Form **990-PF** 

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

OMB No. 1545-0047 2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

For	calend	dar year 2022 or tax year beginnin $94/01/2$	2 , and ending $03/$	31/23					
		foundation			A Employer identification number				
		OLD BUG LIGHT CHARITABLE			01 051 4050				
F	OUN.	DATION, C/O SPINNAKER TRU and street (or P.O. box number if mail is not delivered to see	JST tract address)	Room/suite	01-0514859  B Telephone number (see instructions)				
		BOX 7160	areer address)	Noon/suite	207-553-7160				
Cit	y or to	wn, state or province, country, and ZIP or foreign postal c	ode		_				
		LAND ME 0411			C If exemption application is pending, check here				
G	Check	all that apply: Initial return Initia	I return of a former public	charity	<b>D</b> 1. Foreign organizations, check here				
		Final return Ame	nded return	-	2. Foreign organizations meeting the				
		Address change Nam	e change		85% test, check here and attach co	mputation			
H (	Check	type of organization: X Section 501(c)(3) exempt	private foundation		E If private foundation status was termina	ated under			
		n 4947(a)(1) nonexempt charitable trust Other			section 507(b)(1)(A), check here				
		rket value of all assets at J Accounting me		crual	F If the foundation is in a 60-month term	ination			
eı	nd of y	rear (from Part II, col. (c), Other (spe			under section 507(b)(1)(B), check here	I			
	ie 16)	\$ 2,432,365 (Part I, column (d)			Ca				
P	art I	Analysis of Revenue and Expenses (The total	of (a) Revenue and	(h) Not in		sbursements			
		amounts in columns (b), (c), and (d) may not necessar the amounts in column (a) (see instructions).)	ily equal expenses per books	(b) Net in inco	me income pu	charitable urposes			
					(cash	basis only)			
	1	Contributions, gifts, grants, etc., received (attach schedu	•						
	2	Check X if the foundation is not required to attach So		10					
	3	Interest on savings and temporary cash investme			50, 222				
	4	Dividends and interest from securities		2	50,232				
	5a	Gross rents							
e	b	Net rental income or (loss)	-72,62	7					
en	6a	Net gain or (loss) from sale of assets not on line 10		/					
Revenue	b	Gross sales price for all assets on line 6a 2,093,			0				
œ	7	Capital gain net income (from Part IV, line 2)			0				
	8	Net short-term capital gain							
	9	Income modifications	*						
	10a b	Gross sales less returns and allowances Less: Cost of goods sold	<del>}</del>						
	C	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule) STMT 1	5,17	7					
	12	Total. Add lines 1 through 11	-17,218		50,232 0				
S	13	Compensation of officers, directors, trustees, etc.		0					
us.	14	Other employee salaries and wages							
xpenses	15	Pension plans, employee benefits							
Ж	16a	Legal fees (attach schedule)							
	b	Accounting fees (attach schedule) STMT 2	1,76	0	440				
Ę	С	Other professional fees (attach schedule) <b>STMT</b>		9	9,699				
itra	17								
nis	18	Interest Taxes (attach schedule) (see instructions) STMT	4 24,94	5					
Administrative	19	Depreciation (attach schedule) and depletion							
Ad	20	Occupancy							
	21	Travel, conferences, and meetings							
and	22	Printing and publications							
	23	Other expenses (att. sch.)							
Ë	24	Total operating and administrative expenses.							
Operating		Add lines 13 through 23	36,40	_	10,139 0	0			
ď	25	Contributions, gifts, grants paid	200,000			200,000			
_	26	Total expenses and disbursements. Add lines 24 and	25 236,40	4	10,139 0	200,000			
	27	Subtract line 26 from line 12:							
	а	Excess of revenue over expenses and disburseme							
	b	Net investment income (if negative, enter -0-)			40,093				
	С	Adjusted net income (if negative, enter -0-)			0				

1,000

Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed

Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid

Enter the amount of line 10 to be: Credited to 2023 estimated tax

Form **990-PF** (2022)

9,438

8,438

9

10

11

Refunded

9

10

Pa	rt VI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ (2) On foundation managers.\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	ME			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		7.5	
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See instructions for Part XIII. If "Yes,"	_		37
40	complete Part XIII	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	4.0		v
	names and addresses	10		X
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	44		х
12	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions  Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	11		Λ
12		12		х
13	person had advisory privileges? If "Yes," attach statement. See instructions  Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
13	Website address N/A	13	21	
14	The best of CDTNNAVED TRICT Telephone 207.5	53-	716	0
	PO BOX 7160		. <del></del>	. <b>Y</b>
	Leasted at POPMY AND	2		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> – check here			٠٠٠٠
	and enter the amount of tax-exempt interest received or accrued during the year			·· ∟
16	At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority		Yes	No
-	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			
		00	U-DE	(0000)

Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of

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

foundation had excess business holdings in 2022.)

purposes?

the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable

... 4b X
Form 990-PF (2022)

Х

3b

4a

N/A

orm	990-PF (2022) THE OLD BUG LIGHT CHARITABLE	01-0	<u>514859</u>			Pa	age <b>6</b>
Pa	art VI-B Statements Regarding Activities for Which Form	1 4720 May B	e Required (	continued)			
5а	During the year did the foundation pay or incur any amount to:					Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?			5a(1)		X
	(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, direct	ly or				
	indirectly, any voter registration drive?				5a(2)		X
	(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						
	(4)(A)? See instructions				5a(4)		X
	(5) Provide for any purpose other than religious, charitable, scientific, literary, of	or educational pur	ooses, or for				
	the prevention of cruelty to children or animals?				5a(5)		X
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify ur				. ,		
	in Regulations section 53.4945 or in a current notice regarding disaster assista	·		N/A	5b		
С	Organizations relying on a current notice regarding disaster assistance, check	i .					
d	If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi						
				N/A	5d		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).						
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to p	pav premiums on a	a personal				
	benefit contract?	, p			6a		X
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit co	ntract?		6b		X
~	If "Yes" to 6b, file Form 8870.	orderial borient co	<u>C</u>		0.0		
7а	At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction			7a		X
b	If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$						
•	excess parachute payment(s) during the year?				8		X
P	Information About Officers, Directors, Trustees, F				_	es.	
	and Contractors		goo,g	,,	J. <b>.</b>	,,,	
1 L	ist all officers, directors, trustees, and foundation managers and their co	ompensation. Sec	e instructions.				
				(d) Contributions to			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit plans and deferred		pense ad r allowa	
		devoted to position	enter -0-)	compensation	Oute	i allowa	IICCS
SE	E STATEMENT 7						
2	Compensation of five highest-paid employees (other than those included	on line 1 – see	instructions). If	none, enter			
	"NONE."		,	,			
		(b) Title, and average		(d) Contributions to			
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		pense ad r allowa	
		devoted to position		compensation	Out	a dilovva	1003
NC	NE						
	·						
					†		
• • •							
	I number of other employees paid over \$50,000	I .		I.	+		_

	<u>514859</u>	Page <b>7</b>
Part VII Information About Officers, Directors, Trustees, Foundation Ma	anagers, Highly Paid	Employees,
and Contractors (continued)	-t' Ift (1)	IONE "
3 Five highest-paid independent contractors for professional services. See instru		
(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		
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informa organizations and other beneficiaries served, conferences convened, research papers produced, etc.	tion such as the number of	Expenses
1 N/A		
2	.)	
3		
4		
<b>4</b>		
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 N/A		
2		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

Cash distribution test (attach the required schedule)

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4 ...

Form **990-PF** (2022)

200,000

3a

3b

4

3

purposes

Amounts set aside for specific charitable projects that satisfy the:

Suitability test (prior IRS approval required)

63,118

75,717

Form **990-PF** (2022)

d

Excess from 2021

The form in which applications should be submitted and information and materials they should include:

N/A

Any submission deadlines:

N/A

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

N/A

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year ACLU OF MAINE 121 MIDDLE STREET PUBLIC PORTLAND ME 04101 **OPERATIONS** 3,000 FOR BICYCLE COALITION OF MAINE 38 DIAMOND STREET UNIT B PUBLIC PORTLAND ME 04101 FOR **OPERATIONS** 4,000 COMPASSIONATE CARE ALS PO BOX 1052 PUBLIC WEST FALMOUTH MA 02574 TO SUPPORT PROGRAMMING AND RESOURCES 2,000 EASTERN TRAIL ALLIANCE PO BOX 250 PUBLIC **SACO ME 04072** FOR **OPERATIONS** 1,000 FRIENDS OF CONGRESS SQUARE PARK PO BOX 1184 PUBLIC PORTLAND ME 04104 CONGRESS SQUARE PARK REDESIGN 25,000 GULF OF MAINE RESEARCH INSTITUTE 350 COMMERCIAL STREET PUBLIC PORTLAND ME 04101 FOR **OPERATIONS** 5,000 HOSPICE OF SOUTHERN MAINE 180 US ROUTE ONE PUBLIC SCARBOROUGH ME 04074 FOR **OPERATIONS** 4,000 PROJECT IMMIGRANT LEGAL ADVOCACY PO BOX 17917 PUBLIC PORTLAND ME 04112 FOR **OPERATIONS** 1,000 **LEARNINGWORKS** 181 BRACKETT ST PUBLIC 38,000 PORTLAND ME 04102 **OPERATIONS** FOR MAKE-A-WISH MAINE 66 MUSSEY RD PUBLIC SCARBOROUGH ME 04074 TO SUPPORT WISHES FOR MAINE CHILDREN 5,000 200,000 Total **b** Approved for future payment N/A Total 3h

Part XV	-A Analysis of Income-Producing A	Activities				
Enter gross	amounts unless otherwise indicated.	Unrelate	d business income	Excluded	by section 512, 513, or 514	(e)
4. De		(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
_	service revenue:					
		-				
		-				
f —						
q Fees	s and contracts from government agencies					
	ship dues and assessments					
3 Interest	on savings and temporary cash investments				A	
4 Dividend	Is and interest from securities			14	50,232	
	al income or (loss) from real estate:					
	t-financed property					
<b>b</b> Not	debt-financed property					
6 Net renta	al income or (loss) from personal property					
	turneture and the second			G	)	
	(loss) from sales of assets other than inventory			18	-72,627	
9 Net inco	me or (loss) from special events				,	
10 Gross p	rofit or (loss) from sales of inventory					
11 Other re				'		
	DERAL INCOME TAX REFUNDS		30	1	5,177	
					-	
_						
е						
12 Subtotal	. Add columns (b), (d), and (e)			0	-17,218	(
13 Total. A	dd line 12, columns (b), (d), and (e)				13	-17,218
	neet in line 13 instructions to verify calculations.)					
Part XV	-B Relationship of Activities to the	<b>Accomplish</b>	ment of Exemp	t Purpo	oses	
Line No.	Explain below how each activity for which income of the foundation's exempt purposes (other than					ne accomplishment
N/A	2.0	•				
	XO					
	/ O`					

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)) organizations) or in section 527, relating to political organizations?  1 Transfers from the reporting foundation to a noncharitable exempt organization of:  1 (1) Cash 1 (2) Other assets 1 (3) Other assets 1 (4) Other assets 1 (4) Other assets 1 (5) Other assets 1 (6) Political companies 1 (7) Political companies 1 (8) Political companies 1 (9) Political companies 1 (1) Other assets 1 (1) Other assets 1 (1) Other assets 1 (2) Purchased of assets from a noncharitable exempt organization 1 (2) Purchased of assets from a noncharitable exempt organization 1 (3) Renal of facilities, equipment, or other assets 1 (4) Reimboursement arrangements 1 (5) Loans or loan guarantees 1 (6) Political companies 1 (7) Other assets 1 (8) Political companies 1 (9) Name of recordanistic exempt organization 2 (9) Name of recordanistic exempt organization 3 (9) Name of record	Part	XVI	Organization Reg	jarding ir	ansters to a	ind Transact	ions and Relationshi	ps with Nonchai	Itable	e Exe	emp
a Transfers from the reporting foundation to a noncharitable exempt organization of:  (1) Cash (2) Other assets.  (3) Other assets.  (4) Sales of assets to a noncharitable exempt organization (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimburgement arrangements (5) Loans or loan quateralies (6) Performance of services or membership or fundratising solicitations (6) Performance of services or membership or fundratising solicitations (7) India or long quateralies (8) Performance of services or membership or fundratising solicitations (8) Performance of services or membership or fundratising solicitations (9) India or long quateralies (1) India or long quateralies (1) India or long quateralies (2) India or long quateralies (3) India or long quateralies (4) India or long quateralies (5) Loans or loan quateralies (6) Performance of services or membership or fundratising solicitations (6) India or long quateralies (7) India or long quateralies (8) Performance of services or long quateralies (9) India or long quateralies (1) India organization (1) India organization (1) India organization	1 Did	d the org		directly enga	ge in any of the f	ollowing with any	other organization describe	ed		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:  (1) Casis (2) Other assets  (2) Other assets  (3) Control assets to a noncharitable exempt organization  (1) Sales of assets to a noncharitable 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 fundrating solicitations  (7) Sales of loadilities, equipment, mailing lists, other assets, or paid employees  (8) Ferformance of services or membership or fundrating solicitations  (9) Every of the above is "Yes," complete the following schedule. Column (b) should always show/fittle (att, market value of the goods, other assets, or services growth by the sporting foundation. If the foundation received legit (b) The answer to any of the above is "Yes," complete the following schedule. Column (b) should always show/fittle (att, market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services growth by the sporting foundation. If the foundation received legit (b) The services of the se	in	section 5	501(c) (other than sec								
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations  (g) hereo or organization described in section 501(c) (other thang-aptions) 501(c)(3) or in section 527?  b. If "Yes," complete the following schedule.  (g) here of organization (g) here or foundation directly or find feet to seem or organization (g) become or destination or described in section 501(c) (other thang-aption) 501(c)(3) or in section 527?  If "Yes," complete the following schedule.  (g) here or organization (g) become or feetilists, explanement, 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 of the goods, other assets, or services given by the reporting foundation. If the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other thang-aption) 501(c)(3) or in section 527?  b. If "Yes," complete the following schedule.  (g) here of organization (g) here of organization (g) become or feetilists, representation, and about a feetilist representation or schedules.  (g) here of organization or schedules.  (g) here or organization or schedules.  (g) here of organization or schedules.  (g) here or organization or schedules.  (g) here or org				ndation to a n	noncharitable exer	npt organization	of:				
(2) Other assets b Other transactions:  (1) Sales of assets to a noncharitable exempt organization  (2) Purchasses of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Reimbursement arrangements  (5) Loans or loan guarantee  (6) Performance of services or membership or fundraising solicitations  (6) Performance of services or membership or fundraising solicitations  (7) Sharing of facilities, equipment, maling lats, other assets, or paid employees  (8) Performance of services or membership or fundraising solicitations  (9) In 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, their assets, or services given by the reporting foundation. If the foundation received lies than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services services received.  (9) Arront include  (9) Name of organization  (9) Type," complete the following schedule.  (9) Type, "complete the followin	(1)	Cash	, ,						1a(1)		X
b Other transactions:  (1) Sales of assets to a noncharitable 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  (7) Sales of loan guarantees  (8) Performance of services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (9) Performance of services or membership or fundraising solicitations  (15) Sales of loan guarantees  (6) Performance of services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (9) Performance of services or membership or fundraising solicitations  (15) Sales of loan guarantees  (15) Sales of solicities, equipment, making lists, other assets, or paid employees  (16) Performance of services or membership or fundraising solicitations  (16) Sales of solicities, equipment, making lists, other assets, or paid employees  (17) Sales of the fundation fundraising solicitations  (18) Sales of the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations  (9) Description directly or indirectly affiliated with, or related to, one or more tax-exempt organizations  (9) Description directly or indirectly affiliated with, or related to, one or more tax-exempt organizations  (9) Description directly or indirectly affiliated with, or related to, one or more tax-exempt organizations  (17) Sales of the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations  (18) Description of related range affiliated with, or related to, one or more tax-exempt or	(2)	Other a							1a(2)		X
(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  (7) Loans or loan guarantees  (8) Performance of services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (9) In the asset of facilities, equipment, mailing lists, other assets, or paid employees  (10) Las or other assets, or services given by the reporting foundation. If the foundation received legs than fair market value in any transaction or sharing arrangements in the condition received legs than fair market value in any transaction or sharing arrangements. Show in column (g) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received legs than fair market value in any transaction or sharing arrangements.  (9) In the received legs than fair market value in any transaction or sharing arrangements.  N/A  2a is the foundation directly or indirectly efficient fundation are proposed to the goods, other assets, or services given by the reporting foundation. If the foundation received legs than fair market value in any transaction of sharings, transactions, and sharing arrangements.  N/A  2a is the foundation directly or indirectly efficient fundation are proposed to the goods, other assets, or services received.  (9) Name of organization directly efficient fundation of the proposed of the goods, other assets, or services received.  (9) Name of organization directly or indirectly efficient fundation of the proposed of the goods, other assets, or services exceived.  (9) Name of organization of prepared (other than isopoyer) is based on all information of which prepared to any knowledge.  (9) Name of organization of prepared (other than isopoyer) is based on all information of which prepared to any knowledge.  (A) Name of the goods of the goods of t	<b>b</b> Ot	her trans	sactions:								
(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  (7) Loans or loan guarantees  (8) Performance of services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (9) In the asset of facilities, equipment, mailing lists, other assets, or paid employees  (10) Las or other assets, or services given by the reporting foundation. If the foundation received legs than fair market value in any transaction or sharing arrangements in the condition received legs than fair market value in any transaction or sharing arrangements. Show in column (g) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received legs than fair market value in any transaction or sharing arrangements.  (9) In the received legs than fair market value in any transaction or sharing arrangements.  N/A  2a is the foundation directly or indirectly efficient fundation are proposed to the goods, other assets, or services given by the reporting foundation. If the foundation received legs than fair market value in any transaction of sharings, transactions, and sharing arrangements.  N/A  2a is the foundation directly or indirectly efficient fundation are proposed to the goods, other assets, or services received.  (9) Name of organization directly efficient fundation of the proposed of the goods, other assets, or services received.  (9) Name of organization directly or indirectly efficient fundation of the proposed of the goods, other assets, or services exceived.  (9) Name of organization of prepared (other than isopoyer) is based on all information of which prepared to any knowledge.  (9) Name of organization of prepared (other than isopoyer) is based on all information of which prepared to any knowledge.  (A) Name of the goods of the goods of t	(1)	Sales o	of assets to a nonchar	ritable exempt	t organization				1b(1)		
(4) Reimbursement arrangements   1b4d  X   X   (5) Loans or loan guarantees   1b6d  X   X   (6) Loans or loan guarantees   1b6d  X   X   (6) Performance of services or membership or fundraising solicitations   1b6   X   X   (b6   X   X   C   X   X   D   X   X   D   X   X   D   X   X	(2)	Purcha	ses of assets from a	noncharitable	exempt organiza	ition			1b(2)		
(4) Reimbursement arrangements   1b4d  X   X   (5) Loans or loan guarantees   1b6d  X   X   (6) Loans or loan guarantees   1b6d  X   X   (6) Performance of services or membership or fundraising solicitations   1b6   X   X   (b6   X   X   C   X   X   D   X   X   D   X   X   D   X   X	(3)	Rental	of facilities, equipmen	t, or other as	sets				1b(3)		
(e) Performance of services or membership or fundraising solicitations  c Sharing of facilities, equipment, mailing lists, other assets, or paid employees  d if the answer to any of the above is "6s," complete the following schedule. Column (b) should always show the fall 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 (b) the value of the goods, other assets, or sharing arrangement, show in column (b) the value of the goods, other assets, or sharing arrangement, show in column (b) the value of the goods, other assets, or sharing arrangements.  N/A  2a Is the foundation directly or indirectly affiliated (with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(c)(s)) or in section 52??  b If "Yes; "Complete the following schedules  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Under penalties of periun, 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 conclude. Declaration of properer (other than tax-eyer) is bested on all information of which preparer has any knowledge.  Under penalties of periun, 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 conclude. Declaration of properer (other than tax-eyer) is bested on all information of which preparer has any knowledge.  Under penalties of periun, 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.  TRUSTEE  Significant of officer or invokes  Prims name  KELLY, DAWSON & SOUTER, LLC  PTIN PO151515981.  Firms name  KELLY, DAWSON & SOUTER, LLC  PTIN PO151515981.	(4)	Reimbu	ırsement arrangemen	nts							
c Sharing 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 fait 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) the no.  (b) Amount involved  (c) Name of rondvariable exempt organization  (d) Description of families, transactions, and sharing arrangements  N/A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  b if "Yes," complete the following schedule.  (a) Name of organization  (b) Name of organization  (c) Description of relationships  N/A  Under peralties of peoply, Lectace that I have exempted this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true.  Under peralties of peoply, Lectace that I have exempted this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true.  Under peralties of peoply, Lectace that I have exempted this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true.  TRUSTEE  Signature of officer or trustee  Date  TRUSTEE  Print Trustee  Preparer  NAN W. DAWSON  Preparer  Signature of officer or trustee  NEXAN W. DAWSON  Preparer  Firms name  KELLLY, DAWSON & SOUTER, LLC  Print Pol1515981  Firms seen 92-0843814	(5)	Loans	or loan guarantees								
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the (all market value of the goods, other assets, or "services given by the reporting foundation. If the foundation received lies 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) Lie no.  (b) Amount involved  (c) Name of nontratratate exempt organization  (d) Description of flaribles, transactions, and sharing arrangements.  N/A   2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section) 501(c)(3)) or in section 527?  (e) Lif "Yes," complete the following schedule.  (b) Type of organization  (c) Name of organization of relationships.  (d) Name of organization of relationships.  (e) Name of organization of relationships.  (b) Type of organization of relationships.  (c) Name of organization of relationships.  (d) Description of relationships.  (e) Description of relationships.  (e) Description of relationships.  (f) Description of relationships.  (g) Name of organization of relationships.  (g) Name of organization of relationships.  (h) Name of organization of relationships.  (g) Name of organization of relationships.  (g) Name of organization of relationships.  (g) Description of relat	(6)	Perform	nance of services or r	nembership o	or fundraising soli	citations					
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.  (g) Description of lightless, transactions, and sharing arrangements  N/A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section \$501(c)(3)) or in section 527?									_1c		_ X_
value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (e) Name of nondantable exempt organization  (d) Description of fearings, transactors, and sharing arrangements  N/A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  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, ornect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Indicate 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, with the preparer of the penalties of perjury is declared that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, with the preparer of the penalties of perjury is declared that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, with the preparer of the penalties of perjury is declared that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, with the preparer of the penalties of perjury is declared that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true.  First schedules are statements, or to the penalties of					-	-					
(d) Description of fearifishin, transactions, and sharing arrangements  N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)) or in section 527?  (e) Name of organization  (f) Type of organization  (g) Description of featings, transactions, and sharing arrangements  Yes X No  b If "Yes," Complete the following schedule,  (g) Name of organization  (g) Description of relationship  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 tax,eayer) is based on all information of which preparer has any knowledge.  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 tax,eayer) is based on all information of which preparer has any knowledge.  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 tax,eayer) is based on all information of which preparer has any knowledge.  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 tax,eayer) is based on all information of which prepare has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than tax,eayer) is based on all information of which prepare has any knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than tax,eayer) is based on all information of which pr			-	_		-					
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 301(c)(3)) or in section 527?									arrangen	nante	
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section \$01(c)(3)) or in section 527?    b   if "Yes," complete the following schedule.   (a) Name of organization   (b) Type of organization   (c) Description of relationship		ne no.	(b) Amount involved	(c) Name	of Honoramable exem	ipt Organization	(u) Description of transic	13, transactions, and snaming	arrangen	icino	
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No	11/11						60				
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No							0				
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No											
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No							30				
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No											
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No							5				
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No						X					
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No											
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No											
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No						4					
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No					· · · · ·						
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No											
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No											
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No											
described in section 501(c) (other than section 501(c)(3)) or in section 527?    Yes   No				d cer cal							
b If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  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.  Sign Here  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  RYAN W. DAWSON  RYAN W. DAWSON  Firm's name  KELLY, DAWSON & SOUTER, LLC  PTIN P01515981  Firm's address  373 BROADWAY  Firm's address  Firm's address  PRIN P02-0843814			•				ax-exempt organizations			<b>v</b>	7 N.
(a) Name of organization (b) Type of organization (c) Description of relationship  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.  Sign Here  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Preparer's signat					1 501(0)(3)) 01 111	section 527?			i	es 🔼	. 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.  Sign Here  TRUSTEE  Signature of officer or trustee  Date  TRUSTEE  Title  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  RYAN W. DAWSON  RYAN W. DAWSON  Preparer  Use Only  Firm's name  KELLY, DAWSON & SOUTER, LLC  PTIN P01515981  Firm's address  373 BROADWAY  Firm's EIN 92-0843814	<u> </u>			scriedule.	(b) Type of	organization	(c) D	escription of relationship			
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.    May the IRS discuss this return with the preparer shown below? See instructions.   Yes   No			-,		(-) -)	9	(-, -				
Sign Here  Signature of officer or trustee  Paid Preparer Use Only  Paid Preparer Use Only  Date Correct, and complète. Déclaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  May the IRS discuss this return with the preparer shown below? See instructions. X Yes No  TRUSTEE  Title  Print/Type preparer's name  Preparer's signature  Preparer's signature  Preparer's signature  Print's name KELLY, DAWSON & SOUTER, LLC  PTIN P01515981  Firm's address 373 BROADWAY  Firm's address 373 BROADWAY  Firm's signature  PTIN P01515981			1								
Sign Here  Signature of officer or trustee  Paid Preparer Use Only  Paid Preparer Use Only  Date Correct, and complète. Déclaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  May the IRS discuss this return with the preparer shown below? See instructions. X Yes No  TRUSTEE  Title  Print/Type preparer's name  Preparer's signature  Preparer's signature  Preparer's signature  Print's name KELLY, DAWSON & SOUTER, LLC  PTIN P01515981  Firm's address 373 BROADWAY  Firm's address 373 BROADWAY  Firm's signature  PTIN P01515981			101	,							
Sign Here  Signature of officer or trustee  Paid Preparer Use Only  Paid Preparer Use Only  Date Correct, and complète. Déclaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  May the IRS discuss this return with the preparer shown below? See instructions. X Yes No  TRUSTEE  Title  Print/Type preparer's name  Preparer's signature  Preparer's signature  Preparer's signature  Print's name KELLY, DAWSON & SOUTER, LLC  PTIN P01515981  Firm's address 373 BROADWAY  Firm's address 373 BROADWAY  Firm's signature  PTIN P01515981											
Sign Here  Signature of officer or trustee  Paid Preparer Use Only  Paid Preparer Use Only  Date Correct, and complète. Déclaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  May the IRS discuss this return with the preparer shown below? See instructions. X Yes No  TRUSTEE  Title  Print/Type preparer's name  Preparer's signature  Preparer's signature  Preparer's signature  Print's name KELLY, DAWSON & SOUTER, LLC  PTIN P01515981  Firm's address 373 BROADWAY  Firm's address 373 BROADWAY  Firm's signature  PTIN P01515981											
Sign Here    TRUSTEE   Signature of officer or trustee   Date   Title									oelief, it i	s true,	
Here    TRUSTEE   No   Title   No   T		correct, a	and complete. Declaration of	proparer (outer	than taxpayor) is base	or all information	or which proparer has any knowledg	May the IRS dis			
TRUSTEE     Title     Title   Title     Title     Title     Title     Title     Title     Title     Title     Title     Title     Title     Title     Title   Title     Title   Title   Title     Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Title   Ti											٦ <sub>No</sub>
Signature of officer or trustee   Date   Title	Here							OGC IIIOITOOIOTIC	· 21	.00	
Print/Type preparer's name								<u>.</u>		_	
Paid Preparer Use Only         RYAN W. DAWSON         RYAN W. DAWSON         08/14/23             Firm's name   Firm's address           KELLY, DAWSON & SOUTER, LLC   PTIN P01515981             Firm's address           373 BROADWAY   Firm's EIN 92-0843814		Signature	of officer or trustee			Date	Title				
Paid   RYAN W. DAWSON   RYAN W. DAWSON   08/14/23		Print/T	ype preparer's name			Preparer's signatu	re	Date		Check	if
Preparer Use Only         Firm's address         KELLY, DAWSON         RYAN W. DAWSON         PTIN         P01515981           Firm's address         373 BROADWAY         Firm's Elin         92-0843814	Paid	D37333	ti Daticon			DVAN G	ALICON	00.41	4 / 2 2	self-em	nployed
Use Only Firm's address 373 BROADWAY Firm's Ell 92-0843814		r 💳	TZTOT T	V Dater	TON C GOT					<u> </u>	
	-	Firm's	272			TEK, PP(	•				
		Firm's				04106-2	952				

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year OLYMPIA SNOWE WOMENS LEADERSHIP 1 CANAL PLAZA PUBLIC PORTLAND ME 04101 **OPERATIONS** 5,000 FOR PORTLAND MUSUEM OF ART SEVEN CONGRESS SQUARE PUBLIC PORTLAND ME 04101 FOR **OPERATIONS** 7,000 PORTLAND TRAILS 305 COMMERCIAL STREET PUBLIC OPERATIONS PORTLAND ME 04101 FOR 2,000 SAILMAINE 58 FORE STREET PUBLIC PORTLAND ME 04101 FOR **OPERATIONS** 9,000 SPACE GALLERY PUBLIC 538 CONGRESS STREET PORTLAND ME 04101 FOR **OPERATIONS** 1,000 THE TELLING ROOM 225 COMMERCIAL STREET PUBLIC INVESTING PORTLAND ME 04101 IN WI-FI & UPDATING TECH 12,000 THE DEMPSEY CENTER 29 LOWELL STREET PUBLIC LEWISTON ME 04240 GENERAL OPERATING **EXPENSES** 10,000 PLANNED PARENTHOOD FEDERATION OF PO BOX 97166 PUBLIC WASHINGTON DC 20090 PATIENT FINANCIAL ASSISTANCE FUND 50,000 AMERICAN CANCER SOCIETY 130 LEGRANDE AVE PUBLIC CHARLOTTE COURT HOUSE VA FOR OPERATING EXPENSES 7,000 PORTLAND OVATIONS 50 MONUMENT SQUARE PUBLIC CULTIVATING CURIOSITY BOOK PURCHASES PORTLAND ME 04101 5,000 Total **b** Approved for future payment N/A Total 3h

3b

Total

01-0514859

## **Federal Statements**

FYE: 3/31/2023

### Statement 1 - Form 990-PF, Part I, Line 11 - Other Income

Description					
	Revenue per Books		Net Investment Income	_	Adjusted Net Income
FEDERAL INCOME TAX REFUNDS					
	\$_	5,177	\$	\$	
TOTAL	\$_	5,177	\$ 0	\$	0

## Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

	Description								
		 Total	_	Net Investment		Adjusted Net	_	Charitable Purpose	
ACCOUNTING	FEES					5			
		\$ 1,760	\$_	440	\$_	7,	\$_		
TOTAL		\$ 1,760	\$_	440	\$	0	\$_		0

### Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees

	Description								
INVESTMENT	FEES		Total	Net Investment		Adjusted Net	_	Charitable Purpose	
IIIVIBITIIIII	1 1110	\$	9,699 \$	9,699	\$		\$_		
TOTAL		Ś	9.699 \$	9.699	Ś	0	Ś	0	

## Statement 4 - Form 990-PF, Part I, Line 18 - Taxes

#### Description Adjusted Charitable Net Purpose Total Investment Net FEDERAL EXCISE TAX - PRIOR YEAR \$ 14,945 \$ FEDERAL EXCISE TAX - CURRENT YEA 10,000 TOTAL 24,945 0 \$ 0

8/14/2023 12:31 PM

01-0514859

## Federal Statements

FYE: 3/31/2023

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

	Description					
		 Beginning of Year	 End of Year	Basis of Valuation	_	Fair Market Value
COMMON STOCKS						
		\$ 1,691,490	\$ 1,508,965	COST	\$_	1,713,000
TOTAL		\$ 1,691,490	\$ 1,508,965		\$	1,713,000

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

Description					~~		. )
	_	Beginning of Year	_	End of Year	Basis of Valuation	_	Fair Market Value
CORPORATE BONDS					5		
	\$_	625,422	\$_	551,896	COST	\$_	550,669
TOTAL	\$_	625,422	\$_	551,896		\$_	550,669

## Statement 7 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.

# Name and Address

	Title	Average Hours Com	npensation Ber	nefits Exp	enses
NATHANIEL T. MOORE			0	0	0
P.O. BOX 7160	TRUSTEE	0.00	U	U	U
PORTLAND ME 04112-7160		O			
CHRISTOPHER S. MOORE		0.00	0	0	0
P.O. BOX 7160	TRUSTEE	0.00	U	0	U
PORTLAND ME 04112-7160	),				
JENNIFER M. VANDEKREER	KE TRUSTEE	0.00	0	0	0
P.O. BOX 7160	IKOSIEE	0.00	O	U	O
PORTLAND ME 04112-7160	)				
MERYL NIERMAN	TRUSTEE	0.00	0	0	0

OLDBUG The Old Bug Light Charitable

8/14/2023 12:31 PM

01-0514859 FYE: 3/31/2023

## **Federal Statements**

# Statement 7 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)

Name	and			
Address				

	Title	Average Hours	Compensation	Benefits	Expenses
P.O. BOX 7160					<u> </u>
PORTLAND ME 04112-7160					•
ROBIN VANDEKREEKE	TRUSTEE	0.00	0		9
P.O. BOX 7160	TROSIEE	0.00	O		0
PORTLAND ME 04112-7160				0	
BREE LACASSE	TRUSTEE	0.00		0	0
P.O. BOX 7160	IKUSIEE	0.00		U	U
PORTLAND ME 04112-7160					
< of	Motin	ailon			