

For calendar year 2025 or tax year beginning , and ending

Name of foundation <b>AVANGRID FOUNDATION, INC.</b>				A Employer identification number <b>13-4200689</b>	
Number and street (or P.O. box number if mail is not delivered to street address) <b>180 MARSH HILL ROAD</b>			Room/suite	B Telephone number <b>207-688-4341</b>	
City or town <b>ORANGE</b>		State or province <b>CT</b>	Country	ZIP or foreign postal code <b>06477</b>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change				C If exemption application is pending, check here ... <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation				D 1. Foreign organizations, check here ..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ..... <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>5,503,274.</b>		J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____		E If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>	
(Part I, column (d), must be on cash basis.)					

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received .....	2,434,310.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments .....				
	4 Dividends and interest from securities .....	184,462.	184,462.		STATEMENT 1
	5a Gross rents .....	264,297.	264,297.		STATEMENT 2
	b Net rental income or (loss) <b>185,514.</b>				STATEMENT 3
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a <b>1,675,000.</b>				
	7 Capital gain net income (from Part IV, line 2) .....		626,764.		
	8 Net short-term capital gain .....				
	9 Income modifications .....				
	10a Gross sales less returns and allowances .....				
b Less: Cost of goods sold .....					
c Gross profit or (loss) .....					
11 Other income .....					
12 Total. Add lines 1 through 11 .....	3,509,833.	1,075,523.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc. ....	0.	0.		0.
	14 Other employee salaries and wages .....				
	15 Pension plans, employee benefits .....				
	16a Legal fees .....				
	b Accounting fees <b>STMT 4</b> .....	16,709.	8,355.		0.
	c Other professional fees .....				
	17 Interest .....				
	18 Taxes <b>STMT 5</b> .....	49,257.	45,857.		0.
	19 Depreciation and depletion .....	32,926.	32,926.		
	20 Occupancy .....				
	21 Travel, conferences, and meetings .....				
	22 Printing and publications .....				
	23 Other expenses <b>STMT 6</b> .....	3,680.	0.		0.
	24 Total operating and administrative expenses. Add lines 13 through 23 .....	102,572.	87,138.		0.
	25 Contributions, gifts, grants paid .....	3,151,911.			3,151,911.
26 Total expenses and disbursements. Add lines 24 and 25 .....	3,254,483.	87,138.		3,151,911.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements .....	255,350.				
b Net investment income (if negative, enter -0-) .....		988,385.			
c Adjusted net income (if negative, enter -0-) .....			N/A		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		Beginning of year	End of year	
		(a) Book value	(b) Book value	(c) Fair market value		
Assets	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments	6,167,024.	5,461,399.	5,461,399.	
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons				
	7	Other notes and loans receivable				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges		41,875.	41,875.	
	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock				
	c	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment: basis				
	Less: accumulated depreciation <b>STMT 7</b>	946,977.				
12	Investments - mortgage loans					
13	Investments - other					
14	Land, buildings, and equipment: basis					
	Less: accumulated depreciation					
15	Other assets (describe _____)					
16	<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I)	7,114,001.	5,503,274.	5,503,274.		
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable	2,407,000.	540,923.		
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe _____)				
23	<b>Total liabilities</b> (add lines 17 through 22)	2,407,000.	540,923.			
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 24, 25, 29, and 30.					
	24	Net assets without donor restrictions	4,707,001.	4,962,351.		
	25	Net assets with donor restrictions				
	Foundations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 26 through 30.					
	26	Capital stock, trust principal, or current funds				
	27	Paid-in or capital surplus, or land, bldg., and equipment fund				
	28	Retained earnings, accumulated income, endowment, or other funds				
	29	<b>Total net assets or fund balances</b>	4,707,001.	4,962,351.		
30	<b>Total liabilities and net assets/fund balances</b>	7,114,001.	5,503,274.			

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, line 29, column (a) (must agree with end-of-year figure reported on prior year's return)	1	4,707,001.
2	Enter amount from Part I, line 27a	2	255,350.
3	Other increases not included on line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	4,962,351.
5	Decreases not included on line 2 (itemize)	5	0.
6	<b>Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, line 29, column (b)</b>	6	<b>4,962,351.</b>

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

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a SALE OF 83 ANTHONY AVE		D	01/01/02	10/31/25
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))	
a 1,675,000.		1,048,236.	626,764.	
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.				(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a			626,764.	
b				
c				
d				
e				
2 Capital gain net income or (net capital loss) { If gain, also enter on Part I, line 7 If (loss), enter -0- on Part I, line 7 .....		2	626,764.	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- on Part I, line 8 .....		3	N/A	

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

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)		1	13,739.
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, column (b) .....			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....		2	0.
3 Add lines 1 and 2 .....		3	13,739.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- .....		5	13,739.
6 Credits/Payments:			
a 2025 estimated tax payments and 2024 overpayment credited to 2025 .....	6a	0.	
b Exempt foreign organizations - tax withheld at source .....	6b	0.	
c Tax paid with application for extension of time to file (Form 8868) .....	6c	0.	
d Backup withholding erroneously withheld .....	6d	0.	
7 Total credits and payments. Add lines 6a through 6d .....		7	0.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached .....		8	315.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .....		9	14,054.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .....		10	
11 Enter the amount of line 10 to be: Credited to 2026 estimated tax _____ Refunded ... For Refunded amount, also complete and attach Form 8050. See instructions.		11	

Part VI-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?
1c Did the foundation file Form 1120-POL for this year?
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?
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?
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?
4b If "Yes," has it filed a tax return on Form 990-T for this year?
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:
7 Did the foundation have at least \$5,000 in assets at any time during the year?
8a Enter the states to which the foundation reports or with which it is registered.
8b 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?
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 2025 or the tax year beginning in 2025?
10 Did any persons become substantial contributors during the tax year?
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)?
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?
14 The books are in care of THE FOUNDATION Telephone no. (203) 836-6457
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here
16 At any time during calendar year 2025, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?

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

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

	Yes	No
<b>1a</b> During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? .....		X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....		X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....		X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....		X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? .....		X
(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) .....		X
<b>b</b> If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .....		N/A
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here .....		
<b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2025? .....		X
<b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b> At the end of tax year 2025, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2025? .....		X
If "Yes," list the years _____, _____, _____, _____		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.) .....		N/A
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. _____, _____, _____, _____		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....		X
<b>b</b> If "Yes," did it have excess business holdings in 2025 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2025.) .....		N/A
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....		X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2025? .....		X

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

	Yes	No
<b>5a</b> During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	N/A	
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here		
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).	N/A	
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	
<b>8</b> Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X

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

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

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

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

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

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

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

**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ..... 0

**Part VIII-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

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

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

Total. Add lines 1 through 3 ..... 0.

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities .....	1a	0.
b	Average of monthly cash balances .....	1b	5,094,907.
c	Fair market value of all other assets (see instructions) .....	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c) .....	1d	5,094,907.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....	1e	0.
2	Acquisition indebtedness applicable to line 1 assets .....	2	0.
3	Subtract line 2 from line 1d .....	3	5,094,907.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) .....	4	76,424.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 .....	5	5,018,483.
6	<b>Minimum investment return.</b> Enter 5% (0.05) of line 5 .....	6	250,924.

**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	250,924.
2a	Tax on investment income for 2025 from Part V, line 5 .....	2a	13,739.
b	Income tax for 2025. (This does not include the tax from Part V.) .....	2b	
c	Add lines 2a and 2b .....	2c	13,739.
3	Distributable amount before adjustments. Subtract line 2c from line 1 .....	3	237,185.
4	Recoveries of amounts treated as qualifying distributions .....	4	0.
5	Add lines 3 and 4 .....	5	237,185.
6	Deduction from distributable amount (see instructions) .....	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 .....	7	237,185.

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

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, line 26, column (d) .....	1a	3,151,911.
b	Program-related investments - total from Part VIII-B .....	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes .....	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required) .....	3a	
b	Cash distribution test (attach the required schedule) .....	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 .....	4	3,151,911.

Form 990-PF (2025)

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

	(a) Corpus	(b) Years prior to 2024	(c) 2024	(d) 2025
1 Distributable amount for 2025 from Part X, line 7				237,185.
2 Undistributed income, if any, as of the end of 2025:				
a Enter amount for 2024 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2025:				
a From 2020	3,303,014.			
b From 2021	2,255,585.			
c From 2022	3,717,757.			
d From 2023	2,374,036.			
e From 2024	3,115,570.			
f Total of lines 3a through 3e	14,765,962.			
4 Qualifying distributions for 2025 from Part XI, line 4: \$ 3,151,911.				
a Applied to 2024, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2025 distributable amount				237,185.
e Remaining amount distributed out of corpus	2,914,726.			
5 Excess distributions carryover applied to 2025 (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:	17,680,688.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
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 2024. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2025. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2026				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 2020 not applied on line 5 or line 7	3,303,014.			
9 Excess distributions carryover to 2026. Subtract lines 7 and 8 from line 6a	14,377,674.			
10 Analysis of line 9:				
a Excess from 2021	2,255,585.			
b Excess from 2022	3,717,757.			
c Excess from 2023	2,374,036.			
d Excess from 2024	3,115,570.			
e Excess from 2025	2,914,726.			

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

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2025, enter the date of the ruling

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

Table with 5 columns: (a) 2025, (b) 2024, (c) 2023, (d) 2022, (e) Total. Rows include 2a-e (Qualifying distributions) and 3a-d (Alternative tests).

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

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

NONE

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

NONE

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

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

SEE STATEMENT 10

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

c Any submission deadlines:

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

**Part XIV** Supplementary Information *(continued)*

<b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
AMERICAN ONLINE GIVING FOUNDATION 200 MAIN STREET SAFE HARBOR, FL 34695	NONE	PC	SOCIAL ACTION	574,911.
AMERICAN RED CROSS 209 FARMINGTON AVE FARMINGTON, CT 06032	NONE	PC	SOCIAL ACTION	250,000.
AMERICARES - FREE CLINICS - BRIDGEPORT 88 HAMILTON AVE STAMFORD, CT 06902	NONE	PC	SOCIAL ACTION	25,000.
AVANGRID FOUNDATION / CENTRAL MAINE POWER UNIVERSITY OF MAINE FOUNDATION ELECTRICAL ENGINEER BUCHANAN ALUMNI HOUSE, TWO ALUMNI PLACE ORONO, ME 04469	NONE	PC	TRAINING & RESEARCH	10,000.
BARRINGTON STAGE COMPANY 30 UNION ST PITTSFIELD, MA 01201	NONE	PC	ART & CULTURE	20,000.
<b>Total</b>			<b>SEE CONTINUATION SHEET(S)</b>	<b>3a</b>
				3,151,911.
<b>b Approved for future payment</b>				
NONE				
<b>Total</b>				<b>3b</b>
				0.





**Part XIV** Supplementary Information

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BEADSLEY ZOO - CONNECTICUT ZOOLOGICAL SOCIETY 1875 NOBLE AVE BRIDGEPORT, CT 06610	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	40,000.
BINGHAMTON PHILHARMONIC ORCHESTRA 71 STATE STREET LOWER LEVEL BINGHAMTON, NY 13901	NONE	PC	ART & CULTURE	15,000.
BINGHAMTON UNIVERSITY, WATSON SCHOOL OF ENGINEERING - SENIOR CAPSTONE PROJECTS PO BOX 6005 BINGHAMTON, NY 13902	NONE	PC	TRAINING & RESEARCH	50,000.
BRIDGEPORT CARIBE YOUTH LEADERS 595 MADISON AVE BRIDGEPORT, CT 06604	NONE	PC	SOCIAL ACTION	25,000.
CAMP SUNSHINE - PUMPKIN FESTIVAL 35 ACADIA RD CASCO, ME 04015	NONE	PC	SOCIAL ACTION	10,000.
CAROLINE HOUSE 574 STILLMAN STREET BRIDGEPORT, CT 06608	NONE	PC	SOCIAL ACTION	20,000.
CENTER FOR LATINO PROGRESS - BICI PROGRAM & WORKFORCE DEVELOPMENT 95 PARK ST HARTFORD, CT 06106	NONE	PC	TRAINING & RESEARCH	20,000.
CENTER FOR YOUTH, THE 905 MONROE AVENUE ROCHESTER, NY 14620	NONE	PC	SOCIAL ACTION	50,000.
COLUMBIA GORGE COMMUNITY COLLEGE FOUNDATION 400 EAST SCENIC DR THE DALLES, OR 97058	NONE	PC	TRAINING & RESEARCH	10,000.
CONNECTICUT INVENTION CONVENTION - CIC PO BOX 230311 HARTFORD, CT 06123	NONE	PC	SOCIAL ACTION	10,000.
<b>Total from continuation sheets</b>				<b>2,272,000.</b>

**Part XIV Supplementary Information**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CONNECTICUT PUBLIC BROADCASTING 1049 ASYLUM AVE HARTFORD, CT 06105	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	50,000.
CORNELL COOPERATIVE EXTENSION - ROCHESTER 2449 ST PAUL BLVD ROCHESTER, NY 14617	NONE	PC	SOCIAL ACTION	20,000.
CORNELL UNIVERSITY - JANET L SWANSON WILDLIFE HOSPITAL 377 PINE TREE ROAD ITHACA, NY 14850	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	10,000.
DISTRICT ARTS AND EDUCATION 470 JAMES STREET, SUITE 001 NEW HAVEN, CT 06513	NONE	PC	TRAINING & RESEARCH	50,000.
FAIRFIELD COUNTY'S COMMUNITY FOUNDATION-FAIRFIELD COUNTY BUSINESS COLLABORATIVE FOR EDUCATIO 40 RICHARDS AVE NORWALK, CT 06854	NONE	PC	SOCIAL ACTION	25,000.
FEEDING AMERICA 161 N. CLARK ST, SUITE 700 CHICAGO, IL 60601	NONE	PC	SOCIAL ACTION	250,000.
GEVA THEATER 75 WOODBURY BLVD ROCHESTER, NY 14607	NONE	PC	ART & CULTURE	25,000.
GULF OF MAINE RESEARCH INSTITUTE 350 COMMERCIAL STREET PORTLAND, ME 04101	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	50,000.
HABITAT FOR HUMANITY INTERNATIONAL 121 HABITAT ST AMERICUS, GA 31709	NONE	PC	SOCIAL ACTION	135,000.
HANDS ON HARTFORD 55 BARTHOLOMEW AVENUE HARTFORD, CT 06106	NONE	PC	SOCIAL ACTION	50,000.
<b>Total from continuation sheets</b> .....				

**Part XIV Supplementary Information**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HARTFORD PROMISE 750 MAIN STREET HARTFORD, CT 06103	NONE	PC	TRAINING & RESEARCH	25,000.
HAWKS ALOFT 6715 EAGLE ROCK AVE, NE, SUITE A ALBUQUERQUE, NM 87113	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	15,000.
HENRY FORD MUSEUM - INVENTION CONVENTION WORLDWIDE 20900 OAKWOOD BLVD. DEARBORN, MI 48124	NONE	PC	SOCIAL ACTION	50,000.
HORIZONS @ SACRED HEART UNIVERSITY (SHU) 5151 PARK AVENUE FAIRFIELD, CT 06825	NONE	PC	SOCIAL ACTION	20,000.
HORIZONS AT HARLEY SCHOOL - ROCHESTER 1981 CLOVER STREET ROCHESTER, NY 14618	NONE	PC	SOCIAL ACTION	20,000.
IBERO AMERICAN ACTION LEAGUE - ELDERLY SERVICES 817 E MAIN ST ROCHESTER, NY 14605	NONE	PC	SOCIAL ACTION	10,000.
IOWA LAKES COMMUNITY COLLEGE FOUNDATION 19 S 7TH ST ESTHERVILLE, IA 51334	NONE	PC	TRAINING & RESEARCH	20,000.
JOBS FOR MAINE'S GRADUATES, INC. 45 COMMERCE DR., SUITE 9 AUGUSTA, ME 04430	NONE	PC	SOCIAL ACTION	25,000.
KALAMAZOO VALLEY COMMUNITY COLLEGE FOUNDATION 6767 WEST O AVENUE KALAMAZOO, MI 49003	NONE	PC	TRAINING & RESEARCH	10,000.
KENNEBEC VALLEY COMMUNITY COLLEGE - ELECTRICAL LINE WORKER TECHNOLOGY PROGRAM 92 WESTERN AVE FAIRFIELD, ME 04937	NONE	PC	TRAINING & RESEARCH	10,000.
<b>Total from continuation sheets</b> .....				

**Part XIV** Supplementary Information

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
KLEIN, THE 910 FAIRFIELD AVENUE BRIDGEPORT, CT 06605	NONE	PC	ART & CULTURE	10,000.
LAKE REGION COMMUNITY COLLEGE FOUNDATION 1801 COLLEGE DR N DEVILS LAKE, ND 58301	NONE	PC	TRAINING & RESEARCH	10,000.
LIBERTY WILDLIFE 2600 E ELWOOD ST PHOENIX, AZ 85040	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	12,000.
MAHAIWEE PERFORMING ARTS EDUCATION PROGRAMS PO BOX 690 GREAT BARRINGTON, MA 01230	NONE	PC	ART & CULTURE	10,000.
MAINE GENERAL HEALTH 35 MEDICAL CENTER PARKWAY AUGUSTA, ME 04330	NONE	PC	SOCIAL ACTION	50,000.
MALTA HOUSE OF CARE 136 FARMINGTON AVE HARTFORD, CT 06105	NONE	PC	SOCIAL ACTION	25,000.
MARINE MAMMALS OF MAINE PO BOX 751 BATH, ME 04530	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	10,000.
MASS MOCA 1040 MASS MOCA WAY NORTH ADAMS, MA 01247	NONE	PC	ART & CULTURE	10,000.
MONROE COMMUNITY COLLEGE FOUNDATION 1057 EAST HENRIETTA ROAD ROCHESTER, NY 14623	NONE	PC	TRAINING & RESEARCH	50,000.
NATIONAL MARINE LIFE CENTER PO BOX 269 BUZZARDS BAY, MA 02532	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	58,000.
<b>Total from continuation sheets</b> .....				

**Part XIV** Supplementary Information

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
NEW ENGLAND WILDLIFE CENTERS AND BIRDSEY CAPE WILDLIFE CENTER 500 COLUMBIAN STREET WEYMOUTH, MA 02190	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	20,000.
NORTHEASTERN UNIVERSITY - ROUX INSTITUTE 360 HUNTINGTON AVENUE BOSTON, MA 02115	NONE	PC	TRAINING & RESEARCH	125,000.
NOURISH BRIDGEPORT PO BOX 1859 BRIDGEPORT, CT 06604	NONE	PC	SOCIAL ACTION	50,000.
OREGON CHILDREN'S FOUNDATION - START MAKING A READER TODAY (SMART) 101 SW MARKET ST PORTLAND, OR 97201	NONE	PC	SOCIAL ACTION	42,000.
OREGON ZOO FOUNDATION - CONDOR BREEDING 4001 SW CANYON ROAD PORTLAND, OR 97221	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	30,000.
PINE TREE SOCIETY 149 FRONT STREET BATH, ME 04530	NONE	PC	TRAINING & RESEARCH	10,000.
PORTLAND MUSEUM OF ART - INCLUSIVE ART INITIATIVE SEVEN CONGRESS SQUARE PORTLAND, ME 04101	NONE	PC	ART & CULTURE	10,000.
POSSUMWOOD ACRES WILDLIFE SANCTUARY 119 DOE DRIVE HUBERT, NC 28539	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	20,000.
PREBLE STREET 38 PREBLE STREET PORTLAND, ME 04101	NONE	PC	SOCIAL ACTION	50,000.
RED CREEK WILDLIFE CENTER 300 MOON HILL DRIVE SCHUYLKILL HAVEN, PA 17972	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	20,000.
<b>Total from continuation sheets</b> .....				

**Part XIV** Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
ROCHESTER MUSEUM AND SCIENCE CENTER 657 EAST AVE ROCHESTER, NY 14607	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	20,000.
RONALD MCDONALD HOUSE CHARITIES - MAINE 250 BRACKETT STREET PORTLAND, ME 04102	NONE	PC	SOCIAL ACTION	20,000.
RONALD MCDONALD HOUSE CHARITIES - ROCHESTER 333 WESTMORELAND DRIVE ROCHESTER, NY 14620	NONE	PC	SOCIAL ACTION	20,000.
RONALD MCDONALD HOUSES CHARITIES - CONNECTICUT & WESTERN MASSACHUSETTS 860 HOWARD AVE NEW HAVEN, CT 06519	NONE	PC	SOCIAL ACTION	20,000.
SAVING OUR AVIAN RESOURCES (SOAR) 25494 320TH STREET DEDHAN, IA 51440	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	5,000.
THINK WILD 62410 ERICKSON ROAD BEND, OR 97701	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	10,000.
TRINITY JUBILEE CENTER 247 BATES STREET LEWISTON, ME 04240	NONE	PC	SOCIAL ACTION	50,000.
TRUST FOR PUBLIC LAND 101 MONTGOMERY ST., 9TH FLOOR SAN FRANCISCO, CA 94104	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	100,000.
UC DAVIS CALIFORNIA RAPTOR CENTER 1 SHIELDS AVENUE DAVIS, CA 95616	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	20,000.
UNITED WAY BROOME COUNTY P.O. BOX 550 BINGHAMTON, NY 13902	NONE	PC	SOCIAL ACTION	20,000.
<b>Total from continuation sheets</b>				

**Part XIV Supplementary Information**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
URBAN LEAGUE OF ROCHESTER 265 N CLINTON AVE ROCHESTER, NY 14605	NONE	PC	SOCIAL ACTION	50,000.
VETERAN ADAPTIVE SPORTS & TRAINING (VAST) 32 FARM VIEW DRIVE NEW GLOUCESTER, ME 04260	NONE	PC	SOCIAL ACTION	20,000.
VOLUNTEER IMPROVING NEIGHBORHOOD ENVIRONMENTS - VINES GARDEN PO BOX 3104 BINGHAMTON, NY 13902	NONE	PC	SOCIAL ACTION	25,000.
WILDLIFE WORKS PO BOX 113, CHESTNUT STREET YOUNGWOOD, PA 15697	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	15,000.
WORLD BIRD SANCTUARY 125 BALD EAGLE RIDGE ROAD VALLEY PARK, MO 63088	NONE	PC	BIODIVERSITY & CLIMATE CHANGE	15,000.
YALE INSTITUTE FOR THE PRESERVATION OF CULTURAL HERITAGE - IPCH OFFICE OF SPONSORED PROJECTS - PO BOX 1873 NEW HAVEN, CT 06508	NONE	PC	ART & CULTURE	75,000.
YALE UNIVERSITY PEABODY MUSEUM - EVOLUTIONS OFFICE OF SPONSORED PROJECTS - PO BOX 1873 NEW HAVEN, CT 06508	NONE	PC	SOCIAL ACTION	45,000.
<b>Total from continuation sheets</b> .....				

**Schedule B  
(Form 990)**

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

**Schedule of Contributors**

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

OMB No. 1545-0047

Name of the organization

AVANGRID FOUNDATION, INC.

Employer identification number

13-4200689

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

**General Rule**

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

**Special Rules**

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

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

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

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

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  <b>AVANGRID FOUNDATION, INC.</b>	Employer identification number  <b>13-4200689</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<u>AVANGRID RENEWABLES</u>  <u>2701 NW VAUGH STREET, SUITE 300</u>  <u>PORTLAND, OR 97210</u>	\$ <u>275,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<u>NEW YORK STATE ELECTRIC AND GAS</u>  <u>P.O. BOX 5224</u>  <u>BINGHAMTON, NY 13902</u>	\$ <u>500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<u>CENTRAL MAINE POWER COMPANY</u>  <u>83 EDISON DRIVE</u>  <u>AUGUSTA, ME 04332</u>	\$ <u>300,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<u>ROCHESTER GAS AND ELECTRIC CORPORATION</u>  <u>3 CITY CENTER, 180 SOUTH CLINTON AVE</u>  <u>ROCHESTER, NY 14604</u>	\$ <u>500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<u>BERKSHIRE GAS CO</u>  <u>115 CHESHIRE ROAD</u>  <u>PITTSFIELD, MA 01201</u>	\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<u>UNITED ILLUMINATING COMPANY</u>  <u>100 MARSH HILL ROAD</u>  <u>ORANGE, CT 06477</u>	\$ <u>347,270.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>AVANGRID FOUNDATION, INC.</b>	Employer identification number  <b>13-4200689</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<u>AVANGRID REAL ESTATE SERVICES</u>  <u>83 EDISON DRIVE</u>  <u>AUGUSTA, ME 04336</u>	\$ <u>259,310.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<u>CONNECTICUT NATURAL GAS COMPANY</u>  <u>76 MEADOW ST</u>  <u>EAST HARTFORD, CT 06108</u>	\$ <u>98,340.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<u>SOUTHERN CONNECTICUT GAS COMPANY</u>  <u>60 MARSH HILL ROAD</u>  <u>ORANGE, CT 06477</u>	\$ <u>104,390.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>AVANGRID FOUNDATION, INC.</b>	Employer identification number  <b>13-4200689</b>
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**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
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization <b>AVANGRID FOUNDATION, INC.</b>	Employer identification number <b>13-4200689</b>
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**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 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	(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	(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

# Underpayment of Estimated Tax by Corporations

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

**2025**

Go to [www.irs.gov/Form2220](http://www.irs.gov/Form2220) for instructions and the latest information.

Name <b>AVANGRID FOUNDATION, INC.</b>	Employer identification number <b>13-4200689</b>
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**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	13,739.
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....	2a		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	2b		
c Credit for federal tax paid on fuels (see instructions) .....	2c		
d Total. Add lines 2a through 2c .....	2d		
3 Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty .....	3		13,739.
4 Enter the tax shown on the corporation's 2024 income tax return. See instructions. <b>Caution:</b> 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 on line 5 .....	4		6,172.
5 <b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....	5		6,172.

**Part II Reasons for Filing** - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6  The corporation is using the adjusted seasonal installment method.
- 7  The corporation is using the annualized income installment method.
- 8  The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

**Part III Figuring the Underpayment**

	(a)	(b)	(c)	(d)	
9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th ( <b>Form 990-PF filers:</b> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....	9	05/15/25	06/15/25	09/15/25	12/15/25
10 <b>Required installments.</b> 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, enter 25% (0.25) of line 5 above in each column .....	10	1,543.	1,543.	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. See instructions .....	11				
<b>Complete lines 12 through 18 of one column before going to the next column.</b>					
12 Enter amount, if any, from line 18 of the preceding column .....	12				
13 Add lines 11 and 12 .....	13				
14 Add amounts on lines 16 and 17 of the preceding column .....	14		1,543.	3,086.	4,629.
15 Subtract line 14 from line 13. If zero or less, enter -0- .....	15	0.	0.	0.	0.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....	16		1,543.	3,086.	
17 <b>Underpayment.</b> 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	1,543.	1,543.	1,543.	1,543.
18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....	18				

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.

For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2025) Created 11/14/25

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. <b>(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.)</b> See instructions .....	<b>19</b>			
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19 .....	<b>20</b>			
<b>21</b> Number of days on line 20 after 4/15/2025 and before 7/1/2025 .....	<b>21</b>			
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 7\% (0.07)}{365}$ .....	<b>22</b>	\$	\$	\$
<b>23</b> Number of days on line 20 after 6/30/2025 and before 10/1/2025 .....	<b>23</b>			
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 7\% (0.07)}{365}$ .....	<b>24</b>	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2025 and before 1/1/2026 .....	<b>25</b>			
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 7\% (0.07)}{365}$ .....	<b>26</b>	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2025 and before 4/1/2026 .....	<b>27</b>	<b>SEE ATTACHED WORKSHEET</b>		
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 7\% (0.07)}{365}$ .....	<b>28</b>	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2026 and before 7/1/2026 .....	<b>29</b>			
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$ .....	<b>30</b>	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2026 and before 10/1/2026 .....	<b>31</b>			
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$ .....	<b>32</b>	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2026 and before 1/1/2027 .....	<b>33</b>			
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$ .....	<b>34</b>	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2026 and before 3/16/2027 .....	<b>35</b>			
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$ .....	<b>36</b>	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36 .....	<b>37</b>	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns .....	<b>38</b>			\$ <b>315.</b>

\* 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](http://www.irs.gov). You can also call 800-829-4933 to get interest rate information.

FORM 990-PF  
**UNDERPAYMENT OF ESTIMATED TAX WORKSHEET**

Name(s)					Identifying Number
AVANGRID FOUNDATION, INC.					13-4200689
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
05/15/25	1,543.	1,543.	31	.000191781	9.
06/15/25	1,543.	3,086.	92	.000191781	54.
09/15/25	1,543.	4,629.	91	.000191781	81.
12/15/25	1,543.	6,172.	106	.000191781	125.
03/31/26	0.	6,172.	45	.000164384	46.
Penalty Due (Sum of Column F) .....					315.

\* Date of estimated tax payment, withholding credit date or installment due date.

FORM 990-PF		DIVIDENDS AND INTEREST FROM SECURITIES			STATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
JP MORGAN	184,462.	0.	184,462.	184,462.	
TO PART I, LINE 4	184,462.	0.	184,462.	184,462.	

FORM 990-PF		RENTAL INCOME	STATEMENT 2
KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME	
ANTHONY AVE, AUGUSTA, ME	2	264,297.	
TOTAL TO FORM 990-PF, PART I, LINE 5A		264,297.	

FORM 990-PF		RENTAL EXPENSES	STATEMENT 3
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION		32,926.	
TAXES		45,857.	
- SUBTOTAL -	2	0.	78,783.
TOTAL RENTAL EXPENSES			78,783.
NET RENTAL INCOME TO FORM 990-PF, PART I, LINE 5B			185,514.

FORM 990-PF		ACCOUNTING FEES			STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL AND ACCOUNTING FEES	16,709.	8,355.		0.	
TO FORM 990-PF, PG 1, LN 16B	16,709.	8,355.		0.	

FORM 990-PF

TAXES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX	3,400.	0.		0.
TAXES	45,857.	45,857.		0.
TO FORM 990-PF, PG 1, LN 18	49,257.	45,857.		0.

FORM 990-PF

OTHER EXPENSES

STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE EXPENSE	3,680.	0.		0.
TO FORM 990-PF, PG 1, LN 23	3,680.	0.		0.

FORM 990-PF

DEPRECIATION OF ASSETS HELD FOR INVESTMENT

STATEMENT 7

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
BUILDINGS AND IMPROVEMENTS	1,395,884.	0.	1,395,884.
LAND	354,116.	0.	354,116.
TOTAL TO FM 990-PF, PART II, LN 11	1,750,000.	0.	1,750,000.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS  
PART VI-A, LINE 10

STATEMENT 8

<u>NAME OF CONTRIBUTOR</u>	<u>ADDRESS</u>
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

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.
CAITLIN KELLNER 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 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 DIRECTOR 1.00	0.	0.	0.
MARY JACOBS 180 MARSH HILL RD ORANGE, CT 06477	PROGRAM MANAGER 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII		0.	0.	0.

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

PABLO D. COLON  
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.