Form 990-PF

Department of the Treasury Internal Revenue Service

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. Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

| For | calen | dar year 2022 or tax year beginning | , 2022, | and er | nding | | , 20 |
|------------------------------|------------|--|--|---------------------------------|-------------|--|---|
| | ne of four | | | | | r identification numb | er |
| тн | E AIII | DREY P CONNOR CHARITABLE FOUNDATION | | | 20-6 | 769802 | |
| | | street (or P.O. box number if mail is not delivered to street address) | Room/s | suite | | e number (see instruct | ions) |
| | | BERT B GREGORY, TRUSTEE | | | 2075 | 538104 | |
| | | state or province, country, and ZIP or foreign postal code | | | | ion application is pend | ling check here |
| - | | SCOTTA ME 04543 | | | C il exempt | ют аррисации із репс | ing, check here . |
| | | | of a former public c | harity | D 1 Faraia | o organizations, shook | horo |
| u | CHECK | Final return Amended r | | ilality | | n organizations, check | |
| | | Address change Name char | | | | n organizations meetin | |
| ш | Chook | type of organization: Section 501(c)(3) exempt po | | | | here and attach comp | |
| | | on 4947(a)(1) nonexempt charitable trust Other tax | | | | foundation status was 07(b)(1)(A), check here | |
| | | narket value of all assets at J Accounting method | | | | | |
| | | | . 🔼 Cash 🗌 Acc | Silvai | | ndation is in a 60-mon ction 507(b)(1)(B), chec | |
| | line 16 | | on each basis \ | | under sex | Stion 307 (B)(1)(B), Grice | K Hore |
| D | art I | 13373.3. | e on cash basis.) | | | | (d) Dishumamanta |
| | arti | Analysis of Revenue and Expenses (The total of | (a) Revenue and | (b) Net in | nvestment | (c) Adjusted net | (d) Disbursements for charitable |
| | | amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) | expenses per books | inc | ome | income | purposes (cash basis only) |
| | | | | | | | (oddir badia offiy) |
| | 1 | Contributions, gifts, grants, etc., received (attach schedule) | A. | | | | |
| | 2 | Check if the foundation is not required to attach Sch. B | A STATE OF THE STA | | | | |
| | 3 | Interest on savings and temporary cash investments | 1. | 1 | 1. | | |
| | 4 | Dividends and interest from securities | 262. | - | 262. | | |
| | 5a | Gross rents | | | | | ED ESSENCE SERVE |
| | b | Net rental income or (loss) | 45 17 | 15000 | | | |
| ne | 6a | Net gain or (loss) from sale of assets not on line 10 | 3,323. | | | | |
| en | b | Gross sales price for all assets on line 6a 33,000. | | | | | |
| Revenue | 7 | Capital gain net income (from Part IV, line 2) | | | 3,323. | | |
| Ш | 8 | Net short-term capital gain | | | | | |
| | 9 | Income modifications | | | | | |
| | 10a | Gross sales less returns and allowances | | | | | |
| | b | Less: Cost of goods sold | (A.S | | | | |
| | С | Gross profit or (loss) (attach schedule) | | | | | |
| | 11 | Other income (attach schedule) | | lietasiini enjerjagi | | | |
| _ | 12 | Total. Add lines 1 through 11 | 3,586. | | 3,586. | | |
| S | 13 | Compensation of officers, directors, trustees, etc. | | | | | |
| penses | 14 | Other employee salaries and wages | | | | | |
| Ser | 15 | Pension plans, employee benefits | | | | | |
| EX | 16a | Legal fees (attach schedule) | | | | | |
| | b | Accounting fees (attach schedule) L-16b. Stmt. | 600. | | | | |
| ⋛ | С | Other professional fees (attach schedule) L-16c Stmt | 1,310. | | 1,310. | | |
| tra | 17 | Interest | | | | | |
| nis | 18 | Taxes (attach schedule) (see instructions) See. Stmt | 156. | | 82. | | |
| Ξ | 19 | Depreciation (attach schedule) and depletion | | | | | |
| Operating and Administrative | 20 | Occupancy | | | | | |
| Þ | 21 | Travel, conferences, and meetings | | | | | |
| a | 22 | Printing and publications | 58. | | | | |
| ng | 23 | Other expenses (attach schedule) See . Stmt . | 50. | | | | - |
| ati | 24 | Total operating and administrative expenses. Add lines 13 through 23 | | | 1 000 | | |
| er | 05 | The state of the s | 2,174. | | 1,392. | | |
| Ö | 25 | Contributions, gifts, grants paid | 21,900. | | 1 222 | | 21,900. |
| - | 26 | Total expenses and disbursements. Add lines 24 and 25 | 24,074. | | 1,392. | | 21,900. |
| | 27 | Subtract line 26 from line 12: | | | | | |
| | a | Excess of revenue over expenses and disbursements | -20,488. | | 0.10: | | |
| | b | Net investment income (if negative, enter -0-) | | | 2,194. | | 1 |
| | C | Adjusted net income (if negative, enter -0-) | | | | | |

| Pa | rt II | Balance Sheets Attached schedules and amounts in the description column | Beginning of year | | of year |
|-------------|----------|--|---|----------------|-----------------------|
| | | should be for end-of-year amounts only. (See instructions.) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash—non-interest-bearing | 6,044. | 8,363. | 8,363. |
| | 2 | Savings and temporary cash investments | 3,066. | 10,431. | 10,431. |
| | 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 (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) | | | |
| | | Less: allowance for doubtful accounts | | | |
| S | 8 | Inventories for sale or use | | | |
| set | 9 | Prepaid expenses and deferred charges | | | |
| Assets | 10a | Investments—U.S. and state government obligations (attach schedule) | | | |
| | b | Investments—corporate stock (attach schedule) L-10b Stmt | 152,084. | 121,912. | 134,879. |
| | C | Investments—corporate stock (attach schedule) | 152,064. | 121, 912. | 134,079. |
| | 11 | Investments—land, buildings, and equipment: basis | | | |
| | | Less: accumulated depreciation (attach schedule) | A | | |
| | 12 | Investments—mortgage loans | | | |
| | 13 | Investments—other (attach schedule) | | | |
| | 14 | Load buildings and antiquent basis | | | |
| | 14 | Land, buildings, and equipment: basis | TO THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS | | |
| | 15 | Less: accumulated depreciation (attach schedule) Other assets (describe | | _ | |
| | 15 16 | Total assets (to be completed by all filers—see the | | | |
| | 10 | instructions. Also, see page 1, item I) | 161,194. | 140,706. | 153,673. |
| _ | 17 | | 101,194. | 140,700. | 133,073. |
| | | Accounts payable and accrued expenses | K | _ | |
| es | 18 | Grants payable | | | |
| Ξ | 19 | Deferred revenue | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Ľ | 21 | Mortgages and other notes payable (attach schedule) Other liabilities (describe | | | |
| | 22 | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | | | |
| alances | | and complete lines 24, 25, 29, and 30. | | | |
| ŭ | | | | | |
| | 24 | Net assets without donor restrictions | | | |
| B . | 25 | Net assets with donor restrictions | | _ | |
| Ĕ | | Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. | | | |
| or Fund | 00 | | | | |
| ō | 26 | Capital stock, trust principal, or current funds | | | |
| sts | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | | | |
| SSE | 28 | Retained earnings, accumulated income, endowment, or other funds | 161,194. | 140,706. | |
| Ä | 29 | Total net assets or fund balances (see instructions) | 161,194. | 140,706. | |
| Net Assets | 30 | Total liabilities and net assets/fund balances (see | | | |
| _ | | instructions) | 161,194. | 140,706. | |
| | rt III | Analysis of Changes in Net Assets or Fund Balances at net assets or fund balances at beginning of year—Part II, colu | mn (a) line 20 (m) | t agree with | |
| 1 | | of year figure reported on prior year's return) | | | 161 104 |
| ^ | | | | | 161,194. |
| 2 | | er amount from Part I, line 27a | | _ | -20,488. |
| 3 | | er increases not included in line 2 (itemize) | | 3 | 140 700 |
| 4 | _ | I lines 1, 2, and 3 | | _ | 140,706. |
| 5 | Dec | reases not included in line 2 (itemize)al net assets or fund balances at end of year (line 4 minus line 5)— | Dowl II and the Market | 5 | 140 700 |
| 6 | 1012 | at their assets of fund balances at end of year (line 4 minus line 5)— | raπ II, column (b), lir | ne 29 6 | 140,706. |

| Part I | V Capital Gains and | Losses for Tax on Investm | nent Income | | | |
|----------|---|--|--|--|-----------------------------------|---------------------------------------|
| ľ | | (s) of property sold (for example, real est; 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 (| 67.806 CLEARBRIDGE | AGGRESSIVE GROWTH FUN | ND | P | 12/12/2013 | 09/12/2022 |
| b 5 | 6.782 CLEARBRIDGE | AGRESSIVE GROWTH FUND | | P | 12/12/2013 | 11/28/2022 |
| c | 390.422 CALAMOS GRO | WTH & INCOME | | P | 12/17/2010 | 09/12/2022 |
| d (| CAPITAL GAIN DISTRI | BUTION | | P | 12/18/2015 | 12/31/2022 |
| е | | | | | | |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | | r other basis ense of sale | | ain or (loss) (f) minus (g)) |
| а | 10,000. | | | 13,086. | | -3,086. |
| b | 8,000. | | No. 100 100 100 100 100 100 100 100 100 10 | 11,073. | | -3,073. |
| С | 15,000. | | | 10,507. | | 4,493. |
| d | 4,989. | | | 0. | | 4,989. |
| е | | | | | | |
| | Complete only for assets show | ving gain in column (h) and owned | by the foundation | on 12/31/69. | (I) Gains (C | ol. (h) gain minus |
| | (i) EMV on of 19/21/60 | (j) Adjusted basis | (k) Exces | ss of col. (i) | col. (k), but n | ot less than -0-) or |
| | (i) FMV as of 12/31/69 | as of 12/31/69 | over col | I. (j), if any | Losses | (from col. (h)) |
| а | | | | 91 | | -3,086. |
| b | | | | A | | -3,073. |
| С | | | | | | 4,493. |
| d | | | | | | 4,989. |
| е | | | | | | · · · · · · · · · · · · · · · · · · · |
| 2 | Capital gain net income or | | also enter in Pa , enter -0- in Pa | | 2 | 3,323. |
| 3 | Net short-term capital gain | or (loss) as defined in sections | 1222(5) and (6 |): | | , |
| | | , line 8, column (c). See instru | | | | |
| | Part I, line 8 | | | } | 3 | |
| Part | | on Investment Income (Se | The second secon | , 4940(b), or 4 | 948 – see instru | uctions) |
| 1a | | is described in section 4940(d)(2) | The second secon | | | |
| | Date of ruling or determination | | AND THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED I | necessary-see i | | 1 30. |
| b | All other domestic foundation | tions enter 1.39% (0.0139) of | | | | |
| _ | | The state of the s | 200007 | | 1000 | |
| 2 | | estic section 4947(a)(1) trusts a | nd taxable found | dations only: other | ers, enter -0-) | 2 0. |
| 3 | TOTAL PROOF BY AN | · · · · · · · · · · · · · · · · · · · | | | | 3 30. |
| 4 | | nestic section 4947(a)(1) trusts a | and taxable foun | dations only: oth | | 4 0. |
| 5 | | income. Subtract line 4 from I | | | | 5 30. |
| 6 | Credits/Payments: | | | | | |
| а | | nts and 2021 overpayment cre | dited to 2022 | 6a | 157. | |
| b | | ns—tax withheld at source . | | | | |
| c | | or extension of time to file (For | | | | |
| d | Backup withholding errone | THE REPORT OF THE WATER STREET AND CONTRACT OF THE PROPERTY OF | | | | |
| 7 | Total credits and payments | Control of the Contro | | | | 7 157. |
| 8 | | rpayment of estimated tax. Ch | | | | 8 |
| 9 | | s 5 and 8 is more than line 7, e | | | | 9 |
| 10 | | nore than the total of lines 5 an | | | _ | 10 127. |
| 11 | | to be: Credited to 2023 estim | | 1 MAIN TO THE RESERVE | | 11 |
| 2000 100 | Littor the amount of life to | | 4/19/23 PRO | 121. | iolandou - | Form 990-PF (2022) |
| BAA | | I/L V O | | | | (EULL) |

| | U-FF (2022) | | | aye - |
|----------|--|--------|------|---------|
| | VI-A Statements Regarding Activities | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | Yes | No × |
| b | 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. | | | |
| С | Did the foundation file Form 1120-POL for this year? | 1c | | × |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | |
| u | (1) On the foundation. \$ (2) On foundation managers. \$ | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | |
| • | on foundation managers. \$ | 2 | | × |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. | 2 | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles | | | |
| | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . | 3 | | × |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | × |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | × |
| 6 | 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? | 6 | | × |
| 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 | × | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. | | | |
| - | ME | | | |
| 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 | 8b | × | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | - | |
| 9 | 4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," | | | |
| | complete Part XIII | 9 | | × |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | |
| | names and addresses | 10 | | × |
| 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 | | × |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified | | | |
| 2.000 | person had advisory privileges? If "Yes," attach statement. See instructions | 12 | | × |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | | × |
| | Website address N/A | | | |
| 14 | T. I. | 3-81 | 0.4 | |
| 17 | The books are in care of ROBERT B GREGORY Located at PO BOX 760, WATER ST. DAMARISCOTTA, ME ZIP+4 04543 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here | | | . [|
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| 16 | At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority | | Yes | No |
| 11-200-5 | over a bank, securities, or other financial account in a foreign country? | 16 | | × |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of | | | |
| | the foreign country | | | |
| BAA | REV 04/19/23 PRO F | orm 99 | 0-PF | (2022) |

| Part | Statements Regarding Activities for Which Form 4720 May Be Required | | | |
|------|---|--------|------|-------|
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year, did the foundation (either directly or indirectly): | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | 1a(1) | | × |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified | | | |
| | person? | 1a(2) | | × |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | 1a(3) | | × |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | 1a(4) | | × |
| | (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) | | × |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation | | | |
| | agreed to make a grant to or to employ the official for a period after termination of government service, if | | | |
| | terminating within 90 days.) | 1a(6) | | × |
| b | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in | | | |
| | Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions . | 1b | | |
| 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 | | | |
| 101 | were not corrected before the first day of the tax year beginning in 2022? | 1d | | × |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | |
| | operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| а | At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for | 34.63 | | |
| | tax year(s) beginning before 2022? | 2a | | × |
| | If "Yes," list the years 20 , 20 , 20 , 20 | | | |
| 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 statement—see instructions.) | 2b | | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| | during the year? | 3a | | × |
| b | If "Yes," did it have excess business holdings in 2022 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 2022.) | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable | | | |
| | purposes? | 4a | | × |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize | | | 10000 |
| | its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning | | | |
| | in 2022? | 4b | | × |
| | DELI ALLIANO DEL | orm QQ | n-PF | 12022 |

| Par | VI-B Statements Regarding Activities | for W | hich Form | 4720 N | May Be R | equire | d (continued) | | | |
|--------|--|-----------|-------------------------------|--------------------|----------------------|-------------|--|----------------|---------|-------|
| 5a | During the year, did the foundation pay or incur a | | | | | | | | Yes | No |
| | (1) Carry on propaganda, or otherwise attempt to | | | | | | | 5a(1) | | × |
| | (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or | | | | | | | | | |
| | indirectly, any voter registration drive? | | | | | | | 5a(2) 5a(3) | | × |
| | (3) Provide a grant to an individual for travel, study, or other similar purposes?(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d) | | | | | | | | | × |
| | | | | | | ibed in | section 4945(d) | F-(4) | | ~ |
| | (4)(A)? See instructions | | blo sciontific | | | ational | nurnoses or for | 5a(4) | | × |
| | the prevention of cruelty to children or animal | | | | | | | 5a(5) | | × |
| b | If any answer is "Yes" to 5a(1)–(5), did any of the | | | | | | | Ja(J) | | |
| - | in Regulations section 53.4945 or in a current no | | | | | | | 5b | | |
| С | Organizations relying on a current notice regarding | | | | | | | | | |
| d | If the answer is "Yes" to question 5a(4), does | | | | | | | | | |
| | maintained expenditure responsibility for the gra- | nt?. | | | | | | 5d | | |
| | If "Yes," attach the statement required by Regula | | | | | | | | | |
| 6a | Did the foundation, during the year, receive any | funds, | directly or in | directly | y, to pay p | remium | s on a personal | | | |
| | benefit contract? | | | | | | | 6a | | × |
| b | Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870. | ns, dired | ctly or indired | tly, on | a personal | benefit | contract? . | 6b | | × |
| 7a | At any time during the tax year, was the foundation | a party | to a prohibite | ed tax s | helter trans | action? | | 7a | | × |
| b | If "Yes," did the foundation receive any proceeds | | | | | | | 7b | | |
| 8 | Is the foundation subject to the section 4960 tax | | | | | | remuneration or | | | |
| | excess parachute payment(s) during the year?. | | | | | | | 8 | | |
| Par | Information About Officers, Direct | tors, T | rustees, Fo | ounda | tion Man | agers, | Highly Paid Er | nploy | ees, | |
| 1 | and Contractors List all officers, directors, trustees, and found | ation n | nanagare an | d thoir | compone | ation (| See instructions | | | |
| - 1 | List all officers, directors, trustees, and found | | e, and average | THE REAL PROPERTY. | npensation | | Contributions to | MA CHANGEN | | |
| D.O.D. | (a) Name and address | hour | rs per week ed to position | (If n | ot paid, ter -0-) | emplo | byee benefit plans erred compensation | (e) Expe | allowar | |
| | ERT B GREGORY | TRUST | 400000 | | 0. | | | | | |
| PU | BOX 760 DAMARISCOTTA, ME 04543 | | 0.50 | | 0. | | | | | |
| | | | | | | | | | | |
| 8 | | | | | | | F | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 2 | Compensation of five highest-paid employee | es (oth | er than thos | se inclu | uded on li | ne 1 – | see instructions | s). If n | one, | enter |
| | "NONE." | | | | | | | | | |
| | (a) Name and address of each employee paid more than \$50,00 | 10 | (b) Title, and a | | (c) Compe | nsation | (d) Contributions to employee benefit | (e) Expe | | |
| | (a) Name and address of each employee paid more than 450,00 | U | devoted to po | | (c) compo | isation | plans and deferred compensation | other | allowar | ices |
| NONE | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | 14 | | | |
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| Total | number of other employees paid over \$50,000 . | | | | | | | 0 | | |

| Part VIII- | bundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | (c) Compensation |
|---|--|------------------|
| otal numb Part VIII- List the fo organizatio | Summary of Direct Charitable Activities bundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | 0 |
| List the fo organization | Summary of Direct Charitable Activities bundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | 0 |
| List the fo organization | Summary of Direct Charitable Activities bundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | 0 |
| List the fo organization | Summary of Direct Charitable Activities bundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | 0 |
| List the fo organization | Summary of Direct Charitable Activities bundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | 0 |
| List the fo organization | Summary of Direct Charitable Activities bundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | 0 |
| List the fo organization | Summary of Direct Charitable Activities bundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | 0 |
| List the fo organization | Summary of Direct Charitable Activities bundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | 0 |
| List the fo organization | Summary of Direct Charitable Activities bundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | 0 |
| List the fo organization | Summary of Direct Charitable Activities bundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | 0 |
| List the fo organization | Summary of Direct Charitable Activities bundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | 0 |
| List the fo organization | bundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | |
| organizatio | | |
| 1 | | Expenses |
| | ons and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 2 | | |
| 2 | | |
| 2 | | |
| | | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| | | |
| Part VIII- | | |
| Describe t | the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
| 1 | | = |
| | | is: |
| | | |
| 2 | | |
| | | |
| 10100 1101 | | |
| All other p | program-related investments. See instructions. | |
| 3 | | |
| | | |
| | | |
| Total. Add | | |

| Part | | gn fou | ndations, |
|------|---|--------|---------------------------|
| | see instructions.) | | |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes: | | |
| а | Average monthly fair market value of securities | 1a | 165,197. |
| b | Average of monthly cash balances | 1b | 9,911. |
| С | Fair market value of all other assets (see instructions) | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 175,108. |
| 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 | |
| 3 | Subtract line 2 from line 1d | 3 | 175,108. |
| 4 | Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see | | |
| | instructions) | 4 | 2,627. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 | 5 | 172,481. |
| 6 | Minimum investment return. Enter 5% (0.05) of line 5 | 6 | 8,624. |
| Part | | ounda | tions |
| | and certain foreign organizations, check here and do not complete this part.) | | |
| 1 | Minimum investment return from Part IX, line 6 | 1 | 8,624. |
| 2a | Tax on investment income for 2022 from Part V, line 5 | | |
| b | Income tax for 2022. (This does not include the tax from Part V.) 2b | | |
| С | Add lines 2a and 2b | 2c | 30. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 8,594. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 8,594. |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, | | |
| | line 1 | 7 | 8,594. |
| Part | XI Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| а | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 | 1a | 21,900. |
| b | Program-related investments—total from Part VIII-B | 1b | |
| 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: | | |
| 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 | 21,900. |
| BAA | REV 04/19/23 PRO | | Form 990-PF (2022) |

| Part | XII Undistributed Income (see instruction | | 04,000 | | |
|--------|--|---------------|----------------------------|--------------------|--|
| | | (a) Corpus | (b) Years prior to 2021 | (c) 2021 | (d) 2022 |
| 1 | Distributable amount for 2022 from Part X, line 7 | | | | 8,594. |
| 2 | Undistributed income, if any, as of the end of 2022: | | | | |
| а | Enter amount for 2021 only | | | | |
| b | Total for prior years: 20, 20, 20 | | | | 10 10 10 10 10 10 10 10 10 10 10 10 10 1 |
| 3 | Excess distributions carryover, if any, to 2022: | | | | |
| a | From 2017 | | | | |
| b | From 2018 | | | | |
| d | From 2020 8,890. | | | | |
| e | From 2021 | | | | |
| f | Total of lines 3a through e | 36,818. | | | |
| 4 | Qualifying distributions for 2022 from Part XI, line 4: \$21,900. | | | | |
| а | Applied to 2021, but not more than line 2a . | | | | |
| b | Applied to undistributed income of prior years | | | | |
| _ | (Election required – see instructions) Treated as distributions out of corpus (Election | | A TOTAL CONTRACTOR | | |
| С. | required - see instructions) | | | | 0.500 |
| d | Applied to 2022 distributable amount | 12 222 | | | 8,578. |
| е 5 | Remaining amount distributed out of corpus Excess distributions carryover applied to 2022 | 13,322. | | | |
| · | (If an amount appears in column (d), the same | | | | |
| | amount must be shown in column (a).) | 16. | | | 16. |
| 6 | Enter the net total of each column as indicated below: | | / | | |
| а | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 50,124. | | | |
| b | Prior years' undistributed income. Subtract line 4b from line 2b | MAN | 0. | | |
| С | Enter the amount of prior years' undistributed income for which a notice of deficiency has | | | | |
| | been issued, or on which the section 4942(a) | 10-5 | | | |
| | tax has been previously assessed | | | | |
| d | Subtract line 6c from line 6b. Taxable amount—see instructions | | 0. | | |
| е | Undistributed income for 2021. Subtract line | | | | |
| | 4a from line 2a. Taxable amount—see | | | * | |
| | instructions | | | 0. | |
| f | Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be | | | | |
| | distributed in 2023 | | | | 0. |
| 7 | Amounts treated as distributions out of corpus | | | | |
| , | to satisfy requirements imposed by section | | | | |
| | 170(b)(1)(F) or 4942(g)(3) (Election may be | | | | |
| | required—see instructions) | | | | |
| 8 | Excess distributions carryover from 2017 not | | | | |
| ^ | applied on line 5 or line 7 (see instructions) . | 0. | | | |
| 9 | Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a | 50 124 | | | |
| 10 | Analysis of line 9: | 50,124. | | | |
| а | Excess from 2018 | | | | |
| b | Excess from 2019 0. | | | | |
| С | Excess from 2020 8,874. | | | | |
| d | Excess from 2021 27,928. | | | | parameters. |
| е | Excess from 2022 | | | | SECTION AND DESIGNATION OF THE PERSON OF THE |

| Part | XIII Private Operating Founda | tions (see instru | ctions and Part | VI-A, question 9) | | N/A |
|----------|---|--|----------------------|--|--|----------------------|
| 1a | If the foundation has received a ruling foundation, and the ruling is effective for | | | | | |
| b | Check box to indicate whether the four | ndation is a private | operating foundat | ion described in se | ection 4942(j)(| (3) or 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | (e) Total |
| | income from Part I or the minimum investment return from Part IX for | (a) 2022 | (b) 2021 | (c) 2020 | (d) 2019 | (6) . 5.4 |
| | each year listed | | | | | |
| b | 85% (0.85) of line 2a | | | | | |
| С | Qualifying distributions from Part XI, | | | | | |
| ٨ | line 4, for each year listed | | | | | |
| d | for active conduct of exempt activities | | | | | |
| е | Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| а | "Assets" alternative test—enter: | | | | | |
| | (1) Value of all assets | | | _ | | |
| | (2) Value of assets qualifying under | | | | | |
| L | section 4942(j)(3)(B)(i) | | | | | |
| b | of minimum investment return shown in | | 400 | | | |
| | Part IX, line 6, for each year listed | | ANNE | | | |
| С | "Support" alternative test-enter: | | | | | |
| | (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | 2 | | | |
| | (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| | (3) Largest amount of support from an exempt organization | | | | | |
| | (4) Gross investment income | | | | | |
| Part | | | | he foundation h | ad \$5,000 or m | ore in assets at |
| | any time during the year- | THE RESERVE AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO IN COLUMN TO THE PERSON NAMED IN COLUM | 18.) | | | |
| 1 a | Information Regarding Foundation List any managers of the foundation | THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NAMED I | ited more than 20 | % of the total cont | ributions received | by the foundation |
| u | before the close of any tax year (but of | | | | | by the loundation |
| | ESTATE OF AUDREY P CONNOR | | | ************************************** | **** | |
| b | List any managers of the foundation ownership of a partnership or other e | | | 경영원경영 : 2000년 2000년 - 1 00일은 12일일 - 1 | 1000 TO 1000 T | arge portion of the |
| | NONE | | | | | |
| 2 | Information Regarding Contribution Check here X if the foundation or | | | | organizations and | does not accept |
| | unsolicited requests for funds. If the f complete items 2a, b, c, and d. See in | | gifts, grants, etc., | to individuals or o | rganizations unde | er other conditions, |
| а | The name, address, and telephone no | | dress of the perso | n to whom applica | ations should be a | ddressed: |
| b | The form in which applications should | d be submitted an | d information and | materials they sho | ould include: | |
| | | | | | | |
| С | Any submission deadlines: | | | | | |
| d | Any restrictions or limitations on av | vards, such as b | y geographical a | reas, charitable fi | elds, kinds of ins | stitutions, or other |

Part XIV Supplementary Information (continued)

| Recipient | If recipient is an individual, | Foundation | 200 | |
|--|---|-------------------|----------------------------------|-------------|
| CONTROL PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPER | show any relationship to any foundation manager | status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | Sentification | |
| a Paid during the year | | | | |
| HULL PUBLIC SCHOOLS | N. 1722-1740 | | | |
| 180 HARBORVIEW | N/A | Foreign at Second | | 1 |
| HULL MA 02045 | | PUBLIC | UNRESTRICTED | 2,500 |
| HUDSONIA | | | | |
| PO BOX 5000 | | | 580 | |
| ANNANDALE ON HUDSON NY 12504 | | PUBLIC | UNRESTRICTED | 2,500 |
| SCENIC HUDSON INC | | | | |
| ONE CIVIC CENTER PLAZA | | | | |
| POUGHKEEPSIE NY 12601 | | PUBLIC | UNRESTRICTED | 2,500 |
| NEADS | | | | |
| PO BOX 1100 | | | | |
| PRINCETON MA 01541 | | PUBLIC | UNRESTRICTED | 900 |
| PUG RESCUE OF NEW ENGLAND | | | | |
| PO BOX 441667 | | 4 | | /40 0000000 |
| WEST SOMERVILLE MA 02144 | | PUBLIC | UNRESTRICTED | 2,500 |
| HIGH ROLLERS CLUB HRC | | V | | |
| 7324 W SAN BRUNO AVE | 4 | | | |
| FRESNO CA 93723 | | PUBLIC | UNRESTRICTED | 1,250 |
| WELLSPRING MULTI-SERVICE CENTER | | | | |
| 814 NANTASKET AVE | | | | |
| HULL MA 02045 | | PUBLIC | UNRESTRICTED | 2,500 |
| KEY WEST COMMITTEE FOR SAFER CLEANER SHIP | 5 | | | |
| 720 CAROLINE ST | | | | |
| KEY WEST FL 33040 | | PUBLIC | UNRESTRICTED | 2,500 |
| SCITUATE ANIMAL SHELTER | | | | |
| 780 CHIEF JUSTICE CUSHING HWY | | | | |
| SCITUATE MA 02066 | | PUBLIC | UNRESTRICTED | 1,250 |
| See Statement | | | | |
| | | | | |
| | | | | 3,500 |
| | | | | |
| Total | | | | 21,900 |
| b Approved for future payment | | | | |
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| Pa | rt X | V-A Analysis of Income-Producing Ad | ctivities | | | | |
|------|-------|---|----------------------|--|-----------------------|----------------------|---|
| Ente | r gro | ss amounts unless otherwise indicated. | Unrelated bu | siness income | Excluded by secti | on 512, 513, or 514 | (e) |
| 1 | Pro | gram service revenue: | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See instructions.) |
| | а | gram corvido reventas. | | | | | |
| | b | | | | | | |
| | С | | | | | | |
| | d | | | | | | |
| | е | | | | | | |
| | f | | | | | | |
| | g | Fees and contracts from government agencies | | | | | |
| 2 | Mer | mbership dues and assessments | | | | | |
| 3 | Inte | rest on savings and temporary cash investments | | | 14 | 1. | |
| 4 | Divi | idends and interest from securities | | | 14 | 262. | |
| 5 | Net | rental income or (loss) from real estate: | | | | | |
| | a | Debt-financed property | | | | | |
| | | Not debt-financed property | | | | | |
| 6 | | rental income or (loss) from personal property | | 4 | | | |
| 7 | | er investment income | | A | | | |
| 8 | | n or (loss) from sales of assets other than inventory | | | 18 | 3,323. | |
| 9 | | income or (loss) from special events | | | | | |
| 10 | | ess profit or (loss) from sales of inventory | | Assessment | | | |
| 11 | Oth | er revenue: a | | | | | |
| | b | | | | | - | |
| | C | | | | | | |
| | d | | - | | | | |
| | е | | | | | 0.506 | |
| | | ototal. Add columns (b), (d), and (e) | | The state of the s | | 3,586. | 3,586. |
| | | al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation | 701 | | | 13 | 3,300. |
| | | V-B Relationship of Activities to the A | | ent of Evem | nt Durnoses | | , |
| | e No | | ne is reported in | column (e) of Par | t XV-A contribute | d importantly to the | ne accomplishmen |
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| 01111 0 | 7011 (2022) | | , age | |
|---------|--|----------|-------|----|
| Par | Information Regarding Transfers to and Transactions and Relationships With Nonchar Organizations | itable E | xem | pt |
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described | Ye | es N | o |

| | in se | | | ngage in any of the fo 501(c)(3) organization | | | | | | Yes | No |
|----------|--------------|---------------------------|--|--|--|-------------------|-------------|-------------------|--------------------|-------------|---------|
| а | Trans | sfers from the rep | porting foundation to | a noncharitable exem | pt organization | of: | | | | | |
| | (1) C | ash | | | | | | | 1a(1) | | × |
| | (2) O | ther assets . | | | | | | | 1a(2) | | × |
| b | Othe | r transactions: | | | | | | | | | |
| | (1) S | ales of assets to | a noncharitable exen | npt organization . | * * * * * | | | | 1b(1) | | × |
| | (2) P | urchases of asse | ets from a noncharitat | ole exempt organization | on | | | | 1b(2) | | × |
| | | | | assets | | | | | 1b(3) | | × |
| | (4) R | leimbursement a | rrangements | | | | | | 1b(4) | | × |
| | | oans or loan gua | | | | | | | 1b(5) | | × |
| | (6) P | erformance of se | ervices or membership | p or fundraising solicit | tations | | | | 1b(6) | | × |
| С | Shari | ing of facilities, e | quipment, mailing list | s, other assets, or pai | id employees | | | | 1c | | × |
| | | (600) | | " complete the follow | | | | | w the | fair m | arket |
| | | | | es given by the repor | | | | | | | |
| | | | | ment, show in column | | | | | | | |
| (a) Line | no. | (b) Amount involved | (c) Name of noncha | aritable exempt organization | (d) Descri | ption of transfer | s. transac | tions, and sh | aring arra | anaeme | ents |
| , , | | | ., | 1 0 | (1) | P | | | <u> </u> | 5 | |
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| | - | | NAME OF THE PERSON OF THE PERS | | | | | | | | |
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| 2a | | | | iliated with, or relate | | | | | | | |
| | | | | tion 501(c)(3)) or in se | ection 527? . | | 0 940 40 | | ☐ Ye | s X | No |
| b | If "Ye | es," complete the | e following schedule. | | | | | | | | |
| | | (a) Name of organ | nization | (b) Type of organ | nization | 2 | (c) Descrip | otion of relation | onship | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | 14 | | | |
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| | G1510037C1 | | | this return, including accomp | | | | of my knowle | dge and b | elief, it i | s true, |
| Sign | corre | ect, and complete. Decl | aration of preparer (other than | n taxpayer) is based on all info | mation of which prep | arer has any knov | vieuge. | | IRS discu | | |
| Here | : | | | 04/24/2023 | TRUSTEE | | | with the | oreparer suctions. | hown b | elow? |
| | | nature of officer or true | stee | Date | Title | | | _ See ilistii | Jolions. | Tes | ⊔ио |
| Paid | | Print/Type preparer | 's name | Preparer's signature | | Date | C | neck X if | PTIN | | |
| | aror | Bruce A. E | Bachelder, CPA | | | 04/24/2 | 023 se | If-employed | P0122 | 2905 | 2 |
| Prepa | | F: | ruce A. Bachelo | ler, CPA | | | Firm's Ell | | 51949 | | |
| Jse (| Jilly | | | Damariscotta M | E 04543 | | Phone no | | | | |
| B A A | | | | REV 04/19/23 P | | | | | orm 99 | | (2022) |

Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

| 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 |
|---|---|--------------------------------------|----------------------------------|--------|
| a. Paid during the year | | | | |
| STRAIGHT AHEAD MINISTRIES | | PUBLIC | UNRESTRICTED | 1,000. |
| 791 MAIN ST | | | | |
| WORCESTER, MA 01610 | | | | |
| PTC MONASTERY | | PUBLIC | UNRESTRICTED | 2,000. |
| 245 SHEAFE RD | | | | |
| WAPPINGERS FALLS, NY 12590 | | | | |
| T SPACE STEVEN HOLL FOUNDATION | | PUBLIC | UNRESTRICTED | 500. |
| 450 WEST 31ST ST | | | | |
| NEW YORK, NY 10001 | | | | |
| | | | | 3,500. |



Additional Information From Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

| Description | Revenue and Expense per Book | Net Investment Income | Adjusted Net Income | Disbursement for charitable purpose | |
|-------------|------------------------------------|-----------------------------|------------------------|-------------------------------------|--|
| FOREIGN | 82. | 82. | | | |
| 990-PF | 74. | | | | |
| Total | 156. | 82. | | | |

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

| Description | Revenue and Expense per Book | Net Investment Income | Adjusted Net Income | Disbursement for charitable purpose |
|-------------|------------------------------------|-----------------------------|------------------------|-------------------------------------|
| BANK CHARGE | 50. | | | |
| Total | E.O. | ALC: NO. | | |

| Name | 2 | | | | | Employer Identification No. |
|------|--------|---|--------|------------|------------|-----------------------------|
| THE | AUDREY | P | CONNOR | CHARITABLE | FOUNDATION | 20-6769802 |
| | | | | | | |

Line 16a - Legal Fees

| Name of Provider | Type of Service Provided | Amount Paid Per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|---------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------|---|
| | | | | | |
| | | | | | - |
| | | | | | |
| | | | | | - |
| | | | | | |
| | | | | | - |
| | | | | | |
| tal to Form 990- | PF, Part I, Line 16a | | | | |

Line 16b - Accounting Fees

| Name of Provider | Type of Service Provided | Amount Paid Per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|---------------------|--------------------------------------|-----------------------------|-----------------------------|---------------------------|---|
| | TAX ACCOUNTING PF, Part I, Line 16b | 600. | | | |

Line 16c - Other Professional Fees

| Name of Provider | Type of Service Provided | Amount Paid Per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|---------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------|---|
| RBC | INVESTMENT COUNSEL | 1,310. | | | |
| | | | | | |
| | | | | | |
| Total to Form 990 | D-PF, Part I, Line 16c | 1,310. | | | |

| Name THE AUDREY P CONNOR CHARIT | TABLE FOUNDATION | ON | | | yer Identification No. 769802 |
|---|---|--------|-----------------|--------------------------------------|---|
| Line 10a - Investments - US and State Government Obligations: | US and State Government Obligations Obligations | | | End onment ons | f Year US Government Obligations FMV |
| Tot to Fm 990-PF, Pt II, Ln 10a | | | | | |
| Line 10b - Investme | ents - Corporate | Stock: | Book Value | (| of Year Fair Market Value |
| AMC YACKTMAN FUND CLEARBRIDGE AGGRESSIVE FIRST TRUST SMALL CAP (See L-10b Stmt Totals to Form 990-PF, Part II, I | CORE | | 9, 9, 72, | 551. 989. 136. 236. 912. | 29,883. 6,643. 15,690. 82,663. 134,879. |
| Line 10c - Investme | ents - Corporate | Bonds: | Bool | (| f Year Fair Market Value |
| Totals to Form 990-PF, Part II, I | Line 10c | | | | |
| Line 12 - Investme | ents - Mortgage I | oans: | Bool Value | < | of Year Fair Market Value |
| Totals to Form 990-PF, Part II, I | Line 12 | | | | |
| Line 13 - Inve | estments - Other | : | Bool Valu | < | of Year Fair Market Value |
| Totals to Form 990-PF, Part II, I | Line 13 | | | | |

Eorm 8879-TE

IRS e-file Signature Authorization for a Tax Exempt Entity

| OMB | No. | 1545-0047 |
|-----|-----|-----------|
| | | |

For calendar year 2022, or fiscal year beginning , 2022, and ending

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information. EIN or SSN Name of filer THE AUDREY P CONNOR CHARITABLE FOUNDATION 20-6769802 Name and title of officer or person subject to tax ROBERT B GREGORY, TRUSTEE Type of Return and Return Information Part I Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. 1a Form 990 check here b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . . 1b b Total revenue, if any (Form 990-EZ, line 9) Form 990-EZ check here . . 2a 3b 3a Form 1120-POL check here . . **b** Total tax (Form 1120-POL, line 22) 4a Form 990-PF check here . . X b Tax based on investment income (Form 990-PF, Part V, line 5) . 4b Form 8868 check here . . . 5b b Total tax (Form 990-T, Part III, line 4) . Form 990-T check here . . . 6b 6a Form 4720 check here . . . 7b 7a Form 5227 check here 8a b FMV of assets at end of tax year (Form 5227, Item D) 8h 9a Form 5330 check here . . . 9b Form 8038-CP check here . . . b Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10a Declaration and Signature Authorization of Officer or Person Subject to Tax Part II Under penalties of perjury, I declare that X I am an officer of the above entity or I am a person subject to tax with respect to (name , (EIN) and that I have examined a copy of the of entity) 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only as my signature to enter my PIN I authorize **ERO firm name** do not enter all zeros on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. 🗵 As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. Date 04/24/2023 Signature of officer or person subject to tax Certification and Authentication ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN. 5 8 Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. Date 04/24/2023 ERO's signature

Form 8879-TE (2022)

ERO Must Retain This Form - See Instructions

Additional Information From 2022 Federal Exempt Tax Return

Form 990-PF Part II Line 10, 12 and 13 Investments

L-10b Stmt

Continuation Statement

| Line 10b Description | Line 10b Book | Line 10b FMV |
|---------------------------------------|---------------|--------------|
| BNY MELLON STRATEGIC FUNDS | 31,404. | 32,997. |
| CALAMOUS INV TRST NEW GROWTH & INCOME | 32,262. | 35,365. |
| NUVEEN NASDAQ 100 DYNAMIC | 8,570. | 14,301. |
| Total | 72,236. | 82,663. |

