/ City	
Form	Description	Form	Activity	City	Amount
90-PF	EXCESS DISTRIBUTIONS	990-PF			1,313,564
			1		
			1		
			AL.		
		1,5	) -		
		05			
	R	3			
	PO.				
	MATIO				
	, to h	_			
	+ Or				



March 19, 2024

Mr. Owen Wells Fisher Charitable Foundation P.O. Box 17513 Portland, ME 04112

Dear Attorney Wells:

Enclosed are the original and one copy of the 2023 Exempt Organization return and 2024 estimated tax worksheet, as follows...

2023 Form 990-PF

2024 Federal Estimated Tax Worksheet - Form 990-PF

The attached PDF copies are required to be retained for the Organization to be compliant with the document retention requirements established by the Internal Revenue Service (IRS). Please have an officer sign and then retain them for your records. We recommend that you retain all pertinent tax records for a period of at least three years as taxing agencies possess the authority to request these supporting documents.

Upon receipt of the signed Form 8879, we will immediately electronically file the return(s) with the IRS.

If your return contains Schedule B, *Schedule of Contributors*, please note that public inspection copy of Form 990 containing redacted version of Schedule B is the only version which should be provided to any requesting third party or the general public.

Please call us at any time should you have any questions relating to your tax situation, business, financial or estate planning or any other financial matters. As a part of your advisory team, we will be happy to assist you.

Tax or Professional advice contained in or accompanying this document, unless otherwise specifically stated, is not intended or written to be used, and cannot be used, for the purpose of (I) avoiding penalties under the Internal Revenue code, or (II) promoting, marketing, or recommending to another party any transaction or matter that is contained in or accompanying this document. In addition, unless otherwise specifically stated, any advice provided shall not be deemed a formal tax opinion upon which the addressee can rely.

We sincerely appreciate the opportunity to serve you. If you have any questions regarding the returns, please do not hesitate to call.

Very truly yours,

Kirk J Purvis Marcum LLP

# 2024 ESTIMATED TAX FILING INSTRUCTIONS

FORM 990-W

#### FOR THE YEAR ENDING

December 31, 2024

## **Prepared For:**

Mr. Owen Wells Fisher Charitable Foundation P.O. Box 17513 Portland, ME 04112

# Prepared By:

Marcum LLP 1 Canal Plaza, 4th Floor Portland, ME 04101

#### **Amount of Tax:**

Total Estimated Tax	\$ 4,000
Less credit from prior year	\$ (,) 0
Less amount already paid on 2024 Estimate	\$ 0
Balance Due	\$ 4,000

Payable in full or in installments as follows:

Voucher	Amount	0	Due Date
No 1	\$	1,000	May 15, 2024
No 2	\$ 7,	1,000	June 17, 2024
No 3	\$ 967	1,000	September 16, 2024
No 4	\$ .(0)	1,000	December 16, 2024

# Make Check Payable To:

Payments should be made using the Electronic Federal Tax Payment System (EFTPS).

# Mail Voucher and Check (if applicable) To:

Not applicable

Special Instructions:

# TAX RETURN FILING INSTRUCTIONS

**FORM 990-PF** 

#### FOR THE YEAR ENDING

December 31, 2023

#### **Prepared For:**

Mr. Owen Wells Fisher Charitable Foundation P.O. Box 17513 Portland, ME 04112

### Prepared By:

Marcum LLP 1 Canal Plaza, 4th Floor Portland, ME 04101

#### **Amount Due or Refund:**

Balance due of \$324

## Make Check Payable To:

Payments should be made using the Electronic Federal Tax Payment System (EFTPS).

# Mail Tax Return and Check (if applicable) To:

Not applicable

#### Return Must be Mailed On or Before:

Not applicable

#### **Special Instructions:**

This return has qualified for electronic filing. After you have reviewed the return for completeness and accuracy, please sign, date and return Form 8879-TE to our office. We will transmit the return electronically to the IRS and no further action is required. Return Form 8879-TE to us by May 15, 2024

Please note that the Form 990-PF return contains excess distribution carryover of \$1,313,564. This may be applied to tax year 2024 and subsequent years.

THE "FOR INFORMATIONAL PURPOSES ONLY" COPY SHOULD ALSO BE SIGNED, DATED AND UPLOADED TO THIS LINK: HTTPS://APPENGINE.EGOV.COM/APPS/ME/PRIVATEFOUNDATIONFILING

If your tax return(s) are being electronically filed, we cannot release them until we have your signed authorization(s). After reviewing your return(s) for accuracy and completeness, please sign and email your authorization(s) to <a href="mailto:8879tax@marcumllp.com">8879tax@marcumllp.com</a> or fax to (212) 485-5514.

Form 8879-TF

# IRS E-file Signature Authorization for a Tax Exempt Entity

or calendar year 2023, or fiscal year beginning	, 2023, and ending
or calendar year 2023, or liscal year beginning	, 2023, and ending

OMB No. 1545-0047

Do not send to the IRS. Keep for your records. Department of the Treasury Go to www.irs.gov/Form8879TE for the latest information. Internal Revenue Service Name of filer EIN or SSN 01-0512082 FISHER CHARITABLE FOUNDATION OWEN W. WELLS Name and title of officer or person subject to tax TRUSTEE Type of Return and Return Information Part I 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. **b Total revenue,** if any (Form 990, Part VIII, column (A), line 12) \_\_\_\_\_\_ **1b** Form 990 check here ..... 1a **b Total revenue,** if any (Form 990-EZ, line 9) 2a Form 990-EZ check here Form 1120-POL check here b Total tax (Form 1120-POL, line 22) 3a **b Tax based on investment income** (Form 990-PF, Part V, line 5) 4a Form 990-PF check here 
 b Balance due (Form 8868, line 3c)
 5b

 b Total tax (Form 990-T, Part III, line 4)
 6b
 Form 8868 check here ...... 5a Form 990-T check here ..... 6a b Total tax (Form 4720, Part III, line 1) 7a Form 4720 check here ..... 7b b FMV of assets at end of tax year (Form 5227, Item D) Form 5227 check here ..... 8a b Tax due (Form 5330, Part II, line 19) Form 5330 check here ..... 9a b Amount of credit payment requested (Form 8038-CP, Part III, line 22) Form 8038-CP check here 10a Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that X I am an officer of the above entity or lam a person subject to tax with respect to (name \_ , (EIN) and that I have examined a copy of the 2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERQ) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only X I authorize MARCUM LLP 98765 to enter my PIN Enter five numbers, but ERO firm name do not enter all zeros as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit electronic filing identification 01198304101 number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. 03/19/24 ERO's signature Date

**ERO Must Retain This Form - See Instructions** Do Not Submit This Form to the IRS Unless Requested To Do So

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2023)

Form **990-W** (Worksheet)

# **Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations**

(and on Investment Income for Private Foundations) FORM 990-PF

2024

	► Keep for your	reco	ords. Do not send to	the Internal Revenue	Service.		
1	Unrelated business taxable income expected in the tax year	r				1	
2	Tax on the amount on line 1					2	
3	Alternative minimum tax for trusts					3	
4	Total. Add lines 2 and 3					4	
5	Estimated tax credits					5	
6	Subtract line 5 from line 4				4	6	
7						7	
8	Total. Add lines 6 and 7			(	2/2	8	
9	Credit for federal tax paid on fuels			2/2		9	
	Subtract line 9 from line 8. Note: If less than \$500, the organization does not need to make estimated tax payments  b Enter the tax shown on the 2023 return. Caution: If						
	zero or the tax year was for less than 12 months, skip this and enter the amount from line 10a on line 10c		, Q	10b	3,924.		
C	<b>2024 Estimated Tax.</b> Enter the smaller of line 10a or line 1 from line 10a on line 10c			red to skip line 10b, enter ADJUST1		10c	4,000.
			(a)	(b)	(c)		(d)
11	Installment due dates	11	05/15/24	06/17/24	09/16/24		12/16/24
12	Installments. Enter 25% of line 10c in columns (a) through (d)	12	1,000.	1,000.	1,0	00.	1,000.
13	2023 Overpayment	13					
14	Payment due (Subtract line 13 from line 12)	14	1,000.	1,000.	1,0	00.	1,000. Form <b>990-W</b>
	V						Form 330-44

# 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

2023

Open to Public Inspection

For cale	endar year 2023 or tax year beginning		, and ending				
Name	of foundation			A Employer identification number			
	SHER CHARITABLE FOUNDATION	01-0512082					
	and street (or P.O. box number if mail is not delivered to street a	B Telephone number 207-253-15	6.9				
	town, state or province, country, and ZIP or foreign p	netal code		C If exemption application is p			
	RTLAND, ME 04112	ostal couc		i exemption application is p	ending, check here		
<b>G</b> Che	ck all that apply: Initial return	Initial return of a fo	ormer public charity	<b>D</b> 1. Foreign organizations	s, check here		
	Final return	Amended return		2. Foreign organizations me	eeting the 85% test.		
	Address change	Name change		2. Foreign organizations me check here and attach co			
	ck type of organization: X Section 501(c)(3) ex Section 4947(a)(1) nonexempt charitable trust		ation	E If private foundation sta under section 507(b)(1)			
		ng method: X Cash	Accrual	F If the foundation is in a			
	·	ther (specify)	71001 dai	under section 507(b)(1)			
\$	6,759,659. (Part I, colun	nn (d), must be on cash basi	is.)	1			
Part	Analysis of Revenue and Expenses (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) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
1	, 9, 9,,,		C	N/A			
2	Check X if the foundation is not required to attach Sch. B Interest on savings and temporary			7			
3	cash investments	2.	2.		STATEMENT 2		
4	Dividende dire interest i en escaritio	109,593.	109,593.		STATEMENT 3		
	a Gross rents b Net rental income or (loss)		· 6×				
		368,595.	V),		STATEMENT 1		
Jue	a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 601,027.		<b>X</b>				
Revenue 2			232,432.				
8 <u>۳</u>	Net short-term capital gain	7h					
9	Gross sales less returns						
10	a and allowances						
	b Less: Cost of goods sold C Gross profit or (loss)						
11		3,254.	0.		STATEMENT 4		
12		481,444.	342,027.				
13		90,000.	22,500.		67,500.		
14							
15		2.65			0.50		
<u>S</u> 16	a Legal fees STMT 5 b Accounting fees STMT 6	365.	92.		273.		
Ξ1	3	3,310. 44,307.	827. 33,807.		2,483. 10,500.		
		44,507.	33,007.		10,500.		
Administrative 15 0 16 0 17 0 18 0 19 0 19 0 19 0 19 0 19 0 19 0 19							
19 19							
		5,000.	1,250.		3,750.		
- 1	, , , , , , , , , , , , , , , , , , , ,	514.	128.		386.		
9 22 au		796.	200.		596.		
B 23		3,586.	899.		2,687.		
Operating and	Total operating and administrative expenses. Add lines 13 through 23	147,878.	59,703.		88,175.		
Ö 25		483,350.	35,103.		483,350.		
	Total expenses and disbursements.						
	Add lines 24 and 25	631,228.	59,703.		571,525.		
27	Subtract line 26 from line 12:						
	<b>a</b> Excess of revenue over expenses and disbursements	-149,784.	000 004				
	b Net investment income (if negative, enter -0-)		282,324.	N/A			
- 1	c Adjusted net income (if negative, enter -0-)			1 IN / A			

LHA For Paperwork Reduction Act Notice, see instructions.

323501 12-20-23

Form **990-PF** (2023)

Page 2

P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	·
		column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	102,524.	182,981.	182,981.
		Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	l '	Less: allowance for doubtful accounts			
"	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ass		Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 9	1,336,288.	1,249,209.	4,884,642.
			1,330,200	1,245,205.	4,004,042.
		Investments - corporate bonds			
	I	Investments - land, buildings, and equipment: basis		O. H.	
	4.0	Less: accumulated depreciation		0.	
	12	Investments - mortgage loans	1 200 046	1,255,793.	1,692,036.
		Investments - other STMT 10	1,390,040	1,255,795.	1,092,030.
	14	Land, buildings, and equipment: basis	2		
	l	Less: accumulated depreciation	20		
		Other assets (describe)	2 <sup>X</sup>		
	16	Total assets (to be completed by all filers - see the	2 226 250	0 607 000	C 750 C50
_		instructions. Also, see page 1, item I)	2,836,858.	2,687,983.	6,759,659.
	l	Accounts payable and accrued expenses			
		Grants payable		+	
es		Deferred revenue	7,	+	
Liabilities		Loans from officers, directors, trustees, and other disqualified persons		+	
<u>ia</u> k		Mortgages and other notes payable		+	
_	22	Other liabilities (describe			
		Total Park PPP or (add Park 47 through 00)	0	0.	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
es		and complete lines 24, 25, 29, and 30.			
anc	24	Net assets without donor restrictions			
or Fund Balance	25	Net assets with donor restrictions			
pq		Foundations that do not follow FASB ASC 958, check here			
H		and complete lines 26 through 30.	0	_	
	I	Capital stock, trust principal, or current funds	0.	0.	
sets	l	Paid-in or capital surplus, or land, bldg., and equipment fund	2,836,858.	* '	
Ass	28	Retained earnings, accumulated income, endowment, or other funds	2,836,858.	2,687,983.	
Net Assets	29	Total net assets or fund balances	4,030,030.	4,001,903.	
_	20	Total lightities and not assets/found halaness	2,836,858.	2,687,983.	
=		Total liabilities and net assets/fund balances		2,001,903.	
P	art	Analysis of Changes in Net Assets or Fund Ba	ances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 2	9		
			-	1	2,836,858.
	•	amount from Part I, line 27a			-149,784.
		increases not included in line 2 (itemize) OTHER CHANGES I	N NET ASSETS	3	909.
		ines 1, 2, and 3			2,687,983.
		ases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 29		2,687,983.
					Form <b>990-PF</b> (2023)

Part IV Capital Gains	and Losses for Tax on Inv	vestment Incon	ne					
(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 acquire P - Purchase D - Donation	ed (d	c) Date a (mo., da		(d) Date sold (mo., day, yr.)	
1a PUBLICLY TRADE	D SECURITIES			5 5011411011				
b								
C								
d								
e								
-	(f) Depreciation allowed	(a) Coot or other	r booio			(b) Co	in or (loss)	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or othe plus expense o	of sale		(	((e) plus	(f) minus (	(g))
a 601,027.		36	8,595	•				232,432.
b								
C								
d								
e								
	ng gain in column (h) and owned by t	he foundation on 12/3	1/69.		(1) (	Gains (Co	ol. (h) gain	minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of over col. (j),	col. (i)		còl. (I	k), but n	ot less thar from col. (I	n -0-) <b>or</b>
a								232,432.
b								
C								
d				1.5				
<u>e</u>				<del>\$\frac{1}{2}</del>				
2 Capital gain net income or (net ca	apital loss) $ \begin{cases} & \text{If gain, also enter} \\ & \text{If (loss), enter -0-} \end{cases} $		R	2				232,432.
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and	d (6).	(K-, )					
	column (c). See instructions. If (loss		)					
Part I, line 8				ʃ   3			N/A	
Part V   Excise Tax Bas	sed on Investment Incom	e (Section 4940	(a), 494	0(b), or 49	48 - s	ee ins	truction	ns)
1a Exempt operating foundations	described in section 4940(d)(2), chec	k here and	d enter "N/A	on line 1.	)			
Date of ruling or determination	, , , , ,				3)	1		3,924.
•	enter 1.39% (0.0139) of line 27b. Exe		-		´ }			·
	. (b)							
2 Tay under section 511 (domest	tic section 4947(a)(1) trusts and taxal	hle foundations only: c	thers enter	r -N-)		2		0.
		bio iodiidationo omy, c		0 /		3		3,924.
						4		0.
	<ul> <li>Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)</li> <li>Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-</li> </ul>					5		3,924.
	ine. Subtract line 4 from line 5. if zer	0 01 1655, 611(61 -0				3		3,724.
6 Credits/Payments:	1 0000		I	2 (	500			
	and 2022 overpayment credited to 202		-	٥, ١	500.	- 1		
	tax withheld at source		-		0.			
c Tax paid with application for extension of time to file (Form 8868) 6c 0 •								
	ly withheld				0.			2 600
	d lines 6a through 6d					7		3,600.
8 Enter any <b>penalty</b> for underpay	/ment of estimated tax. Check here 📙	if Form 2220 is a	ttached			8		0.
	and 8 is more than line 7, enter <b>amo</b> u					9		324.
10 Overpayment. If line 7 is more	than the total of lines 5 and 8, enter	the amount overpaid				10		
11 Enter the amount of line 10 to l	be: Credited to 2024 estimated tax			Ref	unded	11		

Form **990-PF** (2023)

	THE VI A CHARLES HOSTINGS HOSTINGS		2.0	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ (2) On foundation managers. \$			
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
Ī	managers. \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х
_	If "Yes," attach a detailed description of the activities.			
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
U	and the second of the second o	3		х
4.		4a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		x
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		77	
	remain in the governing instrument?	6	X	<u> </u>
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	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	ME O			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9				
	year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII	9		X
	Did any persons become substantial contributors during the tax year? h."Yes," attach a schedule listing their names and addresses	10		Х
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			1
	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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address N/A			
14	The books are in care of <b>JENNIFER COOK</b> Telephone no. 207-25	3-1	568	
	Located at PO BOX 17513, PORTLAND, ME ZIP+4 04			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041 -</b> check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2023, 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	(2023)
				. ,

323531 12-20-23

Tart 11 B   Ctatemente Hegaramy / Ctatatae For Which Form 1125 May Be Hegaried			
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)		X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person?	1a(2)		X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	X	
(5) Transfer any income or assets to a disqualified person (or make any of either available			
for the benefit or use of a disqualified person)?	1a(5)		X
(6) Agree to pay money or property to a government official? (Exception. Check "No"			
if the foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days.)	1a(6)		X
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	1b		X
c Organizations relying on a current notice regarding disaster assistance, check here			
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
before the first day of the tax year beginning in 2023?	1d		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
defined in section 4942(j)(3) or 4942(j)(5)):			
a At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines			
6d and 6e) for tax year(s) beginning before 2023?	2a		X
If "Yes," list the years			
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
statement - see instructions.) N/A	2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
during the year?	3a		X
b If "Yes," did it have excess business holdings in 2023 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 2023.)  N/A	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
had not been removed from jeopardy before the first day of the tax year beginning in 2023?	4b		X
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Form 990-PF (2023) FISHER CHARITABLE FOUNDATE Part VI-B   Statements Regarding Activities for Which Fo			01-0512	082	I	Page 6
5a During the year, did the foundation pay or incur any amount to:	onn 4720 May Be n	equired (continu	uea)		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e)) <b>?</b>			5a(1)		X
(2) Influence the outcome of any specific public election (see section 4955); or				04(1)		
any voter registration drive?				5a(2)		Х
(3) Provide a grant to an individual for travel, study, or other similar purposes?	)			5a(3)		X
(4) Provide a grant to an organization other than a charitable, etc., organization				\ \ \ \ \ \ \		
4945(d)(4)(A)? See instructions				5a(4)		X
(5) Provide for any purpose other than religious, charitable, scientific, literary,						
the prevention of cruelty to children or animals?				5a(5)		X
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und		-				
section 53.4945 or in a current notice regarding disaster assistance? See instructions N/A						
c Organizations relying on a current notice regarding disaster assistance, check h						
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from			/-			
expenditure responsibility for the grant?			N/A	5d		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).						
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to p	* '					77
a personal benefit contract?				6a		X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a po	ersonal benefit contract?			6b		X
If "Yes" to 6b, file Form 8870.		OLIV.		7.		v
7a At any time during the tax year, was the foundation a party to a prohibited tax sl				7a		<u> X</u>
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribut			IN / .A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$				8		Х
excess parachute payment(s) during the year?  Part VII Information About Officers, Directors, Truste	es Foundation Mar	nagers Highly		0		Λ
Paid Employees, and Contractors	cs, i candation ivial	iagers, riiginy				
1 List all officers, directors, trustees, and foundation managers and th	eir compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit pla and deferred	i0	<b>(e)</b> Exp	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	" a	ccount, allowai	other nces
		5		$\top$		
SEE STATEMENT 11	,	90,000.	0			0.
2,						
\(\rightarrow\)						
16.						
2						
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	(al) a			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit pla	ns a	(e) Exp ccount,	ense other
	hours per week devoted to position	(b) compensation	and deferred compensation		allowai	
NONE						
				$\bot$		
				+		
				+		
				+		
				一		
<b>Total</b> number of other employees paid over \$50,000				1		0

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Part VII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, en	ter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant st number of organizations and other beneficiaries served, conferences convened, research papers p	atistical information such as the roduced, etc.	Expenses
1 NONE		
	<u> </u>	0.
2	4,5	
	-S <sup>V</sup>	
3		
	2-	
4		
Part VIII-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year 1 NONE	on lines 1 and 2.	Amount
INONE		
		0.
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
		Form <b>990-PF</b> (2023)

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P	Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign fo	undations,	, 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	6,166,001.
	Average of monthly cash balances	1b	114,044.
	Fair market value of all other assets (see instructions)	1c	
	Total (add lines 1a, b, and c)	1d	6,280,045.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) <u>1e</u> 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	6,280,045.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	94,201.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	6,185,844.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	309,292.
P	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	309,292.
2a	Tax on investment income for 2023 from Part V, line 5 2a 3,924.		
b			
С		2c	3,924.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	305,368.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	305,368.
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	305,368.
P	Part XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	571,525.
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	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	571,525.
	()		Form <b>990-PF</b> (2023)

FISHER CHARITABLE FOUNDATION

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# Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1 Distributable amount for 2023 from Part X,				
line 7				305,368.
2 Undistributed income, if any, as of the end of 2023:				
<b>a</b> Enter amount for 2022 only			0.	
<b>b</b> Total for prior years:		0.		
<b>3</b> Excess distributions carryover, if any, to 2023:		0.		
a From 2018 287,245.				
<b>b</b> From 2019 352,739.				
c From 2020 245,803.				
d From 2021 194,183.				
e From 2022 254,682.				
f Total of lines 3a through e	1,334,652.		1	
4 Qualifying distributions for 2023 from			1	
Part XI, line 4: \$571,525.			7/	
<b>a</b> Applied to 2022, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior			C	
years (Election required - see instructions)		0 🗸	7.3	
<b>c</b> Treated as distributions out of corpus		S		
(Election required - see instructions)	0.	_0~		
<b>d</b> Applied to 2023 distributable amount				305,368.
e Remaining amount distributed out of corpus	266,157.	16-		
5 Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.	80		0.
6 Enter the net total of each column as indicated below:	4	P		
O Commune Andrelliness Of the send to Continue titles 5	1,600,809.			
<b>b</b> Prior years' undistributed income. Subtract	1,000,003.			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of	2/2			
deficiency has been issued, or on which	OX			
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable	7,			
amount - see instructions		0.		
e Undistributed income for 2022. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2023. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2024				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)	0.			
8 Excess distributions carryover from 2018				
not applied on line 5 or line 7	287,245.			
9 Excess distributions carryover to 2024.				
Subtract lines 7 and 8 from line 6a	1,313,564.			
10 Analysis of line 9:				
a Excess from 2019 352,739.				
<b>b</b> Excess from 2020 245,803.				
c Excess from 2021 194,183.				
d Excess from 2022 254,682.				
e Excess from 2023 266,157.				

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Part XIII Private Operating F	oundations (see ins	structions and Part V	I-A, question 9)	N/A	· ·
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2023, enter the date of the	he 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) 2023	(b) 2022	(c) 2021	(d) 2020	(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					
d 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				1	
alternative test relied upon:					
a "Assets" alternative test - enter:				47	
(1) Value of all assets			(		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			1,5		
<b>b</b> "Endowment" alternative test - enter			6		
2/3 of minimum investment return shown in Part IX, line 6, for each year listed			000		
c "Support" alternative test - enter:			12		
(1) Total support other than gross			0,		
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public		Ole,			
and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from	Ob.				
an exempt organization					
(4) Gross investment income  Part XIV Supplementary Info	rmation/Complet	to this part only	if the foundation	 	o in accets
at any time during t			ii tile loulluation	11au \$5,000 01 11101	e iii assets
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	no have contributed more t	han 2% of the total con	tributions received by the	foundation before the clos	e of any tax
year (but only if they have contributed r	nore than \$5,000). (See se	ection 507(a)(2).)			
NONE					
<b>b</b> List any managers of the foundation wh			(or an equally large portion	on of the ownership of a pa	rtnership or
other entity) of which the foundation ha	s a 10% or greater interest	t.			
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., P	rograms:		
Check here if the foundatio the foundation makes gifts, grants, etc.,	n only makes contributions	•	•	•	quests for funds. If
a The name, address, and telephone num	<u> </u>				
SEE STATEMENT 12					
<b>b</b> The form in which applications should be	e submitted and informati	ion and materials they s	should include:		
c Any submission deadlines:					
<b>d</b> Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields	, kinds of institutions, or	other factors:	

Supplementary information	,			1
3 Grants and Contributions Paid During the Ye		Payment		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
-	or substantial contributor	recipient		
a Paid during the year				
317 MAIN COMMUNITY MUSIC CENTER 317 MAIN STREET YARMOUTH, ME 04096		PUBLIC	GENERAL OPERATING SUPPORT	5,000.
ABBE MUSEUM P.O. BOX 286		PUBLIC	GENERAL OPERATING SUPPORT	
BAR HARBOR, ME 04609			COMIT	5,000.
AMERICAN RED CROSS OF MAINE 2401 CONGRESS STREET PORTLAND, ME 04102		PUBLIC	FACILITY UPGRADES	5,000.
ATLANTIC CHALLENGE FOUNDATION DBA THE APPRENTICESHOP 655 MAIN STREET ROCKLAND, ME 04841		POBLIC	GENERAL OPERATING SUPPORT	2,500.
AVESTA HOUSING DEVELOPMENT CORPORATION 307 CUMBERLAND AVENUE PORTLAND, ME 04101	RNATIONAL	PUBLIC	HOMES AND SUPPORT SERVICES FOR RECENT IMMIGRANTS	15,000.
	TINUATION SHEE	т(S)	3:	
b Approved for future payment  NONE				
Total	<u> </u>	1	31	b 0.
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#### Part XV-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
•	(a) Business	<b>(b)</b> Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Ainount	Tuticuon income
a			-		
b					
<u> </u>					
<u> </u>					
e					
g Fees and contracts from government agencies					
g Fees and contracts from government agencies  2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	2.	
4 Dividends and interest from securities			14	109,593.	
5 Net rental income or (loss) from real estate:				1	
a Debt-financed property				7	
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			5		
than inventory			18	368,595.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a 2022 TAX REFUND		X		3,254.	
b					
c		4			
d		)`			
e				101 111	
12 Subtotal. Add columns (b), (d), and (e)	"D.	0.		481,444.	0.
13 Total. Add line 12, columns (b), (d), and (e)	$\mathcal{A}_{II}$			13	481,444.
(See worksheet in line 13 instructions to verify calculations.)					

Relationship of Activities to the Accomplishment of Exempt Purposes Part XV-B

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).
	the foundation's exempt purposes (other than by providing funds for Such purposes).
	.0`

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#### FISHER CHARITABLE FOUNDATION Information Regarding Transfers to and Transactions and Relationships With Noncharitable Part XVI **Exempt Organizations**

(other than section 501(x)3) regardations) or in section 527, relating to political organizations?  (1) Cash (2) Other assets  5 Other transactions  (3) Select assets to a montharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Relati of localities, equipment, or other assets  (4) Perinthal content arrangements  (3) Select of sections, equipment, or other assets  (4) Perinthal content arrangements  (3) Select of sections, equipment, or other assets  (4) Perinthal content arrangements  (5) Loans or loan quadraties  (6) Perinthal content arrangements  (7) Select and or of the above 17 (e.g., complete the following schedule. Column (g) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or stanting arrangement, show in column (g) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or stanting arrangement, show in column (g) the value of the goods, other assets, or services with the reporting foundation in the foundation received less than fair market value in any transaction or stanting arrangement, show in column (g) the value of the goods, other assets, or services received.  (a) Limit no (b) Armount involved (c) Name of noncharitable exempt organization (d) Describing and provides the following schedule.  (a) Name of organization.  (b) Armount involved (c) Stanties of the services of the services of except in the s	1	Did the o	rganization directly or indir	ectly engage in any o	of the followin	g with any other organization	on described in sect	ion 501(c)		Yes	No
(1) Cash (2) Other darsets (3) Sistes of assets from a noncharitable exempt organization (1) Sistes of assets from a noncharitable exempt organization (2) Purchase of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reinhousement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundralsing solicitations (6) Performance of services or membership or fundralsing solicitations (7) If the answer to any of the above is Yes, complete the following schedule. Column (9) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in section (9) Amount involved (1) Amount involved (1) Amount involved (2) Amount involved (3) Amount involved (4) Amount organization (5) Amount involved (6) Amount involved (7) Amount organization (8) Performance or services organization (9) Amount involved (1) Amount organization (1) Description of relationship  N/A  (1) Trye or organization (2) Description of relationship  N/A  Proparer    Preparer   TRUSTEE   Signature of officer or trustee   Preparer   Signature   Date   Signature   Prima Signature		•	, , , , -	•							
2a Is the foundation directly or indirectly affiliated with, for plated to, one or more tax-exempt organization   1 is 2	а		, ,			•					37
b Other transactions:  (1) Sists of assets to a noncharitable exempt organization (2) Purchase of assets from a noncharitable exempt organization (3) Rental of lacilities, equipment, or other assets (4) Reinhausement arrangements (5) Loars or loan guarantees (6) Performance of services or membership or fundrating solicitations (7) Early or the property of the property of fundrating solicitations (8) Performance of services or membership or fundrating solicitations (9) Early or the property of the property of fundrating solicitations (1) It the asset or any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or as exercises given by the reporting foundation. If the foundation received.  (1) Item or (1) The value of the goods, other assets, or savives received.  (2) Item or (1) The value of the goods, other assets, or savives received.  (3) Item or (1) The value of the goods, other assets, or savives received.  (4) Item or (1) The value of the goods, other assets, or savives received.  (5) Item or (1) The value of the goods, other assets, or savives received.  (6) Amount involved (7) Amount involved (8) Amount involved (9) Amount involved (1) The property of the value of the goods, other assets, or savives received.  (a) Item or (1) The property of the value of the goods, other assets, or savives received.  (a) Item or (1) The property involved in the complete of the property of th											
(1) Sales of assets from a noncharitable exempt organization									1a(2)		
(a) Purchases of assets from a nonchariable exempt organization   16(2)   X   16(3)   16(3)   X   16(4)   16(4	D			alo ovomnt organizati	ion				15/1)		y
Sample   Remainder facilities, equipment, or other assets   15(4)   X   15(4)   X   15(5)   Lans or of one guarantees   15(4)   X   15(5)   X   15(6)   X   15(6											_
(4) Reimbursement arrangements (5) Loans or loan parametes (6) Loans or loan parametes (7) Performance of services or memburship or fundrashing solicitations (8) Performance of services or memburship or fundrashing solicitations (8) Performance of services or memburship or fundrashing solicitations (9) Performance of services or services given by the reporting foundation. If the foundation neceived less than fair market value in any transaction or sharing arrangement, show in column (9) the value of the pooks, other assets, or services given by the reporting foundation. If the foundation neceived less than fair market value in any transaction or sharing arrangement, show in column (9) the value of the pooks, other assets, or services received.  (a) Line no (1) Amount linvolved (c) Name of noncharitable exempt organization (d) bescription of relationship arrangements.  2a Is the foundation directly or indirectly affiliated with, or plated to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)											_
(5) Loans or loan guarantees (6) Performance of services or membership or fundrashing solicitations (7) Performance of services or membership or fundrashing solicitations (8) Performance of services or membership or fundrashing solicitations (9) If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services inceived.  (8) Live ros (9) Amount involved (9) Name of noncharitable exempt organization (9) Amount involved (9) Name of noncharitable exempt organization (10) Description directive, transactions, and pharing arrangements. Show in services (10) Performance of services or making arrangements.  10) Amount involved (10) Amount involved (11) Amount involved (12) Name of organization or shaping arrangements. Show in section 501(c) (other than section 501(c)) other shaping arrangements.  11) Amount involved (12) Name of organization organization organizations described in section 501(c) (other than section 501(c)) other shaping arrangements.  12) A live section 501(c) (other than section 501(c)(3)) organization organization organizations described in section 501(c) (other than section 501(c)(3)) organization organizati											_
(6) Performance of services or membership or fundraising solicitations  2 Sharing of facilities, equipment, mailing lists, other assets, or paid employees  3 If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of exemples, bareactions, and sharing arrangements  N/A  2a Is the foundation directly or indirectly affiliated with, or palated to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) only section 52??  (a) Name of organization (b) Type of organization (c) Description of relationship  N/A  1 Ves No  N/A  1 If the foundation directly or indirectly affiliated with, or palated to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) only section 52??  (a) Name of organization (e) Description of relationship  N/A  1 Ves No  N/A  1 Ves No  N/A  2 In the foundation directly or indirectly affiliated with, or palated to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) only section 52??  N/A  1 Ves No  N/A  1 Ves No  N/A  1 Ves No  Signature of officer organization (e) Description of relationship  Firm's serve MARCUM LLP  Print/Type preparer's name  Preparer's signature  Preparer's signature  Date  Firm's serve MARCUM LLP  Firm's serve MARCUM LLP  Firm's address: 1 CANAL PLAZA, 4TH FLOOR  PORTLAND, ME 0 4101  Phone no. (207) 352-7600											_
c Standard of facilities, equipment, mailing lists, other assets, or paid employees  d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received.  (a) Line ro (b) Amount involved (c) Name of noncharitable exempt organization  N/A  2a Is the foundation directly or indirectly affiliated with, for plated to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or fis section 527?  2a Is the foundation directly or indirectly affiliated with, for plated to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or fis section 527?  1 If Yes, "complete the following schedule.  (a) Name or organizations of peripor, I declare that I have exemined this return, including accompanying schedules and statements, and to the beat dirty knowledge.  N/A  1 Under penalties of peripor, I declare that I have exemined this return, including accompanying schedules and statements, and to the beat dirty knowledge.  N/A  1 Under penalties of peripor, I declare that I have exemined this return, including accompanying schedules and statements, and to the beat dirty knowledge.  N/A  1 Under penalties of peripor, I declare that I have exemined this return, including accompanying schedules and statements, and to the beat dirty knowledge.  N/A  1 Under penalties of peripor, I declare that I have exemined this return, including accompanying schedules and statements, and to the beat dirty knowledge.  N/A  1 Under penalties of peripor, I declare that I have exemined this return, including accompanying schedules and statements, and to the beat dirty knowledge.  N/A  N/A  1 Under penalties of peripor, I declare that I have exemined this return, including accompanying schedules and statements, and to the beat dirty knowledge.  N/A  N/A  1 Under penalties of peripor, I declare that I have exemined this return, including accompanying schedules and s									41.40		_
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or shaping arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Line to (b) Amount involved (c) Name of noncharitable exempt organization  N/A	С			•	-						Х
column (d) the value of the goods, other assets, or services received.  (a) Ixen no.  (b) Amount involved  (c) Name of noncharitable exempt organization  (d) Description of relationship  Yes X No  If Yes, complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Under penalties of perux, i declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge.  (a) Name of organization of prepare (other than scapsus) is based on all information of which prepare has any knowledge.  Sign Here  Paid  Paid  Preparer  Uncer penalties of perux, i declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge.  TRUSTEE  TRUSTEE  TRUSTEE  Firm's affects of trustee  Date  AXEK PURVIS  Firm's address 1 CANAL PLAZA, 4TH FLOOR  PORTLAND, ME 04101  Phone no. (207) 352-7600	d	If the ans	swer to any of the above is "	'Yes," complete the fo	ollowing sche					ets,	
(a) Line no. (b) Amount involved (c) Name of noncharitable exempt organization (d) Describing a reasoctions, and sharing arrangements  N/A  2a Is the foundation directly or indirectly affiliated with, for plated to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c) (other tha		or servic	es given by the reporting fo	undation. If the foun	dation receive	ed less than fair market valu	ie in any transaction	or sharing arrang	ement, show in		
N/A  2a Is the foundation directly or indirectly affiliated with, for plated to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c) (other tha		column (						7			
2a Is the foundation directly or indirectly affiliated with, for islated to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) of the section 52??    Yes	(a)∟	ine no.	(b) Amount involved	(c) Name of		exempt organization	(d) Description	n of transfers, transact	tions, and sharing arra	angemen	nts
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes					N/A		+ $ C$	)			
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes							1,6				
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes											
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes							15,				
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes							$\varphi$				
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes						.0.					
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes		+									
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes						~~~					
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes	(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  a Transfers from the reporting foundation to a noncharitable exempt organization of:  (1) Cash  (2) Other assets  b Other transactions:  (1) Sales of assets to an anoncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Reimbursement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundraising solicitations  c Sharing of facilities, equipment, mailing lists, other assets, or paid employees  (6) Performance of services or membership or fundraising solicitations  c Sharing of facilities, equipment, mailing lists, other assets, or paid employees  (6) I the answer to any of the above is 'reys, complete the following schedule. Column (b) should always show the fair market value of the orangement or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or shaing arrangement or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or shaing arrangement (b) Amount involved  (a) Line on  (b) Amount involved  (c) Name of noncharitable exempt organization  (d) Description  N/A     In the service is a section 501(c) (other than section 501(c) (other 501(c) (other 501(c) (other 501(c) (other 501(c) (other 501(c) (other 501(c) (o										
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes	(a) Transfer from the reporting foundation to a noncharitable exempt organization of:  (1) Gash.  (2) Other assets  (3) Other assets  (4) Other assets  (5) Other assets  (6) Performance of assets from a noncharitable exempt organization  (8) Relatal of facilities, equipment, or other assets  (9) Performance of services or membership or fundasing solicitations  (5) Loars or loan guarantees  (6) Performance of services or membership or fundasing solicitations  (5) Sharing of facilities, equipment, aniling lists, other assets, or paid employees  (6) If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, or services growing by the reporting foundation. If the down does stan fair market value in any transaction or sharing arrangement, should not be standed to the goods. Other assets, or services received.  (a) Live ro  (b) Amount involved  (c) Name of noncharitable exempt organization  (d) Describing arrangement, should not be serviced in section 501(c)) (other than se										
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes						0					
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes											
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes					. D.						
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes					$\sigma_{U_1}$						
in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes					27.						
Sign Here    Variable   Variable	2a										_
(a) Name of organization (b) Type of organization (c) Description of relationship  N/A					ction 527?				Yes	X	No
N/A  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.    TRUSTEE	<u>b</u>	If "Yes," (				[ n =	1	( ) 5			
Sign Here    Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.   TRUSTEE			. , ,	anization		(b) Type of organization		(c) Description of	relationship		
And belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.    TRUSTEE   Signature of officer or trustee   Date   Title			N/A	. <u>O</u> .							
And belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.    TRUSTEE   Signature of officer or trustee   Date   Title			X	·			1				
And belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.    TRUSTEE   Signature of officer or trustee   Date   Title											
And belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.    TRUSTEE   Signature of officer or trustee   Date   Title											
TRUSTEE   Signature of officer or trustee   Date   Title						. , ,		, ,	May the IRS	licouse t	hie
Paid Preparer Use Only  Firm's address 1 CANAL PLAZA, 4TH FLOOR PORTLAND, ME 04101  Print/Type preparer Signature	Si	gn	belief, it is true, correct, and con	nplete. Declaration of pre	eparer (other that	n taxpayer) is based on all inform	nation of which preparer	has any knowledge.	return with the	e prepare	er
Paid Preparer Use Only Firm's address 1 CANAL PLAZA, 4TH FLOOR PORTLAND, ME 04101  Preparer's signature  Date  Check if self- employed  PO 0439837  Po 03/19/24  Firm's EIN 11-1986323  Phone no. (207) 352-7600	He	ere					TRUSTEE				_
Paid Preparer Use Only         KIRK PURVIS         03/19/24         P00439837           Firm's name         MARCUM LLP         Firm's EIN 11-1986323           Firm's address         1 CANAL PLAZA, 4TH FLOOR PORTLAND, ME 04101         Phone no. (207) 352-7600		Sig	nature of officer or trustee			Date	Title				
Paid Preparer Use Only         KIRK PURVIS         03/19/24         P00439837           Firm's name         MARCUM LLP         Firm's EIN         11-1986323           Firm's address         1 CANAL PLAZA, 4TH FLOOR PORTLAND, ME 04101         Phone no. (207) 352-7600			Print/Type preparer's nai	me	Preparer's si	gnature	Date		PTIN		
Preparer Use Only         Firm's name         MARCUM LLP         Firm's EIN         11-1986323           Firm's address         1 CANAL PLAZA, 4TH FLOOR PORTLAND, ME 04101         Phone no. (207) 352-7600	_							self- employed			
Use Only   Firm's address   1 CANAL PLAZA, 4TH FLOOR   Phone no. (207)   352-7600							03/19/24				
Firm's address 1 CANAL PLAZA, 4TH FLOOR PORTLAND, ME 04101 Phone no. (207) 352-7600		-		UM LLP				Firm's EIN 1	1-198632	3	
PORTLAND, ME 04101 Phone no. (207) 352-7600	US	e Uniy			A	TT OOD					
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Supplementary Information Part XIV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor BANGOR SYMPHONY ORCHESTRA PUBLIC GENERAL OPERATING P.O. BOX 1441 SUPPORT BANGOR, ME 04402-1441 5,000. BAY CHAMBER CONCERTS PUBLIC GENERAL OPERATING P.O. BOX 599 SUPPORT ROCKPORT, ME 04856 2,000. BELFAST SOUP KITCHEN PUBLIC NEW BUILDING P.O. BOX 1153 CONSTRUCTION BELFAST, ME 04915 5,000. CANCER CENTER ANNEX BETH C. WRIGHT CANCER RESOURCE CENTER PUBLIC P.O. BOX 322 ELLSWORTH, ME 04605 5,000. PUBLIC BIG BROTHERS BIG SISTERS OF MID-MAINE GENERAL OPERATING JR INTERNATIONAL SERVICE SERVI 66 ELM STREET, SUITE 100 SUPPORT CAMDEN, ME 04843 5,000. BIG BROTHERS BIG SISTERS OF SOUTHERN PUBLIC GENERAL OPERATING MATNE SUPPORT 625 MAIN STREET WESTBROOK, ME 04092 5,000. CAMP ANGELS, INC. PUBLIC DIABETES SUMMER CAMPS P.O. BOX 89 WATERFORD, ME 04088 5,000. CARPENTER'S BOAT SHOP PUBLIC TUITION-FREE 440 OLD COUNTY ROAD APPRENTICESHIP PEMAQUID, ME 04558 SESSIONS 2,500. CENTER FOR GRIEVING CHILDREN PUBLIC BEREAVEMENT SERVICES 555 FOREST AVENUE FOR CHILDREN, TEENS, PORTLAND, ME 04101 AND FAMILIES 5,000. CHILDREN'S MUSEUM & THEATRE OF MAINE PUBLIC GENERAL OPERATING PO BOX 4041 SUPPORT PORTLAND, ME 04101 2,500. 450,850. Total from continuation sheets

Supplementary Information Part XIV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor COBSCOOK COMMUNITY LEARNING CENTER PUBLIC RURAL EXPERIENTIAL FBO COBSCOOK INSTITUTE ARTS EDUCATION 10 COMMISSARY POINT ROAD PARTNERSHIP WITH TRESCOTT, ME 04652 schools 3,000. COMMUNITY CONCEPTS PUBLIC GENERAL OPERATING 240 BATES STREET SUPPORT LEWISTON, ME 04240 10,000. COMMUNITY DENTAL PUBLIC GENERAL OPERATING 190 PARK AVENUE SUPPORT PORTLAND, ME 04102 10,000. DEMPSEY CENTER PUBLIC SENERAL OPERATING 778 MAIN STREET SUPPORT SOUTH PORTLAND, ME 04106 5,000. PUBLIC DOWNEAST COMMUNITY PARTNERS GENERAL OPERATING INFORMATIONAL TOTAL 248 BUCKSPORT ROAD SUPPORT ELLSWORTH, ME 04605 15,000. ELDER ABUSE INSTITUTE OF MAINE PUBLIC GENERAL OPERATING 135 MAIN STREET, SUITE A #152 SUPPORT BRUNSWICK, ME 04011 2,500. FARNSWORTH ART MUSEUM PUBLIC GENERAL OPERATING 16 MUSEUM STREET SUPPORT ROCKLAND, ME 04841 5,000. FIDELCO GUIDE DOG FOUNDATION PUBLIC GUIDE DOG PARTNERSHIP PROGRAM IN MAINE 103 VISION WAY BLOOMFIELD, CT 06002 2,500. FRANNIE PEABODY CENTER PUBLIC FRAN FUND 30 DANFORTH STREET SUITE 309 PORTLAND, ME 04101 5,000. FRIENDS OF BAXTER STATE PARK PUBLIC ENGAGE YOUTH AS PO BOX 322 ENVIRONMENTAL STEWARDS BELFAST, ME 04915 5,000. Total from continuation sheets

Part XIV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor FRIENDS OF CASCO BAY PUBLIC GENERAL OPERATING 43 SLOCUM DRIVE SUPPORT SOUTH PORTLAND, ME 04106 3,000. FRIENDS OF SEGUIN ISLAND PUBLIC REPLACE THREE TRUSSES 72 FRONT STREET SUITE 3 ON THE LIGHT STATION'S BATH, ME 04530 TRAMWAY 3,000. FURNITURE FRIENDS FURNITURE ACQUISTION PUBLIC P.O. BOX 631 PROGRAM WESTBROOK, ME 04098 5,000. GOOD SHEPHERD FOOD BANK OF MAINE PUBLIC GENERAL OPERATING SUPPORT P.O. BOX 1807 AUBURN, ME 04211-1807 10,000. GULF OF MAINE RESEARCH INSTITUTE GENERAL OPERATING OF DRAIN ON A 350 COMMERCIAL STREET SUPPORT PORTLAND, ME 04101 5,000. HABITAT FOR HUMANITY 7 RIVERS MAINE PUBLIC HOME REPAIRS AND 126 MAIN STREET SUITE 1 MODIFICATIONS TOPSHAM, ME 04086 5,000. HOLOCAUST AND HUMAN RIGHTS CENTER OF PUBLIC MAINE'S BLACK AND MAINE BROWN HEROES EXHIBIT 46 UNIVERSITY DRIVE AUGUSTA, ME 04330 5,000. IMMIGRANT LEGAL ADVOCACY PROJECT PUBLIC CONNECT RURAL MAINERS P.O. BOX 17917 OF LIMITED MEANS WITH PORTLAND, ME 04112 IMMIGRATION LEGAL SERVICES 10,000. IRIS NETWORK PUBLIC GENERAL OPERATING 189 PARK AVENUE SUPPORT PORTLAND, ME 04102 4,000. ISLAND INSTITUTE PUBLIC GENERAL OPERATING P.O. BOX 648 SUPPORT ROCKLAND, ME 04841-0648 6,000. Total from continuation sheets

Part XIV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor KNOX COUNTY HOMELESS COALITION PUBLIC GENERAL OPERATING P.O. BOX 1696 SUPPORT ROCKLAND, ME 04841 10,000. LARRY LABONTE RECOVERY CENTER PUBLIC GENERAL OPERATING 412 WALDO STREET SUPPORT RUMFORD, ME 04276 2,500. LEGAL SERVICES FOR THE ELDERLY PUBLIC GENERAL OPERATING 5 WABON STREET SUPPORT AUGUSTA, ME 04330-7040 10,000. LOAVES AND FISHES FOOD PANTRY PUBLIC AMILY MEAL BOXES OURING SCHOOL VACATION P.O. BOX 1672 ELLSWORTH, ME 04605 2,500. LOCKER PROJECT FRESH PRODUCE TO INFORMATIONAL IN PO BOX 3134 LOW-INCOME FAMILIES PORTLAND, ME 04104 WITH CHILDREN 5,000. MAINE CENTER FOR PUBLIC INTEREST PUBLIC RURAL MAINE NEWS FOR REPORTING PUBLICATION IN THE P.O. BOX 284 MAINE MONITOR HALLOWELL, ME 04347 3,000. MAINE DISCOVERY MUSEUM PUBLIC GENERAL OPERATING 74 MAIN STREET SUPPORT BANGOR, ME 04401 2,500. MAINE EQUAL JUSTICE PARTNERS PUBLIC GENERAL OPERATING SUPPORT 126 SEWALL STREET AUGUSTA, ME 04330 5,000. MAINE HISTORICAL SOCIETY PUBLIC GENERAL OPERATING 489 CONGRESS STREET SUPPORT PORTLAND, ME 04101-3498 5,000. MAINE MARITIME MUSEUM PUBLIC GENERAL OPERATING 243 WASHINGTON STREET SUPPORT BATH, ME 04530 2,500. Total from continuation sheets

Part XIV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor MAINE MEDICAL CENTER PUBLIC DEAN L. FISHER 22 BRAMHALL STREET SCHOLARSHIPS PORTLAND, ME 04102-3175 25,000. MAINE NARROW GAUGE RAILROAD AND PUBLIC RESTORE TRAIN CAR INDUSTRIAL HERITAGE TRUST COMBINE 12, INCLUDING 413 PRESUMPSCOT STREET A WHEELCHAIR LIFT PORTLAND, ME 04103 3,000. MAINE PRISONER ADVOCACY COALITION PUBLIC PEER HEALTH NAVIGATORS P.O. BOX 446 PROGRAM LISBON, ME 04250 5,000. MAINE PUBLIC BROADCASTING NETWORK PUBLIC SENERAL OPERATING 1450 LISBON STREET SUPPORT LEWISTON, ME 04240-3595 5,000. MAINE SEACOAST MISSION GENERAL OPERATING RINFORMATIONA PO BOX 600 SUPPORT NORTHEAST HARBOR, ME 04662 5,000. MAINE STATE MUSIC THEATRE PUBLIC GENERAL OPERATING 22 ELM STREET SUPPORT BRUNSWICK, ME 04011 2,500. MAINELY SMILES PUBLIC DENTAL CARE 166 REGAN LANE PORTLAND, ME 04103 5,000. MERRYSPRING NATURE CENTER PUBLIC GENERAL OPERATING SUPPORT P.O. BOX 893 CAMDEN, ME 04843 5,000. METHODIST CONFERENCE HOME PUBLIC GENERAL OPERATING 46 SUMMER STREET SUPPORT ROCKLAND, ME 04841 5,000. MID-COAST RECOVERY COALITION PUBLIC GENERAL OPERATING P.O. BOX 1002 SUPPORT CAMDEN, ME 04843 5,000. Total from continuation sheets

Part XIV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor MILESTONE RECOVERY PUBLIC FURNISH AND UPGRADE 65 INDIA STREET FACTLITTY PORTLAND, ME 04101 10,000. MITCHELL INSTITUTE PUBLIC GENERAL OPERATING 75 WASHINGTON AVENUE, SUITE 2E SUPPORT PORTLAND, ME 04101 15,000. NATURE CONSERVANCY IN MAINE PUBLIC GENERAL OPERATING 14 MAINE STREET, SUITE 401 SUPPORT BRUNSWICK, ME 04011 2,500. OGUNQUIT MUSEUM OF AMERICAN ART PUBLIC SENERAL OPERATING SUPPORT P.O. BOX 815 OGUNQUIT, ME 03907 2,500. OGUNQUIT PLAYHOUSE GENERAL OPERATING INFORMATIONAL TOTAL P.O. BOX 915 SUPPORT OGUNQUIT, ME 03907 2,500. OLYMPIA SNOWE WOMEN'S LEADERSHIP PUBLIC MY VALUES, MY VOICE, TNSTTTUTE MY VISION PROGRAM ONE CANAL PLAZA SUITE 501 PORTLAND, ME 04101 2,500. PENOBSCOT COMMUNITY HEALTH CARE PUBLIC GENERAL OPERATING P.O. BOX 2100 SUPPORT BANGOR, ME 04402 6,000. PENQUIS COMMUNITY ACTION PROGRAM PUBLIC FOSTER GRANDPARENT 262 HARLOW STREET PROGRAM PERSONNEL BANGOR, ME 04401 2,500. PEREGRINE CORP. DBA STRIVE PUBLIC STRIVE U PROGRAM 39 DARLING AVENUE SOUTH PORTLAND, ME 04106 5,000. PIERRE MONTEUX MEMORIAL FOUNDATION PUBLIC CHILDREN'S CONCERT AND P.O. BOX 457 INSTRUMENT PETTING ZOO HANCOCK, ME 04640 2,500. Total from continuation sheets

Part XIV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor POINTS NORTH INSTITUTE PUBLIC GENERAL OPERATING P.O. BOX 836 SUPPORT CAMDEN, ME 04843-0836 4,000. PORTLAND MUSEUM OF ART PUBLIC GENERAL OPERATING SEVEN CONGRESS SQUARE SUPPORT PORTLAND, ME 04101 10,000. PORTLAND STAGE COMPANY PUBLIC GENERAL OPERATING P.O. BOX 1458 SUPPORT PORTLAND, ME 04104 5,000. PORTLAND STAGE COMPANY PUBLIC MAKING AN ENTRANCE 25 FOREST AVENUE CAPITAL CAMPAIGN PORTLAND, ME 04101 25,000. PORTLAND SYMPHONY ORCHESTRA GENERAL OPERATING RINFORMATIONA 85 EXCHANGE STREET, 4TH FLOOR SUPPORT PORTLAND, ME 04101 10,000. PREBLE STREET PUBLIC GENERAL OPERATING 55 PORTLAND STREET SUPPORT PORTLAND, ME 04101 5,000. RANGELEY FRIENDS OF THE PERFORMING PUBLIC GROUND CYCLORAMA ARTS LIGHTS P.O. BOX 333 RANGELEY, ME 04970 1,350. SAFE VOICES PUBLIC GENERAL OPERATING SUPPORT P.O. BOX 713 AUBURN, ME 04212-0713 5,000. SALVATION ARMY NORTHERN NEW ENGLAND PUBLIC GENERAL OPERATING DIVISION SUPPORT 297 CUMBERLAND AVENUE PORTLAND, ME 04101 4,000. SHALOM HOUSE, INC. PUBLIC GENERAL OPERATING 106 GILMAN STREET SUPPORT PORTLAND, ME 04102 5,000. Total from continuation sheets

Part XIV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor SOUTHERN HARBOR ELDERCARE SERVICE PUBLIC GENERAL OPERATING 12 PULPIT HARBOR ROAD SUPPORT NORTH HAVEN, ME 04853 5,000. SOUTHERN MAINE AGENCY ON AGING PUBLIC GENERAL OPERATING 30 BARRA ROAD SUPPORT BIDDEFORD, ME 04005 5,000. ST. BRENDAN THE NAVIGATOR CATHOLIC PUBLIC ST. BERNARD SOUP KITCHEN CHURCH 7 UNION STREET CAMDEN, ME 04843 5,000. SUSAN L. CURTIS CHARITABLE FOUNDATION PUBLIC SENERAL OPERATING 1321 WASHINGTON AVENUE, SUITE 104 SUPPORT PORTLAND, ME 04103 5,000. TREE STREET YOUTH INC GENERAL OPERATING INFORMATIONA' 144 HOWE STREET SUPPORT LEWISTON, ME 04240 5,000. UNITED WAY OF AROOSTOOK PUBLIC GENERAL OPERATING 830 MAIN STREET, SUITE 4 SUPPORT PRESQUE ISLE, ME 04769 15,000. WHISKA HOUSE PUBLIC GENERAL OPERATING 126 WESTERN AVENUE SUITE 170 SUPPORT AUGUSTA, ME 04330 1,000. YMCA CAMP OF MAINE PUBLIC ENDOWMENT FUND P.O. BOX 446 WINTHROP, ME 04364 5,000. YMCA CAMP OF MAINE PUBLIC GENERAL OPERATING P.O. BOX 446 SUPPORT WINTHROP, ME 04364 5,000. Total from continuation sheets

FORM 990-PF	GAIN OR	(LOSS)	FROM S	ALE	OF A	SSETS		STA	ATEMENT 1
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PUBLICLY TRADED SEC	CURITIES								
(B) GROSS	(C COST		EXPE	D) NSE	OF	(E)			(F)
SALES PRIC				ALE		DEPRE	C.	GAIN	OR LOSS
601,	027. 2	32,432	•		0.		0.		368,595.
CAPITAL GAINS DIVI	DENDS FROM PA	ART IV				4	1		0.
TOTAL TO FORM 990-1	PF, PART I, 1	LINE 6 <i>A</i>	A			CHI	_		368,595.
						,5	=		
FORM 990-PF INTER	EST ON SAVINO	GS AND	TEMPOR.	ARY	CASH	INVEST	MENTS	STA	ATEMENT 2
SOURCE			(A) REVENUE ER BOOK	S	NET	(B) INVEST INCOME			(C) ADJUSTED ET INCOME
KEYBANK BUSINESS II CHECKING	NTEREST		MR.	2.			2.		
TOTAL TO PART I, L	INE 3	"DI		2.			2.		
	, OP	M <del>y</del>							
FORM 990-PF	DIVIDENDS	AND IN	TEREST	FRC	M SE	CURITIE	S	STA	ATEMENT 3
SOURCE	GROSS AMOUNT	CAPI GAI DIVII	INS		(A) VENU		(B) INVES		(C) ADJUSTED NET INCOME
KEYBANK NATIONAL ASSOCIATION - DIVIDENDS	109,593.		0.	1	.09,5	93.	109,5	93.	
TO PART I, LINE 4	109,593.		0.	1	.09,5	93.	109,5	 93.	

FORM 990-PF	OTHER I	NCOME		STATEMENT 4
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
2022 TAX REFUND		3,254.	0.	
TOTAL TO FORM 990-PF, PART I	, LINE 11	3,254.	0.	
FORM 990-PF	LEGAL	FEES	\$	STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	365.	92	, 0,	273.
TO FM 990-PF, PG 1, LN 16A	365.	92		273.
		IRPO		
FORM 990-PF	ACCOUNTI	NG FEES	2	STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
ACCOUNTING FEES	3,310.	827	•	2,483.
TO FORM 990-PF, PG 1, LN 16B	3,310.	827	•	2,483.
RIKI				
FORM 990-PF	OTHER PROFES	SIONAL FEES	<u> </u>	STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES ADMINISTRATIVE FEES	30,307. 14,000.			0. 10,500.
TO FORM 990-PF, PG 1, LN 16C	44,307.	33,807	•	10,500.
		. <del></del>	_ <del></del>	. <del></del>

FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TELEPHONE INSURANCE POSTAGE MISCELLANEOUS OUTSIDE CONTRACT SERVICES SUPPLIES	89. 698. 2,303. 180. 225. 91.	175. 577. 45. 56.		66. 523. 1,726. 135. 169. 68.
TO FORM 990-PF, PG 1, LN 23	3,586.	899.		2,687.

FORM 990-PF	CORP	ORATE STOCK	43	STATEMENT 9
DESCRIPTION		IRP	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCKS		SO.	1,249,209.	4,884,642.
TOTAL TO FORM 990-PF, PART II	, LINE	10B	1,249,209.	4,884,642.
FORM 990-PF	OTHER	INVESTMENTS		STATEMENT 10
DESCRIPTION	57	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MUTUAL FUNDS		COST	1,255,793.	1,692,036.
TOTAL TO FORM 990-PF, PART II	, LINE	13	1,255,793.	1,692,036.
MUTUAL FUNDS	, LINE	METHOD COST	1,255,793.	1,692,03

	IST OF OFFICERS, DI		STAT	EMENT 11
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ALEXSANDRA L FISHER P.O. BOX 17513 PORTLAND, ME 04112	TRUSTEE/PRESID	DENT 15,000.	0.	0.
OWEN W. WELLS P.O. BOX 17513 PORTLAND, ME 04112	TRUSTEE/CLERK 1.00	15,000.	0.	0.
MEG BAXTER P.O. BOX 17513 PORTLAND, ME 04112	TRUSTEE 1.00	15,000.	0.	0.
HENRY L. P. SCHMELZER P.O. BOX 17513 PORTLAND, ME 04112	TRUSTEE 1.00	15,000.	0.	0.
CRAIG N. DENEKAS P.O. BOX 17513 PORTLAND, ME 04112	TRUSTEE	15,000.	0.	0.
ARIE FISHER COLES P.O. BOX 17513 PORTLAND, ME 04112	TRUSTEE 1.00	15,000.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	E 6, PART VII	90,000.	0.	0.

FORM 990-PF

# GRANT APPLICATION SUBMISSION INFORMATION PART XIV, LINES 2A THROUGH 2D

STATEMENT 12

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

OWEN W. WELLS PO BOX 17513 PORTLAND, ME 04112

TELEPHONE NUMBER

(207) 253-1568

FORM AND CONTENT OF APPLICATIONS

INFORMATION AND A GRANT APPLICATION CAN BE FOUND ON THE FOUNDATION'S WEBSITE HTTPS://FISHERCHARITABLEFOUNDATION.ORG/APPLICATION-PROCEDURES/

ANY SUBMISSION DEADLINES

FEBRUARY 15, MAY 15, AUGUST 15, NOVEMBER 15

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION GENERALLY LIMITS ITS GRANTS TO CHARITABLE ORGANIZATIONS, ACTIVITIES, OPERATIONS OR PURPOSES WHICH TAKE PLACE WITHIN THE STATE OF MAINE.