Form 990-PF

Return of Private Foundation

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

For	calen	ndar year 2023 or tax year beginning	, 2023, and	ending , 20
Nan	ne of fou	indation	1000	A Employer identification number
NO	RMAN	N & GALE R HOCHGRAF CHARITABLE FOUND	ATION	26-6053240
Nun	nber and	street (or P.O. box number if mail is not delivered to street address)	Room/suite	B Telephone number (see instructions)
PO	ВОХ	189		2076773434
		s, state or province, country, and ZIP or foreign postal code		C If exemption application is pending, check here .
		L ME 04539		C if exemption application is pending, check here.
			of a former public abority	
G	Criece	the control of the co	of a former public charity	D 1. Foreign organizations, check here
				2. Foreign organizations meeting the 85% test, check here and attach computation
-	01 1	Address change Name char	0	
Н		k type of organization: X Section 501(c)(3) exempt priv		E If private foundation status was terminated under section 507(b)(1)(A), check here
		on 4947(a)(1) nonexempt charitable trust Other taxal		Section 307 (b)(1)(A), check here
ı		narket value of all assets at J Accounting method	: Cash X Accrual	F If the foundation is in a 60-month termination
		of year (from Part II, col. (c),		under section 507(b)(1)(B), check here
200	line 16	= 7 2 3 7 2 3 3	st be on cash basis.)	
P	art I		(a) Revenue and	et investment (c) Adjusted net (d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal		income income purposes
		the amounts in column (a) (see instructions).)	DOORS	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	2,742.	
	2	Check X if the foundation is not required to attach Sch. B	ARTIN	
	3	Interest on savings and temporary cash investments	8.	8.
	4	Dividends and interest from securities	27,601.	27,601.
	5a	Gross rents		
	b	Net rental income or (loss)	7 () /	
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10		
ű	b	Gross sales price for all assets on line 6a		
Revenue	7	Capital gain net income (from Part IV, line 2)		53,535.
	8	Net short-term capital gain		0.
	9	Income modifications	199	
	10a	Gross sales less returns and allowances		
	b	Less: Cost of goods sold	407	
	С	Gross profit or (loss) (attach schedule)		
	11	Other income (attach schedule)		
	12	Total. Add lines 1 through 11	30,351.	81,144. 0.
	13	Compensation of officers, directors, trustees, etc.	30,331.	0.1/1.1.1
penses	14	Other employee salaries and wages		
ŝ	15	Pension plans, employee benefits		
	16a	Legal fees (attach schedule)		
ш	b	Accounting fees (attach schedule) L-1.6b. Stmt	1,625.	1,625.
Ve	c	Other professional fees (attach schedule) L-16c Stmt	15,126.	15,126.
ati	17	Interest	13/120.	10,120.
str	18	Taxes (attach schedule) (see instructions)		
.⊑	19	Depreciation (attach schedule) and depletion		
E E	20	Occupancy		
Ă	21	Travel, conferences, and meetings		
nd	22	Printing and publications		
g	23	Other expenses (attach schedule)		
ij	24	Total operating and administrative expenses.		
rai		Add lines 13 through 23	16,751.	16,751.
Operating and Administrative Ex	25	Contributions, gifts, grants paid	90,000.	90,000.
0	26	Total expenses and disbursements. Add lines 24 and 25	106,751.	16,751. 90,000.
_	27	Subtract line 26 from line 12:	100,701.	30,000.
	a	Excess of revenue over expenses and disbursements	76 400	
	b	Net investment income (if negative, enter -0-)	-76,400.	64 303
		Adjusted net income (if negative, enter -0-)		64,393.

Pa	art II Balance Sheets Attached schedules and amounts in the description colur		Beginning of year		End of year				
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value				
	1	Cash—non-interest-bearing			9,424.				
	2	Savings and temporary cash investments	279,364.	185,019.	185,019.				
	3	Accounts receivable							
		Less: allowance for doubtful accounts							
	4	Pledges receivable							
		Less: allowance for doubtful accounts							
	5	Grants receivable							
	6	Receivables due from officers, directors, trustees, and other							
		disqualified persons (attach schedule) (see instructions)							
	7	Other notes and loans receivable (attach schedule)							
		Less: allowance for doubtful accounts							
ts	8	Inventories for sale or use							
Assets	9	Prepaid expenses and deferred charges							
As	10a	Investments – U.S. and state government obligations (attach schedule)							
	b	Investments—corporate stock (attach schedule)	1 310 971	1,742,465.	1,742,465.				
	c	Investments—corporate bonds (attach schedule)	1,010,011.	1, 142,405.	1/12/100.				
	11	Investments—land, buildings, and equipment: basis							
		Less: accumulated depreciation (attach schedule)	A						
	12	Investments—mortgage loans	- TA						
	13	Investments—other (attach schedule)							
	14	and the second s							
	1.7	Land, buildings, and equipment: basis Less: accumulated depreciation (attach schedule)	STATE OF THE PARTY						
	15	Other assets (describe							
	16	Total assets (to be completed by all filers—see the							
		instructions. Also, see page 1, item I)	1 590 335	1 936 908	1,936,908.				
_	17	Accounts payable and accrued expenses	1,330,333.	1, 550, 500.	1,950,900.				
	18	Grants payable	4,055.						
es	19	Deferred revenue	4,033.						
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons							
abi	21	Mortgages and other notes payable (attach schedule)							
Ë	22	Other liebilities (describe							
	23		4 055						
	23	Total liabilities (add lines 17 through 22)	4,055.						
alances		complete lines 24, 25, 29, and 30							
au	24	Net assets without donor restrictions							
	25								
d E	25	Net assets with donor restrictions							
Ĕ		here and complete lines 26 through 30							
Ē	26		1 506 000	1 026 000					
ō	26 27	Capital stock, trust principal, or current funds	1,586,280.	1,936,908.					
ets	28	Retained earnings, accumulated income, endowment, or other funds							
SS	29	Total net assets or fund balances (see instructions)	1,586,280.	1,936,908.					
tΑ	30	Total liabilities and net assets/fund balances (see	1,300,200.	1,930,900.					
Net Assets or Fund	00	instructions)	1 500 225	1 026 000					
	rt III	Analysis of Changes in Net Assets or Fund Balances	1,590,335.	1,936,908.					
		Il net assets or fund balances at beginning of year—Part II, colu	mn (a), line 29 (must	agree with					
1.53		of-year figure reported on prior year's return)			1,586,280.				
2		er amount from Part I, line 27a			-76,400.				
3	Othe	er increases not included in line 2 (itemize) INCREASE IN VAL	UE OF INVESTME	NTS 3	427,028.				
4	Add	lines 1, 2, and 3	OL OL INVESTIBLE	4	1,936,908.				
_	_	and the state of t		_	1,000,000.				
6	Tota	reases not included in line 2 (itemize) il net assets or fund balances at end of year (line 4 minus line 5)—	Part II. column (b) lin	e 29 6	1,936,908.				
		otating assets of fund palatices at end of year (line 4 fillings line 3)—Part II, column (b), line 29 0 1,930,908.							

Part	V Capital Gains and	Losses for Tax on Investn			
	(a) List and describe the kind 2-story brick warehouse	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1a 1	PUBLICLY TRADED SEC	URITIES	P	03/23/2022	02/21/2023
b I	PUBLICLY TRADED SEC	URITIES	P	01/08/2019	02/21/2023
С					
d					
е					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		ain or (loss) s (f) minus (g))
а	8,030. 12,025.				-3,995.
b	299,358.		241,828	3.	57,530.
С		Э			
d					
е					
	Complete only for assets show	ring gain in column (h) and owned	by the foundation on 12/31/69.	(I) Gains (C	ol. (h) 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	col. (k), but n	ot less than -0-) or (from col. (h))
		400.12,07,00	575. 55H (), H 4H,		-3,995.
a b					57,530.
C					37,330.
d					
e					
-		(If gain	also enter in Part I, line 7	+	
2	Capital gain net income or	2	53,535.		
3	Net short-term capital gain	or (loss) as defined in sections	s 1222(5) and (6):		·
		, line 8, column (c). See instru			
	Part I, line 8			3	-3,995.
Part	V Excise Tax Based	on Investment Income (Se	ection 4940(a), 4940(b), or	4948-see instri	
1a		s described in section 4940(d)(2)			
	Date of ruling or determination	n letter: (attach	copy of letter if necessary-se	e instructions)	1 895.
b	All other domestic foundation	ons enter 1.39% (0.0139) of lir			
	4% (0.04) of Part I, line 12,	col. (b)			
2	Tax under section 511 (dom	estic section 4947(a)(1) trusts a	nd taxable foundations only; o	thers, enter -0-)	2 0.
3	Add lines 1 and 2				3 895.
4	Subtitle A (income) tax (dom	estic section 4947(a)(1) trusts a	and taxable foundations only; o	thers, enter -0-)	4 0.
5		income. Subtract line 4 from I			5 895.
6	Credits/Payments:				
а		nts and 2022 overpayment cre	dited to 2023 6a		
b	Exempt foreign organization	ns-tax withheld at source .	6b		
C	Tax paid with application for	or extension of time to file (For	m 8868) 6c		
d	Backup withholding errone	ously withheld	6d		
7	Total credits and payments	. Add lines 6a through 6d .			7
8	Enter any penalty for under	rpayment of estimated tax. Ch	eck here X if Form 2220 is a	tached	8 0.
9		5 and 8 is more than line 7, e			9 895.
10	Overpayment. If line 7 is m	ore than the total of lines 5 an	d 8, enter the amount overpa	id 1	0.
11	Enter the amount of line 10	to be: Credited to 2024 estimate	ated tax	Refunded · 1	11
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The second second second	VI-A Statements Regarding Activities		-	ago .
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		×
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		×
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		×
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ (2) On foundation managers. \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	CHARLES	×
_	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3		×
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		×
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		×
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	3		^
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
U	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6		×
7	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	×	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.		1000	
	ME			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	×	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes,"			
	complete Part XIII	9		×
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
44	names and addresses	10		×
11	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			×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	11		
12	person had advisory privileges? If "Yes," attach statement. See instructions	12		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
	Website address N/A			
14	The books are in care of LEE HOCHGRAF Telephone no. (207) 549	-320)2	
	Located at 263 GARDINER RD JEFFERSON ME ZIP+4 04348			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			

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Par	t VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
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)		×
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified			
	person?	1a(2)		×
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		×
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		×
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or			
	use of a disqualified person)?	1a(5)		×
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation			
	agreed to make a grant to or to employ the official for a period after termination of government service, if			
	terminating within 90 days.)	1a(6)		×
b	in any anterior is the tally of the dots han to qualify and the exceptions accombine			
-	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	S0000000	×
c	Organizations relying on a current notice regarding disaster assistance, check here			
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 before the first day of the tax year beginning in 2023?			~
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1d		×
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for			
-	tax year(s) beginning before 2023? If "Yes," list the years	2a		×
	20 , 20 , 20 , 20			
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 valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			1
	20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	3a		×
b	If "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
4-	foundation had excess business holdings in 2023.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			
		4a		×
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 2023?	AL.		V
DA 4		4b orm 990	0-PF	X (2022
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Par	t VI-B	Statements Regarding Activities	s for W	hich Form	4720	May Be R	equire	d (continued)			
5a	During	the year, did the foundation pay or incur	any am	ount to:						Yes	No
	(1) Ca	rry on propaganda, or otherwise attempt t	o influe	ence legislation	on (sect	ion 4945(e))? .		5a(1)		×
	(2) Infl	uence the outcome of any specific pub	olic ele	ction (see se	ection 4	4955); or t	o carry	on, directly or			
	ind	irectly, any voter registration drive?							5a(2)	1421	×
	(3) Pro	vide a grant to an individual for travel, stu	dy, or d	other similar	ourpose	es?			5a(3)		×
	(4) Pro	vide a grant to an organization other that	n a cha	ritable, etc.,	organiz	ation desc	ribed in	section 4945(d)			
	(4)(A)? See instructions							5a(4)		×
	(5) Pro	vide for any purpose other than religious	charita	able, scientifi	c, litera	ry, or educ	ational	purposes, or for			
		prevention of cruelty to children or anima							5a(5)	Ge need	×
b		answer is "Yes" to 5a(1)-(5), did any of the				•					
	in Reg	ulations section 53.4945 or in a current no	tice re	garding disas	ter ass	istance? Se	ee instr	uctions	5b		
С	_	zations relying on a current notice regardi	-								
d		answer is "Yes" to question 5a(4), doe					om the	tax because it			
	mainta	ined expenditure responsibility for the gra	ınt? .						5d		
		," attach the statement required by Regul									
6a		e foundation, during the year, receive any	funds,	, directly or in	ndirectl	y, to pay p	remiun	ns on a personal			
		contract?		* * (*)* (*)					6a		×
b		foundation, during the year, pay premiur	ns, dire	ctly or indire	ctly, on	a personal	benefi	contract? .	6b		×
	If "Yes	" to 6b, file Form 8870.									
7a	The second second second second second	time during the tax year, was the foundation				TOURS OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN T			7a		×
b		," did the foundation receive any proceed							7b		
8		foundation subject to the section 4960 ta					,000 in	remuneration or			
	ALC: UNKNOWN THE	s parachute payment(s) during the year?.				200000000000000000000000000000000000000			8		
Par	t VII	Information About Officers, Direct	tors,	Trustees, F	ounda	tion Man	agers,	Highly Paid Ei	nploy	ees,	and
		Contractors									
1	List al	officers, directors, trustees, and found		THE TOTAL PROPERTY.	A STATE OF THE PARTY OF THE PAR				•		
-		(a) Name and address	hou	e, and average irs per week ed to position	(If r	mpensation not paid, iter -0-)	emplo	Contributions to byee benefit plans erred compensation	(e) Exper other a	nse aco allowan	
NOR	MAN N	HOCHGRAF	PRES	IDENT							
PO	BOX 18	BRISTOL ME 04539		2.00	-	0.					
		CHGRAF	SEC/	TREAS							
		INER RD JEFFERSON ME 04348		2.00		0.					
		HOCHGRAF	TRUS	CARDINAL PROPERTY.							
A COLUMN TO SERVICE STATE OF THE PARTY OF TH		OK RD NORTHWOOD NH 03261		0.10		0.					
See	State	ement	1								
	Comp	exection of five highest poid and bus	- Carlo	0.20	:!	0.	1	aaa inatuustian	\ If m		onto
2	"NON	ensation of five highest-paid employe	es (uth	er uidii tiio	se iiici	uuea on II	110 1-	see mstructions	<i>y.</i> 11 110	Jile, (enter
	11011							(d) Contributions to			
	(a) Name	and address of each employee paid more than \$50,00	20	(b) Title, and a		(c) Compe	nsation	employee benefit	(e) Expe		
	(4)	and addition of oddition players paid more than \$600,00		devoted to p		(0)		plans and deferred compensation	other a	allowan	ices
NONE	7										
										64	
Total	number	of other employees paid over \$50,000 .							0		
									orm 90	0-PF	(2022

Part VII	Contractors (continued)	ipioyees, and
3 Five hi	ighest-paid independent contractors for professional services. See instructions. If none, enter "NONI	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total number	of others receiving ever \$50,000 for professional consists	
Part VIII-A	of others receiving over \$50,000 for professional services	0
		1
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	8	
1		
2		
٠		
3		
4		_
Part VIII-B	Summary of Program-Related Investments (see instructions)	
Describe the t	two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1		
2		
•		
All other prog	ram-related investments. See instructions.	
3		
A CONTRACTOR OF THE SECOND AS A SACRE		
Total. Add lin	es 1 through 3	

Part	IX Minimum Investment Return (All domestic foundations must complete this part. Forei	gn fo	undations, see
	instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	1,539,167.
b	Average of monthly cash balances	1b	258,897.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,798,064.
, е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,798,064.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see		
	instructions)	4	26,971.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	1,771,093.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	88,555.
Par		ounda	ations
	and certain foreign organizations, check here and do not complete this part.)	,	
1	Minimum investment return from Part IX, line 6	1	88,555.
2a	Tax on investment income for 2022 from Part V, line 5		
b	Income tax for 2022. (This does not include the tax from Part V.) 2b		
С	Add lines 2a and 2b	2c	895.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	87,660.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	87,660.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 .	7	87,660.
Par	t XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	90,000.
b	Program-related investments – total from Part VIII-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	90,000.
BAA	REV 03/21/24 PRO		Form 990-PF (2023)

Part	XII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1	Distributable amount for 2023 from Part X, line 7				87,660.
2	Undistributed income, if any, as of the end of 2023:			311111111111111111111111111111111111111	
а	Enter amount for 2022 only				
b	Total for prior years: 20, 20, 20		72		
3	Excess distributions carryover, if any, to 2023:				
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through e	17,700.			
4	Qualifying distributions for 2023 from Part XI, line 4: \$ 90,000.				
а	Applied to 2022, but not more than line 2a.				
b	Applied to undistributed income of prior years		ACCUSATION OF THE PARTY OF THE		
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election		4		
	required—see instructions)				97 660
d	Applied to 2023 distributable amount	2 340			87,660.
е 5	Remaining amount distributed out of corpus Excess distributions carryover applied to 2023	2,340.			
3	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	20,040.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
С	Enter the amount of prior years' undistributed		· ·		
Ŭ	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)	Value of V			
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable	A			
	amount—see instructions		0.		
е	Undistributed income for 2022. Subtract line				
	4a from line 2a. Taxable amount—see instructions			0	
	Undistributed income for 2023. Subtract lines			0.	
f	4d and 5 from line 1. This amount must be				
	distributed in 2024				0.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section	7.00			
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2018 not				
	applied on line 5 or line 7 (see instructions) .	0.			
9	Excess distributions carryover to 2024.				
	Subtract lines 7 and 8 from line 6a	20,040.			
10	Analysis of line 9:				
a	Excess from 2019				
b	Excess from 2020				
c	Excess from 2021				
d	Excess from 2022 10,593.				
е	Excess from 2023 2,340.				

Part	XIII Private Operating Founda	tions (see instru	ctions and Part	VI-A, question 9)		N/A
1a	If the foundation has received a ruling	or determination	letter that it is a	private operating		
	foundation, and the ruling is effective for	2023, enter the da	ate of the ruling .			
b	Check box to indicate whether the four	ndation is a private	operating foundat	ion described in se	ection 4942(j)(3	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part IX for	(a) 2023	(b) 2022	(c) 2021	(d) 2020	(e) Total
	each year listed					
b	85% (0.85) of line 2a					
С	Qualifying distributions from Part XI,					-
	line 4, for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter ² / ₃ of minimum investment return shown in Part IX, line 6, for each year listed					
С	"Support" alternative test—enter:					
Ü	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)		Q	V		
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part				ne foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year-	THE RESEARCH STREET	is.)			-
1	Information Regarding Foundation					
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	inly if they have co	official death of the	an \$5,000). (See S	ection 507 (d)(2).)	
	NORMAN N HOCHGRAF	who own 100/ or	mara of the stee	le of a corporation	/or on oqually lay	rae portion of the
b	List any managers of the foundation ownership of a partnership or other er					rge portion of the
2	Information Regarding Contribution	Grant Gift Loa	n Scholarshin e	tc. Programs:		
	Check here X if the foundation or unsolicited requests for funds. If the f	nly makes contrib oundation makes	outions to presele	cted charitable o		
	complete items 2a, b, c, and d. See in					
а	The name, address, and telephone nu	ımber or email add	dress of the persor	n to whom applica	tions should be ac	ddressed:
b	The form in which applications should	l be submitted and	d information and i	materials they sho	uld include:	
С	Any submission deadlines:					
d	Any restrictions or limitations on aw factors:	vards, such as by	y geographical ar	eas, charitable fie	elds, kinds of inst	titutions, or other

Form 990-PF (2023) Page 11 Part XIV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year AVIAN HAVEN 418 PALERMO RD 3,000. FREEDOM ME 04941 PC ANIMAL WELFARE BEAR PAW REGIONAL GREENWAY PO BOX 19 DEERFILED NH 03037 PC CONSERVATION 3,000. BEST FRIENDS ANIMAL SOC 5001 ANGEL CANYON RD BIG WATER UT 84871 PC ANIMAL WELFARE 4,000. CAPITAL CENTER FOR THE ARTS 44 SOUTH MAIN ST 1,000. CONCORD NH 03301 PC MUSIC EDUCATION CATCH NEIGHBORHOOD HOUSING 105 LOUDEN ROAD UNIT I HOUSING ASSISTANCE CONCORD NH 03301 PC 2,000. COASTAL RIVERS CONSERVATION TRUST 3 ROUND TOP LANE 4,000. DAMARISCOTTA ME 04543 PC CONSERVATION COMMUNITY ENERGY FUND LINCOLN COUNTY PO BOX 40 BRISTOL ME 04539 HEATING ASSISTANCE 4,000. CONCORD COMMUNITY MUSIC SCHOOL 23 WALL STREET CONCORD NH 03301 MUSIC EDUCATION 2,000. ECUMENICAL FOOD PANTRY 51 MAIN STREE PO BOX 46 NEWCASTLE ME 04553 PC FOOD ASSISTANCE 4,000. See Statement 63,000. Total 3a 90,000. Approved for future payment

Total 3b Form **990-PF** (2023) REV 03/21/24 PRO BAA

A CONTRACTOR OF THE PARTY OF TH	State of the state	V-A oss a	Analysis of Income-Producing Amounts unless otherwise indicated.	The same of the sa	siness income	Excluded by secti	on 512, 513, or 514	(e)
	200			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1		gram	service revenue:		2			(000
	a							
	b							
	C							
	d							
	e f							
		Food	and contracts from government agencies					
2	-		rship dues and assessments					
3			on savings and temporary cash investments			14	8.	
4			ds and interest from securities			14	27,601.	
5			al income or (loss) from real estate:			14	27,001.	
Ŭ			t-financed property					
			debt-financed property					
6			al income or (loss) from personal property					
7			vestment income		A			
8			loss) from sales of assets other than inventory		THE STATE OF THE S	18	53,535.	
9			ome or (loss) from special events				33,1333	
10			rofit or (loss) from sales of inventory					
11			venue: a		A company of the comp			
	b			4				
	С			A				
	d							
	е							
12	Sul	btota	I. Add columns (b), (d), and (e)				81,144.	
			dd line 12, columns (b), (d), and (e)	AND SECTION AND SE			13	81,144.
10		rkeho	et in line 13 instructions to verify calculation	ns.)	A .			
					THE REAL PROPERTY AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO PERSONS ADDRESS OF THE PERSON NAMED IN COLUMN TWO PERSONS ADDRESS OF THE PERSON NAMED IN COLUMN TWO PERSONS ADDRESS OF THE PERSON NAMED IN COLUMN TWO PERSON NAMED IN COLUMN			
Pa	rt X	V-B	Relationship of Activities to the	ccomplishm	WATER CO.			
Pa		V-B		ne is reported in o	olumn (e) of Part	t XV-A contributed	I importantly to the	e accomplishment
Pa	rt X	V-B	Relationship of Activities to the A Explain below how each activity for which incor	ne is reported in o	olumn (e) of Part	t XV-A contributed	I importantly to the	e accomplishment
Pa	rt X	V-B	Relationship of Activities to the A Explain below how each activity for which incor	ne is reported in o	olumn (e) of Part	t XV-A contributed	l importantly to thotions.)	e accomplishment
Pa	rt X	V-B	Relationship of Activities to the A Explain below how each activity for which incor	ne is reported in o	olumn (e) of Part	t XV-A contributed	l importantly to thotions.)	e accomplishment
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Pa	rt X	V-B	Relationship of Activities to the A Explain below how each activity for which incor	ne is reported in o	olumn (e) of Part	t XV-A contributed	importantly to thotions.)	e accomplishment
Pa	rt X	V-B	Relationship of Activities to the A Explain below how each activity for which incor	ne is reported in o	olumn (e) of Part	t XV-A contributed	l importantly to thotions.)	e accomplishment
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Pa	rt X	V-B	Relationship of Activities to the A Explain below how each activity for which incor	ne is reported in o	olumn (e) of Part	t XV-A contributed	l importantly to the	e accomplishment
Pa	rt X	V-B	Relationship of Activities to the A Explain below how each activity for which incor	ne is reported in o	olumn (e) of Part	t XV-A contributed	l importantly to the	e accomplishment
Pa	rt X	V-B	Relationship of Activities to the A Explain below how each activity for which incor	ne is reported in o	olumn (e) of Part	t XV-A contributed	l importantly to th	e accomplishment
Pa	rt X	V-B	Relationship of Activities to the A Explain below how each activity for which incor	ne is reported in o	olumn (e) of Part	t XV-A contributed	l importantly to th	e accomplishment
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Pa	rt X	V-B	Relationship of Activities to the A Explain below how each activity for which incor	ne is reported in o	olumn (e) of Part	t XV-A contributed	l importantly to the otions.)	e accomplishment
Pa	rt X	V-B	Relationship of Activities to the A Explain below how each activity for which incor	ne is reported in o	olumn (e) of Part	t XV-A contributed	l importantly to the otions.)	e accomplishment

		Organizatio	ons									
1	in se			engage in any of the 501(c)(3) organiza							Ye	es No
а	100 TO 100 P		orting foundation t	to a noncharitable ex	remnt organ	nization o	ıf•					
ч											1a(1)	×
											-	×
										1.0	1a(2)	
b	100000000000000000000000000000000000000	transactions:									41 (4)	
				empt organization							1b(1)	×
				table exempt organiz							1b(2)	×
				er assets							1b(3)	×
	(4) Re	eimbursement ar	rangements								1b(4)	×
	(5) Lo	ans or loan guar	antees				3 (*) (*)				1b(5)	×
	(6) Pe	erformance of se	rvices or members	ship or fundraising so	olicitations						1b(6)	×
С	Sharir	ng of facilities, ed	quipment, mailing l	ists, other assets, or	paid emplo	yees .					1c	×
d	If the	answer to any o	of the above is "Ye	es," complete the fo	llowing sch	edule. C	olumn (b) shoul	d alwa	ays show	w the fair	market
				vices given by the re								
				gement, show in colu								
(a) Line) Amount involved		charitable exempt organiza							aring arrange	
(4) 2	110. (, , and and involved	(0) 1141110 01 110110	onania on on on or or garner		(a) Descrip	tion of trui	01010, 1141	iodotion	10, 4110 0110	ang arang	,,,,,,,,,
						-						
	-											
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				4	AV	/						
							and the first field of the second					
					4							
	_											
	-							_				
	-											
2a				affiliated with, or rel								
				ection 501(c)(3)) or in	section 52	7?					Yes	× No
b	It "Ye	s," complete the	following schedule	ө.								
		(a) Name of organiz	zation	(b) Type of o	rganization			(c) De	scription	n of relatio	nship	
				ned this return, including acc						my knowle	dge and belie	f, it is true,
Sign	correc	t, and complete. Decla	ration of preparer (other th	han taxpayer) is based on all	information of w	vhich prepar	er has any l	nowledge		May the I	RS discuss t	his return
Here				05/15/20	24 TREE	SURER				with the p	reparer show	n below?
1016	Signa	ature of officer or trus	tee	Date	Title	10 01/11/				See instru	ctions. XY	es 🗌 No
		Print/Type preparer's		Preparer's signature			Date				PTIN	
Paid								/0001	Check	(X if		3.50
Prepa			achelder, CPA				05/20			-	P012290	152
Use (uce A. Bachel					Firm'			19493	
		Firm's address 28	5 Biscay Road	d Damariscotta	A CHANGE TO AND ADDRESS OF THE PARTY OF THE	3		Phon	e no. (63-754	
RΔΔ				REV 03/21/	24 PRO					F	orm 990-F	F (2023)

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

	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
a. Paid during the					
THE FRIEN	DLY KITCHEN		PC	FOOD ASSISTANCE	4,000.
PO BOX 37	3				
CONCORD,	NH 03302				
JEFFERSON	AREA FOOD PANTRY		PC	FOOD ASSISTANCE	4,000.
PO BOX 20	8				
JEFFERSON	, ME 04348				
KNOX COUN	TY HEALTH CLINIC		PC	HEALTH CARE	4,000.
WHITE STR	EET			377.555.577.5557.6555.555.555.555	
ROCKLAND,	ME 04841				
	NH CRAFTSMEN		PC	ARTS	1,000.
	MAINE STREET STE 100		A		,
CONCORD,		*			
	COUNTY DENTAL		PC	HEALTH CARE	4,000.
PO BOX 25					1,000.
	HARBOR, ME 04537	_			
	EALTH/MAINE HEALTH		PC	HEALTH CARE	4,000.
35 MILES				IIDALIII CANE	4,000.
	TTA, ME 04543				
THE LINCO		-	PC	HEALTH CARE	3,000.
22 RIVER			PC	HEALTH CARE	3,000.
	, ME 04553				
	LET LIVE FARM		2	ANTWAL METEROE	4,000.
			PC	ANIMAL WELFARE	4,000.
20 PARADI					
	R, NH 03258		20	WEATEN CARE	2 000
	LDREN'S CANCER PROGRAM		PC	HEALTH CARE	3,000.
	ALL STREET				
	ME 04102				2 500
	CONSERVANCY		PC	CONSERVATION	3,500.
PO BOX 43					
	ME 04556				W English
MID COAST			PC	ANIMAL WELFARE	4,000.
	ANT STREET				
	, ME 04011				
	R FOOD PANTRY		PC	FOOD ASSISTANCE	4,000.
158 HUDDL					
	R, ME 04554				
PLGA FOUN	DATION		PC	MEDICAL RESEARCH	2,500.
85 RIVERB	END LANE				
NEEDHAM,					
	RIAL SPCA		PC	ANIMAL WELFARE	3,000.
94 SILK F	ARM ROAD				
CONCORD,	NH 03301				
PORTLAND	STRING QUARTET		PC	ARTS SUPPORT	1,500.
PO BOX 11					
PORTLAND,	ME 04112				

NORMAN N & GALE R HOCHGRAF CHARITABLE FOUNDATION

Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

Recipient name and address (home of 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
a. Paid during the year				
PRINCETON UNIVERSITY		PC	SCIENCE EDUCATION	1,250.
PO BOX 5357				
PRINCETON, NJ 08543				
RONALD MCDONALD HOUSE		PC	MEDICAL SUPPORT	2,500.
250 BRACKETT ST				
PORTLAND, ME 04102				
SNOW POND CENTER FOR ARTS		PC	ARTS SUPPORT	1,000.
8 GOLDENROD LANE				
SIDNEY, ME 04330				
SOCIETY FOR PROTECTION NH FORES'	TS .	PC	CONSERVATION	1,000.
54 PORTSMOUTH LANE		A		
CONCORD, NH 03301				
STEPPING STONE HOUSING		PC	HOUSING	2,000.
PO BOX 21	4		ASSISTANCE	
DAMARISCOTTA, ME 04543				14
TEAM HAILEY HUGS		PC	MEDICAL SUPPORT	2,500.
PO BOX 636				
BETHEL, ME 04217				
TWIN VILLAGES FOOD BANK		PC	FOOD ASSISTANCE	2,000.
PO BOX 333				
DAMARISCOTTA, ME 04543		-		
UNIVERSITY OF DELAWARE		PC	SCIENCE EDUCATION	1,250.
83 EAST MAIN ST				
NEWARK, DE 19716				
				63,000

Form 990-PF: Return of Private Foundation

Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors Continuation Statement

Name and address	Title, and average hours per week devoted to position	Compensation	Contributions to employee benefit plans and deferred compensation	Expense account, other allowances
ERIC S HOV	TRUSTEE	0.		
22 BALSAM LN	0.10			
NOBLEBORO, ME 04555				
ROBERT B GREGORY	TRUSTEE	0.		
10 WATER STREET	0.10			
DAMARISCOTTA, ME 04543				
		0.	0.	0.

Form 990-PF Part I, Lines 16a - 16c

Name								Employer Identification No.
NORMAN	N	&	GALE	R	HOCHGRAF	CHARITABLE	FOUNDATION	26-6053240

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	_				
-					
	_				7/
	_				
al to Form 990	D-PF, Part I, Line 16a				

Line 16b - Accounting Fees

BRUCE BACHELDER ACCOUNTING 1,625.	Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Total to Form 990-PF, Part I, Line 16b 1, 625.						

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BUTTONWOOD GROUP	INVESTMENT COUNSEL	15,126.	15,126.		
Total to Form 990-	PF, Part I, Line 16c	15,126.	15,126.		

Underpayment of Estimated Tax by Corporations

OMB No. 1545-0123

Internal Revenue Service

Required Annual Payment

Attach to the corporation's tax return. Go to www.irs.gov/Form2220 for instructions and the latest information.

Name Employer identification number 26-6053240 NORMAN N & GALE R HOCHGRAF CHARITABLE FOUNDATION

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.

1 2a	Total tax (see instructions)	 ed on	line 1 2a		1		895.
b	Look-back interest included on line 1 under section 460(b)(2) for complete contracts or section 167(g) for depreciation under the income forecast management.	eted lo	ong-term				
С	Credit for federal tax paid on fuels (see instructions)		2c				
d	Total. Add lines 2a through 2c				2d		
3	Subtract line 2d from line 1. If the result is less than \$500, do not condoes not owe the penalty			m. The corporat	ion 3		895.
4	Enter the tax shown on the corporation's 2022 income tax return. See in the tax year was for less than 12 months, skip this line and enter the amount of the tax year was for less than 12 months, skip this line and enter the amount of the tax year.		- 40				26.
5	Required annual payment. Enter the smaller of line 3 or line 4. If the count the amount from line 3				5		26.
Part	Form 2220 even if it does not owe a penalty. See instru			re checked, the	ne corpo	ratior	n must file
6	☐ The corporation is using the adjusted seasonal installment method.						
7	The corporation is using the annualized income installment method.		THE STATE OF THE S				
8	The corporation is a "large corporation" figuring its first required insta	Ilmen	t based on the	prior year's tax.			
Part	III Figuring the Underpayment			1 11			4.15
		1	(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	05/15/23	06/15/23	09/15,	/23	12/15/23
10	Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10	5			7.	7.
11	Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11					
	Complete lines 12 through 18 of one column before going to the next column.						~
12	Enter amount, if any, from line 18 of the preceding column	12					
13	Add lines 11 and 12	13					
14	Add amounts on lines 16 and 17 of the preceding column	14		5.		12.	19.
15	Subtract line 14 from line 13. If zero or less, enter -0	15		0.		0.	0.
16	If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0	16		5.		12.	
17	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 column. Otherwise, go to line 18	17	5	. 7.		7.	7.
18	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					

	IV Figuring the Penalty		Т	(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (<i>C corporations with tax years ending June 30 and S corporations</i> : Use 3rd month instead of 4th month. <i>Form 990-PF and Form 990-T filers</i> : Use 5th month			,,,	(-7	(-7	
12121	instead of 4th month.) See instructions	19	05	/15/24	05/15/24	05/15/24	05/15/24
20	Number of days from due date of installment on line 9 to the date shown on line 19	20		366	335	243	15
21	Number of days on line 20 after 4/15/2023 and before 7/1/2023	21		46	15		
2	Underpayment on line 17 \times $\frac{\text{Number of days on line 21}}{365} \times 7\% (0.07)$	22	\$	0.	\$ 0.	\$	\$
:3	Number of days on line 20 after 6/30/2023 and before 10/1/2023	23		92	92	15	
4	Underpayment on line 17 \times $\frac{\text{Number of days on line 23}}{365} \times 7\% (0.07)$	24	\$	0.	\$ 0.	\$ 0.	\$
5	Number of days on line 20 after 9/30/2023 and before 1/1/2024	25		92	92	92	1
6	Underpayment on line 17 × Number of days on line 25 × 8% (0.08)	26	\$	0.	\$ 0.	\$ 0.	\$ 0
7	Number of days on line 20 after 12/31/2023 and before 4/1/2024	27		91	91	91	9
8	Underpayment on line 17 × Number of days on line 27 × 8% (0.08)	28	\$	0.	\$ 0.	\$ 0.	\$ 0
9	Number of days on line 20 after 3/31/2024 and before 7/1/2024	29	1	45	45	45	4
80	Underpayment on line 17 × Number of days on line 29 × *%	30	\$	0.	\$ 0.	\$ 0.	\$ 0
1	Number of days on line 20 after 6/30/2024 and before 10/1/2024	31	_				
32	Underpayment on line 17 × Number of days on line 31 × %	32	\$		\$	\$	\$
33	Number of days on line 20 after 9/30/2024 and before 1/1/2025	33					
34	Underpayment on line 17 × Number of days on line 33 × *%	34	\$		\$	\$	\$
5	Number of days on line 20 after 12/31/2024 and before 3/16/2025	35					
6	Underpayment on line 17 \times $\frac{\text{Number of days on line 35}}{365} \times \%$	36	\$		\$	\$	\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	0.	\$ 0.	\$ 0.	\$ 0
38	Penalty. Add columns (a) through (d) of line 37. Enter the total here and for other income tax returns						\$ 0

^{*}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 Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at **www.irs.gov**. You can also call 800-829-4933 to get interest rate information.

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.

			(a)	(b)	(c)	(d)
1	Enter taxable income for the following periods.		First 3 months	First 5 months	First 8 months	First 11 months
а	Tax year beginning in 2020	1a				
b	Tax year beginning in 2021	1b				
С	Tax year beginning in 2022	1c				
2	Enter taxable income for each period for the tax year beginning in 2023. See the instructions for the treatment of extraordinary items	2				
3	Enter taxable income for the following periods.		First 4 months	First 6 months	First 9 months	Entire year
а	Tax year beginning in 2020	3a				
b	Tax year beginning in 2021	3b				
С	Tax year beginning in 2022	Зс				
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 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	,			
8	Divide line 7 by 3.0	8				
9a	Divide line 2 by line 8	9a			1	
b	Extraordinary items (see instructions)	9b	7			
С	Add lines 9a and 9b	9c				
10	Figure the tax on the amount on line 9c using the instructions for Form 1120, Schedule J, line 1, or comparable line of corporation'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				
С	Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c	11c				
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 instructions	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				
19	Total tax after credits. Subtract line 18 from line 17. If zero or less, enter -0	19				

Part	II Annualized Income Installment Method					
	A m T		(a)	(b)	(c)	(d)
			First	First	First	First
20	Annualization periods (see instructions)	20	months	months	months	months
21	Enter taxable income for each annualization period. See					
	instructions for the treatment of extraordinary items	21				
22	Annualization amounts (see instructions)	22				
23a	Annualized taxable income. Multiply line 21 by line 22	23a				
b	Extraordinary items (see instructions)	23b				
С	Add lines 23a and 23b	23c				
24	Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 1, or comparable line of corporation's return	24				
25	Enter any alternative minimum tax (trusts only) for each payment period. See instructions	25				
26	Enter any other taxes for each payment period. See instructions	26				
27	Total tax. Add lines 24 through 26	27				
28	For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions	28				
29	Total tax after credits. Subtract line 28 from line 27. If zero or less, enter -0	29				i i
30	Applicable percentage	30	25%	50%	75%	100%
31	Multiply line 29 by line 30	31			2)	
Part	III Required Installments					
	Note: Complete lines 32 through 38 of one column before completing the next column.	1	1st installment	2nd installment	3rd installment	4th installment
32	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 completed, enter the smaller of the amounts in each column from line 19 or line 31	32				
33	Add the amounts in all preceding columns of line 38. See instructions	33		8		
34	Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0-	34				
35	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	35		7,7		
36	Subtract line 38 of the preceding column from line 37 of the preceding column	36				
37	Add lines 35 and 36	37				
38	Required installments. Enter the smaller of line 34 or line 37 here and on page 1 of Form 2220, line 10. See instructions	38				

IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2023, or fiscal year beginning	, 2023, and ending	,

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information.

Name of filer	EIN or SSN
	26-6053240
Name and title of officer or person subject to tax	
LEE HOCHGRAF, TREASURER	
Part I Type of Return and Return Information	
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 entere	
applicable line below. Do not complete more than one line in Part I.	Sa o on the retain, their enter -e- on the
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)	Choice (Carlo Choice)
3a Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b
4a Form 990-PF check here 🗵 b Tax based on investment income (Form 990-PF, Pa	
5a Form 8868 check here	5b
6a Form 990-T check here b Total tax (Form 990-T, Part III, line 4)	NOTICE OF THE PARTY OF THE PART
7a Form 4720 check here b Total tax (Form 4720, Part III, line 1)	
8a Form 5227 check here b FMV of assets at end of tax year (Form 5227, Item D	
9a Form 5330 check here b Tax due (Form 5330, Part II, line 19)	
10a Form 8038-CP check here b Amount of credit payment requested (Form 8038-CP,	
Part II Declaration and Signature Authorization of Officer or Person Subject t	
Under penalties of perjury, I declare that 🗵 I am an officer of the above entity or 🔲 I am a person	
	nd that I have examined a copy of the
2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, 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	
ntermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the	ne 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.	
Sicol of the father with a tarvail.	
PIN: check one box only	
☐ I authorize to enter my PIN	as my signature
	Enter five numbers, but
do not enter all zeros	
on the tax year 2023 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.	
X 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 2023 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.	
Signature of officer or person subject to tax	Date 05/15/2024
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification	
number (EFIN) followed by your five-digit self-selected PIN. 0 1 0 2 5 1 Do not enter	8 8 9 4 7 all zeros
I certify that the above numeric entry is my PIN, which is my signature on the 2023 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	05/20/2024
EDO Must Potain This Form — Soo Instructions	

Do Not Submit This Form to the IRS Unless Requested To Do So