Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0052

2010

For	cale	ndar year 2010, or tax year beginning		, and ending		
G	hec	k all that apply: Initial return		ormer public charity	Final return	1
		Amended return	Address chan	ge 🔲	Name change	
Na	ne o	foundation		CLIENTS	A Employer identification	
		EDWARD H. DAVEIS BENE	VOLENT FUND	COPY	01-0473137	<u> </u>
Nu	nber	and street (or P.O. box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
		245 MAIN STREET			(207) 667-	·9735
Cit	ort	town, state, and ZIP code			C If exemption application is p	ending, check here
	_	ELLSWORTH, ME 04605			D 1. Foreign organization	s, check here
H (Chec	k type of organization: X Section 501(c)(3) ex	empt private foundation		Foreign organizations me check here and attach co	eting the 85% test, pmputation
	s	ection 4947(a)(1) nonexempt charitable trust	Other taxable private found		E If private foundation sta	tus was terminated
I Fa	ir m	arket value of all assets at end of year J Accounti	ng method: Cash	X Accrual	under section 507(b)(1	
,		Part II, col. (c), line 16)	her (specify)		F If the foundation is in a	
	\$	1,892,710. (Part I, colu	mn (d) must be on cash i	basis.)	under section 507(b)(1	(B), check here ► X
P	irt 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).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(I) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received			N/A	
	2	Check X if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	20,587.	20,587.		
	5a	Gross rents				
		Net rental income or (loss)	11 500			
ē	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	11,538.			
ent	b			11 520		
Revenue	7	Capital gain net income (from Part IV, line 2)		11,538.		
_	8	Net short-term capital gain			32,000.	
	9	Income modifications			32,000.	
	10a	and allowances				
	l	Less: Cost of goods sold				
		Gross profit or (loss)				
	11 12	Other income	32,125.	32,125.	32,000.	
	13	Compensation of officers, directors, trustees, etc.	0.	0.	02/0000	0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
nses		Legal fees			-	
ens		Accounting fees				
Ϋ́	C	Other professional fees STMT 1	30,512.	17,837.		12,675.
Ve	17	Interest				
Operating and Administrative Expe	18	Taxes				
	19	Depreciation and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings				
	22	Printing and publications				
g	23	Other expenses STMT 2	111.	0.	_	111.
rati	24	Total operating and administrative	22 522	15 005		10.505
Ъ		expenses. Add lines 13 through 23	30,623.	17,837.		12,786. 79,945.
9		Contributions, gifts, grants paid	79,945.			/9,945.
	26		110 560	17 027		00 701
		Add lines 24 and 25	110,568.	17,837.		92,731.
		Subtract line 26 from line 12:	-78,443.			
		Excess of revenue over expenses and disbursements	-/8,443.	14,288.		
		Net investment income (if negative, enter -0-)		14,200.	32,000.	
	C	Adjusted net income (if negative, enter -0-)			32,000.	

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88		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End	i of year
8.	an.	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	85,910.	63,401	63,401.
	3	Accounts receivable -			
		Less: allowance for doubtful accounts	1,320.		
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
Assets		Inventories for sale or use			
ASS	1	Prepaid expenses and deferred charges			
•		Investments - U.S. and state government obligations			· · · · · · · · · · · · · · · · · · ·
	1	Investments - corporate stock			
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less: accumulated depreciation			
	1 -	Investments - mortgage loans	1 667 412	1 020 200	1 020 200
	13	Investments - other STMT 4	1,007,412.	1,029,309	1,829,309.
	14	Land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	15	Other assets (describe)			
	4.	Tables and the heart and heart file and	1 754 642	1 902 710	1 902 710
		Total assets (to be completed by all filers)	27	1,032,710	1,892,710.
	1	Accounts payable and accrued expenses	21.		
	18	Grants payable			
Liabilities	19	Deferred revenue			-
Ē	1	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			-
Ľ.		Other liabilities (describe			-
	**	Other habilities (describe			-
	23	Total liabilities (add lines 17 through 22)	27.	0	_
	20	Foundations that follow SFAS 117, check here	2,,		
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted	1,754,615.	1,892,710	
Net Assets or Fund Balance		Temporarily restricted	27.027020		
Bal		Permanently restricted			-
5	-•	Foundations that do not follow SFAS 117, check here			
Ŧ		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
šets	1	Paid-in or capital surplus, or land, bldg., and equipment fund			_
Ass	1	Retained earnings, accumulated income, endowment, or other funds			
f et	ı	Total net assets or fund balances	1,754,615.	1,892,710	
_			•		
	31	Total liabilities and net assets/fund balances	1,754,642.	1,892,710	
88000					
8.8	art	Analysis of Changes in Net Assets or Fund B	alances		
		net assets or fund balances at beginning of year - Part II, column (a), line			
		t agree with end-of-year figure reported on prior year's return)			
2	Enter	amount from Part I, line 27a		2	
3	Other	increases not included in line 2 (itemize)	SEE STA	ATEMENT 3 3	
4	Add li	nes 1, 2, and 3		4	
5	Decre	ases not included in line 2 (itemize)			0.
6	<u>Total</u>	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	1,892,710.

Part IV Capital Gains a	and Losses for Tax o	on Investmen	t Income					- Lugo C
(a) 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) How acquired P - Purchase D - Donation						acquired day, yr.)	(d) Date sold (mo., day, yr.)	
1a ALLOCATION FROM	MAINE COMMUN	NITY FOUN	DATION		P			
b								
C				<u> </u>				
d				ļ				
<u>e</u>								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss) is (f) minus (g)
a 11,538.								11,538.
b								
C								
d				_				
e Complete a phytomass etc. physician	i- i /b\	d by the ferredation	10/01/00					- .
Complete only for assets showing							Col. (h) gain not less than	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (i) r col. (j), if any				(from col. (I	h))
а								11,538.
b						_		
С								
d								<u> </u>
е								
2 Capital gain net income or (net cap		enter in Part I, line ter -0- in Part I, line		. } _ 2	2			11,538.
3 Net short-term capital gain or (loss								
If gain, also enter in Part I, line 8, o		(b) and (b).		7				
If (loss), enter -0- in Part I, line 8.			<u></u>	<u>. </u>			<u>N/A</u>	
Part V Qualification Ur	nder Section 4940(e)	for Reduced	Tax on Net	Inves	tment Inc	come		
(For optional use by domestic private	foundations subject to the sec	tion 4940(a) tax on	net investment in	come.)				
If coction 4040(d)(2) applies leave this	c nart blank							
If section 4940(d)(2) applies, leave thi	S part Dialik.							
Was the foundation liable for the section	on 4942 tax on the distributab	le amount of any ye	ear in the base per	riod?				Yes X No
if "Yes," the foundation does not qualif								
1 Enter the appropriate amount in ea	ach column for each year; see	instructions before	making any entri	es				<u> </u>
(a) Base period years	(b)		Nick velve of mo	(C)			Distribu	(d) Ition ratio
Calendar year (or tax year beginning	g in) Adjusted qualifyin		Net value of no				(col. (b) divid	ded by col. (c))
2009		139,033.		1,5	97,080	9 •		.087054
2008		149,143.		1,6	88,005	9 •		.088355
2007		94,609.			07,165			.041007
2006		110,150.	n -		43,433			.051390
2005		109,140.		2,0	85,912	-		.052322
								200100
2 Total of line 1, column (d)						. 2		.320128
3 Average distribution ratio for the 5-			-	-				064006
the foundation has been in existent	ce if less than 5 years	•••••	•••••			. 3		.064026
							1	010 715
4 Enter the net value of noncharitable	-use assets for 2010 from Pa	rt X, line 5				. 4_		,810,715.
						_		115 022
5 Multiply line 4 by line 3			•••••			. 5		115,933.
								140
5 Enter 1% of net investment income	(1% of Part I, line 27b)	•••••				. 6		143.
A 415 5 10						_		116 076
7 Add lines 5 and 6						. 7_		116,076.
B Enter qualifying distributions from	Part XII, line 4					. 8		92,731.
If line 8 is equal to or greater than I								

By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law

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)

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

remain in the governing instrument?

7 Did the foundation have at least \$5,000 in assets at any time during the year?

of each state as required by General Instruction G? If "No," attach explanation

year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV

Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses

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If "Yes," complete Part II, col. (c), and Part XV.

P	art VII-A Statements Regarding Activities (continued)			
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		_	
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► WWW.MAINECF.ORG			
14	The books are in care of ► JAMES E. GEARY Telephone no. ► (207)	667	-97	35
	Located at ► 245 MAIN STREET, ELLSWORTH, ME ZIP+4 ► 04	1605		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year 15	N	/A	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			
	the foreign country			
	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	No
18	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes 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?			
	(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)? Yes 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.)			
þ	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 page 22 of the instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			- V
_	before the first day of the tax year beginning in 2010?	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)):			
а	t At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?			
	AND ARTHUR			
	If "Yes," list the years ►,,,,,,,,,,,,,,,, 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			
		2b		
	statement - see instructions.) N/A If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	ZU		
	title provisions of section 4342(aχ2) are being applied to any of the years listed in 2a, list the years liefe.			
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
04	during the year? Yes X No			
h	If "Yes," did it have excess business holdings in 2010 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 2010.) N/A	3b	:0:000000 01 000	000000000
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	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 2010?	4b		X

|--|

3 Five highest-paid independent contractors for professional services. 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		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant	t statistical information such as the	
number of organizations and other beneficiaries served, conferences convened, research paper	rs produced, etc.	Expenses
1 PROVIDED GRANTS TO 27 CHARITABLE ORGANIZA	TIONS IN THE	
GREATER PORTLAND AREA.		
		79,945.
2		12/2130
3		
<u> </u>		
Δ		
4		
-		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax ye	ear on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
٥ <u></u>		

P	art X Minimum Investment Return (All domestic foundations	s must complete this part	t. Foreign foundations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charit	able, etc., purposes:		
	Average monthly fair market value of securities	1a	1,781,279.	
	Average of monthly cash balances		1,781,279. 57,010.	
	Fair market value of all other assets			
-	Total (add lines 1a, b, and c)			1,838,289.
	Reduction claimed for blockage or other factors reported on lines 1a and			
Ŭ	1c (attach detailed explanation)	1e	0.	
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d			1,838,289.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amounts)			27,574.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and			1,810,715.
6	Minimum investment return. Enter 5% of line 5			90,536.
	Distribute ble American (. i. d i) (Casties 4040(i)/2)			
P	foreign organizations check here and do not complete this pa			
1	Minimum investment return from Part X, line 6		1	90,536.
	Tax on investment income for 2010 from Part VI, line 5			
	Add lines 2a and 2b		2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1			90,536.
4	Recoveries of amounts treated as qualifying distributions			32,000.
5	Add lines 3 and 4			122,536.
6	Deduction from distributable amount (see instructions)			0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa			122,536.
	art XII Qualifying Distributions (see instructions)	art XIII, and 1		
8.8				_
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., p			00 701
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			92,731.
b	Program-related investments - total from Part IX-B			0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out chari-	2		
3	Amounts set aside for specific charitable projects that satisfy the:			
а	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)			
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8,	and Part XIII, line 4	4	92,731.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net in	vestment		
	income. Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	92,731.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years 4940(e) reduction of tax in those years.	when calculating whether the	he foundation qualifies fo	or the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				122,536.
2 Undistributed income, if any, as of the end of 2010:				122/3300
a Enter amount for 2009 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005 7,564.				
b From 2006 4,259.				
c From 2007				
d From 2008				
e From 2009 59,383.				
f Total of lines 3a through e	138,706.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 92,731.			•	
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2010 distributable amount	0.			92,731.
e Remaining amount distributed out of corpus	0.			72,731.
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).)	29,805.			29,805.
6 Enter the net total of each column as indicated below:				
2 Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	108,901.			
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 2009. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2011				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	108,901.			
Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
© Excess from 2008 49,518.				
d Excess from 2009 59,383.				
e Excess from 2010				

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01-0473137

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Part XV Supplementary Information (continued)										
3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment	T							
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount						
Name and address (home or business)	or substantial contributor	status of recipient								
a Paid during the year										
			m*							
			·]							
	·		1							
CER CEARDNENE F										
SEE STATEMENT 5			N 20	79,945.						
b Approved for future payment			▶ 3a	19,943.						
u Approved for luture payment										
NONE			:							
]									
	,									
Total			▶ 3b	0.						
Tota!	······	······	For	rm 990-PF (2010)						

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by	section 512, 513, or 514	(a)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt
Program service revenue:	code		code	Afficult	function income
a	-				
b	-				
<u> </u>	-				
d	-				
e	_		_		
	-				
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			1.4	20 507	
Dividends and interest from securities			14	20,587.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property		<u> </u>			
Other investment income					
Gain or (loss) from sales of assets other			1.0	11 520	
than inventory			18	11,538.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory	·				
Other revenue:					
<u> </u>					
b					
<u> </u>					
d		_ _		-	
e				22 125	
Subtotal. Add columns (b), (d), and (e)			•	32,125.	22 12
Total. Add line 12, columns (b), (d), and (e)				13	32,12
e worksheet in line 13 instructions to verify calculations.)		mliahaaaat af l	Evamnt Du	rposes	
ee worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities	to the Accom	pusnment or i	Literipi		
art XVI-B Relationship of Activities				mportantly to the accompl	ishment of
art XVI-B Relationship of Activities	ome is reported in co	olumn (e) of Part XVI		mportantly to the accompl	ishment of
ne No. Explain below how each activity for which inco	ome is reported in co	olumn (e) of Part XVI		mportantly to the accompl	ishment of
Relationship of Activities ne No. Explain below how each activity for which income	ome is reported in co	olumn (e) of Part XVI		mportantly to the accompl	ishment of
Relationship of Activities ne No. Explain below how each activity for which income	ome is reported in co	olumn (e) of Part XVI		mportantly to the accompl	ishment of
Relationship of Activities ne No. Explain below how each activity for which income	ome is reported in co	olumn (e) of Part XVI		mportantly to the accompl	ishment of
Relationship of Activities ne No. Explain below how each activity for which income	ome is reported in co	olumn (e) of Part XVI		mportantly to the accompl	ishment of
ne No. Explain below how each activity for which inco	ome is reported in co	olumn (e) of Part XVI		mportantly to the accompl	ishment of
Relationship of Activities ne No. Explain below how each activity for which income	ome is reported in co	olumn (e) of Part XVI		mportantly to the accompl	ishment of
ne No. Explain below how each activity for which inco	ome is reported in co	olumn (e) of Part XVI		mportantly to the accompl	ishment of
ne No. Explain below how each activity for which inco	ome is reported in co	olumn (e) of Part XVI		mportantly to the accompl	ishment of
Relationship of Activities ne No. Explain below how each activity for which income	ome is reported in co	olumn (e) of Part XVI		mportantly to the accompl	ishment of
Relationship of Activities ne No. Explain below how each activity for which income	ome is reported in co	olumn (e) of Part XVI		mportantly to the accompl	ishment of

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

1	Did the o	organization directly or ind	irectly engage in any	of the followi	ing with any other organizat	tion described in s	ection 501(c) of		Yes	No
	the Code	o (other than section 501(c	c)(3) organizations)	or in section 5	27, relating to political orga	anizations?				
а	Transfer	s from the reporting found	lation to a noncharit	able exempt o	rganization of:					
	(1) Cas	h						1a(1)		X
										X
b		nsactions:								
	(1) Sale	s of assets to a noncharita	able exempt organiza	ation				1b(1)	***********	X
										X
										X
										X
										X
										X
										X
							ir market value of the good		-4-	
q				-			ir market value of the good		ets,	
						lue in any transact	ion or sharing arrangemen	i, snow in		
(2)	ine no.	(b) Amount involved		_	e exempt organization	(d) Dd-				
(a) L	ine no.	(b) Amount involved	(L) Name C	N/A	e exempt organization	(u) Descrip	tion of transfers, transactions, a	nd shanng an	angeme	nts
				N/A						
		<u> </u>				_				
								_		
					_					
				_				-		
2a	Is the fou	ndation directly or indirect	tly affiliated with, or	related to, one	or more tax-exempt organ	izations described				
			-		tion 527?			Yes	X	No
		omplete the following sch		,(0 ,, 0 , 0						, 110
	11 100, 0	(a) Name of org			(b) Type of organization		(c) Description of relation	 Ishin		
		N/A		_	(m) type of organization		(c) recompanies or location	-		
								_		
_				_			·	_		
_										
	Unde	at panalties of parium I declare	That I have by amined t	hie otum includ	ing accompanying echedules as	d statements and to	the best of my knowledge and b	aliaf it is true		
o:	260				ased on all information of which			renen, it is true	, conec	ι,
Sig		hait L. lompson Aug 10,20			10 3011					
He	ire				7100	10,2011	juis le	<u>e</u>		
		Signature of officer or tru			Date		Title			
		Print/Type preparer's na	me	Preparer's s	-	Date	Check if PTIN			
_				5 7	rew Cheny	8/4/11	self- employed			
Pai		E. DREW CH				6/9///				
	eparer	Firm's name BAK	ER NEWMAN	& NOY	ES, LLC		Firm's EIN ►			
Us	e Only									
		Firm's address ► BO	X 507							
		PO	RTLAND, M	E 0411	2		Phone no. (207	[']) 879	-21	00
		<u> </u>						orm QQO_		

Form **8868**

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No. 1545-1709

•	are filing for an Automatic 3-Month Extension, comple					X		
If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension,	complete only Part II (on page 2 of this	form).			
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.								
Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation								
required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension								
of time to	file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for Tran	nsfers	Associated With Ce	rtain		
Personal	Benefit Contracts, which must be sent to the IRS in page	oer format	(see instructions). For more details on t	he ele	ectronic filling of this f	orm,		
visit www	irs.gov/efile and click on e-file for Charities & Nonprofits	s						
Part I	Automatic 3-Month Extension of Time	e. Only su	ubmit original (no copies needed).					
A corpora	ation required to file Form 990-T and requesting an autor	matic 6-m	onth extension - check this box and con	nplete)			
Part I only	<i>/</i>							
	corporations (including 1120-C filers), partnerships, REM ome tax returns.	1iCs, and t	trusts must use Form 7004 to request a	n exte	nsion of time			
Type or	Name of exempt organization		•	Em	ployer identification	number		
print				1	•			
	EDWARD H. DAVEIS BENEVOLEN	T FUN	D	(01-0473137			
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, s 245 MAIN STREET							
retum. See instructions.	City, town or post office, state, and ZIP code. For a for	oreign add	dress, see instructions.					
	ELLSWORTH, ME 04605							
Enterth	Datum and for the ratum that this application is for Itil		to application for a structure?			0 4		
Enter the	Retum code for the retum that this application is for (file	e a separa	ite application for each return)	•••••		. [0 4		
Applicati	on	Return	Application			Return		
is For		Code	Is For			Code		
Form 990		01	Form 990-T (corporation)			07		
Form 990		02	Form 1041-A		08			
Form 990		03	Form 4720		09			
Form 990		04	Form 5227			10		
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069					
	T (trust other than above)	06	Form 8870			11		
101111000	JAMES E. GEARY		1 OIII 0070			12		
• The bo	oks are in the care of ▶ 245 MAIN STREE	r - E1	LLSWORTH ME 04605					
	one No. ► (207) 667–9735		FAX No. ► (207) 667-04	47				
-	rganization does not have an office or place of business	in the Lin						
• If this is	s for a Group Return, enter the organization's four digit	Group Eve	amption Number (GEN)			L		
box ▶								
	quest an automatic 3-month (6 months for a corporation		ch a list with the names and EINs of all		pers the extension is	or.		
			tion return for the organization named a		The extension			
_	r the organization's return for:							
▶L	X calendar year 2010 or							
►L	tax year beginning	, an	d ending					
					_			
2 If the	2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period							
3a If thi	e application is for Form 000.BL 000 DE 000 T 4700	6060	AA					
	s application is for Form 990-BL, 990-PF, 990-T, 4720, c	or 6069, er	nter the tentative tax, less any			_		
	nonrefundable credits. See instructions. 3a \$ 0.							
	b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							
	nated tax payments made. Include any prior year overp			3b	\$	0.		
	nce due. Subtract line 3b from line 3a. Include your pay							
by u	sing EFTPS (Electronic Federal Tax Payment System). S	See instruc	tions.	3c	\$	0.		
Caution.	you are going to make an electronic fund withdrawal w	ith this Fo	rm 8868, see Form 8453-EO and Form 8	3 879 -	O for payment instru	ections.		
LHA Fo	r Paperwork Reduction Act Notice, see Instructions.				Form 8868 (Rev	. 1 - 2011)		
023841						Ĵ		

FORM 990-PF C	THER PROFES	SIONAL FE	ES 	STATEMENT]
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		
INVESTMENT FEES ADMINISTRATIVE FEE	5,162. 25,350.	5,1 12,6	162. 575.	0. 12,675.
TO FORM 990-PF, PG 1, LN 16C	30,512.	17,8	337.	12,675.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		
MISCELLANEOUS	111.		0.	111.
TO FORM 990-PF, PG 1, LN 23	111.		0.	111.
DESCRIPTION NET UNREALIZED GAINS ON INVESPRIOR YEAR GRANTS REFUNDED	TMENTS	ETS OR FUN	ID BALANCES	AMOUNT 184,538. 32,000.
TOTAL TO FORM 990-PF, PART II	I, LINE 3			216,538.
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 4
FORM 990-PF DESCRIPTION	VAI	ESTMENTS LUATION ETHOD	BOOK VALUE	FAIR MARKET VALUE
DESCRIPTION ————————————————————————————————————	VAI ME —	LUATION ETHOD FMV FMV	1,629,466. 79,429.	FAIR MARKET VALUE 1,629,466. 79,429.
DESCRIPTION ———— PUBLICLY TRADED	VAI MF — F F	LUATION ETHOD -	1,629,466.	FAIR MARKET VALUE

FORM 990-PF

5

STATEMENT

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
A COMPANY OF GIRLS PO BOX 7527 PORTLAND, ME 04112	NONE SUPPORT "FROM FLEDGING TO FULL GROWN" PROJECT	PUBLIC	2,500.
AMISTAD, INC. PO BOX 992 PORTLAND, ME 04104-0992	NONE REPLACE KITCHEN APPLIANCES AND UTENSILS	PUBLIC	1,500.
CHILDREN'S MUSEUM AND THEATRE OF MAINE PO BOX 4041 PORTLAND, ME 04101	SUPPORT "LEMONADE DAY	PUBLIC	2,000.
FORT WILLIAMS CHARITABLE FOUNDATION PO BOX 6260 CAPE ELIZABETH, ME 04104-0992	NONE CREATE AN ARBORETUM AT FORT WILLIAMS	PUBLIC	3,500.
FRIENDS OF THE KOTZSCHMAR ORGAN PO BOX 7455 PORTLAND, ME 04112	NONE CONCERT OF CHORAL MUSIC ACCOMPANIED BY THE KOTZSCHMAR ORGAN	PUBLIC	1,500.
HOUR EXCHANGE PORTLAND 516 CONGRESS ST PORTLAND, ME 04101	NONE TRAINING TO HOUR WEATHERIZATION PROGRAM GREEN TEAM MEMBERS	PUBLIC	2,000.
KIDS FIRST CENTER 222 ST. JOHN ST, SUITE 101 PORTLAND, ME 04102	NONE 10 SCHOLARSHIPS TO PROFESSIONALS WORKING WITH FAMILIES AFFECTED BY DIVORCE	PUBLIC	1,750.
LEARNING WORKS 181 BRACKETT ST PORTLAND, ME 04102	NONE SUPPORT LITERACY VOLUNTEERS OF GREATER PORTLAND	PUBLIC	2,000.

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

EDWARD H. DAVEIS BENEVOLENT FUN	01-0473137		
MAINE HUMANITIES COUNCIL 674 BRIGHTON AVE PORTLAND, ME 04102-1012	NONE NEW BOOKS & READERS FOR ENGLISH LANGUAGE LEARNER CLASSES	PUBLIC	2,500.
MAINE MEDICAL CENTER 22 BRAMHALL ST PORTLAND, ME 04102	NONE SUPPORT PRODUCTION OF "IN THE POCKET OF MY UNIFORM"	PUBLIC	2,295.
MAINE PHILANTHROPY CENTER PO BOX 9301 PORTLAND, ME 04104-9301	NONE ANNUAL SUPPORT	PUBLIC	700.
MAYO STREET ARTS 10 MAYO ST PORTLAND, ME 04101	NONE SUPPORT THE "PERFORMING ARTS AND CULTURE SERIES"	PUBLIC	1,000.
OPPORTUNITY FARM FOR BOYS & GIRLS PO BOX 65 NEW GLOUCESTER, ME 04260	NONE PROGRAMS TO RAISE EDUCATIONAL ATTAINMENT IN GREATER PORTLAND, ME AREA	PUBLIC	2,500.
PEOPLE'S REGIONAL OPPORTUNITY PROGRAM 2338 CONGRESS ST PORTLAND, ME 04102	NONE PROGRAMS OFFERED TO LOW-INCOME PARKSIDE RESIDENTS	PUBLIC	3,500.
PORTLAND OPERA REPERTORY THEATRE PO BOX 7733 PORTLAND, ME 04112	NONE PILOT PROJECT FOR OPERA EDUCATION IN PORTLAND, ME AREA SCHOOLS	PUBLIC	2,000.
PORTLAND SYMPHONY ORCHESTRA PO BOX 3573 PORTLAND, ME 04104-3573	NONE 3 EDUCATIONAL MECHANISMS FOR ENGAGING AUDIENCES	PUBLIC	2,000.
RIPPLEFFECT, INC. PO BOX 441 PORTLAND, ME 04112	NONE RIPPLEFFECT AFTERSCHOOL PROGRAM	PUBLIC	3,500.
SEEDS OF INDEPENDENCE PO BOX 8 FREEPORT, ME 04032	NONE FREEPORT PROGRAM AND TEEN PARTNERING	PUBLIC	2,200.

EDWARD H. DAVEIS BENEVOLENT FUR	ND		01-0473137
SPACE GALLERY 538 CONGRESS ST PORTLAND, ME 04101	NONE SUPPORT VISITING ARTISTS SERIES	PUBLIC	1,500.
SPRING POINT LEDGE LIGHTHOUSE TRUST PO BOX 2311 SOUTH PORTLAND, ME 04116-2311	NONE KEEP THE LIGHT ON PROJECT	PUBLIC	3,500.
SPURWINK SERVICES 899 RIVERSIDE ST PORTLAND, ME 04103	NONE COMPASS PROJECT'S STEM	PUBLIC	2,000.
TATE HOUSE MUSEUM PO BOX 8800 PORTLAND, ME 04104	NONE MOISTURE MITIGATION PROJECT FOR TATE HOUSE	PUBLIC	3,500.
TOWN OF FALMOUTH 271 FALMOUTH RD FALMOUTH, ME 04105-2098	NONE TRAIL SYSTEM ON TOWN OF FALMOUTH & FALMOUTH LAND TRUST PROPERTY	PUBLIC	2,500.
VSA ARTS OF MAINE 11 PLEASANT ST BRUNSWICK, ME 04011	NONE ART CLASSES FOR CHILDREN & ADULTS IN GREATER PORTLAND, ME AREA	PUBLIC	1,000.
WAYNFLETE SCHOOL 360 SPRING ST PORTLAND, ME 04102-3652	NONE CREATE POSITIVE CONNECTIONS FOR AT-RISK YOUTH AND THEIR FAMILIES	PUBLIC	2,500.
WINTERKIDS EDUCATION FOUNDATION PO BOX 7566 PORTLAND, ME 04112	NONE WELCOME TO WINTER OUTREACH PROGRAMS	PUBLIC	2,500.
UNITED WAY OF GREATER PORTLAND PO BOX 15200 PORTLAND, ME 04112-5200	NONE GENERAL SUPPORT	PUBLIC	22,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		79,945.

A A A Thursday, July 28, 2011



Grants > Available Grants & Deadlines > Edward H. Davels Benevolent Fund

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Edward H. Daveis Benevolent Fund

Total grant dollars requested last cycle: \$215,179

Total grant dollars awarded last cycle: \$79,945

Percentage of proposals that received full funding: 23%

Percentage of proposals that received partial funding: 47%

Maximum grant size: \$5,000 Average grant size last cycle: \$2,961 Application deadline: November 15

Background

The Edward H. Daveis Benevolent Fund was established by the will of his daughter, Mabel Stewart Daveis, in 1943 to honor her father and to benefit nonprofit organizations serving the greater Portland area. Mr. Daveis was a member of a prominent Portland family with roots in the community dating back to 1785. After distinguished careers in banking and law, Mr. Daveis became president of the Portland Gas Light Company, one of the first 25 gas utility companies in the United States. He was also involved with the Portland Locomotive Company, a subdivision of the Portland Company. Mabel Stewart Daveis and her sister Mary Gilman Daveis were generous benefactors who supported many local civic organizations.

Priorities

Grants will be awarded for projects that benefit the communities of the greater Portland area. Collaboration among nonprofits is encouraged, and a letter of support from each partner should be included with the application.

Eligibility Requirements

- Applicants must be nonprofit, 501(c)(3) federal tax-exempt organizations, public schools, public agencies, or Indian tribal governments (and their political subdivisions) recognized by the Department of the Interior or have a fiscal sponsor that is a 501(c)(3) organization, public school, public agency, or Indian tribal government (click here for more information on applying with a fiscal sponsor).
- Grants cannot be made for lobbying or religious activities.
- Grants cannot pay for program expenses that have already been incurred.
- Grants will not be made to annual funds or endowments.

Note: Eligible organizations that have received grants from other Maine Community Foundation funds in the last 12 months are still eligible to apply to the Edward H. Daveis Benevolent Fund.

Project Progress Report

All grant recipients will be required to submit a Project Progress Report (PDF | RTF | Word Document) approximately 10 months after receiving payment of the grant.

How to Apply

Proposals and attachments may be mailed to:

Edward H. Davels Benevolent Fund Maine Community Foundation One Monument Way, Suite 200 Porlland, ME 04101

When to Apply

Applications must be postmarked by November 15. Awards will be announced in December. All applicants will receive notice of the committee's decisions.

Grant Application Form

> Microsoft Word

> RTF (Use this version of the application with word processors other than Microsoft Word.)

> PDF (Use this version of the application if you do not have word processing software.)

Having trouble downloading or filling out the application? Click here for some tips.

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Contact

If you have questions or would like to discuss an idea before submitting a proposal, please contact Pam Cleghorn via e-mail or by phone at (877) 700-6800, ext. 2205.

- Recent grants from the Edward H. Daveis Benevolent Fund
- Return to Available Grants & Deadlines page

MAINE COMMUNITY FOUNDATION GRANT APPLICATION

The Maine Community Foundation grant programs vary in terms of their application requirements and interests. Please consult our website for individual grant program criteria and guidelines about how to apply to each program.

The Grantseeker FAQ section of the Maine Community Foundation's website includes detailed information about this grant application.

If you have questions about the application or review process that are not addressed on that page, please call MaineCF toll-free at (877) 700-6800

DIRECTIONS

- Do not send materials (including letters of support) other than those requested, and do not send any materials under separate cover. Please refer to the grant program guidelines on our website for guidance on what to submit.
- Send only one copy and do not staple or bind your application.
- This application can be completed in two ways: 1) open it in Microsoft Word and click on the shaded areas to type in your answers (preferred); or 2) you can type your answers on a separate sheet of paper. Please use a font size of at least 11 point.
- Please note that we do not accept electronic applications at this time.
- Mail this application to:

Maine Community Foundation Edward H. Daveis Benevolent Fund One Monument Way, Suite 200 Portland, ME 04101

CHECKLIST

	aineCF will not review incomplete proposals.
	Completed application form (including required signatures)
	A one-page list of key project personnel including their roles and qualifications
	A one-page list of your organization's board of directors or advisory committee, including occupations and city/town of residence
In a	addition, if your project: proposes work with a school, a letter of agreement from a school representative is required
	is a collaborative project with an organization other than a school, letters of agreement from participating organizations that explain their level of involvement are required
Ple	ease include one of the following items documenting the eligibility of the project to receive charitable funds:
	your organization is: Not a recognized 501(c)(3): tax-exempt public charity and are applying with a fiscal sponsor, include MaineCF's Fiscal Sponsorship Agreement Form completed and signed by an authorized representative of each entity
	A public school or school district: include a letter from principal or superintendent agreeing to accept MaineCF grant funds for your project
	A municipal library: include a letter from the Town or City Manager confirming your organization's municipal status (Note that libraries with separate 501(c)(3) tax-exempt public charity status should instead submit a copy of their federal IRS ruling letter)
	A town/city or government/municipal agency: include a letter from the head of agency agreeing to accept MaineCF grant funds for your project

MAINE COMMUNITY FOUNDATION GRANT APPLICATION

LIST THE GRANT PROGRAM(S)	YOU ARE APPLYING	ro: Click	here for a list	of programs and	deadlines
LEGAL NAME OF ORGANIZATI	ION:				
ADDRESS:			_	· · ·	
CITY/ STATE /ZIP:	· 		<u> </u>		
COUNTY: Click here for a list:		TELEPHON	E:		
WEBSITE:		# OF PAID	STAFF:	# OF VOLUNTI	EERS:
FEDERAL TAX I.D. # (EIN):		Y	EAR ORGANIZ	ATION STARTED:	
EXECUTIVE DIRECTOR:					
TELEPHONE:			E-MAIL:		
PRIMARY CONTACT FOR PROP	OSAL:				
TELEPHONE:			E-MAIL:		
AMOUNT REQUESTED FROM M	AINECF: \$		TOTAL PROJ	ECT BUDGET: \$	
COUNTY(IES) WHERE SERVICE		: Click here			
IN THE SPACE PROVIDED, WRIT	E A ONE-SENTENCE PI	ROJECT DESC	CRIPTION:		
ISSUE AREA Check the categ	gory(ies) that best de	escribe the t	topic of your p	project.	
Animal-Related	Education		Housing/		Youth Development
Arts/Culture/Humanities	☐ Environment		Human S	ervices	Public Safety
Civil Rights/Advocacy	Employment		Medical I	Research	Recreation/Sports
Community Improvement	Food/Agricultur	e/Nutrition	☐ Mental H	ealth	Science/Technology
Crime/Legal-Related	Health Care		Philanthr	opy/Voluntarism	Social Science
Other (Describe):					
FISCAL SPONSOR INFORMAT	ION (IF APPLICABLE))			
Name of Fiscal Sponsor Orc	GANIZATION:				
FISCAL SPONSOR CONTACT PER	RSON:				
ADDRESS:					
CITY/ STATE /ZIP:					
TELEPHONE:			E-MAIL:		
FEDERAL TAX I.D. NUMBER (EI	(N):				

PART II: FINANCIAL INFORMATION

Provide information about your organization's operating budget in the space provided. Use the most recently completed financial or fiscal year. School districts and municipalities do not need to complete this section.

PLEASE USE THIS FORM. DO NOT ATTACH AUDITED REPORTS OR FINANCIAL STATEMENTS.

1. REVENUES AND EXPENSES Provide detail for last fiscal year.

Fiscal year start

Revenue					
Contributions					
Individual/Business	\$				
Foundation	\$				
Government	\$				
United Way	\$				
MaineShare	\$				
Endowment income (if any)	\$				
Interest and dividends	\$				
Other (specify)	\$				
A. TOTAL REVENUE	s				

Expenses	
For programming	\$
For administration	\$
For fundraising	\$
Other (specify)	\$
B. TOTAL EXPENSES	\$
C. NET (A Revenue – B Expenses)	s

2. SHORTFALLS: If your expenses exceeded revenues for the last fiscal year, explain how this shortfall was financed in the space provided.

3. ASSETS AND LIABILITIES Provide detail for last fiscal year.

Fiscal Year Start

Assets:		Liabilities:		
Cash	\$	Current liabilities (accounts payable)	\$	
Securities & investments (stocks, endowments, etc.)	\$	Long-term liabilities (loans, mortgages, etc.)	\$	
Property & equipment	\$	B. Total liabilities	\$	
Accounts receivable	\$	C. Total net assets (A minus B):	\$	
Other (Specify)	\$	D. Liabilities and net assets (B+C)		
A. Total assets:	\$	(D must equal A)	\$.	

- 4. RESTRICTED ASSETS OR REVENUE: These represent resources whose use is limited by the donor or the source to a specific purpose within the organization or resources that are to be maintained by the organization in perpetuity. Please indicate the amount and purpose of any restricted revenue and/or assets (in the space provided).
 - a. Restricted Revenue:
 - b. Restricted Assets:

PART III: PROJECT BUDGET

The use of this form is required. Please be as specific as possible.

ANTICIPATED EXPENSES AND FUNDING

TOTAL BUDGET for	income	FUNDING SOURCES is item (include earned	support thi	2. IN-KIND DONATIONS	1. AMOUNT REQUESTED	ITEM
each item		te if funding is already		to support	from MaineCF	
(Add	Secured?	Source	Amount	each item	for each item	·
columns 1-3)			North Service State Services	The state of the s	Bulleting at the second of the second	
\$1,000	yes	XYZ Foundation	<i>\$250</i>		<i>\$750</i>	Example: speaker fees
\$	_		\$	\$	\$	1.
\$			\$	\$	\$	2.
\$			\$	\$	- \$	3.
\$			\$	\$	\$	4.
. \$			\$	\$	\$	5.
\$			\$	\$	\$	6.
\$			\$	\$	\$	7.
\$			\$ ·	\$	\$	8.
\$			\$	\$	\$	9.
\$			\$	\$	\$	10.
\$			ę.	•	¢	TOTAL Sum of items in each
						10.

ANTICIPATED EARNED INCOME (if applicable):

ITEM	AMOUNT
Sales:	\$
Fees for Service:	\$
Other, please specify:	\$
TOTAL ANTICIPATED INCOME:	\$

SUSTAINABILITY: If your project is ongoing, what are your plans to secure funding in the future?

ADDITIONAL BUDGET INFORMATION: Use this space to provide any additional budget information you wish to include:

PART IV: ORGANIZATION AND PROJECT OVERVIEWS

Directions: The following questions apply to all MaineCF competitive grant programs. Please consider and incorporate the specific guidelines for the grant program to which you are applying in your responses to these questions.

Format: Please number and write your answers on a separate page. We seek short answers to these questions, so please limit your answers to this section to ONE page (with a font size no smaller than 11 point.)

- 1. ORGANIZATIONAL HISTORY In this brief history you should include:
 - the founding date of the organization
 - its mission
 - geographic region served
 - population served
 - two or three most important programs or services the organization currently provides
- 2. PROJECT OVERVIEW Briefly describe the project for which you seek funding. Be sure to include:
 - what you hope to accomplish with this project
 - how this project will strengthen or improve the community or your organization's ability to serve the community
 - how you will measure the project's progress or success (your evaluation method)
- 3. DIRECTORS, ADVISORS, AND KEY PERSONNEL Please attach the following documents on separate sheets of paper:
 - A list of key project personnel including their roles and qualifications
 - a list of your organization's board of directors or advisory committee, including occupations and city/town of residence.

PART V: PROJECT DESCRIPTION

This form is required as part of your application.

Format: You may complete this form in Microsoft Word using the form fields or number and write your answers on a separate page. Answers for this section, Part V, should be limited to <u>ONE</u> page total (with a font size no smaller than 11 point).

For more detailed description see Grantseekers FAQ on our website.

- 1. WHAT IS THE OVERALL GOAL OF THIS PROJECT?
- 2. DESCRIBE UP TO 3 MEASURABLE OUTCOMES OR RESULTS OF THIS PROJECT THAT WILL HELP ACHIEVE THIS GOAL.
- 3. WHAT SPECIFIC ACTIVITIES WILL YOU DO AS PART OF THIS PROJECT TO PRODUCE THOSE RESULTS? (PLEASE LIST NO MORE THAN 5)
- 4. TIMING:
 - a. WHEN DO YOU EXPECT TO BEGIN YOUR PROJECT (MONTH, YEAR)?
 - b. WHEN DO YOU EXPECT TO COMPLETE YOUR PROJECT (MONTH, YEAR)?
- 5. WHO WILL BE SERVED BY OR PARTICIPATE IN THIS PROJECT? DESCRIBE ANY CHARACTERISTICS THAT MAY BE SIGNIFICANT TO THE PROJECT (E.G., NUMBER, AGE, GENDER, REGION).

AGREEMENT TO GRANT TERMS

By signing this application form, the applicant and the fiscal sponsor (if applicable) hereby indicate(s) agreement with the following terms and conditions:

- 1) The information contained in this application and in any attachments is true and correct to the best of your knowledge.
- 2) Your organization is a nonprofit, 501(c)(3) federal tax-exempt organization, public school, public agency working for the State of Maine, or an Indian tribal government (or its political subdivision) recognized by the Department of the Interior or has a written agreement with a fiscal sponsor that is a 501(c)(3) organization, public school, or public agency.
- 3) Any funds received as a result of this application will be used only for the purpose specified in the award letter. No part of any grant will be used for a political campaign or to support attempts to influence legislation of any governmental body other than through making available the results of non-partisan analysis, study, and research. No portion of the award will be granted to any secondary grantee without the express permission of the Maine Community Foundation.
- 4) Any funds received as a result of this application will be returned if the grant recipient loses its exemption from federal income taxation as provided for under section 501(c)(3) of the Internal Revenue Code.

Please note that the required signature[s] on this form must be original (not photocopied).

5) Any funds received as a result of this application will be expended within 12 months of the payment date. At the end of this period, any unexpended grant funds will be returned to the Maine Community Foundation, or a written request for an extension of time will be submitted to the foundation for approval. An evaluation report will be submitted upon completion of your project or by the due date specified in the grant award letter.

SIGNATURE OF PR	DATE		
PRINT NAME		TITLE	<u> </u>
FISCAL SPONSO	OR		
If you applied using	a fiscal sponsor, please have	ve an authorized officer of the sponsoring	g organization sign below
SIGNATURE OF OFF	ICER OF FISCAL SPONSOR C	ORGANIZATION (IF APPLICABLE)	DATE
PRINT NAME		TITLE	· · · ·
MAINECF NON-	DISCRIMINATION PO	OLICY	
grantmaking (or succintend to deny service sexual orientation, go programs that serve sin compliance with the	cessor grant programs supp- ces, employment, or volunte ender, physical or mental di specifically defined populat	e respect for all people. In its community orted by those funds), the foundation will be involvement on the basis of race, age, isability, or religion. It is not the intent of the community of the applicant of the cour Community Building Grants of the terms of this policy.	I support organizations that do no ancestry or national origin, of this policy to deny support for t organization confirms that it is
SIGNATURE OF PRI	ESIDENT, CHIEF ADMINISTR	RATIVE OFFICER, OR TREASURER	DATE
PRINT NAME		TITLE	