

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

2023

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

For calendar year 2023 or tax year beginning 10/01, 2023, and ending 9/30, 2024

Rosscare 43 Whiting Hill Road, Suite 400 Brewer, ME 04412

A Employer identification number 01-0391038

B Telephone number (see instructions) 207 973-9081

G Check all that apply: Initial return, Final return, Address change, Initial return of a former public charity, Amended return, Name change

C If exemption application is pending, check here

D 1 Foreign organizations, check here

2 Foreign organizations meeting the 85% test, check here and attach computation

H Check type of organization: Section 501(c)(3) exempt private foundation, Section 4947(a)(1) nonexempt charitable trust, Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here

I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ 8,698,822. J Accounting method: Cash, Accrual, Other (specify)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12), Operating and Administrative Expenses (13-26), and Summary (27-29).

<b>Part II Balance Sheets</b> <small>Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash – non-interest-bearing .....			
	<b>2</b> Savings and temporary cash investments .....			
	<b>3</b> Accounts receivable .....			
	Less: allowance for doubtful accounts .....			
	<b>4</b> Pledges receivable .....			
	Less: allowance for doubtful accounts .....			
	<b>5</b> Grants receivable .....			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) .....			
	<b>7</b> Other notes and loans receivable (attach sch) .....			
	Less: allowance for doubtful accounts .....			
	<b>8</b> Inventories for sale or use .....			
	<b>9</b> Prepaid expenses and deferred charges .....	472.	472.	472.
	<b>10a</b> Investments – U.S. and state government obligations (attach schedule) .....			
	<b>b</b> Investments – corporate stock (attach schedule) .....			
	<b>c</b> Investments – corporate bonds (attach schedule) .....			
	<b>11</b> Investments – land, buildings, and equipment: basis .....			
Less: accumulated depreciation (attach schedule) .....				
<b>12</b> Investments – mortgage loans .....				
<b>13</b> Investments – other (attach schedule) .....				
<b>14</b> Land, buildings, and equipment: basis .....	5,250.			
Less: accumulated depreciation (attach schedule) .....	See Stmt 2 5,250.			
<b>15</b> Other assets (describe See Statement 3 ) .....	7,264,852.	8,698,350.	8,698,350.	
<b>16 Total assets</b> (to be completed by all filers – see the instructions. Also, see page 1, item I) .....	7,265,324.	8,698,822.	8,698,822.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	2,679,751.	2,560,582.	
	<b>18</b> Grants payable .....			
	<b>19</b> Deferred revenue .....			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons .....			
	<b>21</b> Mortgages and other notes payable (attach schedule) .....			
	<b>22</b> Other liabilities (describe See Statement 4 ) .....	-54,244.	-36,792.	
	<b>23 Total liabilities</b> (add lines 17 through 22) .....	2,625,507.	2,523,790.	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.</b> <input checked="" type="checkbox"/>			
	<b>24</b> Net assets without donor restrictions .....	-2,625,035.	-2,523,318.	
	<b>25</b> Net assets with donor restrictions .....	7,264,852.	8,698,350.	
	<b>Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.</b> <input type="checkbox"/>			
	<b>26</b> Capital stock, trust principal, or current funds .....			
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund .....			
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds .....			
<b>29 Total net assets or fund balances</b> (see instructions) .....	4,639,817.	6,175,032.		
<b>30 Total liabilities and net assets/fund balances</b> (see instructions) .....	7,265,324.	8,698,822.		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year – Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) .....	<b>1</b>	4,639,817.
<b>2</b> Enter amount from Part I, line 27a. ....	<b>2</b>	122,767.
<b>3</b> Other increases not included in line 2 (itemize See Statement 5) .....	<b>3</b>	1,433,498.
<b>4</b> Add lines 1, 2, and 3. ....	<b>4</b>	6,196,082.
<b>5</b> Decreases not included in line 2 (itemize See Statement 6) .....	<b>5</b>	21,050.
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 29 .....	<b>6</b>	6,175,032.

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

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here . . . . . <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary — see instructions)		
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) . . . . .	1	0.
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) . . . . .	2	0.
3	Add lines 1 and 2 . . . . .	3	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) . . . . .	4	0.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	5	0.
6	Credits/Payments:		
a	2023 estimated tax pymts and 2022 overpayment credited to 2023 . . . . .	6a	461.
b	Exempt foreign organizations — tax withheld at source . . . . .	6b	
c	Tax paid with application for extension of time to file (Form 8868) . . . . .	6c	
d	Backup withholding erroneously withheld . . . . .	6d	
7	Total credits and payments. Add lines 6a through 6d . . . . .	7	461.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	9	0.
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	10	461.
11	Enter the amount of line 10 to be: <b>Credited to 2024 estimated tax</b> 461.   <b>Refunded</b> . . . . .	11	0.

BAA

**Part VI-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? .....		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition .....		X
If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? .....		X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. \$ <u>0.</u> <b>(2)</b> On foundation managers. \$ <u>0.</u>		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ <u>0.</u>		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? .....		X
If "Yes," attach a detailed description of the activities.		
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .....		X
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....		X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? .....		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? .....		X
If "Yes," attach the statement required by <i>General Instruction T</i> .		
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? .....	X	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV .....	X	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered. See instructions. <u>ME</u>		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation. ....	X	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII.	X	
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. ....		X
<b>11</b> At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .....		X
<b>12</b> Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions .....		X
<b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? ... Website address: <u>https://northernlighthealth.org/</u>	X	
<b>14</b> The books are in care of <u>John J. Doyle</u> Telephone no. <u>207 973-9081</u> Located at <u>43 Whiting Hill Road Brewer ME</u> ZIP + 4 <u>04412</u>		
<b>15</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — check here. .... N/A. <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year. .... <b>15</b> N/A		
<b>16</b> At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		

BAA

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

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

	Yes	No
<b>1a</b> During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? .....	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....	1a(4)	X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? .....	1a(5)	X
(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) .....	1a(6)	X
<b>b</b> If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. ....	1b	
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here. .... <input type="checkbox"/>		
<b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2023? .....	1d	X
<b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b> At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2023? If "Yes," list the years. ....	2a	X
20 __ , 20 __ , 20 __ , 20 __		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement – see instructions.) .....	2b	
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ....		
20 __ , 20 __ , 20 __ , 20 __		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....	3a	X
<b>b</b> If "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2023.) .....	3b	
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....	4a	X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2023? .....	4b	X

BAA

Form 990-PF (2023)

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

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

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Statement 7		0.	0.	0.

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

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

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
-----		
-----		
-----		
-----		
Total number of others receiving over \$50,000 for professional services .....		0

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

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

	Expenses
1 SYLVIA ROSS LEGACY PROGRAM-Assistance to qualified applicants to reduce the cost of residency at the Sylvia Ross Home, assisted living apartments located on the campus of Ross Manor in Bangor.	201,333.
2 Also see attached publication.	
3 -----	
4 -----	

**Part VIII-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2 -----	
All other program-related investments. See instructions.	
3 -----	
Total. Add lines 1 through 3 .....	0.

BAA

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

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

**Part X** **Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part IX, line 6.....	<b>1</b>	N/A
<b>2a</b>	Tax on investment income for 2023 from Part V, line 5.....	<b>2a</b>	
<b>b</b>	Income tax for 2023. (This does not include the tax from Part V.).....	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.....	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.....	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions.....	<b>4</b>	
<b>5</b>	Add lines 3 and 4.....	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see instructions).....	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1.....	<b>7</b>	

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26.....	<b>1a</b>	229,997.
<b>b</b>	Program-related investments – total from Part VIII-B.....	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.....	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required).....	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).....	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4.....	<b>4</b>	229,997.

BAA

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

N/A

	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
<b>1</b> Distributable amount for 2023 from Part X, line 7 .....				
<b>2</b> Undistributed income, if any, as of the end of 2023:				
<b>a</b> Enter amount for 2022 only .....				
<b>b</b> Total for prior years: 20 __, 20 __, 20 __				
<b>3</b> Excess distributions carryover, if any, to 2023:				
<b>a</b> From 2018 .....				
<b>b</b> From 2019 .....				
<b>c</b> From 2020 .....				
<b>d</b> From 2021 .....				
<b>e</b> From 2022 .....				
<b>f</b> Total of lines 3a through e .....				
<b>4</b> Qualifying distributions for 2023 from Part XI, line 4: \$ _____				
<b>a</b> Applied to 2022, but not more than line 2a ..				
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions) .....				
<b>c</b> Treated as distributions out of corpus (Election required – see instructions) .....				
<b>d</b> Applied to 2023 distributable amount .....				
<b>e</b> Remaining amount distributed out of corpus ..				
<b>5</b> Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5. ....				
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b .....				
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed .....				
<b>d</b> Subtract line 6c from line 6b. Taxable amount – see instructions .....				
<b>e</b> Undistributed income for 2022. Subtract line 4a from line 2a. Taxable amount – see instructions .....				
<b>f</b> Undistributed income for 2023. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2024 .....				
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required – see instructions) .....				
<b>8</b> Excess distributions carryover from 2018 not applied on line 5 or line 7 (see instructions) ..				
<b>9</b> Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a .....				
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2019 .....				
<b>b</b> Excess from 2020 .....				
<b>c</b> Excess from 2021 .....				
<b>d</b> Excess from 2022 .....				
<b>e</b> Excess from 2023 .....				

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

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2023, enter the date of the ruling

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

	Tax year				(e) Total
	(a) 2023	(b) 2022	(c) 2021	(d) 2020	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed	0.				0.
<b>b</b> 85% (0.85) of line 2a					0.
<b>c</b> Qualifying distributions from Part XI, line 4, for each year listed	229,997.	231,887.	281,652.	478,735.	1,222,271.
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					0.
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	229,997.	231,887.	281,652.	478,735.	1,222,271.
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test – enter:					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test – enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed				101,926.	101,926.
<b>c</b> "Support" alternative test – enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)  
None

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.  
None

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

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

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

**c** Any submission deadlines:

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

**Part XIV Supplementary Information** (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<i>a Paid during the year</i>				
Ross Manor 758 Broadway Bangor ME 04401	N/A	509(a) (2)	Provide financial assistance to qualified residents for assisted living at Sylvia Ross Home at Ross Manor	207,572.
<b>Total</b> .....				<b>3a</b> 207,572.
<i>b Approved for future payment</i>				
<b>Total</b> .....				<b>3b</b>





**Application for Extension of Time To File an Exempt Organization  
 Return or Excise Taxes Related to Employee Benefit Plans**

OMB No. 1545-0047

**File a separate application for each return.  
 Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

**Electronic filing (e-file).** You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit [www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

**Part I – Identification**

<b>Type or Print</b>	Name of exempt organization, employer, or other filer, see instructions. <b>Rosscare</b>	Taxpayer identification number (TIN) <b>01-0391038</b>
	Number, street, and room or suite number. If a P.O. box, see instructions. <b>43 Whiting Hill Road, Suite 400</b>	
File by the due date for filing your return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>Brewer, ME 04412</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) ..... **04**

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (section 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name \_\_\_\_\_  
 Plan Number \_\_\_\_\_  
 Plan Year Ending (MM/DD/YYYY) \_\_\_\_\_

**Part II – Automatic Extension of Time To File for Exempt Organizations (see instructions)**

The books are in the care of John J. Doyle 43 Whiting Hill Road Brewer ME 04412  
 Telephone No. 207 973-9081 Fax No. 207 973-7139

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until 8/15, 2025, to file the **exempt organization return** for the organization named above. The extension is for the organization's return for:

- calendar year 20 \_\_\_\_ or  
 tax year beginning 10/01, 2023, and ending 9/30, 2024.

2 If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

<b>3a</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.....	<b>3a</b>	\$	0.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.....	<b>3b</b>	\$	461.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.....	<b>3c</b>	\$	0.

Client ROSSCARE

Rosscare

01-0391038

5/12/25

01:38PM

**Statement 1**  
**Form 990-PF, Part I, Line 23**  
**Other Expenses**

	(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Information Technology.....	\$ 4,417.			\$ 4,417.
Shared Services Expense.....	5,401.			5,390.
Total	<u>\$ 9,818.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 9,807.</u>

**Statement 2**  
**Form 990-PF, Part II, Line 14**  
**Land, Buildings, and Equipment**

Category	Basis	Accum. Deprec.	Book Value	Fair Market Value
Machinery and Equipment	\$ 5,250.	\$ 5,250.	\$ 0.	\$ 0.
Total	<u>\$ 5,250.</u>	<u>\$ 5,250.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

**Statement 3**  
**Form 990-PF, Part II, Line 15**  
**Other Assets**

	Book Value	Fair Market Value
Beneficial Interest in Perpetual Trusts.....	\$ 8,698,350.	\$ 8,698,350.
Total	<u>\$ 8,698,350.</u>	<u>\$ 8,698,350.</u>

**Statement 4**  
**Form 990-PF, Part II, Line 22**  
**Other Liabilities**

Reserve for Retiree Health Benefits.....	\$ -36,792.
Total	<u>\$ -36,792.</u>

**Statement 5**  
**Form 990-PF, Part III, Line 3**  
**Other Increases**

Change in net unrealized gains on investments.....	\$ 1,433,498.
Total	<u>\$ 1,433,498.</u>

Client ROSSCARE

Rosscare

01-0391038

5/12/25

01:38PM

**Statement 6  
Form 990-PF, Part III, Line 5  
Other Decreases**

Pension Liab FAS158.....	\$	1,340.
Post Retirement Health Benefit FAS 158.....		19,710.
Total	\$	<u>21,050.</u>

**Statement 7  
Form 990-PF, Part VII, Line 1  
List of Officers, Directors, Trustees, and Key Employees**

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
Colleen Hilton NL HC&H, 225 Gorham Rd Ste 200 South Portland, ME 04106	President 0.50	\$ 0.	\$ 0.	\$ 0.
Tim Dentry 43 Whiting Hill Road Brewer, ME 04412	Director 0.50		0.	0.
Lisa Harvey-McPherson 43 Whiting Hill Road Brewer, ME 04412	Director 0.50		0.	0.
George Eaton 43 Whiting Hill Road Brewer, ME 04412	Secretary 0.50		0.	0.
Anthony Filer 43 Whiting Hill Rd Brewer, ME 04412	Treasurer-Pt Yr 0.50		0.	0.
James Rohrbaugh 43 Whiting Hill Rd Brewer, ME 04412	Treasurer 0.50		0.	0.
Total		\$ 0.	\$ 0.	\$ 0.



Thinking Globally, Acting Locally



# Thinking Globally, Acting Locally

## Contents:

- 4 System map
- 5 Youth mental health: Don't dance around the issue
- 8 Check it out: Turning pages early- new program welcomes babies with their first library card
- 9 Mobile Mammography: Delivering care closer to home
- 12 Check it out: Addressing Maine's shortage of psychiatrists
- 13 Finding her voice: A journey through gender-affirming voice therapy
- 16 Check it out: A bridge to care for communities
- 17 Full circle: Becoming a caregiver
- 20 Check it out: Eclipse
- 21 Healthier patients: a healthier planet
- 24 Community Benefit
- 26 Northern Light Health Foundation
- 28 Connecting and learning from one another
- 32 Financials
- 34 By the numbers

As we reflect on the past year at Northern Light Health, we are reminded of our responsibility to deliver exceptional care while adapting to and rising up to meet our challenges. This year's annual report theme, thinking globally, acting locally, demonstrates how we remain focused on our promise of making healthcare work for Maine people.

In this 2024 annual report, we share many remarkable stories. You will read about how we eliminated a common operating room gas out of concern for our environment, how mobile mammography brings services to rural areas, how a youth summit addresses mental health challenges, a patient's journey through gender-affirming voice therapy, and one family's experience of becoming caregivers.

These stories highlight our promise to meet local needs while contributing to global solutions. We've persevered, strengthened services, and stayed true to promise.

Thank you for your trust, partnership, and support as we navigate this journey together.

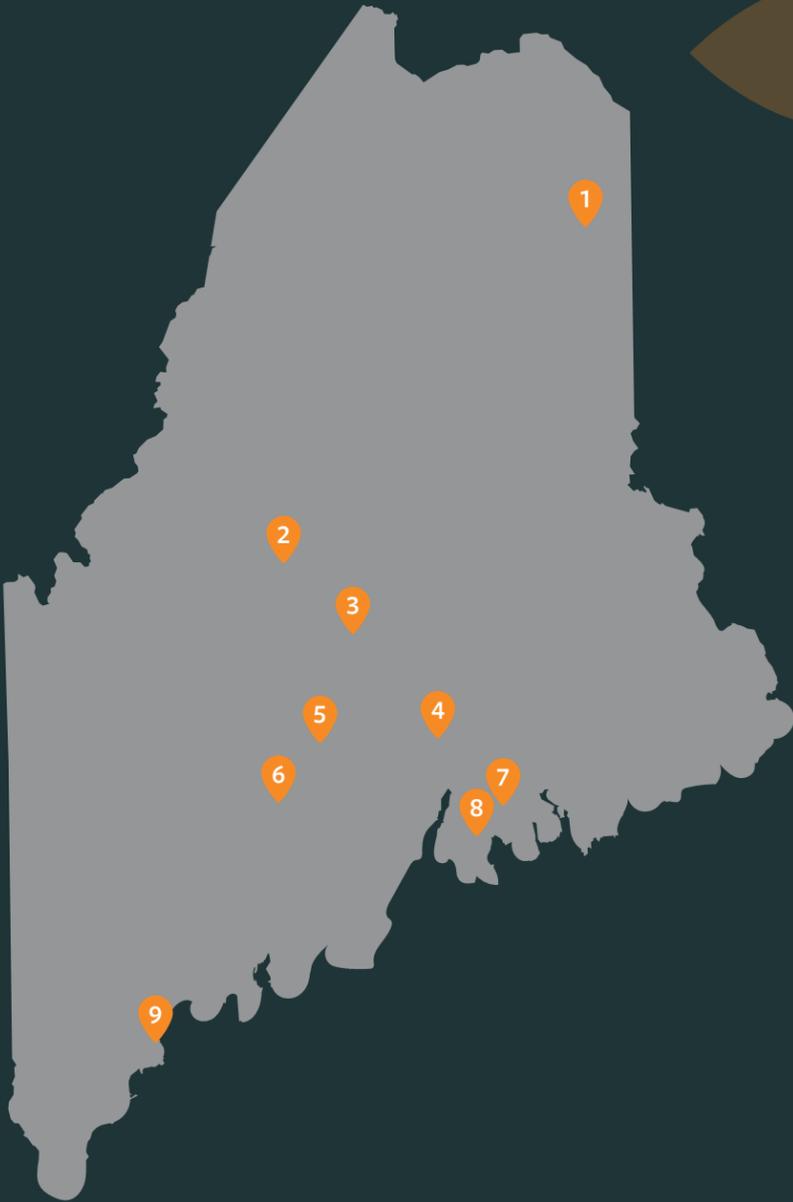


  
Timothy J. Dentry, MBA  
President & CEO  
Northern Light Health



  
John Ryan  
Board Chair  
Northern Light Health

# Member Map



- 1 Presque Isle**  
Northern Light AR Gould Hospital  
Northern Light Home Care & Hospice  
Northern Light Work Health
- 2 Greenville**  
Northern Light CA Dean Hospital
- 3 Dover Foxcroft**  
Northern Light Mayo Hospital  
Northern Light Work Health

- 4 Bangor**  
Northern Light Acadia Hospital  
Northern Light Eastern Maine Medical Center  
Northern Light Health Foundation  
Northern Light Home Care & Hospice  
Northern Light Pharmacy  
Northern Light Work Health  
Northern Light Work Force

- Brewer**  
Northern Light Eastern Maine Medical Center  
Northern Light Health Home Office  
Northern Light Pharmacy

- 5 Pittsfield**  
Northern Light Sebecook Valley Hospital  
Northern Light Work Health

- 6 Waterville**  
Northern Light Home Care & Hospice  
Northern Light Inland Hospital  
Northern Light Work Health

- 7 Ellsworth**  
Northern Light Home Care & Hospice  
Northern Light Maine Coast Hospital  
Northern Light Work Health

- 8 Blue Hill**  
Northern Light Blue Hill Hospital

- 9 Portland**  
Northern Light Home Care & Hospice  
Northern Light Laboratory  
Northern Light Mercy Hospital  
Northern Light Pharmacy  
Northern Light Healthy Life EAP  
Northern Light Work Health



## ➔ Don't dance around the issue

**T**he needs of teen mental health have reached alarming levels in Maine, and a group of passionate student volunteers at Northern Light Eastern Maine Medical Center has responded. The Youth Mental Health Summit was established to provide tools, support, and the understanding necessary to better navigate the complexities of adolescent mental health.

Stella Fox, a student volunteer manager and senior at Hampden Academy, says she had her own journey with mental health. "I'm a pretty busy person. I am someone who, if I'm not busy, I try to find things to make my life busier," she laughs, describing her packed schedule.

As part of that busy life, Fox struggles with the internal pressures of being a

teenager, especially in the demanding world of dance. "There is a lot of pressure in dance about a certain look you're supposed to have," she adds, "Obviously, that's tough for anybody to hear. But when you're going through your teen years, you're facing a lot of other pressures and challenges."

Fox and her fellow student manager and student at John Bapst, Ada Sinclair-Steele, are passionate about making a difference. Each year, high school students who participate in the volunteer program at the medical center work on a passion project for a cause that they choose. In 2024, the group chose youth mental health.

"I really didn't know that much about mental health when we started," Fox admits, "But as we brainstormed and

discussed different ideas, I realized how crucial it was to create a space where teens could learn how to take care of their mental health."

Stacey Coventry, the director of community engagement at Eastern Maine Medical Center helped guide the students. "For this passion project, one of the things we talked about was wanting to have a community forum that brought adults and peers together to openly have a dialogue about all the things that contributed to their mental health. Everything from bullying, to stress in schools, social media, suicide awareness and prevention, and grief and bereavement, all the different things that affect our mental health. They wanted to have a dialogue, but also have a way to show kids that there are other ways that they can cope with these things."

The summit featured a variety of activities, from art therapy and

nature-based therapy to animal-assisted therapy and open panel discussions. "We jumped right into adventure-based activities, because to learn about adventure-based activities through a lecture seems counterintuitive. We had them doing things like a pool noodle shuffle, which is where everybody holds a pool noodle and at the same time they have to let go of their pool noodle and grab the noodle of the person next to them without letting it hit the floor, and

we let them work through some of their frustrations," explains Shane "Mack" McPherson, psychiatric technician and activities coordinator, Northern Light Acadia Hospital.

"Having summits like this is important because there are not many of them around here, especially geared toward high school students," says Sinclair-Steele, "So many teens struggle with mental health challenges and this helps provide resources to seek help within our communities."

Coventry was moved by the students' engagement. "I was hoping they would feel less alone and walk away with a new way to manage their mental health," she says, "I also hoped they'd be excited to share what they'd learned with their peers and family members." The summit wasn't just about learning new coping mechanisms; it was also about breaking the stigma surrounding mental health. It was designed to create a safe, open space for teens to discuss mental health and learn effective coping strategies.

As the day ended, Fox shared her thoughts. "If you're willing to talk about it, you should," she said, "It's about giving hope to others. Once you tell your story, other people will feel comfortable enough to tell theirs, and that will help them become more open about their struggles. Hopefully, when they do, they'll realize they're not alone."

Stella Fox (pictured previous page) and her peers chose youth mental health for their passion project, a component of the **Northern Light Eastern Maine Medical Center** volunteer program. As part of the project a community summit was held that featured a variety of activities, including adventure based activities.





# Northern Light Maine Coast Hospital

## Turning pages early: New program welcomes babies with their first library card

Northern Light Maine Coast Hospital is proud to partner with the Ellsworth Public Library by launching Baby's First Library Card, an initiative promoting early literacy and a lifelong love of reading. Beginning in May 2024, every baby born at our Dixon Family Birthing Center receives a welcome package that includes an age-appropriate book and an application for a complimentary library card from the Ellsworth Public Library, regardless of residency.

This program, funded in memory of Melanie Zador—an avid hospital and library volunteer—honors

her dedication to community enrichment through literacy. “Our team is excited to



Pictured from left to right: Krista Sawyer RN, Bridget Mangan, RN, Carrie Barnes, BSN, RN-BC, Sarah Joy, and Sarah Lesko

support families in fostering early reading habits with their babies,” shares Sarah Joy, director of Philanthropy for Northern Light

Blue Hill and Maine Coast Hospitals. “This collaboration is a meaningful way to celebrate

Melanie’s legacy and connect families with valuable resources.” The community resource is about more than books. “I think it’s undersold

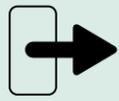
because everyone thinks that the library is just to take out books and it’s not,” explains Carrie Barnes, RN, Northern Light Maine Coast Hospital. “There are so many other things the library offers like playgroups and reading time for moms and their kids. It’s easy as a new parent to feel isolated, and these programs help keep them connected.”

Sarah Lesko, Ellsworth Library director adds, “Reading is one of the most important skills we have in lifelong learning, so we are thrilled to partner with Northern Light Maine Coast Hospital to welcome our newest community members.”



# Mobile Mammograms





## Delivering care closer to home

For many women in rural Maine, getting regular mammograms can be tough. They face long drives, limited transportation options, and, sometimes in Maine, you just can't get there from here. That's why Northern Light CA Dean Hospital and Northern Light Mayo Hospital launched a mobile mammography unit, bringing high-quality breast cancer screenings directly to women who might otherwise go without.

The mobile unit is one way Northern Light Health is improving access to healthcare. "The most important reason for launching this mobile mammography unit is to reach women in rural communities who might otherwise not have access to their screening mammograms," explains Joann Lovell, director of Imaging at Northern Light CA Dean and Mayo Hospitals.

The mobile unit has the same state-of-the-art 3D mammography technology used in Northern Light Health's hospitals and clinics. "That means patients get the same exceptional care, same high-quality images, and the same experienced technologists, whether they're at the hospital or in the mobile unit," explains Lovell.

For Lorna Young, the first patient screened in the mobile unit, the convenience was great. "It was very easy for me. All I had to do was walk out the back door of my office and into the mobile unit. It was just perfect," says Young, who appreciated how simple the process was and how accessible the screening was for her.

The mobile mammography unit travels throughout rural communities statewide, saving patients travel time and

removing the stress of securing transportation. This service, Lovell notes, is a game-changer for many patients. "For women in these communities, the ability to get a mammogram without traveling long distances makes a world of difference."

By sharing resources, staff, and expertise, Northern Light CA Dean and Mayo Hospitals can provide seamless care across a wider area. "The collaboration has been a huge benefit to both communities. We share

resources, share patients, and that ensures we provide the best care possible," says Lovell, "It's not just about screenings; it's about offering comprehensive care to these patients."

The importance of early detection of breast cancer cannot be overstated. Regular mammograms can identify potential issues before symptoms appear, increasing the chances of successful treatment. As Lovell put it, "If we can prevent even one family from

losing a loved one to breast cancer, then we've been a success."

For women like Young, the mobile mammography unit offers more than just convenience—it offers peace of mind. "I would absolutely recommend this to other women," she says, "The convenience and all the advantages it brings to our area are invaluable. It's just an incredible resource."

Northern Light CA Dean Hospital and Northern Light Mayo Hospital launched a mobile mammography unit that provides state-of-the-art 3D mammography technology. Pictured, Kacy Wakefield, community women's health navigator welcomes Lorna Young, the first patient to be screened in the mobile unit.





# Northern Light Acadia Hospital

## Addressing Maine's shortage of psychiatrists

Maine has a critical shortage of psychiatrists. The number of licensed practitioners in our state has dropped from 110 in 2020 to just 50 in 2022, according to the U.S. Bureau of Labor Statistics. To address this urgent need, Northern Light Acadia Hospital launched a Psychiatry Residency Program, designed to grow Maine's behavioral healthcare workforce, and improve access to mental health services.

and the only one north of Portland. After receiving 494 applications on the first day alone, Acadia Hospital leaders interviewed

"The smaller hospital setting at Acadia has created a close-knit community where I've felt welcomed and supported from day one," says

Kelly Kossen, MD adds, "Living here has allowed me to spend my free time exploring farms, hiking, and visiting coastal towns. The staff's kindness has made my transition seamless."



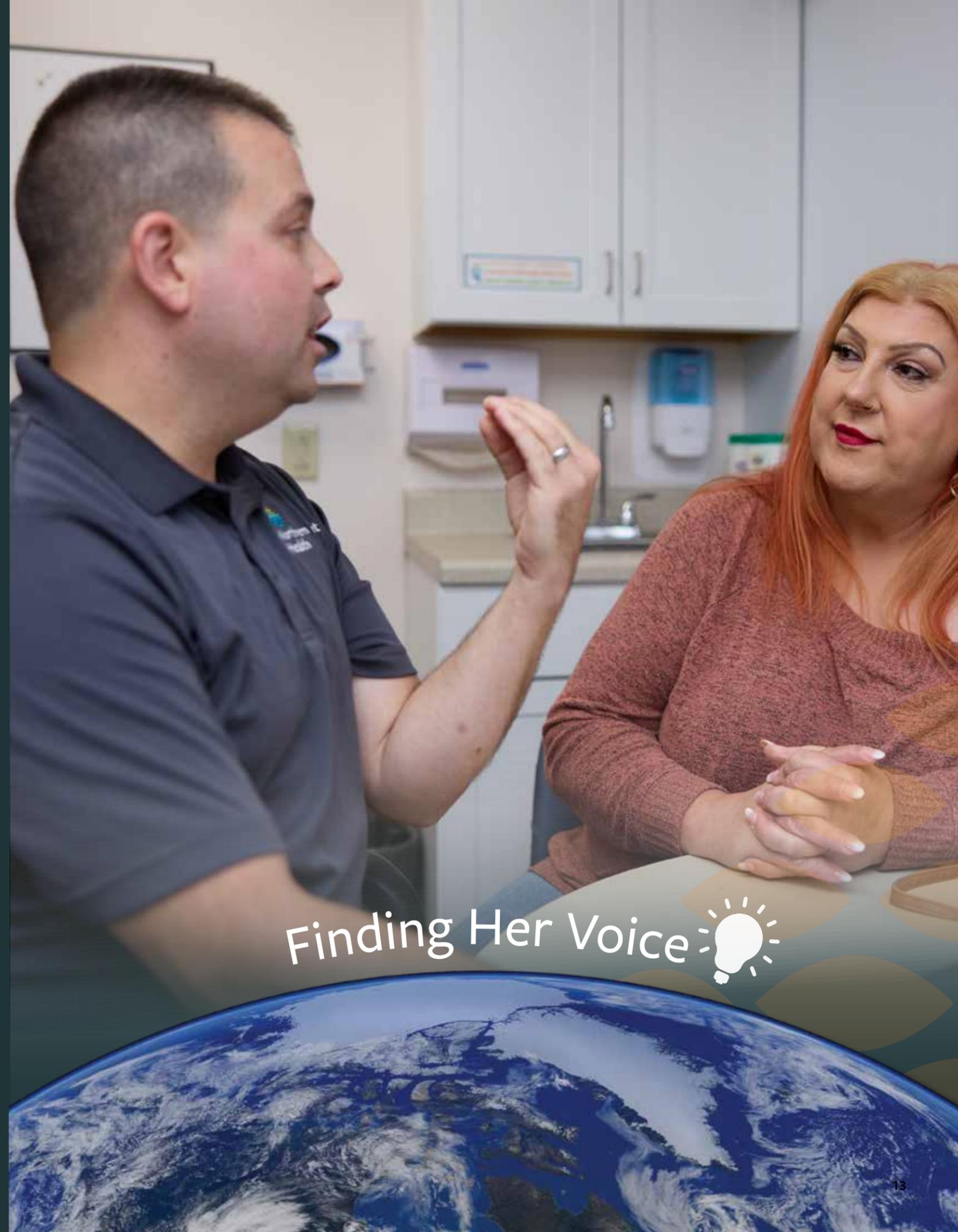
Pictured left to right: Emily Schiller, MD; Adrielle Massey, MD; Kelly Kossen, MD; and Karen Singh, MD

Supported by a \$1 million grant from The Manton Foundation, the program is one of two psychiatric residencies in Maine

95 candidates and matched four residents through the National Resident Matching Program.

Karen Singh, MD, "It's been wonderful to return to Maine and experience the state's beauty while advancing my career."

Acadia's four-year program aims to train 16 residents at full capacity, with the hope that many will continue practicing in Maine. "Where doctors train often determines where they stay," says Mark Lukens, president, Northern Light Acadia Hospital, "This program is a vital step in addressing Maine's mental health challenges."



Finding Her Voice



## ➔ A journey through gender-affirming voice therapy

**K**ira Libby's transition journey began in 2018, long before she met Robby Desjardins, MA, the lead speech-language pathologist at Northern Light AR Gould Hospital. She moved to Aroostook County in 2019, hoping for a fresh start and a chance to live more authentically.

That fresh start and opportunity still seemed just out of reach for Libby, who struggled with a voice that didn't match how she felt on the inside and looked on the outside.

"My job has always been on the phone," she shares, "And every time I pick up a call, I hear either someone misidentify me or, at best, affirm who I know I am. That constant uncertainty can be draining. I felt invisible, like I was living in two worlds."

Libby's voice dysphoria, the discomfort with the mismatch between her voice and her gender identity, was taking its toll. "It wasn't just about how others saw me; it was about how I saw myself. Every conversation, even the simplest ones, became a reminder of the gap between who I am and how the world perceived me."

Her counselor at the time recommended Desjardins, who specializes in

gender-affirming voice therapy. She made the appointment, unsure but hopeful that this could be the help she needed.

"I met Kira at a time when she was understandably uncertain about the whole process," Desjardins recalls, "It's common for patients to feel a bit overwhelmed or self-conscious. The first step is always assessment — how does the person perceive their voice, and where do they want it to go?"

The process began with a baseline recording. Libby was hesitant at first, speaking softly and with visible discomfort. "I was nervous," she admits, "I wasn't sure how it would work, or if I could even change my voice the way I wanted. I didn't know where to start."

From there, Desjardins began to tailor a treatment plan that would address her specific needs. "We start by measuring vocal pitch, loudness, and resonance, and then go from there," he explains, "But it's not just about the mechanics; it's about understanding how the patient feels when they use their voice, and what they're hoping to express through it."

Each session involves exercises aimed at increasing vocal pitch,

improving resonance, and building confidence. Some days are harder than others, but Desjardins made sure the work was always engaging. "He has a way of making it fun," Desjardins laughs, "We even read some kindergarten books together. It sounds silly, but he has this way of making every session feel special, like it's just for me."

After several months of working together, Libby noticed changes. "I'm not being misgendered as often now," she says, "When Robby first recorded me, I wasn't confident at all. I would barely speak in public. Now, I feel so much more comfortable in my skin."

For Desjardins, moments like these are what make the work meaningful. "When I hear a voice sample from someone that's dramatically different from their baseline, it gives me chills," he says, "It's not just about the sound — it's about seeing someone truly embody their authentic self."

Libby's voice now reflects the woman she's always known herself to be. "It's not just about changing the way I speak. It's about owning my voice," she says, smiling. "And thanks to Robby, I've learned how to do that."



Kira Libby now feels like she owns her voice with the help of Robby Desjardins, lead speech-language pathologist at **Northern Light AR Gould Hospital** (pictured previous page). Gender-affirming voice therapy helped her overcome her voice dysphoria, so she can live her best life.





# Northern Light Inland Hospital

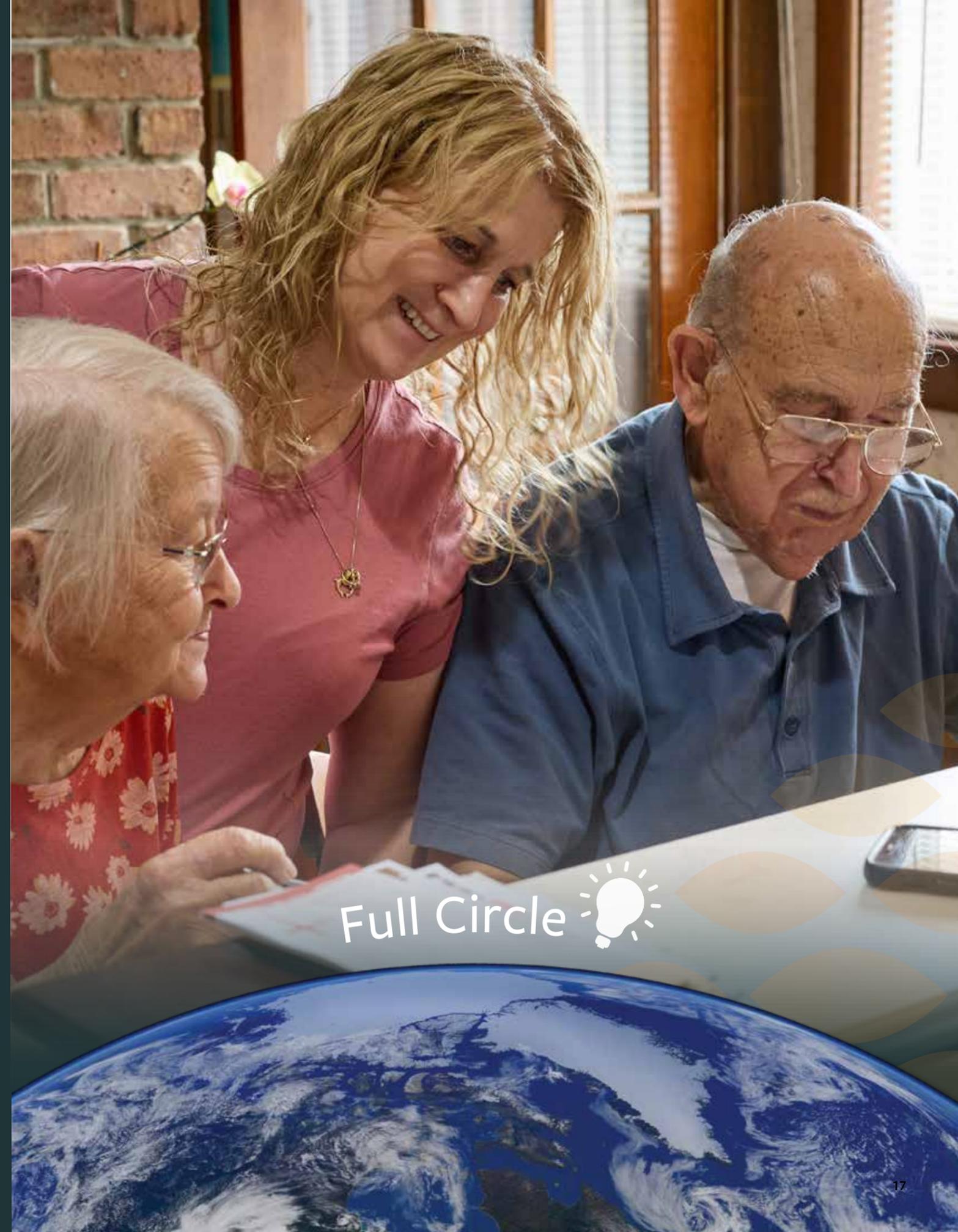
## A bridge to care for communities

Some Waterville residents are visited by paramedics, as part of a collaborative effort between Northern Light Inland Hospital and the city's fire department. This vital resource is designed to improve patient care and reduce hospital readmissions. Courtney Cook, vice president of Nursing and Patient Care Services, Northern Light Inland Hospital, highlights the importance of this at home program. "Waterville is lucky to have the paramedicine program as a community resource," Cook says, emphasizing Inland Hospital's pride

in partnering with the program. The program offers a wide range of services to Waterville residents, including home safety checks, medication reviews, vital sign monitoring, blood draws, and wound care. The team works closely with healthcare providers to ensure patients receive the right care, preventing unnecessary hospital visits. "The team is a great resource to bridge care gaps for those with medical conditions needing frequent reassessment," Cook explains. Additionally, they provide care for the unhoused

population, offering both health checks and referrals to emergency care when necessary. While the Inland Hospital program is currently available only to Waterville residents, Cook is optimistic about its future. "The hope is that the pilot will be so successful that funding will become available to expand to other communities, particularly rural areas facing healthcare challenges like limited transportation or accessibility." Inland Hospital works with Northern Light Medical Transport in Ellsworth and

Greenville. They are planning future collaboration with Northern Light CA Dean and Maine Coast Hospitals and Hospice of Hancock County. By offering this kind of care outside of the hospital, the program helps ensure people in need receive the timely attention and education they need to maintain their health. "Inland Hospital is honored to partner with such a wonderful community resource, meeting people where they are at," Cook adds, "This program is not just a healthcare service—it's a lifeline for the community."



Full Circle 



## ➔ Becoming a caregiver

Lucie Moisan, along with her siblings, are navigating a new chapter in their family's life—becoming caregivers for their aging parents. Moisan says she never expected to take on a caregiver role, but in September of 2023, life had other plans. That's when Moisan's mother was hospitalized due to kidney failure and required dialysis. "It felt surreal to see mom, who had always been our family's rock, now so vulnerable," she reflects.

Determined to keep her mother at home, Moisan and her sister, Lisa, stepped in and managed their mother's

care. Moisan, a registered nurse, manages her mother's at home dialysis treatments with Lisa's help, while coordinating appointments and schedules. "Some days, I wake up and think, 'Can I get through today?'" she admits. "It's overwhelming at times, juggling work as a nurse and caring for them."

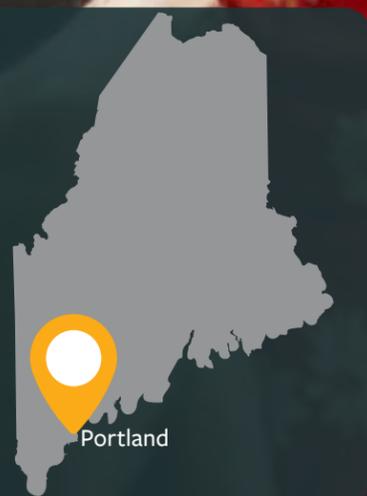
"Seeing dad care for mom, helping her through treatments, was both beautiful and heartbreaking," Moisan shares. Their parents recently celebrated their sixty-seventh wedding anniversary, a milestone that highlighted their enduring love. "Even in tough times, you can

see the love they have for each other," says Moisan. The situation grew more complicated when their father was diagnosed with new onset congestive heart failure in July 2024.

With both parents needing care, the siblings have rallied together. Their brother, Paul, comes by after work to help with household chores and garden maintenance. "We created a rotation schedule to make sure someone is always around," Moisan explains, "It's crucial for us to be there for them, especially at night."

But the strain of caregiving can take its toll and caregivers

Conrad Moisan embraces his wife Joan during a tender moment at their home. Their daughter, Lucie Moisan, is pictured on the previous page with her parents. Lucie and her siblings are navigating a new chapter in their lives by becoming their parents caregivers.



need their own support systems to make it sustainable. "There are days when I feel like I am drowning," Moisan vividly recalls one particularly exhausting day after spending the night at the hospital supporting her mother. "I called my boss at Northern Light Home Care & Hospice and told her I needed a break. She said, 'If you ever need a day off, just let me know.' It meant the world to hear that," Moisan recalls, acknowledging the importance of support beyond her family.

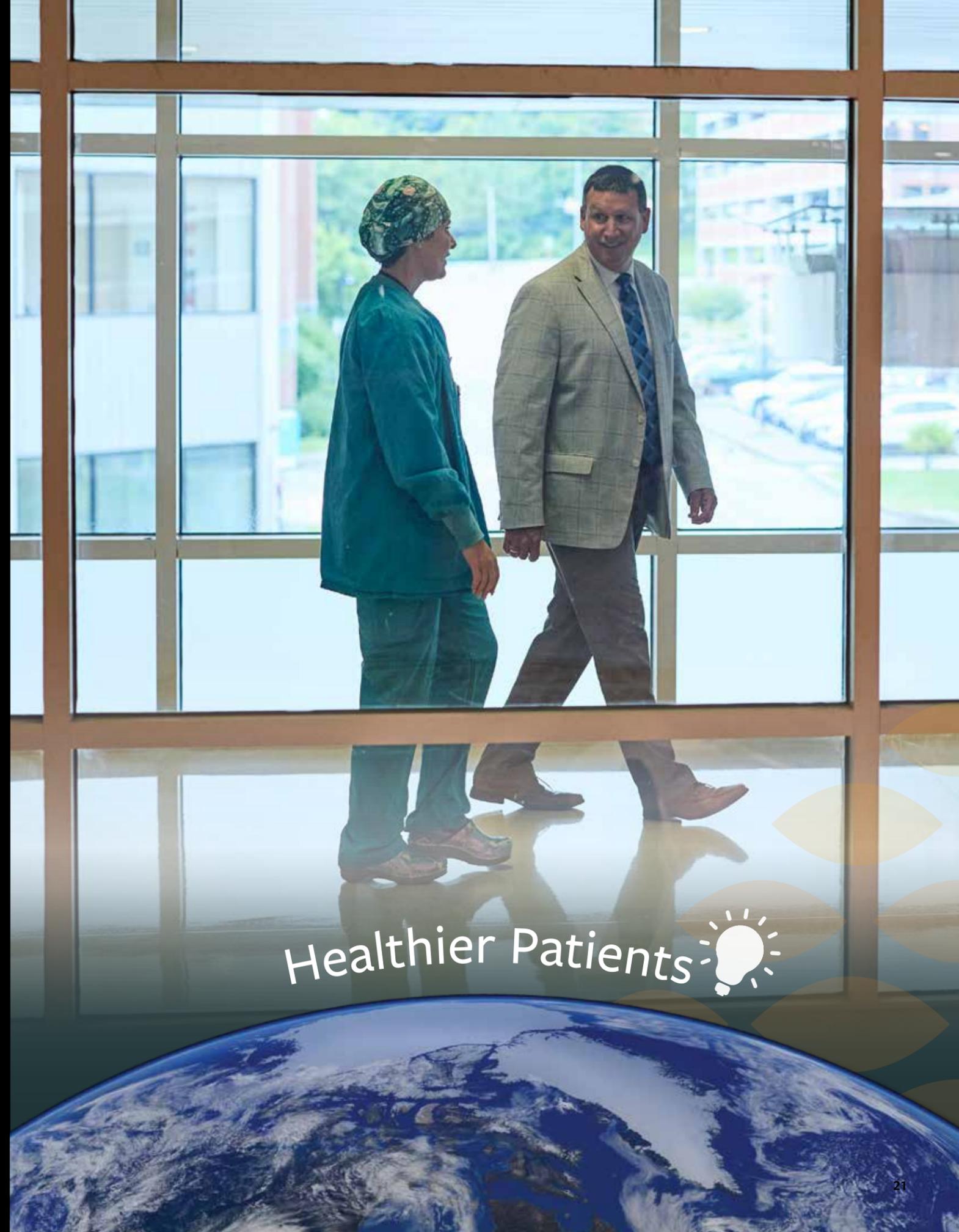
The family finds moments of joy with one another, amidst the challenges. "Watching mom smile while my other sister Jeanine baked apple pies brought warmth into the chaos," Moisan says. The kitchen is a gathering place, filled with laughter and love. Paul often lightens the mood with jokes while cleaning, helping to maintain a sense of levity.

Throughout this journey, Moisan has learned valuable lessons about resilience and the importance of community. "Being a caregiver has transformed me," she reflects, "It's taught me not only how to care for others but also how to take care of myself."



## Eclipse

Four Northern Light Health hospitals were in the path of totality during the solar eclipse on April 8, 2024 including Northern Light Mayo, AR Gould, CA Dean, and Inland hospitals.



Healthier Patients 

## ➔ A healthier planet

In 2024, Northern Light Health made significant strides in reducing the effects our operating rooms have on our environment. We have phased out the use of desflurane, a gas commonly used in anesthesia, in favor of sevoflurane. This change is expected to make a substantial reduction in our carbon footprint while simultaneously lowering costs.

Desflurane has been widely used in surgeries for years because it takes effect quickly and wears off fast. Unfortunately, compared to other anesthetic gases, desflurane is one of the most environmentally harmful. “Desflurane gas is part of a three-

member family of anesthetic gases and, of those three, it’s particularly bad for the environment,” explains Tim Doak, vice president of Sustainability, Northern Light Health, “Moving away from desflurane to sevoflurane will

have an immediate and lasting positive effect.”

This shift is also expected to reduce Northern Light Health’s carbon emissions by approximately 408 metric tons annually, roughly 990,000 pounds – heavier than the International Space Station and as much as three blue whales. This reduction is a crucial part of the broader goal of reducing our total carbon emissions by 50% by 2030, as outlined in our Department of Health and Human Services Health Care Sector Pledge, with carbon neutrality targeted by 2050.

The environmental benefits are clear, but there are also significant financial advantages to the change. Desflurane is the most expensive anesthetic gas, by eliminating it Northern Light Health will save around \$50,000 per year; “The cost savings are substantial,” Doak adds, “Not only are we having a positive effect on the environment, but we’re able to reinvest those savings into other important aspects of patient care and hospital operations.”

### A win for patients too

“Patients will receive the same high level of care, as the safety profile of the anesthesia remains unchanged,”

says Sarah Smith, DO, chief of Anesthesiology at Northern Light Eastern Maine Medical Center. “The difference lies in the environmental effect, which we can now reduce significantly without compromising patient outcomes. This transition is a win-win and a step toward sustainability.”

Northern Light Health physicians and other providers were the driving force in eliminating desflurane, and they were pleased to become more involved in our sustainability efforts. “Northern Light Health has already made great strides to reducing our carbon footprint in other areas

of our facilities,” Doak adds, “This initiative is a way for clinicians to also have an active role in contributing to environmental causes. It’s exciting to see how our teams are rallying around this effort.”

Northern Light Health is the first healthcare organization in Maine to make this change, and our commitment to reducing our carbon footprint sets a strong example. “I believe Northern Light Health is truly leading the way, not just in Maine but in the broader healthcare community,” Dr. Smith says, “We are showing that making these sustainable choices is not only possible, but essential.”

Previous page:  
Sarah Smith, DO, chief of Anesthesiology at **Northern Light Eastern Maine Medical Center** and Tim Doak, vice president of Sustainability, Northern Light Health, discuss the benefits of using sevoflurane, a gas commonly used in anesthesia. This change is expected to make a substantial reduction in our carbon footprint while simultaneously lowering costs.





## Empowering community health: Connecting patients with social care

A community's health is determined by the health of the people living there. "Socioeconomic status, availability of safe and affordable housing, reliable transportation, access to healthcare services, and food security can play a significant role in one's health," says Zoe Tenney, FNP, Northern Light Palliative Care.

Through trusted partnerships, Northern Light Health connects patients with critical resources to improve their well-being, particularly through their web-based search engine of community resources: [northernlighthealth.findhelp.com](http://northernlighthealth.findhelp.com).



Pictured left to right are Bridging Neighbors volunteers Cheryl Michaud, Joanna Bentley, Lori Johnson, Suzie Nutbrown, LeCain Smith, and Anne Schroth.

The Bridging Neighbors program, a collaboration between Healthy Peninsula and Healthy Island Project supports older adults with social health needs by connecting them with trained volunteers who assist with tasks such as navigating local

resources, filling out paperwork, and following up on medical needs. Bridging Neighbors partnered with Northern Light Blue Hill Hospital for their pilot year to take referrals only from Blue Hill Hospital clinical providers. After learning from this

partnership, Bridging Neighbors now continues to accept referrals from Blue Hill Hospital practices as well as other community sources. "I frequently refer patients to Bridging Neighbors," Tenney explains, "Their volunteers can identify creative solutions to challenges I may have missed, helping me better care for my patients."

In rural Maine, where resources can be limited, Bridging Neighbors provides invaluable support for individuals facing challenges like transportation, food insecurity, and isolation. "Although we cannot solve all presenting concerns, we can provide some of the support they need that they are not receiving elsewhere. In our first year of implementation, we received more than 50 referrals for those aged 60+ who live on the Blue Hill Peninsula and Deer Isle/Stonington, speaking volumes for the need for such a program," says Lori Johnson, healthy aging coordinator, Healthy Peninsula. "Our hope is to continue training more volunteers so that we can continue with these much needed and appreciated services."



To learn more go to: [northernlighthealth.org/communitybenefitreports](http://northernlighthealth.org/communitybenefitreports)



### Total Community Investment by Category

Community Health Improvement Services	\$2,054,800
Health Professions Education	\$2,546,828
Research	\$1,750,995
Cash and In-Kind Contributions	\$294,442
Community Building Activities	\$382,218
Community Benefit Operations	\$2,375,347
Traditional Charity Care	\$12,124,185
<b>Unpaid Cost of Public Programs:</b>	
Medicaid	\$113,174,114
Medicare	\$185,512,480
<b>Total Systemwide</b>	<b>\$320,215,409</b>

### Northern Light Health Member Community Benefit

Acadia Hospital .....	\$14,462,529
AR Gould Hospital .....	\$18,154,359
Blue Hill Hospital.....	\$1,488,341
CA Dean Hospital .....	\$713,688
Eastern Maine Medical Center .....	\$201,679,824
Home Care & Hospice .....	\$825,834
Inland Hospital .....	\$13,260,339
Maine Coast Hospital.....	\$12,956,106
Mayo Hospital .....	\$2,208,258
Mercy Hospital .....	\$51,691,851
Northern Light Health Home Office .....	\$664,404
Sebasticook Valley Hospital .....	\$2,109,876



## Jane Hibbard-Merrill:

### A grateful family's commitment to Northern Light Mayo Hospital and access to Cancer Care

Jane Hibbard-Merrill's story is one of gratitude, resilience, and a commitment to honoring her daughter's legacy. A longtime resident of Dover-Foxcroft, Hibbard-Merrill had firsthand experience with compassionate healthcare, through the support her family received at

Northern Light Mayo Hospital during her daughter Tracy Hibbard Kasprzak's experience with cancer.

Hibbard Kasprzak, a beloved nurse, mother, and community member, was first diagnosed with colon cancer

at just 37 years old. Over the next 15 years, she endured countless treatments, surgeries, and trials across the country. She eventually returned to her hometown hospital, where she found solace in familiar faces and the love of her family and community. This experience shaped Hibbard-Merrill's

Pictured above: Jane Hibbard-Merrill and her husband, Charles, walk in the inaugural Tracy Hibbard Kasprzak Walk for Hope alongside family and friends.

Giving by Organization	
Acadia Hospital	\$1,336,282.32
AR Gould Hospital	\$108,352.16
Blue Hill Hospital	\$522,008.22
CA Dean Hospital	\$137,237.86
Eastern Maine Medical Center and Children's Miracle Network Hospitals	\$7,332,762.68
Home Care & Hospice	\$555,902.45
Inland Hospital	\$126,455.66
Maine Coast Hospital	\$768,943.02
Mayo Hospital	\$82,804.62
Mercy Hospital	\$4,089,568.55
Northern Light Health and Northern Light Health Foundation	\$33,012.30
Sebasticook Valley Hospital	\$252,976.73
<b>Total</b>	<b>\$15,346,306.57</b>

vision of accessible, high-quality cancer care in rural Maine.

Upon her passing, Hibbard-Merrill and her family made a generous memorial gift to help relocate and expand the oncology services at Northern Light Mayo Hospital. This contribution was instrumental in the creation of the Tracy Hibbard Kasprzak Cancer Treatment Center, a state-of-the-art facility providing private treatment spaces, telemedicine capabilities, and consultation rooms to ensure patients can receive care close to home.

In September 2017, the center was formally dedicated in Hibbard Kasprzak's memory. During the ceremony, Hibbard-Merrill spoke of her daughter's unwavering determination and zest for life. She expressed deep gratitude for the community's support in bringing her vision to life, ensuring others could receive cancer treatment surrounded by family and a supportive community.

Today, Hibbard-Merrill's family continues to honor her daughters legacy. The inaugural Walk for Hope in September 2024 brought more than 200 participants together to raise



Jane Hibbard-Merrill (right) presents director of community outreach and philanthropy officer, Hillary Starbird, with a check for four new oncology chairs with heat and massage features, a wonderful upgrade for patients receiving services in the Tracy Hibbard Kasprzak Center.

\$31,000 for the center, highlighting the community's commitment to supporting patients with cancer. Hibbard-Merrill and her family were the event's lead donors and biggest cheerleaders.

"We are deeply grateful to Jane and her family for their unwavering dedication and generous commitment to our patients and community," says Marie Vienneau, president of Northern Light Mayo Hospital.

For Hibbard-Merrill, Northern Light Mayo Hospital is more than a place of care—it's a beacon of hope, ensuring that families like hers can find strength, comfort, and healing close to home.





## Finding his place

Steven Trail's relationship with Northern Light Mercy Hospital spans nearly 20 years and started when his life looked and felt incredibly different.

It was hard to find employment early in his transition, and there was a period of about six months where he was unemployed. When applying for jobs, it's necessary to provide any previous names for background

checks and with some employers, his name change led to not being hired.

"I applied to a couple of healthcare organizations and Mercy called. I thought for sure I would be turned down, because again, my name and information were all right there, but someone from Human Resources called to do a background check. She was so polite and kind." Trail not only passed the background check; in no

time he was a respected and valued member of the Mercy Hospital team caring for patients as a CNA.

With the support and encouragement of the nurses at Mercy, Trail made the decision to go back to school and become a nurse. Even when it became necessary for Trail to relocate to another state for a short time, he stayed committed to his decision, becoming an ICU nurse,

and returning to Maine, to Mercy Hospital, and Northern Light Health in 2019.

"I have never been so supported by leadership, let alone administration, as I am here," he says. Trail shares some of the changes that have made a difference for employees and patients. Behind the scenes changes, like those made to hiring and patient intake forms, often the first things that people new to Northern Light Health see. Things that may seem like simple or subtle changes that make it clear that the organization is a place where everyone belongs. And public engagement by leaders who speak openly about the importance of equity and inclusion.

Trail returned to Mercy Hospital just a couple months before Tim Dentry, president and CEO of Northern Light Health's, Tim Talk podcast launched. "...and now this executive guy, this really important guy, is talking about LGBT issues and trying to break down barriers. I wrote him a letter, I told him about who I was, why I was closeted, and what my concerns were and thanked him for what he was working on. And he wrote back! He didn't just write back a one line thank you; he wrote a thoughtful response. It was amazing."

Life in Maine isn't without challenges, even today. "I am trans, but I've lived most of my life closeted. I still worry about perceptions and maintaining professional respect. Northern Light Health and Mercy are really good about following policy and ensuring that everyone is respected."

Today, Trail is still working at Mercy Hospital, now as a risk management specialist who works with clinical staff to ensure patient safety. He hopes that sharing his story will help others, "Visibility saves lives. I'm hoping that by sharing my story it will help someone. I went from trying to get a job more than 20 years ago, to helping paint a rainbow crosswalk with administrators and front-line nurses in 2024."

## Improving our climate health

As of the end of 2024, we have lowered our Scope 1 and 2 emissions by 8% from our baseline year of 2021.

- We are sourcing the majority of the electricity used in our hospitals from renewable sources.
- The greenhouse gas emissions associated with heating, cooling, and electrifying Northern Light Mercy Hospital are 20% lower than they were in 2021. At Northern Light Blue Hill Hospital, they are 57% lower than 2021.
- We have reduced our system's emissions from anesthetic gases by 18% since 2021.
- The number of hybrid and electric fleet vehicles in the System has grown from 2 in 2021 to 9 in 2024.
- We also have several EV chargers for fleet vehicle use at our locations around the state.



Visit [northernlighthealth.org/sustainability](https://northernlighthealth.org/sustainability) or scan the QR code to learn more.



## Beyond clinical care

### Social determinants of health

Traditional medicine and medical care play a critical role in the health of our patients and communities, but they are just one of a complex network of factors that determine an individual's health. Where you live, your education, support system, finances, and the food you eat and have access to all influence your health. Experts say as much as 80% of our health outcomes depend on these social determinants of health.

To provide complete care for our patients, Northern Light Health routinely screens our patients for social health needs and takes steps to connect them with community resources, actively removing barriers to improve health outcomes. Northern Light Health community health workers (CHWs) engage with care teams and patients throughout the state to make it happen.

CHWs don't just hand off information about resources, they spend time with patients helping them navigate often complex pathways to resources that can seem impossible for individuals who are challenged by technology or literacy. Patients can be connected to community-based case management, and CHWs can help clarify insurance benefits. In one case, screening and CHW access ensured a patient, and their family, access to \$2,300 in annual benefits for food, medicine, utilities, and eyeglasses. The family now has community support to access housing support and ongoing needs as they change. "This family was also excited and grateful, and this is just one example of thousands of Mainers the CHW team has helped be healthier and have their social needs met," says Jaime Rogers, LCSW, associate vice president, Community Care and Behavioral Health Services.



## Healthy, Happy, and Wise

Learn more about how Northern Light Health, our member hospitals, and team members are making meaningful changes to close the gaps left by social determinants of health with Tim Talk, one of three podcasts we produce on the Healthy, Happy, and Wise series – available on your favorite podcast listening service.



Scan the QR code or visit [northernlighthealth.org/podcast](https://northernlighthealth.org/podcast)



## Connecting and learning from one another

### Training and Education

Our organization is committed to learning and development as a lifelong journey. Along with clinical and technical trainings, Northern Light Health is investing in creating opportunities for our team members to learn about and from one another to build a stronger, more inclusive, and understanding community.

Education and training opportunities are offered to provide the tools necessary to create a workplace and environment of care that is welcoming and accessible to all of our employees and community members. Offerings range from training events to speaker forums and roundtable discussions and include a wide range of topics touching on disability, gender, gender identity, social and cultural background, economic disparity, and more.

Pictured above: Attendees at the Martin Luther King Jr. Breakfast  
 Right: Marwa Hassanien, MS, M.Ed, associate vice president, Diversity, Equity, and Inclusion, Northern Light Health with Dana Carver-Bialer, MPP/MA., PhD candidate, coordinator of Diversity, Equity, Inclusion, and Belonging, Bangor School Department; and Timothy Surette, Ed.D., associate professor of Education, University of Maine at Augusta

### Inclusion Maine Conference

Northern Light Health was a premiere sponsor of the 2024 Inclusion Maine Conference held in Portland, focused on helping local businesses and organizations grow, support, and retain their workforces. The three-day conference featured 13 events and breakout sessions to connect employers with the tools needed to attract, engage, and retain talent from diverse backgrounds – from new Mainers to employees with disabilities.



# Financials

## Consolidated Balance Sheets

Years Ended September 30, 2024 and 2023

(in thousands of dollars)

ASSETS	2024	2023
Total current assets	\$635,371	\$621,143
Assets limited as to use:		
Capital replacement and other designated uses	339,716	305,378
Self insurance funds and other trusts	72,482	56,731
Donor restricted gifts	94,384	89,463
Total assets limited as to use	506,582	451,572
Property and equipment, net	870,770	884,088
Other long-term assets	72,838	59,708
<b>Total assets</b>	<b>\$2,085,561</b>	<b>\$2,016,511</b>
<b>LIABILITIES</b>		
Total current liabilities	\$616,573	\$ 444,820
Accrued post-employment benefits	242,329	236,005
Long-term debt	573,096	589,777
Other long-term liabilities	41,024	32,880
Total liabilities	1,473,022	1,303,482
Total net assets	612,539	713,029
<b>Total liabilities and net assets</b>	<b>\$2,085,561</b>	<b>\$2,016,511</b>

## Consolidated Statements of Operations

Years Ended September 30, 2024 and 2023

(in thousands of dollars)

	2024	2023
Net operating revenue	\$2,159,385	\$2,162,584
Operating expenses:		
Salaries and employee benefits	1,114,620	1,123,083
Supplies and other	1,201,067	1,075,602
Total expenses	2,315,687	2,198,685
Loss from operations	(156,302)	(36,101)
Other gains--net	43,844	34,093
<b>Deficiency of revenue and gains over expenses and losses</b>	<b>\$(112,458)</b>	<b>\$(2,008)</b>
Operating margin	-7.24%	-1.67%
Total margin	-5.10%	-0.09%
Reinvestment in clinical equipment, technological advancements, and facilities	\$65,219	\$105,192

# By the numbers



## Northern Light Medical Transport

- 112 towns/townships/unorganized territories in response area
- 3,273 wheelchair van transports
- 18,597 patients transported

## LifeFlight of Maine

- 119 towns responded to for scene calls
- 246 total scene calls
- 372 fixed wing air transports
- 472 traumatic injury transports
- 526 ground transports
- 1,810 helicopter air transports

## Joint Ventures

- County Physical Therapy, LLC
- LifeFlight of Maine, LLC
- LTC, LLC
- MedComm, LLC
- New Century Healthcare, LLC
- Uniship Courier Services, LLC

## Our mission, vision, and values

### Our Mission

We improve the health of the people and communities we serve.

### Our Vision

Northern Light Health will be a leader in healthcare excellence.

### Our Values

To accomplish its mission and vision, Northern Light Health will embrace these values:

#### Integrity:

We commit to the highest standards of behavior and doing the correct thing for the right reasons.

#### Respect:

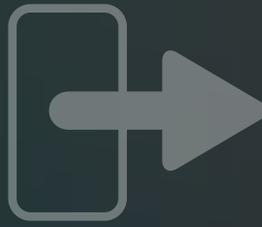
We respect the dignity, worth, and rights of others.

#### Compassion:

We deliver care focused on the needs of each person and guide families and individuals through the experience with kindness and professionalism.

#### Accountability:

We take a responsible and disciplined approach to achieving our priorities and responding to an ever-changing environment.



Receive Northern Light Health news all year.



The Cianchette Building  
43 Whiting Hill Road, Suite 500  
Brewer, Maine 04412  
northernlighthealth.org