

**Return of Private Foundation**

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

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**2022**

Open to Public Inspection

Form **990-PF**

Department of the Treasury  
Internal Revenue Service

For calendar year 2022 or tax year beginning

, and ending

Name of foundation <b>Tramuto/Porter Foundation</b>		<b>A Employer identification number</b> <b>03-0373845</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>P.O. Box 1728</b>	Room/suite	<b>B Telephone number</b> <b>207-646-7790</b>
City or town, state or province, country, and ZIP or foreign postal code <b>Ogunquit, ME 03907</b>		<b>C</b> If exemption application is pending, check here ... <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here ..... <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ..... <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>909,742.</b>	<b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received .....	<b>344,461.</b>			
	<b>2</b> Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	<b>3</b> Interest on savings and temporary cash investments .....				
	<b>4</b> Dividends and interest from securities .....	<b>8,454.</b>	<b>8,454.</b>		<b>Statement 2</b>
	<b>5a</b> Gross rents .....				
	<b>b</b> Net rental income or (loss) .....				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10 .....	<b>-1,626.</b>			<b>Statement 1</b>
	<b>b</b> Gross sales price for all assets on line 6a .....	<b>40,581.</b>			
	<b>7</b> Capital gain net income (from Part IV, line 2) .....		<b>9,809.</b>		
	<b>8</b> Net short-term capital gain .....				
	<b>9</b> Income modifications .....				
	<b>10a</b> Gross sales less returns and allowances .....				
<b>b</b> Less: Cost of goods sold .....					
<b>c</b> Gross profit or (loss) .....					
<b>11</b> Other income .....	<b>15,540.</b>	<b>0.</b>	<b>0.</b>	<b>Statement 3</b>	
<b>12 Total.</b> Add lines 1 through 11 .....	<b>366,829.</b>	<b>18,263.</b>	<b>0.</b>		
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc. ....	<b>0.</b>	<b>0.</b>	<b>0.</b>	<b>0.</b>
	<b>14</b> Other employee salaries and wages .....	<b>18,519.</b>	<b>0.</b>	<b>0.</b>	<b>18,519.</b>
	<b>15</b> Pension plans, employee benefits .....	<b>954.</b>	<b>0.</b>	<b>0.</b>	<b>954.</b>
	<b>16a</b> Legal fees .....				
	<b>b</b> Accounting fees .....	<b>5,050.</b>	<b>1,000.</b>	<b>0.</b>	<b>4,050.</b>
	<b>c</b> Other professional fees .....	<b>7,316.</b>	<b>0.</b>	<b>0.</b>	<b>7,316.</b>
	<b>17</b> Interest .....				
	<b>18</b> Taxes .....	<b>1,772.</b>	<b>0.</b>	<b>0.</b>	<b>1,772.</b>
	<b>19</b> Depreciation and depletion .....				
	<b>20</b> Occupancy .....				
	<b>21</b> Travel, conferences, and meetings .....	<b>45,429.</b>	<b>0.</b>	<b>0.</b>	<b>45,429.</b>
	<b>22</b> Printing and publications .....				
	<b>23</b> Other expenses .....	<b>193,733.</b>	<b>3,641.</b>	<b>0.</b>	<b>190,092.</b>
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 .....	<b>272,773.</b>	<b>4,641.</b>	<b>0.</b>	<b>268,132.</b>
	<b>25</b> Contributions, gifts, grants paid .....	<b>287,806.</b>			<b>287,806.</b>
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25 .....	<b>560,579.</b>	<b>4,641.</b>	<b>0.</b>	<b>555,938.</b>	
<b>27</b> Subtract line 26 from line 12:					
<b>a</b> Excess of revenue over expenses and disbursements ..	<b>-193,750.</b>				
<b>b Net investment income</b> (if negative, enter -0-)		<b>13,622.</b>			
<b>c Adjusted net income</b> (if negative, enter -0-)			<b>0.</b>		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	140,178.	414,559.	414,559.
	2 Savings and temporary cash investments	972,251.	512,206.	474,758.
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	35,114.	20,425.	20,425.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis			
Less: accumulated depreciation				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment: basis	10,772.			
Less: accumulated depreciation	Stmt 8 10,772.			
15 Other assets (describe)				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	1,147,543.	947,190.	909,742.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe BCU Visa)	8,966.	2,363.	
23 Total liabilities (add lines 17 through 22)	8,966.	2,363.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions	1,138,577.	944,827.	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
29 Total net assets or fund balances	1,138,577.	944,827.		
30 Total liabilities and net assets/fund balances	1,147,543.	947,190.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 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)	1	1,138,577.
2 Enter amount from Part I, line 27a	2	-193,750.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	944,827.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	944,827.

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

	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				
b	See Attached Statement			
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a				
b				
c				
d				
e	40,581.		30,772.	9,809.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			9,809.

2	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 .....	2	9,809.
3	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 .....	3	N/A

**Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)**

1a	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)	1	189.
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) .....		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....	2	0.
3	Add lines 1 and 2 .....	3	189.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....	4	0.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- .....	5	189.
6	Credits/Payments:		
a	2022 estimated tax payments and 2021 overpayment credited to 2022 .....	6a	489.
b	Exempt foreign organizations - tax withheld at source .....	6b	0.
c	Tax paid with application for extension of time to file (Form 8868) .....	6c	0.
d	Backup withholding erroneously withheld .....	6d	0.
7	Total credits and payments. Add lines 6a through 6d .....	7	489.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached .....	8	0.
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than 7, enter <b>amount owed</b> .....	9	
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> .....	10	300.
11	Enter the amount of line 10 to be: <b>Credited to 2023 estimated tax</b> 300. <b>Refunded</b> .....	11	0.

**Part VI-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? .....		X
<b>1b</b>	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition ..... If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
<b>1c</b>	Did the foundation file <b>Form 1120-POL</b> for this year? .....		X
<b>d</b>	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ <u>0.</u> (2) On foundation managers. \$ <u>0.</u>		
<b>e</b>	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ <u>0.</u>		
<b>2</b>	Has the foundation engaged in any activities that have not previously been reported to the IRS? .....		X
	If "Yes," attach a detailed description of the activities.		
<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? If "Yes," attach a conformed copy of the changes .....		X
<b>4a</b>	Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....	X	
<b>4b</b>	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? .....	X	
<b>5</b>	Was there a liquidation, termination, dissolution, or substantial contraction during the year? .....		X
	If "Yes," attach the statement required by <i>General Instruction T</i> .		
<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? .....	X	
<b>7</b>	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV .....	X	
<b>8a</b>	Enter the states to which the foundation reports or with which it is registered. See instructions. _____ <b>ME</b>		
<b>8b</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 <i>General Instruction G</i> ? If "No," attach explanation .....	X	
<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 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII .....		X
<b>10</b>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .....		X
<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 .....		X
<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 .....		X
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....	X	
	Website address <u>www.tramutofoundation.com</u>		
<b>14</b>	The books are in care of <u>Donato J Tramuto</u> Telephone no. <u>207-646-5001</u> Located at <u>6307 Pasadena Point Blvd S, Gulfport, FL</u> ZIP+4 <u>33707</u>		
<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 .....		N/A
<b>16</b>	At any time during calendar year 2022, 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? .....		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		

**Part VI-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
<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? .....	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....	1a(4)	X
(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)? .....	1a(5)	X
(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.) .....	1a(6)	X
<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 .....	1b	N/A
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here .....		<input type="checkbox"/>
<b>d</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 2022? .....	1d	X
<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 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022? .....	2a	X
If "Yes," list the years _____, _____, _____, _____		
<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.) .....	2b	N/A
<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. _____, _____, _____, _____		
<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? .....	3a	X
<b>b</b> If "Yes," did it have excess business holdings in 2022 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2022.) .....	3b	N/A
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....	4a	X
<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 2022? .....	4b	X

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

	Yes	No
<b>5a</b> During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did any 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	N/A	
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/>	
<b>d</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).	N/A	
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<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.		X
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	
<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(s) during the year?		X

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

**1 List all officers, directors, trustees, and foundation managers and their compensation.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Statement 9		0.	0.	0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Total** number of other employees paid over \$50,000 0

**Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

**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 VIII-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.	Expenses
1	
See Statement 10	402,706.
2	
See Statement 11	37,500.
3	
4	

**Part VIII-B Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 .....	0.

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities .....	1a	400,368.
b	Average of monthly cash balances .....	1b	623,292.
c	Fair market value of all other assets (see instructions) .....	1c	
d	<b>Total</b> (add lines 1a, b, and c) .....	1d	1,023,660.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....		1e	0.
2	Acquisition indebtedness applicable to line 1 assets .....	2	0.
3	Subtract line 2 from line 1d .....	3	1,023,660.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) .....	4	15,355.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 .....	5	1,008,305.
6	<b>Minimum investment return.</b> Enter 5% (0.05) of line 5 .....	6	50,415.

**Part X 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.)

1	Minimum investment return from Part IX, line 6 .....	1	50,415.
2a	Tax on investment income for 2022 from Part V, line 5 .....	2a	189.
b	Income tax for 2022. (This does not include the tax from Part V.) .....	2b	
c	Add lines 2a and 2b .....	2c	189.
3	Distributable amount before adjustments. Subtract line 2c from line 1 .....	3	50,226.
4	Recoveries of amounts treated as qualifying distributions .....	4	0.
5	Add lines 3 and 4 .....	5	50,226.
6	Deduction from distributable amount (see instructions) .....	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 .....	7	50,226.

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

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 .....	1a	555,938.
b	Program-related investments - total from Part VIII-B .....	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes .....	2	
3 Amounts set aside for specific charitable projects that satisfy the:			
a	Suitability test (prior IRS approval required) .....	3a	
b	Cash distribution test (attach the required schedule) .....	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 .....	4	555,938.



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

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				50,226.
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2022:				
a From 2017	300,707.			
b From 2018	2,063,558.			
c From 2019	124,019.			
d From 2020	130,168.			
e From 2021	714,617.			
f Total of lines 3a through e	3,333,069.			
4 Qualifying distributions for 2022 from Part XI, line 4: \$	555,938.			
a Applied to 2021, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2022 distributable amount				50,226.
e Remaining amount distributed out of corpus	505,712.			
5 Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	3,838,781.			
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 2021. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2017 not applied on line 5 or line 7	300,707.			
9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a	3,538,074.			
10 Analysis of line 9:				
a Excess from 2018	2,063,558.			
b Excess from 2019	124,019.			
c Excess from 2020	130,168.			
d Excess from 2021	714,617.			
e Excess from 2022	505,712.			

**Part XIII Private Operating Foundations** (see instructions and Part VI-A, question 9) N/A

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2022, enter the date of the ruling \_\_\_\_\_

**b** Check box to indicate whether the foundation is a private operating foundation described in section \_\_\_\_\_  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2022	(b) 2021	(c) 2020	(d) 2019	
<b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed _____					
<b>b</b> 85% (0.85) of line 2a _____					
<b>c</b> Qualifying distributions from Part XI, line 4, for each year listed _____					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities _____					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c _____					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test - enter:					
<b>(1)</b> Value of all assets _____					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) ...					
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed _____					
<b>c</b> "Support" alternative test - enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) _____					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) _____					
<b>(3)</b> Largest amount of support from an exempt organization _____					
<b>(4)</b> Gross investment income _____					

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

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

Donato J Tramuto

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

None

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed: See Statement 13

See Statement 12

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

**c** Any submission deadlines:

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

**Part XIV** Supplementary Information (continued)

<b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>					
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 Paid during the year</b>					
Alison Brann Available on Request Wells, ME 04090	None	I	Scholarship	2,500.	
All Star Speech 12601 Spring Hill Drive Springhill, FL 34609	None	501 (c) (3)	Supporting the Speech Training for a 2 year old	810.	
Boston University School of Public Health 715 Albany Street, Boston, MA 02118	None	501 (c) (3)	Scholarship	150,000.	
Haiti Children's Nutrition Fund P.O. Box 3730, Chattanooga, TN 37401	None	501 (c) (3)	Grant	10,000.	
Joseph (Jack) Cutting Available on Request Bangor, ME 04401	None	I	Scholarship	2,500.	
<b>Total</b>			<b>See continuation sheet(s)</b>	<b>3a</b> 287,806.	
<b>b Approved for future payment</b>					
None					
<b>Total</b>					<b>3b</b> 0.

**Part XV-A Analysis of Income-Producing Activities**

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
Enter gross amounts unless otherwise indicated.					
1 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies .....					
2 Membership dues and assessments .....					
3 Interest on savings and temporary cash investments .....					
4 Dividends and interest from securities .....			14	8,454.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property .....					
b Not debt-financed property .....					
6 Net rental income or (loss) from personal property .....					
7 Other investment income .....					
8 Gain or (loss) from sales of assets other than inventory .....			18	-1,626.	
9 Net income or (loss) from special events .....					
10 Gross profit or (loss) from sales of inventory .....					
11 Other revenue:					
a <b>Book Sales</b>	900099	15,540.			
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e) .....		15,540.		6,828.	0.
13 Total. Add line 12, columns (b), (d), and (e) .....					22,368.

(See worksheet in line 13 instructions to verify calculations.)

**Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes**

Line No.	Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- 1 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?
 

	Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of: <ul style="list-style-type: none"> <li>(1) Cash X</li> <li>(2) Other assets X</li> </ul>		
b Other transactions: <ul style="list-style-type: none"> <li>(1) Sales of assets to a noncharitable exempt organization X</li> <li>(2) Purchases of assets from a noncharitable exempt organization X</li> <li>(3) Rental of facilities, equipment, or other assets X</li> <li>(4) Reimbursement arrangements X</li> <li>(5) Loans or loan guarantees X</li> <li>(6) Performance of services or membership or fundraising solicitations X</li> </ul>		
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees X		
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

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.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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.

**Sign Here** Signature of officer or trustee \_\_\_\_\_ Date \_\_\_\_\_ Title **Advisory Board**

**Paid Preparer Use Only**

Print/Type preparer's name: **Derek K. Markgren, CPA**  
 Preparer's signature: *Derek K Markgren*  
 Date: **09/09/23**  
 Check  if self-employed  
 PTIN: **P01284874**  
 Firm's name: **Purdy Powers & Company**  
 Firm's EIN: **01-0463013**  
 Firm's address: **130 Middle Street, Portland, ME 04101**  
 Phone no.: **2077753496**

May the IRS discuss this return with the preparer shown below? See instr.  
 Yes  No

223622 12-06-22

Tramuto/Porter Foundation

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

(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	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a Tivity Health Inc	D		03/04/22
b Capital Gain Dividends	P		
c Dodge & Cox Income Fund CL I N/L	D		06/14/22
d Metropolitan West Total Return Bond Fund CL I N/L	D		06/14/22
e Dodge & Cox Income Fund CL I N/L	D		06/14/22
f Metropolitan West Total Return Bond Fund CL I N/L	D		06/14/22
g			
h			
i			
j			
k			
l			
m			
n			
o			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 11,442.		14.	11,428.
b 2,915.			2,915.
c 4,670.		5,380.	-710.
d 201.		228.	-27.
e 8,633.		10,110.	-1,477.
f 12,720.		15,040.	-2,320.
g			
h			
i			
j			
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			11,428.
b			2,915.
c			-710.
d			-27.
e			-1,477.
f			-2,320.
g			
h			
i			
j			
k			
l			
m			
n			
o			

2 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 } .....	2	9,809.
3 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). If (loss), enter "-0-" in Part I, line 8 .....	3	N/A

**Part XIV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	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
Lydia Caron Available on Request Glenburn, ME 04401	None	I	Scholarship	2,500.
Matthew Chase Available on Request Wells, ME 04090	None	I	Scholarship	5,000.
Sofia Whittmann Available on Request Bangor, ME 04401	None	I	Scholarship	5,000.
Zahra Towey Available on Request Bangor, ME 04401	None	I	Scholarship	5,000.
Bangor High School 885 Broadway Bangor, ME 04401	None	501 (c) (3)	General Purpose Contribution	7,500.
CedarPark High School VolleyBall 2150 Cypress Creek Road Cedar Park, TX 78613	None	501 (c) (3)	General Purpose Contribution	515.
Colton Sharpe Available on Request Wells, ME 04090	None	I	Scholarship	2,500.
Gretchen Graffam Available on Request Wells, ME 04090	None	I	Scholarship	2,500.
Kaitlyn Kenyon Available on Request Conway, SC 29528	None	I	Scholarship	2,500.
Karson Lillard Available on Request Cape Girardeau, MO 63701	None	I	Scholarship	1,500.
<b>Total from continuation sheets</b>				<b>121,996.</b>

**Part XIV Supplementary Information****3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	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
Kosi Ifeji Available on Request Bangor, ME 04401	None	I	Scholarship	2,500.
Maine Center for Grieving Child 555 Forest Ave Portland, ME 04101	None	501 (c) (3)	General Purpose Contribution	10,000.
Maud Campbell Endowment Fund ElderNet, 9 S. Bryn Mawr Ave Bryn Mawr, PA 19010	None	501 (c) (3)	General Purpose Contribution	1,000.
McKayla Kenall Available on Request Bangor, ME 04401	None	I	Scholarship	2,500.
Oscar Kwok Available on Request Casine, ME 04420	None	I	Scholarship	1,000.
Professional Nursing Association 4511 Main St Rear Snyder, NY 14226	None	501 (c) (3)	General Purpose Contribution	1,000.
RFK Human Rights - Europe Murate Via Ghibellina, 12/a Florence, ITALY	None	501 (c) (3)	General Purpose Contribution	15,000.
Transplant Fund for Sally Lillard 12120 Ray Country Line Rd Excelsior Springs, MO 64024	None	501 (c) (3)	General Purpose Contribution	1,150.
Aidan McCarthy Memorial Fund PO Box 1728 Ogunquit, ME 03907	None	501 (c) (3)	GoFund ME	5,100.
RFK Human Rights - Italia Murate Via Ghibellina, 12/a Florence, ITALY	None	501 (c) (3)	General Purpose Contribution	18,231.
<b>Total from continuation sheets</b>				



**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	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
Thistle Farms 5122 Charlotte Pike Nashville, TN 37209	None	501 (c) (3)	General Purpose Contribution	30,000.
<b>Total from continuation sheets</b> .....				

**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Attach to Form 990 or Form 990-PF.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

Name of the organization

**Tramuto/Porter Foundation**

Employer identification number

**03-0373845**

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization

Employer identification number

Tramuto/Porter Foundation

03-0373845

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Antoinette Hays Regis College, 235 Wellesley St, PO 1040  Weston, MA 02493	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Brad Flugel  11 East Walton St, Apt 4901  Chicago, IL 60611	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	Brian Tierney  1020 Rock Creek Rd  Bryn Mawr, PA 19010	\$ 5,102.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	Diane Munson  1008 Wilmington Cove  Birmingham, AL 35242	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	Donato Tramuto  6307 Pasadena Pt Blvd S  St Petersburg, FL 33707	\$ 100,518.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	EMG3  380 US Route 1  Falmouth, ME 04105	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

Tramuto/Porter Foundation

03-0373845

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Glen Tullman 1226 Colgate St Wilmette, IL 60091	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	Greg Davis 1146 Greystone Manor Parkway Chesterfield, MO 63005	\$ 5,102.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	Jayne Wochomurka 699 Kauska Way The Villages, FL 32163	\$ 5,836.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	Sean Slovenski 5405 Miami Rd Cincinnati, OH 45243	\$ 5,102.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	Spencer Warden 1496 La Playa St San Francisco, CA 94122	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	Ulya Khan 7 Huguenot Dr Larchmont, NY 10538	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>Tramuto/Porter Foundation</b>	Employer identification number  <b>03-0373845</b>
--	---

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	Health E Villages <hr/> 134 Tilden Rd, Box 909 <hr/> Marshfield, MA 02050	\$ 125,358.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	John DeSouza <hr/> 337 Parnassus Ave <hr/> San Francisco, CA 94117	\$ 5,387.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>Tramuto/Porter Foundation</b>	Employer identification number  <b>03-0373845</b>
--	---

**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
14	Tesla Stock _____ _____ _____	\$ 5,387.	06/14/22
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization  <b>Tramuto/Porter Foundation</b>	Employer identification number  <b>03-0373845</b>
--	---

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

Form 990-PF                      Gain or (Loss) from Sale of Assets                      Statement    1

(a) Description of Property			Manner Acquired	Date Acquired	Date Sold
Tivity Health Inc			Donated		03/04/22
(b) Gross Sales Price	(c) Value at Time of Acq.	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
11,442.	11,442.	0.	0.	0.	

(a) Description of Property			Manner Acquired	Date Acquired	Date Sold
Capital Gain Dividends			Purchased		
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
2,915.	0.	0.	0.	2,915.	

(a) Description of Property			Manner Acquired	Date Acquired	Date Sold
Dodge & Cox Income Fund CL I N/L			Donated		06/14/22
(b) Gross Sales Price	(c) Value at Time of Acq.	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
4,670.	5,382.	0.	0.	-712.	



(a) Description of Property	(b) Gross Sales Price	(c) Value at Time of Acq.	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
Metropolitan West Total Return Bond Fund CL I N/L	201.	228.	0.	0.	-27.

(a) Description of Property	(b) Gross Sales Price	(c) Value at Time of Acq.	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
Dodge & Cox Income Fund CL I N/L	8,633.	10,113.	0.	0.	-1,480.

(a) Description of Property	(b) Gross Sales Price	(c) Value at Time of Acq.	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
Metropolitan West Total Return Bond Fund CL I N/L	12,720.	15,042.	0.	0.	-2,322.

Capital Gains Dividends from Part IV					0.
Total to Form 990-PF, Part I, line 6a					-1,626.

Form 990-PF	Dividends and Interest from Securities				Statement	2
Source	Gross Amount	Capital Gains Dividends	(a) Revenue Per Books	(b) Net Investment Income	(c) Adjusted Net Income	
Dividends	7,708.	0.	7,708.	7,708.	7,708.	
Interest	746.	0.	746.	746.	746.	
To Part I, line 4	8,454.	0.	8,454.	8,454.	8,454.	

Form 990-PF	Other Income			Statement	3
Description	(a) Revenue Per Books	(b) Net Investment Income	(c) Adjusted Net Income		
Book Sales	15,540.	0.	0.		
Total to Form 990-PF, Part I, line 11	15,540.	0.	0.		

Form 990-PF	Accounting Fees				Statement	4
Description	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes		
Accounting	5,050.	1,000.	0.	4,050.		
To Form 990-PF, Pg 1, ln 16b	5,050.	1,000.	0.	4,050.		

Form 990-PF	Other Professional Fees				Statement	5
Description	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes		
Consulting	7,316.	0.	0.	7,316.		
To Form 990-PF, Pg 1, ln 16c	7,316.	0.	0.	7,316.		

Form 990-PF	Taxes			Statement	6
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Federal Taxes	311.	0.	0.	311.	
Payroll Taxes	1,461.	0.	0.	1,461.	
To Form 990-PF, Pg 1, ln 18	1,772.	0.	0.	1,772.	

Form 990-PF	Other Expenses			Statement	7
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Bank Fees	1,198.	0.	0.	1,198.	
Computer	3,564.	0.	0.	3,564.	
Entertainment	7,351.	0.	0.	7,351.	
Office Supplies	7,606.	0.	0.	7,606.	
Telephone	42.	0.	0.	42.	
Website Design	3,750.	0.	0.	3,750.	
Insurance	1,156.	0.	0.	1,156.	
Social Media	22,117.	0.	0.	22,117.	
Publication Expenses	118,093.	0.	0.	118,093.	
Investment Advisory Fees	3,641.	3,641.	0.	0.	
Advertising	63.	0.	0.	63.	
Board Meetings	21,035.	0.	0.	21,035.	
Meals	4,117.	0.	0.	4,117.	
To Form 990-PF, Pg 1, ln 23	193,733.	3,641.	0.	190,092.	

Form 990-PF	Depreciation of Assets Not Held for Investment		Statement	8
Description	Cost or Other Basis	Accumulated Depreciation	Book Value	
Office Equipment	10,772.	10,772.	0.	
Total To Fm 990-PF, Part II, ln 14	10,772.	10,772.	0.	

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Form 990-PF	Part VII - List of Officers, Directors Trustees and Foundation Managers	Statement 9
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Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
Donato J Tramuto 6307 Pasadena Point Blvd S Gulfport, FL 33707	Advisory Board 10.00	0.	0.	0.
Jeffrey Porter P.O. Box 1728 Ogunquit, ME 03907	Advisory Board 10.00	0.	0.	0.
Mary Jane England P.O. Box 53 East Falmouth, MA 02536	Advisory Board 1.00	0.	0.	0.
Jeffrey Clark 16A Woodbridge Road York, ME 03909	Advisory Board 1.00	0.	0.	0.
Anthony Pacillo 58 Plympton Street Cambridge, MA 02138	Advisory Board 1.00	0.	0.	0.
Earle Rugg 1950 Lafayette Rd Portsmouth, NH 03801	Advisory Board 1.00	0.	0.	0.
Mary Kelleher 410 Edgebrook Drive Boylston, MA 01505	Advisory Board 1.00	0.	0.	0.
Phil Johnston 2 Heritage Drive, Ste. 302 Quincy, MA 02171	Advisory Board 1.00	0.	0.	0.
Dr Adam Leach 885 Broadway Bangor, ME 04401	Advisory Board 1.00	0.	0.	0.
Mary Bentley 30431 N. Center Ave Libertyville, IL 60048	Advisory Board 1.00	0.	0.	0.
Bill Viszt 557 Pinnellas Bayway S. #223 St. Petersburg, FL 33715	Advisory Board 1.00	0.	0.	0.

Joanne Bean 25 Presidio Way Falmouth, MA 02540	Advisory Board 1.00	0.	0.	0.
Sam LaPointe 18 Fainwood Circle Cambridge, MA 02139	Advisory Board 1.00	0.	0.	0.
Diane Munson 1008 Wilmington Cove Birmingham, AL 35242	Advisory Board 1.00	0.	0.	0.
Jay Beedle 42 Oak Ridge Rd Standish, ME 04084	Advisory Board 1.00	0.	0.	0.
Angelina Occupinati 107 Hooper Shores Rd. York, ME 03907	Advisory Board 1.00	0.	0.	0.
Bonnie Schirato 21775 S. 184th Pl Queen Creek, AZ 85142	Advisory Board 1.00	0.	0.	0.
Brad Fluegel 524 Beach Dr St Petersburg, FL 33701	Advisory Board 1.00	0.	0.	0.
Brian Tierney 123 S. Broad St Philadelphia, PA 19109	Advisory Board 1.00	0.	0.	0.
Steve Andrejewski 500 W. 30th St, Apt 30N New York, NY 10001	Advisory Board 1.00	0.	0.	0.
Steve Woods 280 US Route 1 Falmouth, ME 04105	Advisory Board 1.00	0.	0.	0.
Dr Tony Hays Regis College, 235 Wellesley St, PO 1040 Weston, MA 02493	Advisory Board 1.00	0.	0.	0.
Spencer Warden 1496 La Playa St San Francisco, CA 94122	Advisory Board 1.00	0.	0.	0.
Katrik Shah 5 Bayberry Circle Nashua, NH 03062	Advisory Board 1.00	0.	0.	0.

Sandeep Shah 25 Caslte Road Northborough, MA 01532	Advisory Board 1.00	0.	0.	0.
Sameer Hamadeh 190 E. 72nd St, #14AB New York, NY 10021	Advisory Board 1.00	0.	0.	0.
Ulya Khan 7 Huguenot Dr Larchmont, NY 10538	Advisory Board 1.00	0.	0.	0.
Jayne Wochomurka 699 Kauska Way The Villages, FL 32163	Advisory Board 1.00	0.	0.	0.
Totals included on 990-PF, Page 6, Part VII		0.	0.	0.

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Form 990-PF                      Summary of Direct Charitable Activities                      Statement 10

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Activity One

Compassionate Leadership - The Foundation, recognizing that every social issue before our society - whether it be food insecurity, loneliness, healthcare access, social and financial inequalities, finds it roots in a more compassionate and kinder society. Therefore, a book has been published by the Foundation (The Double Bottom Line: How Compassionate Leaders Captivate Hearts and Deliver Results) with the goal of educating current and future leaders around how to lead with Compassion. Additionally, and recognizing that learning about compassion must begin at the University and College System, the Foundation will establish a Compassionate Leadership endowed scholarships with Universities and Colleges who commit to creating a sustainable leadership program around the book. Recognizing that a more compassionate and kinder world is not limited to the United States, the Health eVillages program will help to provide education assistance and health care access on a Global basis.

Expenses

To Form 990-PF, Part VIII-A, line 1

402,706.

Activity Two

Scholarships - financial grants and mentorship for graduating high school seniors who have faced special challenges. Students are chosen based on their academic success, as well as the effort and determination they have shown facing these challenges. Scholarship, involvement in school and community activities, personal character, leadership qualities and demonstrated financial need are considered.

Expenses

To Form 990-PF, Part VIII-A, line 2

37,500.

Form 990-PF

Grant Application Submission Information  
Part XIV, Lines 2a through 2d

Statement 12

Name and Address of Person to Whom Applications Should be Submitted

Donato J Tramuto  
6307 Pasadena Point Blvd S  
Gulfport, FL 33707

Telephone Number

Name of Grant Program

207-646-7790

Scholarships & Grants: College Scholarship Program

Form and Content of Applications

Each year, two (2) high school seniors from the State of Maine are awarded an \$20,000 scholarship (\$5,000 per school year) to be used towards tuition and other expenses at a college or university of their choice. Scholarships are awarded on the basis of overall academic excellence, leadership qualities and financial need. Individuals from other areas can apply online and the Advisory board may approve these other scholarship grants. Application form is available online.

Any Submission Deadlines

All applications are due on or before April 1.

Restrictions and Limitations on Awards

Max Scholarship \$20,000



Name and Address of Person to Whom Applications Should be Submitted

Donato J Tramuto  
6307 Pasadena Point Blvd S  
Gulfport, FL 33707

<u>Telephone Number</u>	<u>Name of Grant Program</u>
207-646-7790	Mentoring Program

Form and Content of Applications

The Tramuto Foundation's newest program provides its scholarship recipients with the opportunity to gain confidence, develop leadership skills, and build friendships through a direct mentoring relationship with one of our Advisory Board members. Guidance provided by our professional board members helps students learn to address challenges and issues that are a typical part of college life and gain the confidence they need to succeed in their studies and in life. Scholarship recipients are strongly encouraged to apply.

Any Submission Deadlines

March 31

Restrictions and Limitations on Awards

None

Name and Address of Person to Whom Applications Should be Submitted

Donato J Tramuto  
6307 Pasadena Point Blvd S  
Gulfport, FL 33707

<u>Telephone Number</u>	<u>Name of Grant Program</u>
207-646-7790	Special Grant Program

Form and Content of Applications

Each year at the Annual Board Meeting, the Board will review all Grant applications and will make a decision to award a minimum of 2 Compassionate Leadership Awards in tandem with the Annual Compassionate Leadership Week awarded to the Foundation by the National Day Calendar to occur the 2nd week of September each year.

The following organizations have been helped by a Donato J. Tramuto Foundation grant:

Ogunquit Playhouse Foundation hearing devices, Maine Special Olympics, Cambodia - The Sharing Foundation, Leukemia Society, Katrina, 3 Family's, Walden Street School Foundation, Windbrush Farm, State of Maine Foster Children Program, AIDS Seacoast Foundation, American Diabetes Association, The Friends Project, Frannie Peabody Center, Seacoast Hospice, Camp Sunshine, Gastro-Intestinal Research, Juvenile Diabetes Research Fund, RFK

Any Submission Deadlines

Application Deadline: January 15

Restrictions and Limitations on Awards

None

Name and Address of Person to Whom Applications Should be Submitted

Donato J Tramuto  
6307 Pasadena Point Blvd S  
Gulfport, FL 33707

<u>Telephone Number</u>	<u>Name of Grant Program</u>
207-646-7790	Compassionate Leadership Grants

Form and Content of Applications

Recognizing the significant effects of the COVID-19 Pandemic and its extraordinary consequences across all aspects of day]to]day living, the TramutoPorter Foundation has previously create a weekly INSPIRED CHAT forum the purpose of which is to bring together via a weekly ZOOM call. It is now a monthly Compassionate Leadership Workshop. (1) anyone who has a need to feel connected during this pandemic in a way whereby the can share their diificulties and challenges openly and (2) where the Group can address inbound needs of thos impacted by COVID19. The monthly Leadership Summitt calls provideds an opportunity to address the loneliness epidemix by connecting people through a good venue of social media forums.

Any Submission Deadlines

None specified, through the duration of the pandemic.

Restrictions and Limitations on Awards

Organizations limited to grants of \$10,000 each.  
Individuals limited to grants of \$5,000 each.

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Form 990-PF	Grant Application Submission Information	Statement	13
	Part XIV, Lines 2a - 2d (Continuation)		

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Name or Description of Grant Program

Scholarships & Grants: College Scholarship Program

Form and Content of Applications

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2022 DEPRECIATION AND AMORTIZATION REPORT

Form 990-PF Page 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
11	Office Equipment	12/08/03	200DB	5.00		HY17	10,772.				10,772.	10,772.		0.	10,772.
	* Total 990-PF Pg 1 Depr						10,772.				10,772.	10,772.		0.	10,772.