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. Form **990-PF** Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2022 or tax year beginning , and ending Name of foundation A Employer identification number AVANGRID FOUNDATION, INC. 13-4200689

1	80	MARSH HILL RD	adi 655)		1100m/suite	203-836-64	157
		own, state or province, country, and ZIP or foreign pe	ostal code			C If exemption application is p	
		NGE, CT 06477					
		all that apply: Initial return	Initial return of a fo	rmer public o	harity	D 1. Foreign organization	s, check here
		Final return	Amended return			0	
		Address change	Name change			2. Foreign organizations m check here and attach c	eeting the 85% test, omputation
H C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation			E If private foundation sta	atus was terminated
			Other taxable private founda			under section 507(b)(1)(A), check here
		arket value of all assets at end of year J Accounti	=	X Accr	ual	F If the foundation is in a	
(fr		Part II, col. (c), line 16)	ther (specify)	۵ \		under section 507(b)(1)(B), check here
Da	\$ r+ 1	6,760,823. (Part I, colun					(d) Disbursements
ГС	וונו	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net in	vestment ome	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	4,662,648.			N/A	(Cash basis only)
	2	Check if the foundation is not required to attach Sch. B	1,002,0101			14/11	
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	79,063.	7	9,063.		STATEMENT 1
	5a	Gross rents	209,124.	20	9,124.		STATEMENT 2
	b	Net rental income or (loss) 174,188.	·				STATEMENT 3
•	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a					
eve	7	Capital gain net income (from Part IV, line 2)			0.		
Œ	8	Net short-term capital gain					
	9	Income modifications Gross sales less returns					
		and allowances					
		Less: Cost of goods sold					
		Gross profit or (loss)					
	11 12	Other income Total. Add lines 1 through 11	4,950,835.	28	8,187.		
_	13	Compensation of officers, directors, trustees, etc.	0.		0,107.		0.
	14	Other employee salaries and wages					
		Pension plans, employee benefits					
es		Legal fees					
Expenses	b	Accounting fees STMT 4	12,250.		6,125.		0.
ă	С	Other professional fees					
Ve	17						
rati	18	Interest Taxes STMT 5	2,432.		0.		0.
nistr		Depreciation and depletion	34,936.	3	4,936.		
Admir	20	Occupancy					
J Ac		Travel, conferences, and meetings					
anc	22	Printing and publications	11 000		^		
Operating	23	Other expenses STMT 6 Total operating and administrative	11,009.		0.		0.
erat	24	expenses. Add lines 13 through 23	60,627.	4	1,061.		0.
ŏ	25	Contributions, gifts, grants paid	4,077,728.	4	_,001•		4,077,728.
		Total expenses and disbursements.	2,0.,,,200				2,5.7,7200
		Add lines 24 and 25	4,138,355.	4	1,061.		4,077,728.
	27	Subtract line 26 from line 12:					
		Excess of revenue over expenses and disbursements	812,480.				
	b	Net investment income (if negative, enter -0-)		24	7,126.		
	C	Adjusted net income (if negative, enter -0-)				N/A	

223501 12-06-22 LHA For Paperwork Reduction Act Notice, see instructions.

For	Form 990-PF (2022) AVANGRID FOUNDATION, INC. 13-4200689 Page 2							
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year	End of				
Ė	ui t	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	2	Cash - non-interest-bearing Savings and temporary cash investments Accounts receivable	2,948,546.	4,652,698.	4,652,698.			
		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						
		disqua l ified persons						
	7	Other notes and loans receivable						
		Less: allowance for doubtful accounts						
ţ	8	Inventories for sale or use						
Assets		Prepaid expenses and deferred charges	8,125.	8,125.	8,125.			
⋖	ı	Investments - U.S. and state government obligations						
		Investments - corporate stock						
	C	Investments - corporate bonds						
	11	Investments - land, buildings, and equipment: basis	1 051 705	1 016 040	2 100 000			
	١	Less: accumulated depreciation STMT 7 733,151.	1,051,785.	1,016,849.	2,100,000.			
	ı	Investments - mortgage loans						
	13	Investments - other						
	14	Land, buildings, and equipment: basis						
	4.5	Less: accumulated depreciation						
		Other assets (describe) Total assets (to be completed by all filers - see the						
	10	instructions. Also, see page 1, item 1)	4,008,456.	5,677,672.	6,760,823.			
_	17	Accounts payable and accrued expenses	±,000,±30•	3,011,012.	0,700,023.			
		Grants payable	78,264.	935,000.				
		Deferred revenue	,	200,000				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
ig	21	Mortgages and other notes payable						
Ë	22	Other liabilities (describe)						
	23	Total liabilities (add lines 17 through 22)	78,264.	935,000.				
		Foundations that follow FASB ASC 958, check here						
S		and complete lines 24, 25, 29, and 30.						
nce	24	Net assets without donor restrictions	3,930,192.	4,742,672.				
or Fund Balances	25	Net assets with donor restrictions						
βE		Foundations that do not follow FASB ASC 958, check here						
Ξ	l	and complete lines 26 through 30.						
ğ	26	Capital stock, trust principal, or current funds	+					
sets	27	Paid-in or capital surplus, or land, bldg., and equipment fund						
As	28	Retained earnings, accumulated income, endowment, or other funds	3,930,192.	4,742,672.				
Net Assets	29	Total net assets or fund balances	3,930,192.	4,742,072.				
	30	Total liabilities and net assets/fund balances	4,008,456.	5,677,672.				
Р	art	Analysis of Changes in Net Assets or Fund Bal	ances					
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 29	9	<u> </u>				
•		at agree with end-of-year figure reported on prior year's return)		1	3,930,192.			
2		amount from Part I, line 27a			812,480.			
		r increases not included in line 2 (itemize)		3	0.			
4	Add	lines 1, 2, and 3		4	4,742,672.			
		eases not included in line 2 (itemize)		5	0.			
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (b), line 29	6	4,742,672.			
					Form 990-PF (2022)			

Part IV Capital Gains	and Losses for Tax on In	vestment Income			
	the kind(s) of property sold (for example arehouse; or common stock, 200 shs		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					
	NE				
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sa l e		(h) Gain or (l oss ((e) p l us (f) minus	
a					
b					
С					
d					
е					
Complete only for assets showi	ng gain in column (h) and owned by t	he foundation on 12/31/69.		(I) Gains (Col. (h) gain	
(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 not less tha Losses (from col. (
a					
b					
C					
d					
е					
If gain, also enter in Part I, line 8 Part I. line 8	ss) as defined in sections 1222(5) an , column (c). See instructions. If (lose	s), enter -0- in) 3		
Part V Excise Tax Bas	sed on Investment Incom	e (Section 4940(a), 4	l940(b), or 4948	- see instructio	ns)
1a Exempt operating foundations	described in section $4940(d)(2)$, che	ck here and enter	"N/A" on line 1.		
	letter: (at		ry - see instructions)	1	3,435.
	s enter 1.39% (0.0139) of line 27b. Ex				
enter 4% (0.04) of Part I, line	12, col. (b)				
2 Tax under section 511 (domes	tic section 4947(a)(1) trusts and taxa	ble foundations only; others,	enter -0-)		0.
					3,435.
	stic section 4947(a)(1) trusts and tax				0.
	ome. Subtract line 4 from line 3. If ze	ro or less, enter -0-		5	3,435.
6 Credits/Payments:		1 1	0.00		
	and 2021 overpayment credited to 20		2,80		
	tax withheld at source			0.	
	xtension of time to file (Form 8868)			0.	
	ly withheld			0.	2 000
7 Total credits and payments. Ac	•			_	2,800.
	yment of estimated tax. Check here				9.
	and 8 is more than 7, enter amount of				644.
	e than the total of lines 5 and 8, enter	tne amount overpaid			
11 Enter the amount of line 10 to	be: Credited to 2023 estimated tax		Refun	led 11	

4.			Yes	No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		103	
	any political campaign?	<u> 1a</u>		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			
	distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u>
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. \$ 0 .			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. \$0 .			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u>X</u>
	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		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6		Х
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	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	DE, NY, CT			
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	Х	
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 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 8	10	Х	
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disgualified person had advisory privileges?			
_	If "Yes," attach statement. See instructions	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address WWW.AVANGRID.COM			
14		836	-64	57
	Located at 180 MARSH HILL RD, ORANGE, CT ZIP+4 06	477		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
	and enter the amount of tax-exempt interest received or accrued during the year 15	N	/A	
16	At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
		m 990)-PF	(2022)

Form 990-PF (2022) AVANGRID FOUNDATION, INC. Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required	13-420	0689		Page !
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)		х
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		14(1)		
a disqualified person?		1a(2)		х
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		1a(3)		х
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		1a(4)		х
(5) Transfer any income or assets to a disqualified person (or make any of either available		(-7		
for the benefit or use of a disqualified person)?		1a(5)		х
(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)		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				
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	1b		
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 2022?		1d		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)):				
a At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines				
6d and 6e) for tax year(s) beginning before 2022?		2a		X
If "Yes," list the years , , , , , ,				
b 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.)	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				
during the year?		3a		X
b If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons aff				
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to discontinuous	spose			
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,				
Schedule C, to determine if the foundation had excess business holdings in 2022.)		3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose	that			3,7
had not been removed from jeopardy before the first day of the tax year beginning in 2022?		4b	\	X

Form 990-PF (2022) AVANGRID FOUNDATION, INC. Part VI-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	13-4200	689		Page 6
5a During the year, did the foundation pay or incur any amount to:	<u></u>	equiliou (contin	uea)		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e)) ?			5a(1)		X
(2) Influence the outcome of any specific public election (see section 4955); or						
any voter registration drive?				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						
4945(d)(4)(A)? See instructions				5a(4)		<u> </u>
(5) Provide for any purpose other than religious, charitable, scientific, literary,				- (F)		v
the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	day tha according a dancelland i	n Donulations		5a(5)		<u> </u>
section 53.4945 or in a current notice regarding disaster assistance? See instru			NI / A	5b		
c Organizations relying on a current notice regarding disaster assistance, check h				30		
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr						
expenditure responsibility for the grant?			N/A	5d		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).						
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on					
a personal benefit contract?				6a		X
\boldsymbol{b} Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal 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 s				7a		<u> </u>
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$, ,			8		Х
Part VII Information About Officers, Directors, Truste				<u> </u>		
Paid Employees, and Contractors	oo, roundation mai	lagoro, riigiliy				
1 List all officers, directors, trustees, and foundation managers and the	eir compensation.					
() Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions t employee benefit pla and deferred	o ns	(e) Exp	ense
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	a	allowa	
						_
SEE STATEMENT 9		0.	0	•		<u> </u>
-						
2 Compensation of five highest-paid employees (other than those incl	· · · · · · · · · · · · · · · · · · ·	enter "NONE."	(d) Contributions t	. 1		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit pla and deferred	ns a	(e) Exp ccount,	other
NOVE.	devoted to position	, ,	compensation	_	allowa	nces
NONE						
				-		
		1		\dashv		
		1				
				\perp		
Total number of other employees paid over \$50,000				004	ר די	0
			Fo	rm 99 0	ノーピト	(2022)

Part VII	Information About Officers, Directors, Trustees, Foundation Managers, Hig Paid Employees, and Contractors (continued)	ghly
3 Five highe	st-paid independent contractors for professional services. If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000 (b) Type of	of service (c) Compensation
N	ONE	
Total number	of others receiving over \$50,000 for professional services	
Part VIII-A	Summary of Direct Charitable Activities	
List the founda number of org	ttion's four largest direct charitable activities during the tax year. Include relevant statistical information such as th anizations and other beneficiaries served, conferences convened, research papers produced, etc.	ne Expenses
	/A	
2		
3		
4		
	Summary of Program-Related Investments wo largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1N	/A	
2		
All other progr	am-related investments. See instructions.	
Total. Add line	es 1 through 3	0.

13-4200689 Form 990-PF (2022) AVANGRID FOUNDATION, INC. Page 8 Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 0. a Average monthly fair market value of securities 1a 5,278,796. b Average of monthly cash balances 1b c Fair market value of all other assets (see instructions) 2,100,000. 1c d Total (add lines 1a, b, and c) 7,378,796. 1d Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets 378,796. Subtract line 2 from line 1d 3 110,682. 4 Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 7,268,114. 5 363,406. Minimum investment return. Enter 5% (0.05) of line 5 6 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.) 363,406. Minimum investment return from Part IX, line 6 1 Tax on investment income for 2022 from Part V, line 5 2a Income tax for 2022. (This does not include the tax from Part V.) Add lines 2a and 2b 2c Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 7 **Qualifying Distributions** (see instructions) Part XI Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 4,077,728. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part VIII-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b

4,077,728. Form **990-PF** (2022)

4

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4

Undistributed Income (see instructions) Part XII (a) (b) (c) 2021 2022 Corpus Years prior to 2021 1 Distributable amount for 2022 from Part X, 359,971. 2 Undistributed income, if any, as of the end of 2022: a Enter amount for 2021 only 0 **b** Total for prior years: 0. 3 Excess distributions carryover, if any, to 2022: 5,216,509. **a** From 2017 2,124,627 **b** From 2018 2,099,926. **c** From 2019 3,303,014. **d** From 2020 2,255,585. e From 2021 14,999,661. f Total of lines 3a through e 4 Qualifying distributions for 2022 from \$ 4,077,728. Part XI, line 4: 0 . a Applied to 2021, but not more than line 2a **b** Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 359,971. d Applied to 2022 distributable amount 3,717,757. e Remaining amount distributed out of corpus Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same amount 0. 0. must be shown in column (a).) Enter the net total of each column as indicated below: **a** Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 18,717,418 **b** Prior years' undistributed income. Subtract 0 line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0. assessed d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2021. Subtract line 0. 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2022. Subtract

corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)

8 Excess distributions carryover from 2017

7 Amounts treated as distributions out of

lines 4d and 5 from line 1. This amount must

not applied on line 5 or line 7

Excess distributions carryover to 2023.

Subtract lines 7 and 8 from line 6a

10 Analysis of line 9:

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be distributed in 2023

a Excess from 2018	2,124,627.
b Excess from 2019	2,099,926.
c Excess from 2020	3,303,014.
d Excess from 2021	2,255,585.
a Evenes from 2022	3 717 757.

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0.

0

5,216,509.

13,500,909.

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3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
COLUMBIA GORGE COMMUNITY COLLEGE	NONE	PC	TRAINING, RESEARCH &	
OUNDATION			HIGHER EDUCATION	
100 EAST SCENIC DR				
THE DALLES, OR 97058				10,0
DISTRICT ARTS & EDUCATION	NONE	₽C	TRAINING, RESEARCH &	
170 JAMES STREET, SUITE 001			HIGHER EDUCATION	
NEW HAVEN, CT 06513				50,0
HENRY FORD MUSEUM	NONE	PC	TRAINING, RESEARCH &	
20900 OAKWOOD BLVD.			HIGHER EDUCATION	
DEARBORN, MI 48124				50,0
IOWA LAKES COLLEGE FOUNDATION	NONE	₽C	TRAINING, RESEARCH &	
19 S 7TH STREET			HIGHER EDUCATION	
ESTHERVILLE, IA 51334				10,0
KALAMAZOO COMMUNITY COLLEGE	NONE	₽C	TRAINING, RESEARCH &	
FOUNDATION	10212		HIGHER EDUCATION	
6767 WEST O AVENUE				
KALAMAZOO, MI 49003				10,0
Total SEE C	ONTINUATION SHEE	T(S)		4,077,7
b Approved for future payment				
NONE				
Total		<u> </u>		

	_	
Part XV-A	Analysis of Income-Producing	Activities

Exclusion code	(d) Amount	(e) Related or exempt function income
sion		function income
14	79,063.	
16	174,188.	
	253,251.	0.
•	13	253,251.
_	0.	<u> </u>

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

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

FOIIII 99			KID LOOM					4200009	Pa	ge 13
Part :	XVI	Information Re Exempt Organ		nsfers to a	nd Transactions ar	nd Relationsh	ips With None	charitable		
1 Did	the or			v of the followin	g with any other organization	on described in sect	ion 501(c)		Yes	No
					g to political organizations?					
a Tra	ınsfers	from the reporting founda	ation to a noncharit	able exempt org	ganization of:					
(1)	Cash				•			1a(1)		Х
										Х
		sactions:								
(1)	Sales	of assets to a noncharita	ble exempt organiza	ation				1b(1)		Х
(2)	Purch	ases of assets from a no	ncharitable exempt	organization				1b(2)		Х
										Х
										Х
										Х
(6)	Perfo	rmance of services or me	embership or fundra	aising so l icitatio	ns			1b(6)		Х
					ployees					Х
d l f t	he ansv	ver to any of the above is	"Yes," complete the	e following sche	dule. Column (b) should al	ways show the fair	market va l ue of the (goods, other ass	ets,	
or	service	s given by the reporting fo	oundation. If the for	undation receive	ed less than fair market valu	ue in any transactior	n or sharing arrangei	ment, show in		
col) the value of the goods,								
(a) Line n	0.	(b) Amount involved	(c) Name	of noncharitab l e	e exempt organization	(d) Descriptio	n of transfers, transactio	ons, and sharing arr	angemer	ıts
				N/A						
	_									
	_									
	_									
	-									
	-									
	_									
					or more tax-exempt organi				77	٦.,
				section 52/?				Yes	Λ	No
<u> b IT "</u>	Yes," co	mplete the following sch (a) Name of org			(b) Type of organization		(c) Description of re	olationehin		
		N/A	ganization		(b) Type of organization		(c) Description of the	Glationship		
		N/A								
	Unde	r penalties of perjury, I declare	e that I have examined t	his return, inc l udin	g accompanying schedules and :	statements, and to the b	pest of my knowledge			
Sign	and b	elief, it is true, correct, and co	mplete, Declaration of p	preparer (other tha	n taxpayer) is based on all inform	nation of which preparer	has any knowledge.	May the IRS or return with th	e prepare	er
Here						PRESIDE	VТ	shown below X Yes		No
	Sign	ature of officer or trustee)		Date	Title	···			10
	<u> </u>	Print/Type preparer's na		Preparer's s		Date	Check if	PTIN		
		JESSE J. WH		1			se l f- employed			
Paid		CPA	,	JESSE	J. WHEELER,			P00187	533	
Prep			DSON, FOX		PANY, LLP		Firm's EIN 15	-054472		
Use (Only				<u>, </u>					
		Firm's address 53	CHENANGO	STREET						

Phone no. 607-722-5386

BINGHAMTON, NY 13901

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ar (Continuation)	_		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
KENNEBEC VALLEY COMMUNITY COLLEGE FOUNDATION 92 WESTERN AVE FAIRFIELD, ME 04937	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	5,000.
LAKE REGION COMMUNITY COLLEGE FOUNDATION 1801 COLLEGE DR N DEVILS LAKE, ND 58301	NONE	₽C	TRAINING, RESEARCH & HIGHER EDUCATION	10,000.
MAINE DEVELOPMENT FOUNDATION 2 BEECH STREET, SUITE 203 HALLOWELL, ME 04347	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	100,000.
MONROE COMMUNITY COLLEGE FOUNDATION 1057 EAST HENRIETTA ROAD ROCHESTER, NY 14623	NONE	₽C	TRAINING, RESEARCH & HIGHER EDUCATION	50,000.
ROCHESTER INSTITUTE OF TECHNOLOGY LOMB MEMORIAL DR ROCHESTER, NY 14623	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	25,000.
UNIVERSITY OF MAINE TWO ALUMNI PLACE ORONO, ME 04469	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	10,000.
UNIVERSITY OF SOUTHERN MAINE 246 DEERING AVE PORTLAND, ME 04104	NONE	₽C	TRAINING, RESEARCH & HIGHER EDUCATION	1,200,000.
YALE UNIVERSITY SCHOOL OF ARCHITECTURE P.O. BOX 208280 NEW HAVEN CT 06520	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	20 000
YALE UNIVERISTY INSTITUTE OF PERSERVATION AND CULTURAL HERITAGE P.O. BOX 1873 NEW HAVEN, CT 06508	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	20,000. 75,000.
ADIRONDACK PARK INSTITUTE PO BOX 67 NEWCOMB, NY 12852 Total from continuation sheets	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	10,000 <u>.</u> 3,947,728.

3 Grants and Contributions Paid During the Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation	Durage of great an	
·	show any relationship to any foundation manager	Foundation	Durnage of avent	
Name and address (home or business)	any iounuation manager	status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	Contribution	
BADGER RUN WILDLIFE REHABILITATION 15993 HOMESTEAD LANE KLAMATH FALLS, OR 97601	NONE	₽C	BIODIVERSITY & CLIMATE CHANGE	15,000.
BLUE MOUNTAIN WILDLIFE 71046 APPALOOSA LANE PENDLETON, OR 97801	NONE	₽C	BIODIVERSITY & CLIMATE CHANGE	10,000.
CENTER FOR WILDLIFE, THE P.O. BOX 620 CAPE NEDDICK, ME 03902	NONE	₽C	BIODIVERSITY & CLIMATE CHANGE	10,000.
CONNECTICUT PUBLIC BROADCASTING 1049 ASYLUM AVE HARTFORD, CT 06105	NONE	₽C	BIODIVERSITY & CLIMATE CHANGE	25,000.
CORN HILL NAVIGATION FOUNDATION P.O. BOX 373 PITTSFORD, NY 14534	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	10,000.
GREEN CHIMNEYS - PAUL C KUPCKOC WILDLIFE REHABILITATION 400 DOANSBURG ROAD, CALLER BOX 719 BREWSTER, NY 10509	NONE	₽C	BIODIVERSITY & CLIMATE CHANGE	10,000.
GULF OF MAINE RESEARCH INSTITUTE 350 COMMERCIAL STREET PORTLAND, ME 04101	NONE	₽C	BIODIVERSITY & CLIMATE CHANGE	50,000.
HAWKS A LOFT 6715 EAGLE ROCK AVE, NE, SUITE A ALBUQUERQUE, NM 87113	NONE	₽C	BIODIVERSITY & CLIMATE CHANGE	7,500.
ITHACA SCIENCENTER - DISCOVERY MUSEUM 601 FIRST ST ITHACA, NY 14850	NONE	₽C	BIODIVERSITY & CLIMATE	10,000.
LIBERTY WILDLIFE 2600 E ELWOOD ST PHOENIX, AZ 85040	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	7,000.

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Ye	 	T		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	55.11.154.151.	
NATIONAL FISH AND WILDLIFE FOUNDATION 1133 15TH ST NW, STE 1100 WASHINGTON, DC 20005	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	400,000.
NATURES NURSERY P.O. BOX 2395 WHITEHOUSE, OH 43571	NONE	₽C	BIODIVERSITY & CLIMATE CHANGE	10,000.
OJAI RAPTOR CENTER P.O. BOX 182 OAK VIEW, CA 93022	NONE	₽C	BIODIVERSITY & CLIMATE CHANGE	7,000.
OREGON MUSEUM OF SCIENCE & INDUSTRY 1945 SE WATER AVENUE PORTLAND, OR 97214	NONE	₽C	BIODIVERSITY & CLIMATE CHANGE	10,000.
OREGON ZOO FOUNDATION 4001 SW CANYON ROAD PORTLAND, OR 97221	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	50,000.
RED CREEK WILDLIFE CENTER 300 MOON HILL DR SCHUYLKILL HAVEN, PA 17972	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	17,500.
ROARING BROOK NATURE CENTER AND CHILDREN'S MUSEUM 950 TROUT BROOK DRIVE WEST HARTFORD, CT 06119	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	7,500.
ROCHESTER MUSEUM AND SCIENCE CENTER 657 EAST AVE ROCHESTER, NY 14607	NONE	₽C	BIODIVERSITY & CLIMATE CHANGE	10,000
SAVING OUR AVIAN RESOURCES 25494 320TH STREET DEDHAN, IA 51440	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	7,500.
SHARON AUDUBON CENTER 325 CORNWALL BRIDGE RD SHARON, CT 06069	NONE	₽C	BIODIVERSITY & CLIMATE CHANGE	7,000.

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) recipient or substantial contributor THE CORNELL INSTITUTE FOR PUBLIC NONE BIODIVERSITY & CLIMATE ÞС AFFAIRS CHANGE 341 PINE TREE ROAD ITHACA, NY 14850 15,000. TRUST FOR PUBLIC LAND NONE PC BIODIVERSITY & CLIMATE 101 MONTGOMERY ST., 9TH FLOOR CHANGE SAN FRANSISCO , CA 94104 25,000. WHISPERING WILLOW WILD CARE NONE PC BIODIVERSITY & CLIMATE 3558 CARMAN RD CHANGE SCHENECTADY, NY 12303 5,000. WILDLIFE WORKS NONE PC BIODIVERSITY & CLIMATE CHANGE P.O. BOX 113 YOUNGWOOD, PA 15697 7,500. WILL STEGER FOUNDATION - CLIMATE NONE PC BIODIVERSITY & CLIMATE CHANGE GENERATION CHANGE 2801 21ST AVE SOUTH, SUITE 110 MINNEAPOLIS, MN 55407 50,000. BARRINGTON STAGE COMPANY NONE PC ARTS & CULTURE 30 UNION ST PITTSFIELD, MA 01201 15,000. CT ASSOCIATION FOR THE PERFORMING NONE PC ARTS & CULTURE ARTS DBA SHUBERT THEATRE 247 COLLEGE STREET NEW HAVEN , CT 06510 10,000. HANCOCK SHAKER VILLAGE NONE PC ARTS & CULTURE P.O. BOX 927 PITTSFIELD, MA 01201 10,000. INTERNATIONAL FESTIVAL OF ARTS AND NONE PC ARTS & CULTURE IDEAS 195 CHURCH ST 12TH FL NEW HAVEN, CT 06510 20,000. MASSACHUSETTS MUSEUM OF CONTEMPORARY NONE PC ARTS & CULTURE 1040 MASS MOCA WAY NORTH ADAMS, MA 01247 10,000. Total from continuation sheets

Part XIV Supplementary Information	1			
3 Grants and Contributions Paid During the Y	ear (Continuation)	_	_	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
NXTHVN	NONE	₽C	ARTS & CULTURE	
169 HENRY STREET				
NEW HAVEN , CT 06511				50,000.
PORTLAND MUSEUM OF ART	NONE	₽C	ARTS & CULTURE	
7 CONGRESS SQ				
PORTLAND, ME 04101				10,000.
ROCHESTER COMMUNITY FOUNDATION	NONE	₽C	ARTS & CULTURE	
500 EAST AVE				
ROCHESTER, NY 14607				25,000.
THE SAINT JAMES FOUNDATION	NONE	₽C	ARTS & CULTURE	
116 CLEVELAND AVENUE				
ITHACA, NY 14850				10,000.
AMERICAN ONLINE GIVING /BENEVITY	NONE	₽C	COMMUNITY PROGRAMS	
200 MAIN STREET				
SAFE HARBOR, FL 34695				283,307.
AMERICAN RED CROSS - OREGON WILDFIRES	NONE	₽C	COMMUNITY PROGRAMS	
209 FARMINGTON AVE				
FARMINGTON, CT 06032				285,000.
AMERICARES	NONE	₽C	COMMUNITY PROGRAMS	
88 HAMILTON AVE				05.000
STAMFORD, CT 06902				25,000.
CAMP SUNSHINE	NONE	₽C	COMMUNITY PROGRAMS	
35 ACADIA RD				5 000
CASCO, ME 04015				5,000.
CATHOLIC CHARITIES - ARCHDIOCESE OF	NONE	₽C	COMMUNITY PROGRAMS	
HARTFORD				
839-841 ASYLUM AVE				
HARTFORD, CT 06105		-		10,000.
CITY OF NEW HAVEN - ELM CITY ROBOTICS	NONE	PC	COMMUNITY PROGRAMS	
200 ORANGE STREET				F 000
NEW HAVEN , CT 06510				5,000.
Total from continuation sheets				<u> </u>

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 COMMUNITY FOUNDATION OF GREATER NONE ÞС COMMUNITY PROGRAMS BUFFALO 726 EXCHANGE STREET SUITE 525 BUFFALO, NY 14210 25,000. CONNECTICUT FOODSHARE PC COMMUNITY PROGRAMS NONE 2 RESEARCH PKWY WALLINGFORD, CT 06492 25,000. CONNECTICUT WOMENS HALL OF FAME NONE PC COMMUNITY PROGRAMS 320 FITCH STREET B3 SCHWARTS HALL NEW HAVEN, CT 06515 5,000. FAMILY AND CHILDREN'S SERVICES OF NONE PC COMMUNITY PROGRAMS ITHACA 127 WEST STATE STREET ITHACA, NY 14850 10,000. FEEDING AMERICA NONE PC COMMUNITY PROGRAMS 161 NORTH CLARK ST STE 700 CHICAGO, IL 60601 10,000. FOOD BANK OF THE SOUTHERN TIER, NONE PC COMMUNITY PROGRAMS CATHOLIC CHARITIES 388 UPPER OAKWOOD AVENUE ELMIRA, NY 14903 20,000. FOOD BANK OF WESTERN MASSACHUSETTS NONE PC COMMUNITY PROGRAMS P.O. BOX 160 HATFIELD, MA 01038 10,000. FOODLINK NONE PC COMMUNITY PROGRAMS 1999 MT READ BLVD ROCHESTER, NY 14615 20,000. FRIENDS OF GREEN CHIMNEYS NONE PC COMMUNITY PROGRAMS 400 DOANSBURG ROAD, CALLER BOX 719 BREWSTER, NY 10509 10,000. GLADYS ALLEN BRIGHAM COMMUNITY CENTER NONE PC COMMUNITY PROGRAMS - GIRLS, INC OF THE BERKSHIRES 165 EAST STREET PITTSFIELD, MA 01201 25,000. Total from continuation sheets

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) recipient or substantial contributor GOOD SHEPARD FOOD BANK NONE PC COMMUNITY PROGRAMS 3121 HOTEL ROAD AUBURN, ME 04211 20,000. HABITAT FOR HUMANITY INTERNATIONAL PC COMMUNITY PROGRAMS NONE 121 HABITAT ST AMERICUS, GA 31709 135,000. HERITAGE CHRISTIAN SERVICES NONE PC COMMUNITY PROGRAMS 275 KENNETH DRIVE, SUITE 100 ROCHESTER, NY 14623 10,000. IBERO-AMERICAN ACTION LEAGUE NONE PC COMMUNITY PROGRAMS 817 E MAIN ST ROCHESTER, NY 14605 10,000. JOBS FOR MAINE'S GRADUATES, INC. NONE PC COMMUNITY PROGRAMS 45 COMMERCE DR., SUITE 9 AUGUSTA, ME 04430 25,000. MAINE WOMENS LOBBY EDUCATION FUND NONE PC COMMUNITY PROGRAMS 295 WATER STREET, SUITE 10 AUGUSTA, ME 04330 5,000. NEW BEGINNINGS NONE PC COMMUNITY PROGRAMS 134 COLLEGE STREET LEWISTON, ME 04240 10,000. ONE CITY FUN CITY OF ROCHESTER - COOL NONE PC COMMUNITY PROGRAMS SWEEP 30 CHURCH ST, ROOM 106-A ROCHESTER, NY 14614 15,000. OPERATION FUEL NONE PC COMMUNITY PROGRAMS 75 CHARTER OAK AVE STE 2-240 HARTFORD, CT 06106 25,000. OREGON CHILDREN'S FOUNDATION - START NONE PC COMMUNITY PROGRAMS MAKING A READER TODAY (SMART) 101 SW MARKET ST PORTLAND, OR 97201 42,000. Total from continuation sheets

Part XIV Supplementary Informatio				Τ
3 Grants and Contributions Paid During the		T		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
OREGON FOOD BANK	NONE	PC	COMMUNITY PROGRAMS	
7900 NE 33RD DR				20.000
PORTLAND, OR 97211				20,000
PINE TREE SOCIETY	NONE	₽C	COMMUNITY PROGRAMS	
149 FRONT STREET				
ВАТН, МЕ 04530				10,000
PREBLE STREET	NONE	₽C	COMMUNITY PROGRAMS	
38 PREBLE STREET				
PORTLAND, ME 04101				10,000
ROCHESTER REGIONAL HOSPITAL	NONE	PC	COMMUNITY PROGRAMS	
FOUNDATION				
P.O. BOX 90234				10 000
PORTLAND , OR 97290				10,000
ROCHESTER ROTARY CHERITABLE TRUST	NONE	PC	COMMUNITY PROGRAMS	
180 LINDEN OAKS STE 200	NONE		COMMONITI PROGRAMS	
ROCHESTER, NY 14625				10,000
RONALD MCDONALD HOUSE CHARITIES OF	NONE	₽C	COMMUNITY PROGRAMS	
NEW YORK - ROCHESTER				
333 WESTMORELAND DRIVE				
ROCHESTER, NY 14620				20,000
RONALD MCDONALD HOUSE CHARITIES OF	NONE	₽C	COMMUNITY PROGRAMS	
PORTLAND & BANGOR				
250 BRACKETT STREET PORTLAND, ME 04102				20,000
·				,
RONALD MCDONALD HOUSES CHARITIES OF CONNECTICUT & WESTERN MASSACHUSETTS	NONE	PC	COMMUNITY PROGRAMS	
860 HOWARD AVE				
NEW HAVEN, CT 06519				30,000
SANTA FE COMMUNITY FOUNDATION	NONE	PC	COMMUNITY PROGRAMS	
501 HALONA STREET				
SANTA FE, NM 87505				50,000
SOLAR YOUTH 53 WAYFARER STREET	NONE	PC	COMMUNITY PROGRAMS	
NEW HAVEN, CT 06515				10,000
Total from continuation sheets				

Part XIV Supplementary Information	n			
3 Grants and Contributions Paid During the	Year (Continuation)	_		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
THE SALVATION ARMY EMPITE STATE	NONE	PC	COMMUNITY PROGRAMS	
DIVISION	NONE		COMMONITI TROGRAMS	
440 WEST NYACK RD				
WEST NYACK , NY 10994				20,000.
TRINITY JUBILEE CENTER	NONE	₽C	COMMUNITY PROGRAMS	
247 BATES STREET				
LEWISTON, ME 04240				20,000.
IINITHED WAY OF OPERHED NEW UNITEN	NONE	D.C.	COMMINITARY DROCEAMS	
UNITED WAY OF GREATER NEW HAVEN 900 CHAPEL ST 10TH FLR	NOME	PC	COMMUNITY PROGRAMS	
NEW HAVEN, CT 06510				10,000.
·				,
UNITED WAY BROOME COUNTY	NONE	₽C	COMMUNITY PROGRAMS	
P.O. BOX 550 BINGHAMTON, NY 13902				32,000.
211011111011, 112 20702				52,000.
UNITED WAY OF GREATER PORTLAND	NONE	₽C	COMMUNITY PROGRAMS	
P.O. BOX 15200 PORTLAND, ME 04112				10,000.
IONIDAD, MI VIIIZ				10,000.
UNITED WAY OF GREATER ROCHESTER AND	NONE	₽C	COMMUNITY PROGRAMS	
THE FINGER LAKES				
75 COLLEGE AVE				10.000
ROCHESTER, NY 14607				10,000.
UNITED WAY OF KENNEBEC VALLEY	NONE	₽C	COMMUNITY PROGRAMS	
121 COMMERCIAL ST				
AUGUSTA, ME 04330		1		10,000.
UNITED WAY OF THE KLAMATH BASIN	NONE	₽C	COMMUNITY PROGRAMS	
136 N 3RD ST SUITE B				
KLAMATH FALLS, OR 97601		1		15,000.
VETERANS ADAPTIVE SPORTS & TRAINING	NONE	₽C	COMMUNITY PROGRAMS	
(VAST), PINELAND FARMS				
32 FARM VIEW DRIVE				
NEW GLOUCESTER, ME 04260		ļ		5,000.
VETERANS OUTREACH CENTER	NONE	PC	COMMUNITY PROGRAMS	
447 SOUTH AVE				
ROCHESTER, NY 14620				20,000.
Total from continuation sheets				

Part XIV Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, Recipient Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) recipient or substantial contributor PEABODY MUSEUM OF NATURAL HISTORY AT NONE COMMUNITY PROGRAMS ÞС YALE P.O. BOX 208280 NEW HAVEN, CT 06520-8280 40,000. YALE NEW HAVEN HOSPITAL NONE PC COMMUNITY PROGRAMS 20 YORK STREET 25,000. NEW HAVEN , CT 06504 NONE YOUTH CONTINUUM PC COMMUNITY PROGRAMS 141 VALLEY STREET NEW HAVEN , CT 06515 10,000. AMERICAN RED CROSS NONE PC COMMUNITY PROGRAMS 209 FARMINGTON AVE FARMINGTON, CT 06032 11,921. 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

2022

Schedule B (Form 990) (2022)

Name of the organization **Employer identification number** AVANGRID FOUNDATION, 13-4200689 INC. Organization type (check one): Filers of: Section: Form 990 or 990-EZ ___ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______\$ _ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

AVANGRID FOUNDATION, INC.

13-4200689

AVANG	RID FOUNDATION, INC.	13	<u>-4200689</u>
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	AVANGRID RENEWABLES 2701 NW VAUGH STREET, SUITE 300 PORTLAND, OR 97210	\$ 2,549,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	NEW YORK STATE ELECTRIC AND GAS P.O. BOX 5224 BINGHAMTON, NY 13902	\$500,000.	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
3	CENTRAL MAINE POWER COMPANY 83 EDISON DRIVE AUGUSTA, ME 04332	\$\$	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
4	ROCHESTER GAS AND ELECTRIC CORPORATION 3 CITY CENTER, 180 SOUTH CLINTON AVE ROCHESTER, NY 14604	\$500,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	BERKSHIRE GAS CO 115 CHESHIRE ROAD PITTSFIELD, MA 01201	\$\$0,000.	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
223452 11-18	UIL HOLDINGS 100 MARSH HILL ROAD ORANGE, CT 06477	\$347,270 .	Person X Payroll

Schedule B (Form 990) (2022) Page **2**

Name of organization

Employer identification number

AVANGRID FOUNDATION, INC.

13-4200689

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZI P + 4	(c) Total contributions	(d) Type of contribution
7	AVANGRID REAL ESTATE SERVICES 83 EDISON DRIVE AUGUSTA, ME 04336	\$ 213,148.	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
8	CONNECTICUT NATURAL GAS COMPANY 76 MEADOW ST EAST HARTFORD, CT 06108	\$101,365.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZI P + 4	(c) Total contributions	(d) Type of contribution
9	SOUTHERN CONNECTICUT GAS COMPANY 60 MARSH HILL ROAD ORANGE, CT 06477	\$101,365.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZI P + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZI P + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (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.)

223452 11-15-22

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

AVANGRID FOUNDATION, INC.

13-4200689

art II	Noncash Property (see instructions). Use duplicate copies of Pa	art 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
_		 	
(a) No. rom art 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
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Schedule B (Form 990) (2022) Name of organization **Employer identification number** AVANGRID FOUNDATION, 13-4200689 INC. Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift

Transferee's name, address, and ZIP + 4

(b) Purpose of gift

(e) Transfer of gift			
Transferee's name, address, and ZIP	+ 4	Relationship of transferor to transferee	

(c) Use of gift

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	

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

(a) No. from Part I

Relationship of transferor to transferee

(d) Description of how gift is held

Underpayment of Estimated Tax by Corporations

FORM 990-PF

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

OMB No. 1545-0123 2022

Department of the Treasury

AVANGRID FOUNDATION, INC.

Employer identification number 13-4200689

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.

Part I Required Annual Payment						
1 Total tax (see instructions)					1	3,435.
2 a Personal holding company tax (Schedule PH (Form 1120), lin	e 26) i	ncluded on line 1		. 1		
b Look-back interest included on line 1 under section 460(b)(2)	,		······			
contracts or section 167(g) for depreciation under the income			21	,		
(8)						
c Credit for federal tax paid on fuels (see instructions)			20	;		
d Total. Add lines 2a through 2c					2d	
3 Subtract line 2d from line 1. If the result is less than \$500, do	not co	omplete or file this form.	The corporatio	n		
does not owe the penalty					3	3,435.
4 Enter the tax shown on the corporation's 2021 income tax ret	urn. Se	ee instructions. Caution:	If the tax is ze	ro		
or the tax year was for less than 12 months, skip this line and	enter	the amount from line 3 or	n l ine 5		4	2,782.
5 Required annual payment. Enter the smaller of line 3 or line	4. If t	he corporation is required	d to skip l ine 4,			
enter the amount from line 3					5	2,782.
Part II Reasons for Filing - Check the boxes below	ow that	t apply. If any boxes are c	checked, the co	rporation	must file Form 2220	
even if it does not owe a penalty. See instructions.						
6 The corporation is using the adjusted seasonal installi						
7 The corporation is using the annualized income install				_		
The corporation is a "large corporation" figuring its first	st requ	<u>iired installment based on</u>	n the prior year	s tax		
Part III Figuring the Underpayment						T
5 1	\vdash	(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),		05/15/22	06/15	/22	00/15/22	10/15/00
6th, 9th, and 12th months of the corporation's tax year	9	05/15/22	06/15	/ 4 4	09/15/22	12/15/22
10 Required installments. If the box on line 6 and/or line 7						
above is checked, enter the amounts from Sch 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,	ایرا	696.		695.	696.	695.
enter 25% (0.25) of line 5 above in each column	10	090.		093.	090•	093.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15.						
. ,	11	618.			1,482.	700.
See instructions Complete lines 12 through 18 of one column	<u>''</u>	010.			1,402.	700.
before going to the next column.						
12 Enter amount, if any, from line 18 of the preceding column	12					13.
40 4111 44 140	13				1,482.	
14 Add amounts on lines 16 and 17 of the preceding column	14			78.	773.	
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	618.		0.	709.	713.
16 If the amount on line 15 is zero, subtract line 13 from line	"	3=34				, _ 5
14. Otherwise, enter -0-	16			78.	0.	
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	78.		695.		
18 Overpayment. If line 10 is less than line 15, subtract line 10	\Box					
from line 15. Then go to line 12 of the next column	1.				13.	

For Paperwork Reduction Act Notice, see separate instructions.

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Form 2220 (2022)

212801 01-24-23

Form 2220 (2022)

Part IV Figuring the Penalty

			(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				
0	Number of days from due date of installment on line 9 to the					
	date shown on line 19	20				
1	Number of days on line 20 after 4/15/2022 and before 7/1/2022	21				
2	Underpayment on line 17 x Number of days on line 21 x 4% (0.04)	22	\$	\$	\$	\$
3	Number of days on line 20 after 6/30/2022 and before 10/1/2022	23				
4	Underpayment on line 17 x Number of days on line 23 x 5% (0.05)	24	\$	\$	\$	\$
5	Number of days on line 20 after 9/30/2022 and before 1/1/2023	25				
6	Underpayment on line 17 x Number of days on line 25 x 6% (0.06)	26	\$	\$	\$	\$
7	Number of days on l ine 20 after 12/31/2022 and before 4/1/2023	27	SEE	ATTACHED W	ORKSHEET	
8	Underpayment on line 17 x Number of days on line 27 x 7% (0.07)	28	\$	\$	\$	\$
9	Number of days on line 20 after 3/31/2023 and before 7/1/2023	29				
)	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$	\$
1	Number of days on line 20 after 6/30/2023 and before 10/1/2023	31				
2	Underpayment on line 17 x Number of days on line 31 x *% 365	32	\$	\$	\$	\$
3	Number of days on line 20 after 9/30/2023 and before 1/1/2024	33				
4	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
5	Number of days on l ine 20 after 12/31/2023 and before 3/16/2024	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	\$	\$	\$	\$

^{*} 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 1-800-829-4933 to get interest rate information.

Form **2220** (2022)

FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying Nur	mber
AVANGRID FO	UNDATION, IN	C.		13-420	0689
(A)	(B)	(C)	(D)	(E)	(F)
*Date	Amount	Adjusted Balance Due	Number Days Balance Due	Daily Penalty Rate	Penalty
		-0-			
05/15/22	696.	696.			
05/15/22	-618.	78.	31	.000109589	
06/15/22	695.	773.	15	.000109589	1.
06/30/22	0.	773.	77	.000136986	8
09/15/22	696.	1,469.			
09/15/22	-1,482.	-13.			
09/30/22	0.	-13.	76	.000164384	
12/15/22	695.	682.			
12/15/22	-700.	-18.			
12/31/22	0.	-18.	135	.000191781	
enalty Due (Sum of Colun	nn E)			'	9

^{*} Date of estimated tax payment, withholding credit date or installment due date.

212511 04**-**01-22

FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM SE	CURI	TIES	ST	ATEMENT 1
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	(A) REVENU PER BOO		(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME
JP MORGAN	79,063.		0.	79,0	63.	79,06	3.	
TO PART I, LINE 4	79,063.		0.	79,0	63.	79,06	3.	
FORM 990-PF		RENTAL	INCOM	E			SI	ATEMENT 2
KIND AND LOCATION O	F PROPERTY					ACTIVITY NUMBER	RE	GROSS
ANTHONY AVE, AUGUST	A, ME					2		209,124
TOTAL TO FORM 990-P	F, PART I,	LINE 5A						209,124
FORM 990-PF	 	ENTAL E	XPENS	 ES		 	ST	ATEMENT 3
DESCRIPTION			ACTI NUM		AN	MOUNT		TOTAL
DEPRECIATION						34,936.		
	- SU	BTOTAL -		2		0.		34,936
TOTAL RENTAL EXPENS	ES					•		34,936
NET RENTAL INCOME T	O FORM 990-	PF, PART	I, L	INE 5B		: :		174,188.
FORM 990-PF	 	ACCOUN	TING	FEES		 	SI	ATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOK		(B) T INVEST NT INCOM		(C) ADJUSTED NET INCOM		(D) CHARITABLE PURPOSES
LEGAL AND ACCOUNTIN	G FEES	12,25	0.	6,12	5.			0.
TO FORM 990-PF, PG	1, LN 16B	12,25	0.	6,12	5.			0 .
	==						==	

FORM 990-PF	TAX	ES	S	TATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL EXCISE TAX NYS FEE	2,182. 250.			0.	
TO FORM 990-PF, PG 1, LN 18	2,432.	0.		0.	
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
OFFICE EXPENSE BANK FEES	10,410.			0.	
TO FORM 990-PF, PG 1, LN 23	11,009.	0.		0.	

FORM 990-PF DEPRE	CIATION OF ASSETS	HELD FOR INVE	ESTMENT	STATEMENT 7
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE	FAIR MARKET VALUE
BUILDINGS AND IMPROVEMENTS LAND	1,395,884. 354,116.	_	662,733. 354,116.	
TO 990-PF, PART II, LN	1,750,000.	733,151.	1,016,849.	2,100,000.

	FANTIAL CONTRIBUTORS STATEMENT 8 I-A, LINE 10
NAME OF CONTRIBUTOR	ADDRESS
NEW YORK STATE ELECTRIC AND GAS	P.O. BOX 5224 BINGHAMTON, NY 13901
ROCHESTER GAS AND ELECTRIC	3 CITY CENTER, 180 SOUTH CLINTON AVE
CORPORATION	ROCHESTER, NY 14604
CENTRAL MAINE POWER COMPANY	83 EDISON DRIVE AUGUSTA, ME 04332
AVANGRID RENEWABLES, LLC	2701 NW VAUGH STREET, SUITE 300 PORTLAND, OR 29210
UIL HOLDINGS	100 MARSH HILL ROAD ORANGE, CT 06477
BERKSHIRE GAS COMPANY	115 CHESHIRE ROAD PITTSFIELD, MA 01201
AVANGRID REAL ESTATE SERVICES	83 EDISON DRIVE AUGUSTA, ME 04332
CONNECTICUT NATURAL GAS COMPANY	76 MEADOW ST EAST HARTFORD, CT 06108
SOUTHERN CONNECTICUT GAS COMPANY	60 MARSH HILL ROAD ORANGE, CT 06477

FORM 990-PF	PART VII - LIST TRUSTEES AND	OF OFFICERS, DI FOUNDATION MANA		STAT	EMENT 9
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
LANEY BROWN 180 MARSH HILL RD ORANGE, CT 06477		PRESIDENT 1.00	0.	0.	0.
APRIL THEBERGE 180 MARSH HILL RD ORANGE, CT 06477		TREASURER 1.00	0.	0.	0.
CARMEN ALBERT 180 MARSH HILL RD ORANGE, CT 06477		SECRETARY 1.00	0.	0.	0.
JUSTIN LAGASSE 180 MARSH HILL RD ORANGE, CT 06477		DIRECTOR 1.00	0.	0.	0.
MARK CANTRERAS 180 MARSH HILL RD ORANGE, CT 06477		DIRECTOR 1.00	0.	0.	0.
JOSEPH SEARLES 180 MARSH HILL RD ORANGE, CT 06477		DIRECTOR 1.00	0.	0.	0.
BETSY SALTONSTALL 180 MARSH HILL RD ORANGE, CT 06477		DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON	N 990-PF, PAGE 6	, PART VII	0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XIV, LINES 2A THROUGH 2D

STATEMENT 10

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

LANEY BROWN 180 MARSH HILL ROAD ORANGE, CT 06477

TELEPHONE NUMBER

203-836-6457

EMAIL ADDRESS

AVANGRIDFOUNDATION@AVANGRID.COM

FORM AND CONTENT OF APPLICATIONS

FOUNDATION HAS A GRANT APPLICATION

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

QUALIFIED 501(C)(3) AND RELATED ENTITIES BASED AND OPERATING IN THE US AND TERRITORIES PRIMARILY, WITH A FOCUS SUSTAINABLE COMMUNITIES AND VULNERABLE PERSONS.