Form **990-PF** Department of the Treasury Internal Revenue Service

#### **Return of Private Foundation**

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

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

➤ Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2018 or tax year beginning		, and ending	······································	
Name of foundation			A Employer identification	number
The Sukeforth Family Found	ation		01-6148895	j
Number and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
982 Lakeview Drive			(207)649-8	
City or town, state or province, country, and ZIP or foreign p South China, ME 04358	ostal code		C If exemption application is p	ending, check here
G Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
Final return	Amended return			•
Address change	Name change		Foreign organizations me check here and attach co	eeting the 85% test, omputation
H Check type of organization: X Section 501(c)(3) ex		04	E If private foundation sta	tus was terminated
	Other taxable private founda	111011	under section 507(b)(1	)(A), check here $ ightharpoonup$
I Fair market value of all assets at end of year J Accounting		Accrual	F If the foundation is in a	
(from Part II, col. (c), line 16)	her (specify) nn (d) must be on cash basi	<u>s.)</u>	under section 507(b)(1	)(B), check here
Part I   Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
(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)
1 Contributions, gifts, grants, etc., received	645,025.		N/A	
2 Check fithe foundation is not required to attach Sch B Interest on savings and temporary	4 4 4 4			
3 cash investments	1,111.	1,111.		Statement 1
4 Dividends and interest from securities	84,844.	84,844.		Statement 2
5a Gross rents  b Net rental income or (loss)				1
68 Net gain or /loss) from sale of essets not on line 10	428,797.			
B Gross sales price for all 2,151,452.	·			
b Gross sales price for all 2,151,452.  7 Capital gain net income (from Part IV, line 2)		428,797.		
8 Net short-term capital gain				
9 Income modifications Gross sales less returns			RECEIVE	D
10a and allowances				<del>- 18 </del>
b Less Cost of goods sold c Gross profit or (loss)		32	APR 1 3 201	
, , ,		100		88
11 Other income 12 Total Add lines 1 through 11	1,159,777.	514,752.	OCDEN	7
13 Compensation of officers, directors, trustees, etc	0.	p.	OGDEN, O	0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits  8 16a Legal fees				
b Accounting fees Stmt 3	3,500.	1,750.		1,750.
c Other professional fees Stmt 4	57,389.	57,389.		0.
17 Interest				
18 Taxes Stmt 5	1,701.	623.		0.
19 Depreciation and depletion				
E 20 Occupancy  V 21 Travel, conferences, and meetings		<del>-</del>		i
c Other professional fees Stmt 4  17 Interest 18 Taxes Stmt 5  19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23  Contributions of the areate and			<del></del>	
© 23 Other expenses				
to 24 Total operating and administrative				
expenses. Add lines 13 through 23	62,590.	59,762.		1,750. 341,250.
25 Contributions, girts, grants paid	341,250.			341,250.
26 Total expenses and disbursements.	403,840.	59,762.		343,000.
Add lines 24 and 25  27 Subtract line 26 from line 12:	403,040.	35,104.		343,000.
a Excess of revenue over expenses and disbursements	755,937.			
b Net investment income (if negative, enter -0-)	,-	454,990.		
C Adjusted net income (if negative, enter -0-)			N/A	

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions.

		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
LP	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	245,569.	468,018.	468,018.
		Accounts receivable ►	·	<u></u>	
		Less; allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less; allowance for doubtful accounts	<del></del>  -		· · · · · · · · · · · · · · · · · · ·
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other	+	<del></del>	
	ľ				
	,	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts	-		
Assets	8	Inventories for sale or use			
1SS	9	Prepaid expenses and deferred charges	-		
•		Investments - U.S. and state government obligations	6 006 066	6 060 000	6 060 030
		Investments - corporate stock Stmt 6	6,986,866.	6,862,238.	6,862,238.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis		<del> </del>	
		Less accumulated depreciation		<u></u>	
	12	Investments - mortgage loans			
	13	Investments - other Stmt 7	478,030.	199,573.	199,573.
	14	Land, buildings, and equipment; basis			
		Less accumulated depreciation			· · · · · · · · · · · · · · · · · · ·
	15	Other assets (describe ► )			<u> </u>
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	7,710,465.	7,529,829.	7,529,829.
_	17	Accounts payable and accrued expenses			1
	18				
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
Ë		Other liabilities (describe )			
		, , , , , , , , , , , , , , , , , , ,			i
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
es	24	Unrestricted		}	j
ğ		Temporarily restricted		-	
ala					
<u> </u>	20	Permanently restricted  Foundations that do not follow SFAS 117, check here			
<u>.</u> 5		·			
or Fund Balances		and complete lines 27 through 31.	0.	0.	
şţ	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	_		
Ϋ́	29	Retained earnings, accumulated income, endowment, or other funds	7,710,465.	7,529,829.	
ž	30	Total net assets or fund balances	7,710,465.	7,529,829.	
			7 710 465	7 500 000	
_	31	Total liabilities and net assets/fund balances	7,710,465.	7,529,829.	
P	art	III Analysis of Changes in Net Assets or Fund B	alances		
$\frac{-}{1}$	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		11	7,710,465.
	•	r amount from Part I, line 27a		2	755,937.
		r increases not included in line 2 (itemize)		3	733,3374
		lines 1, 2, and 3	<del>`</del>	4	8,466,402.
		eases not included in line 2 (itemize)  Unrealized Los	s on Investmen		936,573.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	7,529,829.
•	· Ulai	mor access of fully palatices at eller of Year tillle 4 fittings tille of "Fait II. bu	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 0 1	. , ,

	d Losses for Tax on In		t Income							- ugo o
	kınd(s) of property sold (for exar nouse; or common stock, 200 shs		ite,	( <b>6</b> ) F	low a Purc Don	cquired chase ation	(c) Date (mo., c	acquired day, yr )	(d) Date (mo , da	sold y, yr.)
1a Publicly Traded	Securities			T						
b Capital Gains D	ividends		•							
С				<u> </u>						
d			<del></del>			-				
<u>e</u>	(f) Depresention allowed	(a) Co.	et or other basis	Щ			(h) C	oup or /loco	<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					iain or (loss) s (f) minus (		
a 2,132,492.			1,722,65	5.					409,	,837.
ь 18,960.									18,	,960.
c										
d										
Complete anhy for accets about a	rain in column (h) and award but	tha faundation	0.00.10/21/60	_						
Complete only for assets showing of	(j) Adjusted basis		cess of col. (1)					Col. (h) gain not less thai		
(i) FMV as of 12/31/69	as of 12/31/69	over	col. (j), if any	- 1				(from col. (		
a		l							409	,837.
b										,960.
C										
d										
e						1				
2 Capital gain net income or (net capit	al loss) $\begin{cases} & \text{if gain, also enter} \\ & \text{if (loss), enter -0-} \end{cases}$	n Part I, line In Part I, line	7 7	}	2				428,	,797.
3 Net short-term capital gain or (loss)		ıd (6).								
If gain, also enter in Part I, line 8, col	lumn (c)			<b> </b>				N/A		
If (loss), enter -0- in Part I, line 8  Part V   Qualification Unit	er Section 4940(e) for	Reduced	Tax on Net	Inv	3 estn	l nent inc	ome	N/A	· <del>-</del> .	
(For optional use by domestic private fo										
, , , , , , , , , , , , , , , , , , , ,	ŕ				-,					
If section 4940(d)(2) applies, leave this	part blank									
Was the foundation liable for the section			•	riod?					Yes [	X No
If "Yes," the foundation doesn't qualify u		•		ntrion						
1 Enter the appropriate amount in eac		istructions be	lore making any e				ī		(d)	
Base period years Calendar year (or tax year beginning	in) Adjusted qualifying dist	tributions	Net value of no	(c) nchar		use assets	1	Distrib	pùtión ratio rided by col. (	(c))
2017		7,998.		6	, 65	2,536		(001. (0) 011		$\frac{977}{11788}$
2016		7,409.				7,660				50095
2015	29	1,179.		5	, 59	0,865	•			52081
2014		9,816.				0,362				16357
2013	24	7,589.		5	, 59	7,369	•	T	.04	14233
A T-1-1-(1							١,		2.2	34554
2 Total of line 1, column (d) 3 Average distribution ratio for the 5 w	our back paried - duude the total c	on line 2 by 5	O or by the number	or of v	/OOFC		2_		• 4 3	14334
3 Average distribution ratio for the 5-y the foundation has been in existence		JII IIIIE Z UY J.	o, or by the number	ei ui y	/cais		3		. 04	16911
the foundation has been in existence	in 1000 than o youro									
4 Enter the net value of noncharitable-	use assets for 2018 from Part X, I	line 5					4	1	7,733,	196.
									_	
5 Multiply line 4 by line 3							5		362,	<u>,772.</u>
									4	EEO
6 Enter 1% of net investment income (	1% of Part I, line 27b)						6		4,	550.
7 Add lines 5 and 6							7		367	322.
י אווו מוווי אוווי אווי אווי אוויי							<del>  '</del>			<u> </u>
8 Enter qualifying distributions from P	•						8		343,	000.
If line 8 is equal to or greater than lin See the Part VI instructions.	e 7, check the box in Part VI, line	1b, and comp	olete that part using	g a 19	% tax ı	rate.				

Form 990-PF (2018) The Sukeforth Family Foundat	tion		01-614			Page 4
Part VI Excise Tax Based on Investment Income (Section		4940(e), or 4	948 - see	instru	ction	าร)
1a Exempt operating foundations described in section 4940(d)(2), check here  a	and enter "N/A" on line 1.	)				1
Date of ruling or determination letter (attach copy of letter i	if nece <u>ssary</u> -see instruct	ions) -				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	e 🕨 🔲 and enter 19	6 } [	1		9,1	00.
of Part I, line 27b						1
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, ent	ter 4% of Part I, line 12, c	ol (b) 📗				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations on	ly; others, enter -0-)		2			0.
3 Add lines 1 and 2			3		9,1	00.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations or	nly; others, enter -0-)		4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5		9,1	00.
6 Credits/Payments:						<del></del> 1
a 2018 estimated tax payments and 2017 overpayment credited to 2018	6a	1,200.				- 1
b Exempt foreign organizations - tax withheld at source	6b	0.				ļ
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	ļ			1
d Backup withholding erroneously withheld	6d	0.	Ì			1
7 Total credits and payments Add lines 6a through 6d			7		1,2	00.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is	s attached		8			0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		▶i	9		7,9	00.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpa	nid	▶	10			<del></del>
11 Enter the amount of line 10 to be: Credited to 2019 estimated tax		Refunded▶	11			
Part VII-A   Statements Regarding Activities						
1a During the tax year, did the foundation attempt to influence any national, state, or local	legislation or did it partic	pate or intervene	ın		Yes	No
any political campaign?				1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political pi	urposes? See the instruct	tions for the defini	tion	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and cor						_
distributed by the foundation in connection with the activities.						_
c Did the foundation file Form 1120-POL for this year?				1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed durin	g the year:					_
(1) On the foundation. ▶ \$ 0 • (2) On foundation mana	agers. ► \$	0.				1
e Enter the reimbursement (if any) paid by the foundation during the year for political exp	penditure tax imposed on	foundation				
managers ▶ \$ 0.						ł
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.						<u> </u>
3 Has the foundation made any changes, not previously reported to the IRS, in its govern	ning instrument, articles o	if incorporation, o	r	ll		
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	e year?			4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the y	year?			5		X
If "Yes," attach the statement required by General Instruction T						1
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfi	ied either:					- 1
<ul> <li>By language in the governing instrument, or</li> </ul>				1		1
<ul> <li>By state legislation that effectively amends the governing instrument so that no mand</li> </ul>	datory directions that con	flict with the state	law	İ		
remain in the governing instrument?				6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," of	complete Part II, col. (c), a	and Part XV		7	Х	
8a Enter the states to which the foundation reports or with which it is registered. See instr	uctions.				į	į
ME		· · ·				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to t	the Attorney General (or o	lesignate)		<u> </u>		
of each state as required by General Instruction G? If "No," attach explanation				8b	$\overline{\mathbf{x}}$	
9 Is the foundation claiming status as a private operating foundation within the meaning	of section 4942(j)(3) or 4	942(j)(5) for caler	ndar			
year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes,"				9		$\overline{\mathbf{x}}$
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a se	chedule listing their names an	d addresses		10		X
			Fo	rm 990	-PF	2018)

	· · · · · · · · · · · · · · · · · · ·	-61488	95	_	Page !
Pá	art VII-A Statements Regarding Activities (continued)	<del></del>		\ <u></u>	
	And the state of the feet has been been a selective and the state of t			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				v
	section 512(b)(13)? If "Yes," attach schedule. See instructions	<b>⊢</b>	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileg	- 1	12		х
40	If "Yes," attach statement. See instructions	<u> </u>	13	X	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address   N/A	L	13	77	
14	The books are in care of S. Douglas Sukeforth  Telephone no. (	207164	9_	844	6
14		±4 <b>►</b> 043			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	P4 <u>0 2 3</u>	<del></del>		П
13	and enter the amount of tax-exempt interest received or accrued during the year	. 1	N	/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,	ــــــــــــــــــــــــــــــــــــــ		Yes	No
10	securities, or other financial account in a foreign country?	Г	16	103	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		<u></u>		
	foreign country				
Pa	art 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	Νo
18	a 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?	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	_			
	a disqualified person?	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?				
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1			
	for the benefit or use of a disqualified person)?	X No			
	(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.)	X No			
t	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	_			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	▶□ ┌			
(	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	_ا			
	before the first day of the tax year beginning in 2018?	L	1c		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)):				
á	a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	_			
	before 2018?	X No			
	If "Yes," list the years $\blacktriangleright$				
t	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	-			
	,	N/A	2b		
(	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
_	,				
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes	V			
	• •	a_No	Ì		
t	o If "Yes," did it have excess business holdings in 2018 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 the following period by after the section 4943(c)(7)) to dispose the following period by after the section 4943(c)(7)) to dispose the following period (the section 4943(c)(7)) to dispose the following pe	5			
	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 foundation had excess business holdings in 2018.)	N/A	3b		
	TOTAL MAZO, TO DETERMINE IT THE TOURIDATION HAD EXCESS DUSINESS HOLDINGS III ZU 10.1	/ 42 1	ו ענ		

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

had not been removed from jeopardy before the first day of the tax year beginning in 2018?

**b** Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Page 6

•	Form 990-PF (2018) The Sukeforth Family Fou			01-61488	95	_	Page 6
	Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)			
	5a During the year, did the foundation pay or incur any amount to.				_	Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No 📙			'
	(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir					
	any voter registration drive?			es 🗶 No 📗			1
	(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Y	es 🗶 No 🍐	٠,		
	(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			,	• •	
	4945(d)(4)(A)? See instructions		Y	es 🗶 No 📗			3
	(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or t					
	the prevention of cruelty to children or animals?		Y	es 🗶 No	,	•	
	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations				
	section 53.4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b		
	Organizations relying on a current notice regarding disaster assistance, check	here		▶□ [			i
	c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	from the tax because it mainta	ined		,		- 1
	expenditure responsibility for the grant?	N	I/A 🔲 Y	es D No			ĺ.,
	If "Yes," attach the statement required by Regulations section 53.4945-5(d).						.
	6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on					1
	a personal benefit contract?		Y	es 🗶 No 📙			
	b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b		X
	If "Yes" to 6b, file Form 8870.				,		٠,
	7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y	es 🗶 No		1	' '
	b If "Yes," did the foundation receive any proceeds or have any net income attrib	utable to the transaction?		N/A	7b		
	8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	\$1,000,000 in remuneration o	r		•	,	
	excess parachute payment(s) during the year?		Y	es X No			· Ì
	Part VIII. Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highl	у			
	Paid Employees, and Contractors						
	1 List all officers, directors, trustees, and foundation managers and	·					
	(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	a (	e) Exp	ense , other
	• •	to position	enter -0-)	and deterred compensation		allowa	nces
	S. Douglas Sukeforth	Trustee			1		
	982 Lakeview Drive				Ì		
	South China, ME 04358	1.00	0.	0.			0.
	Rita C. Sukeforth	Trustee					
	982 Lakeview Drive	]					
	South China, ME 04358	1.00	0.	0.			0.
		]					
					L_		
		]					
		]					
				<u> </u>			
	2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	1 7	- 1 Eve	
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	a	e) EXP	ense , other
		devoted to position		compensation		allowa	nces
	NONE						
					<u> </u>		
		4					
					<b>—</b>		
		-	<u> </u>				
					<u>L</u> .		
			<b>1</b>				
					<u> </u>		
		4					
		L	I	<u> </u>	<u> </u>		0
	Total number of other employees paid over \$50,000	<u></u>			000	DE	(2018)
				Form	フフし		(2010)

823551 12-11-18

0.

Total. Add lines 1 through 3

All other program-related investments. See instructions.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.	,	<u>-</u>
a	Average monthly fair market value of securities	1a	7,659,675.
b	Average of monthly cash balances	1b	7,659,675. 191,285.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	7,850,960.
е	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
	1c (attach detailed explanation)   1e   0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	7,850,960.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	117,764.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,733,196.
6	Minimum investment return. Enter 5% of line 5	6	386,660.
P	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations an	d certain	· · · · · · · · · · · · · · · · · · ·
	foreign organizations, check here 🕨 🔲 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	386,660.
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	2c	9,100. 377,560.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	377,560.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	377,560.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	343,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
þ	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	343,000.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	343,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	ualifies fo	or the section

### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,				377,560.
line 7				377,300.
2 Undistributed income, if any, as of the end of 2018		į	226 262	
a Enter amount for 2017 only			326,363.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:		0.		
• -				
a From 2013				
<b>b</b> From 2014				
¢ From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ►\$ 343,000.				i
a Applied to 2017, but not more than line 2a			326,363.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		<u> </u>
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			i
d Applied to 2018 distributable amount				16,637.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2018	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.	İ		0.	
f Undistributed income for 2018 Subtract		<del></del>		
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				360,923.
7 Amounts treated as distributions out of				1
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 2013				
not applied on line 5 or line 7	0.			
• • • • • • • • • • • • • • • • • • • •				
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0.			
<b>}</b>				
10 Analysis of line 9.				
a Excess from 2014				ļ
b Excess from 2015		Ĭ		
c Excess from 2016				
d Excess from 2017				Į
e Excess from 2018				

823581 12-11-18

		ly Foundat:			148895 Page 1
Part XIV   Private Operating Fo			II-A, question 9)	N/A	<del></del> ,
1 a If the foundation has received a ruling or c					
foundation, and the ruling is effective for 2	•	-	▶ └	1	1010(1)(5)
b Check box to indicate whether the foundat		ng foundation described		4942(j)(3) or4	1942( <sub>1</sub> )(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 0017	Prior 3 years	T (4) 2015	(a) Total
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed				/_/	
<b>b</b> 85% of line 2a				/	
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not			,		
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					<u> </u>
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:			X		
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,		/			
dividends, rents, payments on	/				
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public			· · · · · · · · · · · · · · · · · · ·		
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income				· · · · · · · · · · · · · · · · · · ·	
Part XV: Supplementary Inform	mation (Comple	te this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during the					
1 Information Regarding Foundation	Managers:				
a List any managers of the foundation who l			tributions received by the	e foundation before the cl	ose of any tax
year (but only if they have contributed mo	re than \$5,000). (See s	ection 507(d)(2) )			
See Statement 8					
b List any managers of the foundation who other entity) of which the foundation has a			(or an equally large port	ion of the ownership of a	partnership or
None					
2 Information Regarding Contribution	n, Grant, Gift, Loan.	Scholarship, etc P	rograms:	-	
Check here ▶ 🗶 if the foundation only	y makes contributions	to preselected charitable	organizations and does		uests for funds. If
the foundation makes gifts, grants, etc., to		<del></del>			
a The name, address, and telephone numbe	r or email address of th	e person to whom appl	cations should be addres	ssed.	
<b>b</b> The form in which applications should be	submitted and informat	tion and materials they s	hould include;		<u> </u>
c Any submission deadlines:	-	<del></del>	<u> </u>		
- ,					
d Any restrictions or limitations on awards,	such as by geographica	al areas, charitable fields	, kinds of institutions, or	other factors:	
_ :,		,	,		

Page 11

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
Children's Dyslexia Centers, Inc.	N/A	PC	Bangor Center	
33 Marrett Road				
Lexington, MA 02421		<u> </u>		5,00
China Baptist Church	N/A	PC	General Operating	
36 Causeway Road	N/A	•	Support	
China, ME 04358			Support	5,10
Christian Education League	N/A	PC	General Operating	
70 Sewall Street			Support	
Augusta, ME 04330				40,000
Eastern Maine Healthcare Systems	N/A	PC	Inland Hospital	
200 Kennedy Memorial Drive Waterville, ME 04901				15,00
waterville, ME 04501	-			13,000
Hospice Volunteers of Waterville Area	N/A	PC	General Operating	
304 Main Street	N/ F	1.0	Support	
Waterville, ME 04901				1,000
Humane Society Waterville Area	N/A	PC	General Operating	
100 Webb Road			Support	
Waterville, ME 04901		ļ	Barbara Woodlee	100
Kennebec Valley Community College 92 Western Avenue	N/A	GOV	Scholarship Fund	
Fairfield, ME 04937		j	(\$5,000); General	
			Operating Support	
			(\$5,000)	10,000
Maine Right to Life Educational Fund	N/A	PC	General Operating	
P.O. Box 257	1		Support	
Auburn, ME 04212-0257		<del>                                     </del>		2,000
Riding to the Top Therapeutic Riding	N/A	PC	General Operating	
Center			Support	
14 Lilac Drive		1		عند د
Windham, ME 04062				1,000
Salvation Army	NI/A C	PC PC	Canaral Operation	
Salvation Army P.O. Box 3647	N/A	PC	General Operating Support	
Portland, ME 04104				5,000
Total from continuation sheets	1	1		267,750

Part XV Supplementary Information Grants and Contributions Paid During the				
Recipient	If recipient is an individual,	<del> </del>		
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
· · · · · · · · · · · · · · · · · · ·	or substantial contributor	recipient		
Shriners Hospital for Children	N/A	PC	Boston Hospital	
2900 North Rocky Point Drive	,,,,,	'	(\$10,000); Springfield	
Tampa, FL 33607			Hospital (\$10,250);	
Tumpu, 12 3300,			Tampa Hospital (\$200)	20,450
				·
Colon Rimo Dopontment	7/3	CON	namenti orași de la constitut	
Solon Fire Department	N/A	GOV	General Operating	
P.O. Box 214			Support	1 000
Solon, ME 04979		<del> </del>		1,000
Special Olympics Maine	N/A	PC	General Operating	
125 John Roberts Road			Support	
South Portland, ME 04106				200
Spectrum Generations	N/A	PC ^	General Operating	
38 Gold Street			Support	
Waterville, ME 04901				4,500
Sunshine Club of Crippled Children	N/A	PC	General Operating	
13 Starlight Drive			Support	
Eddington, ME 04228				4,000
Thomas College	N/A	PC	General Operating	
180 West River Road	[·/·	••	Support	
Waterville, ME 04901				100,000
•				
Town of China	N/A	GOV	China Community Days	
571 Lakeview Drive	N/A	907	(\$500); Fire	
China, ME 04358			Department (\$3,000)	3,500
	-		beparement (\$5,000)	3,300
w water washing a second				
VA Maine Healthcare System-Togus	N/A	GOV	Hospice Services	
l VA Center Augusta, ME 04330		1		100
augusta, ME 04330			+	100
Vassalboro Fire Department	N/A	GOV	General Operating	
P.O. Box 134		1	Support	
North Vassalboro, ME 04962			+	30,000
Jassalboro Food Station Pantry	N/A	PC	General Operating	
6 Ferland Lane			Support	
Jassalboro, ME 04989		<u> </u>		100.
Total from continuation sheets				

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	CONTRIBUTION	
Waldo County General Hospital	N/A	PC	Donald S. Walker	
118 Northport Avenue			Health Center	5,00
Belfast, ME 04915				3,00
Waterville Area Boys & Girls Club	N/A	PC	General Operating	
.26 North Street			Support	
Materville, ME 04901				12,50
Vaterville Area YMCA	N/A	PC	Camp Tracy Campership	
.26 North Street Waterville, ME 04901			Fund	1,00
				_,
Vinslow Family Fourth of July	N/A	PC	General Operating	
Committee			Support	
P.O. Box 8006 Winslow, ME 04901				20
Vinslow Fire Department	N/A	GOV	General Operating	
114 Benton Avenue			Support	
Winslow, ME 04901				1,00
`				
		}		
			,	
			+	
			1	

Part XVI-A	Analy	sis of Inco	me-Produci	ng Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ed by section 512, 513, or 514	(e)	
	(a)	(b)	(C) Exclu-	(d)	Related or exempt	
1 Program service revenue.	Business code	Amount	sion	Amount	function income	
a			<del>  -  </del>			
h	- <del> </del>		<del>                                     </del>	-		
	-	· <del></del>	<del>                                     </del>			
	- <del>                                    </del>		$\vdash - \vdash$			
•	- <del>                                    </del>		<del>                                     </del>			
			<del>                                     </del>			
- Face and appropriate from accomment accommen			┼─┼			
g Fees and contracts from government agencies			$\vdash$			
2 Membership dues and assessments	<b>-</b>		$\vdash$			
3 Interest on savings and temporary cash			14	1 111		
investments			14	1,111.		
4 Dividends and interest from securities	,	* * * * * * * * * * * * * * * * * * * *	<del>  + + +</del>	04,044.		
5 Net rental income or (loss) from real estate:	,	in the second	<del>                                     </del>			
a Debt-financed property			$\vdash$			
b Not debt-financed property			$\vdash$			
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory			18	428,797.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a	1					
b		-				
c						
d		<del> </del>				
e	-					
12 Subtotal. Add columns (b), (d), and (e)	-	0.	1	514,752.	C	
13 Total. Add line 12, columns (b), (d), and (e)		<del></del>		13	514,752	

# Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

▼	the foundation's exempt purposes (other than by providing funds for such purposes).						
	<del></del>						
$\dashv$							
$\rightarrow$							
$\dashv$							
$\dashv$							
+							
+							

Form **990-PF** (2018)

823621 12-11-18

2a	Is the	foundation directly or indirectly aff	liated with, or related to,	one or more tax-exempt organiz	zations described	
	ın sec	tion 501(c) (other than section 501	(c)(3)) or in section 5277	)		Yes X No
b	If "Yes	s," complete the following schedule				
		(a) Name of organiza	tion	(b) Type of organization	(c) Descript	tion of relationship
		N/A				
Sig He	in a	Inder penalties of perjury, I declare that I in the belief, the true, correct, and complete and the belief the	Declaration of preparer (other	than taxpayer) is based on all inform  4-7-/9  Date	Trustee Title	wledge May the IHS discuss this return with the preparer shown below? See instr
		Print/Type preparer's name	I Preparer	's-stopature	Date Check	l if I PTIN

P01310283

(207) 879-2100

Firm's EIN ► 01-0494526

Paid

Preparer

**Use Only** 

0.3./16/19

self- employed

Phone no.

Nicholas E. Porto

Firm's address ► BOX 507

Firm's name ► BAKER NEWMAN

PORTLAND, ME 04112

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

To Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Name of the organization

**Employer identification number** 

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

	Th	e Sukeforth Family Foundation	01-6148895
Organiz	zation type (check o	ne)	
Filers o	f:	Section:	
Form 99	90 or 990-EZ	501(c)( ) (enter number) organization	
Filers of:  Section:  Form 990 or 990-EZ			
		527 political organization	
Form 99	90-PF	<b>X</b> 501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	,
Note: O	only a section 501(c)	· · · · · · · · · · · · · · · · · · ·	Rule See instructions
X	•		• • • • • • • • • • • • • • • • • • • •
Special	Rules		
	sections 509(a)(1) any one contributo	and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the ar	6a, or 16b, and that received from
	year, total contribu	tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or e	ducational purposes, or for the
	year, contributions is checked, enter his purpose Don't con	exclusively for religious, charitable, etc., purposes, but no such contributions totale here the total contributions that were received during the year for an exclusively religing higher any of the parts unless the <b>General Rule</b> applies to this organization because	d more than \$1,000 If this box ous, charitable, etc , e it received <i>nonexclusively</i>
but it m	ust answer "No" on		

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Employer identification number

The S	Sukeforth	Family	Foundation
-------	-----------	--------	------------

01-6148895

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	S. Douglas & Rita C. Sukeforth  982 Lakeview Drive  South China, ME 04358	\$ 645,025.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - \$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupation (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
823452 11-08		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

## The Sukeforth Family Foundation

01-6148895

וופ או	Reforch Family Foundation		-0140033
art II	Noncash Property (see instructions) Use duplicate copies of Part II	if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	Various Publicly Traded Securities	-	
_		\$ 415,005.	12/27/18
(a) No. rom Part I	. (b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		- - - - - - - -	
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- $ $		- - - \$	•
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - - \$	
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - \$	
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received
		-	
		_ _	

Employer identification number

The S	ukeforth Family Foundat	ion		01-6148895					
Partilli	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious,	tions to organizations described in a through (e) and the following line er charitable, etc., contributions of \$1,000 or	itry For organizations						
(a) No.	Use duplicate copies of Part III if additiona	I space is needed	<del></del>	<del> </del>					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held					
		(e) Transfer of gri	it						
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee					
(a) No. from			/						
Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held					
		(e) Transfer of git	τ						
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee					
(a) Na									
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held					
1		(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held					
		(e) Transfer of gıf	t						
	Transferee's name, address, a	nd ZIP + 4	Relationship of trai	nsferor to transferee					
		j							

Form 990-PF Intere	est on Savi	ngs and Tem	porary Cash	Investments	Statement 1	
Source		Reve	(a) Revenue Net In Per Books In		(c) Adjusted Net Income	
RBC Advisors			1,111.	1,111.		
Total to Part I, li	ne 3		1,111.	1,111.		
Form 990-PF	Dividend	s and Inter	est from Se	curities	Statement 2	
Source	Gross Amount	Capital Gains Dividend	Revenu		-	
RBC Advisors	103,804	18,96	0. 84,8	44. 84,84	4.	
To Part I, line 4	103,804	18,96	0. 84,8	84,84	4.	
Form 990-PF		Accounti	ng Fees		Statement 3	
Description		(a) Expenses Per Books	(b) Net Invest ment Incom	=		
Accounting Fees		3,500.	1,75	0.	1,750.	
To Form 990-PF, Pg	1, ln 16b	3,500.	1,75	0.	1,750.	
Form 990-PF	0	ther Profes	sional Fees		Statement 4	
Description		(a) Expenses Per Books	(b) Net Investment Income			
Investment Fees		57,389.	57,38	9.	0.	
To Form 990-PF, Pg	1, ln 16c	57,389.	57,38	9.	0.	
	-			<del></del>		

Form 990-PF	Tax	es	<del></del>	Statement	5 —
Description	(a) Expenses Per Books	(b) Net Invest- ment Income			
Foreign Tax Excise Tax	623. 1,078.	623			0 . 0 .
To Form 990-PF, Pg 1, ln 18	1,701.	623	•		0.
Form 990-PF	Corporat	e Stock		Statement	6
Description		В	ook Value	Fair Market Value	
Corporate Securities-see Stat	tement 9		6,862,238.	6,862,238	8.
Total to Form 990-PF, Part I	I, line 10b	_	6,862,238.	6,862,238	8.
Form 990-PF	Other Inv	estments		Statement	7
Description		luation ethod B	ook Value	Fair Market Value	
Mutual Funds-see Statement 9 FMV			199,573.	199,573	3.
Total to Form 990-PF, Part II	I, line 13		199,573.	199,573	3.
Form 990-PF	Part XV - L of Foundati			Statement	8

Name of Manager

S. Douglas Sukeforth Rita C. Sukeforth