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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](http://www.irs.gov/Form990PF) for instructions and the latest information.

OMB No. 1545-0052

2020

Open to Public Inspection

For calendar year 2020, or tax year beginning 01-01-2020

, and ending 12-31-2020

Name of foundation

BECTON FAMILY FOUNDATION

JUSTIN W HEATTER TRUSTEE

Number and street (or P.O. box number if mail is not delivered to street address)

PO BOX 308

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

HOMOSASSA, FL 34487

G Check all that apply:

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$

9,991,384

J Accounting method:

☒ Cash

☐ Accrual

☐ Other (specify) \_\_\_\_\_

(Part I, column (d) must be on cash basis.)

A Employer identification number

04-6834092

B Telephone number (see instructions)

(239) 775-4466

C If exemption application is pending, check here

▶ ☐

D 1. Foreign organizations, check here.....

▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ...

▶ ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here .....

▶ ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here .....

▶ ☐

Part I

Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

Revenue

1 Contributions, gifts, grants, etc., received (attach schedule)

2 Check ▶ ☒ if the foundation is not required to attach Sch. B

3 Interest on savings and temporary cash investments

4 Dividends and interest from securities

5a Gross rents

b Net rental income or (loss)

6a Net gain or (loss) from sale of assets not on line 10

b Gross sales price for all assets on line 6a

7 Capital gain net income (from Part IV, line 2)

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns and allowances

b Less: Cost of goods sold

c Gross profit or (loss) (attach schedule)

11 Other income (attach schedule)

12 Total. Add lines 1 through 11

24 Total operating and administrative expenses. Add lines 13 through 23

25 Contributions, gifts, grants paid

26 Total expenses and disbursements. Add lines 24 and 25

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

Operating and Administrative Expenses

13 Compensation of officers, directors, trustees, etc.

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees (attach schedule)

b Accounting fees (attach schedule)

c Other professional fees (attach schedule)

17 Interest

18 Taxes (attach schedule) (see instructions)

19 Depreciation (attach schedule) and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses (attach schedule)

24 Total operating and administrative expenses. Add lines 13 through 23

25 Contributions, gifts, grants paid

26 Total expenses and disbursements. Add lines 24 and 25

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X

Form 990-PF (2020)

<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .			
	<b>2</b> Savings and temporary cash investments . . . . .	51,351	47,642	47,642
	<b>3</b> Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	1,165,121	1,165,085	9,943,742
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .			
	<b>14</b> Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)				
<b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	1,216,472	1,212,727	9,991,384	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .		0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	<b>24</b> Net assets without donor restrictions . . . . .			
	<b>25</b> Net assets with donor restrictions . . . . .			
	<b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	<b>26</b> Capital stock, trust principal, or current funds . . . . .	1,216,472	1,212,727	
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund			
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds			
	<b>29</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .	1,216,472	1,212,727	
<b>30</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) .	1,216,472	1,212,727		

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>		
<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	1,216,472
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	-3,745
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	1,212,727
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	<b>6</b>	1,212,727

**Part IV Capital Gains and Losses for Tax on Investment Income**

<b>(a)</b> List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo., day, yr.)	<b>(d)</b> Date sold (mo., day, yr.)
<b>1 a</b> 300 BECTON DICKINSON & CO		D	1997-04-10	2020-02-19
<b>b</b> 350 BECTON DICKINSON & CO		D	1997-04-10	2020-05-15
<b>c</b> 500 BECTON DICKINSON & CO		D	1997-04-10	2020-08-20
<b>d</b> 500 BECTON DICKINSON & CO		D	1997-04-10	2020-09-16
<b>e</b> 380 BECTON DICKINSON & CO		P	1997-04-10	2020-11-19

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 77,303		5	77,298
<b>b</b> 92,403		6	92,397
<b>c</b> 130,300		9	130,291
<b>d</b> 119,041		9	119,032
<b>e</b> 92,263		7	92,256

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
<b>(i)</b> F.M.V. as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col. (i) over col. (j), if any	
<b>a</b>			77,298
<b>b</b>			92,397
<b>c</b>			130,291
<b>d</b>			119,032
<b>e</b>			92,256

<b>2</b> Capital gain net income or (net capital loss)		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	511,274
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8			<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income****SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE**

<b>1</b> Reserved				
<b>(a)</b> Reserved	<b>(b)</b> Reserved	<b>(c)</b> Reserved	<b>(d)</b> Reserved	
<b>2</b> Reserved . . . . .			<b>2</b>	
<b>3</b> Reserved. . . . .			<b>3</b>	
<b>4</b> Reserved . . . . .			<b>4</b>	
<b>5</b> Reserved . . . . .			<b>5</b>	
<b>6</b> Reserved . . . . .			<b>6</b>	
<b>7</b> Reserved . . . . .			<b>7</b>	
<b>8</b> Reserved , . . . .			<b>8</b>	

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b> Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)			
<b>b</b> Reserved.		<b>1</b>	8,357
<b>c</b> All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
<b>2</b> Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		<b>2</b>	
<b>3</b> Add lines 1 and 2.		<b>3</b>	8,357
<b>4</b> Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		<b>4</b>	
<b>5</b> <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-.		<b>5</b>	8,357
<b>6</b> Credits/Payments:			
<b>a</b> 2020 estimated tax payments and 2019 overpayment credited to 2020	<b>6a</b>		16,757
<b>b</b> Exempt foreign organizations—tax withheld at source	<b>6b</b>		
<b>c</b> Tax paid with application for extension of time to file (Form 8868)	<b>6c</b>		
<b>d</b> Backup withholding erroneously withheld	<b>6d</b>		
<b>7</b> Total credits and payments. Add lines 6a through 6d.		<b>7</b>	16,757
<b>8</b> Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.		<b>8</b>	
<b>9</b> <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> .		<b>9</b>	
<b>10</b> <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> .		<b>10</b>	8,400
<b>11</b> Enter the amount of line 10 to be: <b>Credited to 2021 estimated tax</b> 8,400 <b>Refunded</b>		<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>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.</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. ► \$ _____ <b>(2)</b> On foundation managers. ► \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	<b>2</b>	No
<b>3</b> 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? <i>If "Yes," attach a conformed copy of the changes</i>	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	<b>5</b>	No
<b>6</b> 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?	<b>6</b>	No
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ► MA _____		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i>	<b>8b</b>	Yes
<b>9</b> 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 2020 or the taxable year beginning in 2020? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	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 . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ▶ <u>JUSTIN W HEATTER</u> Telephone no. ▶ <u>(239) 775-4466</u>			

Located at ▶ PO BOX 308 HOMOSASSA FLZIP+4 ▶ 34487

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶ <b>15</b>			
<b>16</b>	At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .	<b>16</b>	<b>Yes</b>	<b>No</b>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

**Part 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.**

		<b>Yes</b>	<b>No</b>
<b>1a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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 . . . . . <input type="checkbox"/>	<b>1b</b>	<b>No</b>
<b>c</b>	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 2020? . . . . . <input type="checkbox"/>	<b>1c</b>	<b>No</b>
<b>2</b>	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)):		
<b>a</b>	At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
<b>b</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 <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . . <input type="checkbox"/>	<b>2b</b>	
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If "Yes," did it have excess business holdings in 2020 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 foundation had excess business holdings in 2020.) . . . . . <input type="checkbox"/>	<b>3b</b>	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?	<b>4b</b>	<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

<b>5a</b>	During the year did the foundation pay or incur any amount to:		<b>Yes</b>	<b>No</b>
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions . . . . .		<b>5b</b>	
	Organizations relying on a current notice regarding disaster assistance check here. . . . .	<input type="checkbox"/>		
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . . If "Yes," attach the statement required by Regulations section 53.4945–5(d).	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . If "Yes" to 6b, file Form 8870.		<b>6b</b>	<b>No</b>
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .		<b>7b</b>	
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
<b>(a)</b> Name and address	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
See Additional Data Table				
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
<b>(a)</b> Name and address of each employee paid more than \$50,000	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
NONE				
<b>Total</b> number of other employees paid over \$50,000. . . . .				

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. . . . . ▶		

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

1	Expenses

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 . . . . . ▶	

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	10,239,135
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	247,136
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	10,486,271
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	10,486,271
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	157,294
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	10,328,977
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	516,449

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	516,449
<b>2a</b>	Tax on investment income for 2020 from Part VI, line 5. . . . .	<b>2a</b>	8,357
<b>b</b>	Income tax for 2020. (This does not include the tax from Part VI.). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	8,357
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	508,092
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	508,092
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	508,092

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	605,000
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	605,000
<b>5</b>	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. . . . .	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	605,000

**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 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
<b>1</b> Distributable amount for 2020 from Part XI, line 7				508,092
<b>2</b> Undistributed income, if any, as of the end of the 2020:				
<b>a</b> Enter amount for 2019 only. . . . .			220,873	
<b>b</b> Total for prior years: 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2020:				
<b>a</b> From 2015. . . . .				
<b>b</b> From 2016. . . . .				
<b>c</b> From 2017. . . . .				
<b>d</b> From 2018. . . . .				
<b>e</b> From 2019. . . . .				
<b>f</b> Total of lines 3a through e. . . . .				
<b>4</b> Qualifying distributions for 2020 from Part XII, line 4: ► \$ 605,000				
<b>a</b> Applied to 2019, but not more than line 2a			220,873	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2020 distributable amount. . . . .				384,127
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions. . . . .				
<b>e</b> Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions. . . . .				
<b>f</b> Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020. . . . .				123,965
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9 Excess distributions carryover to 2021.</b> Subtract lines 7 and 8 from line 6a. . . . .				
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2016. . . . .				
<b>b</b> Excess from 2017. . . . .				
<b>c</b> Excess from 2018. . . . .				
<b>d</b> Excess from 2019. . . . .				
<b>e</b> Excess from 2020. . . . .				

## Part XIV

- Part XV** **Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

## Inform

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			▶ <b>3a</b>	605,000
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			▶ <b>3b</b>	

Enter gross amounts unless otherwise indicated.

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

Form **990-PF** (2020)

**Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

<b>1</b> 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?			<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:				
<b>(1)</b> Cash. . . . .		<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets. . . . .		<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions:				
<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .		<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .		<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .		<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements. . . . .		<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees. . . . .		<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .		<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .		<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</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 <b>(d)</b> the value of the goods, other assets, or services received.				

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule.

<b>(a)</b> Name of organization	<b>(b)</b> Type of organization	<b>(c)</b> Description of relationship

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2021-04-21	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

May the IRS discuss this return with the preparer shown below  
 (see instr.) ☒ **Yes** ☐ **No**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN  P01493325
	Mark Pappas CPA				
	Firm's name ▶ Pappas & Company CPAs PC				Firm's EIN ▶ 85-3764752
	Firm's address ▶ 1340 N White Chapel Boulevard Suite Southlake, TX 76092				Phone no. (817) 299-9999

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JUSTIN W HEATTER	Trustee 1.00	24,000		
PO BOX 308 HOMOSASSA, FL 34487				
HENRY P BECTON JR	Trustee 1.00	0		
9 MUSKETAQUID ROAD CONCORD, MA 01742				
LIZ BECTON-READ	Trustee 1.00	0		
76 13TH AVENUE SOUTH NAPLES, FL 34102				
JEAN BECTON BACON	Trustee 1.00	0		
1733 LAS CANOAS ROAD SANTA BARBARA, CA 93105				
CYNTHIA BECTON	Trustee 1.00	0		
20 JERSEY LANE MANCHESTER, MA 01944				
JEFFERY BECTON	Trustee 1.00	0		
94 FRENCH CAMP DRIVE DEER ISLE, ME 04627				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BOSTON MUSEUM OF FINE ARTS 465 HUNTINGTON AVE BOSTON, MA 02115		PC	CONTRIBUTION TO THE PATRON PROGRAM	3,000
CONCORD ACADEMY166 MAIN STREET CONCORD, MA 01742		POF	CONTRIBUTION TO THE ANNUAL FUND	5,000
DEERFIELD ACADEMYPO BOX 306 DEERFIELD, MA 01342		POF	CONTRIBUTION TO ANNUAL FUND	10,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NEW ENGLAND AQUARIUM 117 MILK STREET BOSTON, MA 02110		PC	CONTRIBUTION TO THE ANNUAL FUND, MISSION BLUE CAMPAIGN AND CAPITAL FUND	22,500
WGBH EDUCATIONAL FOUNDATION ONE GUEST STREET BOSTON, MA 02135		POF	CONTRIBUTION TO RALPH LOWELL SOCIETY AND BECTON FUND	8,000
YALE UNIVERSITYPO BOX 2038 NEW HAVEN, CT 06521		PC	CONTRIBUTION TO HENDRIE HALL RENOVATION	7,500
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY ARTS MUSIC ASSOCIATION 2060 ALAMEDA PADRE SERRA SANTA BARBARA, CA 93103		PC	CONTRIBUTION TO GENERAL FUND	15,000
KNEISEL HALL CHAMBER MUSIC SCHOOL PO BOX 648 BLUE HILL, ME 04614		PC	CONTRIBUTION TO GENERAL FUND	40,000
LOBERO THEATRE FOUNDATION 33 EAST CANON PERDIDO STREET SANTA BARBARA, CA 93101		PC	CONTRIBUTION TO GENERAL FUND	10,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SANTA BARBARA CENTER FOR PERFORMING 1330 STATE STREET SUITE 101 SANTA BARBARA, CA 93101		PC	CONTRIBUTION TO GENERAL FUND	10,000
BLUE HILL MEMORIAL HOSPITAL PO BOX 823 BLUE HILL, ME 04614		PC	CONTRIBUTION TO GENERAL FUND	2,000
HAYSTACK MOUNTAIN SCHOOL OF CRAFTS 89 HAYSTACK SCHOOL DRIVE DEER ISLE, ME 04627		PC	CONTRIBUTION TO GENERAL FUND	2,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ISLAND COMMUNITY CENTER PO BOX 617 STONINGTON, ME 04627		PC	CONTRIBUTION TO GENERAL FUND	2,000
ISLAND FOOD PANTRYPO BOX 12 DEER ISLE, ME 04627		PC	CONTRIBUTION TO GENERAL FUND	9,000
ISLAND HEALTH WELLNESS FOUNDATION PO BOX 654 DEER ISLE, ME 04627		PC	CONTRIBUTION TO GENERAL FUND	6,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ISLAND NURSING HOME 587 N DEER ISLE ROAD DEER ISLE, ME 04627		PC	CONTRIBUTION TO AGING WITH GRAC CAPITAL CAMPAIGN	5,000
MAINE COMMUNITY FOUNDATION 245 MAINE STREET ELLSWORTH, ME 04605		EOF	CONTRIBUTION TO GENERAL FUND	6,000
MAINE MUSEUM OF PHOTOGRAPHIC ARTS 251 US ROUTE ONE FALMOUTH, ME 04105		PC	CONTRIBUTION TO GENERAL FUND	4,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
OPERA HOUSE ARTSPO BOX 56 STONINGTON, ME 04681		PC	CONTRIBUTION TO THE ANNUAL FUND	1,000
PORTLAND MUSEUM OF ART PHOTOGRAPHY 7 CONGRESS SQUARE PORTLAND, ME 04101		PC	CONTRIBUTION TO THE PHOTOGRAPHY FUND	2,000
SEAMARK COMMUNITY ARTS PO BOX 234 DEER ISLE, ME 04627		PC	CONTRIBUTION TO GENERAL FUND	1,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YALE SCHOOL OF ARTPO BOX 803 NEW HAVEN, CT 06503		PC	CONTRIBUTION TO THE SCHOOL OF ART	3,000
McLEAN HOSPITAL115 MILL STREET BELMONT, MA 02478		PC	CONTRIBUTION TO DR. UWE RUDOLPH RESEARCH PROGRAM.	5,000
WARING SCHOOL35 STANDLEY STREET BEVERLY, MA 01915		PC	CONTRIBUTION TO WARING ANNUAL FUND AND CAPITAL CAMPAIGN	30,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JACKSON LABORATORY 610 MAIN STREET BAR HARBOR, ME 04609		PC	CONTRIBUTION TO GENERAL FUND	31,500
BLUE HILL FIRE COPO BOX 1167 BLUE HILL, ME 04614		PC	CONTRIBUTION TO GENERAL FUND	2,000
BLUE HILL HERITAGE TRUST PO BOX 222 BLUE HILL, ME 04614		PC	CONTRIBUTION TO GENERAL FUND AND STEWARDSHIP FUND.	27,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
BLUE HILL HISTORICAL SOCIETY PO BOX 710 BLUE HILL, ME 04614		PC	CONTRIBUTION TO GENERAL FUND	500
BLUE HILL LIBRARY 5 PARKER POINT ROAD BLUE HILL, ME 04614		PC	CONTRIBUTION TO GENERAL FUND	20,000
FRIENDS OF BLUE HILL BAY PO BOX 1633 BLUE HILL, ME 04614		PC	CONTRIBUTION TO GENERAL FUND	3,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GEORGE STEVENS ACADEMY 23 UNION STREET BLUE HILL, ME 04614		PC	CONTRIBUTION TO RUSTY DUYM SAILING FUND AND ANNUAL FUND	38,000
KOLLEGEWIDGWOK SAILING EDUCATION AS PO BOX 368 BLUE HILL ME, ME 04614		PC	CONTRIBUTION TO RUSTY DUYM FUND	11,000
LIFEFLIGHT FOUNDATIONPO BOX 899 CAMDEN, ME 04843		PC	CONTRIBUTION TO GENERAL FUND	3,000
<b>Total . . . . . ▶ 3a</b>				605,000

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MAINE COAST HERITAGE TRUST 1 BOWDOIN ISLAND TOPSHAM, ME 04086		PC	CONTRIBUTION TO THE BLUE HILL PENNISULA & PENOBSCOT AREAS	31,000
MAINE ISLAND TRAIL ASSOCIATION 58 FORE STREET PORTLAND, ME 04101		PC	CONTRIBUTION TO WILD ISLANDS CAMPAIGN.	1,000
PENINSULA AMBULANCE CORPS PO BOX 834 BLUE HILL, ME 04614		PC	CONTRIBUTION TO GENERAL FUND	8,000
<b>Total . . . . .</b> ► <b>3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MORY'S PRESERVATION 306 YORK STREET NEW HAVEN, CT 06511		PC	CONTRIBUTION TO GENERAL FUND	2,000
RHODE ISLAND SCHOOL OF DESIGN TWO COLLEGE STREET PROVIDENCE, RI 02903		EOF	CONTRIBUTION TO THE CANNA CAMPBELL ARCHIVES FUND	1,000
CENTER FOR MAINE CONTEMPORARY ART 21 WINTER STREET ROCKLAND, ME 04841		PC	CONTRIBUTION TO ANNUAL FUND	1,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JONATHAN FISHER HOUSE PO BOX 537 BLUE HILL, ME 04614		PC	CONTRIBUTION TO GENERAL FUND	5,000
NEW YORK WRITERS COALITION 80 HANSON PLACE BROOKLYN, NY 11217		PC	CONTRIBUTION TO GENERAL FUND	500
BROOKLYN PUBLIC LIBRARY 10 GRAND ARMY PLAZA BROOKLYN, NY 11238		PC	CONTRIBUTION TO GENERAL FUND	500
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MEMORIAL AMBULANCE CORPS 77 SUNSHINE ROAD DEER ISLE, ME 04627		PC	CONTRIBUTION TO GENERAL FUND	1,000
PRATT INSTITUTE 200 WILLOUGHBY AVENUE BROOKLYN, NY 11205		PC	CONTRIBUTION TO GENERAL FUND	500
GFWC WOMAN'S CLUBPO BOX 7338 NAPLES, FL 34101		PC	CONTRIBUTION TO GENERAL FUND	30,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
MERCY CORPS45 SW ANKENY STREET PORTLAND, OR 97204		PC	CONTRIBUTION TO GENERAL FUND	2,000
DOWNEAST COMMUNITY PARTNERS PO BOX 1107 BLUE HILL, ME 04614		PC	CONTRIBUTION TO GENERAL FUND	5,000
NEW ENGLAND CONSERVATORY OF MUSIC 290 HUNTINGTON AVENUE BOSTON, MA 02115		PC	CONTRIBUTION TO GENERAL FUND & STUDENT CENTER PROJECT	5,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COLLEGE OF THE ATLANTIC 105 EDEN STREET BAR HARBOR, ME 04609		PC	CONTRIBUTION TO GENERAL FUND	7,000
MARINE CENTER FOR COASTAL FISHERIES 13 ATLANTIC AVENUE STONINGTON, ME 04681		PC	CONTRIBUTION TO GENERAL FUND	5,000
BATES COLLEGE MUSEUM OF ART 75 RUSSELL STREET LEWISTON, ME 04240		PC	CONTRIBUTION TO GENERAL FUND	2,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BOCA GRANDE HEALTH CLINIC 230 PARK AVENUE BOCA GRANDE, FL 33921		PC	CONTRIBUTION TO GENERAL FUND	2,000
NATURAL RESOURCES COUNCIL OF MAINE 3 WADE STREET AUGUSTA, ME 04330		PC	CONTRIBUTION TO GENERAL FUND	1,000
ENGINEERS WITHOUT BORDERS - MAINE 1031 33RD STREET DENVER, CO 80205		PC	CONTRIBUTION TO GENERAL FUND	1,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MAINE FARMLAND TRUST 97 MAIN STREET BELFAST, ME 04915		PC	CONTRIBUTION TO GENERAL FUND	2,000
ISLAND INSTITUTE386 MAIN STREET ROCKLAND, ME 04841		PC	CONTRIBUTION TO GENERAL FUND	2,000
DRUG POLICY ALLIANCE 131 WEST 3RD STREET NEW YORK, NY 10001		PC	CONTRIBUTION TO GENERAL FUND	3,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BOSTON CHILDREN'S HOSPITAL 401 PARK DRIVE BOSTON, MA 02215		PC	CONTRIBUTION TO GENERAL FUND	12,000
CONNECTICUT COLLEGE 270 MOHEGAN AVENUE NEW LONDON, CT 06320		POF	CONTRIBUTION TO GENERAL FUND	3,000
BANK STREET COLLEGE OF EDUCATION 610 W 112TH STREET NEW YORK, NY 10025		PC	CONTRIBUTION TO GENERAL FUND	1,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GROTON SCHOOLPO BOX 1 GROTON, MA 01450		POF	CONTRIBUTION TO GENERAL FUND	1,000
PAN MASS CHALLENGE77 4TH AVENUE NEEDHAM, MA 02494		PC	CONTRIBUTION TO GENERAL FUND	1,000
SHAW INSTITUTE55 MAIN STREET BLUE HILL, ME 04614		PC	CONTRIBUTION TO GENERAL FUND	6,500
<b>Total . . . . . ▶ 3a</b>				605,000

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FRIENDS IN ACTION PO BOX 1446 ELLSWORTH, ME 04605		PC	CONTRIBUTION TO GENERAL FUND	3,000
CALIFORNIA FIRE FOUNDATION 1780 CREEKSIDE OAKS DRIVE SACRAMENTO, CA 95833		PC	CONTRIBUTION TO GENERAL FUND	1,000
COMPASSION AND CHOICES 101 SW MADISON STREET 8009 PORTLAND, OR 97207		PC	CONTRIBUTION TO GENERAL FUND	3,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
OCEANA1025 CONNECTICUT AVENUE WASHINGTON, DC 20036		PC	CONTRIBUTION TO GENERAL FUND	2,000
REEL WORKS TEEN FILMMAKING 540 PRESIDENT STREET BROOKLYN, NY 11215		PC	CONTRIBUTION TO GENERAL FUND	500
FAIRLEIGH DICKINSON UNIVERSITY 1000 RIVER ROAD TEANECK, NJ 07666		PC	CONTRIBUTION TO GENERAL FUND	15,000
<b>Total . . . . . ▶ 3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BIG BROTHERS BIG SISTERS 40 RECTOR STREET NEW YORK, NY 10006		PC	CONTRIBUTION TO GENERAL FUND	1,000
ADVENT SCHOOL15 BRIMMER STREET BOSTON, MA 02108		PC	CONBTRIBUTION TO GENERAL FUND	1,000
DEER ISLE STONINGTON HS 251 N DEER ISLE ROAD DEER ISLE, ME 04624		POF	CONTRIBUTION TO GENERAL FUND	1,000
<b>Total . . . . . ▶ 3a</b>				605,000

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LOVELAND FOUNDATION 367 N MONTGOMERY ST NEWBURGH, NY 12550		PC	CONTRIBUTION TO GENERAL FUND	1,000
MAINE PUBLIC BROADCASTING NETWORK 1450 LISBON STREET LEWISTON, ME 04240		PC	CONTRIBUTION TO GENERAL FUND	1,000
YALE SAILING ASSOCIATION PO BOX 1844 NEW HAVEN, CT 06508		PC	CONTRIBUTION TO GENERAL FUND	1,000
<b>Total . . . . . ▶ 3a</b>				605,000

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**


Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GASPARILLA ISLAND CONSERVATION PO BOX 446 BOCA GRANDE, FL 33921		PC	CONTRIBUTION TO GENERAL FUND	2,500
ABLE VETERAN 1714 SOUTH WOLF CREEK ROAD CARBONDALE, IL 62902		PC	CONTRIBUTION TO GENERAL FUND	2,500
SHELTER FOR ABUSED WOMEN PO BOX 10102 NAPLES, FL 34101		PC	CONTRIBUTION TO GENERAL FUND	25,000
<b>Total . . . . . ▶ 3a</b>				605,000

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FENN SCHOOL516 MONUMENT STREET CONCORD, MA 01742		PC	CONTRIBUTION TO KEVIN P WHITE '93 FUND	500
FARNSWORTH ART MUSEUM 356 MAIN STREET ROCKLAND, ME 04841		PC	CONTRIBUTION TO GENERAL FUND	1,000
FIRST CONGREGATIONAL CHRUCH OF BLUE PO BOX 444 BLUE HILL, ME 04614		PC	CONTRIBUTION TO THE DOLLY FISHER FUND	5,000
<b>Total . . . . .</b> ► <b>3a</b>				605,000

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BLUE HILL HOSPITAL FOUNDATION PO BOX 1029 BLUE HILL, ME 04614		POF	CONTRIBUTION TO GENERAL FUND	10,000
TREE OF LIFE FOOD PANTRY PO BOX 1329 BLUE HILL, ME 04614		PC	CONTRIBUTION TO GENERAL FUND	10,000
GOOD SHEPHERD FOOD BANK 3121 HOTEL ROAD AUBURN, ME 04211		PC	CONTRIBUTION TO GENERAL FUND	5,000
<b>Total . . . . .</b> ► <b>3a</b>				605,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
EMERGENCY ASSISTANCE FOUNDATION 700 S DIXIE HWY STE 200 WEST PALM BEACH, FL 33401		PC	CONBTRIBUTION TO GENERAL FUND	25,000
<b>Total</b> . . . . .  <b>3a</b>				605,000

**TY 2020 Accounting Fees Schedule**

**Name:** BECTON FAMILY FOUNDATION  
JUSTIN W HEATTER TRUSTEE

**EIN:** 04-6834092

**Software ID:** 20011566

**Software Version:** 2020v4.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPARATION FEES	2,975	2,975	0	0

**TY 2020 Other Expenses Schedule**

**Name:** BECTON FAMILY FOUNDATION  
JUSTIN W HEATTER TRUSTEE

**EIN:** 04-6834092

**Software ID:** 20011566

**Software Version:** 2020v4.0

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CUSTODY FEES	10,421	10,421		

**TY 2020 Taxes Schedule**

**Name:** BECTON FAMILY FOUNDATION  
JUSTIN W HEATTER TRUSTEE

**EIN:** 04-6834092

**Software ID:** 20011566

**Software Version:** 2020v4.0

**Taxes Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAXES & FEES	3,025	3,025		
TAXES & FEES	70	70		