Form 990-PF

Return of Private Foundation

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

OMB No. 1545-0047

Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2021 or tax year beginning , and ending Name of foundation A Employer identification number 95-4423553 ALBERT B. GLICKMAN FAMILY FOUNDATION Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number 111 COMMERCIAL STREET, SUITE 300 207-956-6020 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here PORTLAND, ME 04101 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 27,658,002. (Part I, column (d), must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a),) (d) Disbursements for charitable purposes (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and expenses per books income income 300,000. 1 Contributions, gifts, grants, etc., received N/A 2 Check if the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 1,376,589. 1,376,589. STATEMENT 44,364. 4 Dividends and interest from securities 44,364. STATEMENT 5a Gross rents b Net rental income or (loss) 807,908. STATEMENT 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 807,908. 807,385. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 124,397. 124,164. STATEMENT 2,653,258. 2,352,502. 12 Total. Add lines 1 through 11 0. 0. 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 5 5,900. 4,425. 1,475. b Accounting fees c Other professional fees 17 Interest 32,843. 0. 18 Taxes STMT 6 5,685. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 7 821,470. 503,489. 543. 23 Other expenses 24 Total operating and administrative 860,213. 510,649. 4,968. expenses. Add lines 13 through 23 2,716,253. 25 Contributions, gifts, grants paid 2,716,253.

3,576,466.

-923,208.

510,649.

1,841,853.

N/A

26 Total expenses and disbursements.

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

Add lines 24 and 25

27 Subtract line 26 from line 12:

2,721,221.

Part II Balance Sheets Attached schedules and amounts in the description column should be for ended war amounts only		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	End of year			
ш	art	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash - non-interest-bearing						
	2	Savings and temporary cash investments	5,853,455.	3,847,426.	3,847,426.			
	3	Accounts receivable ▶						
		Less: allowance for doubtful accounts						
	4	Pledges receivable						
		Less; allowance for doubtful accounts						
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other						
		disqualified persons						
	7	Other notes and loans receivable 4,600,000.	6 101 001	4 600 000	4 600 000			
		Less; allowance for doubtful accounts 0.	6,194,201.	4,600,000.	4,600,000.			
əts	8	Inventories for sale or use						
Assets		Prepaid expenses and deferred charges						
4	10a	Investments - U.S. and state government obligations	F 200 07F	F F22 017	0 277 022			
		Investments - corporate stock STMT 8	5,309,275.	5,533,217.	8,377,833.			
	C	Investments - corporate bonds						
	11	Investments - land, buildings, and equipment: basis						
		Less; accumulated depreciation						
	12	Investments - mortgage loans	7 012 201	10 100 200	10 022 742			
	13	Investments - other STMT 9	7,012,381.	10,198,300.	10,832,743.			
	14	Land, buildings, and equipment: basis						
	15	Less: accumulated depreciation Other assets (describe)	-					
		Total assets (to be completed by all filers - see the						
	10	instructions. Also, see page 1, item I)	24 369 312	24,178,943.	27,658,002.			
_	17	Accounts payable and accrued expenses	24,309,312.	24,170,343.	27,030,002.			
		Grants payable						
	19	Deferred revenue						
Liabilities		Loans from officers, directors, trustees, and other disqualified persons						
ig	21	Mortgages and other notes payable						
Ë	1000	Other liabilities (describe)						
	-							
	23	Total liabilities (add lines 17 through 22)	0.	0.				
		Foundations that follow FASB ASC 958, check here						
s		and complete lines 24, 25, 29, and 30.						
Balances	24	Net assets without donor restrictions						
alar	25	Net assets with donor restrictions						
d B		Foundations that do not follow FASB ASC 958, check here						
Fun		and complete lines 26 through 30.						
orF	26	Capital stock, trust principal, or current funds	0.	0.				
	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.				
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds	24,369,312.	24,178,943.				
et/	29	Total net assets or fund balances	24,369,312.	24,178,943.				
z								
_	30	Total liabilities and net assets/fund balances	24,369,312.	24,178,943.				
P	art	Analysis of Changes in Net Assets or Fund Bal	ances					
		net assets or fund balances at beginning of year - Part II, column (a), line 2 at agree with end-of-year figure reported on prior year's return)	1	04 360 310				
_	(mus	24,369,312.						
2	Otho	amount from Part I, line 27a rincreases not included in line 2 (itemize) PRIOR PERIOD	AD THE COMPAND	2	-923,208. 732,839.			
				3 4	24,178,943.			
		ines 1, 2, and 3 eases not included in line 2 (itemize)		5	0.			
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 29	6	24,178,943.			
		, see the second of the second	1-11	1 0	Form 990-PF (2021)			

60

6d

65

91,200.

214.

384.

0.

26,000.

65,384. Refunded

0

8

9

10

11

d Backup withholding erroneously withheld .

7 Total credits and payments. Add lines 6a through 6d

9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed

11 Enter the amount of line 10 to be: Credited to 2022 estimated tax

8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached

10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid

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	rt VI-A Statements Regarding Activities	I	Vac	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		res	No
	any political campaign?	1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			х
	Did the foundation file Form 1120-POL for this year?	1c		
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
•	managers. • \$ 0 .			х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			v
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	_	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		37
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
_	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			200
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
_	remain in the governing instrument?	6	X	-
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			(2.5)
	DE, ME			
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			77
•	of each state as required by General Instruction G? If "No," attach explanation SEE STATEMENT 10	8b		X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
40	year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII	9		X
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		.,	
40	If "Yes," attach statement. See instructions SEE STATEMENT 11 SEE STATEMENT 12	12	X	-
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
10000	Website address N/A		000	
14	The books are in care of ► ALBERT GLICKMAN & ASSOCIATES Telephone no. ► 207-95		020	
	Located at ► 111 COMMERCIAL STREET, SUITE 300, PORTLAND, ME ZIP+4 ► 04			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		., . Þ	•
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filling requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country >			
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promoterance		5-4423553		Page !
	t 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
	During the year, did the foundation (either directly or indirectly):		163	140
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	10/1)		Х
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1a(1)		A
		1a(2)	nice and	Х
		1 (0)	Х	- 11
		4 (4)		_
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available	1a(4)	71	
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	1a(5)		Х
	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)	3,60,000	X
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			494
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
C	Organizations relying on a current notice regarding disaster assistance, check here			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2021?	1d		X
	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines			
	6d and 6e) for tax year(s) beginning before 2021?	2a		X
	If "Yes," list the years ▶			
b	Are there any years listed in 2a for which the foundation is not 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 all years listed, answer "No" and attach			
		N/A 2b	C.S.S.S.S.S.S.	
	statement - see instructions.) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		
U	The provisions of section 4342(a)(2) are being applied to any of the years fisted in 2a, list the years here.	1000		466
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1 34		
	during the year?	3a		Х
	If "Yes," did it have excess business holdings in 2021 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 disp	ose		
	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 2021.)	N/A 3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose t	nat		
	had not been removed from jeopardy before the first day of the tax year beginning in 2021?	4b Form 99 0		X

Pa	IT V	I-B	Statements Regarding Activities for which F	orm 4/20 May Be R	equired (contin	ued)			
5a			year, did the foundation pay or incur any amount to:					Yes	No
			on propaganda, or otherwise attempt to influence legislation (section				5a(1)		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,									
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes?									X
							5a(3)		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions									
	(E)	4940(L	e for any purpose other than religious, charitable, scientific, literary,	or advectional auranean or f		***********	5a(4)		X
	(3)		evention of cruelty to children or animals?				5a(5)		Х
h	If ar	wansw	ver is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	in Regulations		34(3)		
			4945 or in a current notice regarding disaster assistance? See instri			N/A	5b		
C			ons relying on a current notice regarding disaster assistance, check l						
			er is "Yes" to question 5a(4), does the foundation claim exemption f						
	exp	enditure	e responsibility for the grant?			N/A	5d		
			ach the statement required by Regulations section 53.4945-5(d).						
6a	Did	the fou	ndation, during the year, receive any funds, directly or indirectly, to	pay premiums on					
	a pe	rsonal	benefit contract?				6a		X
b			ndation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b		X
			6b, file Form 8870.						
			e during the tax year, was the foundation a party to a prohibited tax				7a	-	X
			I the foundation receive any proceeds or have any net income attribu			N/A	7b		
8			dation subject to the section 4960 tax on payment(s) of more than \$	\$1,000,000 in remuneration or					v
Pa	irt \		achute payment(s) during the year? Information About Officers, Directors, Trusto	ees Foundation Mai	nagers Highly		8		_X_
			Paid Employees, and Contractors	ooo, r ourradion ma	lagoro, riigiliy				
1 l	.ist a	all offic	cers, directors, trustees, and foundation managers and t	heir compensation.					
			() None and address	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions employee benefit pl	to ans	(e) Exp	ense
			(a) Name and address	to position	(If not paid, enter -0-)	and deterred compensation	a	allowa	nces
SI	EE	STA	TEMENT 13		0.	0) •		0.
_				-					
				-					
_	_						-		
				-					
_				-					
							+		
				1					
2 (Com	pensa	tion of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."				
		(a) Nan	ne and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contributions employee benefit pl and deferred	to ans	(e) Exp ccount, allowar	ense
				hours per week devoted to position	(c) Compensation	and deferred compensation	d	allowa	nces
		N	ONE						
				-					
_	_						+		
_				-					
							+		
				1					
Tot	al nu	mber o	f other employees paid over \$50,000				T		0
						Fo	orm 99	0-PF	(2021)

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Part VII Information About Officers, Directors, Trustees, Foundati Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter '	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
REALPRO MANAGEMENT CORPORATION	ASSET MANAGEMENT AND	
P.O. BOX 4569, PORTLAND, ME 04112-4569	ADMINISTRATION	374,343.
	-	
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 statistic number of organizations and other beneficiaries served, conferences convened, research papers productions.	cal information such as the ced, etc.	Expenses
1N/A		
2		
3		
4		
Part VIII-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lin	nes 1 and 2	Amount
1 N/A		711100111
2		
All other program valeted in a total Control of		
All other program-related investments. See instructions.		
3		

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Total. Add lines 1 through 3

P	art IX Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	24,677,207.
b	Average of monthly cash balances	1b	2,959,370.
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	27,636,577.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	27,636,577.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	414,549.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	27,222,028.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	1,361,101.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here and do not complete this part.)	d certain	
1	Minimum investment return from Part IX, line 6	1	1,361,101.
2a	Tax on investment income for 2021 from Part V, line 5 2a 25,602.		
b	Income tax for 2021. (This does not include the tax from Part V.)		
C	Add lines 2a and 2b	2c	25,602.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,335,499.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,335,499.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	1,335,499.
P	art XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,721,221.
b	Program-related investments - total from Part VIII-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	3.3	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	2,721,221.
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Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1 Distributable amount for 2021 from Part X,	Land Company			
line 7				1,335,499.
2 Undistributed income, if any, as of the end of 2021:				
a Enter amount for 2020 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2021:		0.		
a From 2016 535,040.				
b From 2017 462,754.	252270323			
c From 2018 13,080.				
d From 2019 249,006.	企业企业 的企业企业			
e From 2020 399, 407.				
f Total of lines 3a through e	1,659,287.			
4 Qualifying distributions for 2021 from				
Part XI, line 4: ►\$ 2,721,221.				
a Applied to 2020, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2021 distributable amount				1,335,499.
e Remaining amount distributed out of corpus	1,385,722.			
Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	3,045,009.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b	Pagasasses	0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2020. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2021. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2022				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2016				
not applied on line 5 or line 7	535,040.			
9 Excess distributions carryover to 2022.				
Subtract lines 7 and 8 from line 6a	2,509,969.			
O Analysis of line 9:				
a Excess from 2017 462,754.				
b Excess from 2018 13,080.				
c Excess from 2019 249,006.				
d Excess from 2020 399, 407.				
e Excess from 2021 1,385,722.				Form 990-PF (2021)

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Part XIII Private	Operating Foun	idations (see ins	structions and Part VI-	A, question 9)	N/A	
1 a If the foundation has	received a ruling or det	ermination letter that	it is a private operating			
foundation, and the r	ruling is effective for 202	1, enter the date of the	he ruling			
b Check box to indicate	e whether the foundation	is a private operatin	g foundation described in	section	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of th	e adjusted net	Tax year		Prior 3 years		
income from Part I o	r the minimum	(a) 2021	(b) 2020	(c) 2019	(d) 2018	(e) Total
investment return fro	om Part IX for					
each year listed						
b 85% (0.85) of line 2a						
c Qualifying distribution	ns from Part XI,					
line 4, for each year	listed					
d Amounts included in	line 2c not					
used directly for activ	ve conduct of					
exempt activities						
e Qualifying distribution	ns made directly					
for active conduct of	exempt activities.					
Subtract line 2d from	n line 2c					
3 Complete 3a, b, or c alternative test relied						
a "Assets" alternative to						
(1) Value of all asse	ts					
(2) Value of assets under section 49	qualifying 942(j)(3)(B)(i)					
b "Endowment" alterna	tive test - enter					
2/3 of minimum inve shown in Part IX, line listed	e 6, for each year					
c "Support" alternative						
(1) Total support of investment inco dividends, rents securities loans	me (interest, , payments on					
(2) Support from ge and 5 or more e organizations as section 4942(j)(eneral public xempt provided in					
(3) Largest amount	CONTRACTOR DESCRIPTION OF THE PROPERTY OF THE					
, ,	nization					
(4) Gross investmen	nt income					
Part XIV Supple	mentary Informa	ation (Complet	e this part only if	the foundation	had \$5,000 or mor	e in assets
at any	time during the	ear-see instru	uctions.)			
1 Information Rega	rding Foundation Ma	anagers:				
a List any managers of year (but only if they	the foundation who have have contributed more	re contributed more t than \$5,000). (See se	han 2% of the total contr ection 507(d)(2).)	ibutions received by the	foundation before the close	of any tax
JUDITH GLICK	MAN LAUDER					
b List any managers of	the foundation who ow	n 10% or more of the	stock of a corporation (or an equally large porti	on of the ownership of a pa	rtnership or
other entity) of which	the foundation has a 10	0% or greater interes	t.			
NONE						
Check here ► X	if the foundation only n	nakes contributions t	Scholarship, etc., Pro o preselected charitable o	organizations and does	not accept unsolicited reque	ests for funds. If
			tions under other condition			
a The name, address, a	and telephone number o	r email address of the	e person to whom applica	ations should be addres	sed:	
b The form in which ap	pplications should be sul	omitted and informati	on and materials they sh	ould include;		
c Any submission dead	dlines:					
d Any restrictions or lin	mitations on awards, suc	ch as by geographica	I areas, charitable fields,	kinds of institutions, or	other factors:	

3 Grants and Contributions Paid During the Ye		Payment		
Recipient	If recipient is an individual.			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
ACCESS BOOKS		PC	CULTURAL AND	
PO BOX 64951			EDUCATIONAL	1 000
LOS ANGELES, CA 90064			ADVANCEMENT	1,000.
AFRICA SCHOOLHOUSE		PC	INDIGENT	
1158 26TH ST				
SANTA MONICA, CA 90403				5,000.
ALL FAITHS FOOD BANK		PC	INDIGENT	
8171 BLAIKIE CT				
SARASOTA, FL 34240				7,000.
ALZHEIMER'S ASSOCIATION		PC	MEDICAL RESEARCH	
383 US ROUTE #1, SUITE 2C			MEDICAL RESEARCH	
SCARBOROUGH, ME 04074				1,000.
ALZHEIMER'S DRUG DISCOVERY FOUNDATION				
57 W 57TH ST, SUITE 904		PC	MEDICAL RESEARCH	
NEW YORK, NY 10019				10 000
	TINUATION SHEE	T(S)	> 3a	10,000. 2,716,253.
b Approved for future payment		Ī	04	2,120,200.
NONE				
		 		
Total			> 3b	0.

ter gross amounts unless otherwise indicated.		usiness income		by section 512, 513, or 514	(e)
	(a) Business	(b)	(c) Exclu- sion	(d)	Related or exemp
Program service revenue:	code	Amount	code	Amount	function income
a					
b					
c					
d			\perp		
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	1,376,589.	
Dividends and interest from securities			14	44,364.	
Net rental income or (loss) from real estate:	and the state of the state of			and the second district the second	Aug. 1238/4542
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income			14	124,397.	
Gain or (loss) from sales of assets other					
than inventory	900099	75.	18	807,833.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b					
С					
d					
e					
Subtotal. Add columns (b), (d), and (e)		75.		2,353,183.	
Total. Add line 12, columns (b), (d), and (e)				13	2,353,2
ee worksheet in line 13 instructions to verify calculation	s.)				
Part XV-B Relationship of Activitie	s to the Accomp	olishment of Ex	empt P	urposes	
			ope i	u. pooco	
ine No. Explain below how each activity for which	income is reported in co	olumn (e) of Part XV-A	contribute	d importantly to the accompli	ishment of
the foundation's exempt purposes (other to	han by providing funds	for such purposes).			
	·				

▼	the foundation's exempt purposes (other than by providing funds for such purposes).

ALBERT B. GLICKMAN FAMILY FOUNDATION 95-4423553 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Part XVI

					ng with any other organiza		tion 501(c)		Yes	No
					g to political organizations	?				0.000000
		from the reporting found						1.0		
((1) Casi	·		**********				1a(1)	_	X
h ((2) Utile	nsactions:						1a(2)		Х
1TT (5 20)			.hl					5.456		
((1) Sale	s of assets to a noncharita	able exempt organiza	tion				1b(1)		X
((2) Pont	al of facilities, equipment	or other assets	organization				1b(2)	_	X
((4) Poin	ai oi iaciiiles, equipment,	, or other assets					1b(3)		X
((4) Nelli	ibursement arrangements		************				1b(4)	_	X
((c) Dorf	is or loan guarantees						1b(5)		X
(Charina o	of facilities, againment, me	embership or tundrai	sing solicitatio	ons	••••••		1b(6)		X
G C	f the one	or racilities, equipment, ma	alling lists, other asse	ets, or paid em	nployees			1c		X
a i	r the ans	wer to any of the above is	s "Yes," complete the	following sche	edule. Column (b) should a	always show the fair	market value of the	goods, other ass	ets,	
	olumn (d) the value of the goods,	other assets or serv	ndation received	ed less than fair market va	lue in any transaction	n or sharing arrange	ment, show in		
(a) Line		(b) Amount involved			e exempt organization	1 /4) =				
(4)	-	(b) Amount involved	(c) Name o		e exempt organization	(0) Description	on of transfers, transaction	ons, and sharing arr	angemen	ts
-	-			N/A						
	-									
	_									
										THE SECOND
		1200 (44-44) [2-4								
						1.				
	\neg									
22 10	s the four	ndation directly or indirect	thy affiliated with or	ralated to one						711111
Za is	caction	501(c) (other than costic	n FO1/6/(2)) or in ac	elated to, one	or more tax-exempt organ	nizations described				1
h 11	F"Voc " or	omplete the following sele	11 50 1(c)(3)) or in se	CHON 52/?				Yes	X] No
D II	res, c	omplete the following sche (a) Name of org			(b) Tong of annualisation	_				
			janization		(b) Type of organization		(c) Description of re	elationship		
		N/A								
٠.		penalties of perjury, I declare the	hat I have examined this	return, including	accompanying schedules and s	statements, and to the be	st of my knowledge	May the IRS d	iscuss th	ie
Sigr		siler, it is the, correct, and com	A Peciaration of prej	er (other than	taxpayer) is based on all information	ation of which preparer h	as any knowledge.	return with the	prepare	1
Here		الما	14.	1 1	11/15/22	- PRESII	DENT	X Yes	300 11151	No
	Sigr	nature of officer or trustee		1	Date	Title		_ IES		INO
		Print/Type preparer's na	me	Preparer's si		Date	Check if	PTIN		
				~ .	6		self- employed			
Paic	1	DANIEL P. 1	DOIRON	Sauce Y	. Daine, CPA	11/14/22		P01206	201	
Prep	oarer	Firm's name ► ALB		I.I. & RI	ENNETT	//44	Firm's EIN ▶ 0		_	
San Street	Only	, and shallo P LLLD	, LUMIDA	a Di			FILLI S EIN D	1-044000	0	
	-	Firm's address ▶ ₽○	BOX 445	130 M	IDDLE STREET		+			
		PO	RTLAND, M	E 0/111	2_0445		Dh 20	7 772 17	001	
		10.		n ATTI	0440		Phone no. 20	7-112-13		0004

95-4423553 PAGE 1 OF 1

(a) List and 2-story b	d describe the kind(s) of property solo rick warehouse; or common stock, 20	l, e.g., real estate, 0 shs. MLC Co.		(b) How acquired P - Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
	1a LEGACY VENTURE V LLC PASS-THRU					
	IV LLC PASS-THRU			P P		
	DING LLC PASS-THR			P		
	ISTRIBUTIONS FROM		S	P		
	GAINS INCLUDED I			P		
f						
g				***************************************		
h						
ī						
ī				H		
k						
1						
m						
n						
0		W				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale			Gain or (loss) lus (f) minus (g)	
a 514,876.		prod expense of date		(c) p	17 107	11 076
b 207,752.	2					514,876.
c 75,042.						207,752.
d 10,238.						75,042.
е		523.				10,238.
f		525.				-523.
g						
h						
i						
i						
k						
1						
m						
n						
0						
Complete only for assets showing	g gain in column (h) and owned by th	e foundation on 12/31/69		(1) L nss	ses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		Gains (excess o	f col. (h) gain over t less than "-0-")	col. (k),
a					-	514,876.
b						207,752.
С						75,042.
d						10,238.
e						-523.
f						3231
g						
h						
i						
j				***************************************		
k						
1						
m						
n						
0						
	o if all orders and	Deat Lie 2	T			
Capital gain net income or (net capNet short-term capital gain or (los)			2		8	07,385.
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8	column (c).	(0).	,		N/A	

Part XIV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient AMERICAN FRIENDS OF LEKET ISRAEL PC INDIGENT PO BOX 2090 TEANECK, NJ 07666 70,000. AMERICAN JEWISH JOINT DISTRIBUTION PC CULTURAL AND COMMITTEE EDUCATIONAL PO BOX 4124 ADVANCEMENT NEW YORK, NY 10163 70,000. AMERICAN JEWISH WORLD SERVICE PC RELIGIOUS 45 W 36TH ST NEW YORK, NY 10018 10,000. AMHERST COLLEGE PC CULTURAL AND 220 SOUTH PLEASANT STREET EDUCATIONAL AMHERST, MA 01002 2,000. ADVANCEMENT ANTI-DEFAMATION LEAGUE (ADL) NEW PC CULTURAL AND ENGLAND EDUCATIONAL 40 COURT ST ADVANCEMENT BOSTON, MA 02108 10,000. BOWDOIN COLLEGE PC CULTURAL AND 5400 COLLEGE STATION EDUCATIONAL BRUNSWICK, ME 04011-8445 ADVANCEMENT 25,000. BREAST CANCER RESEARCH FOUNDATION PC MEDICAL RESEARCH 28 W 44TH ST, SUITE 609 NEW YORK, NY 10036 25,000. BROWARD PUBLIC LIBRARY PC CULTURAL AND 100 SOUTH ANDREWS AVE EDUCATIONAL FORT LAUDERDALE, FL 33301 ADVANCEMENT 1,000. CITY HARVEST PC INDIGENT 150 52ND STREET BROOKLYN, NY 11232 500. COLUMBIA UNIVERSITY IRVING MEDICAL PC MEDICAL RESEARCH CENTER 710 W 168TH ST NEW YORK, NY 10032 25,000. Total from continuation sheets 2,692,253.

Part XIV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or contribution Amount status of Name and address (home or business) recipient COMMUNITY INITIATIVES PC CULTURAL AND PO BOX 411512 EDUCATIONAL SAN FRANCISCO, CA 94141 ADVANCEMENT 500. COOL EFFECT INC PC ENVIRONMENTAL 100 DRAKES LANDING RD, SUITE 260 GREENBRAE, CA 94904 40,000. FIDELITY CHARITABLE PC UNRESTRICTED P.O. BOX 770001 CINCINNATI, OH 45277-0053 1,370,000. FJC PC CULTURAL AND 520 EIGHTH AVENUE, 20TH FLOOR EDUCATIONAL NEW YORK, NY 10018 ADVANCEMENT 30,000. FRIENDS OF TEIA PC CULTURAL AND PO BOX 87 EDUCATIONAL PEAKS ISLAND, ME 04108 ADVANCEMENT 1,000. FRIENDS OF THE MAINE WILDLIFE PARK PC CULTURAL AND PO BOX 1231 EDUCATIONAL GRAY, ME 04039 ADVANCEMENT 3,000. FRIENDS OF UNITED HATZALAH ISRAEL PC INDIGENT 208 E 51ST ST, SUITE 303 NEW YORK, NY 10022 5,000. GEORGE EASTMAN MUSEUM PC CULTURAL AND 900 EAST AVENUE EDUCATIONAL ROCHESTER, NY 14607-2298 ADVANCEMENT 1,000. GLASSWING INTERNATIONAL PC CULTURAL AND 199 WATER ST, FL 34 EDUCATIONAL NEW YORK, NY 10038 ADVANCEMENT 5,000. GOCAMPAIGN PC INDIGENT 2309 SANTA MONICA BOULEVARD #437 SANTA MONICA, CA 90404 35,000.

Total from continuation sheets

3 Grants and Contributions Paid During the Ye				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
(1.01.0 4.10 4.10 4.10 4.10 4.10 4.10 4.1	or substantial contributor	recipient		
				-
HEBREW UNION COLLEGE		PC	CULTURAL AND	
ONE W 4TH ST			EDUCATIONAL	
NEW YORK, NY 10012		1	ADVANCEMENT	30,000
HUMANITY IN ACTION		PC	CULTURAL AND	
41 FLATBUSH AVE SUITE 1			EDUCATIONAL	
BROOKLYN, NY 11217			ADVANCEMENT	10,000
INTERFACE CHILDREN & FAMILY SERVICES		PC	INDIGENT	
4001 MISSION OAKS BLVD				
CAMARILLO, CA 93012-5121				5,000
JEWISH COMMUNITY ALLIANCE OF SOUTHERN		PC	CULTURAL AND	
ME	8		EDUCATIONAL	
1342 CONGRESS ST			ADVANCEMENT	
PORTLAND, ME 04102				55,000
JEWISH FEDERATION OF SARASOTA-MANATEE		₽C	RELIGIOUS	
580 MCINTOSH ROAD				
SARASOTA, FL 34232				19,000
JEWISH NATIONAL FUND-ARAVA INSTITUTE		PC	CULTURAL AND	
42 E. 69TH STREET			EDUCATIONAL	
NEW YORK, NY 10021			ADVANCEMENT	70,000
LEVEY DAY SCHOOL		PC	CULTURAL AND	
400 DEERING AVE			EDUCATIONAL	
PORTLAND, ME 04103			ADVANCEMENT	10,000
LOOK GOOD FEEL BETTER FOUNDATION		PC	CULTURAL AND	
1620 L STREET NW, 12TH FL			EDUCATIONAL	
WASHINGTON, DC 20036			ADVANCEMENT	10,000
	_			
MAINE AUDUBON		PC	CULTURAL AND	
20 GILSLAND FARM RD			EDUCATIONAL	
FALMOUTH, ME 04105			ADVANCEMENT	5,000
MAINE BEHAVIORAL HEALTHCARE		PC	INDIGENT	
78 ATLANTIC PLAZCE				
SOUTH PORTLAND, ME 04106				50,000

Part XIV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient MAINE MEDICAL CENTER PC INDIGENT 22 BRAMHALL STREET PORTLAND, ME 04102 5,000. MAINE PUBLIC BROADCASTING PC CULTURAL AND 323 MARGINAL WAY EDUCATIONAL PORTLAND, ME 04101 ADVANCEMENT 10,000. MARINE MAMMALS OF MAINE PC CULTURAL AND PO BOX 751 EDUCATIONAL BATH, ME 04530 ADVANCEMENT 1,000. MIDCOAST HUMANE PC CULTURAL AND 190 PLEASANT ST EDUCATIONAL BRUNSWICK, ME 04011 ADVANCEMENT 3,000. MMPA (MAINE MUSEUM OF PHOTOGRAPHIC PC CULTURAL AND ARTS) EDUCATIONAL 240 CONGRESS STREET WEST ADVANCEMENT PORTLAND, ME 04103 35,000. NACOEJ (NORTH AMERICAN CONFERENCE ON PC CULTURAL AND ETHIOPIAN JEWRY) EDUCATIONAL 255 W 36TH ST, SUITE 701 ADVANCEMENT NEW YORK, NY 10018 15,000. NAMI/MAINE PC CULTURAL AND 52 WATER STREET EDUCATIONAL HALLOWELL, ME 04347 ADVANCEMENT 75,000. NOAA OFFICE OF NATIONAL MARINE GOV CULTURAL AND SANCTUARIES EDUCATIONAL PO BOX 979008 ADVANCEMENT ST. LOUIS, MO 63197-9000 4,000. OCEANSIDE CONSERVATION TRUST PC CULTURAL AND PO BOX 10404 EDUCATIONAL PORTLAND, ME 04104 ADVANCEMENT 10,000. OLYMPIA SNOWE WOMENS LEADERSHIP PC CULTURAL AND INSTITUTE EDUCATIONAL ONE CANAL PLAZA, SUITE 501 ADVANCEMENT PORTLAND, ME 04101 1,000. Total from continuation sheets

Part XIV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or status of contribution Amount Name and address (home or business) or substantial contributor recipient ORT AMERICA PC CULTURAL AND 75 MAIDEN LANE, FL 10 EDUCATIONAL NEW YORK, NY 10038 ADVANCEMENT 16,000. PARTNERS FOR WORLD HEALTH PC INDIGENT 40 WALCH DRIVE PORTLAND, ME 04103 10,000. PIECE BY PIECE PC CULTURAL AND 1815 S SOTO ST EDUCATIONAL ADVANCEMENT 1,000. LOS ANGELES, CA 90023 PORTLAND MUSEUM OF ART PC CULTURAL AND SEVEN CONGRESS SQUARE EDUCATIONAL PORTLAND, ME 04101 ADVANCEMENT 150,000. RIPPLEFFECT PC CULTURAL AND 159 STATE STREET, BASEMENT EDUCATIONAL PORTLAND, ME 04101 40,000. ADVANCEMENT SEEDS OF PEACE INC PC CULTURAL AND 370 LEXINGTON AVE, SUITE 201 EDUCATIONAL NEW YORK, NY 10017 ADVANCEMENT 11,000. SOUTHERN MAINE COMMUNITY COLLEGE PC CULTURAL AND FOUNDATION EDUCATIONAL 2 FORT RD ADVANCEMENT SOUTH PORTLAND, ME 04106 18,000. SPURWINK PC CULTURAL AND 901 WASHINGTON AVENUE, SUITE 100 EDUCATIONAL PORTLAND, ME 04103 ADVANCEMENT 1,000. TEMPLE BETH HILLEL RELIGIOUS PC 20 BAKER LANE SOUTH WINDSOR, CT 06074 1,000. TEMPLE EMANU-EL PC RELIGIOUS 151 MCINTOSH RD 13,250. SARASOTA, FL 34232 Total from continuation sheets

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	- Control of the cont	
rempoart		PC	CULTURAL AND	
PO BOX 4101			EDUCATIONAL	
PORTLAND, ME 04101			ADVANCEMENT	1,00
THE CEDARS NURSING CARE CENTER		PC	INDIGENT	
630 OCEAN AVE				
PORTLAND, ME 04103				1,00
THE JED FOUNDATON		PC	CULTURAL AND	
PO BOX 412945			EDUCATIONAL	
BOSTON, MA 02241-2945			ADVANCEMENT	50,50
THE YELLOW TULIP PROJECT		PC	CULTURAL AND	
239 FORESIDE ROAD			EDUCATIONAL	
FALMOUTH, ME 04105			ADVANCEMENT	55,00
TUCSON WILDLIFE CENTER		PC	CULTURAL AND	
PO BOX 18320			EDUCATIONAL	
TUCSON, AZ 85731			ADVANCEMENT	1,000
UNION FOR REFORM JUDAISM				
633 THIRD AVE		PC	CULTURAL AND	
NEW YORK, NY 10017			EDUCATIONAL ADVANCEMENT	5,000
			ADVANCEMENT	3,000
UNION OF REFORM JUDAISM		PC	RELIGIOUS	
633 THIRD AVENUE				
NEW YORK, NY 10017-6778		-	-	100,000
WILLIAM OF ALLIA SOCIETY		L		
UNIVERSITY OF MAINE FOUNDATION		PC	CULTURAL AND	
TWO ALUMNI PLACE			EDUCATIONAL	
ORONO, ME 04469-5792			ADVANCEMENT	23,50
USM FOUNDATION		D.C.	OHI MIDAL AND	
PO BOX 9300		PC	CULTURAL AND	
PORTLAND, ME 04101-9300			EDUCATIONAL ADVANCEMENT	2,000
WORLD UNION OF PROGRESSIVE JUDAISM		PC	CULTURAL AND	
633 THIRD AVE			EDUCATIONAL	
NEW YORK, NY 10017	1		ADVANCEMENT	35,000

Part XIV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of recipient Name and address (home or business) YEMIN ORD PC RELIGIOUS 4340 EAST-WEST HIGHWAY, SUITE 202 BETHESDA, MD 20814 5,000. Total from continuation sheets

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

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

2021

Schedule B (Form 990) (2021)

Name of the organization

Employer identification number

A	LBERT B. GLICKMAN FAMILY FOUNDATION	95-4423553					
Organization type (check	one):						
Filers of:	Section:						
Form 990 or 990-EZ 501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	is covered by the General Rule or a Special Rule . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.					
General Rule							
X For an organization	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor's	s \$5,000 or more (in money or stotal contributions.					
Special Rules							
sections 509(a)(1) contributor, durin	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and g the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) If Z, line 1. Complete Parts I and II.	d that received from any one					
contributor, durin literary, or educat	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.						
year, contribution is checked, enter purpose. Don't co	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
answer "No" on Part IV, lin	hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For e 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, ng requirements of Schedule B (Form 990).						

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

Name of organization

Employer identification number

ALBERT B. GLICKMAN FAMILY FOUNDATION

95-4423553

Part I	Contributors (see instructions). Use duplicate copies of Part I in	f additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JUDITH GLICKMAN LAUDER 111 COMMERCIAL ST, SUITE 300 PORTLAND, ME 04101	\$\$	Person X Payroll
(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 Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)

Name of organization

Employer identification number

ALBERT B. GLICKMAN FAMILY FOUNDATION

95-4423553

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

Name of organization

Employer identification number

	T B. GLICKMAN FAMILY FOUR			95-4423553		
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) ti	arough (e) and the following line en	try. For organizations			
	completing Part III, enter the total of exclusively religious, character Use duplicate copies of Part III if additional sp	aritable, etc., contributions of \$1,000 or	less for the year. (Enter this info. onc	e.) ► \$		
(a) No. from						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held		
		(e) Transfer of gif	t			
	Transferencia manna address and	7ID . 4	Deletional in addition			
	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee		
(a) No. from	(b) Purpose of gift (c) Use of gi		(d) Desc	ription of how gift is held		
Part I	(b) t at post of gift	(c) Ose of gift	(u) Desc	anpuon oi now girt is neid		
ı		(e) Transfer of gif	t	The state of the s		
		(o) Transier or gir				
	Transferee's name, address, and	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 gift	t			
- 1	Transferralla name addition and	710 4				
ŀ	Transferee's name, address, and	ZIP + 4	Relationship of trai	nsferor to transferee		
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Doco	d) Description of how gift is held		
Part I	(-/,	(o) osc or gire	(u) Desc	ription of now gift is field		
ı		(e) Transfer of gift	t			
		(-, giii				
	Transferee's name, address, and	ZIP + 4	Relationship of tran	nsferor to transferee		

Department of the Treasury Internal Revenue Service

Underpayment of Estimated Tax by Corporations

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

OMB No. 1545-0123

Employer identification number

► Go to www.irs.gov/Form2220 for instructions and the latest information.

2021

ALBERT B. GLICKMAN FAMILY FOUNDATION 95-4423553 Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the

es	stimated tax penalty line of the corporation's income tax	returi	n, but do not attach Fo	orm 2220.		,3,	
	Part I Required Annual Payment						
1	Total tax (see instructions)		******************************			1_	25,602.
•	- Posses I half in the control of th			1 1			
	a Personal holding company tax (Schedule PH (Form 1120), lir			2a			
	b Look-back interest included on line 1 under section 460(b)(2					142.5	
	contracts or section 167(g) for depreciation under the incom-	e fore	cast method	2b		1876	
	• Credit for federal tay paid on fuels (see instructions)						
	c Credit for federal tax paid on fuels (see instructions)			2c			
3	d Total. Add lines 2a through 2c Subtract line 2d from line 1. If the result is less than \$500, do		omplete ou file this force	The second section		2d	
J							25 602
4	Enter the tax shown on the corporation's 2020 income tax rel	urn S	oo instructions. Coutless	If the tour is more		3	25,602.
7	or the tax year was for less than 12 months, skip this line and						6E 120
	of the tax year was for less than 12 months, skip this line and	enter	the amount from tine 3 o	n line 5		4	65,139.
5	Required annual payment. Enter the smaller of line 3 or line	Δlf	the corneration is required	d to okin line 4			
	enter the amount from line 3	7. 11	the corporation is required	a to skip lille 4,		5	25,602.
	Part II Reasons for Filing - Check the boxes below	ow tha	t apply. If any boxes are o	hecked the cornora	tion must file	e Form 2220	23,002.
	even if it does not owe a penalty. See instructions.			monda, mo ocipora	tion must in	0 1 01111 2220	
6	The corporation is using the adjusted seasonal install	ment	method.				
7							
8	X The corporation is a "large corporation" figuring its fir			the prior year's tax			
	Part III Figuring the Underpayment			tire prior your o tax			
			(a)	(b)		(c)	(d)
9	Installment due dates. Enter in columns (a) through (d) the	П	1	157		(0)	(u)
	15th day of the 4th (Form 990-PF filers: Use 5th month),					1	
	6th, 9th, and 12th months of the corporation's tax year	9	05/15/21	06/15/23	1 09	/15/21	12/15/21
10	Required installments. If the box on line 6 and/or line 7					, = , = =	
	above is checked, enter the amounts from Sch A, line 38. If					1	
	the box on line 8 (but not 6 or 7) is checked, see instructions						
	for the amounts to enter. If none of these boxes are checked,						
	enter 25% (0.25) of line 5 above in each column	10	6,401.	6,400).	6,401.	6,400.
11	Estimated tax paid or credited for each period. For	П					
	column (a) only, enter the amount from line 11 on line 15.						
	See instructions	11					65,200.
	Complete lines 12 through 18 of one column						
	before going to the next column.						
	Enter amount, if any, from line 18 of the preceding column	12					
13	Add lines 11 and 12	13		nie and a second			65,200.
		14		6,401		12,801.	19,202.
	Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	().	0.	45,998.
16	If the amount on line 15 is zero, subtract line 13 from line						
	14. Otherwise, enter -0-	16		6,401		12,801.	
17	Underpayment. If line 15 is less than or equal to line 10,						
	subtract line 15 from line 10. Then go to line 12 of the next						
	column. Otherwise, go to line 18	17	6,401.	6,400).	6,401.	
18	Overpayment. If line 10 is less than line 15, subtract line 10						
Go	from line 15. Then go to line 12 of the next column to Part IV on page 2 to figure the penalty. Do not go to Part IV	18	NA 040 00 004-1 11	17			
uU	to rait it on page 2 to rigure the penalty. Do not go to Part IV	III THE	ere are no entries on line	17 - no penalty is o	wed.		

Form 2220 (2021)

Part IV Figuring the Penalty

			(a)	(b)	(c)	(d)	
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19					
20	Number of days from due date of installment on line 9 to the						
	date shown on line 19	20					_
21	Number of days on line 20 after 4/15/2021 and before 7/1/2021	21					
22	Underpayment on line 17 x Number of days on line 21 x 3% (0.03)	22	\$	\$	\$	\$	_
23	Number of days on line 20 after 6/30/2021 and before 10/1/2021	23					
24	Underpayment on line 17 x Number of days on line 23 x 3% (0.03)	24	\$	\$	\$	\$	
25	Number of days on line 20 after 9/30/2021 and before 1/1/2022	25					
26	Underpayment on line 17 x Number of days on line 25 x 3% (0.03)	26	\$	\$	\$	\$	
27	Number of days on line 20 after 12/31/2021 and before 4/1/2022	27	SEE	ATTACHED W	ORKSHEET		
28	Underpayment on line 17 x Number of days on line 27 x 3% (0.03)	28	\$	\$	\$	\$	
29	Number of days on line 20 after 3/31/2022 and before 7/1/2022	29					
30	Underpayment on line 17 x Number of days on line 29 x *% 365	30	\$	\$	\$	\$	
31	Number of days on line 20 after 6/30/2022 and before 10/1/2022	31					
32	Underpayment on line 17 x Number of days on line 31 x *% 365	32	\$	\$	\$	\$	
33	Number of days on line 20 after 9/30/2022 and before 1/1/2023	33					
34	Underpayment on line 17 x Number of days on line 33 x *% 365	34	\$	\$	\$	\$	
35	Number of days on line 20 after 12/31/2022 and before 3/16/2023	35					
36	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$	\$	
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$	
38	Penalty. Add columns (a) through (d) of line 37. Enter the totaline for other income tax returns	al he	re and on Form 1120, lin	e 34; or the comparable	38	\$ 214	

Form 2220 (2021)

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

me(s)				Identifying Numb	er
	GLICKMAN FAMIL			95-4423	553
(A)	(B)	(C)	(D)	(E)	(F)
*Date	Amount	Adjusted Balance Due	Number Days Balance Due	Daily Penalty Rate	Penalty
	Property Consultation	-0-			
5/15/21	6,401.	6,401.	31	.000082192	
6/15/21	6,400.	12,801.	92	.000082192	
9/15/21	6,401.	19,202.	64	.000082192	1
1/18/21	-65,200.	-45,998.			
2/15/21	6,400.	-39,598.			
3/31/22	0.	-39,598.	45	.000109589	
Ity Due (Sum of Colur					21

^{*} Date of estimated tax payment, withholding credit date or installment due date.

FORM 9	90-PF	GAIN OR	(LOSS)	FROM	SALE	OF	ASSETS		STA	ATEMENT 1
DESCRI	(A) PTION OF PROPERT	Y					MANNER CQUIRED		TE UIRED	DATE SOL
LEGACY	VENTURE V LLC P	— ASS-THRU				PU	RCHASED			
	(B) GROSS SALES PRICE	COST COST OTHER	OR	EXI	(D) PENSE	OF	(E)		G2 T2	(F)
	514,876.		0.		SALE	0.	DEPRE	0.	GAIN	OR LOSS 514,876
DESCRII	(A) PTION OF PROPERTY	Y					MANNER CQUIRED		TE	DATE SOL
LEGACY	VENTURE IV LLC	PASS-THR	U			PU	RCHASED			
	(B) GROSS SALES PRICE	(C COST OTHER	OR	EXF	(D) ENSE SALE	OF	(E) DEPRE		GAIN	(F) OR LOSS
	207,752.	-	0.			0.		0.		207,752
DESCRII	(A) PTION OF PROPERTY	Y					MANNER CQUIRED	DA ACQU	TE IRED	DATE SOLI
19 BEEF	KMAN FUNDING LLC	PASS-TH	RU			PUI	RCHASED			
	(B) GROSS SALES PRICE	COST	OR	EXP	(D) ENSE	OF	(E)			(F)
	75,042.	OTHER I	0.	-	SALE	0.	DEPRE	0.	GAIN	OR LOSS
DESCRIE	(A) PTION OF PROPERTY	7				1	MANNER CQUIRED	DA	TE IRED	75,042
	GAIN DISTRIBUTI	ONS FROM	M PUBLI	CLY		8				
	(B) GROSS SALES PRICE	(C) COST OTHER E	OR		(D) ENSE SALE	OF	(E) DEPRE	с.		(F) OR LOSS
	10,238.		0.			0.		0.		10,238

(A) DESCRIPTION OF PROP				MANN ACQUI		DA'		DATE	SOLD	
ADJUSTMENT FOR GAIN	IS INCLUDED	IN UBTI		1	PURCHA	SED				
(B) GROSS SALES PRIC	(C COST CE OTHER I	OR	EXPE	D) NSE O ALE		(E)	c.	GAII	(F)	oss
	0.	0.			0.		0.			0.
CAPITAL GAINS DIVIDENDS FROM PART IV TOTAL TO FORM 990-PF, PART I, LINE 6A 807,908.										
FORM 990-PF INTERE	EST ON SAVING	GS AND T	'EMPOR	ARY C	ASH IN	VESTI	MENTS	ST	ATEMEN	т 2
SOURCE		RE	(A) VENUE BOOK		NET IN	(B) VESTI COME	MENT		(C) ADJUSTI ET INCO	
INTEREST INCOME		1,	376,5	89.	1,	376,	589.			
TOTAL TO PART I, LI	NE 3	1,	376,5	89.	1,	376,	589.			
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM	SECUR	ITIES	5	STA	ATEMEN'	г 3
SOURCE	GROSS AMOUNT	CAPIT. GAIN. DIVIDE	S	REVI	A) ENUE BOOKS		(B) INVES		(C) ADJUS NET IN	STED
DIVIDENDS FROM VARIOUS SOURCES	44,364.		0.	44	1,364.		44,36	54.		
TO PART I, LINE 4	44,364.		0.	4.4	1,364.	3	44,36	54.		

FORM 990-PF	OTHER	INCOME		STATEMENT 4
DESCRIPTION	(A) (B) REVENUE NET INVEST- PER BOOKS MENT INCOME			
OTHER INCOME FROM PASS-THRUS ORDINARY INCOME FROM PASS-TH	RUS	104,095. 20,302.	103,822.	
TOTAL TO FORM 990-PF, PART I	, LINE 11 =	124,397.	124,164.	
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
ACCOUNTING	5,900	. 1,475		4,425.
TO FORM 990-PF, PG 1, LN 16B	5,900	1,475	-	4,425.
FORM 990-PF	TA	XES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES OTHER INVESTMENT TAXES FEDERAL TAXES	5,685 2,000 25,158	. 0.		0. 0. 0.
TO FORM 990-PF, PG 1, LN 18	32,843	. 5,685.		0.

FORM 990-PF	OTHER EXPENSES STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT INTEREST FROM				
PASS-THRUS	60,776.	60,776.		0.
LIFE INSURANCE PREMIUMS	316,328.			0.
ASSET MANAGEMENT FEES	374,343.	374,343.		0.
NON-DEDUCTIBLE EXPENSES	429.	0.		0.
CHARITABLE DEDUCTIONS FROM				
PASS-THRUS	1.	0.		1.
OTHER DEDUCTIONS FROM				
PASS-THRUS	27,201.	27,201.		0.
OTHER FEES	722.	180.		542.
RENTAL LOSS FROM PASS-THRUS	41,670.	40,989.		0.
TO FORM 990-PF, PG 1, LN 23	821,470.	503,489.		543.

FORM 990-PF	CORPORATE STOCK	PORATE STOCK		
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
CORPORATE STOCK		5,533,217.	8,377,833.	
TOTAL TO FORM 990-PF, PART II, LINE 10B		5,533,217. 8,377,		
FORM 990-PF	THER INVESTMENTS		STATEMENT 9	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
AVANT CAPITAL I HIRSHMARK 14610 35TH AVE HIRSHMARK 5TH AVENUE LEGACY VENTURE IV, LLC LEGACY VENTURE V, LLC MORGAN NORTH SHORE 345 OVINGTON AVE FUNDING LLC MADISON 13TH HOLDING COMPANY LLC 51 PARK PL 2 FUNDING LLC 40TH STREET FUNDING LLC	COST COST COST COST COST COST COST COST	797,375. 1,979,059. 688,663. 243,224. 363,212. 77,942. 986,873. 1,897,856. 2,587,381.	797,375 1,979,059 688,663 502,229 738,650 77,942 986,873 1,897,856 2,587,381	
FOTAL TO FORM 990-PF, PART II, L	COST INE 13	576,715.	10,832,743	

FORM 990-PF EXPLANATION CONCERNING PART VI-A, LINE 8B

STATEMENT 10

EXPLANATION

THE ALBERT GLICKMAN FAMILY FOUNDATION IS NOT REQUIRED TO PROVIDE A COPY OF THE FORM 990-PF TO DELAWARE UNLESS THERE ARE EMPLOYEES IN DELAWARE OR CONDUCTS ACTIVITIES IN DELAWARE. IN 2021, THE FOUNDATION DID NOT HAVE EMPLOYEES OR CONDUCT ACTIVITY IN DELAWARE.

FORM 990-PF

EXPLANATION CONCERNING PART VI-A, LINE 12 QUALIFYING DISTRIBUTION STATEMENT

STATEMENT 11

EXPLANATION

DISTRIBUTIONS WERE MADE TO FIDELITY CHARITABLE. THE PRIVATE FOUNDATION TREATED THOSE DISTRIBUTIONS AS QUALIFYING DISTRIBUTIONS, AS DISCLOSED IN PART XV. FIDELITY CHARITABLE IS THE OWNER OF THE FUNDS DISTRIBUTED AND HAS ULTIMATE CONTROL OVER THE INCOME AND ASSETS OF THE FUNDS.

FORM 990-PF

EXPLANATION CONCERNING PART VI-A, LINE 12 SECTION 170(C)(2)(B) STATEMENT

STATEMENT 12

EXPLANATION

DISQUALIFIED PERSONS WITH RESPECT TO THE FOUNDATION INTEND TO USE THEIR ADVISORY PRIVILEGES TO DIRECT DISTRIBUTIONS FROM THE DONOR ADVISED FUND TO ACCOMPLISH PURPOSES DESCRIBED IN SECTION 170(C)(2)(B).

FORM 990-PF PART VII TRUSTE	- LIST ES AND	OF OFFICERS, DIRI FOUNDATION MANAGE	STATEMENT 13		
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
JUDITH GLICKMAN LAUDER 111 COMMERCIAL STREET, SUIT PORTLAND, ME 04101	E 300	PRESIDENT, DIREC	CTOR 0.	0.	0.
JEFFREY L. GLICKMAN 111 COMMERCIAL STREET, SUIT PORTLAND, ME 04101	E 300	VICE PRESIDENT, 2.00	DIRECTOR 0.	0.	0.
TIGRAW GLICKMAN 111 COMMERCIAL STREET, SUIT PORTLAND, ME 04101	E 300	VICE PRESIDENT, 2.00	DIRECTOR 0.	0.	0.
DAVID P. GLICKMAN 111 COMMERCIAL STREET, SUITE PORTLAND, ME 04101	€ 300	VICE PRESIDENT, 2.00	DIRECTOR 0.	0.	0.
BRENNER J. GLICKMAN 111 COMMERCIAL STREET, SUITE PORTLAND, ME 04101	≅ 300	VICE PRESIDENT, 2.00	DIRECTOR 0.	0.	0.
DENNY JACOBUS 111 COMMERCIAL STREET, SUITI PORTLAND, ME 04101	≅ 300	SECRETARY, CFO T	THROUGH 6.1		0.
E. CLARK COPELIN 111 COMMERCIAL STREET, SUITH PORTLAND, ME 04101	300	SECRETARY, CFO A	AS OF 6.10.	21	0.
TOTALS INCLUDED ON 990-PF, F	PAGE 6,	PART VII	0.	0.	0.

UNRELATED BUSINESS INCOME

CARRYOVER DATA TO 2022

Name ALBERT B. GLICKMAN FAMILY FOUNDATION	Employer Identification Number 95-4423553
Based on the information provided with this return, the following are possible carryover amounts to next year.	
FEDERAL CONTRIBUTION - 50% CASH	5,914,834.
	
	,

553	t 5	± 6
95-4423553	Amount Used for	Amount Used for
EIN:	Used for	Amount Used for
	Used for —	Amount Used for
	Used for	Amount Used for
EDULE	Used for	Amount Used for
DETAIL CARRYOVER SCHEDULE	Used for	Amount Used for
DETAIL C	Amount Used for	Amount Used for
	Amount Used for	Amount Used for
FOUNDATION 50% CASH FED	Used for	Amount Used for
GLICKMAN FAMILY FOUNDATION CONTRIBUTION - 50% CASH FE	Total Amount Used	Amount Used for
m m	Original Carryover Amount 1, 203, 855. 1, 202, 759. 1, 401, 809. 1, 720, 868. 1, 720, 868.	Amount Used for
Name: ALBERT Type and Entity:	Year Vear Originated 2017 2018 2019 2020 2020 2020	O B O L
Nar Typ	200 200 200 200 200 200 200 200 200 200	Type Type

Form 990-W

(Worksheet)

Department of the Treasury Internal Revenue Service

Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations

(and on Investment Income for Private Foundations) FORM 990-T

Go to www.irs.gov/Form990W for instructions and the latest information.
 Keep for your records. Do not send to the Internal Revenue Service.

OMB No. 1545-0047

1	Unrelated business taxable income expected in the tax year					
2	Tax on the amount on line 1. See instructions for tax computation	2				
3	Alternative minimum tax for trusts. See instructions				3	
4	Total. Add lines 2 and 3				4	
5	Estimated tax credits. See instructions				5	
6	Subtract line 5 from line 4				6	
7	Other taxes. See instructions				7	
8	Total. Add lines 6 and 7				8	
9	Credit for federal tax paid on fuels. See instructions				9	
b	Subtract line 9 from line 8. Note : If less than \$500, the organization estimated tax payments. Private foundations, see instructions. Enter the tax shown on the 2021 return. See instructions. Caution zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c. 2022 Estimated Tax. Enter the smaller of line 10a or line 10b. If the from line 10a on line 10c.	; If ne organization is requ	10a 10b 10b ired to skip line 10b, enter	the amount	10c	
		(a)	(b)	(c)		(d)
11	Installment due dates. See instructions 11					
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization."					
13	2021 Overpayment. See instructions 13					
14 LHA	Payment due (Subtract line 13 from line 12) 14 For Paperwork Reduction Act Notice, see instructions.					orm 990-W (2022)

ESTIMATED TAX
OVERPAYMENT APPLIED
AMOUNT DUE

3,800.

0.