Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

| | | r year 2019 or tax year beginning AUG | 1, 2019 | , and ending | JUN 30, 202 | 0 |
|---------------------------------------|----------|---|----------------------------------|---------------------|---|--|
| | | undation | | | A Employer identification | on number |
| | | ARA AND J HARRISON HOL | MAN | | NO 5001 | |
| | | ITABLE TRUST | | | 84-226284 | 5 |
| | | street (or P.O. box number if mail is not delivered to street | address) | Room/suite | B Telephone number | |
| | | PINE STREET | | 2 I | 603-303-1 | |
| | | n, state or province, country, and ZIP or foreign p | ostal code | | C If exemption application is | pending, check here |
| | | LAND, ME 04102-3540 | | | | as shoot bare |
| G C | heck all | I that apply: X Initial return | Initial return of a for | rmer public charity | D 1. Foreign organizatio | ns, check here |
| | | Final return | Amended return | | Foreign organizations check here and attach | meeting the 85% test, |
| | | X Address change | Name change | | | |
| H C | | rpe of organization: X Section 501(c)(3) ex | Other taxable private foundation | tion | E If private foundation s | 1)(A), check here |
| | Secti | on 4947(a)(1) nonexempt charitable trust et value of all assets at end of year J Accounti | | Accrual | F If the foundation is in | |
| | | | ther (specify) | Accidal | | (1)(B), check here |
| (II | | t II, col. (c), line 16) 0i | nn (d), must be on cash basi | s.) | diddi socion cor (c) | 1/(5), 611661 11616 11 |
| Da | rt I | Analysis of Revenue and Expenses | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements |
| 1 4 | (| Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) | expenses per books | income | income | for charitable purposes (cash basis only) |
| | | contributions, gifts, grants, etc., received | | | N/A | |
| | 2 C | heck X if the foundation is not required to attach Sch. B | | | | |
| | 3 In | nterest on savings and temporary ash investments | 59. | 59. | | STATEMENT 1 |
| | | Dividends and interest from securities | 31310. | 31310. | | STATEMENT 2 |
| | | Pross rents | | | | |
| | bΝ | let rental income or (loss) | | | | |
| d) | 6a N | et gain or (loss) from sale of assets not on line 10 | -16667. | | | |
| nue | b G | let gain or (loss) from sale of assets not on line 10 fross sales price for all ssets on line 6a 111664. | | | | |
| Revenue | 7 c | apital gain net income (from Part IV, line 2) | | 0. | | |
| . 8 | | let short-term capital gain | | | | |
| | 9 lr | ncome modifications | | | | |
| | 10a ar | iross sales less returns nd allowances | | | | |
| | | ess: Cost of goods sold | | | | |
| | | Gross profit or (loss) | | | | The second secon |
| | | Other income | 14702. | 31369. | | |
| _ | | Compensation of officers, directors, trustees, etc. | 10400. | 5200. | | 5200. |
| | | Other employee salaries and wages | 201001 | | | |
| | | Pension plans, employee benefits | | | | |
| es | | egal fees | | | | |
| ens | b A | Accounting fees | | | | |
| Ξxb | c C | Other professional fees STMT 3 | 8125. | 8125 | | 0. |
| ve | 17 li | nterest | | | | |
| rati | 18 T | 「axes | | | | |
| nist | 19 D | Depreciation and depletion | | | | |
| Ē | 20 0 | Occupancy | | | | |
| Ä | 21 T | Fravel, conferences, and meetings | , | | | |
| and | 22 F | Printing and publications | | | | |
| ing | 23 | Other expenses | | | - | |
| Operating and Administrative Expenses | 24 T | Total operating and administrative | 18525. | 13325 | | 5200. |
| Ope | 05 0 | expenses. Add lines 13 through 23 | 0. | 10020 | | 0. |
| | 25 | Fotal expenses and disbursements. | 0. | | | |
| | | Add lines 24 and 25 | 18525. | 13325 | | 5200. |
| _ | | Subtract line 26 from line 12: | | | | 11 PAGE 17 |
| | | Excess of revenue over expenses and disbursements | -3823. | | | 2 (198) |
| | | Net investment income (if negative, enter -0-) | | 18044 | | |
| | CA | Adjusted net income (if negative, enter -0-) | | | N/A | |

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

| | | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. | Beginning of year | | End of | | | |
|--------------|------|---|--------------------|------------------|----------------------|--------------------------|---------------------------------------|---|
| P | art | Column should be for end-of-year amounts only. | (a) Book Value | (b) Book Value | | (c) Fair | Market Va | |
| П | 1 | Cash - non-interest-bearing | | 216 | 305. | | 216 | <u>805.</u> |
| | | Savings and temporary cash investments | | | | | | |
| | | Accounts receivable - | | | | | | |
| | | Less; allowance for doubtful accounts | | | | | | |
| | | Pledges receivable | | | | | | |
| | | Less: allowance for doubtful accounts | | | | | | |
| | | Grants receivable | | | | | | |
| ļ | | Receivables due from officers, directors, trustees, and other | | | | | | |
| ı | 6 | 1 | | | ł | _ | | |
| | - | disqualified persons Other notes and toans receivable | | | | | | |
| 1 | 1 | Less; allowance for doubtful accounts | | | - 1 | | | |
| | | | | | | | | |
| Assets | | Inventories for sale or use Prepaid expenses and deferred charges | | | | | | |
| şş | | | | | | | | |
| ` | | Investments - U.S. and state government obligations | | | | | | |
| | | Investments - corporate stock | | | | | | |
| | _ | Investments - corporate bonds | | | | | | |
| | 11 | Investments - land, buildings, and equipment: basis | | | ļ | | | |
| | | Less: accumulated depreciation | | | | | | |
| | 12 | Investments - mortgage loans | | 2210 | 080 | | 2361 | 742. |
| | 13 | Investments - other STMT 5 | | 2210 | 000. | | 2002 | , |
| | 14 | Land, buildings, and equipment basis | | | | | | |
| | | Less: accumulated depreciation | | | | | | |
| | | Other assets (describe | | | | | | |
| | 16 | Total assets (to be completed by all filers - see the | , | 2426 | 005 | | 2579 | 547. |
| | | instructions. Also, see page 1, item I) | | $0. \qquad 2426$ | 885. | | 4570 | <u> </u> |
| | 17 | Accounts payable and accrued expenses | | | | <u> </u> | | · |
| | 18 | Grants payable | | | | | | |
| S | 19 | Deferred revenue | | | | | | |
| 蓋 | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | | | |
| Liabilities | 21 | Mortgages and other notes payable | | | | <u> </u> | | |
| = | 22 | Other liabilities (describe) | | | | | ····· | |
| | | | | | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | | 0. | 0. | | | |
| | | Foundations that follow FASB ASC 958, check here ▶ 📖 | | | i | | | |
| ģ | | and complete lines 24, 25, 29, and 30. | | | | | | |
| ဦ | 24 | Net assets without donor restrictions | | | | | | |
| Fund Balance | 25 | Net assets with donor restrictions | | | | | · | |
| 9 | | Foundations that do not follow FASB ASC 958, check here ▶ 🗶 | | | | A | | |
| 흕 | ļ | and complete lines 26 through 30. | | | | 18 A.A. 18 18 A.A. 18 | | |
| <u>م</u> | 26 | Capital stock, trust principal, or current funds | | | 708. | | | |
| | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | | 0. | 0. | | · · · · · · · · · · · · · · · · · · · | |
| Net Assets | 28 | Retained earnings, accumulated income, endowment, or other funds | | | 823. | | | |
| ¥ | 29 | Total net assets or fund balances | | $0. \qquad 2426$ | 885. | | | |
| ž | | | | 1 | | Ĭ . | | |
| | 30 | Total liabilities and net assets/fund balances | | $0. \qquad 2426$ | 885. | | | <u> </u> |
| | | | alances | | | | | |
| _ | | | | | | | | |
| 1 | Tota | al net assets or fund balances at beginning of year - Part II, column (a), line | 29 | | | 1 | | Λ |
| | (mu | st agree with end-of-year figure reported on prior year's return) | | | | ļ — | | 0. |
| 2 | Ente | or amount from Part I, line 27a | | | 2 | - | | 3823. |
| 3 | Oth | er increases not included in line 2 (itemize) 🕨 | SEE_ | STATEMENT 4 | <u> 3</u> | | | 0708. |
| 4 | Add | l lines 1, 2, and 3 | | | ····· 4 | | 242 | <u> </u> |
| 5 | Dec | reases not included in line 2 (itemize) | | | 5 | | 242 | 0. |
| 6 | Tot | al net assets or fund balances at end of year (line 4 minus line 5) - Part II, c | olumn (b), line 29 | | 6 | | | <u>5885 </u> |
| | | | | | | FOF | III 990-I | · (2019) |

| Form 990-PF | (2019) CHA | RITABI | ND J HARRI E TRUST | | | | | | 84-22 | 62845 | Page 3 |
|-----------------|---|--------------------------------|---|--|--------------------------------------|--------------|--------------------------------------|-----------|-----------------------------------|----------------------------------|--------------------|
| Part IV | (a) List and describe | the kind(s) o | ses for Tax on In f property sold (for exan common stock, 200 shs | nple, real estat | | l, b | low acquired Purchase Donation | (c) D | ate acquired o., day, yr.) | (d) Dat (mo., d | e sold ay, yr.) |
| | LETON GLOB | | | . 10120 00.7 | | " | P | 01 | /30/19 | 04/2 | 3/20 |
| | WORLDWIDE | | D FOND | | | | P | | /30/19 | 04/1 | |
| C OTTO | WORLDWIDE | COLL | | | | | | | | | |
| <u>d</u> | | | | | | | | | | | |
| e | | | | | | Ц, | | | | | |
| | ross sales price | | reciation allowed or allowable) | (g) Cos plus ex | t or other basis opense of sale | | | (e) | h) Gain or (lo plus (f) minu | s (g)) | |
| a | 111641. | | | | 12830 | | | | | <u>-1</u> | <u>6659.</u> |
| b | 23. | | | | 3 | 1. | | | | | -8. |
| С | | | | | | | | | | | |
| d | | L | | | | | | | | | |
| е | | | | the form dedice | 10/01/00 | | | (I) Co-i- | - (Cal /b) se | in minus | |
| Complete | e only for assets showir | | umn (h) and owned by | | | | | col. (k). | ns (Col. (h) ga but not less t | nan -0-) or | |
| (i) FM | V as of 12/31/69 | | Adjusted basis s of 12/31/69 | | cess of col. (i) col. (j), if any | | | Los | sses (from co | l. (h)) | 6650 |
| 8 | | | | | | | | | | <u>-T</u> | <u>6659.</u> |
| <u>b</u> | | | | | | | | | | | <u>-8.</u> |
| <u> </u> | | | | | | | | | | | |
| <u>d</u> | | | | | | | | | | | |
| <u>e</u> | | | | | | _ | | <u> </u> | | | |
| 2 Capital ga | in net income or (net ca | apital loss) | If gain, also enter If (loss), enter -0 | r in Part I, line ' - in Part I, line | 7 7 | } | 2 | | | | 6667. |
| 3 Net short- | -term capital gain or (lo: so enter in Part I, line 8, | ss) as define , column (c). | d in sections 1222(5) ar | nd (6): | | J | | | | _ | |
| If (loss), e | enter -0- in Part I, line 8 | | 40404 \ | D | Tour on No. | | 3 | Incom | N/ | <u>A</u> | |
| Part V | | | ction 4940(e) for | | | | | Incom | | N/A | |
| (For optional | use by domestic privat | e foundation | s subject to the section | 4940(a) tax on | net investment i | ncome | 9.) | | | IN / P | L |
| If section 494 | 40(d)(2) applies, leave t | his part blan | k. | | | | | | | | |
| Was the four | idation liable for the sec | ction 4942 ta | x on the distributable an | nount of any ye | ear in the base pe | riod? | | | | Yes | □ No |
| If "Yes," the f | oundation doesn't quali | fy under sec | tion 4940(e). Do not cor | npiete this par | l. fore making any | entries | | | | | |
| 1 Enter the | | each column | n for each year; see the i | iisti uctions be | iole making any | | | | | (d) | |
| Calendar | (a) Base period years year (or tax year beginn | ing in) | (b) Adjusted qualifying dis | stributions | Net value of n | (c) oncha | | sets | Dis (col. (b) | tribution ratio divided by co | l. (c)) |
| | 2018 | | | | | | | -+ | | | |
| | 2017 | | | | | | | | | | |
| | 2016 | | | | | | | -+ | | | |
| | 2015 | | | | | | | | | | |
| | 2014 | | | | | | | | | | |
| | P | | | | | | | | 2 | | |
| 2 Total of I | line 1, column (a) | | period - divide the total | on line 2 hv 5 | 0 or by the num | her of | vears | ······ | | | |
| 3 Average | distribution ratio for the dation has been in exist | ence if less t | han 5 years | | | | | | 3 | | |
| 4 Enter the | net value of noncharita | ıble-use asse | ets for 2019 from Part X, | , line 5 | | | | | 4 | | |
| | | | | | | | | | 5 | | |
| | | | art I, line 27b) | | | | | 1 | 6 | | |
| | | | | | | | | 1 | 7 | | |
| | | | | | | | | ľ | | | |
| 8 Enter qu | alifying distributions fro | em Part XII, li | ne 4 | | | | | L | 8 | | |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

| orm Q | 90-PF (2019) CHARITABLE TRUST | | 84- | 22628 | <u>45</u> | P | age 4 |
|-------|--|--|---|-----------|-----------|---------------|------------|
| Pari | VI Excise Tax Based on Investment Income (Section 4940) | a), 4940(b), 4940(e), or | 4948 | - see in: | struc | tion | <u>s)</u> |
| 1a F | empt operating foundations described in section 4940(d)(2), check here and ente | r "N/A" on line 1. | | | | | |
| D | ate of ruling or determination letter: (attach copy of letter if neces | sary-see instructions) | | | | | |
| h D | omestic foundations that meet the section 4940(e) requirements in Part V, check here | and enter 1% | 1 | ļ | | 36 | <u>51.</u> |
| | Part I, line 27b | | | | | | |
| ۵ م | Il other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of | of Part I, line 12, col. (b) | 2.5 | | | | |
| 2 T | ax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; othe | rs, enter -0-) | | | | | <u>0.</u> |
| | dd lines 1 and 2 | | | | | <u> 36</u> | <u>51.</u> |
| 4 0 | ubtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; other | ers, enter -0-) | . 4 | | | | 0. |
| F T | ax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | . 5 | | | 3(| <u>51.</u> |
| | redits/Payments: | | İ | 1 | | | |
| 0 0 | 019 estimated tax payments and 2018 overpayment credited to 2019 | 6a C | | | | | |
| | xempt foreign organizations - tax withheld at source | 6b C | | | | | |
| 0 0 | ax paid with application for extension of time to file (Form 8868) | 6c C | | | | | |
| G I | ackup withholding erroneously withheld | 6d C | | No. 1 | | | |
| 9 5 | otal credits and payments. Add lines 6a through 6d | | 7 | | | | 0. |
| 1 1 | nter any penalty for underpayment of estimated tax. Check here if Form 2220 is attach | ied | 8 | | | | 0. |
| 8 E | ax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | - 9 | | | 3 | 61. |
| 40 (| verpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | - 10 | | | | |
| | nter the amount of line 10 to be: Credited to 2020 estimated tax | Refunded | 11 | | | | |
| Dor | VII-A Statements Regarding Activities | | | | | | |
| ra: | buring the tax year, did the foundation attempt to influence any national, state, or local legisla | tion or did it participate or interv | ene in | | | Yes | No |
| | ny political campaign? | | | [| 1a | | <u>X</u> |
| | ny political campaign? Iid it spend more than \$100 during the year (either directly or indirectly) for political purpose | s? See the instructions for the d | efinition | | 1b | | X |
| וסו | the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of | any materials published or | | | | | |
| | listributed by the foundation in connection with the activities. | , , | | 1 | | | |
| | | | | İ | 10 | | X |
| C I | | | • | | | | |
| đ l | inter the amount (if any) of tax on political expenditures (section 4955) imposed during the y | s s |). | | l | | |
| (| 1) On the foundation. > \$ 0 . (2) On foundation managers. Inter the reimbursement (if any) paid by the foundation during the year for political expenditu | re tay imposed on foundation | | l | ı | | |
| e | inter the reimbursement (if any) paid by the foundation during the year for political experience. | no tax imposos on rosmounon | | | ŀ | | |
| _ ! | nanagers. > \$ 0 . Has the foundation engaged in any activities that have not previously been reported to the IRS | \$2 | | | 2 | | X |
| | | o: | | | | | |
| | f "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing in | strument articles of incorporation | n. or | | | | |
| 3 | has the foundation made any changes, not previously reported to the mo, in its governing months to the modern the changes attach a conformed copy of the changes | Stratificity artificion of interpolation | , | | 3 | | X |
| | bylaws, or other similar instruments? If Yes, allacin a comornied copy of the changes | ······· | | | 4a | | X |
| 4a | the foundation have unrelated business gross income of \$1,000 or more during the year | • | | N/A | 4b | | |
| b | f "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | -c | 5 | | X |
| | | | | | | | |
| | f "Yes," attach the statement required by General Instruction T. | her• | | | | | İ |
| | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith | iivi. | | | | | |
| | 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 | tate law | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory | differential that commet with the | | | 6 | X | İ |
| | remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete | ete Part II. col. (c), and Part XV | | | 7 | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any little during the year? It is tes, comple | oto r are ii, oon (o), and r are re- | | | | | |
| | and the state of t | ne 🕨 | | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instruction | 10. | | | | | |
| | ME | torney General (or decignate) | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At | torney donoral (or designate) | | | 86 | X | 1 |
| | of each state as required by General Instruction G? If "No," attach explanation | tion 4942/i)(3) or 4942/i)(5) for | calendar | | | | t — |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of sec year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," comp | nlete Part XIV | | | 9 | | _X_ |
| | year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. It Tes, comp Did any persons become substantial contributors during the tax year? <u>It "Yes," attach a schedut</u> | a lieting their names and addresses | | | 10 | | X |
| 10 | DIO ANY DEISONS DECOME SUUSIAMIA COMMIDUIOIS QUI MY MIC IAX YEART IT TES," AMACH A SCHOOL | A HOWING WICH TIMINGS CHICK MANY ADADS | | For | | 0-PF | (2019) |

| Part VII-A Statements Regarding Activities (continued) | | | |
|--|-----------------------|------------|------------|
| | | Yes | No |
| 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | |
| section 512(b)(13)? If "Yes," attach schedule. See instructions | 11 | | X _ |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | | | |
| If "Yes," attach statement. See instructions | 12 | | X |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | х | |
| Website address ► N/A | | | |
| 14 The books are in care of ► RONALD P WEYLAND Telephone no. ► 603-30 | 3-1 | 128 | |
| Located at > 175B PINE STREET UNIT 2 I, PORTLAND, ME ZIP+4 > 04 | 102 | -35 | 40 |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | | | |
| and enter the amount of tax-exempt interest received or accrued during the year | N | /A | |
| 16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| | 16 | | X |
| securities, or other financial account in a foreign country? | " | | |
| See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | |
| Fart VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| | | | |
| 1a During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange or leasing of property with a disqualified person? Yes X No | | | |
| (1) Lingage in the sale of exemended of property than a sequence property | | | |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| 4 UISQUAINIEU PEISON: | | | |
| (3) Fulfillial 00002' 26 Argest of for goods many a sector many a sector many a sector many a sector many a sector many a sector many a sector many as secto | | | |
| (4) Pay compensation to, or pay or reminured the expenses of, a disquaring person. | | | |
| (5) Transfer any income or assets to a disqualified person (or make any of either available for the bood to rung of a disqualified person)? Yes X No | | | |
| (i) the beliefit of use of a disquainted person): | | | |
| (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 emptoy the official for a period after | | | |
| termination of government service, if terminating within 90 days.) | | | |
| b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | 16 | | |
| section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 10 | | |
| Organizations relying on a current notice regarding disaster assistance, check here | | | |
| c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | 1c | | х |
| before the first day of the tax year beginning in 2019? | " | VA. 51.1. | |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | | | |
| defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines Gold and 60) for tax year(s) beginning before 2019? Yes X No | | | İ |
| 6d and 6e) for tax year(s) beginning before 2019? Yes 🛣 No | | 1 | İ |
| If "Yes," list the years \blacktriangleright | | | |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | | |
| valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | Magazi ita | |
| statement - see instructions.) N/A | <u>2b</u> | - | |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | |
| > | | | 1 |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| during the year? Yes X No | | | |
| b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after | | | |
| May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose | | | 1 |
| of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, | | | |
| Schedule C. to determine if the foundation had excess business holdings in 2019.) | 3b | +- | 7.7 |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | 1- | X |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | | - Parisi | v |
| had not been removed from jeopardy before the first day of the tax year beginning in 2019? | <u> 4b</u> orm 99 | O DE | X |

| (a) Name and address of each employee paid more than \$50,000 | devoted to position | (C) Compensation | compensation | allowances |
|---|---------------------|------------------|--------------|----------------------|
| NONE | | | | |
| | | | | |
| | | | | |
| | - | | | |
| | | | | |
| | | | | |
| | 1 | | | <u> </u> |
| Total number of other employees paid over \$50,000 | | | Form | 9 90-PF (2019 |

(b) Title, and average

Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(e) Expense

account, other

(d) Contributions to employee benefit plans

| Part VIII Information About Officers, Directors, Trustees, Foundary Paid Employees, and Contractors (continued) | ation Managers, Highly | |
|---|--------------------------------|------------------|
| 3 Five highest-paid independent contractors for professional services. If none, enter | er "NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | <u>▶ 0</u> |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant stati | stical information such as the | Expenses |
| number of organizations and other beneficiaries served, conferences convened, research papers pro | Judea, etc. | |
| 1N/A | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| Part IX-B Summary of Program-Related Investments | | |
| Describe the two largest program-related investments made by the foundation during the tax year of | n lines 1 and 2. | Amount |
| 1 N/A | | |
| | | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | |
| | | |
| | | |
| | | |
| | | 0. |
| Total, Add lines 1 through 3 | | 5 |

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | dations, se | ee instructions.) |
|--------------|--|-------------|-------------------|
| - | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | y w | |
| a | Average monthly fair market value of securities | 1a | <u>977352.</u> |
| | Average of monthly cash balances | 1b | 38882. |
| | Fair market value of all other assets | 1c | |
| - | Total (add lines 1a, b, and c) | 1d | 1016234. |
| | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| ٠ | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 1016234. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 15244. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 1000990. |
| 6 | Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD | 6 | 45810. |
| ̈́Ρ | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here and do not complete this part.) | d certain | |
| _ | Minimum investment return from Part X, line 6 | 1 | 45810. |
| 1 | | | |
| 2a | Tax of investment meeting for 20 to month with a similar or simila | | |
| | Income tax for 2015. (This does not thouse the tax if ship and the tax if ship are the | 2c | 361. |
| | Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 45449. |
| 3 | | 4 | 0. |
| 4 | Recoveries of amounts treated as qualifying distributions | 5 | 45449. |
| 5 | Add lines 3 and 4 | 6 | 0. |
| 6 | Deduction from distributable amount (see instructions) | 7 | 45449 |
| <u>7_</u> | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | <u> </u> | 20225 |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | 1 - 4 | |
| a | The state of the s | 1a | 5200. |
| b | The state of the s | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| a | a to till to the to the constraint and the state of the s | 3a | |
| b | and the state of the state of the second and advantage | 3b | <u></u> |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 | 4 | 5200 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| ٠ | income. Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 5200 |
| • | *************************************** | | |

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

| | (a) Corpus | (b) Years prior t | o 2018 | (c) 2018 | (d) 2019 |
|--|---------------|---------------------------------------|---------|-------------|-------------|
| 1 Distributable amount for 2019 from Part XI, | Обграз | Tours prior t | 0 20 10 | | |
| line 7 | | | | | 45449. |
| 2 Undistributed income, if any, as of the end of 2019: | | | | 0 | |
| a Enter amount for 2018 only | | · · · · · · · · · · · · · · · · · · · | | 0. | |
| b Total for prior years: | | | 0. | | |
| 3 Excess distributions carryover, if any, to 2019: | | | - 0. | | |
| · | | | | | |
| a From 2014 | | | | | |
| b From 2015 | | | | | |
| c From 2016 | | | | | |
| d From 2017e From 2018 | | | | | |
| f Total of lines 3a through e | 0. | | | | |
| 4 Qualifying distributions for 2019 from | | | | | |
| Part XII, line 4: ► \$ 5200 • | | | | | |
| a Applied to 2018, but not more than line 2a | Ì | | | 0. | |
| b Applied to undistributed income of prior | · | | | | |
| years (Election required - see instructions) | | | 0. | | |
| c Treated as distributions out of corpus | | | | | |
| (Election required - see instructions) | 0. | | | | |
| d Applied to 2019 distributable amount | | | | | 5200. |
| e Remaining amount distributed out of corpus | 0. | | | | |
| 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount | 0. | | 3,4% | | 0. |
| must be shown in column (a).) 6 Enter the net total of each column as indicated below: | | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 0. | <u> </u> | | | |
| b Prior years' undistributed income. Subtract | | | | | |
| line 4b from line 2b | | | 0. | | |
| e 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 | . Dwgr | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | | |
| amount - see instructions | | | 0. | | |
| e Undistributed income for 2018. Subtract line | | | | _ | |
| 4a from line 2a. Taxable amount - see instr | | | | 0. | |
| f Undistributed income for 2019. Subtract | | | | | |
| lines 4d and 5 from line 1. This amount must | | | 1996 | | 40040 |
| be distributed in 2020 | | | | | 40249 |
| 7 Amounts treated as distributions out of | | | | | |
| corpus to satisfy requirements imposed by | | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | • | | | | |
| may be required - see instructions) | 0. | | | | |
| 8 Excess distributions carryover from 2014 | • | 1 21. | | | |
| not applied on line 5 or line 7 | 0. | | | | |
| 9 Excess distributions carryover to 2020. | 0. | | | | to was to |
| Subtract lines 7 and 8 from line 6a | <u> </u> | | | | |
| 10 Analysis of line 9: | | | | | |
| a Excess from 2015 | | | 1 | | |
| b Excess from 2016 c Excess from 2017 | | | | | |
| 6 LAGESS II UIII 40 17 | | 1 | | | i |

d Excess from 2018 ... e Excess from 2019

| Part XV Supplementary Information | | | Γ | |
|--|--|--------------------------------------|----------------------------------|----------|
| 3 Grants and Contributions Paid During the | Year or Approved for Future P | | | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| | | | | |
| NONE | | | | |
| | | | | |
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| | | | | |
| | | | | |
| | | | | |
| Total | | | ▶ 3a | |
| b Approved for future payment | | | | |
| | | | | |
| NONE | | | | |
| | | | | |
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| | | | | |
| | | | | |
| | | | <u> </u> | |
| Total | | | ▶ 3b | <u> </u> |

| -A | Analysis | of | Income-F | Produc | ing | Activities |
|----|-----------------|----|----------|--------|-----|-------------------|
|----|-----------------|----|----------|--------|-----|-------------------|

| ter gross amounts unless otherwise indicated. | Unrelated b | ousiness income | | by section 512, 513, or 514 | (e) |
|--|-----------------|---------------------------------------|-----------------------|-----------------------------|---|
| - | (a) Business | (b) Amount | (C) Exclu- sion | (d) Amount | Related or exempt function income |
| Program service revenue: | code | | code | 711100111 | 101101101111111111111111111111111111111 |
| a | | | | | · · · · · · · · · · · · · · · · · · · |
| b | · | | | | |
| C | | | | | |
| d | | | | | |
| e | - | | | | - |
| | - | | + | | |
| g Fees and contracts from government agencies | | · · · · · · · · · · · · · · · · · · · | + | | |
| Membership dues and assessments | | | | | |
| Interest on savings and temporary cash | | | 14 | 59. | |
| investments | | | 14 | 31310. | |
| Net rental income or (loss) from real estate: | . | | | 313101 | |
| • • | | | | | |
| a Debt-financed property | l I | | | | |
| Not debt-financed property Net rental income or (loss) from personal | . | | | | |
| • | | | | | |
| property Other investment income | | | | | |
| Gain or (loss) from sales of assets other | • | | | | |
| • • | | | 18 | -16667. | |
| than inventory | | | | | |
| Gross profit or (loss) from sales of inventory | 4 | | | | |
| Other revenue: | . | | | | |
| | | | | | |
| 8 | | | | | |
| | 1 1 | | 1 1 | | |
| b | - | | | | |
| b | | | | | |
| b | | | | | |
| b | | | 0. | 14702. | |
| b | | | | | |
| b | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities line No. Explain below how each activity for which inc | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities The No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other tha | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other tha | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which incomplete the foundation's exempt purposes (other tha | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which incomplete the foundation's exempt purposes (other tha | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which incomplete the foundation's exempt purposes (other tha | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which incomplete the foundation's exempt purposes (other tha | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which income the foundation's exempt purposes (other tha | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which incomplete the foundation's exempt purposes (other tha | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities The No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other tha | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities The No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities The No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which incomplete the foundation's exempt purposes (other tha | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities The No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that | to the Accor | nplishment of | Exempt I | Purposes | 1470 |
| b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other tha | to the Accor | nplishment of | Exempt I | Purposes | 1470 |

923621 12-17-19

BARBARA AND J HARRISON HOLMAN Page 13 Form 990-PF (2019) CHARITABLE TRUST Information Regarding Transfers to and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No 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)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: X 1a(1) (1) Cash X 1a(2) (2) Other assets b Other transactions: 1b(1) (1) Sales of assets to a noncharitable exempt organization X (2) Purchases of assets from a noncharitable exempt organization X (3) Rental of facilities, equipment, or other assets 1b(3) 1b(4) (4) Reimbursement arrangements X 1b(5) (5) Loans or loan guarantees ______ X X 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 fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (b) Amount involved (a) Line no. N/A2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (c) Description of relationship (b) Type of organization (a) Name of organization N/A

| Sign Here | and be | dief, it is true, correct, and complete. Declaration of pre | 19-10-2-2- | CO-TRU | | shown below? See instr. X Yes No |
|--------------|--------|---|----------------------|----------|----------------|-----------------------------------|
| - 1 | Sign | ature of officer or trustes | Date | Title | | |
| | - | Print/Type preparer's name | Preparer's signature | Date | Check X if | PTIN |
| | | , , , , , , , , , , , , , , , , , , , | - 111 | | self- employed | |
| Paid | | ROWAD P. WOKANS | F-Pulh | 09/29/20 | | P00175272 |
| Prepa | arer | | LAND | 1 | Firm's EIN ▶ 0 | 1-1469992 |
| Use C | | Firm s name RONALD 1 WHI | 111112 | | | |
| 036 6 | Jiny | Firm's address ▶ 175B PINE S | T. UNIT 2 I | | | |
| | | | E 04102-3540 | | Phone no. 60 | 3-303-1128 |
| | | PORTLAND, M | E 04102 3340 | | | Form 990-PF (2019 |

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge

May the IRS discuss this

Form **2220**

Underpayment of Estimated Tax by Corporations

FORM 990-PF

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

Attach to the corporation's tax return.

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

2019

Employer identification number BARBARA AND J HARRISON HOLMAN 84-2262845 CHARITABLE TRUST

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.

| F | Part I Required Annual Payment | | | | | | | | |
|----|--|-------------|--------------------------------|-------------|-----------|--------|--------|----|----------|
| | | | | | | | | | |
| 1 | Total tax (see instructions) | | | | | | | 1 | 361. |
| | , | | | | | | | | |
| | Personal holding company tax (Schedule PH (Form 1120), line | | | | 2a_ | | | | |
| b | Look-back interest included on line 1 under section 460(b)(2) | | | | ۸. | | | | |
| | contracts or section 167(g) for depreciation under the income | tore | cast method | | <u>2b</u> | | | | |
| | | | | | 20 | | | | |
| | Credit for federal tax paid on fuels (see instructions) | 2d | | | | | | | |
| d | Total. Add lines 2a through 2cSubtract line 2d from line 1. If the result is less than \$500, do | | omalete or file this form. T | ho corno | ration | ••••• | | 20 | |
| 3 | | | | | | | | 3 | 361. |
| | does not owe the penalty Enter the tax shown on the corporation's 2018 income tax retu | | Saa instructions Caution: I | f the tay i | S 7810 | | •••••• | | |
| 4 | or the tax year was for less than 12 months, skip this line and | | | | | | | 4 | |
| | or the tax year was for less than 12 months, skip this line and | Citto | t the amount nom and o or | | | •••••• | •••••• | | |
| | Required annual payment. Enter the smaller of line 3 or line | ∆ If | the cornoration is required | to skin lir | ne 4. | | | | |
| ð | | | | | | | | 5 | |
| | enter the amount from line 3 Part II Reasons for Filing - Check the boxes belo | 20 | | | | | | | |
| | even if it does not owe a penalty. See instructions. | ••••• | at apply to any control and on | | | | | | |
| 6 | The corporation is using the adjusted seasonal installi | nent | method. | | | | | | |
| 7 | The corporation is using the annualized income install | | | | | | | | |
| 8 | The corporation is a "large corporation" figuring its firs | t rec | uired installment based on | the prior | year's | tax. | | | |
| Ĕ | Part III Figuring the Underpayment | | | | | | | | |
| _ | | | (a) | | (b) | | (c) | _ | (d) |
| 9 | Installment due dates. Enter in columns (a) through | | | | | | | | |
| · | (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the | | | | | | | | |
| | corporation's tax year | 9 | | | | | | | |
| 10 | Required installments. If the box on line 6 and/or line 7 | | | | | | 1 | | |
| | above is checked, enter the amounts from Sch A, line 38. If | | | | | | | | |
| | the box on line 8 (but not 6 or 7) is checked, see instructions | | | | | | 1 | | |
| | for the amounts to enter. If none of these boxes are checked, | | | | | | 1 | | |
| | enter 25% (0.25) of line 5 above in each column | 10 | | | | | | | |
| 11 | Estimated tax paid or credited for each period. For | | | | | | | | |
| | column (a) only, enter the amount from line 11 on line 15. | | | | | | | | |
| | | 11 | | | | | | | <u> </u> |
| | Complete lines 12 through 18 of one column | | | | | | 1 | | |
| | before going to the next column. | | | | | | | | |
| 12 | Enter amount, if any, from line 18 of the preceding column | 12 | | | | | | | |
| | Add lines 11 and 12 | 13 | | | | | | | |
| 14 | Add amounts on lines 16 and 17 of the preceding column | 14 | | | | | | | |
| 15 | Subtract line 14 from line 13. If zero or less, enter -0- | 15 | | | | | | | |
| | If the amount on line 15 is zero, subtract line 13 from line | | | | | | | | |
| | 14. Otherwise, enter -0- | 16 | | | | | | | |
| 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 | | | | | ļ | | |
| 18 | Overpayment. If line 10 is less than line 15, subtract line 10 | | | | | | | | |
| | from line 15. Then go to line 12 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 (2019)

Part IV Figuring the Penalty

| | | | (a) | (b) | (c) | (d) | |
|---|---|----|-----|-----|----------------|------------|--|
| after the close of the (C corporations wit and S corporations | yment or the 15th day of the 4th month tax year, whichever is earlier. h tax years ending June 30 ; Use 3rd month instead of 4th month. orm 990-T filers: Use 5th month h.) See instructions | 19 | | | | | |
| | ue date of installment on line 9 to the | 20 | | | | | |
| Number of days on line | 20 after 4/15/2019 and before 7/1/2019 | 21 | | | | | |
| Underpayment on line | 17 x <u>Number of days on line 21</u> x 6% (0.06) 365 | 22 | \$ | \$ | \$ | \$ | |
| · | 20 after 06/30/2019 and before 10/1/2019 | 23 | | | | | |
| | 17 x <u>Number of days on line 23</u> x 5% (0.05) 365 | 24 | \$ | \$ | \$ | \$ | |
| • | 20 after 9/30/2019 and before 1/1/2020 | 25 | • | \$ | s | s | |
| | 17 x Number of days on line 25 x 5% (0.05) 365 | 26 | Ψ | Ψ | | | |
| • | 20 after 12/31/2019 and before 4/1/2020 17 x Number of days on line 27 x 5% (0.05) | 28 | \$ | \$ | \$ | \$ | |
| | 386 20 after 3/31/2020 and before 7/1/2020 | 29 | | | | | |
| • | 17 x Number of days on line 29 x *% | 30 | \$ | \$ | \$ | \$ | |
| 1 Number of days on line | 20 after 6/30/2020 and before 10/1/2020 | 31 | | | | | |
| 2 Underpayment on line | 17 x <u>Number of days on line 31</u> x *% | 32 | \$ | \$ | | \$ | |
| Number of days on line | 20 after 9/30/2020 and before 1/1/2021 | 33 | | | | | |
| 4 Underpayment on line | 17 x Number of days on line 33 x *% | 34 | \$ | \$ | \$ | \$ | |
| Number of days on line | 20 after 12/31/2020 and before 3/16/2021 | 35 | | | | | |
| 6 Underpayment on line | 17 x <u>Number of days on line 35</u> x *% | 36 | | \$ | \$ | \$ | |
| 7 Add lines 22, 24, 26, 2 | | 37 | | \$ | \$ | <u> \$</u> | |
| 8 Penalty. Add colu | mns (a) through (d) of line 37. Enter the the tax returns | | | | rable | . 38 \$ | |

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

Form 2220 (2019)

| FORM 990-PF INTERE | ST ON SAVIN | GS AND TEM | PORARY | CASH IN | VESTMENTS | STATEMENT | 1 |
|---|------------------|------------------------------|---------|---------------------------------|-------------------------------|------------------------------|----|
| SOURCE | | (A REVEI PER BO | NUE | (B) NET INVESTMENT INCOME | | (C) ADJUSTED NET INCOM | E |
| INTEREST INCOME | | 59. | | 59. | | | |
| TOTAL TO PART I, LI | | 59. | | 59. | | | |
| FORM 990-PF | DIVIDENDS | AND INTER | EST FRO | OM SECUR | ITIES | STATEMENT | 2 |
| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDEND | | (A) EVENUE R BOOKS | (B) NET INVES MENT INCO | | |
| DIVIDENDS - EQUITIES DIVIDENDS - MUTUAL FUNDS | 18445. 12865. | • | 0. | 18445. 12865. | | | |
| TO PART I, LINE 4 | 31310. | | 0. | 31310. | 3131 | .0. | |
| FORM 990-PF | TO | HER PROFES | SIONAL | FEES | | STATEMENT | 3 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | NET I | B) NVEST- INCOME | (C) ADJUSTEI NET INCOM | | |
| MERRILL LYNCH - ADVISORY FEES | | 8125. | | 8125. | | | 0. |
| TO FORM 990-PF, PG 1, LN 16C | | 8125. | | 8125. | | | 0. |

| FORM 990-PF | OTHER | INCREASES | IN NET | ASSETS OR FU | IND BALANCES | STATEMENT | 4 |
|-------------------------------|----------|------------|--------|---------------------|--------------|---------------------|-----|
| DESCRIPTION | | | | | | AMOUNT | |
| PRINCIPAL FU | NDS RECI | EIVED FROM | BARBAR | A GREGOIRE HO | LMAN TRUST | 24307 | 08. |
| TOTAL TO FORI | M 990-PI | , PART III | , LINE | 3 | | 24307 | 08. |
| | | | | | | | |
| FORM 990-PF | | | OTHER | INVESTMENTS | | STATEMENT | 5 |
| DESCRIPTION | | | | VALUATION METHOD | BOOK VALUE | FAIR MARKE VALUE | T |
| CORPORATE STOCKS MUTUAL FUNDS | | | | 1455664. | 15948 | | |
| CORPORATE STOMUTUAL FUNDS | | | | COST COST | 754416. | 7668 | |

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

RONALD P. WEYLAND 175B PINE STREET UNIT 2 I PORTLAND, ME 04102-3540

TELEPHONE NUMBER

603-303-1128

EMAIL ADDRESS

R.WEYLAND@ICLOUD.COM

FORM AND CONTENT OF APPLICATIONS

CURRENT FINANCIAL STATEMENT 501 (C) (3) INTERNAL REVENUE SERVICE DETERMINATION LETTER

ANY SUBMISSION DEADLINES

NO SUBMISSION DEADLINE

RESTRICTIONS AND LIMITATIONS ON AWARDS

STATE OF MAINE 501 (C) (3) CHARITABLE ORGANIZATIONS RESTRICTIONS APPLY, AS A PERCENTAGE OF NET DISTRIBUTABLE INCOME IS ALLOCATED TO SPECIFIC 501 (C) (3) ORGANIZATIONS.