## 990-PF

Department of the Treasury

Internal Revenue Service

**Return of Private Foundation** 

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

0047

OMB No. 1545-

Open to Public

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

Inspection For calendar year 2021, or tax year beginning 09-01-2021 , and ending 08-31-2022 Name of foundation A Employer identification number INTERLAKES SCHOLARSHIP FOUNDATION 22-2474302 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) PO BOX 545 (603) 279-0134 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here MEREDITH, NH 03253 **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 E If private foundation status was terminated **H** Check type of organization: Section 501(c)(3) exempt private foundation under section 507(b)(1)(A), check here ...... Section 4947(a)(1) nonexempt charitable trust  $\square$  Other taxable private foundation I Fair market value of all assets at end If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ...... of year (from Part II, col. (c), Other (specify) line 16) **\$** 516,298 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) may not expenses per purposes (cash basis only) income income books necessarily equal the amounts in column (a) (see Contributions, gifts, grants, etc., received (attach 1 10,969 schedule) Check ightharpoonup if the foundation is  $\operatorname{not}$  required to attach 2 . . . . . . . . . . . . . Interest on savings and temporary cash investments 42,414 42.414 4 Dividends and interest from securities 5a Gross rents . . . . . . Net rental income or (loss) h Net gain or (loss) from sale of assets not on line 10 6a Sevenue Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 7 Net short-term capital gain . . Income modifications . 9 10a Gross sales less returns and allowances Less: Cost of goods sold . . b Gross profit or (loss) (attach schedule) . . . . . c Other income (attach schedule) 11 42.418 53,387 Total. Add lines 1 through 11 . . 12 Compensation of officers, directors, trustees, etc. 13 Operating and Administrative Expenses Other employee salaries and wages 14 Pension plans, employee benefits . 15 315 Legal fees (attach schedule) . . . . . ₩, 16a Accounting fees (attach schedule) . . . . . %, 362 Other professional fees (attach schedule) c 17 90 348 Taxes (attach schedule) (see instructions) 18 Depreciation (attach schedule) and depletion . 19 1,233 20 21 Travel, conferences, and meetings . 22 Printing and publications . . . . 4,645 Other expenses (attach schedule) . . . . 23 Total operating and administrative expenses. 24 6,903 0 Add lines 13 through 23 . . . . 27,990 27,990 25 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 26 34,893 27,990 Subtract line 26 from line 12: 27 а Excess of revenue over expenses and disbursements 18,494 Net investment income (if negative, enter -0-) 42,418 Adjusted net income (if negative, enter -0-) . . c

Pa	rt II	<b>Balance Sheets</b>	Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year		of year
		0 1 1 1	, , , , ,	(a) Book Value 10,536	<b>(b)</b> Book Value 10,614	(c) Fair Market Value 10,614
	1		est-bearing	· · · · · · · · · · · · · · · · · · ·	10,014	10,014
	2	Savings and temp	porary cash investments	4,098		
	3	Accounts receiva	ihle			
	_		or doubtful accounts			
	4	Pledges receivab				
		Less: allowance f	or doubtful accounts 🕨			
	5	Grants receivable	e			
	_	Danis ablands a				
	6		rom officers, directors, trustees, and other			
		disqualified perso	ons (attach schedule) (see instructions)			
	7	Other notes and	loans receivable (attach schedule)			
		Less: allowance f	or doubtful accounts 🕨			
	8	Inventories for sa	ale or use			
2	9	Prepaid expenses	and deferred charges			
Se	10a	Investments—II 9	5. and state government obligations (attach			
AS	10a	schedule)	s. and state government obligations (attach			
	b	Investments—con	rporate stock (attach schedule)			
	С	Investments—cor	porate bonds (attach schedule)			
	11	Investments—lan	d, buildings, and equipment: basis			
			a, banangs, and equipment. basis p			
		Less: accumulate	ed depreciation (attach schedule)			
			-			
	12	Investments—mo	ortgage loans			
	13	Investments—oth	ner (attach schedule)	302,941	325,455	505,684
			· · · · · · · · · · · · · · · · · · ·			
	14	Land, buildings, a	and equipment: basis			
		Less: accumulate	ed depreciation (attach schedule)			
		O+h ( d -	scribe			
	15		<b>-</b>			
	16	•	pe completed by all filers—see the	217 575	226.060	F16 200
		instructions. Also	, see page 1, item I)	317,575	336,069	516,298
	17	Accounts payable	e and accrued expenses			
	18	Grants navable			6,950	
S	_				-,	
ties	19		•			
	20	persons	rs, directors, trustees, and other disqualified			
<u>_</u>	21	•	ther notes payable (attach schedule)			
_						
	22	-	describe)			
_	23	Total liabilities(a	dd lines 17 through 22)		6,950	
		Foundations that	follow FASB ASC 958, check here			
Se			es 24, 25, 29 and 30.			
30	24	-	ut donor restrictions	317,575	329,119	
<u>a</u>						
ĕ	25	Net assets with d	lonor restrictions			
2						
己		Foundations that	do not follow FASB ASC 958, check here 🕨 🗌			
0		and complete line	es 26 through 30.			
sts	26	Capital stock, tru	st principal, or current funds			
Assets or Fund Balances	27	Paid-in or capital	surplus, or land, bldg., and equipment fund	+		
		· ·				
Net	28		s, accumulated income, endowment, or other funds	317,575	220 110	
_	29		or fund balances (see instructions)	*	329,119	
	30		nd net assets/fund balances (see instructions) .	317,575	336,069	
	rt III	<u> </u>	Changes in Net Assets or Fund Balances			
1			d balances at beginning of year—Part II, column (a)	, line 29 (must agree wi		217 575
2		or-year figure repo r amount from Par	, ,		-	317,575 18,494
3			cluded in line 2 (itemize)		3	10,797
4					. 4	336,069
5			l in line 2 (itemize)		5	
6	Total	net assets or fund	d balances at end of year (line 4 minus line 5)—Part	II, column (b), line 29.		336,069

orm 990-P	F (2021)	
Part IV	Capital Gains and Losses for Tax on Investment Income	
(a	) List and describe the kind(s) of property sold (e.g., real estate,	Hov

Pailtv	Capital Gains and Losses for Tax on Theestinent Incom
(2	a) List and describe the kind(s) of property sold (e.g., real estate,
(a	2-story brick warehouse; or common stock, 200 shs. MLC Co.)

(b) w acquired P-Purchase D-Donation

(mo., day, yr.) (mo., day, yr.)

(d)

Date sold

Cost or other basis

(e) plus (f) minus (g)

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

**(I)** 

(i) F.M.V. as of 12/31/69

Capital gain net income or (net capital loss)

col. (k), but not less than -0-) or Losses (from col.(h))

Gains (Col. (h) gain minus

in Part I, line 8

over col. (j), if any

If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7

(j) (k) Adjusted basis Excess of col. (i) as of 12/31/69

(f) (e) Depreciation allowed Gross sales price (or allowable)

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-

(g)

h

d

1a

(h) Gain or (loss)

(c)

Date acquired

plus expense of sale

3

	rt VI-A Statements Regarding Activities (continued)		Р	age <b>5</b>
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			N-
12	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had	12		N-
12	advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address N A	13		No
14	The books are in care of MARIANNE LEBERMAN Telephone no.			
	Located at 66 CHEMUNG RD Meredith NH ZIP+4 03253			
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here			
15			•	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over	ı	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign			
Pa	rt VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)		No
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1a(2)		No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		No
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?	1a(5)		No
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days.)	1a(6)		No
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		No
С	Organizations relying on a current notice regarding disaster assistance check here			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2021?	1d		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2021, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XII) for tax year(s) beginning before 2021?	2a		No
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.)	2b		
_	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.	20		
С	20			
2-				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3-		No
b	If "Yes," did it have excess business holdings in 2021 as a result of <b>(1)</b> any purchase by the foundation	3a		140
D	or disqualified persons after May 26, 1969; <b>(2)</b> 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?( <i>Use Schedule C, Form 4720, to determine</i>			
	if the foundation had excess business holdings in 2021.).	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2021?	4b		No
			-PF (	2021)

5a	During the year did the foundation	n pay	or incur any amount to:				Yes	No
	(1) Carry on propaganda, or oth	erwise	attempt to influence leg	gislation (section 4945(e	e))?	5a(1)	,	No
	(2) Influence the outcome of an	y spec	ific public election (see	section 4955); or to car	rry			
	on, directly or indirectly, any		=			. 5a(2)		No
	(3) Provide a grant to an individual					. 5a(3)	<u>,                                    </u>	No
	(4) Provide a grant to an organiz			etc., organization descri	bed			
	in section 4945(d)(4)(A)? S					5a(4)	<u>,                                      </u>	No
	(5) Provide for any purpose other					En/E		
	educational purposes, or for		•			5a(5)	1	No
b	If any answer is "Yes" to 5a(1)-		•	• •	•	5b		N.
_	Regulations section 53.4945 or					30		No
d	Organizations relying on a curre If the answer is "Yes" to question							
u	tax because it maintained expen	-	- · ·	· ·		. 5d		
	If "Yes," attach the statement req		· · · · · · · · · · · · · · · · · · ·			. 50		
6a	Did the foundation, during the ye		_		miums on			
ou	a personal benefit contract?			,, , , ,		6a		No
b	Did the foundation, during the ye							No
_	If "Yes" to 6b, file Form 8870.	.u., pu	, premiume, ameem, er .	nancon,, on a persona.				110
7a	At any time during the tax year,	was th	e foundation a party to	a prohibited tax shelter	transaction?	7a		No
b	If "Yes", did the foundation recei			•		7b		
8	Is the foundation subject to the	sectio	n 4960 tax on payment(	s) of more than \$1,000,	,000 in remuneration or			
	excess parachute payment durir	g the	year?			8		
	Information Abou	it Óff	icers. Directors. Ti	rustėes. Foundatio	n Managers, Highly F	Paid Em	plove	es.
Pa	rt VIII and Contractors		, 2,				p, .	,
1	List all officers, directors, trusted	es fou	ndation managers and t	heir compensation See	instructions			
	List an officers, an ectors, trustee				(d) Contributions to			
	(a) Name and address	(	<b>b)</b> Title, and average hours per week	(c) Compensation (If not paid, enter	employee benefit plans	(e) Expe		
	(4) 4 444. 655		devoted to position	-0-)	and deferred compensation	other	allowar	nces
DON	CROWELL	PRES	SIDENT	0	compensation			
	CHEMUNG RD	1.00		· ·				
	dith, NH 03253							
	5 BURTON	1.00	PRESIDENT	0				
	OX 1688 iia, NH 03247							
MARI	ANNE LEBERMAN		ASURER	0				
	HEMUNG RD	1.00						
	dith, NH 03253 AINE JENKS	CO 5	ECRETARY					
	STMAN SHORE RD NORTH	1.00	BLCKLIAKI	0				
	ia, NH 03246							
	DY BAGLEY		ECRETARY	0				
	OX 598 dith, NH 03253	1.00						
	BAKER	TRUS	STEE	0				
	IIGH HAIGTH RD	1.00		· ·				
	r Harbor, NH 03226							
	ON TREADWELL DLLEGE DR	1.00	STEE	0				
	r Harbor, NH 03226							
TIFFA	NY PENA		STEE	0				
	OUNTAIN DR	1.00						
	d, NH 03249 CARPENTIERE	TRIIS	STEE	0				
	ORLISS HILL RD	1.00	7122	U				
Mered	lith, NH 03253							
	COVE	TRUS 1.00	STEE	0				
	VENTWORTH HILL RD er Sandwich, NH 03227	2.00						
HOLL'	Y VIENTEN		STEE	0				
	KER LANE	1.00						
Merec 2	dith, NH 03253  Compensation of five highest-pa	: d	lavaaa (athay thay thas	singly dad on line 1 as	- instructions) If none out	NONE		
	Compensation of five highest-pa	iu eiiip	loyees (other than those	e included on line 1—sec	(d) Contributions to	ei NONE	-	
(a	) Name and address of each empl	oyee	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Expen		
	paid more than \$50,000		devoted to position	(=, ==,=	plans and deferred compensation	other a	llowand	ces
					compensation			
			•					
				<u> </u>				
							-	
Tota	I number of other employees paid	lover	\$50,000					
						Form QQ(	1-DF	2021

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Part VII Information About Officers, Directors, Trust and Contractors (continued)	tees, Foundation Managers, Hi	ghly Paid Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NON	IE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services	<del></del>	<b>•</b>

Part VIII- Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such a organizations and other beneficiaries served, conferences convened, research papers produced, etc.	s the number of Expenses
1	
2	
3	
4	
Part VIII- Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	
	Form <b>990-PF</b> (2021)

or	m 990-PF (2021)				Page <b>9</b>
•	Part XII Undistributed Income (see instr	uctions)			,
		(a)	(b)	<b>(c)</b> 2020	(d)
1	Distributable amount for 2021 from Part X, line 7	Corpus	Years prior to 2020	2020	2021
	Undistributed income, if any, as of the end of 2021:				
	Enter amount for 2020 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2021:				
а	From 2016				
b	From 2017				
C					
	From 2019				
	From 2020				
	<b>Total</b> of lines 3a through e				
4	Qualifying distributions for 2021 from Part XI, line 4: ▶ \$ 27,990				
_	Applied to 2020, but not more than line 2a				
	Applied to undistributed income of prior years				
U	(Election required—see instructions)				
c	Treated as distributions out of corpus (Election				
	required—see instructions)				
	Applied to 2021 distributable amount				
	Demaining amount distributed out of source				
	Remaining amount distributed out of corpus				
3	Excess distributions carryover applied to 2021.				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract				
_	line 4b from line 2b				
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
ď	Subtract line 6c from line 6b. Taxable amount				
_	-see instructions				
е	Undistributed income for 2019. Subtract line				
	4a from line 2a. Taxable amount—see				
_	instructions				
T	Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must				
	be distributed in 2022				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)				
8	Excess distributions carryover from 2016 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2022.				
_	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9:				
а	Excess from 2017				
b	Excess from 2018				
	LACESS HOIII 2010				
c	Excess from 2019				
d	Excess from 2020				
	Excess from 2021				
	l				orm <b>990-PF</b> (2021)

P	art XIII	Private Operating Four	<b>ndations</b> (see i	nstructions and P	Part VI-A, questic	on 9)	
	foundation	dation has received a ruling or d n, and the ruling is effective for 2	2021, enter the da	te of the ruling		_	
b.	Check box	to indicate whether the organization.	ation is a private o	perating foundation	n described in secti	on   4942(j)(3)	or 🗌 4942(j)(5
2a	Enter the	lesser of the adjusted net	Tax year		Prior 3 years		(a) Tatal
		om Part I or the minimum	(a) 2021	<b>(b)</b> 2020	(c) 2019	(d) 2018	(e) Total
		t return from Part X for each	, ,	, ,			
	•	1					
b	85% (0.85	5) of line 2a					
_	Ouglifuing	distributions from Dort VI					
С		distributions from Part XI, each year listed					
ч		ncluded in line 2c not used					
ŭ		r active conduct of exempt					
e		distributions made directly					
	for active	conduct of exempt activities.					
	Subtract li	ine 2d from line 2c					
3	•	a, b, or c for the					
		e test relied upon:					
а	"Assets" a	Iternative test—enter:					
	<b>(1)</b> Value	of all assets					
		of assets qualifying section 4942(j)(3)(B)(i)					
b		nt" alternative test— enter 2/3					
		ım investment return shown in					
		ne 6 for each year listed					
С		alternative test—enter:					
		support other than gross					
		tment income (interest, ends, rents, payments					
		curities loans (section					
		)(5)), or royalties)					
		ort from general public					
		or more exempt					
	orgar	nizations as provided in					
	sectio	on 4942(j)(3)(B)(iii)					
		st amount of support					
		an exempt organization					
		investment income		1			
ŀ		upplementary Information			the foundatio	n had \$5,000 or	r more in
		ssets at any time during		instructions.)			
_		on Regarding Foundation Manage nanagers of the foundation who h		nore than 2% of the	total contributions	received by the four	ndation
a	•	e close of any tax year (but only				•	ildation
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,. (		
b		anagers of the foundation who over of a partnership or other entity)		· ·	• •	lly large portion of t	he
	Information	on Regarding Contribution, Gran	t, Gift, Loan, Schol	arship, etc Progra	ms:		
	Check her	e 🛌 if the foundation only ma	kes contributions	to preselected char	itable organization	s and does not acce <sub>l</sub>	pt

- unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under
- other conditions, complete items 2a, b, c, and d. See instructions

- a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: INTERLAKES SCHOLARSHIP FOUNDATION C/O DONNA DEPOIAN ES
- PO BOX 75 LACONIA, NH 03247 (603) 455-8621 **b** The form in which applications should be submitted and information and materials they should include:
- APPLICATION PACKET
- c Any submission deadlines:
- FRIDAY BEFORE APRIL SCHOOL VACATION 04/21/2023
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
  - GRADUATE OF INTERLAKES HIGH SCHOOL Form **990-PF** (2021)

Form 990-PF (2021)

Part Supplementary Information (continued)

## 3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid	During the Year or App	proved for I	uture Payment	
Recipient	If recipient is an individual,	Foundation		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor			
PRATT INSTITUTE	NONE		COLLEGE	600
200 WILLOUGHBY AVE				
BROOKLYN, NY 11205				
PLYMOUTH STATE UNIVERSITY 19 HIGHLAND AVE	NONE		COLLEGE	1,600
PLYMOUTH, NH 03264				
WENTWORTH INSTITUTE OF TECH	NONE		COLLEGE	850
550 HUNTINGTON AVE				
BOSTON, M A 02115	NO. 15		2011505	2.240
BYU IDAHO 525 S CENTER ST	NONE		COLLEGE	2,240
REXBURG,ID 83460				
HI MANOA	NONE		COLLEGE	400
2500 CAMPUS RD				
HONOLULU,HI 96822 UNIVERSITY OF NH	NONE		COLLEGE	800
11 GARRISON AVE	IN O IN E		COLLEGE	800
DURHAM,NH 03824				
UNIVERSITY OF NH	NONE		COLLEGE	2,300
11 GARRISON AVE DURHAM,NH 03824				
UNIVERISTY OF NH	NONE		COLLEGE	800
11 GARRISON AVE	NO NE			000
DURHAM,NH 03824				
UNIVERISTY OF NH	NONE		COLLEGE	1,200
11 GARRISON AVE DURHAM,NH 03824				
UNIVERISTY OF NH	NONE		COLLEGE	1,500
11 GARRISON AVE	NO NE			1,500
DURHAM,NH 03824				
AVE MARIA UNIVERSITY	NONE		COLLEGE	2,800
5050 AVE MARIA BLVD A MARIA,FL 34142				
PURDUE UNIVERSITY	NONE		COLLEGE	350
610 PURDUE MALL				
WEST LAFAYETTE, IN 47907				
FLORIDA INST OF TECH 150 W UNIVERSITY BLVD	NONE		COLLEGE	1,350
MELBOURNE, FL 32901				
UNIVERISTY OF HI	NONE		COLLEGE	1,200
SPALDING HALL 2540 MAILE WAY				
HONOLULU, HI 96822	NO. 15		2011505	000
UNIVERSITY OF SOUTHERN ME 96 FALMOUTH ST	NONE		COLLEGE	800
PORTLAND, ME 04103				
UNIVERISTY OF ME	NONE		COLLEGE	600
168 COLLEGE AVE				
ORONO,ME 04469 PLYMOUTH STATE UNIVERSITY	N O N E		COLLEGE	2,100
19 HIGHLAND AVE	NONE		COLLEGE	2,100
PLYMOUTH,NH 03264				
PLYMOUTH STATE UNIVERSITY	NONE		COLLEGE	1,200
19 HIGHLAND AVE PLYMOUTH,NH 03264				
UNIVERSITY OF NH	NONE		COLLEGE	500
11 GARRISON AVE				
DURHAM,NH 03824				
ENDICOTT COLLEGE 376 HALE ST	NONE		COLLEGE	600
BEVERLY, M A 01915				
RENSSELAER POLYTECHNIC INST	NONE		COLLEGE	1,300
110 8TH ST				
TROY, NY 12180	NO. 15		2011505	4 400
NH TECHNICAL INST 31 COLLEGE DR	NONE		COLLEGE	1,100
CONCORD, NH 03301				
PRATT INSTITUTE	NONE		COLLEGE	1,000
200 WILLOUGHBY AVE				
GEROCE WASHINGTON UNIVERSITY	NONE		COLLECE	000
GEROGE WASHINGTON UNIVERSITY 2121 1ST NW	IN O N E		COLLEGE	800
WASHINGTON, DC 20052				
Total	<del></del>		<b>&gt;</b> 3a	27,990
<b>b</b> Approved for future payment				

Total		▶ 3h	

Form **990-PF** (2021)

Enter gros	c amounts unloss otherwise indicated	Unrelated b	s usiness income	Excluded by sectio	n 512, 513, or 514	(e)
	s amounts unless otherwise indicated.	(a)	(b)	(c)	(d)	Related or exemp function income (See
<b>1</b> Progran	n service revenue:	Business code	Amount	Exclusion code	Amount	instructions.)
d	<u> </u>					
	and contracts from government agencies					
-	ership dues and assessments					
3 Interes	st on savings and temporary cash ments			14		4
	nds and interest from securities					
<ul><li>5 Net ren</li></ul>	ntal income or (loss) from real estate:					
<b>a</b> Debt-	-financed property					
	lebt-financed property					
<b>6</b> Net rer	ntal income or (loss) from personal					
	nvestment income					
8 Gain or inventor	r (loss) from sales of assets other than					
	come or (loss) from special events:					
<b>10</b> Gross p	profit or (loss) from sales of inventory					
	revenue: a					
е						
	al. Add columns (b), (d), and (e)				42,41	
	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify ca			1	3	42,418
			olishment of E	xempt Purpose	es	
Part XV	-B Relationship of Activities to	the Accom				
Part XV	Explain below how each activity for which the accomplishment of the foundation's each activity for which the accomplishment of the foundation's each activity.	n income is rep	orted in column (e			
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Ί	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part	: XVI	Noncharitable	Exempt (			ns	·sacc	ions una Re	ilucionsinps W	••••			
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										Yes	No		
a Transfers from the reporting foundation to a noncharitable exempt organization of:													
(1) Cash									:	1a(1)		No	
(2)	(2) Other assets									. [:	1a(2)		No
<b>b</b> Other transactions:													
											1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization										1b(2)		No	
(3)	Rental	of facilities, equipm	ent, or other	asset	ts					[:	1b(3)		No
(4)	Reimb	ırsement arrangeme	ents							. [:	1b(4)		No
										. [:	1b(5)		No
(6)	Perform	ance of services or	membership	or fu	ndraising	solicitations.				:	1b(6)		No
<b>c</b> Sha	ring of	acilities, equipment,	, mailing lists	s, oth	er assets,	, or paid empl	oyees.			[	1c		No
of t in a	he good iny trans	er to any of the aboves, other assets, or so action or sharing ar	ervices given rangement, s	by the	ne reporti n column	ng foundation (d) the value	. If the	foundation re	ceived less than fa	ir market	value		
(a) Line	No.	<b>b)</b> Amount involved	(c) Name of r	nonchai	ritable exer	mpt organization	(	(d) Description of	transfers, transactions	, and sharin	ig arrar	ngement	ts
		lation directly or ind	•					•	-				
des	cribed i	n section 501(c) (ot	her than sec	tion 5	01(c)(3)	) or in section	527?			Yes	N o	)	
<b>b</b> If "	Yes," co	mplete the following						•					
		(a) Name of organization	on		(i	<b>b)</b> Type of organiz	zation		(c) Description	n of relation	ship		
Sign	the be	nder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and e best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on formation of which preparer has any knowledge.											
Here	k _	2022-12-0					May the			May the IRS	3 discus	s this retu	urn
		Signature of officer or trustee			Date					with the pre See instruc	_		
	Print/Type preparer's name Pro			Prep	reparer's Signature			Date Check if self-		PTIN			
Daid		Jennifer Bailey						2022-12-05	employed ▶□	Р	0006	9042	

Preparer

Use Only

Firm's name ► H AND R BLOCK

Firm's address ▶ 241 UNION AVE

LACONIA, NH 03246

Firm's EIN ▶ 02-0341127

Form **990-PF** (2021)

Phone no.

(603) 524-0951

**Additional Data** Return to Form Software ID: Software Version: Form 990PF - Special Condition Description: **Special Condition Description** 

TY 2021 IRS 990 e-File Render

Name: INTERLAKES SCHOLARSHIP FOUNDATION

EIN: 22-2474302

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value

MUTUAL FUND ACCOUNT LPL FINANCIAL

325,455

TY 2021 IRS 990 e-File Render

Name: INTERLAKES SCHOLARSHIP FOUNDATION

**EIN:** 22-2474302

NORMANDIN UPDATE BINDER

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursem for Charita Purpose

315

TY 2021 IRS 990 e-File Render

Name: INTERLAKES SCHOLARSHIP FOUNDATION

**EIN:** 22-2474302

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
POSTAGE	118			
ANNUAL REPORT NH	7 5			
SCHOLARSHIP DINNER	4,452			

TY 2021 IRS 990 e-File Render

Name: INTERLAKES SCHOLARSHIR FOLINDATION

Name: INTERLAKES SCHOLARSHIP FOUNDATION

**EIN:** 22-2474302

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREP	362			

TY 2021 IRS 990 e-File Render

INVESTMENT

Name: INTERLAKES SCHOLARSHIP FOUNDATION

**EIN:** 22-2474302

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable
				Purposes

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