### 178 380 990-PF

Department of the Treasury

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052 **2017** 

Interr	al Reve	nue Service ► Go to www.irs.gov/Form990P	F for instructions and	d the lates	t information	n. Op	en to Public Inspection
For	calend	dar year 2017 or tax year beginning	, 2017, a	and endin	g		, 20
Na	ame of f	foundation			A Employer	identification number	
M	ORTO	N-KELLY CHARITABLE TRUST			01-0442	078	
Νι	ımber a	and street (or PO box number if mail is not delivered to street address)	Ro	oom/suite	B Telephone	number (see instruction	ns)
P	Воз	K 4510			(207)77	5-7271	
Cr	ty or tov	vn, state or province, country, and ZIP or foreign postal code			C If exempts	on application is pendi	og check here
P	ORTLA	AND, ME 04112			1 0,0,0,0,0	on approarient to person	.g, 0.100K 11010
G	heck a	all that apply Initial return Initial return	of a former public chari	ity	D 1. Foreign	organizations, check	nere · · · · •
		Final return Amended ret	turn		2 Foreign	n organizations meeting	the 95% test
		Address change Name chang	е			nere and attach compu	
H C	heck t	ype of organization X Section 501(c)(3) exempt privi	ate foundation		E If provide i	oundation status was t	arminated under
	Secti	on 4947(a)(1) nonexempt charitable trust Other t	axable private foundati	on		07(b)(1)(A), check here	
		rket value of all assets at J Accounting method	X Cash	Accrual	E If the four	dation is in a 60-month	termination
္ရွိေ	nd of y	/ear (from Part II, col (c), Other (specify)			I .	tion 507(b)(1)(B), chec	
	ne 16)		on cash basis)				_
€Pa	rt I	Analysis of Revenue and Expenses (The total of	(a) Davisson and	1	_		(d) Disbursements
0		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for charitable
<u></u>		the amounts in column (a) (see instructions) )	books	l in	come	income	purposes (cash basis only)
$\equiv$	1	Contributions, gifts, grants, etc., received (attach schedule)					
6	2	Check ► X if the foundation is <b>not</b> required to attach Sch B · ·					
	3	Interest on savings and temporary cash investments · · · ·					
\$7	4	Dividends and interest from securities	363,294		363,294		
زرة الس	5a	Gross rents					
105	b	Net rental income or (loss)	.,				
Revenue CALLICE	6a	Net gain or (loss) from sale of assets not on line 10 · · · · ·	409,401				
ď	b	Gross sales price for all assets on line 6a 9,434,736					
Š	7	Capital gain net income (from Part IV, line 2)			409,401		
æ	8	Net short-term capital gain			(		
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold · · · · · · ·					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule) STM106	24,279		24,279		
	12	Total. Add lines 1 through 11	796,974		796,974		
	13	Compensation of officers, directors, trustees, etc	16,400		2,000		14,400
ses	14	Other employee salaries and wages					
en	15	Pension plans, employee benefits					
x	16a	Legal fees (attach schedule) · · · · · · · · STM107	27,271		13,636		13,635
e E	b	Accounting fees (attach schedule)					
tiv	С	Other professional fees (attach schedule) · · · · STM109	53,345		53,345		
and Administrative Expenses	17	Interest					
nis	18	Taxes (attach schedule) (Sepinst Clerk WED STM110	10,647		10,647		
Ē	19	Depreciation (attach schedule) and depletion					
٨d	20	Occupancy \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
ď,	21	Travel, conferences, and poeetings	344		172		172
	22	Printing and publications					
Operating	23	Other expenses (attach sched@GDE_SPMF03 · · · ·	19,695		18,445		1,250
rat	24	Total operating and administrative expenses.					
be		Add lines 13 through 23 · · · · · · · · · · · · · · ·	127,702		98,245		29,457
0	25	Contributions, gifts, grants paid	897,500				897,500
	26	Total expenses and disbursements. Add lines 24 and 25	1,025,202		98,245		926,957
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements .	(228,228	<b></b>			
	b	Net investment income (if negative, enter -0-)			698,729		
	_	Adjusted not recome (if positive outer 0.)		I	T		

For Paperwork Reduction Act Notice, see instructions.

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Pa	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
		should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	38,392	39,909	39,909
	2	Savings and temporary cash investments	235,731	145,609	145,609
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable •			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	1	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			
ssets	8	Inventories for sale or use · · · · · · · · · · · · · · · · · · ·			
SS	9	Prepaid expenses and deferred charges			
V	10a	Investments - U S and state government obligations (attach sometids)	498,633	199,453	199,468
	b	Investments - corporate stock (attach schedule) · · · · STM137	10,661,935	10,105,622	13,902,861
	С	Investments - corporate bonds (attach schedule) STM138	3,688,350	4,406,440	4,398,625
	11	Investments - land, buildings, and equipment basis ▶			
	]	Less accumulated depreciation (attach schedule)		]	TO ARTHOUGH A APPROXIMENT
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			
	l	Less accumulated depreciation (attach schedule)	*		
	15	Other assets (describe )			<del></del>
	16	Total assets (to be completed by all filers - see the			
_		instructions Also, see page 1, item I)	15,123,041	14,897,033	18,686,472
	17	Accounts payable and accrued expenses			
	18	Grants payable		300,000	
Liabilities	19	Deferred revenue · · · · · · · · · · · · · ·			4
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
jab	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22) · · · · · · · · ·	0	300,000	
es		Foundations that follow SFAS 117, check here · · · · · ▶ ☐ and complete lines 24 through 26, and lines 30 and 31.			
alances	24	Unrestricted		1	
ala a	25	Temporarily restricted			•
	26	Permanently restricted			
Fund B		Foundations that do not follow SFAS 117, check here · · ▶ X			1
F		and complete lines 27 through 31.			
9	27	Capital stock, trust principal, or current funds			;
Net Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds	15,123,041	14,597,033	
Š	30	Total net assets or fund balances (see instructions)	15,123,041	14,597,033	
Š	31	Total liabilities and net assets/fund balances (see			
		instructions)	15,123,041	14,897,033	
Pa	irt II				
		net assets or fund balances at beginning of year - Part II, column (a), line 3			
		of-year figure reported on prior year's return)	="		15,123,041
		amount from Part I, line 27a			(228,228)
		r increases not included in line 2 (itemize)		3	
		ines 1, 2, and 3		4	14,894,813
5	Decr	eases not included in line 2 (itemize) STM116		5	297,780
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, coli	umn (b), line 30 · · · ·	6	14,597,033
EEA			<u></u>		Form 990-PF (2017)

Part IV Capital Gains a	and Losses for Tax on Inve	stment Income	е		
(a) List and describ 2-story brick ware	e the kind(s) of property sold (for example nouse, or common stock, 200 shs MLC (	e, real estate, Co)	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr )
1a SEE HM PAYSON REI	PORT ATTACHED		P	VARIOUS	VARIOUS
b					
<u>c</u>			ļ		
d	· · · · · · · · · · · · · · · · · · ·				
e					1 .
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o	ise of sale		un or (loss) s (f) minus (g))
a 9,434,736			9,025,335		409,401
b c			-		
d					
e					
Complete only for assets show	ing gain in column (h) and owned by	the foundation on 1	2/31/69	W. Carra (C	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (		col (k), but no	ol (h) gain minus ot less than -0-) <b>or</b> from col (h))
a					409,401
b					
С					
d				·	
е					
<ul><li>2 Capital gain net income or (net</li><li>3 Net short-term capital gain or (</li></ul>		so enter in Part I, line enter -0- in Part I, line and (6)		2	409,401
If gain, also enter in Part I, line Part I, line 8	8, column (c) See instructions If (lo	ss), enter -0- in	.::}	3	
<u> </u>	nder Section 4940(e) for Re				
If section 4940(d)(2) applies, leave	the foundations subject to the section this part blank ection 4942 tax on the distributable a lify under section 4940(e). Do not co	mount of any year in			Yes X No
1 Enter the appropriate amount i	n each column for each year, see the	e instructions before	making any entri	es	
(a) Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distribution	s Net value of	(c) noncharitable-use as		(d) stribution ratio ) divided by col (c))
2016	805,6	565	16,249,8	388 0	.04958
2015	844,8		16,985,3		.049742
2014	755,1	.35	17,409,0	047 0	.043376
2013	655,6		12,551,7		.052238
2012	229,5	500	3,989,2	239 0	.05753
2 Total of line 1, column (d) · ·				2 0	.252466
<del>-</del>	e 5-year base period - divide the tota ation has been in existence if less tha	=		3 0	.050493
4 Enter the net value of nonchar	table-use assets for 2017 from Part	X, line 5		4	18,006,147
5 Multiply line 4 by line 3 · · ·				5	909,184
6 Enter 1% of net investment inc	ome (1% of Part I, line 27b) · · ·			6	6,987
7 Add lines 5 and 6 · · · · ·				7	916,171
8 Enter qualifying distributions from If line 8 is equal to or greater the	om Part XII, line 4 · · · · · · · · · · · · · · · · · ·			L	926,957
Part VI instructions		,	. 5		

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see inst	ructions)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		_
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)	-	
	Domestic foundations that meet the section 4940(e) requirements in Part V, check		5,987
	here ► X and enter 1% of Part I, line 27b		k.
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of		
	Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		0
	Add lines 1 and 2		5,987
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		0
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5,987
	Credits/Payments		
	2017 estimated tax payments and 2016 overpayment credited to 2017 · · 6a 9,333		
	Exempt foreign organizations - tax withheld at source		ŧ
С.	Tax paid with application for extension of time to file (Form 8868) 6c		
	Backup withholding erroneously withheld		,
	Total credits and payments Add lines 6a through 6d		9,333
	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached		
			2.246
	overpayments in mile to the second of the se		2,346
	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ 2 ,346 Refunded ▶ 11   t VII-A   Statements Regarding Activities		
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Yes	No
ıa	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		<del> </del>
	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
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		<u> </u>
	(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		1
	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 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 XV-	7 X	+
8a	Enter the states to which the foundation reports or with which it is registered. See instructions▶		1
	ME		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	0h V	
	(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 2017 or the tax year beginning in 2017? See instructions for Part XIV)? If "Yes,"	9	X
10	complete Part XIV	-	+^-
10	names and addresses	10	x

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Pai	t VII-A   Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12	Dig the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		ļ	
	person had advisory privileges? If "Yes," attach statement See instructions	12	2	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? $\cdot$	13	3 X	
	Website address N/A			
14	The books are in care of MICHAEL J QUINLAN Telephone no	<u> 207-775-</u>	7271	
	Located at ► TEN FREE STREET, PORTLAND, ME ZIP+4 ►	04101		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-check here · · · · · · ·			<b>▶</b> [
	and enter the amount of tax-exempt interest received or accrued during the year 15	;		
16	At any time during calendar year 2017, 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	3	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			j
	the foreign country			
Pai	t 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	No	ļ	}
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?	No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes	No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	,		ļ ,
	the benefit or use of a disqualified person)?	No		ļ
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after	,		
	termination of government service, if terminating within 90 days ) · · · · · · · · · · · · · · · · · ·	No		
b		ĺ		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		2	<u>X</u>
	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 before the first day of the tax year beginning in 2017?	10	:	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			Ì
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	, J		
	6e, Part XIII) for tax year(s) beginning before 2017?	No		
	If "Yes," list the years			i
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions )	· · ·   2t	-	<del> </del>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<u> </u>		ĺ	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1		
	at any time during the year?	No		
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		}	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			}
4	foundation had excess business holdings in 2017 )			+
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	· · ·   4a	<del>'   -</del>	X
n	Luciuse inconstino make any invesiment in a brint year (but atter December 31, 1969) that could leonardize its			ì

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017? • • • •

Pa	t VII-B   Statements Regarding Activities	es for '	Which Forn	n 4720	May Be	Requir	<b>red</b> (continued	)		
5a	During the year, did the foundation pay or incur any ar	nount to							Yes	No
	(1). Carry on propaganda, or otherwise attempt to infl	uence le	gislation (sectio	n 4945(e	e))?	[	Yes X No			
	(2) Influence the outcome of any specific public elect	on (see	section 4955), (	or to cari	ry on,	_		1		ı
	directly or indirectly, any voter registration drive?				-	[	Yes X No			ì
	(3) Provide a grant to an individual for travel, study, o	r other si	mılar purposes	2		[	Yes X No	-		ı
	(4) Provide a grant to an organization other than a ch					_				
	section 4945(d)(4)(A)? See instructions					٠ [	Yes X No	- 1		ı
	(5) Provide for any purpose other than religious, chair	itable, so	entific, literary,	or educ	ational					i ,
	purposes, or for the prevention of cruelty to childr	en or anı	mals?			٠ [	Yes X No		[ [	ı
b	If any answer is "Yes" to 5a(1)-(5), did any of the tran	sactions	fail to qualify ur	der the	exceptions d	escribed	_			
	Regulations section 53 4945 or in a current notice reg							5b	ĺ	ı
	Organizations relying on a current notice regarding dis	_								
С	If the answer is "Yes" to question 5a(4), does the foun							ĺ		
	because it maintained expenditure responsibility for th		•			[	Yes No			,
	If "Yes," attach the statement required by Regulations	_				_		1		
6a	Did the foundation, during the year, receive any funds		• •	pay prer	miums					ı
-	on a personal benefit contract?		-			Г	Yes X No		[ [	,
b	Did the foundation, during the year, pay premiums, dir					_		6b		×
	If "Yes" to 6b, file Form 8870	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
7a	At any time during the tax year, was the foundation a	party to a	prohibited tax	shelter t	ransaction?	「	Yes X No			
b	-	-	=			_		7b		
	t VIII Information About Officers, Dire						, Highly Paid	Emplo	yees	<del></del>
	and Contractors	•	•					•	-	-
1 1	ist all officers, directors, trustees, and foundation	manage	rs and their co	mpensa	ation. See in	structio	ns.			
	(-)		e, and average		mpensation		Contributions to	(e) Exp	ense ac	count,
See	(a) Name and address 990 OFOV		rs per week ed to position		not paid, iter -0-)		oyee benefit plans erred compensation	other	allowan	ces
	ET HENRY	DIREC	TOR							
TEN	FREE STREET, PORTLAND, ME 04101		0.75		2,500		0	ļ		0
MER	TON G HENRY (DECEASED, 4-6-18)	PRESI	DENT AND I	)						
TEN	FREE STREET, PORTLAND, ME 04101		0.75		2,500		0			0
MIC	HAEL J QUINLAN	SECRE	TARY, TRE	A						
TEN	FREE STREET, PORTLAND, ME 04101		0.75		0_		0			0_
MAR	ILYN A LALUMIERE	DIREC	TOR							
TEN	FREE STREET, PORTLAND, ME 04101		0.75		2,500		0_			0
2 (	compensation of five highest-paid employees (other	r than th	nose included	on line	1 - see instr	uctions)	. If none, enter			
"	NONE."									
			(b) Title, and a	verage			(d) Contributions to employee benefit			
	(a) Name and address of each employee paid more than \$50	000,0	hours per w	eek	(c) Comper	sation	plans and deferred	(e) Expe	allowan	
			devoted to po				compensation			
NON	2					-		[		
			ļ				- · · · · · · · · · · · · · · · · · · ·			
						ĺ				
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			1		F					
			<del> </del>		ļ.———			<u> </u>		
								<b> </b>		
			<del> </del>		ļ					
			ļ							
			<u> </u>		<u> </u>					
Tota	number of other employees paid over \$50,000 · · ·	• • • •	· · · · · · ·	<u></u>	· · · · · ·	<u></u>	· · · · · · · <u> </u>	<u></u> _		0_
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MORTON-KELLY CHARITABLE TRUST

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EEA

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreign	found	lations,
	see instructions )		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	17,747,923
b	Average of monthly cash balances	1b	532,429
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	18,280,352
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) · · · · · · · · · · · · · · · · · · ·		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d · · · · · · · · · · · · · · · · · ·	3	18,280,352
4	Cash deemed held for charitable activities  Enter 1 1/2% of line 3 (for greater amount, see		
	instructions) · · · · · · · · · · · · · · · · · · ·	4	274,205
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	18,006,147
6	Minimum investment return. Enter 5% of line 5 · · · · · · · · · · · · · · · · · ·	6	900,307
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	undat	ions
	and certain foreign organizations, check here ▶ and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	900,307
2a	Tax on investment income for 2017 from Part VI, line 5 · · · · · · · · 2a 6,987		
b	Income tax for 2017 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b · · · · · · · · · · · · · · · · · ·	2c	6,987
3	Distributable amount before adjustments Subtract line 2c from line 1	3	893,320
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	893,320
6	Deduction from distributable amount (see instructions)	6	18-11
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	1	
	Ine 1 · · · · · · · · · · · · · · · · · ·	7	893,320
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	926,957
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	926,957
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	6,987
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	919,970
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	founda	
	qualifies for the section 4940(e) reduction of tax in those years		

Part XIII

Undistributed Income (see instructions) (b) Distributable amount for 2017 from Part XI, Years prior to 2016 893,320 2 Undistributed income, if any, as of the end of 2017 **b** Total for prior years 3 Excess distributions carryover, if any, to 2017 a From 2012 . . . . . . . . . 7,608 **b** From 2013 . . . . . . . . 50,489 c From 2014 . . . . . . . . . . d From 2015 . . . . . . . . 9,725 e From 2016 . . . . . . . . . 67,822 Qualifying distributions for 2017 from Part XII, line 4 ► \$ 926,957 a Applied to 2016, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election d Applied to 2017 distributable amount ..... 893,320 e Remaining amount distributed out of corpus . . . 33,637 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: Corpus Add lines 3f, 4c, and 4e Subtract line 5 . 101,459 b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount - see Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) 7,608 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a 93,851 Analysis of line 9 10 a Excess from 2013 · · · · · 50,489 b Excess from 2014 . . . . . c Excess from 2015 · · · · · 9,725 d Excess from 2016 · · · · · Excess from 2017 . . . . . 33,637

orm :	990-PF (2017) <b>M</b> OI	RTON-KELLY	CHARTTARIF	TRIIST		01-0442078	B Page	
					rt VII-A, question 9)	01 0442070	/	
1a	If the foundation has received	a ruling or detern	nination letter tha	it it is a private opera	ting		<del>"</del>	
foundation, and the ruling is effective for 2017, enter the date of the ruling								
b	Check box to indicate whether	the foundation is	a private operat	ing foundation descri	ibed in section	4942(j)(3) of 4	942(j)(5)	
2a	Enter the lesser of the adjuste income from Part I or the mini	d net	Тах уеаг		Prior 3 years		(a) Takal	
	investment return from Part X		(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total	
	each year listed							
b	85% of line 2a · · · · · ·							
С	Qualifying distributions from P line 4 for each year listed .							
d	Amounts included in line 2c not us for active conduct of exempt active							
е	Qualifying distributions made of for active conduct of exempt a Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the alternative test relied upon							
а	"Assets" alternative test - ente	r 						
	(2) Value of assets qualifying section 4942(j)(3)(B)(i)	under • • • •						
b	"Endowment" alternative test - ent of minimum investment return sho Part X, line 6 for each year listed							
С	"Support" alternative test - ent (1) Total support other than g investment income (intere dividends, rents, payment securities loans (section 512(a)(5)), or royalties)	ross st,						
	(2) Support from general pub and 5 or more exempt organizations as provided section 4942(j)(3)(B)(III)	ın						
	(3) Largest amount of suppor an exempt organization	t from	/					
	(4) Gross investment income							
Part				-	the foundation had	\$5,000 or more i	n assets at	
	any time during			115.)				
1 a	Information Regarding Four List any managers of the four	_		e than 2% of the tota	Leantributions received by	the foundation		
•	before the close of any tax ye	ear (but only if the	y have contribute	ed more than \$5,000)	(See section 507(d)(2)	the loundation		
	JOAN M KELLY DECEA	SED 12-5-12						
b	List any managers of the four ownership of a partnership of	ndation who own	10% or more of t			ortion of the		
2	Information Regarding Cor	•		• • •	•			
	Check here ▶ ☐ If the four	ndation only make	es contributions t	o preselected charita	ible organizations and doe	s not accept		
	unsolicited requests for funds complete items 2a, b, c, and			ants, etc , to individua	als or organizations under	other conditions,		
а	The name, address, and tele	phone number or	email address o	f the person to whom	applications should be ac	ddressed		

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

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

990APP

Any submission deadlines

Part XV Supplementary Information (continued)

Recipient	If recipient is an individual, show any relationship to any foundation manager status of	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
SEE ATTACHED SCHEDULE				
			Į.	
				897,50
	-			
Total			▶ 3a	897,50
b Approved for future payment				
GULF OF MAINE RESEARCH INSTITUTE			SUPPORTS UPGRADES	
350 COMMERCIAL STREET	į		AND IMPROVEMETS	
PORTLAND, ME 04101			TO COHEN CENTER	100,00
			GUDDODE GASTEST	
CHILDREN'S MUSEUM &THEATRE OF MAINE			SUPPORT CAPITAL CAMPAIGN FOR NEW	
142 FREE STREET			LOCATION	200,00
PORTLAND, ME 04101			LOCATION	200,00
			<u> </u>	

Enter gross amounts unless otherwise indicated	Unrelated t	ousiness income	Excluded by sec	ction 512, 513, or 514	(e)
`	(a) Business	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue	code	<u> </u>	<del>                                     </del>		
ab					
d		<del>, ,</del>	<del> </del>		
^					· · · · ·
f					
g Fees and contracts from government agencies · · ·			1		
! Membership dues and assessments · · · · · · · ·			<del> </del>		
Interest on savings and temporary cash investments					
Dividends and interest from securities			14	358,184	
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income		· · · · · · · · · · · · · · · · · · ·			
Gain or (loss) from sales of assets other than inventory			18	409,401	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory			1		
Other revenue a					
b				,	
С					
d					
e					
2 Subtotal Add columns (b), (d), and (e)				767,585	
3 Total. Add line 12, columns (b), (d), and (e)				13	767,58
See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities to the					
Line No Explain below how each activity for which inco					
accomplishment of the foundation's exempt pu	irposes (other	than by providing	funds for such pu	rposes) (See instruction	ons)
		····· - ···· - ····			
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			······································		
		11 11 11 11 11 11 11 11 11 11 11 11 11			

Pai	t XVII	Information Organizatio		ers to and Transactions	and Relati	onships V	With No	oncha	ritable	Exem	ot	
1	Did the d			e in any of the following with a	ay other organ	nzation des	cribed				Yes	No
				organizations) or in section 523	-		Cibeu				162	140
	organiza			rigariizadoris) or iri section sz	r, relating to p	ontical						
а	_		ung foundation to a nor	ncharitable exempt organization	n of							
										1a(1)		Χ
										1a(1)		X
b	. ,	insactions								14(2)		- 11
			noncharitable exempt o	organization						1b(1)		Х
				xempt organization						1b(1)		X
	-			ets						1b(3)		X
										1b(4)		X
			•							1b(5)		X
	• •	•		fundraising solicitations						1b(6)		X
С				ner assets, or paid employees						15(0)		X
d				elete the following schedule C								Λ.
				en by the reporting foundation								
				t, show in column (d) the value								
a) Lır		Amount involved		naritable exempt organization		ription of trans					naema	nte
-,	5 /10 (L)	, and drive invented	(b) Nume of nonon	iditable exempt organization	(u) Desci	iption of train	sicis, tiai	13aCtions	3, and 311	aring arra	ngeme	1113
		<del></del>										
									<del></del> -			
					<u> </u>							•
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				······································								
			-	·								
2a	Is the for	indation directly	or indirectly affiliated w	ith, or related to, one or more	tax-exempt o	rganizations						
				501(c)(3)) or in section 527?						☐ Yes	x X	No
b	If "Yes,"	complete the folk	owing schedule	· / · //							ت	
		(a) Name of organ	ızatıon	(b) Type of organizatio	n		(c) De	scription	of relation	nship		
	Under p	penalties of perjury, I and complete. Decla	declare that I have examined	this return, including accompanying so taxpayer) is based on all information of	chedules and stat	ements, and to	the best o	f my knov	vledge and	belief, it is	true,	
Sig	n  🖺 🏏			Taxpayer) is based on all illionnation	of willion preparer	rias ariy kilowii	auge	_		RS discuss		
Her	e <b>//</b> /	Buy!	Mal	une 125-14-2018	PRESIDE	I GMA TN	DIRECT	ror	with the pi	eparer sho	wn belg	w?
	<b>J</b> sig	nature of officer or to.	istere(	Date /	Title				See instru	ctions X	res	No.
)_:	J	Print/Type prepare	Cename	Preparer's signature		Date		Check	∐ if	PTIN		
Paid		Michael J	Quinlan	IM W	<u> </u>	4-13-20	18	self-emp	ployed	P01356	119	
	parer	Firm's name	Jensen Baird	l Gardner & Henry			Firm's Ell	N <b>&gt;</b>				
Jse	Only	Firm's address	Ten Free Str	reet			Phone no	,				
		]	Portland ME	04101				207	-775 <u>-</u>	7271		

**2017** PG01 **Federal Supporting Statements** Name(s) as shown on return 01-0442078 MORTON-KELLY CHARITABLE TRUST FORM 990PF - PART VIII STATEMENT #A05 COMPENSATION EXPLANATION NAME ERIK C JORGENSEN **EXPLANATION** TRUSTEE STIPEND AND ADMINISTRATIVE TRUSTEE SERVICES PG01 FORM 990PF - PART III - LINE 5 STATEMENT #116 OTHER DECREASES SCHEDULE GRANTS PAYABLE 300,000 MISC. ADJSTMNTS (2,220) 297,780 TOTAL PG01 FORM 990PF - PART II - LINE 10(A) STATEMENT #136 INVESTMENTS: STATE AND LOCAL GOVERNMENT OBLIGATION SCHEDULE BOOK VALUE (BOY) BOOK VALUE (EOY) FMV (EOY) CATEGORY 199,468 498,633 PER HM PAYSON 199,453 <u>498,633</u> <u>199,453</u> <u>199,468</u> TOTALS PG01 FORM 990PF - PART II - LINE 10(B) STATEMENT #137 INVESTMENTS: CORPORATE STOCK SCHEDULE BOY BOOK VALUE EOY FMV CATEGORY 10,661,935 10,105,622 13,902,861 PER H.M. PAYSON REPORT 10,661,935 10,105,622 13,902,861 TOTALS

	Federal Supporting Stateme	nts	<b>2017</b> PG01
Name(s) as shown on return	F	EIN	
MORTON-KELLY CHARITABL	E TRUST		01-0442078
FORM 9 INVESTM	• •	STATEMENT #138	
CATEGORY	BOY	BOOK VALU	E EOY FMV
PER H.M. PAYSON REPORT	3,688,350	4,406,44	0 4,398,625
TOTALS	<u>3,688,350</u>	4,406,44	0 4,398,625

		Federal Su	Federal Supporting Statements	nents	2017 PG01
Name(s) as shown on return MORTON-KELLY CHARITABLE TRUST					Your Social Security Number 01-0442078
	FORM 990PF - PART I		- LINE 23 - OTHER EXPENSES SCHEDULE	снероде	STATEMENT #103~
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE	
EXPONENT PHIL MBRSHP D&O INS	750 750	500		250	
BOND PREMIUM (INC NON-1099) MAINE PHILANTHRPY CENTR MBRSHP	16,195	16,195	0	0 0 0 1, 0 0 0 0	
TOTALS	19,695	18,445	0	1,250	
	FORM 990PE	FORM 990PF - PART I - LINE 11	I - OTHER INCOME SCHEDULE	EDULE	PG01 STATEMENT #106~
DESCRIPTION TAX REFUND FOR 2016 TAXES NONDIVIDEND DISTRIBUTIONS	REVENUE AND EXPENSES 8,755 15,524	NET INVESTMENT 8,755 15,524	ADJUSTED NET INCOME 0		
TOTALS	24,279	24,279	0		

		Federal St	Federal Supporting Statements	ments	2017 PG01
Name(s) as shown on return MORTON-KELLY CHARITABLE TRUST					Your Social Security Number 01-0442078
	FORM 990P	FORM 990PF - PART I - LINE 1	- LINE 16(A) - LEGAL FEES SCHEDULE	CHEDULE	STATEMENT #107~
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE	
JENSEN BAIRD GARDNER & HENRY TOTALS	172,72	13,636	0	13,635	
	FORM 990PF - PART I		- LINE 16(C) - OTHER PROFESSIONAL FEES SCHEDULE	FEES SCHEDULE	PG01 STATEMENT #109~
DESCRIPTION H.M PAYSON	REVENUE AND EXPENSES 53,345	NET INVESTMENT 53,345	ADJUSTED NET INCOME	CHARITABLE PURPOSE 0	
TOTALS	53,345	53,345	0	0	
STM-LD					

Name() as shown on rollan	
PORM 990PF - PART I - LINE 18 - TAXES SCHEDULE  BEVENUE  AND EXPENSES  8,000  8,000  2,647  2,647  10,647  10,647  0  10,647  0  10,647  10,647  10,647	Your Social Security Number 01-0442078
AND EXPENSES INVESTMENT NET INCOME PURPOSE B,000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	58
8,000 8,000 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
10,647 10,647 0 10,647 0	

### **Federal Supporting Statements**

2017 PG01
Your Social Security Number

Name(s) as shown on return

MORTON-KELLY CHARITABLE TRUST

01-0442078

## FORM 990PF - PART XV - LINE 2 APPLICATION SUBMISSION INFORMATION

#### GRANT PROGRAM

GENERAL

#### APPLICANT NAME

MICHAEL J. QUINLAN

#### **ADDRESS**

10 FREE STREET PORTLAND, ME 04101

#### TELEPHONE

207-775-7271

#### EMAIL ADDRESS

MQUINLAN@JBGH.COM

#### FORM & CONTENT

LETTER REQUESTING GRANT; GENERAL INFORMATION ABOUT ORGANIZATION INCLUDING LIST OF DIRECTORS/TRUSTEES AND FINANCIAL STATEMENT; PURPOSE AND BUDGET FOR GRANT; COPY OF IRS 501(C)(3)DETERMINATION LETTER. SEE WEBSITE, WWW.MORTON-KELLY.ORG FOR ADDITIONAL INFORMATION AND REQUIREMENTS.

#### SUBMISSION DEADLINE

OCTOBER 1 OF EACH YEAR

#### RESTRICTIONS ON AWARD

DISCRETION OF BOARD OF DIRECTORS, BUT GENERALLY ENVIRONMENTAL, HISTORICAL, CULTURAL AND EDUCATIONAL ORGANIZATIONS AND ACTIVITIES IN MAINE.

# Form 990\_OfOv (2017) MORTON-KELLY CHARITABLE TRUST List of Officers, Directors, Trustees, and Key Employees

1 List all officers, directors, trustees, and key employees for the	year even if they wer	e not compensated		
、 (a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Form W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
ERIK C JORGENSEN DIRECTOR	STN	IA05		
TEN FREE STREET, PORTLAND, ME 04101	0.75	8,900	0	0
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