For calendar year 2021 or tax year beginning

Return of Private Foundation

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

, and ending

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

		of foundation				yer identification num	ber
						547392	
Number and street (or P.O. box number if mail is not delivered to street address) Room/suite				loom/suite	1	one number (see instru	ctions)
104 Main Street, PO Box 28						985-4903	
		town, state or province, country, and ZIP or foreign postal code			C If exem	ption application is pen	ding, check here 🕨 📗
		ebunk, ME 04043					. <u> </u>
	G		former public charity	1	D 1. Fore	ign organizations, chec	k here 🕨 📙
		Final return Amended return				ign organizations meet	
_	ц с	Address change Name change	1-41		1	k here and attach com	2.50
Г	_	heck type of organization: Section 501(c)(3) exempt private found				foundation status was	
ᆜ		ection 4947(a)(1) nonexempt charitable trust Other taxable priva			1	507(b)(1)(A), check he	
		air market value of all assets at J Accounting method: X Cash	Accrual			undation is in a 60-mon	
		d of year (from Part II, col. (c), e 16) ► \$ 6.120.609 (Part I, column (d), must be on cash	hacie)		under se	ection 507(b)(1)(B), che	eck here 🕨 📙
		e 16) ► \$ 6,120,609. (Part I, column (d), must be on cash Analysis of Revenue and Expenses (The total of					(d) Disbursements
	art	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue an expenses pe	1 ' '	nvestment ncome	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions).)	books	" "	ICOITIE	income	purposes
-	1	Contributions, gifts, grants, etc., received (attach schedule)	387,95	7			(cash basis only)
	2	Check if the foundation is not required to attach Sch. B	367,93				
	3	Interest on savings and temporary cash investments	17	4	174.		
	4	Dividends and interest from securities.	96,82		,827.		
		a Gross rents	50,02	7. 90	,021.		
		Net rental income or (loss)		and American		RECEIVED BY STREET	
<u>o</u>		Net gain or (loss) from sale of assets not on line 10	66,39	1 State	78.5		
evenue		Gross sales price for all assets on line 6a 326, 317.					
Š	7	Capital gain net income (from Part IV, line 2)		66	,391.		
ž	8	Net short-term capital gain				89.	
	9	Income modifications	THE REAL PROPERTY.				Para Language and Color
	10 a	Gross sales less returns and allowances					
	b	Less; Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)		Mark Co.			
	11	Other income (attach schedule)					Mark B. Williams
	12	Total. Add lines 1 through 11	551,349	163	,392.	89.	
	13	Compensation of officers, directors, trustees, etc.					
	14	Other employee salaries and wages.					
enses	15	Pension plans, employee benefits					
	16 a	Legal fees (attach schedule)					
쯦	1	Accounting fees (attach schedule)					
8	1	Other professional fees (attach schedule)	24,408	24	,408.		
Ē	17	Interest					
<u>s</u>	18	Taxes (attach schedule) (see instructions)	3,425	1.	,125.		
Ē	19	Depreciation (attach schedule) and depletion					Maria de la companya
ž	20	Occupancy					
and	21	Travel, conferences, and meetings					
2	22	Printing and publications	160		160		
perating and Administrative Exp	23	Other expenses (attach schedule)	162	+	162.		
	24	Total operating and administrative expenses.	27,995	25	60E		
	25	Add lines 13 through 23	614,493	A S CHEST OF THE SECOND	695.		614 400
	26	Total expenses and disbursements. Add lines 24 and 25	642,488		695.		614,493.
	27	Subtract line 26 from line 12:	074,700	. 43,	095.	STATE OF THE STATE	614,493.
	111	Excess of revenue over expenses and disbursements	-91,139				
		Net investment income (if negative, enter -0-)		,	697.		
		Adjusted net income (if negative, enter -0-)				89.	
_		and the state of t	The second secon			<u></u>	THE COMPANY

	art I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year		End	of year
			(a) Book Value	(b) Book V	alue	(c) Fair Market Value
	1	Cash – non-interest-bearing	44,106.	37,	313.	37,313
	2	Savings and temporary cash investments	1,256,380.			
	3	Accounts receivable		200 6 8 9 8 9		182,500,012,02
	1	Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶			Janes	
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)		511128	nice of the	SECTION AND ADDRESS
		Less: allowance for doubtful accounts	Avenue and and and and	HERVESTON OF STREET		
Ŋ	8	Inventories for sale or use			_	
Se	9	Prepaid expenses and deferred charges		-		
Assets	10a	Investments – U.S. and state government obligations (attach schedule)				
	b		1 475 675	1 020 1	140	4 200 000
		Investments – corporate stock (attach schedule)				4,389,208
	14 C	Investments – corporate bonds (attach schedule)	860,458.	758,0	154.	770,923.
	11	Investments – land, buildings, and equipment: basis			15.5	
		Less: accumulated depreciation (attach schedule)				
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule)		Street House and the same		
	14	Land, buildings, and equipment: basis ▶			THE S	
		Less: accumulated depreciation (attach schedule)				
	15	Other assets (describe ▶)				
	16	Total assets (to be completed by all filers – see the instructions. Also,				
		see page 1, item i)	3,636,619.	3,545,4	80.	6,120,609.
	17	Accounts payable and accrued expenses				
0	18	Grants payable				
	19	Deferred revenue				C THE SERVE
	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)				
4	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)				
2		Foundations that follow FASB ASC 958, check here				
Calailogs		and complete lines 24, 25; 29, and 30.				
Ē		Net assets without donor restrictions			1	
1		Net assets with donor restrictions				
- 1		Foundations that do not follow FASB ASC 958, check here				
		and complete lines 26 through 30.				
- 1		Capital stock, trust principal, or current funds			9	
5		Paid-in or capital surplus, or land, bldg., and equipment fund				
5 I			2 626 610	2 545 4	00	
		Retained earnings, accumulated income, endowment, or other funds		3,545,4		
.			3,636,619.	3,545,4	80.	
		Total liabilities and net assets/fund balances			1	
		(see instructions)	3,636,619.	3,545,4	80.	CARL SPECIFIC
_	rt III					
1		I net assets or fund balances at beginning of year - Part II, column (a), line 29 (r				
_		re reported on prior year's return)			1	3,636,619.
2		er amount from Part I, line 27a			2	-91,139.
3		er increases not included in line 2 (itemize)			3	
4		lines 1, 2, and 3			4	3,545,480.
5		reases not included in line 2 (itemize) 🌬			5	
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column	n (b), line 29		6	3,545,480.
Ά						Form 990-PF (2021)

(a) List and searche the land(s) of property soid (for example, real estates, 2-bentifor and expenses or common stock, 200 she. McC, 200 she.	Part IV Capital Gains ar	nd Losses for Tax on Investmen	t Income				
b Long-term Capital Gain Distributions c Short-term Capital Gain Distributions d e (e) Gross sales price (f) Deprecision allowed (or allowable) a 324,851. b 1,377. c 89. d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. c 89. d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. d f(h) Excess of col. (i) Control of the foundation of 12/31/69. d f(h) Excess of col. (i) Control of the foundations on 12/31/69. d f(f(s), but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h), but not less than -0-				P - Purchase	1 1 2		1 7 7
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d e (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Gain or (foss)	b Long-term Capi	tal Gain Distribution	ıs	₽			
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(in allowable) in plus expense of sale (in allowable) in column (in) and owned by the foundation on 12/31/69. (in plus (f) plus (f) plus (f) plus (f) minus (g))	ее						
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(i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 (ii) Adjusted basis as of 12/31/69 (iii) Adjusted basis as of 12/31/69 (iv) Excess of col. (i) col. (ii) but not less stan 0-0 or Losses (from col. (iv)) as of 12/31/69 (col. (iii) gain minus col. (iii) but not less stan 0-0 or Losses (from col. (iv)) as of 12/31/69 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (iii) as of 12/31/69 (col. (iii) gain, also enter in Part I, line 7 (iii) as other in Part I, line 8 (col. (iii) gain, also enter in Part I, line 7 (iii) as other in Part I, line 8 (col. (iii) gain, also enter in Part I, line 7 (iii) as other in Part I, line 8 (col. (iii) gain, also enter in Part I, line 7 (iii) as other in Part I, line 8 (col. (iii) gain, also enter in Part I, line 7 (iii) as other in Part I, line 7 (iii) as other in Part I, line 8 (col. (iii) gain, also enter in Part I, line 8 (col. (iii) gain, also enter in Part I, line 8 (col. (iii) gain, also enter in Part I, line 8 (col. (iii) gain, also enter in Part I, line 8 (col. (iii) gain, also enter in Part I, line 8 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 8 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line 7 (col. (iii) gain, also enter in Part I, line	е						
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a G4, 925. b G4, 925. c Region	(i) FMV as of 12/31/69	(i) Adjusted basis	(k) Excess	of col. (i)	7		1 / -
Description Comparison C	.,		٠.	` '	1		•
Description Comparison C	а					·	64 925
c d d e							
d e 2 Capital gain net income or (net capital loss)	C						
e 2 Capital gain net income or (net capital loss) 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 7 By gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 By gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8. Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here \(\bar{1} \) and enter "\(\bar{1}\hat{1}\hat{1}\hat{2}\hat{1}\hat{1}\hat{1}\hat{1}\hat{2}\hat{1}\hat{1}\hat{1}\hat{1}\hat{2}\hat{1}\hat{1}\hat{1}\hat{1}\hat{1}\hat{2}\hat{1}\hat{1}\hat{2}\hat{1}\hat{2}\hat{1}\hat{2}\hat{2}\hat{1}\hat{2}\hat	*						
2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 If (loss), enter -0- in Part I, line 7 If gain, also enter in Part I, line 8. Part I, line 8. Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948—see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here I and enter "N/A" on line 1 Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 3 Add lines 1 and 2 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments: a 2021 estimated tax payments and 2020 overpayment credited to 2021 b Exempt foreign organizations—lax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d. 8 Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overpaid 10 Overpayment. If line 7 is more than line 7, enter amount overpaid 11 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Overpayment. If line 7 is more than line 7, enter amount overpaid 12 Inter the amount of line 10 to be: Credited to 2022 estimated tax 13 Inter the amount of line 10 to be: Credited to 20	 				1		
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1 1 1,914. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) 1 1,914. b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b). 2 2 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-). 2 3 1,914. 3 Add lines 1 and 2. 3 1,914. 3 1,914. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-). 4 5 1,914. 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5 1,914. 6 Credits/Payments: 2 5 1,914. a 2021 estimated tax payments and 2020 overpayment credited to 2021. 6a 1,851. b Exempt foreign organizations—tax withheld at source. 6b 6c c Tax paid with application for extension of time to file (Form 8868). 6c 6d d Backup withholding erroneously withheld. 7 1,851. 7 Total credits and payments. Add lines 6a through 6d. 7 1,851. 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached. 8 12. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed. 9 75. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. 10 0. <	If gain, also enter in Part I, line 8	s, column (c). See instructions. If (loss), ente		4940(b) or	3	soo instru	89.
Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 3 Add lines 1 and 2					7340	-See 1115111	ictions)
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enter 4% (0.04) of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 3 Add lines 1 and 2	_			-	ions)	> 1	1,914.
Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) Add lines 1 and 2)	
3 1,914. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments: a 2021 estimated tax payments and 2020 overpayment credited to 2021 b Exempt foreign organizations—tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☑ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2022 estimated tax ▶ Refunded ▶ 11 O .	• • • • • • • • • • • • • • • • • • • •	. ,			* * *		
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			-		102		
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments: a 2021 estimated tax payments and 2020 overpayment credited to 2021 b Exempt foreign organizations—tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2022 estimated tax ▶ Refunded ▶ 11 0.							
6 Credits/Payments: a 2021 estimated tax payments and 2020 overpayment credited to 2021 6a 1,851. b Exempt foreign organizations—tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 7 Total credits and payments. Add lines 6a through 6d 7 Total credits and payments of estimated tax. Check here if Form 2220 is attached 7 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 7 Total credits and payment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 7 Total credited 10 to be: Credited to 2022 estimated tax 8 Refunded 11 0.							
a 2021 estimated tax payments and 2020 overpayment credited to 2021 6a 1,851. b Exempt foreign organizations—tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 7 Total credits and payments. Add lines 6a through 6d 7 Total credits and payments of estimated tax. Check here if Form 2220 is attached 7 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 7 Total Credits and payment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 7 Total credits and payment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 7 Total credits and payment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 7 Total credits and payment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 7 Total credits and payments. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 7 Total credits and payments. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 7 Total credits and payments. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 7 Total credits and payments. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 7 Total credits and payments. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 7 Total credits and payments. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 7 Total credits and payments are also and payments. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 7 Total credits and payments are also and payments and payments are also and payments are also and payments and payments are also and payments are als		ome. Subtract line 4 from line 3. If zero or les	s, enter -u-		(8)	5	3.00
b Exempt foreign organizations—tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 7 Total credits and payments. Add lines 6a through 6d 7 Total credits and payments of estimated tax. Check here If Form 2220 is attached 8 12. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 75. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 0. 11 Enter the amount of line 10 to be: Credited to 2022 estimated tax ▶ Refunded ▶ 11 0.		d 2020 averagement availted to 2001		1 0-1	1	051	
c Tax paid with application for extension of time to file (Form 8868)						021.	
d Backup withholding erroneously withheld	* * * * * * * * * * * * * * * * * * * *				_	45	
7 Total credits and payments. Add lines 6a through 6d		, ,				E.83	
8 Enter any penalty for underpayment of estimated tax. Check here ☑ if Form 2220 is attached							
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed							
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid							
11 Enter the amount of line 10 to be: Credited to 2022 estimated tax ▶ Refunded ▶ 11 0.							
-10.411004 111	-		ant overball	#*: # * # E * * #			
		VIVALION TO EVEL BOILINGBUILDA F			Retun	ueu 🛂 11	

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or		Yes	No
	intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the			
	definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			0.5
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		I AR	100
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$		257.00	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ▶ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.	330		100
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		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?.	4a		х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?.	5		х
	If "Yes," attach the statement required by General Instruction T.		TESTE!	15 E
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		1	
	with the state law remain in the governing instrument?	6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV.	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	LA LE	(ELV	
	ME			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of			
	each state as required by General Instruction G? If "No," attach explanation	8b	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for	A THE	10 m	
	calendar year 2021 or the tax year beginning in 2021? 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
1	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
2	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
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
	Website address > www.kennebunksavings.com/about/community-promise/			
4	The books are in care of ▶ Thomas Zuke Telephone no. ▶ (207) 98	85-4	1903	3
	Located at ▶ 7 Alewive Park Road Kennebunk, ME ZIP+4 ▶ 04043			-
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here			▶□
	and enter the amount of tax-exempt interest received or accrued during the year			· ⊔
	At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	X STILL	12.2	
	the foreign country		1	
4	For	m 990)-PF	2021)

	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a		TANKS:		100
	(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?		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 2021?	1d		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		1 73	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines			
	6d and 6e) for tax year(s) beginning before 2021?	2a		X
	If "Yes," list the years ▶			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		NEST.	
	all years listed, answer "No" and attach statement - see instructions.).	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.			
	<u> </u>		THE REAL PROPERTY.	
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 2021 as a result of (1) any purchase by the foundation or	5.8		
	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			35
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the		:0h=	
	foundation had excess business holdings in 2021.)	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			Walt
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2021?	4b		X
UYA	Fo	rm 990)-PF	2021)

Form 990-PF (2021)

LIYA

Part V	Information About Officers, Directors, Trustees, Foundation Managers, Highly P and Contractors (continued)	aid Employees,
3 Five	e highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."	
(a) Nam	e and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total number	er of others receiving over \$50,000 for professional services	>
Part VIII-	-A Summary of Direct Charitable Activities	
List the foun organization	idation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of is and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 Non	e	-
		-
2		-
-	·	=
3		- 1
4		
4		
Part VIII-	B Summary of Program-Related Investments (see instructions)	
Describe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 None	à	
_		
2		
· -	gram-related investments. See instructions.	-
3		
otal Add line	or 1 through 3	

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Form **990-PF**(2021)

Form 990-PF (2021) Kennebunk Savings Bank Foundation

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

Amounts set aside for specific charitable projects that satisfy the:

614,493.

614,493.

Form 990-PF (2021)

1a

1b

2

3a

3b

4

а

b

2

3 а

b

UYA

Pai	t XII Undistributed Income (see instruction	ns)			001,002
:F=0.=0		(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1	Distributable amount for 2021 from Part X, line 7				281,110.
2	Undistributed income, if any, as of the end of 2021:				
а	Enter amount for 2020 only				
b	Total for prior years:				
3	Excess distributions carryover, if any, to 2021:				
а					
b					
С	From 2018				
d					
е	From 2020				
f	Total of lines 3a through e	1,294,451.			
4	Qualifying distributions for 2021 from Part XI,				
	line 4: ▶ \$ 614,493.				
а	Applied to 2020, but not more than line 2a.				
þ	Applied to undistributed income of prior years				
	(Election required - see instructions)				
C	Treated as distributions out of corpus (Election				
	required - see instructions)				
d	Applied to 2021 distributable amount				281,110.
е	Remaining amount distributed out of corpus	333,383.			
5	Excess distributions carryover applied to 2021				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,627,834.			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount - see instructions				
е	Undistributed income for 2020. Subtract line				
	4a from line 2a. Taxable amount - see				
	instructions				
f	Undistributed income for 2021. Subtract lines				
	4d and 5 from line 1. This amount must be			A Tread in Cit	
_	distributed in 2022				
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				
0	required - see instructions)				
8	Excess distributions carryover from 2016 not	246 077			
0	applied on line 5 or line 7 (see instructions)	246,077.			
9	Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a	1 201 757			
10		1,381,757.		The street of th	
а	Analysis of line 9: Excess from 2017				
a b	Excess from 2018	No Rule Harry			
C	Excess from 2019				
d	Excess from 2020				
e	Excess from 2021				
YA				- X-250-K-1111 W	Form 000-DE (2024)

	90-PF (2021) Kennebunk Savir			// A(' O\	01-05	47392 Page
	XIII Private Operating Foundat					
1a	If the foundation has received a ruling or det					
	the ruling is effective for 2021, enter the date	_				
b	Check box to indicate whether the foundation	n is a private operati	ng foundation describ	ed in section	4942(j)(3)	or 4942(j)(5
2a	Enter the lesser of the adjusted net income	Tax year		Prior 3 years		(-) 7-4-1
	from Part I or the minimum investment	(a) 2021	(b) 2020	(c) 2019	(d) 2018	(e) Total
	return from Part IX for each year listed					
b	85% (0.85) of line 2a		1			
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		-			
е	Qualifying distributions made directly for					
	active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative					
	test relied upon:					
а	"Assets" alternative test – enter:			1		
_	(1) Value of all assets					
	(2) Value of assets qualifying under					
b	section 4942(j)(3)(B)(i)					
D	minimum investment return shown in					
	Part IX, line 6, for each year listed					
C	"Support" alternative test - enter:			-		
	(1) Total support other than gross invest-				1	
	ment 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	/Commista thi		form detter be	1 \$5,000	
art /	Supplementary Information			e roundation had	3 \$5,000 or mor	e in assets a
	any time during the year- se		5.)			
	formation Regarding Foundation Manage					
a Li	st any managers of the foundation who have o	ontributed more tha	n 2% of the total contr	ibutions received by th	e foundation before t	he close of any
ta	x year (but only if they have contributed more t	than \$5,000). (See s	ection 507(d)(2).)			
		•				
b Lis	st any managers of the foundation who own 10	0% or more of the st	ock of a corporation (or an equally large port	ion of the ownership	of a partnership
	other entity) of which the foundation has a 10					
	,	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,				
2 In:	formation Pagarding Contribution Grant	Ciff Loon Schola	robin etc. Dresser			
	formation Regarding Contribution, Grant,			,		
	neck here I if the foundation only make					
TUI	nds. If the foundation makes gifts, grants, etc.	, to individuals or or	ganizations under other	er conditions, complete	e items 2a, b, c, and c	See instruction
	e name, address, and telephone number or e		person to whom applic			
ıli:	ne application & instr	ructions		www.k	ennebunksa	vings.co
	e form in which applications should be submi		and materials they sh	ould include:		
	ne application & instr	ructions				
	kennebunksavings.com					
	y submission deadlines:					
	oted on a rolling basi	S				
	y restrictions or limitations on awards, such a		eas charitable fields	kinds of institutions of	r other factors	
	eligibility criteria a		out, orientable helds,	mas of mattations, 0	onici iaciolo.	
	kennebunksavings.com	. •				
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					Fr	いい カラは ほど に / ツハケ

3 Grants and Contributions Paid During the Year of	r Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	COMINDATION	
a Paid during the year Noble High School 1 Noble Way			2.	
North Berwick, ME 03906		PC	Senior Scholarship	1,000.
Portsmouth High School 50 Andrew Jarvis Drive Portsmouth, NH 03801		PC	Senior Scholarship	1,000.
Sanford High School 100 Alumni Blvd Sanford, ME 04073		PC	Senior Scholarship	1,000.
Robert W Traip Academy 12 Williams Ave Kittery, ME 03904		PC	Senior Scholarship	1,000.
Wells High School 200 Sanford Road Wells, ME 04090		PC	Senior Scholarship	1,000.
Winnacunnet High School 1 Alumni Drive Hampton, NH 03842		PC	Senior Scholarship	1,000.
York High School 1 Robert Stevens Drive York, ME 03909		PC	Senior Scholarship	1,000.
Biddeford High School 20 Maplewood Avenue Biddeford, ME 04005		PC	Senior Scholarship	1,000.
Total	(a			614,493.
Avesta Housing Development Corp 307 Cumberland Ave Portland, ME 04101		PC ,	Silver Hearth Fund Capital Campaign	25,000.
Greater Seacoast Community Health 311 Route 108				
Somersworth, NH 03878		PC :	New Home for Families First Capital	25,000.
New Museum of Portsmouth 135 Congress Street Portsmouth, NH 03801		PC .	ew museum building capital campaign	25,000.
Hope on Haven Hill PO Box 1272				
Rochester, NH 03866		PC o	enter for Hope & Wellness Capital Cam	25,000.
Total	2	94 A		100,000.

	r gross amounts unless otherwise indicated.	Unrelated bus	IIIUUIIIG	LANGUED Dy SEC	on 512, 513, or 514	(e)
1	Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.
•	_			- And and an	, whoark	(OCC INSTRUCTIONS,
	h					
				-		
	4					
	e f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments			-		
3	Interest on savings and temporary cash investments			14	3774	
4	Dividends and interest from securities			14	174.	
5	Net rental income or (loss) from real estate:		and the second	14	96,827.	
J	a Debt-financed property		AND AND DESCRIPTIONS	A SERVE A DESIGNA		
				-		
6	b Not debt-financed property			-		
6 7	Other investment income.					
8				7.4	66 201	
	Gain or (loss) from sales of assets other than inventory		_	14	66,391.	
9	Net income or (loss) from special events					
10 44	Gross profit or (loss) from sales of inventory					
11	Other revenue: a					
	b					
	C			-		
	d					
	e	\$45.100 ASTOCIONES				
	Subtotal. Add columns (b), (d), and (e)				163,392.	
13	Total. Add line 12, columns (b), (d), and (e).				13	163,392.
	worksheet in line 13 instructions to verify calculations.) XV-B Relationship of Activities to the A		4 65	15		
_						
			(e) of Part X\/-	A contributed impo		
Line	No. Explain below how each activity for which income is					plishment
Line	No. Explain below how each activity for which income is of the foundation's exempt purposes (other than by					plishment
Line						plishment
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Form 990-PF (2021) Kennebunk Savings Bank Foundation 01-0547392 Page 13 Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the organization directly or indirectly engage	ge in any of the following with any o	other organization described in section 501(c)	10.00	Yes	No
	(other than section 501(c)(3) organizations) or	in section 527, relating to political	organizations?			
а	Transfers from the reporting foundation to a n	oncharitable exempt organization o	f:			
	(1) Cash		690	1a(1)		x
			881 - 8 8 8 - 1 988 - 8 8 8 - 1 1003 - 2 9 8 -	1a(2)		X
	Other transactions:			10(1)	System 1	8988
		organization		15/1	DOI 10	x
				1b(1)		X
				1b(2)		
				1b(3)	-	X
			•	1b(4)		X
				1b(5)		X
					_	<u>X</u>
				1c		_X
			mn (b) should always show the fair market value of			
			ved less than fair market value in any transaction o	or sharir	ng	
	arrangement, show in column (d) the value of t					
(a) Line	no. (b) Amount involved (c) Name of nor	charitable exempt organization	(d) Description of transfers, transactions, and sha	ring arra	ngeme	nts
-						
	<u> </u>					
		192				
2 a ls	the foundation directly or indirectly affiliated w	with or related to one or more tax-e	exempt organizations described in section 501(c)			
			` <u></u>	Yes	₩	_
	"Yes," complete the following schedule.			1 62	A N	י
- 10	(a) Name of organization	(b) Type of organization	on (c) Description of relationsh	nin.		
-	(L)	(e) Type of organization	(o) Description of relations	ıιρ		_
-						—
				_		_
				_		_
— Т	Under penalties of perjury, I declare that I have examine	d this return, including accompanying sche	dules and statements, and to the best of my knowledge and bel	ief it is to	IA.	
Sign	correct, and complete. Declaration of preparer (other th	an laxpayer) is based on all information of w	which preparer has any knowledge. May the IRS of			with
Here	1 homas Dul	15/10/10	the preparer s			
nere	Signature of officer or trustee	Date Title	easurer instructions.	G=1		
	Print/Type preparer's name	Preparer's signature		X Yes	N	ło
Paid		Barbar O. 7	Date Check X if PT			
Prepare			Com ampioyae F	145	974	0_
Use On		Belik	Firm's EIN			
	Firm's address ▶ 8 WOODLAWN		Phone no.			
	KENNEBUNKPORT, ME 04	046-6120	(207) 604-215	59		
UYA			For	m 990 -	PF(2	(021)

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

2021

01-0547392

Name of the organization

Kennebunk Savings Bank Foundation

Employer identification number

Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	∑ 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See				
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 r property) from any one contributor. Complete Parts I and II. See instructions for determining a ntributions.				
Special Rules					
regulations under sec 13, 16a, or 16b, and	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ½ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
contributor, during the literary, or educations	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.				
contributor, during the contributions totaled a during the year for an General Rule applies	lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one e year, contributions exclusively for religious, charitable, etc., purposes, but no such more than \$1,000. If this box is checked, enter here the total contributions that were received a exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the sto this organization because it received nonexclusively religious, charitable, etc., contributions are during the year.				

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

Name of organization

Employer identification number

Kennebunk Savings Bank Foundation

01-0547392

Part I	Contributors (see instructions). Use duplicate of	opies of Part I if additional space is	s needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Kennebunk Savings Bank 104 Main Street, PO Box 28 Kennebunk, ME 04043	\$ 387,957.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person 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 Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)

Name of organization Employer identification number Kennebunk Savings Bank Foundation 01-0547392 Part II Noncash (see instructions). Use duplicate copies of Part II if additional space is needed. (b) (a) No. from (c) (d) Description of noncash property given FMV (or estimate) Date received Part I (See instructions) (b) (c) (d) (a) No. from Description of noncash property given FMV (or estimate) Date received Part I (See instructions) (b) (c) (a) No. from Part I (d) Description of noncash property given FMV (or estimate) Date received (See instructions) (b) (c) (a) No. from (d) FMV (or estimate) Description of noncash property given Date received Part I (See instructions) \$ (b) (c) (d) (a) No. from Description of noncash property given FMV (or estimate) Date received Part I (See instructions) \$ (b) (c) (a) No. from (d) Description of noncash property given FMV (or estimate) Date received Part I (See instructions)

Name of organization

Employer identification number

	ounk Savings Bank Found			01-0547392		
Part III	Exclusively religious, charitable, et (10) that total more than \$1,000 for the following line entry. For organization	the year from any one	contributor. C	scribed in section 501(c)(7), (8), or		
	contributions of \$1,000 or less for the Use duplicate copies of Part III if additional copies of Part III ii additional copies of Pa	e year. (Enter this inforn	nation once. Se	e instructions.) > \$		
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held		
		(e) Transfer	of gift			
	Transferee's name, address,	and ZIP + 4	Relatio	nship of transferor to transferee		
(a) No.	(L) D					
Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held		
		(e) Transfer	of gift			
-	Transferee's name, address,	and ZIP + 4	Relatio	nship of transferor to transferee		
(a) No.						
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	jift	(d) Description of how gift is held		
		(e) Transfer (of cit			
	Transferee's name, address, a			nship of transferor to transferee		
(a) No.						
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	ift	(d) Description of how gift is held		
		(e) Transfer o	ef aiff	4		
	Transferee's name, address, a		Relationship of transferor to transferee			

Underpayment of Estimated Tax by Corporations

▶ Attach to the corporation's tax return.

▶ Go to www.irs.gov/Form2220 for instructions and the latest information.

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

Kennebunk Savings Bank Foundation

Employer identification number 01-0547392

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.

- Li	art Required Annual Payment					
1	Total tax (see instructions)			V . Dav. y	1. 1991 1	1,914
2	a Personal holding company tax (Schedule PH (Forr	n 112	20), line 26) included on	line 1 2a		
	b Look-back interest included on line 1 under section	460	(b)(2) for completed Ion	g-term		
	contracts or section 167(g) for depreciation under	the in	come forecast method	2b		
	c Credit for federal tax paid on fuels (see instructions	s)		2c		
	d Total. Add lines 2a through 2c					4
3						u
	does not owe the penalty					1,914.
4	Enter the tax shown on the corporation's 2020 inco					1,317.
·	the tax year was for less than 12 months, skip this				1	1 0/2
5	Required annual payment. Enter the smaller of					1,843.
J	enter the amount from line 3					1 040
D	art II Reasons for Filing - Check the b		s bolow that apply	. If any haven are	obsolved the same	
					cnecked, the corp	poration must file
_	Form 2220 even if it does not owe			CHORS.		
6						
7						
8		its fir	st required installment	based on the prior year's	s tax.	
li i	art III Figuring the Underpayment					
			(a)	(b)	(c)	(d)
9	Installment due dates. Enter in columns (a)	1				
	through (d) the 15th day of the 4th (Form					
	990-PF filers: Use 5th month), 6th, 9th, and 12th			18		
	months of the corporation's tax year	9	05/17/21	06/15/21	09/15/21	12/15/21
10	Required installments. If the box on line 6 and/or					
	line 7 above is checked, enter the amounts from					
	Schedule 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, enter 25% of line 5					
	above in each column	10	461	461	4.63	4.50
		10	401	401	461	460
11	Estimated tax paid or credited for each period.	Ш				
	For column (a) only, enter the amount from	ll	0.54			
	line 11 on line 15. See instructions	11	251			1600
	Complete lines 12 through 18 of one column		THE RICH WHITE			
	before going to the next column.					
	Enter amount, if any, from line 18 of the preceding column	12	Assessment of the second			
13	Add lines 11 and 12	13				1600
14	Add amounts on lines 16 and 17 of the preceding column	14		210	671	1132
15	Subtract line 14 from line 13. If zero or less, enter -0	15	251			468
16	If the amount on line 15 is zero, subtract line 13					THE PARTY OF THE PARTY
	from line 14. Otherwise, enter -0	16		210	671	
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	210	461	461	
10					101	
10	Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12		1			
	of the next column	18				

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.

For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2021)

100	TOTHIODUIN DUVINGD I		IN LOUI	Lacto	44			OT-03#	1332	
Li	art IV Figuring the Penalty	_							-41	
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	_	(a))		(b) _e		(c)		(d)
	of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions									
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 4/15/2021 and before 7/1/2021	21								
22	Underpayment on line 17 x Number of days on line 21 x 3% (0.03)	22	\$,	\$		\$		\$	
23	Number of days on line 20 after 6/30/2021 and before 10/1/2021	23								
24	Underpayment on line 17 x Number of days on line 23 x 3% (0.03)	24	\$		\$		\$		\$	
25	Number of days on line 20 after 9/30/2021 and before 1/1/2022	25						-		
26	Underpayment on line 17 χ Number of days on line 25 χ 3% (0.03)	26	\$		5		\$		\$	
27	Number of days on line 20 after 12/31/2021 and before 4/1/2022	27								
28	Underpayment on line 17 x Number of days on line 27 x 3% (0.03)	28	\$		6		\$		\$	
29	Number of days on line 20 after 3/31/2022 and before 7/1/2022	29								
30	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	5		\$		\$	
31	Number of days on line 20 after 6/30/2022 and before 10/1/2022	31								
32	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$			\$		\$	
33	Number of days on line 20 after 9/30/2022 and before 1/1/2023	33								
34	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$			\$		\$	
35	Number of days on line 20 after 12/31/2022 and before 3/16/2023	35								
36	Underpayment on line 17 χ Number of days on line 35 χ *%	36	\$	\$			\$		\$	
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	See At	t. \$	See	Att.	\$See	Att.	\$See	Att.
38	Penalty. Add columns (a) through (d) of line 37. Enter the	tota	l here and on	Form 1120), line 34	; or the compa	arable			

*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.

UYA

Form **2220** (2021)

12

Form 990-PF Net gain or (loss) from sale of assets not on line 10

Supporting Details for Form 990-PF, Part I, Line 6 (a) Asset description (d) Date sold (g) Basis (i) Sales expenses(j) Total (Column f minus Column g (b) Date acquired (e) Purchaser name (h) Basis method and i) (k) Accumulated (c) Manner of acquisition (f) Gross sales amount depreciation (a) (d) (b) (e) (g) 259,926. (j) 66,391. 326,317. (c) (f) (h) (i) 0.(k)0. (d) (a) (b) (e) 0. (g) (j) 0. (c) (f) 0. (h) (i) 0. 0.|(k)(a) (d) (b) (e) (g) 0. (i) 0. 0. (f) (c) (h) (i) 0.(k) 0. (a) (d) (b) (e) 0. (g) (j) 0. 0. (c) (f) (h) (i) 0.(k) 0. (a) (d) (b) (e) 0. (g) (j) 0. 0. (c) (f) (h) (i) 0.(k) 0. (d) (a) (b) (e) 0. (g) (j) 0. 0. (f) (h) (c) (i) 0.(k) 0. (a) (d) (b) (e) 0. (g) (j) 0. 0. (c) (f) (h) (i) 0.(k)0. (d) (a) (b) (e) (g) 0. (j) 0. (f) 0. 0.(k) (c) (h) (i) 0. 05/09/22 10:13AM

Form 990-PF Professional Fees Expense Supporting Details for Form 990-PF, Part I, Line 16

(a) Description	g Details for Form 99			(e) Disbursement
(a) = 3330, page.	expenses per books	income	income	for charitable purpose
Legal fees:				
Tax Preparation/Consult.	0.	. 0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
Accounting fees:	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
= 2	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	Ò.	0.	0.
	0.	0.	0.	0.
Other professional fees:				
Investment Management Fee	24,408.	24,408.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	05/09/22 10:1	MAE.		

Form 990-PF Taxes Expenses

Supporting Details for Form 990-PF, Part I, Line 18

(a) Description	(b) Revenue and			(e) Disbursement
	expenses per	income	income	for charitable
	books			purpose
Section 4940 Tax	2,300.	0.	0.	0.
Foreign Taxes Paid	1,125.	1,125.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
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	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.

Form 990-PF Other Expenses

Supporting Details for Form 990-PF, Part I, Line 23

⁰ (a) Description	(b) Revenue and expenses per books	(c) Net investmen income	(d) Adjusted net income	(e) Disbursement for charitable purpose
Amortization	0.	0.	0.	0.
ADR Pass-thru Fees	162.	162.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
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1,1	0.	0.	0.	0.
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	0.	0.	0.	0.
	0.	0.	0.	0.

Form 990-PF Amortization

Supporting Details for Form 990-PF, Part I, Line 23

	deporting section for term does in the End 20								
(a) Description	(b) Date	(c) Amount	(d) Deduction	(e)	(f) Current	(g) Net	(h) Adjusted	(i) Total	
	Acquired,	Amortized	for Prior	Amortization	Year	Investment	Net Income	Amount of	
	Completed, o	r	Years	Period	Amortization	Income		Amortization	
	Expended								
			05/09/2	2 10:13AN					
	1						1		

Supporting Details for Form 990-PF, Part II, Line 10a, 10b, and 10c

Investments - U.S. and state government obligations

	US Govt.	Securities	State and Local Govt. Securities		
(a) Description	(b) End of Year Book Value	(c) End of Year Fair Market	(b) End of Year Book Value	(c) End of Year Fair Market	
		¥		X	

(a) Description	(b) End of Year Book Value	(c) End of Year Fair Market
825 Nestle	48,940.	115,805.
750 PepsiCo	44,319.	130,283.
825 Proctor & Gamble	46,053.	134,954.
1,450 Unilever	46,034.	77,996.
750 Walmart	52,307.	108,518.
600 Bristol Myers Squibb	37,794.	37,410.
700 CVS Health Corp	48,996.	72,212.
500 Danaher Corp	11,519.	164,505.
1,000 Dentsply Sirona Inc	29,580.	55,790.
1,000 Medtronic PLC	76,950.	103,450.

Investments - corporate bonds

	(b) End of Year	(c) End of Year
(a) Description	Book Value	Fair Market
50,000 Glaxosmithkline Capital Corp	50,068.	50,432.
50,000 Starbucks Corp	50,126.	50,317.
50,000 JP Morgan Chase	50,039.	50,999.
50,000 Home Depot Inc	50,414.	50,969.
50,000 Oracle Corp	50,116.	50,982.
50,000 Honeywell Intl	50,797.	52,254.
100,000 IBM Corp	101,842.	105,370.
1,600 Vanguard Intermediate Term	144,701.	148,416.
2,000 Vanguard Short-term Corp Bond	160,155.	162,520.
800 Vanguard Short-term Treasury	49,796.	48,664.

Supporting Details for Form 990-PF, Part II, Line 10a, 10b, and 10c

Investments - U.S. and state government obligations

	US Govt.	Securities	State and Local Govt. Securities		
(a) Description	(b) End of Year Book Value	(c) End of Year Fair Market	(b) End of Year Book Value	(c) End of Year Fair Market	

(a) Description	(b) End of Year Book Value	(c) End of Year	
(a) Description	BOOK value	Fair Market	
1,300 Novo-Nordisk	13,729.	145,600	
1,350 Roche Holding Ltd ADR	49,581.	69,782.	
400 Waters	18,228.	149,040.	
425 3M Corp	37,003.	75,493.	
900 Carrier Gold Corp	29,360.	48,816.	
200 Eaton Corp PLC	29,204.	34,564.	
1,100 Emerson Electric	51,455.	102,267.	
325 Fortive Corp	3,971.	24,794.	
200 Honeywell International	29,108.	41,702.	
600 United Parcel Service	50,219.	128,604.	

Supporting Details for Form 990-PF, Part II, Line 10a, 10b, and 10c

Investments - U.S. and state government obligations

	US Govt.	Securities	State and Local	Govt. Securities
(a) Description	(b) End of Year Book Value	(c) End of Year Fair Market	(b) End of Year Book Value	(c) End of Yea Fair Market

(a) Description	(b) End of Year Book Value	(c) End of Year Fair Market
325 Ecolab	37,080.	76,242.
450 Linde PLC	73,553.	155,894.
500 Accenture PLC	28,760.	207,275.
1,500 Cisco Systems	30,197.	95,055.
900 Fiserv Inc	12,346.	93,411.
300 Intl Business Machines	40,416.	40,098.
325 Intuit	20,413.	209,047.
150 Mastercard Inc	51,822.	53,898.
600 Microsoft Corp	17,684.	201,792.
1,000 Oracle	32,541.	87,210.

Supporting Details for Form 990-PF, Part II, Line 10a, 10b, and 10c

Investments - U.S. and state government obligations

	US Govt.	Securities	State and Local Govt. Securities		
(a) Description	(b) End of Year Book Value	(c) End of Year Fair Market	(b) End of Year Book Value	(c) End of Year Fair Market	

(a) Description	(b) End of Year Book Value	(c) End of Year Fair Market
300 PayPal Holdings Inc	66,672.	56,574.
800 Texas Instruments	28,037.	150,776.
1,800 Kinder Morgan Inc	29,886.	28,548.
750 American Express	40,477.	122,700.
750 JP Morgan Chase	69,730.	118,763.
1,300 Truist Finl Corp	77,717.	76,115.
275 Crown Castle Intl Corp	45,263.	57,404.
325 Digital Realty Trust	45,305.	57,483.
3,000 Vanguard FTSE Emerging Mkt	124,928.	148,380.
1,800 iShares MSCL EAFE Index	133,117.	141,624.

Supporting Details for Form 990-PF, Part II, Line 10a, 10b, and 10c

Investments	- U.S. and state gover	mment obligations	i		
	US Govt.	Securities	State and Local	Govt. Securities	
(a) Description	(b) End of Year Book Value	(c) End of Year Fair Market	(b) End of Year Book Value	(c) End of Year Fair Market	
	-				
×					
lr .	nvestments - corporate	stock			
			(h) End of Year	(a) End of Voor	

(a) Description	(b) End of Year Book Value	(c) End of Year Fair Market
3,400 iShares S&P Small Cap 600 Idx	78,855.	389,334.
·		

Name of organization		Employer identifying number
Kennebunk Savings Bank Foundation	₽ &	01-0547392

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

and Contractors				
1 List all officers, directors, trustees, foundation				tructions).
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours pe week devoted to position	(If not paid,	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allow ances
5 Elizabeth A Torrance	V.P.			
7 Alewive Park Road Kennebunk, M	2.000000	0.	0.	0.
6 Patricia J Wheeler	Clerk			
7 Alewive Park Road Kennebunk, M	0.500000	0.	0.	0.
7 Charles F Wu	Director			
7 Alewive Park Road Kennebunk, M	0.500000	0.	0.	0.
8 Thomas J Allen	Director			
7 Alewive Park Road Kennebunk, M	0.500000	0.	0.	0.
9 Stephen A Morris	Director			
7 Alewive Park Road Kennebunk, M	0.500000	0.	0.	0.
10 Milda A Castner	Director			
7 Alewive Park Road Kennebunk, M	0.500000	0.	0.	0.
11 Matthew L Chase	Director			
7 Alewive Park Road Kennebunk, M	0.500000	0.	0.	0.
12 Lori A Howell	Director			
7 Alewive Road Kennebunk, ME 040	0.500000	0.	0.	0.
13 Douglas R Stockbridge	Director			
7 Alewive Park Road Kennebunk, M	0.500000	. 0.	0.	0.
14 Stephen H Roberts	Director			
7 Alewive Park Road Kennebunk, M	0.500000	0.	0.	0.
15 Paul D Gurney, Jr.	Director			
7 Alewive Park Road Kennebunk, M	0.500000	0.	0.	0.
16 Geoffrey Titherington				
05	/09/22 10:132	AM A		
	j	È	1	

	7 Alew	ive	Park	Road	Kennebunk,	MI	0.500000	0.	0.	0.
17										
							0.000000	0.	0.	0.
18										
							0.000000	0.	0.	0.
19										
							0.000000	0.	0.	0.
20										
							0.000000	0.	0.	0.
21										
							0.000000	0.	0.	0.
22										
							0.000000	0.	0.	0.
23									9	
							0.000000	0.	0.	0.
24										
							0.000000	0.	0.	0.
25										
							0.000000	0.	0.	0.
26										
							0.000000	0.	0.	0.
27										
							0.000000	0.	0.	0.
28										
							0.000000	0.	0.	0.
29										
							0.000000	0.	0.	0.

3 Grants and Contributions Paid During the Year		7	1	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business) a Paid during the year	or substantial contributor	Toopicit		
Dover High School				
25 Alumni Drive			ত	
Dover, NH 03820		PC	Senior Scholarship	1,000.
Kennebunk High School				
89 Fletcher Street				
Kennebunk, ME 04043		PC	Senior Scholarship	1,000.
Marshwood High School				
260 Dow Highway				
South Berwick, ME 03908		PC	Senior Scholarship	1,000.
Exeter High School				
1 Blue Hawk Drive				
Exeter, NH 03833		PC	Senior Scholarship	1,000.
Newmarket Jr/Sr High School				
213 South Main Street				
Newmarket, NH 03857		PC	Senior Scholarship	1,000.
Animal Welfare Society, Inc.				
PO Box 43 Kennebunk, ME 04043		20		
Remiedunk, ME 04045		PC	Veterinary Care for Seniors' Pets	10,000.
William Fogg Public Library				
PO Box 359				
Eliot, ME 03903		PC	Library Expansion Project	25,000.
Rice Public Library				
8 Wentworth Street				
Kittery, ME 03904		PC	Library Expansion Project	25,000.
b Approved for future payment			3a	
b Approved for future payment				
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Total				
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3 Grants and Contributions Paid During the Year o		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year United Way of the Greater Seacoast PO Box 4113 Portsmouth, NH 03802		PC	Employee Match	4,788.
United Way of Southern Maine 550 Forest Ave Suite 100 Portland, ME 04101		PC	Employee Match	54,705.
Maine Recovery Fund 494 Forest Avenue Portland, ME 04101		PC	Covid-19 Direct Response Funding	15,000.
York Hospital 15 Hospital Drive York, ME 03909		PC	York Hospital Recovery Center	25,000.
Early Learning New Hampshire 2 Delta Drive Concord, NH 03301		PC	Child Care Business Response Team	30,000.
Richie McFarland Children's Center 11 Sandy Point Rd Stratham, NH 03885		PC	Social Work Support	20,000.
Waban Projects Inc 5 Dunaway Drive Sanford, ME 04073		PC	Workforce Development & Technology	20,000.
The Children's Museum of New Hampshire 6 Washington Street Dover, NH 03820		PC	Improving Access to Virtual Educations	10,000.
Total			3a	
b Approved for future payment			•	
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Total	(a)	2020A . Z		

3 Grants and Contributions Paid During the Year or	Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	
a Paid during the year York County Community Action Corp				
6 Spruce Street				
Sanford, ME 04073		PC	Childcare Needs in York County	20,000.
Southern Maine Healthcare PO Box 626				
Biddeford, ME 04005		PC	Partners for Healthier Communities	10,000.
Kennebunkport Heritage Housing Trust PO Box 333				
Kennebunkport, ME 04046		PC	Heritage Woods	15,000.
Hope on Haven Hill PO Box 1272				
Rochester, NH 03866		PC	Center for Hope & Wellness	25,000.
New Museum of Portsmouth 135 Congress Street				
Portsmouth, NH 03801		PC	new museum building	25,000.
Kittery Land Trust PO Box 467				
Kittery, ME 03904		PC	Nooney Farm Capital Campaign	25,000.
Maine Farmland Trust Inc 97 Main Street Belfast, ME 04915		PC	Blaisdell Farm Capital Campaign	10,000.
Three Rivers Land Trust				
PO Box 295 Alfred, ME 04002		PC	Sanford Community Forest	10,000.
Total				
b Approved for future payment				
1				
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Total				

Part XIV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation show any relationship to Purpose of grant or Amount status of recipient any foundation manager or substantial contributor contribution Name and address (home or business) a Paid during the year Avesta Housing Development Corp 307 Cumberland Ave Portland, ME 04101 PC 25,000. Silver Hearth Fund Campital Campaign Greater Seacoast Community Health 311 Route 108 Somersworth, NH 03878 PC 25,000. New Home for Families First Capital Sha Development Corporation PO Box 1008 Sanford, ME 04073 PC proadband Access to Support the Elderl 40,000. Ferry Beach Retreat and Conference Center 5 Morris Ave Saco, ME 04072 PC Senior Meal Program 1,500. Waban Projects Inc 5 Dunaway Drive Sanford, ME 04073 PC Aging in Place for Waban's Senior Memb 11,850. Alzheimer's Disease and Related Disorders Assoc 383 US Rte 1 Scarborough, ME 04074 PC 10,000. ALZ Cares - Community Re-Engagement Po Good Shepherd Food Bank 3121 Hotel Rd Auburn, ME 04210 PC 4,000. York County Senior Farm Share Program Good Shepherd Food Bank 3121 Hotel Rd Auburn, ME 04210 PC 18,000. Senior Food Mobiles in York County b Approved for future payment

Total

3 Grants and Contributions Paid During the Year of		Payment			
Recipient	If recipient is an individual,	Equadation			
<u> </u>	show any relationship to status		Purpose of grant or	Amount	
Name and address (home or business)	or substantial contributor	recipient	contribution		
a Paid during the year					
Southern Maine Agency on Aging 136 US Rte One					
Scarborough, ME 04074		PC	Meals on Wheels	25,000.	
Youth Full Maine PO Box 745					
Biddeford, ME 04005		PC	Food Security for Rural York County Se	5,500.	
Age Friendly Saco					
19 Evergreen Drive					
Saco, ME 04072		PC	Cycling for All Ages	11,150.	
Carlisle Charitable Foundation PO Box 935					
Kennebunk, ME 04043		PC	Integrated Horsemanship Program for Se	5,000.	
,			aregrated norsemanship Flogram for Se	5,000.	
Table of Plenty PO Box 232					
Berwick, ME 03901		PC	Providing meals through the pandemic	5,000.	
York County Community Action Corp					
6 Spruce Street Sanford, ME 04073		PC	Vooning Conious Tour	20 000	
balliola, Hi 010/3			Keeping Seniors Home	20,000.	
York County Elder Abuse Task Force					
4 Summer Street					
Kennebunk, ME 04043		GOV	Internet Educational Sessions for Seni	2,000.	
York County Elder Abuse Task Force					
4 Summer Street					
Kennebunk, ME 04043		GOV	Elder-Focused Vista Intern	6,500.	
Total					
b Approved for future payment					
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Total		4			

Form 990-PF (2021) Kennebunk Savings Bank Foundation 01-0547392 Page 11 Part XIV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation show any relationship to Purpose of grant or Amount any foundation manager or substantial contributor contribution recipient Name and address (home or business) a Paid during the year York County Community College Foundation PO Box 529 Wells, ME 04090 PC 6,500. South Coast Senior College b Approved for future payment

Total.

Underpayment Penalty Calculations

		Underpayment Amount	Number Of Days	Daily Rate	Penalty Amount
				11000	12mount
From	05/18/2021	210.	29	.000082	0.50
To	06/15/2021	0.	0	.000082	0.00
From	,	0.	0	.000000	0.00
To		0.	0	.000000	0.00
From		0.	0	.000000	0.00
То		0.	0	.000000	0.00
From	06/16/2021	671.	15	.000082	0.83
To	06/30/2021	0.	0	.000082	0.00
From	07/01/2021	671.	77	.000082	4.25
To	09/15/2021	0.	0	.000082	0.00
From		0.	0	.000000	0.00
To		0.	0	.000000	0.00
From		0.	0	.000000	0.00
To	*************************************	0.	0	.000000	0.00
From	09/16/2021	1,132.	15	.000082	1.40
To	09/30/2021	0.	0	.000082	0.00
From	10/01/2021	1,132.	49	.000082	4.56
To	12/15/2021	0.	27	.000082	0.00
From		0.	0	.000000	0.00
То	E	0.	0	.000000	0.00
From	12/16/2021	0.	16	.000082	0.00
To	12/31/2021	0.	0	.000082	0.00
From	01/01/2022	0.	90	.000082	0.00
To	03/31/2022	0.	0	.000082	0.00
From	04/01/2022	0.	46	.000000	0.00
To	05/16/2022	0.	0	.000000	0.00

Total Penalty ____12.

Return due date or date tax paid if earlier

05/16/2022