IRS e-file Signature Authorization for a Tax Exempt Entity

CIVID 140	1040	-00	71
			_

For calendar year 2021, or fiscal year beginning

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records.

Name of filer

Go to www.irs.gov/Form8879TE for the latest information.

POWELL

EIN or SSN 22-3281672

HAROLD ALFOND FOUNDATION

GREGORY W.

TRUSTEE

Type of Return and Return Information

Name and title of officer or person subject to tax

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter .0.). But, if you entered .0. on the return, then enter .0. on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b
2a	Form 990-EZ check here >	b	Total revenue, if any (Form 990-EZ, line 9)	2b
3a	Form 1120-POL check here	b	Total tax (Form 1120-POL, line 22)	3b
4a	Form 990-PF check here > X	b	Tax based on investment income (Form 990-PF, Part V, line 5)	4ь 1,192,381.
5a	Form 8868 check here	b	Balance due (Form 8868, line 3c)	5b
6a	Form 990-T check here >	b	Total tax (Form 990-T, Part III, line 4)	6b
7a	Form 4720 check here		Total tax (Form 4720, Part III, line 1)	7b
8a	Form 5227 check here	ь	FMV of assets at end of tax year (Form 5227, Item D)	8b
9a	Form 5330 check here	b	Tax due (Form 5330, Part II, line 19)	9b
10a	Form 8038-CP check here	b	Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b
Part	II Declaration and Signate	ure	Authorization of Officer or Person Subject to Tax	
Under p	penalties of perjury, I declare that X	I a	m an officer of the above entity or I am a person subject to tax with res	pect to (name
of entity)		, (EIN) and that I have	e examined a copy of the
2021 el	ectronic return and accompanying sch	edu	les and statements, and, to the best of my knowledge and belief, they are tru	ie, correct, and

complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

ERO firm name

PIN:	check	one	box	only

RANDALL & BENNETT X lauthorize ALBIN

to enter my PIN

12345

Enter five numbers, but do not enter all zeros

Date > 11/15/22

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

subject to tax Part III Certification and Authentication

number (EFIN) followed by your five-digit self-selected PIN.

ERO's EFIN/PIN. Enter your six-digit electronic filing identification

01219255555

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

Date > 11/01/22

ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

LHA For Privacy act and Paperwork Reduction Act Notice, see instructions.

Form 8879-TE (2021)

Form 990-PF Department of the Treasury

Internal Revenue Service

EXTENDED TO NOVEMBER 15, 20 Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2021 or tax year beginning and ending A Employer identification number Name of foundation 22-3281672 HAROLD ALFOND FOUNDATION Number and street (or P.O. box number if mail is not delivered to street address) **B** Telephone number C/O DEXTER ENTRPS, TWO MONUMENT SO (207)828 - 7999City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here PORTLAND, ME 04101 D 1. Foreign organizations, check here G Check all that apply: Initial return Initial return of a former public charity Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at end of year J Accounting method; X Cash Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here ____ 1,617,698,483. (Part I, column (d), must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net expenses per books income income Contributions, gifts, grants, etc., received 60,285,180. N/A 2 Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 1,876,339. 1,876,339. STATEMENT 16,635,182. 16,449,276. STATEMENT Dividends and interest from securities 5a Gross rents Net rental income or (loss) 84,265,773 68 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 92,759,380. 75,084,610. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a and allowances b Less: Cost of goods sold ... c Gross profit or (loss) 9,430,316. 6,041,216. 11 Other income STATEMENT 272.492.790. 99.451.441. 12 Total. Add lines 1 through 11 0. 0. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 4 8,482. 3,393. 5,089. 14,520. 21,780. 36,300. b Accounting fees STMT 5 1,908,015. c Other professional fees STMT 6 1,024,741. 883.274. 17 Interest Taxes STMT 7 1,651,322. 759,289. 0. 19 Depreciation and depletion Occupancy 20 1,237. 3,093. 1,856. 21 Travel, conferences, and meetings 22 Printing and publications 5,110. 5,110. Λ. 23 Other expenses STMT 8 14,282,536. 11,865,478. 11,645. 24 Total operating and administrative 928,754. 17,894,858. 13,668,658. expenses. Add lines 13 through 23 72,903,779. 72,759,822. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 90,798,637. 13,668,658. 73,688,576. Add lines 24 and 25 27 Subtract line 26 from line 12; 181,694,153. 2 Excess of revenue over expenses and disbursements 85,782,783. b Net investment income (If negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

Part	Balance Sheets Attached schedules and amounts in the description	Beginning or year	End of	ryear
Fart	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	3,033.	11,763.	11,763.
2	Savings and temporary cash investments	5,332,494.	35,024,233.	35,024,233.
3	Accounts receivable			
	Less: allowance for doubtful accounts			
4	Pledges receivable	du s i		
	Less: allowance for doubtful accounts	3.1-		
5				
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
1 7	Other notes and loans receivable			
1	Less: allowance for doubtful accounts			
m 8	Inventories for sale or use			
Assets o o	Prepaid expenses and deferred charges			
¥ 10	a Investments - U.S. and state government obligations			
10	b Investments - corporate stock STMT 10	458 688 639	502,901,498.	896 425 221
	- Investments - corporate bonds CTMT 11	26 973 973	34,532,175.	35,079,441.
- [₁₄ '	c Investments - corporate bonds STMT 11	20,313,313.	34,332,173.	33,073,441.
- ''	Investments - land, buildings, and equipment: basis			
140	Less: accumulated depreciation			
	Investments - mortgage loans	222 277 710	412,338,094.	651 152 025
13		344,311,110.	412,330,034.	031,132,023.
14	Land, buildings, and equipment basis			
l	Less: accumulated depreciation	F 000	F 000	F 000
	Other assets (describe STATEMENT 13)	5,000.	5,000.	5,000.
16	Total assets (to be completed by all filers - see the	012 200 057	004 010 763	1617600400
-	instructions. Also, see page 1, item I)	813,380,857.	984,812,763.	1617698483.
	Accounts payable and accrued expenses			
18				
g 19				
abilities 20 21				
윤 21			1 105 050	
7 22	Other liabilities (describe STATEMENT 14)	4,585,774.	4,107,056.	
23	Total liabilities (add lines 17 through 22)	4,585,774.	4,107,056.	
	Foundations that follow FASB ASC 958, check here			
8 24	and complete lines 24, 25, 29, and 30.			
	Net assets without donor restrictions		100	
緩 25				
	Foundations that do not follow FASB ASC 958, check here			Yell Walliam .
튑	and complete lines 26 through 30.			
or Fund Balan	Capital stock, trust principal, or current funds	808,795,083.	980,705,707.	
	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	ME SHIPERS
A83843	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
29 29	Total net assets or fund balances	808,795,083.	980,705,707.	
Ž	3503051100			PER LINE AND THE
30	Total liabilities and net assets/fund balances	813,380,857.	984,812,763.	
Par	Analysis of Changes in Net Assets or Fund Ba	alances		
T di				
1 Tot	tal net assets or fund balances at beginning of year - Part II, column (a), line	29		
	ust agree with end-of-year figure reported on prior year's return)			808,795,083.
2 Ent	ter amount from Part I, line 27a		2	181,694,153.
3 Oth	ner increases not included in line 2 (itemize)		3	0.
	d lines 1, 2, and 3		4	990,489,236.
5 Dec	creases not included in line 2 (itemize)	SEE ST	ATEMENT 9 5	9,783,529.
6 Tot	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 29	6	980,705,707.
		Sava.		Form 990-PF (2021

	OLD ALFOND FOUNDA				3281672	Page 3
Part IV Capital Gains	and Losses for Tax on Inv	estment Income	SEE ATTAC	HED STAT	PEMENTS	
	the kind(s) of property sold (for examarehouse; or common stock, 200 shs.		(b) How acquired P - Purchase D - Donation	(c) Date acqui (mo., day, yr		
 1a				İ		
b						
C						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or ((e) plus (f) n		
a						
b						
С						
d		44 206 20			55 004	C10
86,480,701.		11,396,09	1.		75,084,	610.
Complete only for assets showing	ng gain in column (h) and owned by th		—	(I) Gains (Col. (h col. (k), but not le:) gain minus	
(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	<u> </u>	Losses (from		
8	20					
b						
<u>C</u>						
d					85 004	510
ė					75,084,	610.
2 Capital gain net income or (net ca	apital loss) { If gain, also enter of the first of the fi	in Part I, line 7 in Part I, line 7	2		75,084,	610.
If gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) and column (c). See instructions. If (loss				NT / B	
Part V Excise Tay Res	sed on Investment Income	e (Section 4940/a) 40	3 340/h) or 4948		N/A	
Control of the Contro				7 1	Cuons	
· · · · =	described in section 4940(d)(2), chec			III III III III III III III III III II	1,192,	201
_	letter; (atta		- see instructions)) 	1,132,	201.
	enter 1.39% (0.0139) of line 27b. Exe					
	2, col. (b)			ا ه ار		0.
9 Add lines 1 and 9	tic section 4947(a)(1) trusts and taxat		nter -u-)	3	1,192,	
	stic section 4947(a)(1) trusts and taxa		ntor -0-\		1,172,	0.
	me. Subtract line 4 from line 3. If zer			7600 5	1,192,	
6 Credits/Payments;	me. Sobuact mie 4 nom mie S. 11 2er	0 01 1633, GITICI -0-			1,100/	3011
100	and 2020 overpayment credited to 202	21 6a	634,31	3.		
_ ` ` •	tax withheld at source			0.		
	tension of time to file (Form 8868)		795,00	0.		
	ly withheld			0.		
7 Total credits and payments. Ad	d Dans Ca Absorb Cd	- OU		7	1,429,	313.
	ment of estimated tax. Check here			8	===	0.
	and 8 is more than 7, enter amount o			9		

10

236,932. Refunded

10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid

11 Enter the amount of line 10 to be: Credited to 2022 estimated tax

Part VI-A Statements Regarding Activities	1672		Page
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	_
any political campaign?	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	WENT TO		
distributed by the foundation in connection with the activities.	0.000		
Did the foundation file Form 1120-POL for this year?	1c		X
Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	11003	mo)III
(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$	1000	1	
Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$0 .			
Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
If "Yes," attach a detailed description of the activities.	11725	W. (1)	111/2
Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	118		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X	
olf "Yes," has it filed a tax return on Form 990-T for this year?	4b	X	
Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
If "Yes," attach the statement required by General Instruction T.	0=1:	hood	D.
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either;	4000	801	-0
By language in the governing instrument, or		SACT	
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			100
remain in the governing instrument?	6	X	
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	7	Х	
a Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ ME, CA	-		
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)	200		
of each state as required by General Instruction G? If "No," attach explanation	. 8b	X	
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 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII	9		X
Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
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		X
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	12	ļ	X
	13	X	<u>L.</u>
Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		000	
Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW . HAROLDALFONDFOUNDATION . ORG			
Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.HAROLDALFONDFOUNDATION.ORG The books are in care of DEXTER ENTERPRISES, LLC Telephone no. 207-8			
Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.HAROLDALFONDFOUNDATION.ORG The books are in care of ► DEXTER ENTERPRISES, LLC Telephone no. ► 207 - 8 Located at ► TWO MONUMENT SQUARE, PORTLAND, ME ZIP+4	4101		
Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.HAROLDALFONDFOUNDATION.ORG The books are in care of ► DEXTER ENTERPRISES, LLC Telephone no.►207-8 Located at ► TWO MONUMENT SQUARE, PORTLAND, ME ZIP+4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	4101	20.5	
Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► WWW.HAROLDALFONDFOUNDATION.ORG The books are in care of ► DEXTER ENTERPRISES, LLC Telephone no.►207-8 Located at ► TWO MONUMENT SQUARE, PORTLAND, ME ZIP+4 ► 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	4101	▶ [/A	I NI
Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ WWW.HAROLDALFONDFOUNDATION.ORG The books are in care of ▶ DEXTER ENTERPRISES, LLC Located at ▶ TWO MONUMENT SQUARE, PORTLAND, ME 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 At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank,)4101 N	20.5	+
Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.HAROLDALFONDFOUNDATION.ORG The books are in care of DEXTER ENTERPRISES, LLC Located at TWO MONUMENT SQUARE, PORTLAND, ME 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 At any time during calendar year 2021, 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?)4101 N	▶ [/A	No X
Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.HAROLDALFONDFOUNDATION.ORG The books are in care of DEXTER ENTERPRISES, LLC Located at TWO MONUMENT SQUARE, PORTLAND, ME 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 At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank,)4101 N	▶ [/A	+

Form 990-PF (2021) HAROLD ALFOND FOUNDATION 2: Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required	2-3281672		Page 5
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	120	Yes	No
1a During the year, did the foundation (either directly or indirectly):			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)		х
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		157-	
a disqualified person?	1a(2)		х
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	5300		
(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)?	102240		15/
(6) Agree to pay money or property to a government official? (Exception, Check "No"	Contract of the Contract of th		х
if the foundation agreed to make a grant to or to employ the official for a period after	1a(5)		
termination of government service, if terminating within 90 days.)	1a(6)	-	х
b if any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	Jato		
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		х
c Organizations relying on a current notice regarding disaster assistance, check here		1.00	
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			22.1
before the first day of the tax year beginning in 2021?	14		х
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)):			88
a At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines		l lañ	
6d and 6e) for tax year(s) beginning before 2021?	2a		X
If "Yes," list the years - , , , , ,	3510564	11.18	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	100	1114	
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		9.11	
statement - see instructions.)	N/A 2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	100		3
during the year?	3a		X
b If "Yes," did it have excess business holdings in 2021 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 dispo	se	911	
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,	€	2111	
Schedule C, to determine if the foundation had excess business holdings in 2021.)			
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			Х
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 2021?	4b Form 99	<u> </u>	X

Form 990-PF (2021) HAROLD ALFOND FOUNDATION Part VI-B Statements Regarding Activities for Which F	orm 4720 May Bo D		22-3281	.672	[Page 6
5a During the year, did the foundation pay or incur any amount to:	Offit 4720 Way be N	equired (continu	ued)		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e)\?			5a(1)	100	X
(2) Influence the outcome of any specific public election (see section 4955); of				54(1)	IIII	
any voter registration drive?			TE GURAN	5a(2)		Х
(3) Provide a grant to an individual for travel, study, or other similar purposes	?			5a(3)		X
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			- 6		Evid.
4945(d)(4)(A)? See instructions				5a(4)	Х	
(5) Provide for any purpose other than religious, charitable, scientific, literary,				1118		
the prevention of cruelty to children or animals?	de ale communicación de contra de la des	. 6		58(5)		X
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un section 53.4945 or in a current notice regarding disaster assistance? See instr				5b	х	
section 53.4945 or in a current notice regarding disaster assistance? See instructions c Organizations relying on a current notice regarding disaster assistance, check here						
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption f						500
expenditure responsibility for the grant?				5d	X	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).						1 34
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on					- 50
a personal benefit contract?				6a		X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b		X
If "Yes" to 6b, file Form 8870.						
7a At any time during the tax year, was the foundation a party to a prohibited tax				7a		X
b If "Yes," did the foundation receive any proceeds or have any net income attribute.			N/.A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than sexcess parachute payment(s) during the year?				8		х
excess parachute payment(s) during the year? Part VII Information About Officers, Directors, Trust	ees. Foundation Ma	nagers. Highly				
List all officers, directors, trustees, and foundation managers and t (a) Name and address	heir compensation. (b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions employee benefit of and deferred compensation	to lans	(e) Exp account allowa	ense , other nces
	_					
SEE STATEMENT 15		0.).		0.
	-					
E						
	1					
	4					
2 Compensation of five highest-paid employees (other than those inc	aluded on line 1) If none	enter "NONE "				
	(b) Title, and average		(d) Contributions		(e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit p and deferred compensation		account allowa	, other
NONE				\top		
				13		
AND THE RESERVE AND ADDRESS OF THE PERSON OF						
	-					
				+		
	-					
· · · · · · · · · · · · · · · · · · ·		-		+		
	1					
Total number of other employees paid over \$50,000		77.75		Τ.		0

HAROLD ALFOND FOUNDATION 22-3281672 Page 7 Form 990-PF (2021) 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 (c) Compensation (b) Type of service DEXTER PRIVATE EQUITY TE LLC INVEST PORTFOLIO ME 04101 DEDUCTIONS TWO MONUMENT SQUARE, PORTLAND, 3525754. DEXTER US EQUITY TE LLC INVEST PORTFOLIO ME 04101 1851723. TWO MONUMENT SQUARE, PORTLAND, DEDUCTIONS DEXTER REAL ASSETS TE, LLC INVEST PORTFOLIO TWO MONUMENT SQUARE, PORTLAND, ME 04101 DEDUCTIONS 1610073. DEXTER ENTERPRISES INVESTMENT & GRANT TWO MONUMENT SQUARE, PORTLAND, ME 04101 ADMINISTRATION 1415738. DEXTER HEDGE FUND TE, LLC INVEST PORTFOLIO TWO MONUMENT SQUARE, PORTLAND, ME 04101 DEDUCTIONS 1369747. Total number of others receiving over \$50,000 for professional services 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 Expenses number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 NONE 0. 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** All other program-related investments. See instructions.

Form 990-PF (2021)

0.

Total. Add lines 1 through 3

P	art IX Minimum Investment Return (All domestic foundations must con	nplete this part. Foreign foun	dation	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., p	urposes:	1111	
а	Average monthly fair market value of securities	and the second of the second	1a	1,447,276,827.
	Average of monthly cash balances		1b	23,328,976.
C	Fair market value of all other assets (see instructions)		1c	
	Total (add lines 1a, b, and c)		1d	1,470,605,803.
	Reduction claimed for blockage or other factors reported on lines 1a and		-14	
	1c (attach detailed explanation)	0.	III	111
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	1,470,605,803.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, se	ee instructions)	4	22,059,087.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3		5	1,448,546,716.
6	Minimum Investment return. Enter 5% (0.05) of line 5		6	72,427,336.
P	art X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) foreign organizations, check here and do not complete this part.)		d certa	in
1	Minimum investment return from Part IX, line 6	AND SALAR ST. ST. SALIS STORE	1	72,427,336.
2a	Tax on investment income for 2021 from Part V, line 5	1,192,381.		
b		907,511.		
C	Add lines 2a and 2b		2c	2,099,892.
3	Distributable amount before adjustments. Subtract line 2c from line 1	2000 CO2000 CO200	3	70,327,444.
4	Recoveries of amounts treated as qualifying distributions		4	23,076,923.
5	Add lines 3 and 4		5	93,404,367.
6	Deduction from distributable amount (see instructions)		6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line		7	93,404,367.
P	art XI Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	78.1		
2	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	73,688,576.
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	143,957.
b	Cash distribution test (attach the required schedule)	***************************************	3b	
4			4	73,832,533.

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1 Distributable amount for 2021 from Part X,	Arthur Town Es			
line 7				93,404,367.
2 Undistributed income, if any, as of the end of 2021:				E VI I FIM FUNTIN
a Enter amount for 2020 only			0.	
b Total for prior years:		•		
Excess distributions carryover, if any, to 2021:		0.		
a From 2016 b From 2017			E TO SN LITTER	
. F 0040				
45 2040 6 675 570				
e From 2020 8,988,682.				
f Total of lines 3a through e	15,664,252.			
4 Qualifying distributions for 2021 from	20,001,202		241	
Part XI, line 4: ►\$ 73,832,533.				A China Town In
a Applied to 2020, but not more than line 2a			0.	
b Applied to undistributed income of prior			A modern	R seem of the seem
years (Election required - see instructions)	THE THE SECTION AND ADDRESS OF THE PARTY AND A	0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2021 distributable amount				73,832,533.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2021 (if an amount appears in column (d), the same amount must be shown in column (a).)	15,664,252.			15,664,252.
6 Enter the net total of each column as indicated below:				
â Corpus, Add lines 3f, 4c, and 4e, Subtract line 5	0.			
b Prior years' undistributed income. Subtract				Table average average
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				TO SELL A LIBERTAL
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.	SEAN TANK	
d Subtract line 6c from line 6b. Taxable		. 1		
amount - see instructions		0.		
e Undistributed income for 2020. Subtract line			•	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2021. Subtract				
lines 4d and 5 from line 1. This amount must				2 007 502
be distributed in 2022				3,907,582.
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.			
may be required - see instructions) 8 Excess distributions carryover from 2016	•			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2022.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2017				
b Excess from 2018		St W. W. X. X.		
c Excess from 2019				
d Excess from 2020				
e Excess from 2021				

Part XIV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient show any relationship to **Foundation** Purpose of grant or **Amount** status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient 8 Paid during the year 7 LAKES ALLIANCE PC 2020/2021 CAPACITY-BUILDING PO BOX 250 BELGRADE LAKES, ME 04918-0250 INITIATIVE 125,000. ALFOND SCHOLARSHIP FOUNDATION so I OPERATIONS 482 CONGRESS ST STE 303 769,724. PORTLAND, ME 04101-3437 so I ASF SCHOLARSHIP ALFOND SCHOLARSHIP FOUNDATION 482 CONGRESS ST STE 303 PAYMENTS PORTLAND, ME 04101-3437 5,934,309. ALFOND SCHOLARSHIP FOUNDATION QUARTERLY FAME SO I EXPENSES 482 CONGRESS ST STE 303 PORTLAND, ME 04101-3437 312,276. ALFOND YOUTH & COMMUNITY CENTER РC STRATEGIC LONG TERM CAPITAL AND 126 NORTH STREET WATERVILLE, ME 04901 DEVELOPMENT SUSTAINABILITY AT THE ALFOND YOUTH CENTER 1,108,600. SEE CONTINUATION SHEET(S) 72,759,822. **▶** 3a Total b Approved for future payment ALFOND SCHOLARSHIP FOUNDATION BO I OPERATIONS 482 CONGRESS ST STE 303 PORTLAND, ME 04101-3437 99,955. ALFOND SCHOLARSHIP FOUNDATION ko I ASF SCHOLARSHIP 482 CONGRESS ST STE 303 PAYMENTS PORTLAND, ME 04101-3437 65,691. ALFOND YOUTH & COMMUNITY CENTER PC CAMP TRACEY IMPROVEMENTS AND 126 NORTH STREET WATERVILLE, ME 04901 EXPANSION 1,000,000. SEE CONTINUATION SHEET(S) 17,577,473. Total

nter gross amounts unless otherwise indicated.	Unrelated	Unrelated business income Excluded by section 512, 513, or 514 (e)						
Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income			
b	- 1							
G								
4	_							
d					1011			
e	_		-					
g Fees and contracts from government agencies	_							
Membership dues and assessments Interest on savings and temporary cash	22.15							
			14	1 976 220				
investments	10.07		14	1,876,339. 16,635,182.				
Dividends and interest from securities	400		14	10,033,182.				
Net rental income or (loss) from real estate:								
a Debt-financed property								
b Not debt-financed property								
Net rental income or (loss) from personal								
property								
Other investment income	USC 6-		14	9,430,316.	" "			
Gain or (loss) from sales of assets other								
than inventory	900099	5,072,202.	18	79,193,571.				
Net income or (loss) from special events								
Gross profit or (loss) from sales of inventory								
Other revenue:								
a								
b								
c ⁱ								
	.							
0								
d				107 125 400	(
6		5,072,202.		10/,133,400.				
e Subtotal. Add columns (b), (d), and (e)		5,072,202.		107,135,406.	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)		5,072,202.		13_	112,207,610			
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations	s.)			13	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations	s.)			13	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie	s.)	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie Ine No. Explain below how each activity for which	s.) es to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie Ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal columns (b), (d), and (e) Relationship (e)	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie Ine No. Explain below how each activity for which	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie Ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal in the subto	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie Ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal in the subto	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal columns (b), (d), and (e) Part XV-B Relationship of Activities	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal columns (b), (d), and (e) Part XV-B Relationship of Activities	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal columns (b), (d), and (e) Part XV-B Relationship of Activities	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie Ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal in the subto	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal columns (b), (d), and (e) Part XV-B Relationship of Activities	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal columns (b), (d), and (e) Part XV-B Relationship of Activities	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal columns (b), (d), and (e) Part XV-B Relationship of Activities	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal columns (b), (d), and (e) Part XV-B Relationship of Activities	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,61			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie Ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal columns (b), (d), and (e) Relationship (e)	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie Ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal in the subto	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie Ine No. Explain below how each activity for which the foundation's exempt purposes (other the subtotal in the subto	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie Explain below how each activity for which the foundation's exempt purposes (other the	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,610			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Eee worksheet in line 13 instructions to verify calculations Part XV-B Relationship of Activitie Explain below how each activity for which the foundation's exempt purposes (other the	s.) s to the Accor	mplishment of Ex	empt	Purposes	112,207,61			

22-3281672 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Part XVI

1	Did the	organization directly or indi	rectly engage in any (of the followin	g with any other organization	on described in secti	on 501(c)		Yes	NO
	•	han section 501(c)(3) organ	•		1 10-					
a		rs from the reporting founda								
	(1) Cas	sh						18(1)		X
	(2) Oth	ier assets						1a(2)		X
b	Other tr	ansactions:								
	(1) Sal	les of assets to a noncharital	ble exempt organizati	ion				1b(1)		X
	(2) Pu	rchases of assets from a nor	ncharitable exempt o	rganization	TVSES ESSEE.		******************************	1b(2)		<u>X</u>
		ntal of facilities, equipment,						1b(3)		X
		imbursement arrangements						1b(4)		X
		ans or loan guarantees						1b(5)		X
	(6) Per	rformance of services or me	mbership or fundrais	ing solicitatio	ns			1b(6)		X
C		of facilities, equipment, mai						10		X
		nswer to any of the above is						ther ass	ets,	
		ces given by the reporting fo		_		_				
		(d) the value of the goods,				79	W. C. Links			
(a) L	ine no.	(b) Amount involved			e exempt organization	(d) Description	of transfers, transactions, and sh	ering arre	ngemen	ts
, ,		1 -7	(-)	N/A	1 0	\ <u>-</u> /				
	_			24/ 22						
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_	-									
	-				<u>>></u>					
	-									
							· · · · · · · · · · · · · · · · · · ·	***		
								10		
	-									
	\rightarrow					_				
										50
2a	Is the fo	oundation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	izations described				
		on 501(c) (other than section	•					Yes	X	No
ь		complete the following sche				***************************************				_
		(a) Name of org		8	(b) Type of organization		(c) Description of relationsh	ip		
		N/A			(,		, , ,	<u> </u>		
			W.							
						· · · · ·				
						 				
	Unc	der penalties of perjury, I declare to	hat I have examined this	return, Including	accompanying schedules and st	tatements, and to the bea	st of my knowledge			
Sig		bellef, it is true, correct, and com					May	the IRS di n with the	iscuss the prepare	ils r
He		(h/		/ ~	1	MDITOME	shov	vn below?	See ins	tr.
		ionatura of officer or tructor			No.4e	TRUSTE	<u> </u>	Yes		No
	0	ignature of officer or trustee		Dranaueria -	Date	Title	Check if PTIN			
		Print/Type preparer's na	IIIIE	Preparer's si	ignature	Date				
D-	id			الميدرا	P. Davier CPA		self- employed	000	204	
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22-3281672

Part IV Capital Gains and Losses for Tax on Investment income (b) How acquired P - Purchase (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) D - Donation 1a AMERICAN INFRASTRUCTURE MLP PASS-THROUGH D 07/01/2007/01/21 b LEGACY VENTURE IV PASS-THROUGH P 07/01/06|07/01/21 P 07/01/0807/01/21 c LEGACY VENTURE V PASS-THROUGH d TISHMAN SPEYER INTERNATIONAL FUND PASS-THROUGH P 07/01/0907/01/21 e TISHMAN SPEYER INDIA FUND PASS-THROUGH P 07/01/09|07/01/21 f DEXTER FIXED INCOME TE PASS-THROUGH P 07/01/1407/01/21 DEXTER INTERNATIONAL EQUITY TE PASS-THROUGH P 07/01/11|07/01/21 P h DEXTER GLOBAL EQUITY TE PASS-THROUGH 07/01/1107/01/21 i CLASS ACTION PROCEEDS P 01/01/21|07/01/21 ENTREPRENEURIAL VALUE FUND PASS-THROUGH D 07/01/2007/01/21 P k DEXTER US EQUITY TE PASS-THROUGH 07/01/1107/01/21 DEXTER HEDGE FUNDS TE PASS-THROUGH P 07/01/1307/01/21 P 07/01/0907/01/21 m TISHMAN SPEYER US RE FUND PASS-THROUGH 01/05/2107/01/21 n PUBLICLY TRADED SECURITIES - FIDELITY D O SPECIAL OPPS III PASS-THROUGH P |07/01/06|07/01/21 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 12,524. 12,524. а 519,380. 519,380. b 1,544,627. 1,544,627. C 1,936. 1,936. d 28. 28. 6 -191,948.191,948. f 9,340,005. 9,340,005. 7,179,719. 7,179,719. h 616. 616. 2,423,880. 2,423,880. 22,811,235. 22,811,235. 1,040,453. 1,040,453. 1 3,186. 3,186. m 5,096,770. -381,952.5,478,722. п 204,212. 204,212. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (i) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 12,524. a 519,380. b 544,627. Ç 1,936. d 28. е -191,948. 9,340,005. g 7,179,719. h 616. 2,423,880. 22,811,235. 1,040,453. 3,186. m -381,952. n 204.212. 0 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 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

	oubital dalily and Ed	and the the out the comment module					
		d describe the kind(s) of property sold rick warehouse; or common stock, 20				(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1-	PUBLICLY TRADE	· · · · · · · · · · · · · · · · · · ·			D - Donation D	11/07/93	
-	PUBLICLY TRADE			07/01/10			
	DEXTER REAL AS			07/01/21			
		L ESTATE PASS-THR	P	07/01/06			
		EQUITY TE PASS-T				07/01/12	
		GAINS INCLUDED I		07/01/21			
g					-	0,,02,22	
h							
i							
j							
k							_
1							
m		in					
η							
0							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) (e) p	Gain or (loss) lus (f) minus (g)	
a	349,792.		135,073.				214,719.
b	866,661.		518,146.				348,515.
C	7,705,361.					7,	705,361.
d	3,401.						3,401.
e	27,376,915.						376,915 .
ŧ			5,072,202.			-5,	072,202.
g							
h							
i							
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<u>k</u>	•						
<u> </u>		· · · · · · · · · · · · · · · · · · ·					
m C		10					
<u>п</u> 0							- 3
U	Complete only for assets showing	ng gain in column (h) and owned by th	ne foundation on 12/31/69		(I) I ns	ses (from col. (h))	
	-	(j) Adjusted basis	(k) Excess of col. (i)		Gains (excess o	f col. (h) gain over	col. (k),
_	(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any		but n	ot less than "-0-")	014 710
a h							214,719. 348,515.
þ							705,361.
c d							3,401.
<u>u</u> e						27.	376,915.
f							072,202.
g						- /	
<u>"</u> h							
i							
j							
k							
I							
m							
n							
0							
2	Capital gain net income or (net ca	apital loss) { If gain, also enter If (loss), enter "-0-	in Part I, line 7 - in Part I, line 7	2		75,	084,610.
3		ss) as defined in sections 1222(5) and	` `				
	If (loss), enter "-0-" in Part I, line		J	3		N/A	

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager or substantial contributor status of Name and address (home or business) recipient ALFOND YOUTH & COMMUNITY CENTER PC AYCC LITTLE LEAGUE 126 NORTH STREET WATERVILLE, ME 04901 150. ALFOND YOUTH & COMMUNITY CENTER PC CAMP TRACEY 126 NORTH STREET IMPROVEMENTS AND WATERVILLE, ME 04901 EXPANSION 500,000. AMERICAN UNIVERSITY IN BULGARIA PC UNRESTRICTED 910 17TH ST., N.W., SUITE 1100 WASHINGTON, DC 20006 10,000. AROOSTOOK MENTAL HEALTH SERVICES INC. PC AROOSTOOK TEEN PO BOX 1018 LEADERSHIP CAMP (ATLC) CARIBOU, ME 04736 ROGRAM 2,500. GENERAL FACILITIES BELGRADE REGIONAL HEALTH CENTER PC SUPPORT PO BOX 304 BELGRADE LAKES, ME 04918-0304 15,000. BETH ISRABL CONGREGATION - BATH PC UNRESTRICTED 906 WASHINGTON ST BATH, ME 04530-2653 2,000. BETH ISRAEL CONGREGATION - WATERVILLE PC OPERATIONS 291 MAIN STREET WATERVILLE, ME 04903 50,000. BOSTON SYMPHONY ORCHESTRA INC INRESTRICTED PC 301 MASS AVENUE BOSTON, MA 02115-4557 5,000. BRUNSWICK COMMUNITY EDUCATION PC UNRESTRICTED FOUNDATION PO BOX 1042 BRUNSWICK, ME 04011-1042 3,000. BUCKNELL UNIVERSITY PC UNRESTRICTED 1 DENT DRIVE LEWISBURG, PA 17837 2,000. 64,509,913. **Total from continuation sheets**

HAROLD ALFOND FOUNDATION

[Part XIV] Supplementary Information

3 Grants and Contributions Paid During the Yea		Г		
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
BUNKER HILL COMMUNITY COLLEGE		PC	UNRESTRICTED	
POUNDATION			1	
250 NEW RUTHERFORD AVE.				
BOSTON, MA 02129				2,500
CATHANCE RIVER EDUCATION ALLIANCE		PC	UNRESTRICTED	
PO BOX 187				
TOPSHAM, ME 04086-0187				5,000
CENTER FOR CURRICULUM REDESIGN		PC	CYBERPANTHERS CS PATH	
10 JAMAICAWAY #18			FOR EDUCATION	
JAMAICA PLAIN, MA 02130			EMPLOYABILITY AND LIFE	1,287,000
76 dB				
CHILDREN'S CENTER EARLY INTERVENTION		PC	UNRESTRICTED	
AND FAMILY SUPPORT 1 ALDEN AVE				
AUGUSTA, ME 04330-0000				10,000
¥1				•
CITY OF WATERVILLE 1 COMMON STREET		GOV	REPAIRS TO ALFOND	
WATERVILLE ME 04901			MUNICIPAL POOL	2,290,000
,				
W				
COLBY COLLEGE		PC	ATHLETICS CENTER	
4130 MAYFLOWER HILL WATERVILLE, ME 04901-8846				7,500,000
				7,300,000
COLBY COLLEGE		PC .	ART CENTER AND HOTEL	
4130 MAYFLOWER HILL WATERVILLE, ME 04901-8846				5,000,000
,				0,000,000
COLBY COLLEGE		PC	UNRESTRICTED	
4130 MAYFLOWER HILL WATERVILLE, ME 04901-8846				2 500
ARTERVIDES, NE 04701-0040				2,500
BDUCARE CENTRAL MAINE		PC	HAROLD ALFOND	
97 WATER ST		450	SCHOLARSHIPS	AFA AA*
WATERVILLE, ME 04901-6339				250,000
BDUCATE MAINE		PC	UNRESTRICTED	
482 CONGRESS STREET, SUITE 303				
PORTLAND, ME 04101				1,500

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient **Foundation** Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor FOUNDATION FOR A STRONG MAINE ECONOMY PC FOCUSMAINE SUPPORT -128 STATE STREET, SUITE 101 CATALYZING JOBS WHERE AUGUSTA, ME 04330 MAINES ASSETS MEET GLOBAL TRENDS 1,288,194. FOUNDATION FOR A STRONG MAINE ECONOMY PC FOCUSMAINE SUPPORT 128 STATE STREET, SUITE 101 AUGUSTA, ME 04330 10,000. FRIENDS OF QUARRY ROAD PC DUARRY ROAD RECREATION 300 QUARRY ROAD AREA DESIGN & WATERVILLE, ME 04901 PERMITTING COSTS 246,790. GULFSHORE PLAYHOUSE PC UNRESTRICTED 2640 GOLDEN GATE PKWY, SUITE 211 NAPLES, FL 34105 25,000. JOBS FOR MAINE'S GRADUATES INC. c ENDOWMENT AND COLLEGE CAREER SUCCESS 65 STONE STREET 1,081,716. AUGUSTA, ME 04330 INITIATIVE KENNEBEC BEHAVIORAL HEALTH PC OPERATING 67 EUSTIS PARKWAY WATERVILLE, ME 04901 2,000. KENTS HILL SCHOOL ÞС STEAM EXPANSION PO BOX 257 PROJECT KENTS HILL, ME 04349-0257 500,000. MAINE CHILDRENS HOME FOR LITTLE PC SUSTAINABILITY AND WANDERERS STRATEGIC GROWTH 93 SILVER ST PROJECT WATERVILLE, ME 04901-5923 65,000. MAINE COMMUNITY FOUNDATION, INC. PC MAINE WORKING 50 MONUMENT SQUARE, 6TH FLOOR COMMUNITIES CHALLENGE PORTLAND, ME 04101 100,000. MAINE IRISH HERITAGE CENTER UNRESTRICTED PÇ PO BOX 7588 PORTLAND ME 04112 5,000. Total from continuation sheets

30,000.

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to **Amount** status of any foundation manager Name and address (home or business) or substantial contributor recipient MAINE MATHEMATICS AND SCIENCE РC STEM WORKFORCE READY MAINE 2030 ALLIANCE 343 WATER STREET AUGUSTA, ME 04330 328,315. MAINE MEDICAL CENTER PC UNRESTRICTED 22 BRAMHALL ST. 20,000. PORTLAND, ME 04102-3134 MAINE PUBLIC BROADCASTING NETWORK PC UNRESTRICTED 1450 LISBON ST. 20,000. LEWISTON, ME 04240 MAINEGENERAL HEALTH so III COVID 19 STAFF 35 MEDICAL CENTER PARKWAY APPRECIATION AUGUSTA, ME 04330-8160 2,000,000. MAINEHEALTH so III THE DEVELOPMENT OF AN 110 FORE STREET INTEGRATED, PATIENT-CENTERED PORTLAND, ME 04101 ONCOLOGY SERVICE LINE 2,000,000. FOR MAINE UNRESTRICTED MASSACHUSETTS INSTITUTE OF TECHNOLOGY PC 77 MASSACHUSETTS AVE CAMBRIDGE MA 02139 5,000. MERCY HOSPITAL PC UNRESTRICTED 175 FORE RIVER PKWY PORTLAND, ME 04102 10,000. MID COAST HOSPITAL ÞС UNRESTRICTED 329 MAINE ST BRUNSWICK, ME 04011-3310 20,000. РC THE HAROLD ALFOND NORTHEASTERN UNIVERSITY 360 HUNTINGTON AVE SCHOLARS INITIATIVE 4,000,000. BOSTON, MA 02115-5005 PAUL TAYLOR DANCE FOUNDATION ÞС UNRESTRICTED 551 GRAND ST

NEW YORK, NY 10002

Total from continuation sheets

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient ROLLINS COLLEGE PC THE INNOVATION 1000 HOLT AVENUE TRIANGLE WINTER PARK, FL 32789-4499 12,000,000, PC SEEDS OF PEACE INC. WATERVILLE AND WINSLOW 370 LEXINGTON AVENUE, SUITE 201 SEEDS NEW YORK, NY 10017 25,000. SPECTRUM GENERATIONS PC UNRESTRICTED PO BOX 2589 AUGUSTA, ME 04338-2589 1,200. SUSAN L CURTIS FOUNDATION PC CAMP SUSAN CURTIS 1321 WASHINGTON AVE. SUITE 104 YOUTH DEVELOPMENT PORTLAND, ME 04103 PROGRAM 14,700. THE CAHOON MUSEUM OF AMERICAN ART ÞС UNRESTRICTED INC. 4676 FALMOUTH RD COTUIT, MA 02635 20,000. THE CENTER FOR GRIEVING CHILDREN ÞС UNRESTRICTED 555 FOREST AVE PORTLAND, MR 04101-1504 10,000. THE FOUNDATION FOR MAINE COMMUNITY PÇ AN INITIATIVE FOR COLLEGES INNOVATION IN 323 STATE ST WORKFORCE TRAINING AND AUGUSTA, ME 04330-7149 DELIVERY AT MAINE'S COMMUNITY COLLEGES 1,000,000. THE FOUNDATION FOR MAINE COMMUNITY PC THE CENTER FOR THE COLLEGES ADVANCEMENT OF MAINES 323 STATE ST WORKFORCE: BUILDING A AUGUSTA, ME 04330-7149 MORE PROSPEROUS MAINE 3,500,000. THE JACKSON LABORATORY PÇ MAINE CANCER GENOMICS 600 MAIN ST. INITIATIVE 2.0 BAR HARBOR, ME 04609 1,500,000. THE NATURE CONSERVANCY IN MAINE РÇ UNRESTRICTED 14 MAINE STREET, SUITE 401 BRUNSWICK ME 04011 5,000.

Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient **Foundation** Purpose of grant or **Amount** status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor PC UNRESTRICTED THE PIONEER INSTITUTE 185 DEVONSHIRE STREET, SUITE 1101 BOSTON, MA 02110 25,000. PC CGI PARTNERSHIP TO THOMAS COLLEGE MEET THE EDUCATIONAL 180 W. RIVER RD. NEEDS OF THE GREATER WATERVILLE, ME 04901-5066 WATERVILLE BUSINESS COMMUNITY 745,000. PC CATALYZING GROWTH IN THOMAS COLLEGE 180 W. RIVER RD. CENTRAL MAINE AND WATERVILLE, ME 04901-5066 REVOND 2,941,348. UNRESTRICTED PC UNITED WAY OF MID-MAINE, INC. 105 KENNEDY MEMORIAL DRIVE 12,500. WATERVILLE, ME 04901 SUSTAINING THE ALFOND UNIVERSITY OF MAINE FOUNDATION PC FUND" IN SUPPORT OF TWO ALUMNI PLACE MAINE ATHLETICS 500,000. ORONO ME 04469-5792 FERLAND ENGINEERING PC UNIVERSITY OF MAINE FOUNDATION EDUCATION AND DESIGN TWO ALUMNI PLACE CENTER 5,000,000. ORONO, ME 04469-5792 PC UNIVERSITY OF MAINE UNIVERSITY OF MAINE FOUNDATION TWO ALUMNI PLACE ATHLETICS MASTER 2,000,000. FACILITIES PLAN ORONO, ME 04469-5792 UNIVERSITY OF MAINE SYSTEM PC REVITALIZING THE UNIVERSITY OF MAINE 15 ESTABROOKE DRIVE SYSTEM: STUDENT ORONO, ME 04469 SUCCESS AND RETENTION: THE GRADUATE AND 5,000,000. PC THE INSTITUTE FOR UNIVERSITY OF NEW ENGLAND 11 HILLS BEACH RD INTERPROFESSIONAL EDUCATION & PRACTICE BIDDEFORD, ME 04005 AT UNE 500,000. WATERVILLE CREATES! 2019 -2023 OPERATING ÞС SUPPORT 10 WATER ST, SUITE 106 1,000,000. WATERVILLE, ME 04901 Total from continuation sheets

3 Grants and Contributions Paid During the Year	ar (Continuation)			
Recipient	If recipient is an individual,	Equadation	Durage of suret	
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
WATERVILLE CREATES!		PC	WOH SEASON SPONSORSHIP	
10 WATER ST, SUITE 106		FG	NON SEASON SPONSORSHIP	
WATERVILLE, ME 04901				15,000.
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Total from continuation sheets	and the second s		The same and the s	
I DISH TOTAL CONTINUATION STRATE				1

HAROLD ALFOND FOUNDATION 22-3281672 Part XIV Supplementary Information Grants and Contributions Approved for Future Payment (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to **Amount** status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient CENTER FOR CURRICULUM REDESIGN РC COMPLETION & SCALING 10 JAMAICAWAY #18 OF CYBERPANTHERS CS JAMAICA PLAIN, MA 02130 PROGRAM 955,000. CHILDREN'S CENTER EARLY INTERVENTION PC UNRESTRICTED AND FAMILY SUPPORT 1 ALDEN AVE 1,000,000. AUGUSTA, ME 04330-0000 FOUNDATION FOR A STRONG MAINE ECONOMY PC FOCUSMAINE SUPPORT 125 COMMUNITY DRIVE, SUITE 101 AUGUSTA, ME 04330 1,724,902. THE FOUNDATION FOR MAINE COMMUNITY PC THE CENTER FOR THE COLLEGES ADVANCEMENT OF MAINES 323 STATE ST WORKFORCE: BUILDING A AUGUSTA, ME 04330-7149 MORE PROSPEROUS MAINE 12,014,487. MAINE MATHEMATICS AND SCIENCE PC STEM WORKFORCE READY ALLIANCE MAINE 2030 343 WATER STREET AUGUSTA, ME 04330 717,438.

16,411,827.

Total from continuation sheets

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 for the latest information.

OMB No. 1545-0047

2021

Schedule B (Form 990) (2021)

Name of the organization

Employer identification number

	HAROLD ALFOND FOUNDATION	22-3281672					
Organization type (chec	ck 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 found	dation					
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation	n					
	501(c)(3) taxable private foundation						
	· · · · · · · · · · · · · · · · · · ·						
	on is covered by the General Rule or a Special Rule.						
Note: Only a section 50	i1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a	a Special Rule. See instructions.					
General Rule							
=	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contribut any one contributor. Complete Parts I and II. See instructions for determining a						
Special Rules							
sections 509(a) contributor, du	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a uring the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the and EZ, line 1. Complete Parts I and II.	a, or 16b, and that received from any one					
contributor, du literary, or educ	For an organization described in section 501(c)(7), (8), or (10) filling 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.						
year, contributi is checked, ent purpose. Don't	For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this both 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						
answer "No" on Part IV,	on that isn't covered by the General Rule and/or the Special Rules doesn't file So, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Folian requirements of Schedule B (Form 990).						

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

Employer identification number

HAROLD ALFOND FOUNDATION

22-3281672

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PETER G ALFOND ESTATE DAY PITNEY, 1201 GEORGE BUSH BLVD DELRAY BEACH, FL 33483	\$ <u>118,791,295</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	PETER G ALFOND ESTATE DAY PITNEY, 1201 GEORGE BUSH BLVD DELRAY BEACH, FL 33483	\$ 5,266,957.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	PETER G ALFOND ESTATE DAY PITNEY, 1201 GEORGE BUSH BLVD DELRAY BEACH, FL 33483	\$ 35,535,210.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	PETER G ALFOND ESTATE DAY PITNEY, 1201 GEORGE BUSH BLVD DELRAY BEACH, FL 33483	\$ 251,726.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	PETER G ALFOND ESTATE DAY PITNEY, 1201 GEORGE BUSH BLVD DELRAY BEACH, FL 33483	\$\$39,991.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

HAROLD ALFOND FOUNDATION

22-3281672

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						
2	VARIOUS PUBLICLY TRADED SECURITIES	s5,266,957.	_01/05/21_						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received						
3	DEXTER HEDGE FUND TE, LLC	\$ <u>35,535,210</u> .	01/01/21						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received						
4	OLYMPIA EQUITY INVESTORS X, LLC	\$\$	12/20/21						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received						
5	FAIRHOLME PARTNERSHIP	\$439,991.	01/01/21						
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received						
		\$							
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received						
150450 41.14		\$	Schoolule R /Form 000\ /2024\						

Employer identification number

110 01 01	ga iizatori		Employer definitional full file					
ROLE	ALFOND FOUNDATION		22-3281672					
rt III		through (e) and the following line entry. For naritable, etc., contributions of \$1,000 or less for	501(c)(7), (8), or (10) that total more than \$1,000 for the ye					
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
_								
-		(e) Transfer of gift						
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee					
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
_	:01							
-	(e) Transfer of gift							
	Transferee's name, address, an	Relationship of transferor to transferee						
	20							
No. om rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-								
Ì	FT at	(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee					
No.	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held					
rt i		t						
			-					
		(e) Transfer of gift						

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Department of the Treasury Internal Revenue Service

Underpayment of Estimated Tax by Corporations

FORM 990-PF Attach to the corporation's tax return.

OMB No. 1545-0123 2021

Name

► Go to www.irs.gov/Form2220 for instructions and the latest information. **Employer identification number**

HAROLD ALFOND FOUNDATION 22-3281672 Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and

bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220. Dart I | Required Annual Payment

P	art i Required Annual Payment							
1	Total tax (see instructions)						1	1,192,381.
2 a	Personal holding company tax (Schedule PH (Form 1120), line	26) ii	ncluded on line 1	2a				
b	Look-back interest included on line 1 under section 460(b)(2)	for co	mpleted long-term	20200200		12		
	contracts or section 167(g) for depreciation under the income	foreca	st method	2b			112	
C	Credit for federal tax paid on fuels (see instructions)			2c				
d	I Total. Add lines 2a through 2c						2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do	not co	mplete or file this form.	The corporation				
	does not owe the penalty						3	1,192,381.
4	Enter the tax shown on the corporation's 2020 income tax retu							
	or the tax year was for less than 12 months, skip this line and	enter t	he amount from line 3 o	n line 5			4	432,266.
5	Required annual payment. Enter the smaller of line 3 or line	4. If th	e corporation is required	d to skip line 4,				
	enter the amount from line 3		****************************				5	432,266.
P	Part II Reasons for Filing - Check the boxes below	w that	apply. If any boxes are o	hecked, the corp	oration	must file Form 222	20	
	even if it does not owe a penalty. See instructions.							
6	The corporation is using the adjusted seasonal installm	nent m	ethod.					
7	X The corporation is using the annualized income installed	ment r	nethod.					
8	X The corporation is a "large corporation" figuring its firs	t requi	ired installment based or	n the prior year's	tax.			
P	Part III Figuring the Underpayment							
			(a)	(b)		(c)		(d)
9	Installment due dates. Enter in columns (a) through (d) the							
	15th day of the 4th (Form 990-PF filers: Use 5th month),							
	6th, 9th, and 12th months of the corporation's tax year	9	05/15/21	06/15/	21	09/15/2	21	12/15/21
10	Required installments. If the box on line 6 and/or line 7		J					
	above is checked, enter the amounts from Sch A, line 38. If	- 1						
	the box on line 8 (but not 6 or 7) is checked, see instructions							1
	for the amounts to enter. If none of these boxes are checked,				l			
	enter 25% (0.25) of line 5 above in each column	10	90,059.	96,4	54.	214,03	12.	228,626.
	Estimated tax paid or credited for each period. For	П						
	column (a) only, enter the amount from line 11 on line 15.							
	See instructions	11	189,313.		-	225,00	0.	220,000.
	Complete lines 12 through 18 of one column	- 9						
	before going to the next column.							
12	Enter amount, if any, from line 18 of the preceding column	12		99,2	54.	2,80	0.	13,768.
13	Add lines 11 and 12	13	4 300	99,2	54.	227,80	0.	233,768.
		14						
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	189,313.	99,2	54.	227,80	0.	233,768.
	If the amount on line 15 is zero, subtract line 13 from line	i i	No.					EXYMPTO IN A STATE OF
	-	16			0.		0.	
	Underpayment. If line 15 is less than or equal to line 10,							
	subtract line 15 from line 10. Then go to line 12 of the next							
		17						
	Overpayment. If line 10 is less than line 15, subtract line 10							
	from line 15. Then go to line 12 of the next column	18	99,254.	2,8	00.	13,76	8.	
	to Part IV on page 2 to figure the penalty. Do not go to Part IV	if the						

LHA For Paperwork Reduction Act Notice, see separate instructions. Form 2220 (2021)

Form 2220 (2021)

Part IV Figuring the Penalty

	<u> </u>	(a)	(b)	(c)	(d)
9 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19	-	-		
Number of days from due date of installment on line 9 to the					9
date shown on line 19	20		-		
1 Number of days on line 20 after 4/15/2021 and before 7/1/2021	21	÷,			
2 Underpayment on line 17 x Number of days on line 21 x 3% (0.03)	22 \$		\$	\$	\$
3 Number of days on line 20 after 6/30/2021 and before 10/1/2021	23			18	
4 Underpayment on line 17 x Number of days on line 23 x 3% (0.03)	24 \$		\$	\$	\$
5 Number of days on line 20 after 9/30/2021 and before 1/1/2022	25				
6 Underpayment on line 17 x Number of days on line 25 x 3% (0.03) 385	26 \$		\$	\$	\$
7 Number of days on line 20 after 12/31/2021 and before 4/1/2022	27	li .			
8 Underpayment on line 17 x Number of days on line 27 x 3% (0.03)	28 \$		\$	\$	\$
9 Number of days on line 20 after 3/31/2022 and before 7/1/2022	29				
Underpayment on line 17 x Number of days on line 29 x % 365	30 \$	<u>.</u>	\$	\$	\$
1 Number of days on line 20 after 6/30/2022 and before 10/1/2022	31				
2 Underpayment on line 17 x Number of days on line 31 x % 385	32 \$		\$	\$	\$
3 Number of days on line 20 after 9/30/2022 and before 1/1/2023	33				
4 Underpayment on line 17 x Number of days on line 33 x % 365	34 \$		\$	\$	\$
5 Number of days on line 20 after 12/31/2022 and before 3/15/2023	35				=
6 Underpayment on line 17 x Number of days on line 35 x %	36 \$		\$	\$	\$
7 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37 \$		\$	\$	\$
8 Penalty. Add columns (a) through (d) of line 37. Enter the to	ntal here	and on Form 1120 lis	se 34° or the comparable		
line for other income tax returns	, san 1101 G	www.vii.i.viiii i.iev _i iii	, or any comparable	38	 s (

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internat Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form 2220 (2021)

Form 2220 (2021)

Page 3

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method

See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

See instructions.				•	1
		(a)	(b)	(c)	(d)
1 Enter taxable income for the following periods.		First 3 months	First 5 months	First 8 months	First 11 months
a Tax year beginning in 2018	1a				
b Tax year beginning in 2019	1b				
					20
c Tax year beginning in 2020	1c				
2 Enter taxable income for each period for the tax year beginning in					
2021. See the instructions for the treatment of extraordinary items	2				
		First 4 months	First 6 months	First 9 months	Entire year
3 Enter taxable income for the following periods.	l L	FIISL 4 IIIUIIUIS	First 6 illulitus	First a mondis	Entire year
a Tax year beginning in 2018	3a				
b Tax year beginning in 2019	3b	. <u>-</u>			
c Tax year beginning in 2020	3c				
4 Divide the amount in each column on line 1a by the					
amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the			İ		
amount in column (d) on line 3b	5				
6 Divide the amount in each column on line 1c by the					
amount in column (d) on line 3c	6				
7 Add lines 4 through 6	7				ļ
8 Divide line 7 by 3.0	8				
9a Divide line 2 by line 8	9a				
b Extraordinary Items (see instructions)	96				
c Add lines 9a and 9b	9c				
10 Figure the tax on the amt on In 9c using the instr for Form					
1120, Sch J, line 2, or comparable line of corp's return	10				
11a Divide the amount in columns (a) through (c) on line 3a					
by the amount in column (d) on line 3a	11a				
b Divide the amount in columns (a) through (c) on line 3b					
by the amount in column (d) on line 3b	11b				
c Divide the amount in columns (a) through (c) on line 3c					
by the amount in column (d) on line 3c	110				
12 Add lines 11a through 11c	12				
13 Divide line 12 by 3.0	13				
14 Multiply the amount in columns (a) through (c) of line 10					
by columns (a) through (c) of line 13. In column (d), enter					
the amount from line 10, column (d)	14				
15 Enter any alternative minimum tax (trusts only) for each					
payment period. See instructions	15				
16 Enter any other taxes for each payment period. See instr.	16				
17 Add lines 14 through 16	17				
18 For each period, enter the same type of credits as allowed					
on Form 2220, lines 1 and 2c. See instructions	18				177
19 Total tax after credits. Subtract line 18 from line 17. If				iù	
zero or less, enter -0-	19				

Form 2220 (2021)

Part II Annualized Income Installment Method

			(a)	(b)	(c)	(d)
			First 2	First 3	First <u>6</u>	First 9
	Annualization periods (see instructions)	20	months	months	months	months
1	Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items	21	4,319,385.	6,709,078.	19,210,789.	33,948,150
2	Annualization amounts (see instructions)	22	6.000000	4.000000	2.000000	1.33333
3:	Annualized taxable income. Multiply line 21 by line 22	23a	25,916,310.	26,836,312.	38,421,578.	45,264,087
	Extraordinary items (see instructions)	23b				
•	Add lines 23a and 23b	23c	25,916,310.	26,836,312.	38,421,578.	45,264,087
4	Figure the tax on the amount on line 23c using the					A
	instructions for Form 1120, Schedule J, line 2,					
	or comparable line of corporation's return	24	360,237.	373,025.	534,060.	629,171
5	Enter any alternative minimum tax (trusts only) for each]		
	payment period (see instructions)	25				
6	Enter any other taxes for each payment period. See instr.	26				
7	Total tax. Add lines 24 through 26	27	360,237.	373,025.	534,060.	629,171
	For each period, enter the same type of credits as allowed	<u> </u>			,	
	on Form 2220, lines 1 and 2c. See instructions	28		44		
9	Total tax after credits. Subtract line 28 from line 27. If					
	zero or less, enter -0-	29	360,237.	373,025.	534,060.	629,171
0	Applicable percentage	30	25%	50%	75%	100%
31	Multiply line 29 by line 30	31	90,059.	186,513.	400,545.	629,171
Pí	art III Required Installments		lit			
	Note: Complete lines 32 through 38 of one column		1st	2nd	3rd	4th
_	before completing the next column.		installment	installment	installment	installment
2	If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are				A.	
	each column from line 19 or line 31. If both barts are	ı				
	•					
	completed, enter the smaller of the amounts in each	22	90 059	186 513	400 545	629 171
3	completed, enter the smaller of the amounts in each column from line 19 or line 31	32	90,059.	186,513.	400,545.	629,171
3	completed, enter the smaller of the amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38.	32	90,059.			1.0
	completed, enter the smaller of the amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38. See instructions Adjusted seasonal or annualized income installments.			90,059.	186,513.	400,545
4	completed, enter the smaller of the amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38. See instructions Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0-		90,059.			400,545
4	completed, enter the smaller of the amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38. See instructions Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% (0.25) of line 5 on page 1 of Form 2220 in	33		90,059.	186,513.	400,545
4	completed, enter the smaller of the amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38. See instructions Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the	33	90,059.	90,059. 96,454.	186,513. 214,032.	400,545 228,626
4	completed, enter the smaller of the amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38. See instructions Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter	33		90,059.	186,513.	400,545 228,626
4	completed, enter the smaller of the amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38. See instructions Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter Subtract line 38 of the preceding column from line 37 of	34	90,059.	90,059. 96,454. 488,124.	186,513. 214,032. 298,095.	400,545 228,626 298,096
15	completed, enter the smaller of the amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38. See instructions Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter Subtract line 38 of the preceding column from line 37 of the preceding column	33 34 35 36	90,059.	90,059. 96,454. 488,124. 18,008.	186,513. 214,032. 298,095. 409,678.	400,545 228,626 298,096 493,741
34 35 36	completed, enter the smaller of the amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38. See instructions Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter Subtract line 38 of the preceding column from line 37 of the preceding column Add lines 35 and 36	34	90,059.	90,059. 96,454. 488,124.	186,513. 214,032. 298,095.	400,545 228,626 298,096 493,741
34 35 36	completed, enter the smaller of the amounts in each column from line 19 or line 31 Add the amounts in all preceding columns of line 38. See instructions Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0- Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter Subtract line 38 of the preceding column from line 37 of the preceding column	33 34 35 36	90,059.	90,059. 96,454. 488,124. 18,008.	186,513. 214,032. 298,095. 409,678.	400,545 228,626 298,096 493,741

Form 2220 (2021)

** ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION

FORM 990-PF INTER	EST ON SAVI	INCC AND M	EMDOD 3 DV	CACU TI	NUE COMENOC	STATEMENT 1
FORM 990-PF INTER	EST ON SAVI	INGS AND T	EMPURARI	CASH II	NAFSIMENIS	STATEMENT I
SOURCE		RE'	(A) VENUE BOOKS		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME
TAXABLE INTEREST I	NCOME	1,	876,339.	1	,876,339.	
TOTAL TO PART I, L	INE 3	1,	876,339.	1	,876,339.	
FORM 990-PF	DIVIDENI	OS AND INT	EREST FRO	OM SECU	RITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S RI	(A) EVENUE R BOOKS	(B) NET INVEST MENT INCOM	
TAXABLE DIVIDEND INCOME	16,635,182	2.	0. 16,6	35,182	. 16,449,276	•
TO PART I, LINE 4	16,635,182	2.	0. 16,6	35,182	. 16,449,276	•
FORM 990-PF		OTHER	INCOME			STATEMENT 3
DESCRIPTION			(A) REVENU PER BOO		(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ROYALTY INCOME FROM ORDINARY INCOME FROM TAX-EXEMPT INCOME	OM PASS-THE PASS-THRU K	RU K-1S K-1S	3,134	1,532. 1,808. 0,785.	551,342. 356,269. 5,133,605.	
K-1S		_		3,191.	0.	W
TOTAL TO FORM 990-	PF, PART I,	LINE 11	9,430	316.	6,041,216.	
			6			
FORM 990-PF		LEG	AL FEES			STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOK	NET IN	3) IVEST- INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	_	8,48	2.	3,393.	<u> </u>	5,089.
TO FM 990-PF, PG 1	, LN 16A	8,48	2.	3,393.	2	5,089.
	=					

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
TAX PREPARATION	36,300.	14,520.		21,780.	
TO FORM 990-PF, PG 1, LN 16B	36,300.	14,520.		21,780.	
		3 1			
FORM 990-PF C	THER PROFES	SIONAL FEES	S	TATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
DEXTER ENTERPRISES, INC. INVESTMENT CONSULTING FEES GRANT CONSULTING SERVICES INVESTMENT MANAGEMENT FEES	1,415,738. 362,425. 33,831. 96,021.	362,425. 0.		849,443. 0. 33,831. 0.	
TO FORM 990-PF, PG 1, LN 16C	1,908,015.	1,024,741.		883,274.	
FORM 990-PF	TAX	FC	C	TATEMENT 7	
FORM 950-FF	IAA	EG		TATEMENT /	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAXES	759,289.	759,289.		0.	
NET INVESTMENT INCOME TAXES NET STATE UBIT TAXES	737,550. 154,483.			0.	
TO FORM 990-PF, PG 1, LN 18	1,651,322.	759,289.		0.	

FORM 990-PF	OTHER E	XPENSES	S	STATEMENT 8		
DESCRIPTION	(A) EXPENSES PER BOOKS			(D) CHARITABLE PURPOSES		
INVESTMENT INTEREST PASS THRU FROM K-1S NON DEDUCTIBLE EXPENSE PASS	780,226.	661,282.		0.		
THRU FROM K-1S	208,159.	0.		0.		
THRU FROM K-1S RENTAL LOSS FROM PASS-THRU	5,357.	0.		5,357.		
K-1S ROYALTY DEDUCTIONS FROM	199,537.	199,537.		0.		
PASS-THRU K-1S INSURANCE BANK CHARGES	142,685. 10,377. 104.	142,685. 4,151. 42.		0. 6,226. 62.		
OTHER DEDUCTIONS PASS-THRU FROM K-1S	12,936,091.	10,857,781.		0.		
TO FORM 990-PF, PG 1, LN 23	14,282,536.	11,865,478.		11,645.		

FORM 990-PF OTHER DECREASES IN NET ASSETS OR FUND BALANCES	STATEMENT 9
DESCRIPTION	AMOUNT
COST TO FMV ADJUSTMENT FOR CONTRIBUTIONS	9,783,529.
TOTAL TO FORM 990-PF, PART III, LINE 5	9,783,529.

FORM 990-PF	CORPORATE STO	CK	STATEMENT 10
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
BERKSHIRE HATHAWAY CL B		19,629,669.	65,179,010.
BERKSHIRE HATHAWAY CL A		91,849,453.	306,450,160
DEXTER GLOBAL EQUITY TE, LLC		95,405,715.	126,872,154
DEXTER INTERNATIONAL EQUITY TE, 1	LLC	147,074,161.	153,040,957
DEXTER US EQUITY TE, LLC		142,516,518.	229,962,657
FIRST HORIZON NATIONAL CO.		184.	0
BRKA/B STOCK SET ASIDE FOR ALFON	D LEADERS		
PROGRAM (FAME)		2,320,729.	7,742,582
PUBLICLY TRADED SECURITIES (PRIVA	ATE CAP)	3,581,055.	5,597,463
ST. JOE CO		524,014.	1,580,238
TOTAL TO FORM 990-PF, PART II, L	INE 10B	502,901,498.	896,425,221
		=	
FORM 990-PF	CORPORATE BONI	os	STATEMENT 11
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
DEXTER FIXED INCOME TE, LLC		34,532,175.	35,079,441
TOTAL TO FORM 990-PF, PART II, L	INE 10C	34,532,175.	35,079,441

FORM 990-PF	OTHE	R INVESTMENTS		STATEMENT 12
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
BLACKSTONE REAL ESTATE PARTNEI	RS V	COST		
AND VI, LP			1,053,472.	132,332
LEGACY VENTURE FUNDS		COST	1,723,382.	3,472,426
TISHMAN SPEYER INVESTMENTS:		COST		
INTERNATIONAL REAL ESTATE VENS	TURE		675,385.	61,295
TISHMAN SPEYER INVESTMENTS: II	NDIA	COST		
REAL ESTATE VENTURE			891,144.	255,817
TISHMAN SPEYER INVESTMENTS: 20	01	COST	8	
FOLSOM INVESTOR FEEDER, LP			26,200.	21,757
DEXTER HEDGE FUNDS TE, LLC		COST	125,473,275.	202,225,289
DEXTER PRIVATE EQUITY TE, LLC		COST	151,807,430.	272,025,558
DEXTER REAL ASSETS TE, LLC		COST	92,917,932.	125,836,786
COASTAL MAINE BOTANICAL GARDEN	NS PRI	COST		
RECEIVABLE			7,500,000.	7,500,000
AMERICAN INFRASTRUCTURE MLP		COST	584,438.	173,663
ENTREPRENEURIAL VALUE FUND		COST	29,609,099.	38,866,747
OLYMPIA X		COST	76,337.	251,529
OZ ADVISORS		COST	0.	5,741
PRECISION CAPITAL		COST	0.	323,885
		,		
	, LINE	13	412,338,094.	651,152,825
TOTAL TO FORM 990-PF, PART II FORM 990-PF		13 THER ASSETS	412,338,094.	
TOTAL TO FORM 990-PF, PART II	O¹	:	412,338,094. END OF YEAR BOOK VALUE	651,152,825
TOTAL TO FORM 990-PF, PART II FORM 990-PF	O¹	THER ASSETS BEGINNING OF	END OF YEAR	651,152,825 STATEMENT 13
TOTAL TO FORM 990-PF, PART II FORM 990-PF DESCRIPTION	O'	THER ASSETS BEGINNING OF R BOOK VALUE	END OF YEAR BOOK VALUE	STATEMENT 13 FAIR MARKET VALUE
TOTAL TO FORM 990-PF, PART II FORM 990-PF DESCRIPTION SPORTS MEMORABILIA COLLECTION	0° 	THER ASSETS BEGINNING OF R BOOK VALUE 5,000.	END OF YEAR BOOK VALUE 5,000.	STATEMENT 13 FAIR MARKET VALUE 5,000
TOTAL TO FORM 990-PF, PART II FORM 990-PF DESCRIPTION SPORTS MEMORABILIA COLLECTION TO FORM 990-PF, PART II, LINE	0° 	THER ASSETS BEGINNING OF R BOOK VALUE 5,000.	END OF YEAR BOOK VALUE 5,000.	STATEMENT 13 FAIR MARKET VALUE 5,000 5,000
TOTAL TO FORM 990-PF, PART II FORM 990-PF DESCRIPTION SPORTS MEMORABILIA COLLECTION TO FORM 990-PF, PART II, LINE	0° 	THER ASSETS BEGINNING OF R BOOK VALUE 5,000.	END OF YEAR BOOK VALUE 5,000.	STATEMENT 13 FAIR MARKET VALUE 5,000
TOTAL TO FORM 990-PF, PART II FORM 990-PF DESCRIPTION SPORTS MEMORABILIA COLLECTION TO FORM 990-PF, PART II, LINE FORM 990-PF	OTHE	THER ASSETS BEGINNING OF R BOOK VALUE 5,000.	END OF YEAR BOOK VALUE 5,000.	STATEMENT 13 FAIR MARKET VALUE 5,000 5,000 STATEMENT 14

FORM 990-PF PART VII - LIST TRUSTEES AND	OF OFFICERS, DI FOUNDATION MANA		STAT	EMENT 15
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
THEODORE B. ALFOND	TRUSTEE		- 4	
C/O DEXTER ENT., TWO MONUMENT SQUARE PORTLAND, ME 04101	2.00	0.	0.	0.
WILLIAM L. ALFOND C/O DEXTER ENT., TWO MONUMENT	TRUSTEE			
SQUARE PORTLAND, ME 04101	1.00	0.	0.	0.
GREGORY W. POWELL - SEE STATEMENT 18	TRUSTEE			
C/O DEXTER ENT., TWO MONUMENT SQUARE PORTLAND, ME 04101	27.00	0.	0.	0.
PETER H. LUNDER	TRUSTEE			
C/O DEXTER ENT., TWO MONUMENT SQUARE PORTLAND, ME 04101	1.00	0.	0.	0.
STEVEN P. AKIN C/O DEXTER ENT., TWO MONUMENT	TRUSTEE			
SQUARE PORTLAND, ME 04101	8.00	0.	0.	0.
THERESA M. STONE C/O DEXTER ENT., TWO MONUMENT	TRUSTEE			
SQUARE PORTLAND, ME 04101	7.00	0.	0.	0.
DAVID T. FLANAGAN C/O DEXTER ENT., TWO MONUMENT	TRUSTEE			60
SQUARE PORTLAND, ME 04101	3.00	0.	0.	0.
BARRY MILLS C/O DEXTER ENT., TWO MONUMENT	TRUSTEE			
SQUARE PORTLAND, ME 04101	7.00	0.	0.	0.

HAROLD ALFOND FOUNDATION			22	2-3281672
KATHARINE ALFOND	TRUSTEE			
C/O DEXTER ENT., TWO MONUMENT SQUARE PORTLAND, ME 04101	7.00	0.	0.	0.
JUSTIN ALFOND	TRUSTEE			
C/O DEXTER ENT., TWO MONUMENT SQUARE	7.00	0.	0.	0.
PORTLAND, ME 04101	7.00			
MICHAEL E. DUBYAK C/O DEXTER ENT., TWO MONUMENT	TRUSTEE			
SQUARE PORTLAND, ME 04101	7.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VII	0.	0.	0.

FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT PART VI-B, LINE 5D

STATEMENT 16

GRANTEE'S NAME

WATERVILLE DEVELOPMENT CORPORATION

GRANTEE'S ADDRESS

ONE COMMON STREET WATERVILLE, ME 04901

GRANT AMOUNT	DATE OF GRANT	AMOUNT EXPENDED	VERIFICATION DATE
1,000,000.	06/30/16	1,000,000.	06/30/22

PURPOSE OF GRANT

FOR WATERVILLE DEVELOPMENT CORPORATION TO SUPPORT BUSINESS EXPANSION AND JOB GROWTH IN WATERVILLE, SPECIFICALLY THROUGH CGI'S EXPANSION TO THE CITY.

DATES OF REPORTS BY GRANTEE

8/15/2017; 7/10/2018; 9/25/2019; 4/24/2020; 6/8/2021; 6/30/2022

ANY DIVERSION BY GRANTEE

TO THE BEST OF THE GRANTOR'S KNOWLEDGE, THERE WERE NO DIVERTED FUNDS.

RESULTS OF VERIFICATION

THE GRANTOR VERIFIED WATERVILLE DEVELOPMENT CORPORATION SUPPORTED THE EXPANSION OF CGI TO WATERVILLE BY PROVIDING GRANT FUNDS IN SUPPORT OF CGI'S EXPENDITURES REQUIRED TO DEVELOP NEW TECHNOLOGIES AND PRODUCTS IN THE FINANCIAL SERVICES AND OTHER INDUSTRIES. THE GRANTOR OBTAINED REPRESENTATIONS FROM THE GRANTEE IN THE GRANTEE'S ANNUAL EXPENDITURE RESPONSIBILITY REPORT THAT THE GRANTEE HAS EXPENDED \$1,000,000 OF GRANT FUNDS TO CGI AND THAT CGI, IN TURN, HAS EXPENDED \$923,737.95 OF GRANT FUNDS IN COMPLIANCE WITH THE TERMS OF THE GRANT AGREEMENT. THE GRANTOR HAS VALID REASONS TO BELIEVE THE \$76,262.05 OF FUNDS YET TO BE EXPENDED BY CGI WILL BE EXPENDED IN COMPLIANCE WITH THE TERMS OF THE GRANT AGREEMENT. THE GRANTOR HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE.

GRANTEE'S NAME

MAINE SPORTS COMMISSION

GRANTEE'S ADDRESS

44 LAKESIDE DRIVE FALMOUTH, ME 04105

GRANT AMOUNT DATE OF GRANT AMOUNT EXPENDED

VERIFICATION DATE

5,000.

02/23/18

4,415.

04/24/19

PURPOSE OF GRANT

TO SUPPORT THE 2018/2019 SHE RULES SYMPOSIUM AND FUTURE EVENTS IN CELEBRATION OF NATIONAL GIRLS & WOMEN IN SPORTS DAY.

DATES OF REPORTS BY GRANTEE

AUGUST 16, 2017; OCTOBER 16, 2018; AUGUST 15, 2019

ANY DIVERSION BY GRANTEE

TO THE BEST OF THE GRANTOR'S KNOWLEDGE, THERE WERE NO DIVERTED FUNDS.

RESULTS OF VERIFICATION

THE GRANTOR VERIFIED MAINE SPORTS COMMISSION SUPPORTED THE 2018 AND 2019 SHERULES SYMPOSIUM BY PROVIDING GRANT FUNDS FOR PURCHASING SUPPLIES AND MARKETING MATERIAL FOR THE EVENT. THE GRANTOR OBTAINED REPRESENTATIONS FROM THE GRANTEE IN THE GRANTEE'S ANNUAL EXPENDITURE RESPONSIBILITY REPORT THAT THE GRANTEE HAS EXPENDED \$4,415.29 OF GRANT FUNDS IN COMPLIANCE WITH THE TERMS OF THE GRANT AGREEMENT THROUGH AUGUST 2019. IN OCTOBER 2022, THE GRANTOR VERIFIED THAT NO ADDITIONAL FUNDS HAVE YET BEEN EXPENDED. THE GRANTOR HAS VALID REASONS TO BELIEVE THE \$584.71 OF FUNDS YET TO BE EXPENDED BY MAINE SPORTS COMMISSION WILL BE EXPENDED IN COMPLIANCE WITH THE TERMS OF THE GRANT AGREEMENT. THE GRANTOR HAS NO REASON TO DOUBT THE ACCURACY OR RELIABILITY OF THE REPORT FROM THE GRANTEE.

GENERAL EXPLANATION

STATEMENT 17

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

FORM 990-PF, PART VIII - FOUNDATION TRUSTEE POWELL ADDITIONAL INFORMATION EXPLANATION:

GREGORY POWELL IS AN EMPLOYEE OF DEXTER ENTERPRISES, LLC. DEXTER ENTERPRISES, LLC IS COMPENSATED UNDER A MANAGEMENT CONTRACT WITH THE FOUNDATION. SEE STATEMENT 6 FOR DEXTER ENTERPRISES, LLC INFORMATION.

GENERAL EXPLANATION

STATEMENT 18

FORM/LINE IDENTIFIER AND DESCRIPTION/RETURN REFERENCE

990-PF, PART I, LINE 6A, COLUMN A - DISTRIBUTION OF PROPERTY FOR CHARITY EXPLANATION:

UNDER REGULATION 53.4940-1, A DISTRIBUTION OF PROPERTY FOR CHARITABLE PURPOSES UNDER SECTION 170(C)(1) OR (2)(B) MADE BY A FOUNDATION TO A CHARITABLE ORGANIZATION IS NOT TREATED AS A TAXABLE SALE OR DISPOSITION. THE CAPITAL GAIN RECORDED ON THE BOOKS IS NOT TAXABLE; THEREFORE, THE PROPERTY DISTRIBUTION IS EXCLUDED FROM NET INVESTMENT INCOME, LINE 7, COLUMN (B).