## \*\* PUBLIC DISCLOSURE COPY \*\* Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.



Department of the Treasury Internal Revenue Service

Α	For th	e 2022 calendar year, or tax year beginning and	ending		
Β	Check if applicab	<b>C</b> Name of organization		D Employer identifie	cation number
ć		Senator George J. Mitchell Scholarship			
	Addre				
	Name chan	e Doing business as	01-05233	90	
	Initial	Number and street (or P.O. box if mail is not delivered to street address)	E Telephone number		
	Final		2E	(207) 77	3-7700
_	termi ated			G Gross receipts \$	7,350,220.
	Amer	FOICIANG, ME 04101		H(a) Is this a group re	
	Appli tion pend	F Name and address of principal officer. O at ea Cash		for subordinates	
		same as C above		H(b) Are all subordinates in	
-		empt status: 🗴 501(c)(3) 🚺 501(c) ( ) (insert no.) 🗌 4947(a)(1) c	or 🛄 527		list. See instructions
	Websi			H(c) Group exemption	
	_	forganization: X Corporation Trust Association Other	<b>L</b> Year	of formation: 1999 N	State of legal domicile: ME
P	art I	Summary			
e	1	Briefly describe the organization's mission or most significant activities: Prov	ide sc	nolarsnips a	and other
an		support to Maine students pursuing higher			
Activities & Governance	2	Check this box if the organization discontinued its operations or dispose		1 1	sets. 23
ğ	3				23
ø	4	Number of independent voting members of the governing body (Part VI, line 1b)			
ties	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		<u>    11    108                          </u>	
tivit	6	Total number of volunteers (estimate if necessary)			
Ac		Total unrelated business revenue from Part VIII, column (C), line 12		0.	
	d b	Net unrelated business taxable income from Form 990-T, Part I, line 11	 I	7b Prior Year	Current Year
		Contributions and events (Dart)/III line 1h)		1,297,079.	1,740,706.
nue	8	Contributions and grants (Part VIII, line 1h)		0.	0.
Revenue	9	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,843,447.	1,536,050.
Re		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		24,065.	17,469.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,164,591.	3,294,225.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,395,615.	1,460,894.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	
6				756,310.	853,609.
Expenses	16a	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10). Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
per	h	Total fundraising expenses (Part IX, column (D), line 25) 139, 12	17.		
ы		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		729,290.	568,062.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,881,215.	2,882,565.
	19	Revenue less expenses. Subtract line 18 from line 12		1,283,376.	411,660.
or			Be	ginning of Current Year	End of Year
t Assets ( d Balanci	20	Total assets (Part X, line 16)		52,911,391.	45,833,785.
Ass J Ba	21	Total liabilities (Part X, line 26)	·····	4,261,431.	4,886,910.
Net	22	Net assets or fund balances. Subtract line 21 from line 20		48,649,960.	40,946,875.
P	art II			, ,	, , , , , , , , , , , , , , , , , , , ,
	-	-			

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer		Date							
	Jared Cash, President/CEC	)								
	Type or print name and title									
	Print/Type preparer's name	Preparer's signature Date	Check PTIN							
Paid	Connor Smart	07/31	/23 <sup>if</sup> p0228554	13						
Preparer	Firm's name Baker Newman & No	yes	Firm's EIN 01-0494526							
Use Only	Firm's address P.O. Box 507									
	Portland, ME 0411	.2	Phone no. (207)879-210	0						
May the I	May the IRS discuss this return with the preparer shown above? See instructions									
232001 12-1	232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)									

_	Senator George J. Mitchell Scholarship	050000	- 0
	n 990 (2022) Research Institute 01 rt III Statement of Program Service Accomplishments	-0523390	Page <b>2</b>
Pa	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	The principal purpose of the Mitchell Institute is to prov	ride	
	scholarships and other support to Maine students pursuing	higher	
	education. Because of our organization's desire to underst		
	remove obstacles to achieving a college degree, a related	purpose i	S
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes	XNo
	If "Yes," describe these new services on Schedule O.		<b>—</b>
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	XNo
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as mea Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the revenue, if any, for each program service reported.	• •	
4a		·	0.)
	Providing scholarship support to Maine students attending	college c	
	university and conducting research on ways to advance the		
	education aspirations of Maine students.		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)		)
		·	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)		)
A -1	Other program comission (Describe on Schodule O)		
40	Other program services (Describe on Schedule O.)	١	
40	(Expenses \$ including grants of \$ ) (Revenue \$       Total program service expenses     2,399,301.	)	
<u>4e</u>	Total program service expenses 2,399,301.	Form	<b>990</b> (2022)
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Senator George J. Mitchell Scholarship Research Institute

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	during the tax year? If "Yes," complete Schedule C, Part II	4		_X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
~	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		- 23
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u>'</u>		
Ũ	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
-	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			v
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	_X
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e	~	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	~~~~	
IZd	Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			<u> </u>
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			<u> </u>
	complete Schedule G, Part III	19	Х	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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Form 990 (2022)

Part IV Checklist of Required Schedules

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Part IV Checklist of Required Schedules (continued)

# Senator George J. Mitchell Scholarship Research Institute

			Yes	No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	x	
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	x	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24d		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			x
	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		
	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filling thresholds, conditions, and executions):			
	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
d	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		x
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete Schedule N, Part II</i>	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			x
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1a100Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b0	-		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	x	
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	5			•
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 Form 990 (2022)
 Senator George J. Mitchell Scholarship

 Part V
 Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				100				
	filed for the calendar year ending with or within the year covered by this return	2a	11						
b									
3a									
	<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O								
	4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		Х			
b	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accou	nts (FBAR).						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-	action	?	5b		Х			
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did t	he org	ganization solicit						
	any contributions that were not tax deductible as charitable contributions?			6a		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions	or gifts						
	were not tax deductible?			6b					
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	ervices	provided to the payor?	7a	X				
b				7b	Х				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	vas re	quired						
	to file Form 8282?		1	7c		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		_		v			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			7e 7f		X X			
f									
g	If the organization received a contribution of qualified intellectual property, did the organization file F			7g 7h	├───┨				
-	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?								
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
•	sponsoring organization have excess business holdings at any time during the year?								
	9 Sponsoring organizations maintaining donor advised funds. Did the ansatz and a statistic transfer and the statistic t								
a b				9a 9b					
ь 10	Section 501(c)(7) organizations. Enter:			30					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a							
11	Section 501(c)(12) organizations. Enter:								
	Gross income from members or shareholders	11a							
	Gross income from other sources. (Do not net amounts due or paid to other sources against								
~	amounts due or received from them.)	11b							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-							
а	Is the organization licensed to issue qualified health plans in more than one state?			13a					
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans	13b							
с	Enter the amount of reserves on hand	13c							
14a				14a		Х			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	ule O		14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remun								
	excess parachute payment(s) during the year?			15		X			
If "Yes," see the instructions and file Form 4720, Schedule N.									
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?									
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any a								
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17					
	If "Yes," complete Form 6069.			E.	000	(0000)			
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## Senator George J. Mitchell Scholarship Research Institute

Form 990 (2022)

01-0523390 Page 6 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

	Check if Schedule O contains a response or note to any line in this Part VI					Σ
Sec	tion A. Governing Body and Management					-
		1.1	<b>ე</b> ე[		Yes	1
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	23			
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.		2.2			
	Enter the number of voting members included on line 1a, above, who are independent		23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship					
	officer, director, trustee, or key employee?			2		
3	Did the organization delegate control over management duties customarily performed by or under the	-				
	of officers, directors, trustees, or key employees to a management company or other person?			3		╞
4	Did the organization make any significant changes to its governing documents since the prior Form			4		╞
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		╞
6	Did the organization have members or stockholders?		·····	6		L
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a					
	more members of the governing body?			7a		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockholders, o	r			
	persons other than the governing body?			7b		L
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-			
а	The governing body?		····· _	8a	X	L
b	Each committee with authority to act on behalf of the governing body?		····· _	8b	Х	L
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re					
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenue Code.)				-
			F		Yes	L
l0a	Did the organization have local chapters, branches, or affiliates?		····· _	10a		Ļ
b	If "Yes," did the organization have written policies and procedures governing the activities of such o	•				l
	and branches to ensure their operations are consistent with the organization's exempt purposes? $\ .$		F	10b		Ļ
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy before filing t	the form?	11a	X	L
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.					
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	Ļ
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris		····· _	12b	Х	L
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "					
	on Schedule O how this was done			12c	<u>X</u>	L
13	Did the organization have a written whistleblower policy?			13	X	L
4	Did the organization have a written document retention and destruction policy?		····· _	14	Х	L
15	Did the process for determining compensation of the following persons include a review and approv	al by independ	ent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision'	?				
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement with a				
	taxable entity during the year?			16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its participat	tion			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	anization's				
	exempt status with respect to such arrangements?			16b		
ec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed None					
8	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a	and 990-T (sect	on 501(c)(3)s	only	) avail	а
	for public inspection. Indicate how you made these available. Check all that apply					
	Own website Another's website X Upon request Other (explain	n on Schedule (	)			
9	Describe on Schedule O whether (and if so, how) the organization made its governing documents, or	onflict of intere	st policy, and	l finar	ncial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's b	ooks and record	ds			
	Lisa Sirois - (207) 773-7700					
	75 Washington Avenue, Suite 2E, Portland, ME 0410	01				_
32000	5 12-13-22			Form	990	(;
	7					
<b>-</b> ~	721 7022E1 14000 2022 04010 Genetar George	T Mita	hall	1/0	888	
/0	731 793251 14888 2022.04010 Senator George	J. MILC	merr	T <del>4</del> (	,00-	-

Senator	George	J.	Mitchell	Schol	larship
Research	Instit	cute	е		

Form 990 (	(2022)	Research	Insti	tute			01-05
Part VII	Compensation	of Officers, I	Directors,	Trustees,	Key Employees,	Highest	Compensated
	Employees, an	d Independer	nt Contra	ctors			

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

 List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)			(0	)			(D)	(E)	(F)
Name and title	Average	(do		Posi	ition	1 than	one	Reportable	Reportable	Estimated
	hours per	box,	, unle	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week		cer an	d a d	recto	or/trus	tee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	truste	al trus		yee	mper		1099-NEC)	1000 1120/	and related
	below	idual	In stitutional trustee	er	Key employee	est co loyee	ler			organizations
	line)	Indiv	Insti	Officer	Key (	Highest compensated employee	Former			
(1) Jared Cash	40.00									
President/Secretary				Х				151,676.	0.	17,332.
(2) Gena Canning	1.00									
Director		Х						0.	0.	0.
(3) Charles de Sieyes	1.00									
Director		Х						0.	0.	0.
(4) Abigail Diaz	1.00									
Director		Х						0.	0.	0.
(5) Bruce Epstein	1.00									
Director		Х						0.	0.	0.
(6) Peter Fendler	1.00									
Director		Х						0.	0.	0.
(7) Mark Fernandez	1.00									
Director		Х						0.	0.	0.
(8) Joan Fischer	1.00									
Director		Х						0.	0.	0.
(9) Mark Haley	1.00									
Director		Х						0.	0.	0.
(10) Nathan Kinney	1.00									_
Director		Х						0.	0.	0.
(11) Scott Maker	1.00									_
Director		Х						0.	0.	0.
(12) Camita McCoy	1.00									-
Director		Х						0.	0.	0.
(13) Heather Mitchell	1.00									-
Director		Х						0.	0.	0.
(14) James Morris	1.00									-
Director		Х						0.	0.	0.
(15) Alison Nathanson	1.00									-
Director		Х						0.	0.	0.
(16) Christopher Pierce	1.00									-
Director		Х						0.	0.	0.
(17) Elyse Pratt-Ronco	1.00									_
Director		Х						0.	0.	0.
232007 12-13-22						~				Form <b>990</b> (2022)

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8 2022.04010 Senator George J. Mitchell

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Senator	George	J.	Mitchell	Scholarship
Research	ı Instit	tute	e	

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	orm 990 (2022) Research Institute 01-0523390 Page 8										
Part VII Section A. Officers, Directors, Tr	ustees, Key Em	ploy	vees,	and	d Hi	ighe	st C	Compensated Employe	es (continued)		
(A)	(B)				C)			(D)	(E)		(F)
Name and title	Average	(do	not ch		ition		one	Reportable	Reportable	Esti	mated
	hours per	box	, unles	s pe	rson	is bot	h an		compensation	amo	ount of
	week		cer and	dad	recto	or/trus	tee)	from	from related	0	ther
	(list any	rector						the	organizations		ensation
	hours for related	or di	æ			ated		organization	(W-2/1099-MISC/		m the
	organizations	ustee	trust		e.	neus		(W-2/1099-MISC/	1099-NEC)		nization
	below	ual tr	ional		ploye	t con /ee		1099-NEC)			related izations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organ	124110113
(18) Lauren Segal	1.00	-	_	0	Ť						
Director		X						0.	0.		0.
(19) Paul Suitter	1.00										
Director		X						0.	0.		0.
(20) Virginia Swain	1.00										
Director		Х						0.	0.		0.
(21) Nicole Witherbee	1.00										
Director		Х						0.	0.		0.
(22) Sara Burns	1.00										•
Chair	1 00	X		X				0.	0.		0.
(23) Najila Frayha	1.00	x		x				0.	0.		0.
Vice Chair (24) Joseph Foley	1.00	^		^				0.	0.		0.
Treasurer	1.00	x		х				0.	0.		0.
		1									
1b Subtotal	-							151,676.	0.	17	,332.
c Total from continuation sheets to Part								0.	0.		0.
d Total (add lines 1b and 1c)								151,676.	0.	17	,332.
2 Total number of individuals (including bu								received more than \$100	,000 of reportable		
compensation from the organization											1
										\	es No
<b>3</b> Did the organization list any <b>former</b> office				•					•		
line 1a? If "Yes," complete Schedule J fo	r such individual									3	X
4 For any individual listed on line 1a, is the	-		-					-	the organization		
and related organizations greater than \$										4	x
5 Did any person listed on line 1a receive of	•							ted organization or indiv	idual for services		v
rendered to the organization? If "Yes," co Section B. Independent Contractors	omplete Schedul	e J f	or su	ich j	pers	son .				5	X
· · · · · · · · · · · · · · · · · · ·	componented in	don	anda	nt o	ont	rooto		that received more than	\$100,000 of compon	oction fre	
1 Complete this table for your five highest the organization. Report compensation for	-	-								Sation in	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(A)	or the calcridar y	car	criai	ig v	VILII			(B)		(C)	
Name and busine	ss address							Description of s	ervices	Compens	sation
Wellington Trust Company	Y							Investment			
280 Congress Street, Bo	ston, MA	02	221	. 0				Management F	ees	161	,871.
							_				
							_				
2 Total number of independent contractors	s (includina but n	not li	miter	d to	tho	se lis	ster	d above) who received n	ore than		
\$100,000 of compensation from the orga						0		,			
										Form 9	<b>90</b> (2022)

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Senator George J. Mitchell Scholarship Research Institute

Form			/			ı Ins	st	itute			01-0523	390	Page <b>9</b>
Pa	rt \	VIII											
			Check if Schedule O	cor	ntains a	respon	se	or note to any lin		(B)	(C)	(D	<u></u>
									<b>(A)</b> Total revenue	Related or exempt		Revenue e	excluded
										function revenue		from tax sections 5	
S S		_	Foderated compaigns			1						300110113 0	12 014
unt	'		Federated campaigns			1a 1b						ĺ	
Ű,			Fundraising events			1c		199,269.				l	
àifts ar A						1d						ĺ	
s, G			Government grants (conti			1e						ĺ	
Contributions, Gifts, Grants and Other Similar Amounts			All other contributions, gifts,		-							ĺ	
ibut			similar amounts not included	d ab	ove	1f		1,541,437.				ĺ	
d Or		g	Noncash contributions included in	n line	es 1a-1f	1g \$		138,975.				ĺ	
<u>a C</u>		h	Total. Add lines 1a-1f						1,740,706.				
								Business Code					
Program Service Revenue	2	а					_					ļ	
ue v		b					_					ļ	
m S ven		C					-						
Be		d					-						
Pro		e 4	All other pregram convice				-						
		f All other program service revenue g Total. Add lines 2a-2f											
$\rightarrow$	3		Investment income (inclue										
	•							877,452.			87	7,452.	
	4		Income from investment of						·				
	5		Royalties					r i i i i i i i i i i i i i i i i i i i				í	
						(i) Real		(ii) Personal					
	6	а	Gross rents	6	a							ĺ	
		b	Less: rental expenses $\dots$	6	b							l	
			Rental income or (loss)	6	c								
			Net rental income or (loss	· —		·····		(1) 01					
	7 a		Gross amount from sales of			Securitie	_	(ii) Other				l	
			assets other than inventory	7:	a 4,	632,97	6.					ĺ	
ē		D	Less: cost or other basis and sales expenses	-	. 3	974,37	R					ĺ	
evenue		~	Gain or (loss)			658,59	_					l	
Rev									658,598.			65	58,598.
ler	8		d Net gain or (loss)a Gross income from fundraising events (not				, -				, .		
Other			including \$	-								ĺ	
			contributions reported on									ĺ	
			Part IV, line 18				Ba	63,086.				l	
		b	Less: direct expenses				3b	71,817.					
			Net income or (loss) from			-	5		-8,731.				8,731.
	9	а	Gross income from gamin									l	
			Part IV, line 19				)a	36,000.					
			Less: direct expenses			····· L	9b	9,800.	26,200.				26,200.
	10		Net income or (loss) from						20,200.				10,200.
	10	d	Gross sales of inventory, and allowances				0a					ĺ	
		b	Less: cost of goods sold				0a 0b					l	
			Net income or (loss) from			····· L							
s			(····) ···			]		Business Code					
e eu	11	а					_						
lan.		b											
Miscellaneous Revenue		с					_						
Mis			All other revenue										
	-		Total. Add lines 11a 11d						2	-	-		
	12		Total revenue. See instruction	ons					3,294,225.	0.	0.		53,519.
23200	9 12	2-13	-22									rorm <b>99</b>	0 (2022)

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### Senator George J. Mitchell Scholarship Research Institute

	990 (2022) Research Ins t IX Statement of Functional Expense	stitute		01-05	23390 Page <b>10</b>
	on 501(c)(3) and 501(c)(4) organizations must comp		er organizations must co	omplete column (A).	
	Check if Schedule O contains a respon	se or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	1,460,894.	1,460,894.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	169,008.	140,673.	20,178.	8,157.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	F 4 2 C 0 4	420 000	20 800	00 005
7	Other salaries and wages	543,694.	430,279.	30,780.	82,635.
8	Pension plan accruals and contributions (include	10 576	14 100	2 1 7 2	1 000
	section 401(k) and 403(b) employer contributions)	18,576.	14,120.	3,173.	1,283.
9	Other employee benefits	69,763. 52,568.	59,409.	7,374. 6,276.	2,980. 2,537.
10	Payroll taxes	52,308.	43,755.	0,2/0.	2,007.
11	Fees for services (nonemployees):				
	Management				
		22,450.		22,450.	
	Accounting	22,4JU.		<u> </u>	
	Lobbying Professional fundraising services. See Part IV, line 17				
		235,945.		235,945.	
	Investment management fees Other. (If line 11g amount exceeds 10% of line 25,	255,545.		255,5450	
g	column (A), amount, list line 11g expenses on Sch 0.)	2,625.	2,185.	313.	127.
12	Advertising and promotion	10,998.	6,079.	2,180.	2,739.
13	Office expenses	79,749.	50,634.	3,204.	25,911.
14	Information technology	25,070.	18,671.	1,225.	5,174.
15	Povaltion	-			
16	Occupancy	87,038.	73,837.	8,619.	4,582.
17	Travel	6,940.	6,819.	30.	91.
18	Payments of travel or entertainment expenses	-			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	72,208.	71,340.	291.	577.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	13,419.	10,729.	947.	1,743.
23	Insurance	11,620.	9,877.	1,162.	581.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
a L					
b					
c d	<b> </b>				
d	All other expenses				
е 25	Total functional expenses. Add lines 1 through 24e	2,882,565.	2,399,301.	344,147.	139,117.
<u>25</u> 26	Joint costs. Complete this line only if the organization		2,000,001.	<u> </u>	
20	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				<b>– – – – – – – – – –</b>

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Form **990** (2022)

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Form 990 (	2022)	
Part X	Balance	Sheet

# Senator George J. Mitchell Scholarship Research Institute

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Par	τX	Balance Sheet					
		Check if Schedule O contains a response or n	ote to ar	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			100.	1	100.
	2	Savings and temporary cash investments			3,173,951.	2	4,094,897.
	3	Pledges and grants receivable, net			127,500.	3	261,091.
	4	Accounts receivable, net			11,007.	4	12,250.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub	stantial	contributor, or 35%			
		controlled entity or family member of any of th				5	
	6	Loans and other receivables from other disqua					
		under section 4958(f)(1)), and persons describ	ed in se	ction 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	B			23,255.	9	26,835.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		106,183.			
	b	Less: accumulated depreciation		70,652.	25,432.	10c	35,531.
	11	Investments - publicly traded securities		20,039,834.	11	11,546,955.	
	12	Investments - other securities. See Part IV, line		29,371,451.	12	29,617,873.	
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11	Γ	138,861.	15	238,253.	
	16	Total assets. Add lines 1 through 15 (must eq		52,911,391.	16	45,833,785.	
	17	Accounts payable and accrued expenses			102,097.	17	108,073.
	18	Grants payable		3,852,597.	18	3,892,430.	
	19	Deferred revenue		167,876.	19	648,154.	
	20	Tax-exempt bond liabilities		20			
	21	Escrow or custodial account liability. Complete			138,861.	21	120,710.
se	22	Loans and other payables to any current or for	cer, director,				
Liabilities		trustee, key employee, creator or founder, sub	stantial	contributor, or 35%			
iabi		controlled entity or family member of any of th	ese pers	ons		22	
	23	Secured mortgages and notes payable to unre	elated th	ird parties		23	
	24	Unsecured notes and loans payable to unrelat	ed third	parties		24	
	25	Other liabilities (including federal income tax, p	ayables	to related third			
		parties, and other liabilities not included on line	es 17-24	). Complete Part X			
		of Schedule D			0.	25	117,543.
	26	Total liabilities. Add lines 17 through 25			4,261,431.	26	4,886,910.
s		Organizations that follow FASB ASC 958, cl	neck hei	re X			
JCe		and complete lines 27, 28, 32, and 33.			116 260		261 200
alaı	27	Net assets without donor restrictions			-416,369.	27	-361,392.
dB	28	Net assets with donor restrictions			49,066,329.	28	41,308,267.
'n		Organizations that do not follow FASB ASC	958, ch	eck here			
or F		and complete lines 29 through 33.					
ets (	29	Capital stock or trust principal, or current fund			29		
sse	30	Paid-in or capital surplus, or land, building, or e				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			40 640 060	31	
Ň	32	Total net assets or fund balances			48,649,960.	32	40,946,875.
	33	Total liabilities and net assets/fund balances	<u></u>		52,911,391.	33	45,833,785.
							Form <b>990</b> (2022)

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Research	. Instit	cute	Э	

Form	1990 (2022) Research Institute	01-0	5233	90	Pag	<sub>je</sub> 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
			_		_	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		294		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,8			
3	Revenue less expenses. Subtract line 2 from line 1	3				60.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	48,0			
5	Net unrealized gains (losses) on investments	5	-8,2	114	,74	<u>45.</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	40,9	946	,81	75.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
			_	<u> </u>	′es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		1	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2022)

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<b>(Fc</b>	o <b>rm 99</b> rtment o	DULE A 00) of the Treasury nue Service	Co	Public Cha pomplete if the organ 494 At	OMB No. 1545-0047 <b>2022</b> Open to Public					
					Form990 for instruction					Inspection
Nan	ne of t	the organizati		-	J. Mitchell	Scho	larsh	ıp		identification number
Da	rt I	<b>B</b> oscon :		arch Insti		omplata ti	aio port ) C	`aa inatruation		1-0523390
					(All organizations must c				18.	
	organ				For lines 1 through 12, c					
1					on of churches described		on 170(b)(*	1)(A)(I).		
2					Attach Schedule E (Forn					
3		•	•		anization described in <b>s</b> e					
4				ation operated in co	njunction with a hospital	aescribe	a in sectio	A)(1)(a)011 n	.)(III). Enter	the hospital's name,
-		city, and stat		ar the henefit of a co			tod by o a	overnmentel	unit dooorik	and in
5					llege or university owned	u or opera	led by a g	overnmentar	unin descrit	
6				Complete Part II.)	nontal unit described in	nantion 1	70/61/41/41	(.)		
7	X			•	nental unit described in Intial part of its support f			.,	ha gaparal	nublic described in
'				omplete Part II.)	initial part of its support i	ion a gov	errinerita		ne general	
8		-		-	(1)(A)(vi). (Complete Par	+ II )				
9	$\square$				in section 170(b)(1)(A)(		ed in conii	inction with a	land-grant	college
Ū					ulture (see instructions).					
		university:		9				,,		,
10			on that norma	ally receives (1) more	than 33 1/3% of its sup	port from	contributio	ons, members	hip fees, a	nd gross receipts from
					t to certain exceptions;					
		income and u	inrelated busi	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	ired by the o	rganization	after June 30, 1975.
		See section	<b>509(a)(2).</b> (Co	mplete Part III.)						
11		An organizati	on organized	and operated exclus	ively to test for public sa	fety. See	section 50	09(a)(4).		
12		An organizati	on organized	and operated exclus	ively for the benefit of, to	perform	the function	ons of, or to c	arry out the	e purposes of one or
		more publicly	supported or	ganizations describe	ed in <b>section 509(a)(1)</b> o	r section	509(a)(2).	See section	509(a)(3). 🤇	Check the box on
		lines 12a thro	ough 12d that	describes the type o	of supporting organizatio	n and con	nplete line	s 12e, 12f, an	d 12g.	
а		<b>Type I.</b> A si	upporting orga	anization operated, s	upervised, or controlled	by its sup	ported or	ganization(s),	typically by	/ giving
			-		gularly appoint or elect a	a majority	of the dire	ctors or truste	ees of the s	supporting
	_			complete Part IV, Se						
b					or controlled in connec					
			•		anization vested in the s	ame perso	ons that co	ontrol or mana	age the sup	ported
_		¬ ~	( )	t complete Part IV,					II !	
C			-		g organization operated				illy integrate	ed with,
		- ··	•		b). You must complete I porting organization oper			-	rtad argani	ization(a)
C			-		zation generally must sat				-	
				<b>v</b>	nplete Part IV, Sections	•		•	u an alleni	10011033
е		- ·			written determination fro				II Type III	
					nally integrated support			x 1 ypo 1, 1 ypo	in, rype in	
f	Ente		-	•••						
ç				n about the supporte						·
	(i	i) Name of supp	orted	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your govern	nization listed ng document?	(v) Amount o	-	(vi) Amount of other
		organization			(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)
Tota	al									

#### Senator George J. Mitchell Scholarship Research Institute

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Schedule	A (Form 990) 2022	Research	Institute	
Part II	Support Schedu	le for Organizatio	ns Described in	Sections 1

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support				-		
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	993,059.	1,226,259.	2,177,259.	1,297,079.	1,740,706.	7,434,362.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	993,059.	1,226,259.	2,177,259.	1,297,079.	1,740,706.	7,434,362.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						1,474,973.
6	Public support. Subtract line 5 from line 4.						5,959,389.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	993,059.	1,226,259.	2,177,259.	1,297,079.	1,740,706.	7,434,362.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources $\dots$	708,642.	797,164.	708,572.	854,299.	877,452.	3,946,129.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on					26,200.	26,200.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	31,138.	39,771.		24,065.		94,974.
11	Total support. Add lines 7 through 10						11,501,665.
12	Gross receipts from related activities	, etc. (see instructi	ons)			12	
13	First 5 years. If the Form 990 is for the	he organization's fi	rst, second, third,	fourth, or fifth tax	year as a section §	501(c)(3)	
	organization, check this box and stop						
Sec	ction C. Computation of Publ	lic Support Pe	rcentage				
14	Public support percentage for 2022 (	line 6, column (f), c	livided by line 11,	column (f))		14	51.81 %
	Public support percentage from 2021					15	50.06 %
16a	<b>33 1/3% support test - 2022.</b> If the o	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the o	organization did no	ot check a box on l	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qua						
17a	10% -facts-and-circumstances tes	<b>t - 2022.</b> If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	ts-and-circumstand	es test, check this	s box and <b>stop he</b>	<b>re.</b> Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	est. The organization	on qualifies as a pu	ublicly supported o	organization		
b	10% -facts-and-circumstances tes	<b>t - 2021.</b> If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	he facts-and-circur	nstances test, che	ck this box and <b>st</b>	op here. Explain i	n Part VI how the	
	organization meets the facts-and-circ	umstances test. Tl	ne organization qu	alifies as a publicly	y supported organ	ization	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	ind see instruction	s
						Sebedule A	Form 990) 2022

Schedule A (Form 990) 2022

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Senator	George	J.	Mitchell	Scholarship

Schedule A (Form 990) 2022

Research Institute Part III Support Schedule for Organizations Described in Section 509(a)(2) 01-0523390 Page 3

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disgualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support			·			•
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for th	ne organization's f	irst, second, third	, fourth, or fifth tax	vyear as a section	501(c)(3) organizat	ion,
	check this box and stop here	-			-		
Sec	tion C. Computation of Publ	ic Support Pe	ercentage				
15	Public support percentage for 2022 (	line 8, column (f), (	divided by line 13,	column (f))		15	%
	Public support percentage from 2021					16	%
-	tion D. Computation of Inve						
	Investment income percentage for 20		•		)	17	%
	Investment income percentage from					18	%
	<b>33 1/3% support tests - 2022.</b> If the						
	more than 33 1/3%, check this box a						
h	<b>33 1/3% support tests - 2021.</b> If the						and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
	23 12-09-22	and not oneon a	<u>507 01 me 14, 18</u>				A (Form 990) 2022
20202				16		Concure r	
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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

## Schedule A (Form 990) 2022

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer lines 3b and 3c below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If* "*Yes*," *provide detail in* **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A (Form 990) 2022

	Senator George J. Mitchell Scholarship			
Sch	edule A (Form 990) 2022 Research Institute 01-	052339	0 Dr	000 <b>F</b>
	rt IV Supporting Organizations (continued)	002000	V Fa	aye J
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
-	detail in <b>Part VI.</b>	11c		
Sec	tion B. Type I Supporting Organizations		<u> </u>	
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one of more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	s, d		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
0	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
•	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how			
-	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's	•		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction			
1 a	The organization satisfied the Activities Test. Complete line 2 below.	JIIS).		
a b	The organization is the parent of each of its supported organizations. <i>Complete</i> <b>line 3</b> below.			
c	The organization is upported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (se	oo instructio	ne)	
2	Activities Test. Answer lines 2a and 2b below.	.0 111311 40110	Yes	No
2 a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		103	110
a	The capaciting an of the organization of activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Ves." then in <b>Part VI identify</b>			
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined	29		
ħ	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		

- these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

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2b

3a

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Sche	dule A (Form 990) 2022 Research Institute			)1-0523390 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on I	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	ist complete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	d Type III supporting org	anization (see

instructions).

Schedule A (Form 990) 2022

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Schedule A (Form 990) 2022

# Senator George J. Mitchell Scholarship Research Institute

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations (continu	ied)	0
Secti	on D - Distributions			Current Year	
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizatior	าร	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive	е		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		-	10	
		(i)	(ii)		(iii) Distributed la
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributior Pre-2022	15	Distributable Amount for 2022
_1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
c	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
-	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

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Part VI	Form 990) 2022 Supplemental Infor	Research mation. Provide	Institute the explanations re	equired by Part II	Scholarshig	01-0523390 F a or 17b; Part III, line 12;
	Part IV, Section A, lines 1,	2, 3b, 3c, 4b, 4c, lines 2 and 3; Part	5a, 6, 9a, 9b, 9c, 1 IV, Section E, lines	1a, 11b, and 11c 1c, 2a, 2b, 3a, a	; Part IV, Section B, line nd 3b; Part V, line 1; Pa	es 1 and 2; Part IV, Section ( art V, Section B, line 1e; Part
32028 12-09-2	2					Schedule A (Form 990

# Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

	e		
Name	of the	e organiz	ation

## **Schedule of Contributors**

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

01-0523390

Senator	George	J.	Mitchell	Scholarship
Research	n Instit	tut	е	

Organization	type (check one):	
organization	cype (check one).	

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> 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

X 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.

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

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

Schedule B (Form 990) (2022)

Name of organization Senator George J. Mitchell Scholarship Research Institute

Employer identification number

01-0523390

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if additiona	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$225,700.	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
2		\$194,722.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>151,090.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$ <u>105,515.</u>	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
5		\$100,442.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u> 223452 11-15		\$97,450.	Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2022)

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2022.04010 Senator George J. Mitchell 14888\_1

Schedule B (Form 990) (2022)	
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Research Institute

Name of organization

Senator George J. Mitchell Scholarship

Employer identification number

Page 2

01-0523390

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a)	(b)	(c)	(d)
<u>No.</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution         Person       X         Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$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
9		\$40,000.	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
		\$	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.)
223452 11-15	j-22		Schedule B (Form 990) (2022

Schedule B (Form 990) (2022)

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2022.04010 Senator George J. Mitchell 14888\_1

	B (Form 990) (2022)		Employ	Page 3
	rganization or George J. Mitchell Scholarship		Emplo	yer identification number
	rch Institute		01	-0523390
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is neede	ed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
5	Publicly traded securities			
		\$99,6	533.	12/31/22
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		\$		
223453 11-15	5-22 2 5			Schedule B (Form 990) (2022)

12070731 793251 14888

25 2022.04010 Senator George J. Mitchell 14888\_1

Schedule	B (Form 990) (2022)			Page <b>4</b>
	organization			Employer identification number
Senat	or George J. Mitchell S	Scholarship		
	rch Institute	-		01-0523390
	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	) through (e) and the following line er charitable, etc., contributions of \$1,000 or	ntry. For organizations	
(a) No.		space is needed.		
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gi	ft	
	Transferee's name, address, a	and ZIP + 4	Relationship of trar	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gi	 ft	
	Transferee's name, address, a	nd ZIP + 4	Relationship of trai	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gi	 ft	
	Transferee's name, address, a	Relationship of trai	nsferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
	Transferee's name, address, a	and ZIP + 4	Relationship of tran	nsferor to transferee
223454 11-1	15-22	26		Schedule B (Form 990) (2022)

12070731 793251 14888 2022.04010 Senator George J. Mitchell 14888\_1

(Forr	HEDULE D n 990)	<b>Supplemental Financial Statements</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.	OMB No. 1545-0047 <b>2022</b> Open to Public
	ment of the Treasury I Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.	Inspection
Nam	e of the organizati	on Senator George J. Mitchell Scholarship Research Institute	Employer identification numbe $01 - 0523390$
Pa	rt I Organiza	ations Maintaining Donor Advised Funds or Other Similar Funds or A	
		n answered "Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds (l	b) Funds and other accounts
1	Total number at er	nd of year	
2		f contributions to (during year)	
3	Aggregate value o	f grants from (during year)	
4		t end of year	
5	-	n inform all donors and donor advisors in writing that the assets held in donor advised fund	
		n's property, subject to the organization's exclusive legal control?	
6	-	n inform all grantees, donors, and donor advisors in writing that grant funds can be used c	•
		oses and not for the benefit of the donor or donor advisor, or for any other purpose confer	
De	impermissible priv		
Pa		ation Easements. Complete if the organization answered "Yes" on Form 990, Part IV,	line 7.
1		servation easements held by the organization (check all that apply).	
			rically important land area
		f natural habitat	ned historic structure
2		of open space through 2d if the organization held a qualified conservation contribution in the form of a co	peopletion accoment on the last
2	day of the tax year		Held at the End of the Tax Yea
а		nservation easements	2a
b		icted by conservation easements	2b
c		vation easements on a certified historic structure included in (a)	2c
d		vation easements included in (c) acquired after July 25,2006, and not on a	
		sted in the National Register	2d
3		/ation easements modified, transferred, released, extinguished, or terminated by the organ	ization during the tax
	year		-
4	Number of states	where property subject to conservation easement is located	
5	Does the organiza	tion have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enf	orcement of the conservation easements it holds?	Yes 🗌 No
6	Staff and voluntee	r hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation	on easements during the year
7	Amount of expense	es incurred in monitoring, inspecting, handling of violations, and enforcing conservation ea	sements during the year
8		vation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B	
		(4)(B)(ii)?	
9		be how the organization reports conservation easements in its revenue and expense staten	
		d include, if applicable, the text of the footnote to the organization's financial statements th	at describes the
Da		ounting for conservation easements. Itions Maintaining Collections of Art, Historical Treasures, or Other S	Similar Assots
ra		the organization answered "Yes" on Form 990, Part IV, line 8.	Similar Assets.
10			anaa ahaat warka
Ia	e e	elected, as permitted under FASB ASC 958, not to report in its revenue statement and bal	
		asures, or other similar assets held for public exhibition, education, or research in furtherar	ice of public
h		Part XIII the text of the footnote to its financial statements that describes these items.	a abaat worka of
D		elected, as permitted under FASB ASC 958, to report in its revenue statement and balance	
		ures, or other similar assets held for public exhibition, education, or research in furtherance ng amounts relating to these items:	
	-	ded on Form 990, Part VIII, line 1	\$
		id in Form 990, Part X	
2	.,	received or held works of art, historical treasures, or other similar assets for financial gain,	
2		ints required to be reported under FASB ASC 958 relating to these items:	provide
я	-	on Form 990, Part VIII, line 1	\$
		Form 990, Part X	
		eduction Act Notice, see the Instructions for Form 990.	• Schedule D (Form 990) 202
	1 09-01-22		
		27	
70	731 793251		1itchell 14888 1
2			

3         Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection froms (check all that apply): <ul> <li>Collection times (check all that apply):</li> <li>Proble exhibition</li> <li>Provide a description of the organization's collection's c</li></ul>			George J. h Institut collections of A	e		_				Page <b>2</b> ed)
a       Public exhibition       d       Lano or exchange program         b       Scholary research       e       Other         c       Preservation for future generations       e       Other         d       Provide a description of the organization is collections and explain how they further the organization's exempt purpose in Part XIII.       Start V       Exercise a set of the organization assets       types       No         Part IV       Exercise and the organization asset in the organization answerd "Yes" on Form 990, Part X, line 21.       No       Perform Sectore and Curstellia Arrangements. Complete the organization answerd "Yes" on Form 990, Part X, line 21.       No         d       Is the organization an agent, trustee, curstolar on or other intermodiary for contributions or other assets not included on form 990, Part X, line 21. (for escrow or cutstolar labeling)?       Yes       No         d       Is tho organization an agent, this yes       Intermodiary for escrew or cutstolar labeling?       Yes       No         d       Is tho organization nalout an include an amount on Form 990, Part X, line 21. (for escrew or cutstolar labeling?)       IX       Yes       No         d       If organization answerd "Yes" on Form 990, Part X, line 10.       Imter the organization answerd "Yes" on Form 990, Part X, line 21.       Yes       No         b       If Yes, 'explain the arrangement in Part XIII. Check heet if the organization answerd "Yes" on For	3									
b       Scholarly research       e       Cher         c       Previde a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.         5       Uning the year, did the organization's collections and explain how they further the organization accelection?       yes       No         Part IV       Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or resported an amount on form 990, Part X, line 21.       Is the organization an agent, furstee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.       Is the organization and part of the organization answered "Yes" on Form 990, Part X, line 10.         c       Beginning balance       Intermediation on the organization and part of the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       IX yes       No         b       If Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.       IX yes       No         c       Genering of year balance       (49, 297, 44, 577, 46, 397, 755, 294, 35, 0155, 194, 381, 312, 297, 755, 294, 35, 0125, 194, 931, 312, 246, 77, 558, 194, 551, 174, 910, 183, 625, 77, 558, 194, 551, 174, 910, 183, 625, 77, 558, 194, 551, 174, 910, 185, 603, 76, 623, 975,		collection items (check all that apply):			C	0				
b       Scholarly research       e       Cher         c       Previde a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.         5       Uning the year, did the organization's collections and explain how they further the organization accelection?       yes       No         Part IV       Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or resported an amount on form 990, Part X, line 21.       Is the organization an agent, furstee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.       Is the organization and part of the organization answered "Yes" on Form 990, Part X, line 10.         c       Beginning balance       Intermediation on the organization and part of the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       IX yes       No         b       If Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.       IX yes       No         c       Genering of year balance       (49, 297, 44, 577, 46, 397, 755, 294, 35, 0155, 194, 381, 312, 297, 755, 294, 35, 0125, 194, 931, 312, 246, 77, 558, 194, 551, 174, 910, 183, 625, 77, 558, 194, 551, 174, 910, 183, 625, 77, 558, 194, 551, 174, 910, 185, 603, 76, 623, 975,	а	Public exhibition	d	Loan or exc	hange prograr	n				
c       Preservation for future generations         4       Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.         During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets       to be sold to raise lundsr after than to be maintained as part of the organization's collection?       Ves       No         Part IVI       Excore and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part X, line 21.       Tais the organization and the intermediary for contributions or other assets not included       on form 990, Part X?       Ine State organization and the rest intermediary for contributions or other assets not included       on form 990, Part X?       No         b       If 'Yes, 'explain the arrangement in Part XIII and complete the following table:       Amount       It detection         c       Beginning balance       It detections during the year       It detection       It detection         2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account tability?       IX Yes       No         b If 'Yes' replain the arrangement In Part XIII       (De Prior year (D) (Div years balax (d) There years back (e) Four	b	Scholarly research	е		0.0					
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.     During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets     to be sold to raise funds rather than to be maintained as part of the organization's collection?     Part IV ESCON and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV. Ine 9, or     reported an anount on Form 990, Part X, Iine 21.     Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included     on Form 900, Part X?     Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included     on Form 900, Part X?     Is the organization angent. In Part XIII and complete the following table:         Centrol the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?     In the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?     If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII     Berning of year balance         49.989, 490.44, 577, 066.39, 755, 904.35, 055, 194.38, 884.     Gontributors         10.01 Current Yaar         20.5, 000.1, 21.43, 52.5, 97.4, 19.44, 89.56, 7, 7, 588.         Ne tinvestment earnings, gans, and losses         5, 500, 42.75, 508, 197.6, 222, 739.4, 000.126, 000.         216, 000.         216, 900.217.5, 508, 197.6, 222, 735.304.43, 50, 50.5, 194.         28, 300.2         Contributors         Contrabutors         Contrabutors	с									
To be sold to raise funds rather than to be maintained as part of the organization's collection?         Yes         No           Part IV         Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         The is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X         No           1a         Is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X         Image: Complete intermediary for contributions or other assets not included on Form 990, Part X, line 21, for escrow or custodial account liability?         Image: Complete intermediary for control to the complete intermediary for control to the complete intermediary for each on Part XIII.           2         Both environs during the year         1e         1         Image: Complete intermediary for escrow or custodial account liability?         Image: Complete intermediary for escrow or custodial account liability?         Image: Complete intermediary for escrow or custodial account liability?         Image: Complete intermediary for escrew or custodial account liability?         Image: Complete intermediary for escrew or custodial account liability?         Image: Complete intermediary for escrew or custodial account liability?         Image: Complete intermediary for escrew or custodial account liability?         Image: Complete intermediary for escrew or custodial account liability?         Image: Complete intermediary for escrew or custodial account liability?         Image: Complete intermediary for	4	-	ollections and explai	n how they further t	he organizatio	n's exemp	ot purpose in	Part XIII.		
Part IV       Escrow and Custodial Arrangements. Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         Is the organization an agent, trustee, custodial an or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.       Ives       Ves       X       No         b If 'Yes,' explain the arrangement in Part XIII and complete the following table:       Intermediation of table of table:       Intermediation of table:       Int	5	During the year, did the organization solicit o	r receive donations of	of art, historical trea	sures, or othe	r similar a	ssets			
Teported an amount on Form 990, Part X, line 21.         Term           1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?         Yes         X           1b If "Yes," explain the arrangement in Part XIII and complete the following table:         Image: Complete Term		to be sold to raise funds rather than to be ma	aintained as part of t	he organization's co	ollection?			Yes	;	No No
1a       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 980, Part X?       Image: Control of Contro of Control of Control of	Par			ete if the organizatio	on answered "	Yes" on Fo	orm 990, Part	IV, line 9	, or	
or Form 990, Part X?         Yes         X           b         If "Yes," explain the arrangement in Part XII and complete the following table:         Amount           c         Beginning balance         Id           d         Additions during the year         Id           e         Distributions during the year         Id           d         Additions during the year         Id           e         Distributions during the year         Id           d         Additions during the year         Id           d         Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?         X           Part V         Endowment Funds. Complete if the organization answeed "Ves" on Form 990, Part X in Part X in Check here if the explanation has been provided on Part X in Part X in Check here if the explanation has been provided on Part X in Part X in Check here if the explanation has been provided on Part X in Part X in Check here if the explanation answeed "Ves" on Form 990, Part X in Part X in Check here if the explanation answeed "Ves" on Form 990, Part X in Part X in A 1, 135, 697, 139, 134, 38, 282, 79, 7, 858, 057, 6, 222, 739, 6, 091, 655, 1-2, 134, 205, 7, 7, 858, 057, 6, 222, 739, 6, 091, 655, 000, 126, 000, 142, 372, 282, 49, 989, 490, 444, 577, 086, 39, 755, 904, 35, 055, 194, 38, 982, 900, 242, 900, 251, 000, 185, 000, 126, 000, 126, 000, 126, 000, 126, 000, 126, 000, 126, 000, 126, 000, 126, 000, 126, 000, 126, 000, 126, 000, 126, 000, 126, 000, 126, 000, 126, 000, 126, 000, 96, 127, 0300, 96, 127, 0300, 96, 127, 0300, 96, 127, 0300, 96, 1										
b       If Yes," explain the arrangement in Part XIII and complete the tollowing table:       Amount         c       Beginning balance       It         d       Additions during the year       It         e       Distributions during the year       It         d       Additions during the year       It         e       Distributions during the year       It         d       Ending balance       It         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account labitity?       IX         Part V       Endowment Funds. Complete if the explanation has been provided on Part XIII       IX         fa       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two yeas back.       (d) Four years back.         fa       Beginning of year balance       (a) 9.89, 9.40       44, 577, 0.86.       39, 755, 904.       35, 955.       7, 858.         b       Contributions       (a) 7.02       39, 755, 904.       35, 955.       7, 858.         b       Contributions       (a) 7.2, 282.       49, 989, 490.       44, 577, 086.       39, 755, 904.       35, 040.       126, 000.         fd Grants or scholarships       1, 135, 000.       1, 183, 625.       974, 900.       1, 044, 907.       000	1a	Is the organization an agent, trustee, custod	an or other intermed	liary for contributior	ns or other ass	ets not in	cluded			
c         Beginning balance         Amount           d         Additions during the year         1d         1d           e         Distributions during the year         1d         1d           2         Distributions during the year         1f         1e         1d           2a         Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?         IX         Yes         No           b         If "Yes," explain the arrangement in Part XIII. Check here if the explanation nawseed "Yes" on Form 990, Part X, line 10.         IX         Yes         No           Part V         Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10.         IX         Yes         13, 35, 055, 194, 133, 82, 849.           1a         Beginning of year balance         (a) Current year         (b) Prior year         (c) Two years back         (e) Four years back           1a         Beginning of year balance         (b) 9, 989, 490.         44, 577, 086.         39, 755, 904.         35, 055, 194.         38, 382, 849.           1b         Contributions         629, 174.         1, 135, 067.         1, 136, 060.         126, 000.         126, 000.         126, 000.         126, 000.         126, 000.         126, 000.         126, 000.         126, 000.         126, 000. <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th> <th>Yes</th> <th>;</th> <th>X No</th>								Yes	;	X No
c       Beginning balance       1c       1d         d       Additions during the year       1d       1d         e       Distributions during the year       1e       1f         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       X       Yes       No         b       If 'Yes', replain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       X       Yes       No         b       If 'Yes', replain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII       X       Yes       No         b       Orthorization and the organization answered 'Yes' on Form 990, Part X, line 10.       X       Yes       No         c       Additions during the year       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         c       Not investing and angement in Part XIII. Check here if the explanation answered 'Yes' on Form 990, Part X, line 10.       So 55, 194.       3s, 382, 849.       Additions of the years back       (d) Three years back       (e) Four years back         c       Orthributions       Garants or scholarships       1, 135, 000.       1, 183, 625.       974.900.       1, 040, 000.       893, 000.         e       Other expendit	b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:						
d Additions during the year       id         e Distributions during the year       id         f Ending balance       if         2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       X       Yes       No         bit frves, "explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back       (e) Fou years bach       (e) Fou years back								Amo	unt	
e         Distributions during the year         Ie           f         Ending balance         Image: Structure of the sequence of the seq	С	Beginning balance					1c			
f       Ending balance       11         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       X       Yes       No         b       ft "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XII       X       Yes       No         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part N, line 10.       X       Yes       No         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) four years back         b       Contributions       629, 174       1, 519, 697       19, 194       8, 965.       7, 958.         c       Net investment earnings, gains, and losses       -6, 580, 437       5, 588, 057.       6, 222, 739.       6, 091, 655.       -2, 134, 205.         c       Grants or scholarships       1, 135, 000.       1, 183, 225.       974, 900.       1, 040, 000.       895, 000.         c       Administrative expenditures for facilities       235, 945.       266, 72.5       194, 4551.       174, 910.       100, 308.         g       End of year balance       42, 372, 282.       49, 989, 490.       44, 577, 086.       39, 755, 904.       35, 055, 194.	d	Additions during the year					1d			
2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       X       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.       X       Yes       No         Part V       Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part K, line 10.       X       X         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         1a       Contributions       6.29.174       1.519, 657.       19, 914.       6, 965.       7, 958.         c       Not investment earnings, gains, and losses       6.580, 437.       5, 588, 057.       6, 222, 733.       6, 091, 655.       -2, 134, 205.         1, 135, 000.       1, 133, 625.       974, 900.       1, 040, 000.       895, 000.       242, 000.       251, 000.       185, 000.       126, 000.         2       Andministrative expenses       235, 945.       269, 725.       194, 851.       174, 910.       180, 308.       39, 755, 944.       35, 055, 194.       32       505.	е						1e			
b         If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.         Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 10.           Part V         Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.         Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 10.           1a         Beginning of year balance         (a) Current year         (b) Prov yes's back         (c) Two years back         (c) Four         (c) Four	f	Ending balance								
Part V         Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.           1a         Beginning of year balance         (a) Current year         (b) Prior year         (c) Two years back         (d) Three years back         (e) Four years back           1a         Beginning of year balance         (a) Qurrent year         (b) Prior year         (c) Two years back         (d) Three years back         (e) Four years back           1a         Beginning of year balance         (b) Prior year         (b) Prior year         (c) Two years back         (d) Three years back         (e) Four years back           b Contributions         629, 174         1, 1519, 697; 19, 19, 194, 8, 955; -2, 134, 205; -2, 134, 205; -2, 134, 205; -2, 134, 205; -2, 134, 206; -2, 134, 200; -2, 194, 000; 000; 0, 895, 000; -2, 22, 000; 242, 000; 251, 000; 1, 040, 000; 0, 895, 000; 235, 000; 242, 000; 251, 000; 1, 165, 000; 126, 000; 126, 000; -2, 235, 945; 265, 725; 194, 851; 0, 174, 910; 180, 308; -2, 95, 000; 242, 200; 251, 000; 185, 000; 126, 000; -2, 126, 0	2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for escrow or c	ustodial accou	ınt liability	/?	X Yes	;	
(a)         Current year         (b)         Prior year         (c)         Two years back         (d)         Three years back         (e)         Four years back           1a         Beginning of year balance         49,989,490.         44,577,086.         39,755,904.         35,055,194.         38,382,849.           b         Contributions         629,174.         1,519,697.         19,194.         8,965.         7,858.           c         Net investment earnings, gains, and losses         -6,580,437.         5,580,697.         6,222,738.         6,091,655.         -2,124,205.           c         Other expenditures for facilities         1,135,000.         1,183,625.         974,900.         1,040,000.         895,000.           e         Other expenditures for facilities         242,000.         251,000.         126,000.         126,000.           f         Administrative expenses         235,945.         269,725.         194,851.         174,910.         180,308.           g         End of year balance         27.9000         %         35,055,194.         35,055,194.           2         Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:         a board designated or quasiendowment         3.5400         %           c         Term end										X
1a       Beginning of year balance       49,989,490,44,577,086,39,755,904,35,055,194,38,382,849, 629,174,1,519,697,19,194,8,965,7,858, 6 Net investment earnings, gains, and losses       -6,580,437,5,588,057,6,222,739,6,091,655,-2,134,205, 7,858, 6,091,655,-2,134,205, 1,135,000,1,183,625,974,900,1,040,000,895,000, e Other expenditures for facilities and programs       -2,580,437,5,588,057,6,222,739,6,091,655,-2,134,205, 1,040,000,895,000, 242,000,251,000,185,000,126,000, 185,000,126,000,251,000,185,000,126,000, 185,000,126,000,251,000,185,000,126,000, 180,000,185,000,126,000,251,000,185,000,126,000, 35,055,194,27,282,49,989,490,44,577,086,39,755,904,35,055,194,277,286,29,725,194,851,174,910,1180,308, 42,372,282,49,989,490,44,577,086,39,755,904,35,055,194,277,906,09,755,904,35,055,194,277,900,0%         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment       3.5,450,0,9%         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or ganizations       3.5,055,194, 27,900,0,%         3       Are there endowment       68,550,0,9%       9%         4       Describe in Part XIII the intended uses of the organization that are held and administered for the organization by:       3a(i)       X         4       Describe in Part XIII the intended uses of the organization's endowment funds.       3a(i)       X         2       Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value	Par	<b>TV</b> Endowment Funds. Complete i	-		1					ana haali
b       Contributions       629,174.       1,519,697.       19,194.       8,965.       7,858.         c       Net investment earnings, gains, and losses       -6,580,437.       5,588,057.       6,222,739.       6,091,655.       -2,134,205.         d       Grants or scholarships       1,133,000.       1,183,625.       974,900.       1,040,000.       895,000.         e       Other expenditures for facilities       1,135,000.       1,26,000.       251,000.       185,000.       126,000.         f       Administrative expender       295,000.       242,000.       251,000.       185,000.       126,000.         g       End of year balance       242,372,282.       49,989,490.       44,577,086.       39,755,904.       35,055,194.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       Board designated or quasi-endowment       3.5400       %         g       Term endowment       68.5600       %       <			-				-			
c       Net investment earnings, gains, and losses       -6,580,437.       5,588,057.       6,222,739.       6,091,655.       -2,134,205.         d       Grants or scholarships       1,135,000.       1,183,625.       974,900.       1,040,000.       895,000.         e       Other expenditures for facilities and programs       235,945.       269,725.       194,851.       174,910.       186,000.         f       Administrative expenses       235,945.       269,725.       194,851.       174,910.       180,308.         g       End of year balance       42,372,282.       49,989,490.       44,577,086.       39,755,904.       35,055,194.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       Board designated or quasi-endowment       3.5400       %         b       Permanent endowment       68.5600       %       %       %       %       %         (i) Unrelated organizations       3.5400       %       %       %       %       %         (ii) Helated organizations       3.5400       %       %       %       %       %       %         (ii) Unrelated organizations       3.5400       %       %       %       %       %       %       % <t< th=""><th></th><th></th><th></th><th></th><th>-</th><th>-</th><th></th><th></th><th>38,3</th><th></th></t<>					-	-			38,3	
d Grants or scholarships       1,135,000       1,183,625       974,900       1,040,000       895,000         e Other expenditures for facilities and programs       295,000       242,000       251,000       185,000       126,000         f Administrative expenses       235,945       269,725       194,851       174,910       180,308         g End of year balance       42,372,282       49,989,490       44,577,086       39,755,904       35,055,194         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment       3.5400       %         b Permanent endowment       27.9000 %       *       *       Yes       No         (i) Unrelated organizations       3a(i)       X       X       3a(i)       X         (ii) Related organizations       3a(ii)       X       3a(ii)       X         (ii) Related organizations       3a(iii)       X       3a(i)       X       3a(i)       X         b If 'Yes' on line 3a(ii), are the related organization's endowment funds.       Feart W       Land, Buildings, and Equipment.       Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         b Buildings       and Equipment.       (a) Cost or other       (b) Cost or other			,							
e       Other expenditures for facilities and programs       295,000.       242,000.       251,000.       185,000.       126,000.         f       Administrative expenses       235,945.       269,725.       194,851.       174,910.       180,308.         g       End of year balance       42,372,282.       49,989,490.       44,577,086.       39,755,904.       35,055,194.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       Board designated or quasi-endowment       3.5400       %         b       Permanent endowment       68.5600       %       %       %         b       Permanent endowment       68.5600       %       %       %       %         b       Permanent endowment       27.9000.%       %       %       %       %       %         c       Term endowment funds not in the possession of the organization that are held and administered for the organization by:       (i)       %       %       %       %         (i)       Unrelated organizations       isd as required on Schedule R?       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       %       % <th></th> <th></th> <th></th> <th></th> <th></th> <th>-</th> <th></th> <th></th> <th></th> <th></th>						-				
and programs       295,000       242,000       251,000       185,000       126,000         f Administrative expenses       235,945       269,725       194,851       174,910       180,308         g End of year balance       42,372,282       49,989,490       44,577,086       39,755,904       35,055,194         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a Board designated or quasi-endowment       3.5400       %         b Permanent endowment       27.9000 %       The percentages on lines 2a, 2b, and 2c should equal 100%.       3a Are there endowment funds not in the possession of the organization that are held and administered for the organizations       3a(i)       X         i) Unrelated organizations       3b       3b       3b       3b       3b         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       40 Secription of property       (a) Cost or other basis (other)       (b) Cost or other basis (other)       3b       3b         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value desis (other)         Description of property       (a) Cost or other basis (other)       (b) Cost or other desis (other)       (c) Accumulated depreciation         1       Land       102,753, 67,879, 344,874.       57,551.       5731. </th <th></th> <th></th> <th>1,135,000.</th> <th>1,183,625.</th> <th>974</th> <th>,900.</th> <th>1,040,00</th> <th></th> <th>8</th> <th>95,000.</th>			1,135,000.	1,183,625.	974	,900.	1,040,00		8	95,000.
f       Administrative expenses       235,945.       269,725.       194,851.       174,910.       180,308.         g       End of year balance       42,372,282.       49,989,490.       44,577,086.       39,755,904.       35,055,194.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       a       39,755,904.       35,055,194.         2       Pervaide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a       a       5400       %         b       Permanent endowment       27.9000       %       ft       The percentages on lines 2a, 2b, and 2c should equal 100%.         3a       Are there endowment funds not in the possession of the organization that are held and administered for the organizations by:       (i)       Inrelated organizations       3a(ii)       X         (i)       Inelated organizations       Sad(ii)       X       3a(ii)       X         b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3a(ii)       X         d       Describe in Part XIII the intended uses of the organization's endowment funds.       Intententententententententententententen	е									
g End of year balance       42,372,282       49,989,490       44,577,086       39,755,904       35,055,194.         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       a Board designated or quasi-endowment       3.5400       %         b Permanent endowment       68.5600       %       %       %         c Term endowment       68.5600       %       %         c Term endowment       27.9000 %       %       %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a Are there endowment funds not in the possession of the organization that are held and administered for the organizations by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations listed as required on Schedule R?</li> <li>(i) Land, Buildings, and Equipment.</li> <li>Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.</li> </ul> <li>Description of property         <ul> <li>(a) Cost or other basis (investment)</li> <li>(b) Cost or other basis (other)</li> <li>(c) Accumulated depreciation</li> </ul> </li> <li>t Land</li> <li>t Land</li> <li>t Land</li> <li>t Lassehold improvements</li> <ul> <li>(a) Cost or other basis (other)</li> <li>(b) Cost or other basis (other)</li> <li>(c) Accumulated depreciation</li> <li>(d) Book value basis (investment)</li></ul>						·				
2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:         a       Board designated or quasi-endowment       3 • 5400 %         b       Permanent endowment       68 • 5600 %         c       Term endowment       27 • 9000 %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a         3a       Are there endowment funds not in the possession of the organization that are held and administered for the organizations by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(ii) Related organizations listed as required on Schedule R?</li> <li>(i) Land, Buildings, and Equipment.</li> </ul> Yes 'on line 3a(ii), iii X         3b       I         Part VI       Land, Buildings, and Equipment.         Complete if the organization answerd "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (other)       (c) Accumulated depreciation         1a       Land       Image: State of the organize of t	f						,			<u> </u>
a Board designated or quasi-endowment       3.5400 %         b Permanent endowment       68.5600 %         c Term endowment       27.9000 %         The percentages on lines 2a, 2b, and 2c should equal 100%.         3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       Yes No         (i) Unrelated organizations       3a(i)         (ii) Related organizations       3a(i)         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3a(i)         4 Describe in Part XIII the intended uses of the organization's endowment funds.       Part VI         Land, Buildings, and Equipment.       Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other       (b) Cost or other         b Buildings       3, 430.2, 773.657.         c Leasehold improvements       3, 430.2, 773.657.34, 874.         e Other       102, 753.67, 879.34, 874.         e Other       35, 531.						,086.	39,755,91	)4.	35,0	55,194.
b       Permanent endowment       68.5600       %         c       Term endowment       27.9000       %         The percentages on lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(ii) Related organizations listed as required on Schedule R?</li> <li>4 Describe in Part XIII the intended uses of the organization's endowment funds.</li> </ul> Part VI     Land, Buildings, and Equipment.           Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         (d) Book value basis (investment)           Description of property         (a) Cost or other basis (other)         (c) Accumulated depreciation               a Land <li>(c) Accumulated             <li>(d) Book value</li> <li>(d) Book value</li> <li>(d) Book value</li> <li>(d) Cost or other</li> <li>(l) Cost or 7, 879 · 34, 874 · 0</li> <li>(l) Cost or 0, 873 · 677 · 879 · 34, 874 · 0</li> </li>					a)) held as:					
c       Term endowment       27.9000 %         The percentages on lines 2a, 2b, and 2c should equal 100%.         3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(ii) Related organizations</li> <li>(ii) Related organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(iii) Related organizations</li> <li>(iii) Related organizations</li> <li>(iii) Related organizations listed as required on Schedule R?</li> <li>4 Describe in Part XIII the intended uses of the organization's endowment funds.</li> </ul> Part VI           Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.           Description of property         (a) Cost or other         (b) Cost or other               b Buildings <ld>               c Leasehold improvements             <ld>3, 430.2, 773.657.               d Equipment             <ld>102, 753.67, 879.34, 874.               e Other             <ld>               Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)             <ld>35, 531. </ld></ld></ld></ld></ld>	а			_%						
The percentages on lines 2a, 2b, and 2c should equal 100%.         3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organizations</li> <li>(ii) Related organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.</li> <li>(c) Accumulated depreciation</li> <li>(d) Book value</li> <li>(i) Related improvements</li> <li>(i) Related improvements</li> <li>(i) Related improvements</li> <li>(i) Related improvements<!--</th--><th>b</th><th>07 0000</th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th></li></ul>	b	07 0000								
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) Unrelated organizations</li> <li>(ii) Related organizations</li> <li>(iii) Related organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.</li> </ul> <ul> <li>(a) Cost or other basis (investment)</li> <li>(b) Cost or other basis (other)</li> <li>(c) Accumulated depreciation</li> <li>(d) Book value</li> <li>(d) Book value</li> <li>(d) Book value</li> <li>(d) Equipment</li> <li>(d) Equipment</li> <li>(d) Equipment</li> <li>(d) Column (d) must equal Form 990, Part X, column (B), line 10c.)</li> <li>(d) So (d) must equal Form 990, Part X, column (B), line 10c.)</li> </ul>	С		-							
organization by:       Yes       No         (i)       Unrelated organizations       3a(i)       X         (ii)       Related organizations       3a(ii)       X         b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.       Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         Description of property       (a) Cost or other       (b) Cost or other       (c) Accumulated         b       Buildings       5       57.         c       Leasehold improvements       3 , 430 .       2 , 773 .       657.         d       Equipment       102 , 753 .       67 , 879 .       34 , 874 .         e       Other       102 , 753 .       67 , 879 .       34 , 874 .										
(i) Unrelated organizations       3a(i)       X         (ii) Related organizations       3a(ii)       X         (ii) Related organizations       3a(ii)       X         3b       3b       3b       3c         4 Describe in Part XIII the intended uses of the organization's endowment funds.       3b       3b       3b         Part VI       Land, Buildings, and Equipment.       3b       3b       3b       3b         Complete if the organization answerd "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value       4basis (investment)       basis (other)       depreciation       (d) Book value         b Buildings       3,430.       2,773.       657.       657.         d Equipment       3,430.       2,773.       657.       34,874.         e Other       0       0       0       0       0       0         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       35,531.       35,531.	3a		ssion of the organiza	ation that are held a	and administer	ed for the				
(ii) Related organizations       3a(ii) X         b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b         4 Describe in Part XIII the intended uses of the organization's endowment funds.       3b         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.       (d) Book value         Description of property       (a) Cost or other basis (investment)       (c) Accumulated depreciation         1a Land       1       1       2         b Buildings       3       430.       2,773.         c Leasehold improvements       3,430.       2,773.       657.         d Equipment       102,753.       67,879.       34,874.         e Other       3       35,531.		<b>c</b>							_	
b       If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?       3b         4       Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (other)       (c) Accumulated depreciation         1a       Land       10       10         b       Buildings       102,753.       657.         c       Leasehold improvements       102,753.       67,879.       34,874.         e       Other       35,531.										
4 Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)         b Buildings       (d) Book value         c Leasehold improvements       3,430.         d Equipment       102,753.         e Other       0         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       35,531.		(II) Related organizations								
Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other       (b) Cost or other       (c) Accumulated         Description of property       (a) Cost or other       (b) Cost or other       (c) Accumulated         1a Land       Description of property       (a) Cost or other       (b) Cost or other       (c) Accumulated       (d) Book value         1a Land	b				·			31	<b>)</b>	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value         1a       Land	4 Dar			wment tunds.						
Description of property(a) Cost or other basis (investment)(b) Cost or other basis (other)(c) Accumulated depreciation(d) Book value1a Land	1 0			) Part IV line 11a 9	See Form 990	Part X lin	ne 10			
basis (investment)     basis (other)     depreciation       1a Land				· · · ·	i			(d) D	ooky	
1a Land		Description of property				• •		(u) b	OOK	alue
b Buildings       3,430.       2,773.       657.         c Leasehold improvements       102,753.       67,879.       34,874.         e Other       7tal. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       35,531.	10	Land	· · · ·			aopie				
c Leasehold improvements       3,430.       2,773.       657.         d Equipment       102,753.       67,879.       34,874.         e Other       5       67,879.       34,874.         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       35,531.										
d Equipment         102,753.67,879.34,874.           e Other					3.430.		2.773			657.
e Other       Other         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       35,531.				10		F			34	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)					_,				~ -	, • , • •
				X column (R) line 1	10c)				35	.531.
	Tota		gaari onni 000, i dit				Scher	lule D (Fr		

Senator George J. Mitchell Scholarship Research Institute

Schedule D (Form 990) 2022 Research In	stitute	01	-0523390 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			1 - f
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	1-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) Wellington Intermediate (B) Bond Fund	1 672 017	End-of-Year Market	Value
	4,673,817. 2,471,881.	End-of-Year Market	
	2,4/1,001.	Ella-OI-fear Market	Value
	2,435,431.	End-of-Year Market	Value
(E) Assets (F) Wellington Global	2,435,431.	Ella-OI-fear Market	Value
	3,899,174.	End-of-Year Market	Value
	5,099,174.	End-OI-Teal Market	Value
(H) Total (Cal. (b) must actual Form 000, Dart V, cal. (D) line 10.)	29,617,873.		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.	29,017,073.		
	on Form 000 Dart IV/ line -	11. Sac Form 000 Dart V line 12	
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	of yoar market yoluo
		Conviction of valuation. Cost of end	roryear market Value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	on Form 000 Dart IV/ line -	11d See Form 000 Dort V line 15	
Complete if the organization answered "Yes"	Description	The See Form 990, Part X, line 15.	(b) Book value
	Description		(b) BOOK value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	45)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	1 1e or 1 11. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			117 5/3
(2) Lease Liabilities			117,543.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line			117,543.
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote to	the organization's financial statements	
organization's liability for uncertain tax positions under	FASB ASC 740. Check he	re if the text of the footnote has been p	ovided in Part XIII X

Schedule D (Form 990) 2022

232053 09-01-22

Senator	George	J.	Mitchell	Scholarship
Research	Instit	ute	2	

Sche	edule D (Form 990) 2022 Research Institute		<u>0523390</u> <sub>F</sub>	Page 4
Pa	art XI Reconciliation of Revenue per Audited Financial Statements With Reve	enue per Retur	n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		-	
1	Total revenue, gains, and other support per audited financial statements	1	-4,974,8	348.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	a Net unrealized gains (losses) on investments	14,745.		
b	Donated services and use of facilities 2b			
с	Recoveries of prior year grants 2c			
d	d Other (Describe in Part XIII.) 2d	81,617.		
е	Add lines <b>2a</b> through <b>2d</b>	2e	-8,033,1	
3	Subtract line <b>2e</b> from line <b>1</b>	3	3,058,2	280.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	a Investment expenses not included on Form 990, Part VIII, line 7b 4a 2	35,945.		
b	Other (Describe in Part XIII.) 4b			
с	Add lines 4a and 4b	4c	235,9	
5			3,294,2	225.
Pa	art XII Reconciliation of Expenses per Audited Financial Statements With Exp	penses per Retu	ırn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		-	
1	Total expenses and losses per audited financial statements	1	2,728,2	237.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	a Donated services and use of facilities 2a			
b	p Prior year adjustments 2b			
с				
d	d Other (Describe in Part XIII.) 2d	81,617.		
е	Add lines 2a through 2d	2e	81,6	
3	Subtract line <b>2e</b> from line <b>1</b>		2,646,6	520.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	a Investment expenses not included on Form 990, Part VIII, line 7b 4a 2	35,945.		
b	Other (Describe in Part XIII.) 4b			
с	Add lines 4a and 4b	4c	235,9	
5	Total expenses. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 18.</i> )	5	2,882,5	565.
	art XIII Supplemental Information.			

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### Part IV, line 2b:

Senator George	J.	Mitchell	Scholarship	Research	Institute	holds	funds	on
----------------	----	----------	-------------	----------	-----------	-------	-------	----

behalf of another entity. Under the agreement with this entity, Mitchell

Institute acts as an administrator for this scholarship fund.

Part V, line 4:

#### Used for grants for tuition assistance/scholarships or other such

#### purposes.

Part X, Line 2:

Mitchell Institute is exempt from federal and state income taxes under

Section 501(c)(3) of the Internal Revenue Code. Accordingly, there is no Schedule D (Form 990) 2022 232054 09-01-22 30

	Senator George J. Mitchell Scholarship		
Schedule D (Form 990) 2022	Research Institute	01-0523390	Page 5
Part XIII Supplemental	Information (continued)		

provision for income taxes within the financial statements.

Tax-exempt organizations could be required to record an obligation for income taxes as the result of a tax position they have historically taken on various tax exposure items including unrelated business income or tax status. Under guidance issued by the Financial Accounting Standards Board, assets and liabilities are established for uncertain tax positions taken or positions expected to be taken in income tax returns when such positions are judged to not meet the "more-likely-than-not" threshold, based upon the technical merits of the position.

Mitchell Institute has evaluated the position taken on its filed tax returns. Mitchell Institute has not taken, nor does it expect to take any uncertain tax positions in any income tax return.

Part XI, Line 2d - Other Adjustments:

Special Event & Gaming Expenses

Part XII, Line 2d - Other Adjustments:

Special Event & Gaming Expenses

81,617.

81,617.

Schedule D (Form 990) 2022

232055 09-01-22

Schedule D (Form 990) Senator George J. Mitchell Research Institute	Scholarship	01-0523390 Page <b>5</b>
Part XIII Supplemental Information (continued)		01-0525590 Page 5
Part VII Investments - Other Securities. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Wellington International Growth	2,427,210.	FMV
Wellington Durable Companies	1,866,005.	FMV
Wellington US Researh Equity	1,287,997.	FMV
Wellington Emerging Markets	707,169.	FMV
Wellington Global Total Return	2,411,070.	FMV
Wellington Quality Value	2,475,145.	FMV
Corporate Bonds	1,722,064.	FMV
US Government Securities	3,064,470.	FMV
International Securities	176,440.	FMV

232421 04-01-22

Schedule D (Form 990)

SCHEDULE G	Suppleme	ntal Information Regarding	ı Fun	drais	ing or Gaming	Acti	vities	OMB No. 1545-0047		
(Form 990)	Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.									
Department of the Treasury Internal Revenue Service										
Name of the organization										
		h Institute					01-052			
	complete this par	<ul> <li>Complete if the organization answert.</li> </ul>	ered "ነ	es" o	n Form 990, Part IV,	line 1	7. Form 990	EZ filers are not		
<ul> <li>a Mail solicitat</li> <li>b Internet and</li> <li>c Phone solici</li> <li>d In-person so</li> <li>2 a Did the organization</li> <li>key employees list</li> </ul>	ions email solicitations tations licitations on have a written c ed in Form 990, P highest paid indiv	f Solicita g Specia or oral agreement with any individua art VII) or entity in connection with p viduals or entities (fundraisers) purs	tion of tion of fundra l (inclu	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees	Υ Π	es No o be		
(i) Name and addres or entity (fund		(ii) Activity	have c	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	to (o	Amount paid or retained by fundraiser ted in col. (i)			
			Yes	No						
Total           3 List all states in whi           or licensing.	ch the organizatio	n is registered or licensed to solicit	contrik	outions	s or has been notified	d it is	exempt fron	n registration		

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Schedule G (Form 990) 2022

232081 10-27-22

-		le G (Form 990) 2022 <b>Resear</b>	r George J. M ch Institute		- 01-	0523390 Page 2
Pa	rt I	Fundraising Events. Complete if t of fundraising event contributions and g				
			(a) Event #1 Gala (event type)	(b) Event #2	(c) Other events None (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	262,355.			262,355.
æ	2	Less: Contributions	199,269.			199,269.
	3	Gross income (line 1 minus line 2)	63,086.			63,086.
	4	Cash prizes				
ses	5	Noncash prizes				
<b>Direct Expenses</b>	6	Rent/facility costs	26,492.			26,492.
Direct	7	Food and beverages	38,932.			38,932.
	8 9	Entertainment Other direct expenses	6,393.			6,393.
	10 11	Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from	line 3, column (d)			71,817. -8,731.
Pa	πι	<b>Gaming.</b> Complete if the organization \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Forn	n 990, Part IV, line 19, or	reported more than	
Revenue			(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	<b>(d)</b> Total gaming (add col. <b>(a)</b> through col. <b>(c)</b> )
Reve	1	Gross revenue			36,000.	36,000.
ses	2	Cash prizes				
Expenses	3	Noncash prizes			9,800.	9,800.
Direct	4	Rent/facility costs				
_	5	Other direct expenses	Yes%	Yes %	X Yes 100.00 %	
		Volunteer labor	No	No	No	0.000
	7	Direct expense summary. Add lines 2 throug				9,800.
	8	Net gaming income summary. Subtract line	/ trom line 1, column (d)			26,200.
а	ls t	ter the state(s) in which the organization cond the organization licensed to conduct gaming a No," explain:	activities in each of these	states?		X Yes No
		ere any of the organization's gaming licenses Yes," explain:				Yes X No
23208	2 10	)-27-22			Sche	dule G (Form 990) 2022

Senator George J. Mitchell Scholarship	01 050000
Schedule G (Form 990) 2022 Research Institute	01-0523390 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes X No
<b>12</b> Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	Yes X No
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	
<b>b</b> An outside facility	<u>тар</u> 136 100.00 %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and reco	ords:
Name Lisa Sirois	
Address 75 Washington Avenue, Suite 2E - Portland, ME 0410	1
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes X No
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization \$ and the an	nount
of gaming revenue retained by the third party \$	
c If "Yes," enter name and address of the third party:	
Name	
Address	
16 Gaming manager information:	
Name N/A	
Gaming manager compensation \$ * *	
Description of services provided The raffle is a closed raffle done at,	
the Institute's Gala event. For an additional donation o	
\$250, one can complete an entry card and enter to win the	e raiile
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes X No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spen	t in the
organization's own exempt activities during the tax year \$ Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v	i); and Part III, lines 9, 9b, 10b
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	), and Fart III, lines 9, 90, 100,
Schedule G, Part III, Line 16, Description of Services Prov	ided:
The raffle is a closed raffle done at, and only at,	
the Institute's Gala event. For an additional donation or p	ledge of
\$250, one can complete an entry card and enter to win the r	affle
prize. A manager of this raffle activity is therefore not r	equired.
<b>_</b>	

232083 10-27-22

Schedule G (Form 990) 2022

	Senator George J. Mitch	nell Scholarship	
Schedule G (Form 990) Part IV Supplemental Inform		-	01-0523390 Page 4
Part IV Supplemental Infor	mation (continued)		
020004 04 01 00			Schedule G (Form 990)
232084 04-01-22	36		

SCHEDULE I (Form 990) Department of the Treasury	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990.								1545-0047 <b>222</b> to Public
Internal Revenue Service				s.gov/Form990 for		ation.		Insp	ection
Name of the organization	Senator G Research		Mitchell Sc	cholarship	)			Employer identificat $01-05$	tion number
Part I General Info	rmation on Grants a								
-	ard the grants or assi	stance?	-				istance, and the selec		No No
Part II Grants and C	Other Assistance to	Domestic Organi		ic Governments.	Complete if the org	anization answered "Y	′es" on Form 990, Par	t IV, line 21, for any	
<b>1 (a)</b> Name and address or govern		(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose o or assistar	

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) 2022

## Senator George J. Mitchell Scholarship

Schedule I (Form 990) 2022

Research Institute

01-0523390

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
cholarships to one graduating senior from every					
oublic high school in Maine who will be attending					
post-secondary degree program.	147	1,315,715.	٥.		
ellowship Awards to Mitchell Scholars and alumni					
n their pursuit of internships, service learning,					
nd study abroad experiences that offer personal					
nd professional development.	78	92,412.	0.		
Contingency Funds to assist scholars who encounter					
inancial hurdles that could prevent college					
completion.	41	45,346.	0.		

Part I, Line 2:

Each year, the Institute awards a scholarship to a graduating senior from

every public high school in Maine who will be attending a two-year or

four-year post-secondary degree program. Scholarship funds are sent

directly to the respective schools and credited to the student's tuition

account. An agreement is signed by the student in the year awarded and

verification is obtained from the school annually.

The Institute also provides funding for Fellowship Awards, ranging from

Senator George J. Mitchell Scholarship	
Schedule I (Form 990) Research Institute	01-0523390 Page 2
Part IV Supplemental Information	
\$150 to \$1,500. The Fellowship Awards offer support to qual	lified Mitchell
Scholars and alumni in their pursuit of internships, servio	ce learning, and
study abroad experiences that offer ongoing personal and p	rofessional
development. These funds empower Scholars to pursue enrich	ing opportunities
regardless of financial factors.	

Additionally, the Institute also provides funding for Contingency Funds; the Institute offers two conteingcy funds - the SOS Fund (Supporting our Scholars) and the SPARC Fund (Subsidy Providing Assistance with Recurring Costs) - to assist Scholars who encounter financial hurdles that may potentially derail college completion. Support is issued on a case-by-case basis through consultation with Mitchell Institute staff members.

SC	HEDULE J	Compensation Information	I	OMB No.	1545-00	47	
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		2022			
•		Compensated Employees					
Dena	tment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.		Open to	Publ	ic	
Intern	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe			
Nan	ne of the organization		Employer ide			mber	
		Research Institute	01-05	52339	0		
Pa	rt I Question	s Regarding Compensation					
					Yes	No	
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	1 990,				
		line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or c	, i i i i i i i i i i i i i i i i i i i					
	Travel for companions Payments for business use of personal residence						
		ation and gross-up payments					
	Discretionary	spending account Personal services (such as maid, chauffer	ur, chef)				
	If any of the last						
b	•	on line 1a are checked, did the organization follow a written policy regarding payment or					
•		provision of all of the expenses described above? If "No," complete Part III to explain		1b			
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,					
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2			
2	ladiaata udalala ifa		-				
3		ny, of the following the organization used to establish the compensation of the organization?					
		ector. Check all that apply. Do not check any boxes for methods used by a related organizat					
	X Compensation	ation of the CEO/Executive Director, but explain in Part III.					
		compensation consultant     Compensation survey or study       ther organizations     X	ommittoo				
			ommittee				
4	During the year did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing					
-	organization or a re						
а	•	e payment or change-of-control payment?		4a		x	
b		eive payment from a supplemental nonqualified retirement plan?				X	
		eive payment from an equity-based compensation arrangement?				x	
-		nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
	Only section 501(c	:)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on				
	contingent on the r						
а	The organization?			5a		Х	
b	Any related organiz	ation?				Х	
		or 5b, describe in Part III.					
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensati	on				
	contingent on the r	net earnings of:					
а	The organization?			. 6a		Х	
		ation?				Х	
		or 6b, describe in Part III.					
7	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payment	S				
	not described on lir	nes 5 and 6? If "Yes," describe in Part III		. 7		Х	
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to t					
	initial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III				Х	
9	If "Yes" on line 8, d	id the organization also follow the rebuttable presumption procedure described in					
		n 53.4958-6(c)?		9			
LHA		eduction Act Notice, see the Instructions for Form 990.	Schedul	e J (Forr	n 990)	) 2022	

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Schedule J (Form 990) 2022

Research Institute

01-0523390

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
<b>(A)</b> Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Jared Cash	(i)	151,676.	0.	0.	8,000.	9,332.	169,008.	0.
President/Secretary	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

#### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

#### SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

**Open to Public** 

/

Department of the Treasury

#### Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection Employer identification number

∕

Internal Revenue Service	

#### Senator George J. Mitchell Scholarship Name of the organization Ingtitut

01-0523390

	Research	Institute	
Part I	Types of Property		
		(a)	(h

		(a) Check if applicable	(D) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		0	S
1	Art - Works of art			-				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	9	135,355.	Fair Market	Val	.ue	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory	X	1	3,620.	Fair Market	Val	.ue	
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()							
28	Other ( )							
29	Number of Forms 8283 received by the organ							
	for which the organization completed Form 82	283, Part V, I	Donee Acknowledg	ement 29				
						`	Yes	No
30a	During the year, did the organization receive k							
	must hold for at least 3 years from the date of							v
	exempt purposes for the entire holding period	1?				30a		X
b	If "Yes " describe the arrangement in Part II							

31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash	
	contributions?	

b	If "Yes," describe in Part II.
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,

describe	in i	Part	II.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

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32a

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Schedule M	(Form 990	) 2022	Senator Researc	Geor h Ins	rge J stitu	. Mito te	chell	Sch	olars	hip	0	1-0523	390	Pag
Part II	Supple is reportir	<b>mental</b> ng in Part I	<b>Informatio</b> I, column (b), t ditional inform	<b>n.</b> Provid he numbe	e the info	rmation red	quired by he numbe	Part I, li er of iten	nes 30b, : ns receive	32b, and ed, or a d	d 33, and combina	l whether th tion of both.	e organiza Also com	ation Iplete
Schedu	le M,	Line	32b:											
The In	stitu	te pr	ocesses	and	sell	s gift	s of	sec	uriti	.es t	hrou	gh its	thir	d
party	inves	tment	broker	. Dor	natio	ns of	secu	riti	es ar	e so	old a	s soon	as	
admini	strat	ively	possib	le.										
												Cobo-lui-	M / 5 am	0001
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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization



01-0523390

Form 990, Part III, Line 1, Description of Organization Mission:

to engage in research on these issues.

Research Institute

Form 990, Part VI, Section B, line 11b:

Form 990 is reviewed by the staff accountant and President/CEO in

conjunction with the audited financials. A copy of the final draft

reviewed by the finance committee is distributed to the board of directors

for review prior to filing.

Form 990, Part VI, Section B, Line 12c:

All officers, directors and key employees of Mitchell Institute are

required to sign a disclosure statement annually.

Form 990, Part VI, Section B, Line 15:

A report on employee compensation in nonprofit organizations in northern

New England is obtained as available for comparability purposes. Other

market data is periodically obtained to assess the competitiveness of the

compensation program. The executive committee reviews the President/CEO

compensation. The President/CEO reviews the compensation of other

employees. All compensation recommendations are approved by the board of

directors as part of the annual operating budget process.

Form 990, Part VI, Section C, Line 18:

The Organization's Form 990 is also available on its own website at:

http://mitchellinst	titute.org/about-mitchell-institute/l	earn-more/
LHA For Paperwork Reduction Act	Notice, see the Instructions for Form 990 or 990-EZ.	Schedule O (Form 990) 2022
232211 10-28-22	45	
12070731 793251 14888	2022.04010 Senator George J	. Mitchell 14888_1

Schedule O (Form 990) 202	22	Page <b>2</b>
Name of the organization	Senator George J. Mitchell Scholarship Research Institute	Employer identification number 01-0523390

Form 990, Part VI, Section C, Line 19:

Mitchell Institute provides copies of its governing documents, conflict of

interest statement, and financial statements upon request.

Form 990, Part XII, Line 2c:

The audit process has not changed from the prior year.

232212 10-28-22