#### Form **990-PF**

Department of the Treasury Internal Revenue Service EXTENDED TO NOVEMBER 17, 2025

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047 **2024**Open to Public Inspection

For calendar year 2024 or tax year beginning , and ending Name of foundation A Employer identification number 13-4200689 AVANGRID FOUNDATION, Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 180 MARSH HILL ROAD 207-688-4341 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ORANGE, CT 06477 G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation **H** Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here Fair market value of all assets at end of year J Accounting method: Cash X Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here ... 8 , 517 , 024 . (Part I, column (d), must be on cash basis.) \$ Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) expenses per books income income (cash basis only) 2,665,105 Contributions, gifts, grants, etc., received ...... N/ACheck if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 273,490. 273,490 STATEMENT Dividends and interest from securities 256,823. 256,823. 5a Gross rents ..... STATEMENT STATEMENT **b** Net rental income or (loss) **6a** Net gain or (loss) from sale of assets not on line 10 ..... **b** Gross sales price for all assets on line 6a ..... 0. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications ... Gross sales less returns 10a and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 3,195,418. 530,313. Total. Add lines 1 through 11 12 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages \_\_\_\_\_ 15 Pension plans, employee benefits Administrative Expenses 16a Legal fees b Accounting fees STMT 4 13,500. 6,750. 0. c Other professional fees 17 Interest Taxes STMT 5 50,789. 44,566. 0. 18 34,936. 34,936. Depreciation and depletion 19 Occupancy 20 21 Travel, conferences, and meetings Operating and 22 Printing and publications ..... 23 Other expenses STMT 6 4,180. 0. 0. 24 Total operating and administrative 103,405. 86,252. expenses. Add lines 13 through 23 3,495,479. 3,495,479. 25 Contributions, gifts, grants paid ..... 26 Total expenses and disbursements. 3,495,479. Add lines 24 and 25 3,598,884. 86,252. 27 Subtract line 26 from line 12: -403,466. a Excess of revenue over expenses and disbursements 444,061. **b Net investment income** (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

423501 12-06-24

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4 Add lines 1 2 and 2						4,707,001.
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5 Decreases not included in line 2 (itemize) 5 U. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 6 4,707,001.				ımn (h) line 20		<u>4 707 001</u>
Form 990-PF (2024)	<u>u</u>	ı Uld	not assets of fund balances at end of year (line 4 fillings line 3) - Fait II, Coll	anın (D), IIIIC ZƏ		

							13	3-420	0689	Page 3
art IV Capital Gains	and Losses for Tax on <b>I</b> n	vestment lı	ncome							
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				( <b>b)</b>	How ac Purc - Dona - O	cquired hase ation	(c) Date a (mo., da	cquired y, yr.)	( <b>d)</b> Date (mo., da	e so <b>l</b> d ıy, yr <b>.</b> )
NO	NE									
(e) Gross sales price	(f) Depreciation allowed (or allowable)									
Complete only for assets showir	ng gain in co <b>l</b> umn (h) and owned by	the foundation o	n 12/31/69 <b>.</b>							
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69			)		COI				
Net short-term capital gain or (lo	apital loss) If (loss), enter -0 ss) as defined in sections 1222(5) ar	) <b>-</b> in Part <b>I, l</b> ine 7 nd (6):		}	2					
	, column (c). See instructions. If (los	s), enter -0- in		}	,					
	sed on Investment Incom	ne (Section	4940(a)	<u>4940(</u>	h) or	· 4948 -	see ins	truction	ns)	
							7	ti dotioi	10)	
									6	172.
•					illotiu	uliuliaj	} <del>  '  </del>			, 1 , 2 •
							<sup>/</sup>   •			0.
									6	172.
							_ <del>`</del>			0.
									6	172.
	mor subtract this it had the	7 0 0 1000, onto					·   •			
·	and 2023 overpayment credited to 20	124	6a			3,400				
							_		3 .	400.
										106.
							·		2 ,	878.
1 Enter the amount of line 10 to be: Credited to 2025 estimated tax Refunded 11										
	Complete only for assets showing (i) FMV as of 12/31/69  Capital gain net income or (net capital gain or (lof gain, also enter in Part I, line 8 Part I, lin	(e) Gross sales price  (f) Depreciation allowed (or allowable)  (i) FMV as of 12/31/69  Capital gain net income or (net capital loss)  (ii) FMV as of 12/31/69  Capital gain net income or (net capital loss)  (iii) FMV as of 12/31/69  (iii) FMV as of 12/31/69  (iiii) FMV as of 12/31/69  (iv) Adjusted basis as of 12/31/69  (iii) Adjusted basis as of 12/31/69  (iii	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs, MLC Co.)  NONE  (e) Gross sales price  (f) Depreciation allowed (or allowable)  (or allowable)  (i) FMV as of 12/31/69  (i) FMV as of 12/31/69  (ii) FMV as of 12/31/69  (ii) FMV as of 12/31/69  (iii) FMV as of 12/31/69  (iv) FMV as of 12/31/6	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs, MLC Co.)  NONE  (e) Gross sales price  (f) Depreciation allowed (or allowable)  (p) Cost or other bas plus expense of sale (or allowable)  (g) Cost or other bas plus expense of sale (or allowable)  (ii) FMV as of 12/31/69  (iii) FMV as of 12/31/69  (iii) FMV as of 12/31/69  (iv) FMV as of 12	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Go.)  NONE  (e) Gross sales price  (f) Depreciation allowed (g) Cost or other basis plus expense of sale  Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.  (i) FMV as of 12/31/69  (i) Adjusted basis as of 12/31/69  (ii) FMV as of 12/31/69  (iii) FMV as of 12/31/69  (iv) FMV as of 12/31/69  (iv	(e) Gross sales price  (f) Depreciation allowed (or allowable)  (g) Cost or other basis plus expense of sale  (h) Excess of cot. (i) Depreciation allowed (or allowable)  (i) FMV as of 12/31/69  (ii) FMV as of 12/31/69  (iii) FMV as of 12/31/69  (iv) FMV as of 12/31/69  (	(a) List and describe the kind(s) of properly sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs, MLC Co.)  NONE  (b) Flow acquiring 1- Purchases 1- Purchas	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)  NONE  (b) How acquired (b) How acquired (mo., da Donation  NONE  (c) Date a common stock, 200 shs. MLC Co.)  (d) Cost or other basis plus expense of sale  (e) Gross sales price  (f) Depreciation allowed (or allowable)  (g) Cost or other basis plus expense of sale  (h) Gains (Co.)  (ii) FMV as of 12/31/69  (j) Adjusted basis as of 12/31/69  (j) Adjusted basis as of 12/31/69  (j) Adjusted basis as of 12/31/69  (j) FMV as of 12/31/69  (j) Adjusted basis as of 12/31/69  (j) FMV as of 12/31/69  (j) FMV as of 12/31/69  (j) Adjusted basis as of 12/31/69  (j) FMV as of 12/31/69  (j) FMV as of 12/31/69  (j) Adjusted basis as of 12/31/69  (j) FMV as of 12/31/69  (j) Adjusted basis as of 12/31/69  (j) FMV as of 12/31/69  (j) Adjusted basis as of 12/31/69  (j) FMV as of 12/31/69  (j) FX Excess of col. (j) cover col. (j), if any  (l) Gains (Co.)  (k), but no cover col. (j), if any  2 let short-term capital gain or (loss) as defined in sections 122(5) and (6); cover col. (j), if any  2 art Line 8  It exempt operating foundations described in section 4940(4)(2), check here and enter TWA on line 1, and the domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4.39% (0.0139) of line 27b. Exempt foreign organizations, enter -0-)  All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter -0-)  Add lines 1 and 2  Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  4 Condition of the control of the cont	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs, MLC Co.)  NONE  (b) How acquired by Furchase (mos., day, yr.)  NONE  (c) Gross sales price (d) Depreciation allowed (or allowable) (or allowable) (f) Depreciation allowed (or allowable) (or allowable) (f) FMV as of 12/31/69 (ii) Adjusted basis as of 12/31/69 (iii) Adjusted basis (iv) Over col. (ii), if any (iii) FMV as of 12/31/69 (iii) Adjusted basis (iv) Over col. (iii), if any (iii) FMV as of 12/31/69 (iii) Adjusted basis (iv) Over col. (iii) over col. (iii) as of 12/31/69 (iii) Adjusted basis (iv) Over col. (iii) over col. (iii) as of 12/31/69 (iii) Adjusted basis (iv) Over col. (iii) over col. (iii) as of 12/31/69 (iii) Adjusted basis (iv) Over col. (iii) any (iii) FMV as of 12/31/69 (iii) Adjusted basis (iv) Over col. (iii) any (iii) FMV as of 12/31/69 (iii) Adjusted basis (iv) Over col. (iii) Adjusted basis (iv) Adjusted basis (iv) Over col. (iii) Adjusted basis (iv) Over col. (iii) Adjusted basis (iv) Over col. (iii) Adjusted basis (iii) Adj	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brief warefolous), or common stock, 200 sls. MLC Co.)  NONE  NONE  (b) How acquired (co.) Date acquired (ms., disy, yr.) (ms

4.	Diving the terrine wild the fermidation attends to influence and national state or level legislation and id it continues as intervene in	Т	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	X
	any political campaign?	1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		<u> </u>
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.	4		v
	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation \$ O . (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. \$0.			37
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
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
	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		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	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		X
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 2024 or the tax year beginning in 2024? See the instructions for Part XIII. If "Yes," complete Part XIII	9		X
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	
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	11		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address WWW.AVANGRID.COM			
14	The books are in care of THE FOUNDATION Telephone no. (203)		<u>-64</u>	<u>57                                    </u>
	Located at 180 MARSH HILL ROAD, ORANGE, CT ZIP+4 06	<u>477</u>		
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	N	/A	
16	At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority over a bank,		Yes	-
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filling requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
	Fo	rm <b>99</b> (	)-PF	(2024)

Part VI-B	Statements Regarding Activities for Which Form 4720 May Be Required				
File Form	4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
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?	<b>_</b> :	1a(1)		X
(2) Borrov	money from, lend money to, or otherwise extend credit to (or accept it from)				
a disqı	ialified person?		1a(2)		X
(3) Furnis	n goods, services, or facilities to (or accept them from) a disqualified person?		1a(3)		X
<b>(4)</b> Pay co	mpensation to, or pay or reimburse the expenses of, a disqualified person?		1a(4)		X
	er any income or assets to a disqualified person (or make any of either available				
for the	benefit or use of a disqualified person)?	L	1a(5)		X
(6) Agree	to pay money or property to a government officia <b>l?</b> ( <b>Exception.</b> Check "No"				
	oundation agreed to make a grant to or to employ the official for a period after				
	ation of government service, if terminating within 90 days.)		1a(6)		X
	er is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations				
section 53.	4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	1b		
	ns relying on a current notice regarding disaster assistance, check here	🔲 📗			
	ndation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
	irst day of the tax year beginning in 2024?		1d		X
2 Taxes on fa	ilure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
	ection 4942(j)(3) or 4942(j)(5)):				
	of tax year 2024, did the foundation have any undistributed income (Part XII, lines				
	for tax year(s) beginning before 2024?		2a		X
If "Yes," list					
	ny years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect				
	assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	37/3			
		N/A	2b		
c If the provi	sions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.				
	ndation hold more than a 2% direct or indirect interest in any business enterprise at any time				37
during the			3a		X
	it have excess business holdings in 2024 as a result of (1) any purchase by the foundation or disqualified persons after				
	69; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispos	е			
	acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	NT / 7	01		
	, to determine if the foundation had excess business holdings in 2024.)		3b		X
	ndation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		$\triangle$
	ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		46		х
nau not bee	en removed from jeopardy before the first day of the tax year beginning in 2024?		4b	)-PF	
		Form	100	/-F F	(2024)

423541 12-06-24

Form 990-PF (2024) AVANGRID FOUNDATION, INC.  Part VI-B   Statements Regarding Activities for Which F	orm 4720 May Be R		13-4200	689	1	⊃age <b>6</b>
5a During the year, did the foundation pay or incur any amount to:	onn 4720 May Be n	equired (contin	uea)		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1.4945(e)\?			5a(1)		X
(2) Influence the outcome of any specific public election (see section 4955); or				<u> </u>		
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)		_X_
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or				
the prevention of cruelty to children or animals?				5a(5)		_X_
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und			3T / 3			
section 53,4945 or in a current notice regarding disaster assistance? See instru				5b		
c Organizations relying on a current notice regarding disaster assistance, check h						
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr			NT / 7\	5d		
expenditure responsibility for the grant?				əu		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	nav pramiume on					
a personal benefit contract?				6a		Х
<b>b</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.	orderial benefit dentitation .					
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?			7a		Х
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu				7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$						
excess parachute payment(s) during the year?				8		Х
Part VII Information About Officers, Directors, Truster Paid Employees, and Contractors	es, Foundation Mai	nagers, High <b>l</b> y				
1 List all officers, directors, trustees, and foundation managers and the	neir compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions t employee benefit pla and deferred	0	<b>(e)</b> Exp	enșe
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	" a	ècount, allowa	
		,	, , , , , ,			
SEE STATEMENT 9		0.	0	•		0.
Compensation of five highest-paid employees (other than those incl	luded on line 1). If none	nter "NONE "				
2 Compensation of the highest-paid employees (other than those inc	(b) Title, and average	I NONE.	(d) Contributions t employee benefit pla	0	<b>(e)</b> Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deterred	l a	ccount, allowa	other
NONE	devoted to position		compensation	+	anowa	1003
110212						
				Щ.		
Total number of other employees paid over \$50,000						0
			Foi	m <b>99</b> 0	J-PF	(2024)

Part VII	Information About Officers, Directors, Trustees, Foundation Ma Paid Employees, and Contractors (continued)	nagers, Highly	
3 Five hig	hest-paid independent contractors for professional services. If none, enter "NONE."	1	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	NONE		
Total number	er of others receiving over \$50,000 for professional services		0
Part VIII	-A Summary of Direct Charitable Activities		
List the four	ndation's four largest direct charitable activities during the tax year. Include relevant statistical inforn organizations and other beneficiaries served, conferences convened, research papers produced, etc.	nation such as the	Expenses
	N/A		
	11/ 11		
2			
3			
4			
	-B   Summary of Program-Related Investments		
Describe the	e two largest program-related investments made by the foundation during the tax year on lines 1 and	12.	Amount
1	N/A		
2			
	ogram-related investments. See instructions.		
3			
Total. Add	lines 1 through 3		0.

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	5,489,213.
C	Fair market value of all other assets (see instructions)	1c	2,350,000.
	Total (add lines 1a, b, and c)	1d	7,839,213.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	7,839,213.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	117,588.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	7,721,625.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	386,081.
P	Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations	and certain	
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	386,081.
2a	Tax on investment income for 2024 from Part V, line 5  2a 6,172.		
b	Income tax for 2024. (This does not include the tax from Part V.)		
C	Add lines 2a and 2b	2c	6,172.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	379,909.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	379,909.
P	art XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	3,495,479.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b		3b	
4		4	3,495,479.

### Part XII Undistributed Income (see instructions)

	(a) Corpus	( <b>b)</b> Years prior to 2023	(c) 2023	( <b>d)</b> 2024
1 Distributable amount for 2024 from Part X,	Corpus	rears prior to 2023	2023	2024
line 7				379,909.
2 Undistributed income, if any, as of the end of 2024:				
a Enter amount for 2023 only			0.	
b Total for prior years:				
, , , , , , , , , , , , , , , , , , ,		0.		
3 Excess distributions carryover, if any, to 2024:				
<b>a</b> From 2019 2,099,926. <b>b</b> From 2020 3,303,014.				
d From 2022 2, 255, 585. d From 2022 3, 717, 757.				
1 2 2 7 4 0 2 6				
f Total of lines 3a through e	13,750,318.			
4 Qualifying distributions for 2024 from	25775675251			
Part XI, line 4: \$ 3,495,479.				
<b>a</b> Applied to 2023, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
<b>d</b> Applied to 2024 distributable amount				379,909.
e Remaining amount distributed out of corpus	3,115,570.			
5 Excess distributions carryover applied to 2024 (If an amount appears in column (d), the same amount must be shown in column (a),)	0.			0.
6 Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	16,865,888.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable		_		
amount - see instructions		0.		
e Undistributed income for 2023. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2024. Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2025				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2019				
not applied on line 5 or line 7	2,099,926.			
9 Excess distributions carryover to 2025.	, ,			
Subtract lines 7 and 8 from line 6a	14,765,962.			
10 Analysis of line 9:				
<b>a</b> Excess from 2020 3,303,014.				
<b>b</b> Excess from 2021 <b>2</b> , 255 , 585 .				
c Excess from 2022 3,717,757.				
d Excess from 2023 2,374,036.				
e Excess from 2024 3,115,570.				222.5-
				Earm <b>990-PF</b> (2024)

423581 12-06-24

Part XIII Private Operating Fo	undations (see ins	structions and Part V	I-A, question 9)	N/A	· · · · · · · · · · · · · · · · · · ·
1 a If the foundation has received a ruling or	determination letter that	it is a private operating			
foundation, and the ruling is effective for	2024, enter the date of the	he ru <b>l</b> ing			
<b>b</b> Check box to indicate whether the foundate				4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	,,,,, <u> </u>	
income from Part I or the minimum	(a) 2024	<b>(b)</b> 2023	(c) 2022	(d) 2021	(e) Total
investment return from Part IX for					
each year listed					
<b>b</b> 85% (0.85) of line 2a <b>c</b> Qualifying distributions from Part XI,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e 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:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part IX, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(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			:6 41a a .6 a al a 4: a . a . l	 	
Part XIV Supplementary Infor			if the foundation r	iad \$5,000 or mor	e in assets
at any time during th	e year-see mstrt	actions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation who			tributions received by the f	oundation before the c <b>l</b> ose	of any tax
year (but only if they have contributed me	ore man \$5,000). (See se	ection 507(a)(2).)			
NONE					
<b>b</b> List any managers of the foundation who			(or an equally large portion	n of the ownership of a par	tnership or
other entity) of which the foundation has	a 10% or greater interes	t <b>.</b>			
NONE					
2 Information Regarding Contribution	n, Grant, Gift, Loan,	Scholarship, etc., P	rograms:		
Check here if the foundation	only makes contribution:	s to prese <b>l</b> ected charital	ole organizations and does	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc., t	o individua <b>l</b> s or organiza	tions under other condi	tions, comp <b>l</b> ete items 2a, b	, c, and d.	
<b>a</b> The name, address, and telephone number	er or email address of the	e person to whom app <b>l</b> i	cations should be addresse	ed:	
- , , , , , ,					
SEE STATEMENT 10					
<b>b</b> The form in which applications should be	submitted and informat	ion and materials they s	hould include:		
2 re applications critical be	Sasimiles and mierman	.s and materials troy c			
c Any submission deadlines:					
• Any Submission deadines.					
<b>d</b> Any restrictions or limitations on awards,	euch as hy geographics	l areae icharitable fielde	kinds of institutions or o	ther factors	
u mily resultations of initiations on awaltus,	suon as ny yeograpilica	i ai cas, unantable nelus	, ռուսծ σι πιδιπαποπό, θΕ θ	1401015.	

Supplementary information	(continued)			
3 Grants and Contributions Paid During the		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
ALPHA COMMUNITY SERVICES 1240 CHAPEL STREET NEW HAVEN, CT 06511	NONE	PC	COMMUNITY PROGRAMS	20,000.
AMERICAN ONLINE GIVING /BENEVITY 200 MAIN STREET SAFE HARBOR, FL 34695	NONE	PC	COMMUNITY PROGRAMS	583,479.
AMERICAN RED CROSS - 209 FARMINGTON AVE	NONE	₽C	COMMUNITY PROGRAMS	050.000
FARMINGTON, CT 06032				250,000.
AMERICARES 88 HAMILTON AVE	NONE	PC	COMMUNITY PROGRAMS	
STAMFORD, CT 06902				25,000.
BARRINGTON STAGE COMPANY 30 UNION ST	NONE	PC	ARTS & CULTURE	45,000
Total SEE CO	_  NITTNIINTTAN CUEE	  m/c\	0-	15,000. 3,495,479.
b Approved for future payment	NIINOAIION SHEE	11.15.7	3a	3,433,473.
NONE				
Total				0.
				orm <b>990-PF</b> (2024)

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

Enter gross amounts unless otherwise indicated.	Unre <b>l</b> ate	ed business income		ded by section 512, 513, or 514	(e)
	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
a					
b					
С					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	273,490.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property			16	177,321.	
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
С					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		450,811.	
13 Total. Add line 12, columns (b), (d), and (e)				13	450,811.
(See worksheet in line 13 instructions to verify calculations.)					

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

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

#### AVANGRID FOUNDATION, INC. Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

1	Did the	e organization direct <b>l</b> y or indir	rect <b>l</b> y engage in any	of the followin	g with any other organizat	tion described in sect	ion 501(c)		Yes	No
	(other	than section 501(c)(3) organ	izations) or in section	on 527, re <b>l</b> ating	to political organizations?	?				
a	Transfe	ers from the reporting founda	ation to a noncharita	ıble exempt org	ganization of:					
	(1) Ca	ash						1a(1)		Х
		ther assets								Х
b		transactions:								
	(1) Sa	ales of assets to a noncharital	ble exempt organiza	tion				1b(1)		Х
		urchases of assets from a nor								Х
		ental of facilities, equipment,								Х
		eimbursement arrangements								Х
		oans or loan guarantees								Х
	(6) Pe	erformance of services or me	mbership or fundrai	sing solicitatio	ns			1b(6)		Х
c		g of faci <b>l</b> ities, equipment, ma								Х
		answer to any of the above is							ets	
•		vices given by the reporting fo			• •				0.0,	
		n <b>(d)</b> the va <b>l</b> ue of the goods,			ou 1000 than han market val	lao in any tranoaotro.	. or onaring arrain	gomoni, onon m		
(a)∟	ine no.	(b) Amount involved			e exempt organization	(d) Descriptio	n of transfers, transa	ctions, and sharing arra	ıngemer	nts
<del>`                                    </del>		( )	. ,	N/A			·			
	<u> </u>									
	<u> </u>									
	<u> </u>									
	Is the f	foundation directly or indirect	l Ny affiliated with or	related to one	or more tax-exempt organ	nizations described				
Lu		ion 501(c) (other than section						Yes	X	No
h		," comp <b>l</b> ete the following sch								
	11 100,	(a) Name of org			(b) Type of organization		(c) Description of	of relationship		
		N/A			(5)		(0)			
						1				
						1				
						1				
	l	Jnder penalties of perjury, I declare	that I have examined th	nis return, includin	ı g accompanying schedules and	d statements, and to the b	pest of my knowledge	e Marrier IDO	ioov '	hio
Sig	an la	and belief, it is true, correct, and co	mplete. Declaration of p	reparer (other than	n taxpayer) is based on all infor	mation of which preparer	has any knowledge.	return with the	prepare	er
Hè					1	PRESIDE	ידע	shown below'  X Yes	See Ins	No
	5	Signature of officer or trustee			Date	Title				_ 140
		Preparer's name		Preparer's si		Date	Check i	f PTIN		
		· · · · · · · · · · · · · · · · · · ·	EELER,	" " " " " " " " " " " " " " " " " " "	<u> </u>	" "	self-employed			
Pa	id	CPA	,	TESSE .	J. WHEELER,	10/07/25	1 7	P00187	533	
Pr	epare		DSON, FOX				Firm's EIN 1	5-054472		
	e On	1 11 111 0 11 a 1110		. a com			I IIIII 3 LIIV I	.5 554472	-	
		-	LEWIS ROA	\D						
			GHAMTON,		0.5		Phone no. 6	07-722-5	386	
		, DIN			<del></del>		I Hone Ho. O	Form <b>99</b> (		(2024)

423622 12-06-24

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)	_		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
BEADSLEY ZOO	NONE	PC	BIODIVERSITY & CLIMATE	
1875 NOBLE AVE			CHANGE	
BRIDGEPORT, CT 06610				40,000.
BINGHAMTON PHILHARMONIC	NONE	PC	ARTS & CULTURE	
71 STATE STREET LOWER LEVEL BINGHAMTON, NY 13901				15,000.
Principalities, NI 18301				13,000.
BINGHAMTON UNIVERSITY - WATSON SCHOOL PO BOX 6005	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	
BINGHAMTON, NY 13902			HIGHER EDUCATION	50,000.
BRIDGEPORT CARIBE YOUTH LEADERS	NONE	PC	COMMUNITY PROGRAMS	
595 MADISON AVE	NONE		COMMUNITI FROGRAMS	
BRIDGEPORT, CT 06604				50,000.
DROOME COUNTY COUNTY OF CHUIDAUEC	NONE	DG.	COMMINITARY PROGRAMO	
BROOME COUNTY COUNCIL OF CHURCHES - CHOW	NONE	PC	COMMUNITY PROGRAMS	
3 OTSENINGO ST				
BINGHAMTON, NY 13903				50,000.
CAMP SUNSHINE	NONE	PC	COMMUNITY PROGRAMS	
35 ACADIA RD				E 000
CASCO, ME 04015				5,000.
CAREER RESOURCES 1000 LAFAYETTE BLVD STE 303	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	
BRIDGEPORT, CT 06604			HIGHER EDUCATION	25,000.
·				,
CAROLINE HOUSE	NONE	P.C	COMMINITAL BEOCESSES	
574 STILLMAN STREET	NONE	PC	COMMUNITY PROGRAMS	
BRIDGEPORT, CT 06608				20,000.
CATALYST CT PARTK CITY PATHWAYS	NONE	PC	TRAINING, RESEARCH &	
2470 FAIRFIELD AVE			HIGHER EDUCATION	
BRIDGEPORT, CT 06605				50,000.
CENTER FOR LATINO PROGRESS	NONE	PC	COMMUNITY PROGRAMS	
95 PARK ST				60.00-
HARTFORD, CT 06106				20,000.
Total from continuation sheets				2,002,000.

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Ye	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	33.11.13.31.61.	
CENTER FOR WILDLIFE PO BOX 620	NONE	PC	BIODIVERSITY & CLIMATE	
CAPE NEDDICK, CT 03602				15,000.
CENTRAL NEW MEXICO COMMUNITY COLLEGE 525 BUENA VISTA SE ALBUQUERQUE, NM 87106	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	50,000.
CITY OF NEW HAVEN - ELM CITY ROBOTICS 200 ORANGE STREET NEW HAVEN, CT 06510	NONE	PC	COMMUNITY PROGRAMS	5,000.
COLUMBIA GORGE COMMUNITY COLLEGE FOUNDATION 400 EAST SCENIC DR	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	
THE DALLES, OR 97058				10,000.
CONNECT US BRIDGEPORT 1000 LAFAYETTE BLVD, 2ND FLOOR BRIDGEPORT, CT 06604	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	10,000.
CONNECTICUT INVENTION CONVENTION PO BOX 230311 HARTFORD, CT 06123	NONE	PC	COMMUNITY PROGRAMS	10,000.
CONNECTICUT PUBLIC BROADCASTING 1049 ASYLUM AVE HARTFORD, CT 06105	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	50,000.
CORNELL COOPERATIVE EXTENSION 2449 ST PAUL BLVD ROCHESTER, NY 14617	NONE	PC	COMMUNITY PROGRAMS	40,000.
DISTRICT ARTS & EDUCATION 470 JAMES STREET, SUITE 001 NEW HAVEN, CT 06513	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	50,000.
FARFIELD COUNTY'S COMMUNITY FOUNDATION 40 RICHARDS AVE	NONE	PC	COMMUNITY PROGRAMS	
NORWALK, CT 06854				25,000.
Total from continuation sheets				

Part XIV Supplementary Information				
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	35/11/15/11/19	
FEEDING AMERICA	NONE	PC	COMMUNITY PROGRAMS	
161 N. CLARK ST, SUITE 700 CHICAGO, IL 60601				150 000
CHICAGO, III 00001				150,000.
FOUNDATION FOR MAINES COMMUNITY	NONE	PC	TRAINING, RESEARCH &	
COLLEGE 54 LIGHTHOUSE CIRCLE			HIGHER EDUCATION	
SOUTH PORTLAND, ME 04106				50,000.
GLADYS ALLEN BRIGHAM COMMUNITY CENTER	NONE	PC	COMMUNITY PROGRAMS	
- GIRLS, INC OF THE BERKSHIRES				
165 EAST STREET				15 000
PITTSFIELD, MA 01201				15,000.
GULF OF MAINE RESEARCH INSTITUTE 350 COMMERCIAL STREET	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	
PORTLAND, ME 04101				50,000.
HABITAT FOR HUMANITY INTERNATIONAL	NONE	PC	COMMUNITY PROGRAMS	
121 HABITAT ST AMERICUS, GA 31709				135,000.
AMERICOS, GA 31703				
HANGOGY GUAYED WILLAGE	NONE	₽C	ADMG C GILLMIDE	
HANCOCK SHAKER VILLAGE P.O. BOX 927	NONE	FC	ARTS & CULTURE	
PITTSFIELD, MA 01201				10,000.
HANDS ON HARTFORD	NONE	PC	COMMUNITY PROGRAMS	
55 BARTHOLOMEW AVENUE HARTFORD, CT 06106				20,000.
HANGAR THEATER	NONE	₽C	ARTS & CULTURE	
801 TAUGHANNOCK BLVD	NONE		AKIS & COLIOKE	
OTHACA, NY 14850				10,000.
HAWKS A LOFT	NONE	PC	BIODIVERSITY & CLIMATE	
6715 EAGLE ROCK AVE, NE, SUITE A ALBUQUERQUE, NM 87113			CHANGE	30,000.
				<u>,</u>
HENRY FORD MUSEUM	NONE	PC	COMMUNITY PROGRAMS	
20900 OAKWOOD BLVD.				
DEARBORN, MI 48124				50,000.
Total from continuation sheets				

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the		Τ		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome of business)	or substantial contributor	recipient	+	
JODIJANA DDIDAHDODA	NONE	DG.	GOMITHIES PROGRAMG	
HORIZONS BRIDGEPORT	NONE	PC	COMMUNITY PROGRAMS	
BRIDGEPORT, CT 06604				20,000
SKIDGEFORT, CT 00004				20,000
JOBS FOR MAINE'S GRADUATES, INC.	NONE	PC	COMMUNITY PROGRAMS	
45 COMMERCE DR., SUITE 9	NONE			
AUGUSTA, ME 04430				25,000
KALAMAZOO COMMUNITY COLLEGE	NONE	₽C	TRAINING, RESEARCH &	
FOUNDATION	NOINE	PC	HIGHER EDUCATION	
6767 WEST O AVENUE			HIGHER EDUCATION	
KALAMAZOO, MI 49003				10,000
KENNEBEC VALLEY COMMUNITY COLLEGE	NONE	PC	TRAINING, RESEARCH &	
FOUNDATION			HIGHER EDUCATION	
92 WESTERN AVE				
FAIRFIELD, ME 04937				10,000
LAKE REGION COMMUNITY COLLEGE	NONE	PC	TRAINING, RESEARCH &	
FOUNDATION			HIGHER EDUCATION	
1801 COLLEGE DR N				
DEVILS LAKE, ND 58301				10,000
LIBERTY WILDLIFE	NONE	PC	BIODIVERSITY & CLIMATE	
2600 E ELWOOD ST			CHANGE	
PHOENIX, AZ 85040				15,000
MAHAIWEE PERFORMING ARTS	NONE	PC	ARTS & CULTURE	
PO BOX 690 GREAT BARRINGTON, MA 01230				10,000
MILIT BARKINGTON, MI 01230				10,000
MAINE DEVELOPMENT FOUNDATION	NONE	DG.	TDAINING DEGEADOU C	
2 BEECH STREET, SUITE 203	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	
HALLOWELL, ME 04347			III III III III III III III III III II	50,000
MAINE GENERAL MEDICAL CENTER	NONE	₽C	COMMUNITY PROGRAMS	
35 MEDICAL CENTER PARKWAY			SSIMISMIT INCOMIND	
AUGUSTA, ME 04330				25,000
MALTA HOUSE OF CARE	NONE	₽C	COMMUNITY PROGRAMS	
136 FARMINGTON AVE				00 000
HARTFORD, CT 06105  Total from continuation sheets			1	20,000

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the \	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	3311112211311	
MARINE MAMMALS OF MAINE	NONE	PC	BIODIVERSITY & CLIMATE	
PO BOX 751			CHANGE	
BATH, ME 04530				10,000.
MASSACHUSETTS MUSEUM OF CONTEMPORARY	NONE	PC	ARTS & CULTURE	
ART				
1040 MASS MOCA WAY				
NORTH ADAMS, MA 01247				10,000.
MASSACHUSETTES AUDUBON	NONE	PC	BIODIVERSITY & CLIMATE	
208 SOUTH GREAT RD			CHANGE	
LINCOLN, MA 01773				20,000.
MONROE COMMUNITY COLLEGE FOUNDATION	NONE	PC	TRAINING, RESEARCH &	
1057 EAST HENRIETTA ROAD			HIGHER EDUCATION	
ROCHESTER, NY 14623				50,000.
NATIONAL MARINE LIFE CENTER	NONE	PC	BIODIVERSITY & CLIMATE	
PO BOX 269			CHANGE	
BUZZARDS BAY, MA 02532				47,000.
NEW BEGINNINGS	NONE	PC	COMMUNITY PROGRAMS	
134 COLLEGE STREET				
LEWISTON, ME 04240				15,000.
NEW HAVEN PROMISE - BRIDGEPORT	NONE	PC	TRAINING, RESEARCH &	
PROMISE			HIGHER EDUCATION	
28 LINCOLN WAY				
NEW HAVEN, CT 06510				100,000.
NOURISH BRIDGEPORT	NONE	PC	COMMUNITY PROGRAMS	
PO BOX 1859				F0 000
BRIDGEPORT, CT 06604				50,000.
OJAI RAPTOR CENTER	NONE	PC	BIODIVERSITY & CLIMATE	
P.O. BOX 182			CHANGE	15 000
OAK VIEW, CA 93022			+	15,000.
ORANGE COUNTY BIRDS OF PREY	NONE	PC	BIODIVERSITY & CLIMATE	
25422 TRABUCO RD #105-541 LAKE FOREST, CA 92630			CHANGE	35,000.
		1	l	

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)	_		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
OREGON CHILDREN'S FOUNDATION - START MAKING A READER TODAY (SMART)	NONE	₽C	COMMUNITY PROGRAMS	
101 SW MARKET ST				
PORTLAND, OR 97201				57,000.
OREGON ZOO FOUNDATION	NONE	PC	BIODIVERSITY & CLIMATE	
4001 SW CANYON ROAD			CHANGE	
PORTLAND, OR 97221				30,000.
DENBUGUI VIANTA DAM DEGGUE	NONE		DIODIUS GILLANDE	
PENNSYLVANIA BAT RESCUE 42 HIGH VIEW LANE	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	
MERTZTOWN, PA 19539			CHANGE	10,000.
maniform, in 1988				10,000.
PINE TREE SOCIETY	NONE	PC	TRAINING, RESEARCH &	
149 FRONT STREET			HIGHER EDUCATION	
BATH, ME 04530				25,000.
PORTLAND MUSEUM OF ART	NONE	PC	ARTS & CULTURE	
7 CONGRESS SQ				
PORTLAND, ME 04101				10,000.
POSSUMWOOD ACRES WILDLIFE SANCTUARY 119 DOE DRIVE	NONE	PC	BIODIVERSITY & CLIMATE	
HUBERT, NC 28539			CHANGE	20,000.
noseki, no eosos				20,000.
PREBLE STREET	NONE	₽C	COMMUNITY PROGRAMS	
38 PREBLE STREET				
PORTLAND, ME 04101				50,000.
RED CREEK WILDLIFE	NONE	PC	BIODIVERSITY & CLIMATE	
300 MOONHILL DR			CHANGE	
SCHUYKILL HAVEN, PA 17972				13,000.
DOGUECINED MIGRITUAND GOTTINGS GOVERN	MONE	D.C.	DIODIVEDGIMV C GIIVAM	
ROCHESTER MUSEUM AND SCIENCE CENTER 657 EAST AVE	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	
ROCHESTER, NY 14607			S.m.101	20,000.
				,
RONALD MCDONALD HOUSE CHARITIES OF	NONE	PC	COMMUNITY PROGRAMS	
NEW YORK - ROCHESTER				
333 WESTMORELAND DRIVE				
ROCHESTER, NY 14620		1		50,000.
Total from continuation sheets				

Part XIV Supplementary Information				
3 Grants and Contributions Paid During the Yo	ear (Continuation)			
Recipient  Name and address (home or business)	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)	any foundation manager or substantial contributor	recipient		
RONALD MCDONALD HOUSE CHARITIES OF	NONE	₽C	COMMUNITY PROGRAMS	
PORTLAND & BANGOR				
250 BRACKETT STREET				
PORTLAND, ME 04102				50,000.
RONALD MCDONALD HOUSES CHARITIES OF	NONE	₽C	COMMUNITY PROGRAMS	
CONNECTICUT & WESTERN MASSACHUSETTS	NONE.			
860 HOWARD AVE				
NEW HAVEN, CT 06519				50,000.
DOMENTA WILDLIEF CLINIC	NONE	₽C	BIODIVERSITY & CLIMATE	
ROWENA WILDLIFE CLINIC 6900 HIGHWAY 30	NONE		CHANGE	
THE DALLES, OR 97058				10,000.
SAVING OUR AVIAN RESOURCES	NONE	PC	BIODIVERSITY & CLIMATE	
25494 320TH STREET DEDHAN, IA 51440			CHANGE	10,000.
BEBERN, IN STATE				10,000.
SHARON AUDUBON CENTER	NONE	PC	BIODIVERSITY & CLIMATE	
325 CORNWALL BRIDGE RD			CHANGE	
SHARON, CT 06069				20,000.
STERLING HOUSE COMMUNITY CENTER	NONE	PC	COMMUNITY PROGRAMS	
2283 MAIN ST				
STRATFORD, CT 06615				10,000.
SULLIVAN CATSKILLS REGIONAL FOOD - A	NONE	₽C	COMMUNITY PROGRAMS	
SINGLE BITE				
92 COMMERCE DRIVE				
LIBERTY, NY 12754				20,000.
THE CENTER FOR YOUTH	NONE	₽C	COMMUNITY PROGRAMS	
905 MONROE AVE				
ROCHESTER, NY 14620				40,000.
THE KLEIN	NONE	₽C	ARTS & CULTURE	
910 FAIRFIELD AVE	NOME		ELLIS & COULURE	
BRIDGEPORT, CT 06605				10,000.
				-
TRINITY JUBILEE CENTER	NONE	PC	COMMUNITY PROGRAMS	
247 BATES STREET LEWISTON, ME 04240				50,000.
Total from continuation sheets	1	ı	<del>'</del>	30,000.

Part XIV Supplementary Informatio	n			
3 Grants and Contributions Paid During the	Year (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		
TRUST FOR PUBLIC LAND 101 MONTGOMERY ST., 9TH FLOOR SAN FRANSISCO, CA 94104	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	100,000.
UNITED WAY BROOME COUNTY P.O. BOX 550 BINGHAMTON, NY 13902	NONE	₽C	COMMUNITY PROGRAMS	20,000.
UNIVERSITY OF MAINE TWO ALUMNI PLACE ORONO, ME 04469	NONE	₽C	TRAINING, RESEARCH & HIGHER EDUCATION	10,000.
URBAN LEAGUE OF ROCHESTER 265 N CLINTON AVE ROCHESTER, NY 14605	NONE	PC	TRAINING, RESEARCH & HIGHER EDUCATION	50,000.
VETERANS ADAPTIVE SPORTS & TRAINING (VAST), PINELAND FARMS 32 FARM VIEW DRIVE NEW GLOUCESTER, ME 04260	NONE	PC	COMMUNITY PROGRAMS	10,000.
VOLUNTEERS IMPROVING NEIGHBORHOOD ENVIRONMENTS - VINES PO BOX 3104 BINGHAMTON, NY 13902	NONE	PC	COMMUNITY PROGRAMS	25,000.
WHISPERING WILLOW WILD CARE 3558 CARMAN RD SCHENECTADY, NY 12303	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	15,000.
WILD WINGS 27 POND RD HONEOYE FALLS, NY 14472	NONE	₽C	BIODIVERSITY & CLIMATE CHANGE	30,000.
WILDLIFE REHABILITATORS ASSOCIATION OF RHODE ISLAND 2865 TOWER HILL RD SAUNDERSTOWN, RI 02874	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	25,000.
WILL STEGER FOUNDATION - CLIMATE CHANGE GENERATION 2801 21ST AVE SOUTH, SUITE 110	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	
MINNEAPOLIS, MN 55407  Total from continuation sheets		<u> </u>		30,000.

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient NONE COMMUNITY PROGRAMS YALE NEW HAVEN HEALTH - BRIDGEPORT PC HOSPITAL 267 GRANT ST BRIDGEPORT, CT 06610 35,000. YALE UNIVERSITY PEABODY MUSEUM NONE PC COMMUNITY PROGRAMS 170 WHITNEY AVE NEW HAVEN, CT 06520 40,000. Total from continuation sheets

#### Schedule B (Form 990)

**Schedule of Contributors** 

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Name of the organization

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

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 527 political organization 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).

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

Schedule B (Form 990) (Rev. 12-2024)

Name of organization Employer identification number

#### AVANGRID FOUNDATION, INC.

13-4200689

(a) No. 1	(b) Name, address, and ZIP + 4  AVANGRID RENEWABLES  2701 NW VAUGH STREET, SUITE 300  PORTLAND, OR 97210  (b) Name, address, and ZIP + 4  NEW YORK STATE ELECTRIC AND GAS	(c) Total contributions  \$ 550,000.  (c) Total contributions	(d) Type of contribution  Person X Payroll
(a)	2701 NW VAUGH STREET, SUITE 300  PORTLAND, OR 97210  (b)  Name, address, and ZIP + 4	(c)	Payroll
	Name, address, and ZIP + 4		(d)
	NEW YORK CHAME ELECTRIC AND CAC		Type of contribution
2	P.O. BOX 5224 BINGHAMTON, NY 13902	\$500,000.	Person X Payroll
(a) No.	(b) Name, address, and <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution
3	CENTRAL MAINE POWER COMPANY  83 EDISON DRIVE  AUGUSTA, ME 04332	\$300,000.	Person X Payroll
(a)	(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 <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution
5	BERKSHIRE GAS CO  115 CHESHIRE ROAD  PITTSFIELD, MA 01201	\$ 50,000.	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
6	UNITED ILLUMINATING COMPANY  100 MARSH HILL ROAD  ORANGE, CT 06477	\$	Person X Payroll

## 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 <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution
7	AVANGRID REAL ESTATE SERVICES  83 EDISON DRIVE  AUGUSTA, ME 04336	\$\$	Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution
8	CONNECTICUT NATURAL GAS COMPANY 76 MEADOW ST EAST HARTFORD, CT 06108	\$\$	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
9 (a)	SOUTHERN CONNECTICUT GAS COMPANY  60 MARSH HILL ROAD  ORANGE, CT 06477	\$ 104,390.	Person X Payroll
No.	Name, address, and ZIP + 4	Total contributions  \$	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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

### AVANGRID FOUNDATION, INC.

13-4200689

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(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. 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. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		     \$	

Employer identification number

Name of organization

13-4200689 AVANGRID FOUNDATION, 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 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 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 Relationship of transferor to transferee

# Form **2220**Department of the Treasury

Internal Revenue Service

AVANGRID FOUNDATION, INC.

### **Underpayment of Estimated Tax by Corporations**

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

FORM 990-PF

OMB No. 1545-0123

Name

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
1	Total tax (see instructions)					1	6,172.
2	a Personal holding company tax (Schedule PH (Form 1120), lin	e 26)	included on line 1	2a	1		
	<b>b</b> Look-back interest included on line 1 under section 460(b)(2)						
	contracts or section 167(g) for depreciation under the income			2b			
	(6)		***************************************				
	c Credit for federal tax paid on fuels (see instructions)			20			
	d Total. Add lines 2a through 2c					2d	
	Subtract line 2d from line 1. If the result is less than \$500, do						
	does not owe the penalty					3	6,172.
4	Enter the tax shown on the corporation's 2023 income tax reti	urn. S	ee instructions. Caution:	If the tax is zero			
	or the tax year was for less than 12 months, skip this line and	enter	the amount from line 3 $\sigma$	n line 5		4	6,423.
5	Required annual payment. Enter the smaller of line 3 or line	4. If t	he corporation is required	d to skip line 4,			
_	enter the amount from line 3					5	6,172.
	Part II Reasons for Filing - Check the boxes below	w tha	t app <b>l</b> y. If any boxes are c	checked, the corp	oration	must file Form 2220	
_	even if it does not owe a penalty. See instructions.						
6	The corporation is using the adjusted seasonal installing						
7	The corporation is using the annualized income install						
8	The corporation is a "large corporation" figuring its fire	st requ	ured installment based or	n the prior year's	tax.		
	Part III Figuring the Underpayment						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),		05/15/04	06/15		00/15/04	10/15/04
	6th, 9th, and 12th months of the corporation's tax year	9	05/15/24	06/15/	24	09/15/24	12/15/24
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,	١١	1 542	1 5	.,,	1 5/2	1 542
	enter 25% (0.25) of line 5 above in each column	10	1,543.	1,5	43.	1,543.	1,543.
11	Estimated tax paid or credited for each period. For						
	column (a) only, enter the amount from line 11 on line 15.	ابدا	3,400.				
	See instructions	11	3,400.				
	Complete lines 12 through 18 of one column						
10	before going to the next column.	<sub>42</sub>		1 9	57.	314.	
	Enter amount, if any, from line 18 of the preceding column Add lines 11 and 12	12 13			57.	314.	
	Add amounts on lines 16 and 17 of the preceding column	14		1,0	7.	714.	1,229.
	Subtract line 14 from line 13. If zero or less, enter -0-	15	3,400.	1 8	57.	314.	0.
	If the amount on line 15 is zero, subtract line 13 from line	13	3,400.		·	711.	<u> </u>
10	14. Otherwise, enter -0-	16			0.	0.	
17	Underpayment. If line 15 is less than or equal to line 10,	10				<u> </u>	
17	subtract line 15 from line 10. Then go to line 12 of the next						
	1 00 1 10	17				1,229.	1,543.
18	Overpayment. If line 10 is less than line 15, subtract line 10					±,225•	1,343.
.0	from line 15. Then go to line 12 of the next column	18	1.857.	3	14.		

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 (2024)

LHA

412801 01-09-25

Form 2220 (2024)

#### Part IV Figuring the Penalty

_			(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. (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				
20	Number of days from due date of installment on line 9 to the					
	date shown on line 19	20				
21	Number of days on line 20 after 4/15/2024 and before 7/1/2024	21				
22	Underpayment on line 17 x Number of days on line 21 x 8% (0.08)	22	\$	\$	\$	\$
23	Number of days on line 20 after 6/30/2024 and before 10/1/2024	23				
24	Underpayment on line 17 x Number of days on line 23 x 8% (0.08)	24	\$	\$	\$	\$
25	Number of days on line 20 after 9/30/2024 and before 1/1/2025	25				
26	Underpayment on line 17 x Number of days on line 25 x 8% (0.08)	26	\$	\$	\$	\$
27	Number of days on line 20 after 12/31/2024 and before 4/1/2025	27	SEE	ATTACHED W	ORKSHEET	
28	Underpayment on line 17 x Number of days on line 27 x 7% (0,07)	28	\$	\$	\$	\$
29	Number of days on line 20 after 3/31/2025 and before 7/1/2025	29				
30	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$	\$
31	Number of days on line 20 after 6/30/2025 and before 10/1/2025	31				
32	Underpayment on line 17 x Number of days on line 31 x *% 365	32	\$	\$	\$	\$
33	Number of days on line 20 after 9/30/2025 and before 1/1/2026	33				
34	Underpayment on line 17 x Number of days on line 33 x *% 365	34	\$	\$	\$	\$
35	Number of days on line 20 after 12/31/2025 and before 3/16/2026	35				
36	Underpayment on line 17 x Number of days on line 35 x *% 365	36	\$	\$	\$	\$
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
38	Penalty. Add columns (a) through (d) of line 37. Enter the to line for other income tax returns	ta <b>l</b> he	ere and on Form 1120, <b>l</b> ir	ne 34; or the comparab <b>l</b> e	38	\$ 106

<sup>\*</sup> 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.

Form **2220** (2024)

## FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying Nun	nber
AVANGRID FO	UNDATION, IN	C.		13-420	0689
(A)	(B)	(C)	(D)	(E)	(F)
*Date	Amount	Adjusted Balance Due	Number Days Ba <b>l</b> ance Due	Daily Penalty Rate	Pena <b>l</b> ty
		-0-			
05/15/24	1,543.	1,543.			
05/15/24	-3,400.	-1,857.			
06/15/24	1,543.	-314.			
09/15/24	1,543.	1,229.	91	.000218579	24.
12/15/24	1,543.	2,772.	16	.000218579	10.
12/31/24	0.	2,772.	135	.000191781	72.
analty Dua (Com of Column	νη Γ)				106
nalty Due (Sum of Colum	ın F) <b>.</b>				<u> </u>

<sup>\*</sup> Date of estimated tax payment, withholding credit date or installment due date.

412511 04-01-24

FORM 990-PF	DIVIDENDS	AND INTE	REST	FROM SE	CUR	ITIES	ST	ATEMENT 1
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN		(A) REVENU PER BOC		(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM
JP MORGAN	273,490.		0.	273,4	90.	273,49	90.	
TO PART I, LINE 4	273,490.		0.	273,4	90.	273,49	00.	
FORM 990-PF	<del></del>	RENTAL I	NCOM:	 E		<del></del>	ST	ATEMENT 2
KIND AND LOCATION OF	PROPERTY					ACTIVITY NUMBER	RE	GROSS NTAL INCOM
ANTHONY AVE, AUGUSTA,	ME					2		256,823
TOTAL TO FORM 990-PF,	PART I, I	LINE 5A						256,823
FORM 990-PF		RENTAL EX	PENS	ES			ST	ATEMENT 3
DESCRIPTION			ACTI NUM		Al	MOUNT		TOTAL
DEPRECIATION TAXES					Al	34,936. 44,566.		TOTAL
DEPRECIATION	<b>–</b> sui	BTOTAL -			Al	34,936.		TOTAL 79,502
DEPRECIATION				BER	Al	34,936. 44,566.		
DEPRECIATION TAXES		BTOTAL -	NUM	BER	Al	34,936. 44,566.		79,502
DEPRECIATION TAXES  TOTAL RENTAL EXPENSES		BTOTAL -	NUM	2 INE 5B	Al	34,936. 44,566.	ST	79,502 79,502
DEPRECIATION TAXES  TOTAL RENTAL EXPENSES NET RENTAL INCOME TO	FORM 990-1	BTOTAL - PF, PART	NUM	2 INE 5B		34,936. 44,566.	)	79,502 79,502 177,321
DEPRECIATION TAXES  TOTAL RENTAL EXPENSES NET RENTAL INCOME TO  FORM 990-PF	FORM 990-1	BTOTAL - PF, PART  ACCOUNT  (A) EXPENSES	I, L ING	BER  2  INE 5B  FEES  (B)  I INVEST	 IE	34,936. 44,566. 0. (C) ADJUSTED	)	79,502 79,502 177,321 ATEMENT 4 (D) CHARITABL

FORM 990-PF	TAX	ES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL EXCISE TAX NYS FEE TAXES	6,198. 25. 44,566.	0. 0. 44,566.		0. 0. 0.	
TO FORM 990-PF, PG 1, LN 18	50,789.	44,566.		0.	
=					
FORM 990-PF	OTHER E	XPENSES	S	PATEMENT 6	
FORM 990-PF	OTHER E.	XPENSES	S'	TATEMENT 6	
FORM 990-PF  DESCRIPTION	OTHER E	(B) NET INVEST-	(C)	(D) CHARITABLE PURPOSES	
	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE	

FORM 990-PF DEPRECIA	TION OF ASSETS	HELD FOR INVE	STMENT	STATEMENT 7
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE	FAIR MARKET VALUE
BUILDINGS AND IMPROVEMENTS LAND	1,395,884. 354,116.	803,023.	592,861. 354,116.	
TO 990-PF, PART II, LN 11	1,750,000.	803,023.	946,977.	2,350,000.

	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 CORPORATION	3 CITY CENTER, 180 SOUTH CLINTON AVE 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	STATEMENT 9		
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
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.
JOSEPH GALVIN-LOPE 180 MARSH HILL RD ORANGE, CT 06477	3Z	SECRETARY 1.00	0.	0.	0.
JUSTIN LAGASSE 180 MARSH HILL RD ORANGE, CT 06477		DIRECTOR 1.00	0.	0.	0.
MARK CONTRERAS 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.
PABLO D. COLON 180 MARSH HILL RD ORANGE, CT 06477		EXECUTIVIE DIR	ECTOR 0.	0.	0.
MARY JACOBS 180 MARSH HILL RD ORANGE, CT 06477		PROGRAM MANAGE	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.