

**Return of Private Foundation**

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

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**2022**

Open to Public Inspection

Form **990-PF**

Department of the Treasury  
Internal Revenue Service

For calendar year 2022 or tax year beginning

, and ending

Name of foundation <b>THE LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST C/O Bristol Consult</b>		<b>A Employer identification number</b> <b>14-6285967</b>
Number and street (or P.O. box number if mail is not delivered to street address) <b>1266 FIRST STREET</b>	Room/suite <b>STE 1</b>	<b>B Telephone number</b> <b>917-915-0404</b>
City or town, state or province, country, and ZIP or foreign postal code <b>SARASOTA, FL 34236</b>		<b>C</b> If exemption application is pending, check here ... <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here ..... <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ..... <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>94,630,383.</b>	<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input checked="" type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received	10,481,965.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	2,086.	2,086.		Statement 2
	4 Dividends and interest from securities	191,448.	191,448.		Statement 3
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	298,927.			Statement 1
	b Gross sales price for all assets on line 6a	3,007,885.			
	7 Capital gain net income (from Part IV, line 2)		301,086.		
	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	707,147.	626,714.		Statement 4	
12 <b>Total.</b> Add lines 1 through 11	11,681,573.	1,121,334.			
<b>Operating and Administrative Expenses</b>	13 Compensation of officers, directors, trustees, etc.	700,000.	0.		700,000.
	14 Other employee salaries and wages	51,628.	0.		51,628.
	15 Pension plans, employee benefits				
	16a Legal fees Stmt 5	4,113.	1,028.		3,085.
	b Accounting fees Stmt 6	141,439.	35,360.		106,079.
	c Other professional fees				
	17 Interest				
	18 Taxes Stmt 7	41,278.	1,258.		0.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses Stmt 8	113,236.	57,989.		55,247.
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23	1,051,694.	95,635.		916,039.
	25 Contributions, gifts, grants paid	12,092,600.			12,092,600.
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	13,144,294.	95,635.		13,008,639.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-1,462,721.				
b <b>Net investment income</b> (if negative, enter -0-)		1,025,699.			
c <b>Adjusted net income</b> (if negative, enter -0-)			N/A		

THE LOUIS AND GLORIA FLANZER  
 PHILANTHROPIC TRUST C/O Bristol Consult

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing		594,591.	500,393.	500,393.
	2	Savings and temporary cash investments		2,354,079.	598,027.	598,027.
	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	800,000.			
		Less: allowance for doubtful accounts	0.	800,000.	800,000.	800,000.
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations	Stmt 9	578,268.	1,289,739.	1,245,830.
	b	Investments - corporate stock	Stmt 10	1,688,194.	1,687,402.	2,709,838.
	c	Investments - corporate bonds	Stmt 11	231,929.	3,796,984.	3,722,932.
	11	Investments - land, buildings, and equipment: basis				
	Less: accumulated depreciation					
12	Investments - mortgage loans					
13	Investments - other	Stmt 12	88,941,568.	85,053,363.	85,053,363.	
14	Land, buildings, and equipment: basis					
	Less: accumulated depreciation					
15	Other assets (describe _____)					
16	<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I)		95,188,629.	93,725,908.	94,630,383.	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe _____)				
23	<b>Total liabilities</b> (add lines 17 through 22)		0.	0.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 24, 25, 29, and 30.					
	24	Net assets without donor restrictions				
	25	Net assets with donor restrictions				
	Foundations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 26 through 30.					
	26	Capital stock, trust principal, or current funds		0.	0.	
	27	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.	
	28	Retained earnings, accumulated income, endowment, or other funds		95,188,629.	93,725,908.	
	29	<b>Total net assets or fund balances</b>		95,188,629.	93,725,908.	
30	<b>Total liabilities and net assets/fund balances</b>		95,188,629.	93,725,908.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	95,188,629.
2	Enter amount from Part I, line 27a	2	-1,462,721.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	93,725,908.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	93,725,908.

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

1a	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
b	See Attached Statements			
c				
d				
e				

a	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a				
b				
c				
d				
e	3,007,885.		2,706,799.	301,086.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			301,086.

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 .....	2	301,086.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 .....	3	N/A

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)	1	14,257.
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) .....		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....	2	0.
3	Add lines 1 and 2 .....	3	14,257.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- .....	5	14,257.
6	Credits/Payments:		
a	2022 estimated tax payments and 2021 overpayment credited to 2022 .....	6a	38,827.
b	Exempt foreign organizations - tax withheld at source .....	6b	0.
c	Tax paid with application for extension of time to file (Form 8868) .....	6c	20,000.
d	Backup withholding erroneously withheld .....	6d	0.
7	Total credits and payments. Add lines 6a through 6d .....	7	58,827.
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached .....	8	0.
9	Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed .....	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid .....	10	44,570.
11	Enter the amount of line 10 to be: Credited to 2023 estimated tax 44,570. Refunded	11	0.

**Part VI-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? .....		X
<b>1b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition ..... If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
<b>1c</b> Did the foundation file <b>Form 1120-POL</b> for this year? .....		X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ <u>0.</u> (2) On foundation managers. \$ <u>0.</u>		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ <u>0.</u>		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? .....		X
If "Yes," attach a detailed description of the activities.		
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .....		X
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....	X	
<b>4b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? .....	X	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? .....		X
If "Yes," attach the statement required by <i>General Instruction T</i> .		
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? .....	X	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV .....	X	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered. See instructions. _____ <b>FL</b>		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation .....	X	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII .....		X
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses <u>Stmnt 13</u>	X	
<b>11</b> At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions .....		X
<b>12</b> Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions .....		X
<b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....	X	
Website address <u>flanzertrust.org</u>		
<b>14</b> The books are in care of <u>ERIC KAPLAN &amp; R. Dean Hautamaki</u> Telephone no. <u>917-915-0404</u> Located at <u>1266 FIRST STREET, SUITE 1, SARASOTA, FL</u> ZIP+4 <u>34236</u>		
<b>15</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> - check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year .....		N/A
<b>16</b> At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		

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

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

	Yes	No
<b>1a</b> During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? .....	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....	1a(4)	X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? .....	1a(5)	X
(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) .....	1a(6)	X
<b>b</b> If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .....	1b	N/A
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here .....		<input type="checkbox"/>
<b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2022? .....	1d	X
<b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b> At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022? .....	2a	X
If "Yes," list the years _____, _____, _____, _____		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.) .....	2b	N/A
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. _____, _____, _____, _____		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....	3a	X
<b>b</b> If "Yes," did it have excess business holdings in 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	N/A
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....	4a	X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2022? .....	4b	X

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

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

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ERIC KAPLAN 1266 FIRST STREET, SUITE 1 SARASOTA, FL 34236	TRUSTEE 40.00	350,000.	0.	0.
R. Dean Hautamaki 1266 FIRST STREET, SUITE 1 SARASOTA, FL 34236	TRUSTEE 40.00	350,000.	0.	0.

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

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

**Total** number of other employees paid over \$50,000 0

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

**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
NONE		

Total number of others receiving over \$50,000 for professional services ..... 0

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

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/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 lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	

Total. Add lines 1 through 3 ..... 0.

**Part IX Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, 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	93,519,129.
b	Average of monthly cash balances .....	1b	1,746,779.
c	Fair market value of all other assets (see instructions) .....	1c	
d	<b>Total</b> (add lines 1a, b, and c) .....	1d	95,265,908.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....	1e	0.
2	Acquisition indebtedness applicable to line 1 assets .....	2	0.
3	Subtract line 2 from line 1d .....	3	95,265,908.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) .....	4	1,428,989.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 .....	5	93,836,919.
6	<b>Minimum investment return.</b> Enter 5% (0.05) of line 5 .....	6	4,691,846.

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

1	Minimum investment return from Part IX, line 6 .....	1	4,691,846.
2a	Tax on investment income for 2022 from Part V, line 5 .....	2a	14,257.
b	Income tax for 2022. (This does not include the tax from Part V.) .....	2b	26,854.
c	Add lines 2a and 2b .....	2c	41,111.
3	Distributable amount before adjustments. Subtract line 2c from line 1 .....	3	4,650,735.
4	Recoveries of amounts treated as qualifying distributions .....	4	0.
5	Add lines 3 and 4 .....	5	4,650,735.
6	Deduction from distributable amount (see instructions) .....	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 .....	7	4,650,735.

**Part 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	13,008,639.
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:		
a	Suitability test (prior IRS approval required) .....	3a	
b	Cash distribution test (attach the required schedule) .....	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 .....	4	13,008,639.



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

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				4,650,735.
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2022:				
a From 2017				
b From 2018	2,903,901.			
c From 2019	5,938,830.			
d From 2020	4,339,649.			
e From 2021	9,763,205.			
f Total of lines 3a through e	22,945,585.			
4 Qualifying distributions for 2022 from Part XI, line 4: \$ 13,008,639.				
a Applied to 2021, 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 2022 distributable amount				4,650,735.
e Remaining amount distributed out of corpus	8,357,904.			
5 Excess distributions carryover applied to 2022 (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	31,303,489.			
b Prior years' undistributed income. Subtract line 4b from line 2b		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 2021. Subtract line 4a from line 2a. Taxable amount - see instr.			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)	0.			
8 Excess distributions carryover from 2017 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a	31,303,489.			
10 Analysis of line 9:				
a Excess from 2018	2,903,901.			
b Excess from 2019	5,938,830.			
c Excess from 2020	4,339,649.			
d Excess from 2021	9,763,205.			
e Excess from 2022	8,357,904.			

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

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2022, enter the date of the ruling \_\_\_\_\_

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

	Tax year				(e) Total
	(a) 2022	(b) 2021	(c) 2020	(d) 2019	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed _____					
b 85% (0.85) of line 2a _____					
c Qualifying distributions from Part XI, line 4, for each year listed _____					
d Amounts included in line 2c not used directly for active conduct of exempt activities _____					
e 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:					
a "Assets" alternative test - enter:					
(1) Value of all assets _____					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i) _____					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed _____					
c "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) 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 XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**

1 **Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

None

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

None

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

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

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

See Statement 14

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

c Any submission deadlines:

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

**Part XIV** Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a Paid during the year</b>				
Academy At Glengary 1910 Glengary St. SARASOTA, FL 34231	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	38,100.
All Faiths Food Bank 8171 Blaikie Ct SARASOTA, FL 34240	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	134,438.
All Star Children's Foundation of Sarasota 3300 17th St, Sarasota, FL 34235	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	36,000.
American Cancer Society 2970 University Pkwy Ste 104 SARASOTA, FL 34243	NONE	IRC SEC. 170(C) ORGANIZATION	Relay for Life team & General	44,544.
American Skin Association 335 Madison Ave New York, NY 10017	NONE	IRC SEC. 170(C) ORGANIZATION	General - Advance skin research & health, Spring Gala	75,000.
<b>Total</b> ..... See continuation sheet(s) .....			<b>3a</b>	12,092,600.
<b>b Approved for future payment</b>				
None				
<b>Total</b> .....			<b>3b</b>	0.

**Part XV-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies .....					
2 Membership dues and assessments .....					
3 Interest on savings and temporary cash investments .....			14	2,086.	
4 Dividends and interest from securities .....			14	191,448.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property .....					
b Not debt-financed property .....					
6 Net rental income or (loss) from personal property .....					
7 Other investment income .....	623000	707,147.			
8 Gain or (loss) from sales of assets other than inventory .....			18	298,927.	
9 Net income or (loss) from special events .....					
10 Gross profit or (loss) from sales of inventory .....					
11 Other revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e) .....		707,147.		492,461.	0.
13 Total. Add line 12, columns (b), (d), and (e) .....			13	1,199,608.	

(See worksheet in line 13 instructions to verify calculations.)

**Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes**

Line No.	Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

**Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations**

	Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:		
(1) Cash		X
(2) Other assets		X
<b>b</b> Other transactions:		
(1) Sales of assets to a noncharitable exempt organization		X
(2) Purchases of assets from a noncharitable exempt organization		X
(3) Rental of facilities, equipment, or other assets		X
(4) Reimbursement arrangements		X
(5) Loans or loan guarantees		X
(6) Performance of services or membership or fundraising solicitations		X
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees		X
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?  Yes  No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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

**Sign Here** \_\_\_\_\_ **Trustee**  
 Signature of officer or trustee Date Title

May the IRS discuss this return with the preparer shown below? See instr.  
 Yes  No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN	
	Kevin P. Dougherty	Kevin P. Dougherty	11/14/23		P00189079	
	Firm's name	Dougherty & Connell			Firm's EIN	11-2973168
	Firm's address	450 Wireless Boulevard Hauppauge, NY 11788			Phone no.	631-756-2100

223622 12-06-22

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

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a UNITED STATES TREAS NTS 2.750% 05/31123B/E OTO 05	P	06/24/22	12/27/22
b AMG GW&KSMALUMIO CAP FUNDCLASS I	P	02/05/18	06/09/22
c EDGEWOOD GROWTHFUND INSTITUTIONAL CLASS	P	08/13/15	06/09/22
d ASHMORE EMERGING MAR KETS TOTAL RETURNFUNDINSTITU	P	05/05/17	06/09/22
e BLACKROCK HIGH YIELD BONDPORFOLIO INST ITUTIONAL	P	07/30/15	06/09/22
f DOUBLE LINE TOTALRET URN BONDFUNDCLASS I	P	06/10/15	06/09/22
g EMBECTA CORP COM	P	03/15/17	04/05/22
h GSK PLCSPONSORED ADR NEW	P	02/19/16	07/22/22
i GUGGENHEIM FLOATING RATE STRATEG IES FUNDINSTITUT	P	08/13/15	06/09/22
j HARDING LOEVNER INST ITUTIONAL EMERGING MARKETS C	P	10/27/15	06/09/22
k INTEGRITY DIVIDEND HARVEST FUND CLASS I	P	09/14/16	06/09/22
l JOHCM INTERNATIONALSELECT FUNDINSTITUTIONAL CLASS	P	04/07/16	06/09/22
m JANUS HENDERSON INTERNATIONALOPPORTUNIT IES FUND	P	11/17/15	06/09/22
n WARNER BROS DISCOVER Y INCCOM SER A	P	02/19/16	04/13/22
o INVESCO EQV EUROPEAN EQUITY FUNDCLASS Y	P	02/05/18	06/09/22

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 395,992.		398,642.	-2,650.
b 324,740.		220,000.	104,740.
c 609,649.		337,080.	272,569.
d 85,755.		125,805.	-40,050.
e 157,047.		172,366.	-15,319.
f 64,414.		74,350.	-9,936.
g 19.		13.	6.
h 8.		8.	0.
i 131,218.		136,919.	-5,701.
j 278,847.		234,806.	44,041.
k 71,761.		56,585.	15,176.
l 191,011.		150,207.	40,804.
m 91,180.		120,652.	-29,472.
n 3.		5.	-2.
o 237,478.		306,964.	-69,486.

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

(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	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			-2,650.
b			104,740.
c			272,569.
d			-40,050.
e			-15,319.
f			-9,936.
g			6.
h			0.
i			-5,701.
j			44,041.
k			15,176.
l			40,804.
m			-29,472.
n			-2.
o			-69,486.

2 Capital gain net income or (net capital loss) ..... { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	

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

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a ANHEUSER-BUSCH INBEV FIN INC GTO FXDRT NT 3.650%	P	08/11/17	02/09/22
b FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G08642	P	10/29/15	06/30/22
c FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G08651	P	11/10/15	06/30/22
d FEDERAL HOME LN MTG CORP PARTNCTFS POOL# G08667 "	P	10/28/15	06/30/22
e FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G08671	P	11/10/15	06/30/22
f FEDERAL HOME LN MTG CORP PARTNCTFS POOL# G08737 "	P	12/12/16	06/30/22
g FEDERAL HOME LN MTG CORP PARTNCTFS POOL# G08799 "	P	02/15/18	06/30/22
h FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G18684	P	07/23/18	06/30/22
i FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G60713	P	10/12/16	06/30/22
j FNMA GTD MTG PASS THRUCTFS POOL # AL6819 4.500% 1	P	10/29/15	06/30/22
k FNMA GTD MTG PASS THRUCTFS POOL # AL719 2 3.500%	P	11/16/15	06/30/22
l FNMA GTD MTG PASS THRUCTFS POOL # AL727 7 3.500%	P	10/29/15	06/30/22
m FNMA GTD MTG PASS THRUCTFS POOL # BC4714 3.000% 1	P	10/12/16	06/30/22
n FNMA GTD MTG PASS THRUCTFS POOL # MA289 6 3.500%	P	02/23/17	06/30/22
o FNMA GTD MTG PASS THRUCTFS POOL # MA3088 4.000% 0	P	02/15/18	06/30/22

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 21,411.		20,315.	1,096.
b 2,038.		2,041.	-3.
c 2,752.		2,914.	-162.
d 1,089.		1,136.	-47.
e 2,115.		2,180.	-65.
f 2,006.		1,985.	21.
g 1,003.		971.	32.
h 1,955.		1,937.	18.
i 2,712.		2,883.	-171.
j 2,953.		3,208.	-255.
k 1,258.		1,328.	-70.
l 644.		683.	-39.
m 3,480.		3,606.	-126.
n 1,985.		2,038.	-53.
o 1,067.		1,098.	-31.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
(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	
a			1,096.
b			-3.
c			-162.
d			-47.
e			-65.
f			21.
g			32.
h			18.
i			-171.
j			-255.
k			-70.
l			-39.
m			-126.
n			-53.
o			-31.

2 Capital gain net income or (net capital loss) ..... { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } .....	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 .....	3	

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

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a FNMA GTD MTG PASS THRUCTFS POOL # MA323 8 3.500%	P	02/15/18	06/30/22
b ISHARES INC MSCI JAPAN ETF NEW	P	11/28/15	06/09/22
c KINDER MORGAN ENERGY PARTNERS LP SR NT 3.950% 09/	P	11/28/15	06/01/22
d MICROSOFT CORP FXD R T NT 2.400% 02/06/2 2 B/E OT	P	02/01/17	01/06/22
e UNITED STATES TREAS NTS 2.000% 11/30/22 B/E OTO 1	P	01/11/18	11/30/22
f UNITED STATES TREAS NTS 1.750% 05/31/22 B/E OTO 0	P	08/11/17	05/31/22
g UNITED STATES TREAS NTS 1.875% 04/30/22 B/E OTO 0	P	06/30/17	05/02/22
h UNITEDHEALTH GROUP INCFXDRT NT 3.350% 07/15/22 B/	P	10/23/15	07/15/22
i FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G08642	P	10/29/15	06/30/22
j Flow through gains from K-1 investments - Rebel I	P	01/05/19	12/31/22
k Flow through losses from K-1 included form 990-T	P	01/05/19	12/31/22
l Capital Gains Dividends			
m			
n			
o			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 810.		808.	2.
b 113,445.		122,666.	-9,221.
c 17,000.		15,859.	1,141.
d 24,000.		23,967.	33.
e 47,000.		46,324.	676.
f 67,000.		67,000.	0.
g 23,000.		23,000.	0.
h 23,000.		23,000.	0.
i 1,365.		1,450.	-85.
j 451.			451.
k 2,159.			2,159.
l 1,065.			1,065.
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
(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	
a			2.
b			-9,221.
c			1,141.
d			33.
e			676.
f			0.
g			0.
h			0.
i			-85.
j			451.
k			2,159.
l			1,065.
m			
n			
o			

2 Capital gain net income or (net capital loss) ..... { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	301,086.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	N/A



THE LOUIS AND GLORIA FLANZER  
PHILANTHROPIC TRUST C/O Bristol Consult 14-6285967

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
Animal Network 3230 E BAY DR HOLMES BEACH, FL 34217	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	270.
Arcadia All-Florida Championship Rodeo, Inc. 2450 NE Roan St, ARCADIA, FL 34266	NONE	IRC SEC. 170(C) ORGANIZATION	General & Sponsorship for Championship Rodeo	225,000.
AVIVA Foundation 4521 PGA Blvd Palm Beach Gardens, FL 33418	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	173,682.
Beyond The Spectrum 7333 International Pl Lakewood Ranch, FL 34240	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	24,230.
Books for Kids Foundation 1441 Broadway New York, NY 10018	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	2,750.
Boys & Girls Club of Sarasota Manatee & DeSota Counties, Inc 18 School Ave Arcadia, FL 34266	NONE	IRC SEC. 170(C) ORGANIZATION	Louis & Gloria Flanzer Club - To enable young people to reach their full potential; Various Sponsorships	216,739.
Child Protection Center, Inc. 720 South Orange Ave SARASOTA, FL 34238	NONE	IRC SEC. 170(C) ORGANIZATION	General - Protection of Children	100,120.
Children First 1723 N. Orange Ave SARASOTA, FL 34234	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	71,467.
Civil Air Patrol - Venice Cadet Squadron 401 Venice City Hall Venice, FL 34285	NONE	IRC SEC. 170(C) ORGANIZATION	Contribute to construction of new campus	2,000.
Collier Community Abstinence Program PO Box 9488 Naples, FL 34101	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	63,595.
<b>Total from continuation sheets .....</b>				<b>11,764,518.</b>

THE LOUIS AND GLORIA FLANZER  
PHILANTHROPIC TRUST C/O Bristol Consult 14-6285967

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
Columbia University 622 West 113 St New York, NY 10025	NONE	IRC SEC. 170(C) ORGANIZATION	Endowment of Cardiology Department \$3,000,000; Rheumatology \$59,000; Scholar Fund \$50,000	3,109,000.
Coming Together against Cancer - CTAC Team TONY 920 John Ringling Causeway SARASOTA, FL 34236	NONE	IRC SEC. 170(C) ORGANIZATION	Educational - To educate donors and the community on advances in the fight against cancer	148,901.
Conservation Foundation Of The Gulf Coast 400 Palmetto Ave Osprey, FL 34229	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	185,211.
Easterseals Of Southwest Florida 350 Braden Ave SARASOTA, FL 34243	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	183,713.
Education Foundation Of Sarasota County 1960 Landings Blvd SARASOTA, FL 34231	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	66,700.
Englewood Meals On Wheels 400 Loma Linda Englewood, FL 34223	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	72,788.
Family Promise of South Sarasota County (FPSSC) 850 Cockrill St Venice, FL 34285	NONE	IRC SEC. 170(C) ORGANIZATION	General - Children & Families	114,371.
Feeding Empty Little Tummys 901 8th Ave Palmetto, FL 34221	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	18,157.
Forty Carrots Family Center 1500 South Tuttle Avenue SARASOTA, FL 34239	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	71,916.
Good Samaritan Pharmacy & Health Services 2502 TAMIAMI TRL N NOKOMIS, FL 34275	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	47,130.
<b>Total from continuation sheets .....</b>				

THE LOUIS AND GLORIA FLANZER  
PHILANTHROPIC TRUST C/O Bristol Consult 14-6285967

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
Goodwill Manasota 2705 51st Ave E Bradenton, FL 34203	NONE	IRC SEC. 170(C) ORGANIZATION	General - Matching	73,634.
Guardian Angels Of SW Florida 1429 60th Ave Bradenton, FL 34207	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	40,407.
Habitat For Humanity Sarasota 2095 17th Street SARASOTA, FL 34234	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	81,544.
Hershorin Schiff Community Day School 335 Wilkinson Rd SARASOTA, FL 34233	NONE	IRC SEC. 170(C) ORGANIZATION	General - Education	65,658.
HOPE Family Services 1215 8th Ave W Bradenton, FL 34205	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	57,270.
Instride Therapy 1629 Ranch Road Nokomis, FL 34275	NONE	IRC SEC. 170(C) ORGANIZATION	General - Physical Occupational Speech Therapy	29,700.
JEWISH FAMILY & CHILDREN SERVICES OF THE SUNCOAST, INC 2688 FRUITVILLE ROAD SARASOTA, FL 34237	NONE	IRC SEC. 170(C) ORGANIZATION	PUBLIC CHARITIES - JFCS Alzheimer's & Caregiver Program 5th year of 5 year pledge	100,316.
JoshProvides Epilepsy Assistance Foundation Inc. 5428 Sundew Drive Sarasota, FL 34238	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	46,016.
Laurel Civic Assoc 509 Collins Rd. Laurel, FL 34272	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	40,680.
Legal Aid Manasota 749 Shamrock Blvd Venice, FL 34293	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	92,794.
<b>Total from continuation sheets .....</b>				

THE LOUIS AND GLORIA FLANZER  
PHILANTHROPIC TRUST C/O Bristol Consult 14-6285967

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
Lemur Conservation Foundation 42500 73rd Ave E Myakka City, FL 34251	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	67,393.
Lighthouse Vision Loss Education Center 7318 N Tamiami Trail SARASOTA, FL 34243	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	18,460.
Mayors' Feed The Hungry Program Inc. PO Box 1992 SARASOTA, FL 34230	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	141,726.
Mothers helping Mothers 5933 N Washington Blvd SARASOTA, FL 34243	NONE	IRC SEC. 170(C) ORGANIZATION	General - Children & Family Support	153,435.
Nates Honor Animal Rescue 4951 Lorraine Rd Bradenton, FL 34211	NONE	IRC SEC. 170(C) ORGANIZATION	General - Journey Home Capital campaign	115,474.
Neuro Challenge Foundation For Parkinson's 5880 Rand Blvd SARASOTA, FL 34238	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	151,047.
North Port Meals On Wheels 13624 TAMIAMI TRL NORTH PORT, FL 34287	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	40,380.
Nutrition Initiative Of Manatee 1002 Manatee Ave Bradenton, FL 34208	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	44,588.
Operation Warrior Resolution 242 S. Washington Blvd. #130 SARASOTA, FL 34235	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	104,370.
CORE SRQ - Our Y - CORE SRQ 1075 S. Euclid Ave. SARASOTA, FL 34237	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	204,049.
<b>Total from continuation sheets .....</b>				

THE LOUIS AND GLORIA FLANZER  
PHILANTHROPIC TRUST C/O Bristol Consult 14-6285967

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
Pace Center For Girls Bradenton 3508 26th ST Bradenton, FL 34205	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	116,700.
The Haven 4405 DeSoto Road SARASOTA, FL 34235	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	98,930.
Resilient Retreat 1207 Sarasota Center Blvd Sarasota, FL 34240	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	50,280.
Rowlett Academy 3500 9th St Bradenton, FL 34208	NONE	IRC SEC. 170(C) ORGANIZATION	General - Educational	31,525.
Safe Children Coalition, Inc. 1500 INDEPENDENCE BLVD SARASOTA, FL 34234	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	47,063.
Samaritan Counseling Of The Gulf Coast 3224 Bee Ridge Rd SARASOTA, FL 34239	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	151,360.
Sarasota Medical Pregnancy Center 1762 Hawthorne St Ste 5 SARASOTA, FL 34239	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	423,129.
Sarasota Memorial Health Care Foundation 1515 S Osprey Ave Ste B4 SARASOTA, FL 34239	NONE	IRC SEC. 170(C) ORGANIZATION	Hospital Equipment (SMHF Cancer program ER, ICU and general)	6,220.
Sarasota Military Academy 801 N Orange Ave SARASOTA, FL 34236	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	138,310.
Satchel's Last Resort Rescue And Sanctuary 8101 COASH ROAD SARASOTA, FL 34241	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	236,137.
<b>Total from continuation sheets .....</b>				

THE LOUIS AND GLORIA FLANZER  
PHILANTHROPIC TRUST C/O Bristol Consult 14-6285967

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
Cat Depot 2542 17th Street SARASOTA, FL 34234	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	70,161.
Second Chance last opportunity 933 Dr. Martin Luther King Jr. Way SARASOTA, FL 34234	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	65,070.
Second Heart Home PO Box 3886 SARASOTA, FL 34230	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	124,095.
Senior Friendship Centers 1888 Brother Geenen Way SARASOTA, FL 34241	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	59,180.
Sertoma Club Of Greater Sarasota 2750 Stickney Pt Road SARASOTA, FL 34231	NONE	IRC SEC. 170(C) ORGANIZATION	General & Kids Speech language programs	90,398.
SOAR Learning Center 2731 N Links Ave SARASOTA, FL 34234	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	24,550.
South County Food Pantry 121 Warfield Ave Venice, FL 34285	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	259,696.
SPARCC 1531 S Tamiami Trail suite 702-a Venice, FL 34285	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	136,861.
Still Point Mission 1608 14th Street Bradenton, FL 34206	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	113,896.
Take Stock In Children - Sarasota & Manatee Counties 1400 1st Ave Palmetto, FL 34221	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	76,320.
<b>Total from continuation sheets .....</b>				

THE LOUIS AND GLORIA FLANZER  
PHILANTHROPIC TRUST C/O Bristol Consult 14-6285967

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
The Blessing Bags Project 1802 14th St Bradenton, FL 34101	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	104,794.
Turning Points 701 17th Ave Bradenton, FL 34205	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	114,896.
Sarasota Manatee Assoc For Riding Therapy 4640 County Road 675 Bradenton, FL 34211	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	59,387.
UF - University of Florida Foundation PO Box 14425 Gainesville, FL 32604	NONE	IRC SEC. 170(C) ORGANIZATION	General, USF Foundation, Aortic Disease Center	144,000.
Various Suncoast Charities 1843 Floyd Street SARASOTA, FL 34234	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	634,398.
Venice Challenger Baseball 201 Field Ave Venice, FL 34285	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	9,450.
Vintage Paws Sanctuary 7950 State Road SARASOTA, FL 34241	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	70,576.
Women's Resource Center of Manatee 1926 Manatee Avenue Bradenton, FL 34205	NONE	IRC SEC. 170(C) ORGANIZATION	Educational - To engage, educate, enrich and empower women	73,013.
Humane Society Of Sarasota County 2331 15th St SARASOTA, FL 34237	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	207,118.
St. Francis Animal Rescue Of Venice 1925 Tamiami Trl S Venice, FL 34293	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	182,435.
<b>Total from continuation sheets .....</b>				

THE LOUIS AND GLORIA FLANZER  
PHILANTHROPIC TRUST C/O Bristol Consult 14-6285967

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
St. Joseph's Food Pantry Of Bradenton 2704 33rd Ave W Bradenton, FL 34205	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	100,510.
Farmhouse Animal Sanctuary 2807 S. Duette Rd. Myakka City, FL 34251	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	57,793.
Suncoast Humane Society 6781 San Casa Dr Englewood, FL 34224	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	51,634.
Humane Society Of Manatee County 2415 Tamiami Trl Bradenton, FL 34205	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	49,690.
JAJF P.O. Box 20237 Atlanta, FL 30325	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	47,300.
Children's Guardian Fund 1750 17th St SARASOTA, FL 34237	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	46,880.
EARS Animal Rescue 1644 Altamont Ln Odessa, FL 33556	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	45,050.
Blaze Of Hope 16237 Winburn Dr SARASOTA, FL 34240-9214	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	45,025.
Girl Scouts Of The Gulfcoast 4780 Cattlemen Rd SARASOTA, FL 34233	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	44,855.
Conquistador Historical Foundation 910 3rd Ave W Bradenton, FL 34205	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	44,350.
<b>Total from continuation sheets .....</b>				



THE LOUIS AND GLORIA FLANZER  
PHILANTHROPIC TRUST C/O Bristol Consult 14-6285967

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
Suncoast Waterkeeper, Inc PO Box 1028 SARASOTA, FL 34230	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	42,404.
Selah Freedom PO Box 1801 SARASOTA, FL 34230	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	36,170.
Manatee County Habitat For Humanity 5108 15th St E Bradenton, FL 34203	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	34,642.
The Florida Center For Early Childhood 4620 17th St SARASOTA, FL 34235	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	34,280.
Visible Men Academy 1003 63rd Ave E Bradenton, FL 34203	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	32,790.
Animal Rescue Coalition 6320 Tower Ln SARASOTA, FL 34240	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	31,942.
Sertoma Club Of Venice 800 Gulf Coast Blvd Venice, FL 34285	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	31,010.
Jewish Federation Of Sarasota Manatee 580 Mcintosh Rd SARASOTA, FL 34232	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	30,332.
The Bishop Museum Of Science & Nature 201 10th St W Bradenton, FL 34205	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	30,000.
Longboat Key Center For Healthy Living 546 Bay Isles Road Longboat Key, FL 34228	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	29,920.
<b>Total from continuation sheets .....</b>				

THE LOUIS AND GLORIA FLANZER  
PHILANTHROPIC TRUST C/O Bristol Consult 14-6285967

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
Sarasota County Teen Court 101 S Washington Blvd SARASOTA, FL 34236	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	29,036.
Meals On Wheels Sarasota 421 N Lime Ave SARASOTA, FL 34237	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	29,790.
Crowley Museum & Nature Center 16405 Myakka Rd SARASOTA, FL 34240	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	28,620.
Big Brothers & Big Sisters - Sarasota 2831 Ringling Blvd, SARASOTA, FL 34230	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	28,340.
Literacy Council Of Manatee 3501 Cortez Rd W Ste 6 Bradenton, FL 34210	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	28,114.
SRQ Vets 5824 Bee Ridge Rd #443 SARASOTA, FL 34233	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	25,467.
Harvest House 3650 17th St SARASOTA, FL 34235	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	24,700.
Boys & Girls Club Of Manatee County 5236 30th St W Fl 2 Bradenton, FL 34207	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	24,650.
Angel Land Food Forest 50 Stratford Rd Englewood, FL 34223	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	24,448.
Sertoma Kids Speech Language Therapy Clinic 2750 Stickney Pt Road SARASOTA, FL 34231	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	23,736.
<b>Total from continuation sheets .....</b>				

THE LOUIS AND GLORIA FLANZER  
 PHILANTHROPIC TRUST C/O Bristol Consult 14-6285967

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
Streets Of Paradise 734 Central Ave SARASOTA, FL 34236	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	22,691.
Suncoast School For Innovative Studies 845 S School Ave SARASOTA, FL 34237	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	21,442.
Embracing Our Differences PO BOX 2559 SARASOTA, FL 34230	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	21,372.
Tidewell Hospice 3355 26th St W Bradenton, FL 34205	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	20,114.
Salvation Army Of Sarasota 1400 10th Street SARASOTA, FL 34236	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	20,050.
ALSO Youth Inc. 1470 Blvd Of The Arts SARASOTA, FL 34236	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	19,926.
The Roskamp Institute 2040 Whitfield Ave SARASOTA, FL 34243	NONE	IRC SEC. 170(C) ORGANIZATION	General & Matching	18,816.
<b>Total from continuation sheets .....</b>				

**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

Name of the organization <b>THE LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST C/O Bristol Consult</b>	Employer identification number <b>14-6285967</b>
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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  501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- 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 ..... \$ \_\_\_\_\_

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

Name of organization <b>THE LOUIS AND GLORIA FLANZER                  PHILANTHROPIC TRUST C/O Bristol Consult</b>	<b>Employer identification number</b> 14-6285967
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Estate of Gloria Flanzer <hr/> 1266 FIRST STREET <hr/> SARASOTA, FL 34236	\$ 5,771,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Other & Through matching programs <hr/> 1266 FIRST STREET <hr/> SARASOTA, FL 34236	\$ 4,600,465.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	ERIC KAPLAN <hr/> 1266 FIRST STREET, SUITE 1 <hr/> SARASOTA, FL 34236	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	R. Dean Hautamaki <hr/> 1266 FIRST STREET, SUITE 1 <hr/> SARASOTA, FL 34236	\$ 60,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization <b>THE LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST C/O Bristol Consult</b>	<b>Employer identification number</b>  14-6285967
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization <b>THE LOUIS AND GLORIA FLANZER                  PHILANTHROPIC TRUST C/O Bristol Consult</b>	Employer identification number 14-6285967
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) \$ \_\_\_\_\_  
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	

# Underpayment of Estimated Tax by Corporations

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

**2022**

Go to [www.irs.gov/Form2220](http://www.irs.gov/Form2220) for instructions and the latest information.

Name <b>THE LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST C/O Bristol Consult</b>	Employer identification number <b>14-6285967</b>
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**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 estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

<b>Part I Required Annual Payment</b>			
1 Total tax (see instructions) .....		1	14,257.
2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....	2a		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	2b		
c Credit for federal tax paid on fuels (see instructions) .....	2c		
d Total. Add lines 2a through 2c .....		2d	
3 Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty .....		3	14,257.
4 Enter the tax shown on the corporation's 2021 income tax return. See instructions. <b>Caution:</b> If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 .....		4	8,173.
5 <b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....		5	8,173.

**Part II Reasons for Filing** - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

6  The corporation is using the adjusted seasonal installment method.

7  The corporation is using the annualized income installment method.

8  The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

<b>Part III Figuring the Underpayment</b>			(a)	(b)	(c)	(d)
9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th ( <b>Form 990-PF filers:</b> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....	9		05/15/22	06/15/22	09/15/22	12/15/22
10 <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If 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		2,043.	2,044.	2,043.	2,043.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions .....	11		38,827.			
<b>Complete lines 12 through 18 of one column before going to the next column.</b>						
12 Enter amount, if any, from line 18 of the preceding column .....	12			36,784.	34,740.	32,697.
13 Add lines 11 and 12 .....	13			36,784.	34,740.	32,697.
14 Add amounts on lines 16 and 17 of the preceding column .....	14					
15 Subtract line 14 from line 13. If zero or less, enter -0- .....	15		38,827.	36,784.	34,740.	32,697.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....	16			0.	0.	
17 <b>Underpayment.</b> 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					
18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....	18		36,784.	34,740.	32,697.	

Go to **Part IV** on page 2 to figure the penalty. Do not go to **Part IV** if there are no entries on line 17 - no penalty is owed.



**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. <b>(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.)</b> See instructions	<b>19</b>			
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19	<b>20</b>			
<b>21</b> Number of days on line 20 after 4/15/2022 and before 7/1/2022	<b>21</b>			
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21}}{365} \times 4\%$ (0.04)	<b>22</b> \$	\$	\$	\$
<b>23</b> Number of days on line 20 after 6/30/2022 and before 10/1/2022	<b>23</b>			
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23}}{365} \times 5\%$ (0.05)	<b>24</b> \$	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2022 and before 1/1/2023	<b>25</b>			
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25}}{365} \times 6\%$ (0.06)	<b>26</b> \$	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2022 and before 4/1/2023	<b>27</b>			
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27}}{365} \times 7\%$ (0.07)	<b>28</b> \$	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2023 and before 7/1/2023	<b>29</b>			
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29}}{365} \times \%$	<b>30</b> \$	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2023 and before 10/1/2023	<b>31</b>			
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31}}{365} \times \%$	<b>32</b> \$	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2023 and before 1/1/2024	<b>33</b>			
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33}}{365} \times \%$	<b>34</b> \$	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2023 and before 3/16/2024	<b>35</b>			
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35}}{365} \times \%$	<b>36</b> \$	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36	<b>37</b> \$	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	<b>38</b>			\$ 0.

\* 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](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.

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Form 990-PF                      Gain or (Loss) from Sale of Assets                      Statement    1

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(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
UNITED STATES TREAS NTS 2.750% 05/31123B/E OTO 05/31/18	395,992.	398,642.	0.	0.	-2,650.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
AMG GW&KSMALUMIO CAP FUNDCLASS I	324,740.	220,000.	0.	0.	104,740.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
EDGEWOOD GROWTHFUND INSTITUTIONAL CLASS	609,649.	337,080.	0.	0.	272,569.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
ASHMORE EMERGING MAR KETS TOTAL RETURNFUNDINSTITUTIONAL CLA	85,755.	125,805.	0.	0.	-40,050.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
BLACKROCK HIGH YIELD BONDPORFOLIO INST ITUTIONAL CLASS	157,047.	172,366.	0.	0.	-15,319.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
DOUBLE LINE TOTALRET URN BONDFUNDCLASS I	64,414.	74,350.	0.	0.	-9,936.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
EMBECTA CORP COM	19.	13.	0.	0.	6.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Manner Acquired Deprec.	(f) Date Acquired Gain or Loss	Date Sold
GSK PLCSPONSORED ADR NEW	8.	8.	0.	Purchased	0.	07/22/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Manner Acquired Deprec.	(f) Date Acquired Gain or Loss	Date Sold
GUGGENHEIM FLOATING RATE STRATEG IES FUNDINSTITUTIONAL CLASS	131,218.	136,919.	0.	Purchased	0.	06/09/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Manner Acquired Deprec.	(f) Date Acquired Gain or Loss	Date Sold
HARDING LOEVNER INST ITUTIONAL EMERGING MARKETS CLASS I	278,847.	234,806.	0.	Purchased	0.	06/09/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Manner Acquired Deprec.	(f) Date Acquired Gain or Loss	Date Sold
INTEGRITY DIVIDEND HARVEST FUND CLASS I	71,761.	56,585.	0.	Purchased	0.	06/09/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	Manner Acquired	Date Acquired	Date Sold
JOHCM INTERNATIONALSELECT FUNDINSTITUTIONAL CLASS	191,011.	150,207.	0.	0.	40,804.	Purchased	04/07/16	06/09/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	Manner Acquired	Date Acquired	Date Sold
JANUS HENDERSON INTERNATIONALOPPORTUNIT IES FUND CLASS I	91,180.	120,652.	0.	0.	-29,472.	Purchased	11/17/15	06/09/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	Manner Acquired	Date Acquired	Date Sold
WARNER BROS DISCOVER Y INCCOM SER A	3.	5.	0.	0.	-2.	Purchased	02/19/16	04/13/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	Manner Acquired	Date Acquired	Date Sold
INVESCO EQV EUROPEAN EQUITY FUNDCLASS Y	237,478.	306,964.	0.	0.	-69,486.	Purchased	02/05/18	06/09/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
ANHEUSER-BUSCH INBEV FIN INC GTO FXDRT NT 3.650% 02/01126	21,411.	20,315.	0.	0.	1,096.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G08642 "GOLD" 4.	2,038.	2,041.	0.	0.	-3.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G08651 "GOLD" 4.	2,752.	2,914.	0.	0.	-162.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
FEDERAL HOME LN MTG CORP PARTNCTFS POOL# G08667 "GOLD" 3.	1,089.	1,136.	0.	0.	-47.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
(a) Description of Property				Manner Acquired	Date Acquired	Date Sold
FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G08671 "GOLD" 3.	2,115.	2,180.	0.	0.	-65.	Purchased 11/10/15 06/30/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
(a) Description of Property				Manner Acquired	Date Acquired	Date Sold
FEDERAL HOME LN MTG CORP PARTNCTFS POOL# G08737 "GOLD" 3.	2,006.	1,985.	0.	0.	21.	Purchased 12/12/16 06/30/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
(a) Description of Property				Manner Acquired	Date Acquired	Date Sold
FEDERAL HOME LN MTG CORP PARTNCTFS POOL# G08799 "GOLD" 3.	1,003.	971.	0.	0.	32.	Purchased 02/15/18 06/30/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
(a) Description of Property				Manner Acquired	Date Acquired	Date Sold
FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G18684 "GOLD" 3.	1,955.	1,937.	0.	0.	18.	Purchased 07/23/18 06/30/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
(a) Description of Property				Manner Acquired	Date Acquired	Date Sold
FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G60713 "GOLD" 3.	2,712.	2,883.	0.	0.	-171.	Purchased 10/12/16 06/30/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
(a) Description of Property				Manner Acquired	Date Acquired	Date Sold
FNMA GTD MTG PASS THRUCTFS POOL # AL6819 4.500% 12/01/44 B	2,953.	3,208.	0.	0.	-255.	Purchased 10/29/15 06/30/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
(a) Description of Property				Manner Acquired	Date Acquired	Date Sold
FNMA GTD MTG PASS THRUCTFS POOL # AL719 2 3.500% 01/01/28 B	1,258.	1,328.	0.	0.	-70.	Purchased 11/16/15 06/30/22

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss	
(a) Description of Property				Manner Acquired	Date Acquired	Date Sold
FNMA GTD MTG PASS THRUCTFS POOL # AL727 7 3.500% 07101128 B	644.	683.	0.	0.	-39.	Purchased 10/29/15 06/30/22



(a) Description of Property	Manner Acquired	Date Acquired	Date Sold
FNMA GTD MTG PASS THRUCTFS POOL # BC4714 3.000% 10/01/46 B	Purchased	10/12/16	06/30/22
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.
3,480.	3,606.	0.	(f) Gain or Loss -126.

(a) Description of Property	Manner Acquired	Date Acquired	Date Sold
FNMA GTD MTG PASS THRUCTFS POOL # MA289 6 3.500% 02/01/47 B	Purchased	02/23/17	06/30/22
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.
1,985.	2,038.	0.	(f) Gain or Loss -53.

(a) Description of Property	Manner Acquired	Date Acquired	Date Sold
FNMA GTD MTG PASS THRUCTFS POOL # MA3088 4.000% 08/01/47 B	Purchased	02/15/18	06/30/22
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.
1,067.	1,098.	0.	(f) Gain or Loss -31.

(a) Description of Property	Manner Acquired	Date Acquired	Date Sold
FNMA GTD MTG PASS THRUCTFS POOL # MA323 8 3.500% 01/01/48 B	Purchased	02/15/18	06/30/22
(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.
810.	808.	0.	(f) Gain or Loss 2.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
ISHARES INC MSCI JAPAN ETF NEW	113,445.	122,666.	0.	0.	-9,221.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
KINDER MORGAN ENERGY PARTNERS LP SR NT 3.950% 09/01/22 B/E	17,000.	15,859.	0.	0.	1,141.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
MICROSOFT CORP FXD R T NT 2.400% 02/06/2 2 B/E OTO 02/06/17 C REDEMPTION	24,000.	23,967.	0.	0.	33.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
UNITED STATES TREAS NTS 2.000% 11/30/22 B/E OTO 11/30/15	47,000.	46,324.	0.	0.	676.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss												
<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;"></td> <td style="text-align: center;">Manner Acquired</td> <td style="text-align: center;">Date Acquired</td> <td style="text-align: center;">Date Sold</td> <td colspan="2"></td> </tr> <tr> <td>UNITED STATES TREAS NTS 1.750% 05/31/22 B/E OTO 05/31/17</td> <td style="text-align: center;">Purchased</td> <td style="text-align: center;">08/11/17</td> <td style="text-align: center;">05/31/22</td> <td colspan="2"></td> </tr> </table>		Manner Acquired	Date Acquired	Date Sold			UNITED STATES TREAS NTS 1.750% 05/31/22 B/E OTO 05/31/17	Purchased	08/11/17	05/31/22			67,000.	67,000.	0.	0.	0.
	Manner Acquired	Date Acquired	Date Sold														
UNITED STATES TREAS NTS 1.750% 05/31/22 B/E OTO 05/31/17	Purchased	08/11/17	05/31/22														

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss												
<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;"></td> <td style="text-align: center;">Manner Acquired</td> <td style="text-align: center;">Date Acquired</td> <td style="text-align: center;">Date Sold</td> <td colspan="2"></td> </tr> <tr> <td>UNITED STATES TREAS NTS 1.875% 04/30/22 B/E OTO 04/30/17</td> <td style="text-align: center;">Purchased</td> <td style="text-align: center;">06/30/17</td> <td style="text-align: center;">05/02/22</td> <td colspan="2"></td> </tr> </table>		Manner Acquired	Date Acquired	Date Sold			UNITED STATES TREAS NTS 1.875% 04/30/22 B/E OTO 04/30/17	Purchased	06/30/17	05/02/22			23,000.	23,000.	0.	0.	0.
	Manner Acquired	Date Acquired	Date Sold														
UNITED STATES TREAS NTS 1.875% 04/30/22 B/E OTO 04/30/17	Purchased	06/30/17	05/02/22														

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss												
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	Manner Acquired	Date Acquired	Date Sold														
UNITEDHEALTH GROUP INCFXDRT NT 3.350% 07/15/22 B/E OTO 07 REDEMPTION	Purchased	10/23/15	07/15/22														

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss												
<table border="0" style="width: 100%;"> <tr> <td style="width: 60%;"></td> <td style="text-align: center;">Manner Acquired</td> <td style="text-align: center;">Date Acquired</td> <td style="text-align: center;">Date Sold</td> <td colspan="2"></td> </tr> <tr> <td>FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G08642 "GOLD" 4.</td> <td style="text-align: center;">Purchased</td> <td style="text-align: center;">10/29/15</td> <td style="text-align: center;">06/30/22</td> <td colspan="2"></td> </tr> </table>		Manner Acquired	Date Acquired	Date Sold			FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G08642 "GOLD" 4.	Purchased	10/29/15	06/30/22			1,365.	1,450.	0.	0.	-85.
	Manner Acquired	Date Acquired	Date Sold														
FEDERAL HOME LN MTG CORP PARTNCTFS POOL # G08642 "GOLD" 4.	Purchased	10/29/15	06/30/22														

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
Flow through gains from K-1 investments - Rebel Industries	451.	0.	0.	0.	451.

(a) Description of Property	(b) Gross Sales Price	(c) Cost or Other Basis	(d) Expense of Sale	(e) Deprec.	(f) Gain or Loss
Flow through losses from K-1 included form 990-T - Rebel Industries	2,159.	2,159.	0.	0.	0.

Capital Gains Dividends from Part IV	1,065.
Total to Form 990-PF, Part I, line 6a	298,927.

Form 990-PF Interest on Savings and Temporary Cash Investments Statement 2

Source	(a) Revenue Per Books	(b) Net Investment Income	(c) Adjusted Net Income
NYPB&T - 76-5520480-3	2,086.	2,086.	
Total to Part I, line 3	2,086.	2,086.	

Form 990-PF	Dividends and Interest from Securities				Statement	3
Source	Gross Amount	Capital Gains Dividends	(a) Revenue Per Books	(b) Net Investment Income	(c) Adjusted Net Income	
From K-1 Investments	12,258.	0.	12,258.	12,258.		
NYPB&T - PERSHING - 001162 Dividends	67,073.	1,065.	66,008.	66,008.		
NYPB&T - PERSHING - 001162 Interest	65,182.	0.	65,182.	65,182.		
Promissory Note-KJ Greentree	48,000.	0.	48,000.	48,000.		
To Part I, line 4	192,513.	1,065.	191,448.	191,448.		

Form 990-PF	Other Income			Statement	4
Description	(a) Revenue Per Books	(b) Net Investment Income	(c) Adjusted Net Income		
From K-1 Investments	729,283.	729,283.			
From K-1 Investments	-22,136.	-22,136.			
From K-1 Investments - loss included in 990-T	0.	-80,433.			
Total to Form 990-PF, Part I, line 11	707,147.	626,714.			

Form 990-PF	Legal Fees			Statement	5
Description	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Legal & Other professional fees	4,113.	1,028.		3,085.	
To Fm 990-PF, Pg 1, ln 16a	4,113.	1,028.		3,085.	

Form 990-PF	Accounting Fees			Statement 6
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Tax, Accounting & Auditing	141,439.	35,360.		106,079.
To Form 990-PF, Pg 1, ln 16b	141,439.	35,360.		106,079.

Form 990-PF	Taxes			Statement 7
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
FEDERAL EXCISE TAX NYPB&T - Pershing - 001162	40,020.	0.		0.
Foreign Tax	1,258.	1,258.		0.
To Form 990-PF, Pg 1, ln 18	41,278.	1,258.		0.

Form 990-PF	Other Expenses			Statement 8
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Investment expenses Expense flow-through K-1	35,625.	35,625.		0.
Investments	22,364.	22,364.		0.
Other Administrative Insurance	50,894. 4,353.	0. 0.		50,894. 4,353.
To Form 990-PF, Pg 1, ln 23	113,236.	57,989.		55,247.

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Form 990-PF U.S. and State/City Government Obligations Statement 9

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Description	U.S. Gov't	Other Gov't	Book Value	Fair Market Value
US Government Notes & Bonds -	X		924,503.	900,193.
GNMA/FNMA/FHLC Pools	X		132,292.	119,114.
225,000 MUNICIPAL BOND - NY NY GO 5.39% 12/01/24		X	232,944.	226,523.
Total U.S. Government Obligations			1,056,795.	1,019,307.
Total State and Municipal Government Obligations			232,944.	226,523.
Total to Form 990-PF, Part II, line 10a			1,289,739.	1,245,830.

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Form 990-PF Corporate Stock Statement 10

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Description	Book Value	Fair Market Value
467 ABBOTT LABS	29,103.	51,272.
529 ABBVIE INC	34,316.	85,492.
1,060 ALPHABET INC. CL A	46,016.	93,524.
361 ALTRIA GROUP INC	21,898.	16,501.
640 AMAZON.COM INC	33,702.	53,760.
104 AMERICAN ELEC PWR INC	6,606.	9,875.
198 AMERICAN WATER WORKS	15,383.	30,179.
149 AMERIPRISE FINANCIAL INC	20,039.	46,394.
300 AMETEK INC	17,139.	41,916.
1,248 APPLE INC	34,093.	162,153.
213 ARAMARK	9,157.	8,805.
695 AT & T INC	20,060.	12,795.
130 AVERY DENNISON CORP	15,198.	23,530.
1,387 BANK OF AMERICA CORP	25,107.	45,937.
113 BECTON DICKINSON	21,253.	28,736.
736 BIO-TECHNE CORP	28,708.	61,000.
98 BOEING CO	20,000.	18,668.
165 CHEVRON CORP	15,956.	29,616.
185 CIGNA CORP	29,677.	61,298.
578 COCA COLA CO	25,191.	36,767.
307 COMCAST CORP-CL A	11,374.	10,736.
405 CONAGRA BRANDS, INC.	16,313.	15,674.
104 COSTCO WHOLESALE CORP NEW	18,293.	47,476.
300 DOMINION ENERGY RESOURCES INC	22,516.	18,396.
109 DOW INC; DOWDUPONT INC	7,065.	5,493.
237 DUKE ENERGY CORP	18,213.	24,409.
139 ELECTRONIC ARTS INC	16,497.	16,983.
216 EOG RES INC	18,892.	27,976.

90 EXPEDIA INC	11,063.	7,884.
239 EXXON MOBIL CORP	19,722.	26,362.
90 GENERAL MILLS INC	5,288.	7,547.
449 HALLIBURTON CO	22,509.	17,668.
134 HOME DEPOT INC	20,720.	42,325.
134 HONEYWELL INTERNATIONAL	14,742.	28,716.
433 INTERCONTINENTAL EXCHANGE INC	28,837.	44,421.
457 JP MORGAN CHASE & CO	42,944.	61,284.
114 KIMBERLY CLARK CORP	15,004.	15,476.
104 KRAFT HEINZ CO	6,541.	4,234.
130 LAUDER ESTEE COS CLA	12,325.	32,254.
186 MARRIOTT INTL INC	18,222.	27,694.
260 MICROCHIP TECHNOLOGY INC	22,900.	36,530.
621 MICROSOFT CORP	38,224.	148,928.
372 NEXTERA ENERGY INC.	12,639.	31,099.
158 NORFOLK SOUTHERN CORP	19,298.	38,934.
81 NVIDIA CORP	11,635.	47,349.
58 O REILLY AUTOMOTIVE INC	14,916.	48,954.
244 OCCIDENTAL PETE CORP	14,521.	15,370.
64 PARKER HANNIFIN CORP	10,354.	18,624.
214 PEPSICO INC	22,995.	38,661.
262 PHILIP MORRIS INTERNATIONAL	24,586.	26,517.
123 PHILLIPS 66	11,193.	12,802.
371 PPL CORP	13,626.	10,841.
227 PROCTER & GAMBLE CO	18,665.	34,404.
137 PUBLIC SERVICE ENTERPRISE	6,069.	8,394.
85 ROPER TECHNOLOGIES INC	19,066.	36,728.
154 SALESFORCE.COM	15,202.	20,419.
316 SOUTHERN COMPANY	15,591.	22,566.
73 STANLEY BLACK & DECKER INC	9,693.	5,484.
73 TELEFLEX INC COM	19,205.	18,223.
136 THERMO FISHER SCIENTIFIC INC	23,864.	74,894.
76 UNITED PARCEL SERVICE CL B	8,065.	13,212.
632 VERIZON COMMUNICATIONS	32,110.	24,895.
332 VISA INC - CL A	28,041.	68,976.
186 DISNEY CO	20,591.	16,160.
374 ZIONS BANCORPORATION	19,859.	18,386.
594 BCE INC	26,392.	26,106.
174 CANADIAN IMPERIAL BANK OF COMMERCE	15,183.	14,077.
182 CHUBB LTD	25,198.	40,149.
111 INGERSOLL-RAND PLC	2,331.	5,800.
137 TE CONNECTIVITY LIMITED	13,077.	15,728.
511 ASTRAZENECA PLC SPONS	17,203.	34,646.
390 BP PLC SPONS ADR	12,354.	13,623.
467 GLAXO SMITHKLINE SPONS ADR	19,110.	16,410.
359 NATIONAL GRID	27,103.	21,655.
601 SANOFI SPONS ADR	23,676.	29,106.
334 TOTAL ENERGIES SA SPONS ADR	16,561.	20,735.
932 VODAFONE GROUP SPONS ADAR	28,640.	9,432.
215 CROWN CASTLE INTL CORP REIT	20,485.	29,163.
296 PROLOGIS INC REIT	15,667.	33,368.
73 PUBLIC STORAGE INC REIT	16,829.	20,454.
106 REALTY INCOME CORP REIT	6,086.	6,724.
123 VENTAS INC REIT	6,649.	5,541.



149 WELLTOWER INC REIT	9,172.	9,767.
252 Bristol Meyers Squib	14,215.	18,131.
109 Corteva Inc	1,588.	6,407.
109 Dupont	13,106.	7,481.
273 Fidelity National Info Systems	36,593.	18,524.
13 Garrett Motion Inc	153.	99.
21 RESIDEO TECH	394.	345.
126 TRANE TECH	8,050.	21,179.
30 OCCIDENTAL PETE WTS	149.	1,237.
183 CONOCOPHILLIPS COM	16,855.	21,594.
15 Sh Dollar Gen Corp New; 300 Shares	1,058.	3,694.
1 EcoLab Inc; 1 share	226.	146.
Orion Office REIT; 10 units	206.	85.
Digital Rlty TR Inc REIT; 130 Units	13,657.	13,035.
22 ENBECTA CORP	486.	556.
584 HALEON PLC ADR	4,209.	4,672.
168 WARNER BROS DISCOVERY	6,151.	1,593.
Total to Form 990-PF, Part II, line 10b	1,687,402.	2,709,838.

Form 990-PF	Corporate Bonds	Statement 11
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Description	Book Value	Fair Market Value
10,000 ABBOTT LABS	9,873.	9,747.
20,000 APPLE INC	19,342.	19,840.
19,000 WALMART INC	19,010.	18,873.
28,000 AMAZON COM INC	26,981.	27,143.
28,000 WELLS FARGO	27,888.	27,169.
15,000 BANK AMER CORP FR	14,468.	13,863.
16,000 JP MORGAN CHASE BANK NA SR	16,082.	14,801.
15,000 CITIGROUP INC	15,051.	13,810.
250,000 PUBLIC SERVICE ELEC GAS \$250	247,415.	242,465.
250,000 COMCAST 3.375% 2/15/25	249,232.	242,520.
250,000 CONOCOPHILLIPS 2.4% 3/7/25	241,392.	237,630.
250,000 EBAY INC 1.9% 3/11/25	235,931.	234,153.
250,000 EXXON MOBIL 2.992% 3/19/25	246,726.	241,048.
250,000 UNITED PARCEL SVC 3.9% 4/1/25	251,894.	246,215.
250,000 COMPASS BK BIRM 3.875% 4/10/25	248,385.	243,698.
250,000 CIGNA CORP 3.25% 4/15/25	243,535.	240,930.
250,000 LOWES COS 4% 4/15/25	250,568.	245,300.
200,000 REALTY INCOME 3.875% 4/15/25	199,768.	196,086.
250,000 CINTAS CORP 3.45% 4/10/25	248,978.	242,063.
250,000 NUCOR CORP 2% 6/1/25	234,015.	232,850.
250,000 TOYOTA MTR CORP 3.95% 6/30/25	249,763.	244,945.
250,000 DANAHER CORP 3.35% 6/30/25	246,458.	240,844.
250,000 AMERICAN EXPRESS 4.2% 11/6/25	254,229.	246,939.
Total to Form 990-PF, Part II, line 10c	3,796,984.	3,722,932.

Form 990-PF	Other Investments	Statement 12	
<u>Description</u>	<u>Valuation Method</u>	<u>Book Value</u>	<u>Fair Market Value</u>
Investment in Real estate	COST	85,053,363.	85,053,363.
Total to Form 990-PF, Part II, line 13		85,053,363.	85,053,363.

Form 990-PF	List of Substantial Contributors Part VI-A, Line 10	Statement 13
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<u>Name of Contributor</u>	<u>Address</u>
Estate of Gloria Flanzer	1266 FIRST STREET SARASOTA, FL 34236
ERIC KAPLAN	1266 FIRST STREET, SUITE 1 SARASOTA, FL 34236
R. Dean Hautamaki	1266 FIRST STREET, SUITE 1 SARASOTA, FL 34236

Form 990-PF

Grant Application Submission Information  
Part XIV, Lines 2a through 2d

Statement 14

Name and Address of Person to Whom Applications Should be Submitted

ERIC KAPLAN  
1266 FIRST STREET, SUITE 1  
Sarasota, FL 34236

<u>Telephone Number</u>	<u>Name of Grant Program</u>
917-915-0404	All

Email Address

ekaplan@bristolllc.com

Form and Content of Applications

Grant Applications should be submitted with a written request and include the following:

- 1)most recent copy of tax return
- 2)mission of organization soliciting
- 3)specific description of proposed use of funds
- 4)name and of address of submitter
- 5)names and addresses of other funding sources for the proposed program both committed and applied to

Any Submission Deadlines

None

Restrictions and Limitations on Awards

Award limitations include - Geographical: Support of the communities located only in Sarasota, Manatee, Charlotte or Desoto County and which have no material activities beyond those counties. Notwithstanding the aforesaid, the Trust reserves the right to make exceptions without creating any rights for any other agencies.

Charitable fields: social services, social welfare, K-12 education and healthcare with education as primary function, but excluding the arts, such as theatre, music and similar performance based activities.

Functions, activities and other: Delivers services to the public. Has and provides a valid IRS letter of determination and active Florida solicitation registration. Does not include any officers, directors or other principals and control people who have a criminal record.

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Name and Address of Person to Whom Applications Should be Submitted

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R. Dean Hautamaki  
1266 FIRST STREET, SUITE 1  
Sarasota, FL 34236

---

Telephone Number                      Name of Grant Program

941-951-3920                      All

---

Email Address

Dean-Hautamaki@smh.com

---

Form and Content of Applications

See above

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Any Submission Deadlines

None

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Restrictions and Limitations on Awards

Provides an annual written report as to how the matching funds have been used and enhanced its program activities within 90 days after the end of the calendar year. A 30-day extension can be requested. Agencies that do not provide the written report shall be suspended from program participation if they do not provide the reports within 90 days or the extended period until they submit the report. Provides a copy of its annual IRS filing within ninety (90) days of the filing and, if the Agency files form 990-N, a financial statement.

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Name and Address of Person to Whom Applications Should be Submitted

ERIC KAPLAN  
 1266 FIRST STREET, SUITE 1  
 Sarasota, FL 34236

<u>Telephone Number</u>	<u>Name of Grant Program</u>
917-915-0404	All

Email Address

ekaplan@bristolllc.com

Form and Content of Applications

Grant Applications should be submitted with a written request and include the following:

- 1)most recent copy of tax return
- 2)mission of organization soliciting
- 3)specific description of proposed use of funds
- 4)name and of address of submitter
- 5)names and addresses of other funding sources for the proposed program both committed and applied to

Any Submission Deadlines

None

Restrictions and Limitations on AwardsIneligible Agencies

The following Agencies are not eligible to participate in the Program:

- A. Agencies whose activities include funding other agencies.
- B. Agencies who provide educational activities that are not their primary activity.
- C. Agencies who are engaged in religious outreach or similar activities or whose controlling officers, directors and the like are members of the clergy.
- D. Agencies that engage in controversial issues, determined in the sole discretion of the Trustees.
- E. Faith - based Agencies.

Name and Address of Person to Whom Applications Should be Submitted

R. Dean Hautamaki  
1266 FIRST STREET, SUITE 1  
Sarasota, FL 34236

Telephone Number                      Name of Grant Program

941-951-3920                      All

Email Address

Dean-Hautamaki@smh.com

Form and Content of Applications

See above

Any Submission Deadlines

None

Restrictions and Limitations on Awards

The Trustees of the Flanzer Trust ("Trustees") reserve the right to waive any of the above conditions for particular Agencies, including those in which Louis and Gloria Flanzer had a particular interest. The waiver of eligibility requirements for one or more Agencies does not give rise to any rights to other similarly situated Agencies or other Agencies not satisfying the eligibility requirements.

## General Explanation

Statement 15

## Form/Line Identifier and Description/Return Reference

Form 990-PF Part II; Line 7 - Line 7, Note Receivable

## Explanation:

## Line 7, Note Receivable

Borrower's name and title	KJ Greentree, LLC
Original amount	\$ 800,000
Balance due	\$ 800,000
Date of note	10/01/2020
Maturity date	10/01/2035
Repayment terms	Interest only quarterly
Interest rate	6%

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**General Explanation****Statement 16**

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**Form/Line Identifier and Description/Return Reference**

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Form 990-PF; Part VIII - Information about Officers, Trustees, Managers: -

**Explanation:**

Trustees' fees aggregating \$ 700,000 were based on the midpoint of an independent study and are less than the amounts provided by court order.



Form **990-W**  
 (Worksheet)

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

**2023**

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

► Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax year .....	1	
2	Tax on the amount on line 1 .....	2	
3	Alternative minimum tax for trusts .....	3	
4	Total. Add lines 2 and 3 .....	4	
5	Estimated tax credits .....	5	
6	Subtract line 5 from line 4 .....	6	
7	Other taxes .....	7	
8	Total. Add lines 6 and 7 .....	8	
9	Credit for federal tax paid on fuels .....	9	
10a	Subtract line 9 from line 8. <b>Note:</b> If less than \$500, the organization does not need to make estimated tax payments .....	10a	
b	Enter the tax shown on the 2022 return. <b>Caution:</b> If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c .....	10b	
c	<b>2023 Estimated Tax.</b> Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c .....	10c	<b>Adjusted To</b> 29,457.

		(a)	(b)	(c)	(d)	
11	Installment due dates .....	11	05/15/23	06/15/23	09/15/23	12/15/23
12	Installments. Enter 25% of line 10c in columns (a) through (d) .....	12	6,800.	6,800.	6,800.	6,800.
13	2022 Overpayment .....	13				
14	Payment due (Subtract line 13 from line 12) .....	14				

Form **990-W**

Estimated Tax	29,457.
Overpayment Applied	29,457.
Amount Due	0.

Form **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 \_\_\_\_\_, 20\_\_

# 2022

Department of the Treasury  
Internal Revenue Service

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

**Go to [www.irs.gov/Form8879TE](http://www.irs.gov/Form8879TE) for the latest information.**

Name of filer <b>THE LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST C/O Bristol Consult</b>	EIN or SSN <b>14-6285967</b>
Name and title of officer or person subject to tax <b>ERIC KAPLAN Trustee</b>	

## Part I Type of Return and Return Information

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.

<b>1a</b> Form 990 check here <input type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990, Part VIII, column (A), line 12) .....	<b>1b</b> _____
<b>2a</b> Form 990-EZ check here <input type="checkbox"/>	<b>b Total revenue</b> , if any (Form 990-EZ, line 9) .....	<b>2b</b> _____
<b>3a</b> Form 1120-POL check here <input type="checkbox"/>	<b>b Total tax</b> (Form 1120-POL, line 22) .....	<b>3b</b> _____
<b>4a</b> Form 990-PF check here <input type="checkbox"/>	<b>b Tax based on investment income</b> (Form 990-PF, Part V, line 5) .....	<b>4b</b> _____
<b>5a</b> Form 8868 check here <input type="checkbox"/>	<b>b Balance due</b> (Form 8868, line 3c) .....	<b>5b</b> _____
<b>6a</b> Form 990-T check here <input checked="" type="checkbox"/>	<b>b Total tax</b> (Form 990-T, Part III, line 4) .....	<b>6b</b> <u>26,854.</u>
<b>7a</b> Form 4720 check here <input type="checkbox"/>	<b>b Total tax</b> (Form 4720, Part III, line 1) .....	<b>7b</b> _____
<b>8a</b> Form 5227 check here <input type="checkbox"/>	<b>b FMV of assets at end of tax year</b> (Form 5227, Item D) .....	<b>8b</b> _____
<b>9a</b> Form 5330 check here <input type="checkbox"/>	<b>b Tax due</b> (Form 5330, Part II, line 19) .....	<b>9b</b> _____
<b>10a</b> Form 8038-CP check here <input type="checkbox"/>	<b>b Amount of credit payment requested</b> (Form 8038-CP, Part III, line 22) .....	<b>10b</b> _____

## Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that  I am an officer of the above entity or  I am a person subject to tax with respect to (name of entity) \_\_\_\_\_, (EIN) \_\_\_\_\_ and that I have examined a copy of the 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

I authorize Dougherty & Connell to enter my PIN 85967  
ERO firm name Enter five numbers, but do not enter all zeros

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 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.

Signature of officer or person subject to tax \_\_\_\_\_

Date \_\_\_\_\_

## Part III Certification and Authentication

**ERO's EFIN/PIN.** Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

**11249011747**  
 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.

ERO's signature \_\_\_\_\_ Date 11/14/23

**ERO Must Retain This Form - See Instructions**  
**Do Not Submit This Form to the IRS Unless Requested To Do So**

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2022)

# Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury  
Internal Revenue Service

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

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

**Automatic 6-Month Extension of Time.** Only submit original (no copies needed).

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

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>THE LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST C/O Bristol Consult</b>	Taxpayer identification number (TIN) <b>14-6285967</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>1266 FIRST STREET, STE 1</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>SARASOTA, FL 34236</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 6

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

**ERIC KAPLAN & R. Dean Hautamaki**

- The books are in the care of ▶ **1266 FIRST STREET, SUITE 1 - SARASOTA, FL 34236**

Telephone No. ▶ **917-915-0404** Fax No. ▶ \_\_\_\_\_

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

**1** I request an automatic 6-month extension of time until **November 15, 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶  calendar year **2022** or
- ▶  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

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

<b>3a</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	56,400.
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	6,400.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	50,000.

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

**Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

**2022**

For calendar year 2022 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury  
Internal Revenue Service

<p><b>A</b> <input type="checkbox"/> Check box if address changed.</p> <p><b>B</b> Exempt under section  <input checked="" type="checkbox"/> 501(c)(3)  <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e)  <input type="checkbox"/> 408A <input type="checkbox"/> 530(a)  <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A</p>	<p>Print or Type</p>	<p>Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.)  <b>THE LOUIS AND GLORIA FLANZER                  PHILANTHROPIC TRUST C/O Bristol Consult</b></p> <p>Number, street, and room or suite no. If a P.O. box, see instructions.  <b>1266 FIRST STREET, STE 1</b></p> <p>City or town, state or province, country, and ZIP or foreign postal code  <b>SARASOTA, FL 34236</b></p>	<p><b>D</b> Employer identification number   <b>14-6285967</b></p> <p><b>E</b> Group exemption number (see instructions)</p> <p><b>F</b> <input type="checkbox"/> Check box if an amended return.</p>
<p><b>C</b> Book value of all assets at end of year ..... <b>93,725,908.</b></p>			
<p><b>G</b> Check organization type <input type="checkbox"/> 501(c) corporation <input checked="" type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust <input type="checkbox"/> State college/university</p>			
<p><b>H</b> Check if filing only to <input type="checkbox"/> Claim credit from Form 8941 <input type="checkbox"/> Claim a refund shown on Form 2439</p>			
<p><b>I</b> Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ..... <input type="checkbox"/></p>			
<p><b>J</b> Enter the number of attached Schedules A (Form 990-T) ..... <b>1</b></p>			
<p><b>K</b> During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                  If "Yes," enter the name and identifying number of the parent corporation.</p>			
<p><b>L</b> The books are in care of <b>ERIC KAPLAN &amp; R. Dean Hautamaki</b> Telephone number <b>917-915-0404</b></p>			

<b>Part I Total Unrelated Business Taxable Income</b>		
<b>1</b>	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) .....	<b>78,274.</b>
<b>2</b>	Reserved .....	
<b>3</b>	Add lines 1 and 2 .....	<b>78,274.</b>
<b>4</b>	Charitable contributions (see instructions for limitation rules) .....	<b>0.</b>
<b>5</b>	Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 .....	<b>78,274.</b>
<b>6</b>	Deduction for net operating loss. See instructions .....	
<b>7</b>	Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 .....	<b>78,274.</b>
<b>8</b>	Specific deduction (generally \$1,000, but see instructions for exceptions) .....	<b>1,000.</b>
<b>9</b>	<b>Trusts.</b> Section 199A deduction. See instructions .....	
<b>10</b>	<b>Total deductions.</b> Add lines 8 and 9 .....	<b>1,000.</b>
<b>11</b>	<b>Unrelated business taxable income.</b> Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero .....	<b>77,274.</b>

<b>Part II Tax Computation</b>		
<b>1</b>	Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21) .....	
<b>2</b>	Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input checked="" type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) .....	<b>26,854.</b>
<b>3</b>	Proxy tax. See instructions .....	
<b>4</b>	Other tax amounts. See instructions .....	
<b>5</b>	Alternative minimum tax (trusts only) .....	
<b>6</b>	Tax on noncompliant facility income. See instructions .....	
<b>7</b>	<b>Total.</b> Add lines 3 through 6 to line 1 or 2, whichever applies .....	<b>26,854.</b>

LHA For Paperwork Reduction Act Notice, see instructions.

**Part III Tax and Payments**

<b>1a</b>	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	<b>1a</b>		
<b>b</b>	Other credits (see instructions)	<b>1b</b>		
<b>c</b>	General business credit. Attach Form 3800 (see instructions)	<b>1c</b>		
<b>d</b>	Credit for prior year minimum tax (attach Form 8801 or 8827)	<b>1d</b>		
<b>e</b>	<b>Total credits.</b> Add lines 1a through 1d	<b>1e</b>		
<b>2</b>	Subtract line 1e from Part II, line 7	<b>2</b>		26,854.
<b>3</b>	Other amounts due. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement)	<b>3</b>		
<b>4</b>	<b>Total tax.</b> Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	<b>4</b>		26,854.
<b>5</b>	Current net 965 tax liability paid from Form 965-A, Part II, column (k)	<b>5</b>		0.
<b>6a</b>	Payments: A 2021 overpayment credited to 2022	<b>6a</b>		
<b>b</b>	2022 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	<b>6b</b>	6,400.	
<b>c</b>	Tax deposited with Form 8868	<b>6c</b>	50,000.	
<b>d</b>	Foreign organizations: Tax paid or withheld at source (see instructions)	<b>6d</b>		
<b>e</b>	Backup withholding (see instructions)	<b>6e</b>		
<b>f</b>	Credit for small employer health insurance premiums (attach Form 8941)	<b>6f</b>		
<b>g</b>	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	<b>6g</b>		
<b>7</b>	<b>Total payments.</b> Add lines 6a through 6g	<b>7</b>		56,400.
<b>8</b>	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input checked="" type="checkbox"/>	<b>8</b>		89.
<b>9</b>	<b>Tax due.</b> If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	<b>9</b>		
<b>10</b>	<b>Overpayment.</b> If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	<b>10</b>		29,457.
<b>11</b>	Enter the amount of line 10 you want: <b>Credited to 2023 estimated tax</b> 29,457. <b>Refunded</b>	<b>11</b>		0.

**Part IV Statements Regarding Certain Activities and Other Information** (see instructions)

<b>1</b>	At any time during the 2022 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes	No
<b>2</b>	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
<b>3</b>	Enter the amount of tax-exempt interest received or accrued during the tax year \$		
<b>4</b>	Enter available pre-2018 NOL carryovers here \$ Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
<b>5</b>	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
	Business Activity Code	Available post-2017 NOL carryover	
		\$	
		\$	
<b>6a</b>	Did the organization change its method of accounting? (see instructions)		X
<b>b</b>	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V		

**Part V Supplemental Information**

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Date	Trustee	Title
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	Kevin P. Dougherty	Kevin P. Dougherty	11/14/23	P00189079
	Firm's name	Dougherty & Connell		Firm's EIN
	Firm's address	450 Wireless Boulevard Hauppauge, NY 11788		11-2973168
			Phone no.	631-756-2100

May the IRS discuss this return with the preparer shown below (see instructions)?  Yes  No

**SCHEDULE A  
(Form 990-T)**

**Unrelated Business Taxable Income  
From an Unrelated Trade or Business**

OMB No. 1545-0047

**2022**

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for  
501(c)(3) Organizations Only

<b>A</b> Name of the organization <b>THE LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST C/O Bristol Consult</b>	<b>B</b> Employer identification number <b>14-6285967</b>
<b>C</b> Unrelated business activity code (see instructions) <b>901101</b>	<b>D</b> Sequence: <b>1</b> of <b>1</b>

**E** Describe the unrelated trade or business **PARTNERSHIP INCOME**

<b>Part I</b> Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
<b>1 a</b> Gross receipts or sales			
<b>b</b> Less returns and allowances			
<b>c</b> Balance	<b>1c</b>		
<b>2</b> Cost of goods sold (Part III, line 8)	<b>2</b>		
<b>3</b> Gross profit. Subtract line 2 from line 1c	<b>3</b>		
<b>4 a</b> Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	<b>4a</b>		
<b>b</b> Net gain (loss) (Form 4797) (attach Form 4797). See instructions	<b>4b</b>		
<b>c</b> Capital loss deduction for trusts	<b>4c</b>	-2,159.	-2,159.
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement) <b>Statement 17</b>	<b>5</b>	80,433.	80,433.
<b>6</b> Rent income (Part IV)	<b>6</b>		
<b>7</b> Unrelated debt-financed income (Part V)	<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Part VI)	<b>8</b>		
<b>9</b> Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	<b>9</b>		
<b>10</b> Exploited exempt activity income (Part VIII)	<b>10</b>		
<b>11</b> Advertising income (Part IX)	<b>11</b>		
<b>12</b> Other income (see instructions; attach statement)	<b>12</b>		
<b>13 Total.</b> Combine lines 3 through 12	<b>13</b>	78,274.	78,274.

**Part II Deductions Not Taken Elsewhere** See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

<b>1</b> Compensation of officers, directors, and trustees (Part X)	<b>1</b>		
<b>2</b> Salaries and wages	<b>2</b>		
<b>3</b> Repairs and maintenance	<b>3</b>		
<b>4</b> Bad debts	<b>4</b>		
<b>5</b> Interest (attach statement). See instructions	<b>5</b>		
<b>6</b> Taxes and licenses	<b>6</b>		
<b>7</b> Depreciation (attach Form 4562). See instructions	<b>7</b>		
<b>8</b> Less depreciation claimed in Part III and elsewhere on return	<b>8a</b>		<b>8b</b>
<b>9</b> Depletion	<b>9</b>		
<b>10</b> Contributions to deferred compensation plans	<b>10</b>		
<b>11</b> Employee benefit programs	<b>11</b>		
<b>12</b> Excess exempt expenses (Part VIII)	<b>12</b>		
<b>13</b> Excess readership costs (Part IX)	<b>13</b>		
<b>14</b> Other deductions (attach statement)	<b>14</b>		
<b>15 Total deductions.</b> Add lines 1 through 14	<b>15</b>		0.
<b>16</b> Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	<b>16</b>		78,274.
<b>17</b> Deduction for net operating loss. See instructions	<b>17</b>		0.
<b>18 Unrelated business taxable income.</b> Subtract line 17 from line 16	<b>18</b>		78,274.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

**Part III Cost of Goods Sold** Enter method of inventory valuation

1 Inventory at beginning of year .....	1	
2 Purchases .....	2	
3 Cost of labor .....	3	
4 Additional section 263A costs (attach statement) .....	4	
5 Other costs (attach statement) .....	5	
6 <b>Total.</b> Add lines 1 through 5 .....	6	
7 Inventory at end of year .....	7	
8 <b>Cost of goods sold.</b> Subtract line 7 from line 6. Enter here and in Part I, line 2 .....	8	
9 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

**Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)**

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A  \_\_\_\_\_

B  \_\_\_\_\_

C  \_\_\_\_\_

D  \_\_\_\_\_

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) .....				
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) .....				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D .....				
3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A) .....	0.			
4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) .....				
5 <b>Total deductions.</b> Add line 4 columns A through D. Enter here and on Part I, line 6, column (B) .....	0.			

**Part V Unrelated Debt-Financed Income** (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A  \_\_\_\_\_

B  \_\_\_\_\_

C  \_\_\_\_\_

D  \_\_\_\_\_

	A	B	C	D
2 Gross income from or allocable to debt-financed property .....				
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement) .....				
b Other deductions (attach statement) .....				
c Total deductions (add lines 3a and 3b, columns A through D) .....				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement) .....				
5 Average adjusted basis of or allocable to debt-financed property (attach statement) .....				
6 Divide line 4 by line 5 .....	%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6 .....				
8 <b>Total gross income</b> (add line 7, columns A through D). Enter here and on Part I, line 7, column (A) .....	0.			
9 Allocable deductions. Multiply line 3c by line 6 .....				
10 <b>Total allocable deductions.</b> Add line 9, columns A through D. Enter here and on Part I, line 7, column (B) .....	0.			
11 <b>Total dividends-received deductions</b> included in line 10 .....	0.			

**Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)	
<b>Totals</b>			0.	0.	

**Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)
<b>Totals</b>		0.		0.

**Part VIII Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1	Description of exploited activity: _____		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) .....	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) .....	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 .....	4	
5	Gross income from activity that is not unrelated business income .....	5	
6	Expenses attributable to income entered on line 5 .....	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12 .....	7	



**Part IX Advertising Income**

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

- A
- B
- C
- D

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income .....				
Add columns A through D. Enter here and on Part I, line 11, column (A) .....	0.			

a				
3 Direct advertising costs by periodical .....				
a Add columns A through D. Enter here and on Part I, line 11, column (B) .....	0.			

4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8 .....				
5 Readership costs .....				
6 Circulation income .....				
7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero .....				
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7 .....				
a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13 .....	0.			

**Part X Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on Part II, line 1 .....			0.

**Part XI Supplemental Information** (see instructions)

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Form 990-T (A)	Income (Loss) from Partnerships	Statement 17
Description		Net Income or (Loss)
REBEL INDUSTRIES, LLC		-14.
PM PARTNERS		80,447.
Total Included on Schedule A, Part I, line 5		80,433.

**SCHEDULE D  
(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**Capital Gains and Losses**

Attach to Form 1041, Form 5227, or Form 990-T.

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

Go to [www.irs.gov/F1041](http://www.irs.gov/F1041) for instructions and the latest information.

OMB No. 1545-0092

**2022**

Name of estate or trust  
**THE LOUIS AND GLORIA FLANZER  
PHILANTHROPIC TRUST C/O Bristol Consult**

Employer identification number  
**14-6285967**

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?  Yes  No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

**Note:** Form 5227 filers need to complete only Parts I and II.

**Part I Short-Term Capital Gains and Losses-Generally Assets Held 1 Year or Less** (see instructions)

See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1 a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
<b>1 b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked .....				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked .....				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked .....				
<b>4</b> Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 .....				<b>4</b>
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts <b>See Statement 18</b> .....				<b>5</b> -3,307.
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2021 Capital Loss Carryover Worksheet .....				<b>6</b> ( )
<b>7</b> <b>Net short-term capital gain or (loss)</b> . Combine lines 1a through 6 in column (h). Enter here and on Part III, line 17, column (3) .....				<b>7</b> -3,307.

**Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than 1 Year** (see instructions)

See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8 a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
<b>8 b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked .....				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked .....				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked .....				
<b>11</b> Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 .....				<b>11</b>
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts <b>See Statement 19</b> .....				<b>12</b> 1,148.
<b>13</b> Capital gain distributions .....				<b>13</b>
<b>14</b> Gain from Form 4797, Part I .....				<b>14</b>
<b>15</b> Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2021 Capital Loss Carryover Worksheet .....				<b>15</b> ( )
<b>16</b> <b>Net long-term capital gain or (loss)</b> . Combine lines 8a through 15 in column (h). Enter here and on Part II, line 18a, column (3) .....				<b>16</b> 1,148.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2022

<b>Part III Summary of Parts I and II</b>		(1) Beneficiaries'	(2) Estate's or trust's	(3) Total
<i>Caution: Read the instructions before completing this part.</i>				
17	Net short-term gain or (loss)	17	-3,307.	-3,307.
18	Net long-term gain or (loss):			
a	Total for year	18a	1,148.	1,148.
b	Unrecaptured section 1250 gain (see line 18 of the worksheet)	18b		
c	28% rate gain	18c		
19	Total net gain or (loss). Combine lines 17 and 18a	19	-2,159.	-2,159.

**Note:** If line 19, col (3), is a net gain, enter the gain on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4a). If lines 18a and 19, col (2), are net gains, go to Part V, and don't complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

<b>Part IV Capital Loss Limitation</b>			
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4c, if a trust), the smaller of:		
a	The loss on line 19, column (3) or b \$3,000	20	( 2,159. )

**Note:** If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 23 (or Form 990-T, Part I, line 11), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover.

**Part V Tax Computation Using Maximum Capital Gains Rates**

**Form 1041 filers.** Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 23, is more than zero.

**Caution:** Skip this part and complete the Schedule D Tax Worksheet in the instructions if:

- Either line 18b, col. (2), or line 18c, col. (2), is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g, are more than zero, or
- There are amounts on lines 4e and 4g of Form 4952.

**Form 990-T trusts.** Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, Part I, line 11, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col. (2), or line 18c, col. (2), is more than zero.

21	Enter taxable income from Form 1041, line 23 (or Form 990-T, Part I, line 11)	21		
22	Enter the smaller of line 18a or 19 in column (2) but not less than zero	22		
23	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	23		
24	Add lines 22 and 23	24		
25	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0-	25		
26	Subtract line 25 from line 24. If zero or less, enter -0-	26		
27	Subtract line 26 from line 21. If zero or less, enter -0-	27		
28	Enter the smaller of the amount on line 21 or \$2,800	28		
29	Enter the smaller of the amount on line 27 or line 28	29		
30	Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0%	30		
31	Enter the smaller of line 21 or line 26	31		
32	Subtract line 30 from line 26	32		
33	Enter the smaller of line 21 or \$13,700	33		
34	Add lines 27 and 30	34		
35	Subtract line 34 from line 33. If zero or less, enter -0-	35		
36	Enter the smaller of line 32 or line 35	36		
37	Multiply line 36 by 15% (0.15)	37		
38	Enter the amount from line 31	38		
39	Add lines 30 and 36	39		
40	Subtract line 39 from line 38. If zero or less, enter -0-	40		
41	Multiply line 40 by 20% (0.20)	41		
42	Figure the tax on the amount on line 27. Use the 2022 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the Instructions for Form 1041)	42		
43	Add lines 37, 41, and 42	43		
44	Figure the tax on the amount on line 21. Use the 2022 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the Instructions for Form 1041)	44		
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, Part I, line 1a (or Form 990-T, Part II, line 2)	45		

**SCHEDULE I  
(Form 1041)**

**Alternative Minimum Tax - Estates and Trusts**

**2022**

Department of the Treasury  
Internal Revenue Service

Attach to Form 1041.  
Go to [www.irs.gov/Form1041](http://www.irs.gov/Form1041) for instructions and the latest information.

Name of estate or trust <b>THE LOUIS AND GLORIA FLANZER PHILANTHROP</b>	Employer identification number <b>14-6285967</b>
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**Part I Estate's or Trust's Share of Alternative Minimum Taxable Income**

1	Adjusted total income or (loss) (from Form 1041, line 17). <b>ESBTs</b> , see instructions	1	78,274.
2	Interest	2	
3	Taxes	3	
4	Refund of taxes	4	( )
5	Depletion (difference between regular tax and AMT)	5	
6	Net operating loss deduction. Enter as a positive amount	6	
7	Interest from specified private activity bonds exempt from the regular tax	7	
8	Qualified small business stock (see instructions)	8	
9	Exercise of incentive stock options (excess of AMT income over regular tax income)	9	
10	Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	10	
11	Disposition of property (difference between AMT and regular tax gain or loss)	11	
12	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	12	
13	Passive activities (difference between AMT and regular tax income or loss)	13	
14	Loss limitations (difference between AMT and regular tax income or loss)	14	
15	Circulation costs (difference between regular tax and AMT)	15	
16	Long-term contracts (difference between AMT and regular tax income)	16	
17	Mining costs (difference between regular tax and AMT)	17	
18	Research and experimental costs (difference between regular tax and AMT)	18	
19	Income from certain installment sales before January 1, 1987	19	( )
20	Intangible drilling costs preference	20	
21	Other adjustments, including income-based related adjustments	21	
22	Alternative tax net operating loss deduction (See the instructions for the limitation that applies.)	22	( )
23	Adjusted alternative minimum taxable income. Combine lines 1 through 22	23	78,274.
<b>Note:</b> Complete Part II below before going to line 24.			
24	Income distribution deduction from Part II, line 42	N/A	24
25	Estate tax deduction (from Form 1041, line 19)	N/A	25
26	Add lines 24 and 25	26	
27	Estate's or trust's share of alternative minimum taxable income. Subtract line 26 from line 23	27	78,274.

If line 27 is:

- \$26,500 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c. The estate or trust isn't liable for the alternative minimum tax.
- Over \$26,500, but less than \$194,300, go to line 43.
- \$194,300 or more, enter the amount from line 27 on line 49 and go to line 50.
- **ESBTs**, see instructions.

**Part II Income Distribution Deduction on a Minimum Tax Basis**

N/A

28	Adjusted alternative minimum taxable income (see instructions)	28	
29	Adjusted tax-exempt interest (other than amounts included on line 7)	29	
30	Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-	30	
31	Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes (from Form 1041, Schedule A, line 4)	31	
32	Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)	32	
33	Capital gains computed on a minimum tax basis included on line 23	33	( )
34	Capital losses computed on a minimum tax basis included on line 23. Enter as a positive amount	34	
35	Distributable net alternative minimum taxable income (DNAMTI). Combine lines 28 through 34. If zero or less, enter -0-	35	
36	Income required to be distributed currently (from Form 1041, Schedule B, line 9)	36	
37	Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)	37	
38	Total distributions. Add lines 36 and 37	38	
39	Tax-exempt income included on line 38 (other than amounts included on line 7)	39	
40	Tentative income distribution deduction on a minimum tax basis. Subtract line 39 from line 38	40	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule I (Form 1041) 2022

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

**THE LOUIS AND GLORIA FLANZER**  
**PHILANTHROPIC TRUST C/O Bristol Consult**

Your social security number

**14-6285967**

**Caution:** The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

**Part II Income or Loss From Partnerships and S Corporations**

**Note:** If you report a loss, receive a distribution, dispose of stock, or receive a loan repayment from an S corporation, you **must** check the box in column (e) on line 28 and attach the required basis computation. If you report a loss from an at-risk activity for which **any** amount is **not** at risk, you **must** check the box in column (f) on line 28 and attach **Form 6198**. See instructions.

**27** Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? If you answered "Yes," see instructions before completing this section  Yes  No

<b>28</b>	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if basis computation is required	(f) Check if any amount is not at risk
<b>A</b>	REBEL INDUSTRIES, LLC	P		36-4255543		
<b>B</b>	PM PARTNERS	P		27-0062346		
<b>C</b>						
<b>D</b>						

Passive Income and Loss		Nonpassive Income and Loss		
(g) Passive loss allowed (attach Form 8582 if required)	(h) Passive income from Schedule K-1	(i) Nonpassive loss allowed (see Schedule K-1)	(j) Section 179 expense deduction from Form 4562	(k) Nonpassive income from Schedule K-1
<b>A</b>	14.			
<b>B</b>		80,447.		
<b>C</b>				
<b>D</b>				
<b>29a Totals</b>		80,447.		
<b>b Totals</b>	14.			
<b>30</b>	Add columns (h) and (k) of line 29a			30 80,447.
<b>31</b>	Add columns (g), (i), and (j) of line 29b			31 ( 14. )
<b>32</b>	<b>Total partnership and S corporation income or (loss).</b> Combine lines 30 and 31			32 80,433.

**Part III Income or Loss From Estates and Trusts**

<b>33</b>	(a) Name	(b) Employer identification number
<b>A</b>		
<b>B</b>		

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
<b>A</b>			
<b>B</b>			
<b>34a Totals</b>			
<b>b Totals</b>			
<b>35</b>	Add columns (d) and (f) of line 34a		35
<b>36</b>	Add columns (c) and (e) of line 34b		36 ( )
<b>37</b>	<b>Total estate and trust income or (loss).</b> Combine lines 35 and 36		37

**Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder**

<b>38</b>	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c (see instructions)	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
<b>39</b>	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

**Part V Summary**

<b>40</b>	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	<b>40</b>	
<b>41</b>	<b>Total income or (loss).</b> Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Schedule 1 (Form 1040), line 5	<b>41</b>	80,433.
<b>42</b>	<b>Reconciliation of farming and fishing income.</b> Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120-S), box 17, code AD; and Schedule K-1 (Form 1041), box 14, code F. See instructions.	<b>42</b>	
<b>43</b>	<b>Reconciliation for real estate professionals.</b> If you were a real estate professional (see instructions), enter the net income or (loss) you reported anywhere on Form 1040, Form 1040-SR, or Form 1040-NR from all rental real estate activities in which you materially participated under the passive activity loss rules	<b>43</b>	

**SCHEDULE I  
(Form 1041)**

**Alternative Minimum Tax - Estates and Trusts**

OMB No. 1545-0092

Department of the Treasury  
Internal Revenue Service

Attach to Form 1041.  
Go to [www.irs.gov/Form1041](http://www.irs.gov/Form1041) for instructions and the latest information.

**2022**

Name of estate or trust <b>THE LOUIS AND GLORIA FLANZER PHILANTHROP</b>	Employer identification number <b>14-6285967</b>
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**Part I Estate's or Trust's Share of Alternative Minimum Taxable Income**

<b>1</b> Adjusted total income or (loss) (from Form 1041, line 17). <b>ESBTs</b> , see instructions	<b>1</b>	<b>78,274.</b>
<b>2</b> Interest	<b>2</b>	
<b>3</b> Taxes	<b>3</b>	
<b>4</b> Refund of taxes	<b>4</b>	( )
<b>5</b> Depletion (difference between regular tax and AMT)	<b>5</b>	
<b>6</b> Net operating loss deduction. Enter as a positive amount	<b>6</b>	
<b>7</b> Interest from specified private activity bonds exempt from the regular tax	<b>7</b>	
<b>8</b> Qualified small business stock (see instructions)	<b>8</b>	
<b>9</b> Exercise of incentive stock options (excess of AMT income over regular tax income)	<b>9</b>	
<b>10</b> Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	<b>10</b>	
<b>11</b> Disposition of property (difference between AMT and regular tax gain or loss)	<b>11</b>	
<b>12</b> Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	<b>12</b>	
<b>13</b> Passive activities (difference between AMT and regular tax income or loss)	<b>13</b>	
<b>14</b> Loss limitations (difference between AMT and regular tax income or loss)	<b>14</b>	
<b>15</b> Circulation costs (difference between regular tax and AMT)	<b>15</b>	
<b>16</b> Long-term contracts (difference between AMT and regular tax income)	<b>16</b>	
<b>17</b> Mining costs (difference between regular tax and AMT)	<b>17</b>	
<b>18</b> Research and experimental costs (difference between regular tax and AMT)	<b>18</b>	
<b>19</b> Income from certain installment sales before January 1, 1987	<b>19</b>	( )
<b>20</b> Intangible drilling costs preference	<b>20</b>	
<b>21</b> Other adjustments, including income-based related adjustments	<b>21</b>	
<b>22</b> Alternative tax net operating loss deduction (See the instructions for the limitation that applies.)	<b>22</b>	( )
<b>23</b> Adjusted alternative minimum taxable income. Combine lines 1 through 22	<b>23</b>	<b>78,274.</b>
<b>Note:</b> Complete Part II below before going to line 24.		
<b>24</b> Income distribution deduction from Part II, line 42	<b>24</b>	N/A
<b>25</b> Estate tax deduction (from Form 1041, line 19)	<b>25</b>	N/A
<b>26</b> Add lines 24 and 25	<b>26</b>	
<b>27</b> Estate's or trust's share of alternative minimum taxable income. Subtract line 26 from line 23	<b>27</b>	<b>78,274.</b>

If line 27 is:

- \$26,500 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c. The estate or trust isn't liable for the alternative minimum tax.
- Over \$26,500, but less than \$194,300, go to line 43.
- \$194,300 or more, enter the amount from line 27 on line 49 and go to line 50.
- **ESBTs**, see instructions.

**Part II Income Distribution Deduction on a Minimum Tax Basis**

N/A

<b>28</b> Adjusted alternative minimum taxable income (see instructions)	<b>28</b>	
<b>29</b> Adjusted tax-exempt interest (other than amounts included on line 7)	<b>29</b>	
<b>30</b> Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-	<b>30</b>	
<b>31</b> Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes (from Form 1041, Schedule A, line 4)	<b>31</b>	
<b>32</b> Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)	<b>32</b>	
<b>33</b> Capital gains computed on a minimum tax basis included on line 23	<b>33</b>	( )
<b>34</b> Capital losses computed on a minimum tax basis included on line 23. Enter as a positive amount	<b>34</b>	
<b>35</b> Distributable net alternative minimum taxable income (DNAMTI). Combine lines 28 through 34. If zero or less, enter -0-	<b>35</b>	
<b>36</b> Income required to be distributed currently (from Form 1041, Schedule B, line 9)	<b>36</b>	
<b>37</b> Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)	<b>37</b>	
<b>38</b> Total distributions. Add lines 36 and 37	<b>38</b>	
<b>39</b> Tax-exempt income included on line 38 (other than amounts included on line 7)	<b>39</b>	
<b>40</b> Tentative income distribution deduction on a minimum tax basis. Subtract line 39 from line 38	<b>40</b>	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule I (Form 1041) 2022

**Part II Income Distribution Deduction on a Minimum Tax Basis** (continued) N/A

41 Tentative income distribution deduction on a minimum tax basis. Subtract line 29 from line 35. If zero or less, enter -0-	41	
42 <b>Income distribution deduction on a minimum tax basis.</b> Enter the smaller of line 40 or line 41. Enter here and on line 24	42	

**Part III Alternative Minimum Tax**

43 Exemption amount	43	\$26,500
44 Enter the amount from line 27	44	78,274.
45 Phase-out of exemption amount	45	\$88,300
46 Subtract line 45 from line 44. If zero or less, enter -0-	46	0.
47 Multiply line 46 by 25% (0.25)	47	0.
48 Subtract line 47 from line 43. If zero or less, enter -0-	48	26,500.
49 Subtract line 48 from line 44	49	51,774.
50 Go to Part IV of Schedule I to figure line 50 if the estate or trust has qualified dividends or has a gain on lines 18a and 19 of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary). Otherwise, if line 49 is: <ul style="list-style-type: none"> <li>• \$206,100 or less, multiply line 49 by 26% (0.26).</li> <li>• Over \$206,100, multiply line 49 by 28% (0.28) and subtract \$4,122 from the result</li> </ul>	50	13,461.
51 Alternative minimum foreign tax credit (see instructions)	51	
52 Tentative minimum tax. Subtract line 51 from line 50	52	13,461.
53 Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedule G, line 2a)	53	26,854.
54 <b>Alternative minimum tax.</b> Subtract line 53 from line 52. If zero or less, enter -0-. Enter here and on Form 1041, Schedule G, line 1c	54	0.

**Part IV Line 50 Computation Using Maximum Capital Gains Rates**

**Caution:** If you didn't complete Part V of Schedule D (Form 1041), the Schedule D Tax Worksheet, or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the instructions before completing this part.

55 Enter the amount from line 49	55	
56 Enter the amount from line 26 of Schedule D (Form 1041), line 13 of the Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as refigured for the AMT, if necessary)	56	
57 Enter the amount from Schedule D (Form 1041), line 18b, column (2) (as refigured for the AMT, if necessary). If you didn't complete Schedule D for the regular tax or the AMT, enter -0-	57	
58 If you didn't complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 56. Otherwise, add lines 56 and 57 and enter the <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary)	58	
59 Enter the <b>smaller</b> of line 55 or line 58	59	
60 Subtract line 59 from line 55	60	
61 If line 60 is \$206,100 or less, multiply line 60 by 26% (0.26). Otherwise, multiply line 60 by 28% (0.28) and subtract \$4,122 from the result	61	
62 Maximum amount subject to the 0% rate	62	\$2,800
63 Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 23; if zero or less, enter -0-	63	
64 Subtract line 63 from line 62. If zero or less, enter -0-	64	
65 Enter the <b>smaller</b> of line 55 or line 56	65	
66 Enter the <b>smaller</b> of line 64 or line 65. This amount is taxed at 0%	66	
67 Subtract line 66 from line 65	67	



**Part IV Line 50 Computation Using Maximum Capital Gains Rates** *(continued)*

<b>68</b> Maximum amount subject to rates below 20% .....	<b>68</b>	\$13,700	
<b>69</b> Enter the amount from line 64 .....	<b>69</b>		
<b>70</b> Enter the amount from line 27 of Schedule D (Form 1041), line 18 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 23; if zero or less, enter -0- .....	<b>70</b>		
<b>71</b> Add line 69 and line 70 .....	<b>71</b>		
<b>72</b> Subtract line 71 from line 68. If zero or less, enter -0- .....	<b>72</b>		
<b>73</b> Enter the <b>smaller</b> of line 67 or line 72 .....	<b>73</b>		
<b>74</b> Multiply line 73 by 15% (0.15) .....			<b>74</b>
<b>75</b> Add lines 66 and 73 .....	<b>75</b>		
<b>If lines 75 and 55 are the same, skip lines 76 through 80 and go to line 81. Otherwise, go to line 76.</b>			
<b>76</b> Subtract line 75 from line 65 .....	<b>76</b>		
<b>77</b> Multiply line 76 by 20% (0.20) .....			<b>77</b>
<b>If line 57 is zero or blank, skip lines 78 through 80 and go to line 81. Otherwise, go to line 78.</b>			
<b>78</b> Add lines 60, 75, and 76 .....	<b>78</b>		
<b>79</b> Subtract line 78 from line 55 .....	<b>79</b>		
<b>80</b> Multiply line 79 by 25% (0.25) .....			<b>80</b>
<b>81</b> Add lines 61, 74, 77, and 80 .....			<b>81</b>
<b>82</b> If line 55 is \$206,100 or less, multiply line 55 by 26% (0.26). Otherwise, multiply line 55 by 28% (0.28) and subtract \$4,122 from the result .....			<b>82</b>
<b>83</b> Enter the <b>smaller</b> of line 81 or line 82 here and on line 50 .....			<b>83</b>

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Schedule D	Net Short-Term Gain or Loss from Partnerships and S-Corporations	Statement 18
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Description of Activity	Gain or Loss
REBEL INDUSTRIES, LLC	-3,307.
Total to Schedule D, Part I, line 5	-3,307.

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Schedule D	Net Long-Term Gain or Loss from Partnerships and S-Corporations	Statement 19
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Description of Activity	Gain or Loss	28% Gain
REBEL INDUSTRIES, LLC	1,148.	
Total to Schedule D, Part II, line 12	1,148.	

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**SCHEDULE D  
(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**Capital Gains and Losses**

Attach to Form 1041, Form 5227, or Form 990-T.

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

Go to [www.irs.gov/F1041](http://www.irs.gov/F1041) for instructions and the latest information.

OMB No. 1545-0092

**2022**

Name of estate or trust <b>THE LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST C/O Bristol Consult</b>	Employer identification number <b>14-6285967</b>
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Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?  Yes  No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

**Note:** Form 5227 filers need to complete only Parts I and II.

<b>Part I Short-Term Capital Gains and Losses-Generally Assets Held 1 Year or Less</b> (see instructions)				
See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1 a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
<b>1 b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked .....				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked .....				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked .....				
<b>4</b> Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 .....				<b>4</b>
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts <u>See Statement 20</u> .....				<b>5</b> -3,307.
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2021 Capital Loss Carryover Worksheet .....				<b>6</b> ( )
<b>7</b> <b>Net short-term capital gain or (loss)</b> . Combine lines 1a through 6 in column (h). Enter here and on Part III, line 17, column (3) .....				<b>7</b> -3,307.

<b>Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than 1 Year</b> (see instructions)				
See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8 a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
<b>8 b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked .....				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked .....				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked .....				
<b>11</b> Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 .....				<b>11</b>
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts <u>See Statement 21</u> .....				<b>12</b> 1,148.
<b>13</b> Capital gain distributions .....				<b>13</b>
<b>14</b> Gain from Form 4797, Part I .....				<b>14</b>
<b>15</b> Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2021 Capital Loss Carryover Worksheet .....				<b>15</b> ( )
<b>16</b> <b>Net long-term capital gain or (loss)</b> . Combine lines 8a through 15 in column (h). Enter here and on Part II, line 18a, column (3) .....				<b>16</b> 1,148.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2022

THE LOUIS AND GLORIA FLANZER

<b>Part III Summary of Parts I and II</b>		(1) Beneficiaries'	(2) Estate's or trust's	(3) Total
<i>Caution: Read the instructions before completing this part.</i>				
17	Net short-term gain or (loss)	17	-3,307.	-3,307.
18	Net long-term gain or (loss):			
a	Total for year	18a	1,148.	1,148.
b	Unrecaptured section 1250 gain (see line 18 of the worksheet)	18b		
c	28% rate gain	18c		
19	Total net gain or (loss). Combine lines 17 and 18a	19	-2,159.	-2,159.

**Note:** If line 19, col (3), is a net gain, enter the gain on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4a). If lines 18a and 19, col (2), are net gains, go to Part V, and don't complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

<b>Part IV Capital Loss Limitation</b>			
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4c, if a trust), the smaller of:		
a	The loss on line 19, column (3) or b \$3,000	20	( 2,159. )

**Note:** If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 23 (or Form 990-T, Part I, line 11), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover.

**Part V Tax Computation Using Maximum Capital Gains Rates**

**Form 1041 filers.** Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 23, is more than zero.

**Caution:** Skip this part and complete the Schedule D Tax Worksheet in the instructions if:

- Either line 18b, col. (2), or line 18c, col. (2), is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g, are more than zero, or
- There are amounts on lines 4e and 4g of Form 4952.

**Form 990-T trusts.** Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, Part I, line 11, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col. (2), or line 18c, col. (2), is more than zero.

21	Enter taxable income from Form 1041, line 23 (or Form 990-T, Part I, line 11)	21		
22	Enter the smaller of line 18a or 19 in column (2) but not less than zero	22		
23	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	23		
24	Add lines 22 and 23	24		
25	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0-	25		
26	Subtract line 25 from line 24. If zero or less, enter -0-	26		
27	Subtract line 26 from line 21. If zero or less, enter -0-	27		
28	Enter the smaller of the amount on line 21 or \$2,800	28		
29	Enter the smaller of the amount on line 27 or line 28	29		
30	Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0%	30		
31	Enter the smaller of line 21 or line 26	31		
32	Subtract line 30 from line 26	32		
33	Enter the smaller of line 21 or \$13,700	33		
34	Add lines 27 and 30	34		
35	Subtract line 34 from line 33. If zero or less, enter -0-	35		
36	Enter the smaller of line 32 or line 35	36		
37	Multiply line 36 by 15% (0.15)	37		
38	Enter the amount from line 31	38		
39	Add lines 30 and 36	39		
40	Subtract line 39 from line 38. If zero or less, enter -0-	40		
41	Multiply line 40 by 20% (0.20)	41		
42	Figure the tax on the amount on line 27. Use the 2022 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the Instructions for Form 1041)	42		
43	Add lines 37, 41, and 42	43		
44	Figure the tax on the amount on line 21. Use the 2022 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the Instructions for Form 1041)	44		
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, Part I, line 1a (or Form 990-T, Part II, line 2)	45		

**SCHEDULE D  
(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**Alternative Minimum Tax  
Capital Gains and Losses**

Attach to Form 1041, Form 5227, or Form 990-T.

Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

Go to [www.irs.gov/F1041](http://www.irs.gov/F1041) for instructions and the latest information.

OMB No. 1545-0092

**2022**

Name of estate or trust  
**THE LOUIS AND GLORIA FLANZER  
PHILANTHROPIC TRUST C/O Bristol Consult**

Employer identification number  
**14-6285967**

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?  Yes  No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

**Note:** Form 5227 filers need to complete only Parts I and II.

**Part I Short-Term Capital Gains and Losses-Generally Assets Held 1 Year or Less** (see instructions)

See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1 a</b> Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
<b>1 b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked .....				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked .....				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked .....				
<b>4</b> Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 .....				<b>4</b>
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts <u>See Statement 22</u> .....				<b>5</b> -3,307.
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2021 Capital Loss Carryover Worksheet .....				<b>6</b> ( )
<b>7</b> <b>Net short-term capital gain or (loss).</b> Combine lines 1a through 6 in column (h). Enter here and on Part III, line 17, column (3) .....				<b>7</b> -3,307.

**Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than 1 Year** (see instructions)

See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8 a</b> Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
<b>8 b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked .....				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked .....				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked .....				
<b>11</b> Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 .....				<b>11</b>
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts <u>See Statement 23</u> .....				<b>12</b> 1,148.
<b>13</b> Capital gain distributions .....				<b>13</b>
<b>14</b> Gain from Form 4797, Part I .....				<b>14</b>
<b>15</b> Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2021 Capital Loss Carryover Worksheet .....				<b>15</b> ( )
<b>16</b> <b>Net long-term capital gain or (loss).</b> Combine lines 8a through 15 in column (h). Enter here and on Part II, line 18a, column (3) .....				<b>16</b> 1,148.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2022

Alternative Minimum Tax

<b>Part III Summary of Parts I and II</b>		(1) Beneficiaries'	(2) Estate's or trust's	(3) Total
<b>Caution:</b> Read the instructions before completing this part.				
17	Net short-term gain or (loss)	17	-3,307.	-3,307.
18	Net long-term gain or (loss):			
a	Total for year	18a	1,148.	1,148.
b	Unrecaptured section 1250 gain (see line 18 of the worksheet)	18b		
c	28% rate gain	18c		
19	Total net gain or (loss). Combine lines 17 and 18a	19	-2,159.	-2,159.

**Note:** If line 19, col (3), is a net gain, enter the gain on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4a). If lines 18a and 19, col (2), are net gains, go to Part V, and don't complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet**, as necessary.

<b>Part IV Capital Loss Limitation</b>		
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4c, if a trust), the smaller of:	
a	The loss on line 19, column (3) or b \$3,000	20 ( )

**Note:** If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 23 (or Form 990-T, Part I, line 11), is a loss, complete the **Capital Loss Carryover Worksheet** in the instructions to figure your capital loss carryover.

**Part V Tax Computation Using Maximum Capital Gains Rates**

**Form 1041 filers.** Complete this part **only** if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 23, is more than zero.

**Caution:** Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if:

- Either line 18b, col. (2), or line 18c, col. (2), is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g, are more than zero, or
- There are amounts on lines 4e and 4g of Form 4952.

**Form 990-T trusts.** Complete this part **only** if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, Part I, line 11, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 18b, col. (2), or line 18c, col. (2), is more than zero.

21	Enter taxable income from Form 1041, line 23 (or Form 990-T, Part I, line 11)	21		
22	Enter the smaller of line 18a or 19 in column (2) but not less than zero	22		
23	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	23		
24	Add lines 22 and 23	24		
25	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0-	25		
26	Subtract line 25 from line 24. If zero or less, enter -0-	26		
27	Subtract line 26 from line 21. If zero or less, enter -0-	27		
28	Enter the smaller of the amount on line 21 or \$2,800	28		
29	Enter the smaller of the amount on line 27 or line 28	29		
30	Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0%	30		
31	Enter the smaller of line 21 or line 26	31		
32	Subtract line 30 from line 26	32		
33	Enter the smaller of line 21 or \$13,700	33		
34	Add lines 27 and 30	34		
35	Subtract line 34 from line 33. If zero or less, enter -0-	35		
36	Enter the smaller of line 32 or line 35	36		
37	Multiply line 36 by 15% (0.15)	37		
38	Enter the amount from line 31	38		
39	Add lines 30 and 36	39		
40	Subtract line 39 from line 38. If zero or less, enter -0-	40		
41	Multiply line 40 by 20% (0.20)	41		
42	Figure the tax on the amount on line 27. Use the 2022 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the Instructions for Form 1041)	42		
43	Add lines 37, 41, and 42	43		
44	Figure the tax on the amount on line 21. Use the 2022 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the Instructions for Form 1041)	44		
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, Part I, line 1a (or Form 990-T, Part II, line 2)	45		

# Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return. Form 990-T

**2022**

Go to [www.irs.gov/Form2220](http://www.irs.gov/Form2220) for instructions and the latest information.

Name <b>THE LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST C/O Bristol Consult</b>	Employer identification number <b>14-6285967</b>
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**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 estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

<b>Part I Required Annual Payment</b>			
1 Total tax (see instructions) .....		1	26,854.
2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....	2a		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	2b		
c Credit for federal tax paid on fuels (see instructions) .....	2c		
d Total. Add lines 2a through 2c .....	2d		
3 Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty .....		3	26,854.
4 Enter the tax shown on the corporation's 2021 income tax return. See instructions. <b>Caution:</b> If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 .....		4	6,297.
5 <b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....		5	6,297.

<b>Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty. See instructions.</b>	
6	<input type="checkbox"/> The corporation is using the adjusted seasonal installment method.
7	<input type="checkbox"/> The corporation is using the annualized income installment method.
8	<input type="checkbox"/> The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

<b>Part III Figuring the Underpayment</b>					
		(a)	(b)	(c)	(d)
9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th ( <b>Form 990-PF filers:</b> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....	9	05/15/22	06/15/22	09/15/22	12/15/22
10 <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If 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	1,574.	1,575.	1,574.	1,574.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions .....	11				6,400.
<b>Complete lines 12 through 18 of one column before going to the next column.</b>					
12 Enter amount, if any, from line 18 of the preceding column .....	12				
13 Add lines 11 and 12 .....	13				6,400.
14 Add amounts on lines 16 and 17 of the preceding column .....	14		1,574.	3,149.	4,723.
15 Subtract line 14 from line 13. If zero or less, enter -0- .....	15	0.	0.	0.	1,677.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....	16		1,574.	3,149.	
17 <b>Underpayment.</b> 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	1,574.	1,575.	1,574.	
18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....	18				

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. <b>(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.)</b> See instructions	<b>19</b>			
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19	<b>20</b>			
<b>21</b> Number of days on line 20 after 4/15/2022 and before 7/1/2022	<b>21</b>			
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21}}{365} \times 4\%$ (0.04)	<b>22</b> \$	\$	\$	\$
<b>23</b> Number of days on line 20 after 6/30/2022 and before 10/1/2022	<b>23</b>			
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23}}{365} \times 5\%$ (0.05)	<b>24</b> \$	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2022 and before 1/1/2023	<b>25</b>			
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25}}{365} \times 6\%$ (0.06)	<b>26</b> \$	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2022 and before 4/1/2023	<b>27</b>	See Attached Worksheet		
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27}}{365} \times 7\%$ (0.07)	<b>28</b> \$	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2023 and before 7/1/2023	<b>29</b>			
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29}}{365} \times \%$	<b>30</b> \$	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2023 and before 10/1/2023	<b>31</b>			
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31}}{365} \times \%$	<b>32</b> \$	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2023 and before 1/1/2024	<b>33</b>			
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33}}{365} \times \%$	<b>34</b> \$	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2023 and before 3/16/2024	<b>35</b>			
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35}}{365} \times \%$	<b>36</b> \$	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36	<b>37</b> \$	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	<b>38</b>			\$ 89.

\* 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](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.



Form 990-T  
UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s) THE LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST C/O Bristol Consult					Identifying Number 14-6285967
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
05/15/22	1,574.	1,574.	31	.000109589	5.
06/15/22	1,575.	3,149.	15	.000109589	5.
06/30/22	0.	3,149.	77	.000136986	33.
09/15/22	1,574.	4,723.	15	.000136986	10.
09/30/22	0.	4,723.	46	.000164384	36.
12/15/22	1,574.	6,297.			
12/15/22	-6,400.	-103.			
12/31/22	0.	-103.			

Penalty Due (Sum of Column F) ..... 89.

\* Date of estimated tax payment, withholding credit date or installment due date.

Schedule D	Net Short-Term Gain or Loss from Partnerships and S-Corporations	Statement	20
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Description of Activity	Gain or Loss
REBEL INDUSTRIES, LLC	-3,307.
Total to Schedule D, Part I, line 5	-3,307.

Schedule D	Net Long-Term Gain or Loss from Partnerships and S-Corporations	Statement	21
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Description of Activity	Gain or Loss	28% Gain
REBEL INDUSTRIES, LLC	1,148.	
Total to Schedule D, Part II, line 12	1,148.	

Schedule D AMT	Net Short-Term Gain or Loss from Partnerships and S-Corporations	Statement	22
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Description of Activity	Gain or Loss
REBEL INDUSTRIES, LLC	-3,307.
REBEL INDUSTRIES, LLC	1,148.
Total to Schedule D, Part I, line 5	-2,159.

Schedule D AMT	Net Long-Term Gain or Loss from Partnerships and S-Corporations	Statement	23
----------------	---	-----------	----

Description of Activity	Gain or Loss	28% Gain
REBEL INDUSTRIES, LLC	-3,307.	
REBEL INDUSTRIES, LLC	1,148.	
Total to Schedule D, Part II, line 12	-2,159.	

## Passive Activity Loss Limitations

See separate instructions.  
Attach to Form 1040, 1040-SR, or 1041.  
Go to [www.irs.gov/Form8582](http://www.irs.gov/Form8582) for instructions and the latest information.

Name(s) shown on return <b>THE LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST C/O Bristol Consult</b>	Identifying number <b>14-6285967</b>
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**Part I 2022 Passive Activity Loss**

**Caution:** Complete Parts IV and V before completing Part I.

<b>Rental Real Estate Activities With Active Participation</b> (For the definition of active participation, see <i>Special Allowance for Rental Real Estate Activities</i> in the instructions.)		
1a Activities with net income (enter the amount from Part IV, column (a))	<b>1a</b>	
b Activities with net loss (enter the amount from Part IV, column (b))	<b>1b</b>	( )
c Prior years' unallowed losses (enter the amount from Part IV, column (c))	<b>1c</b>	( )
d Combine lines 1a, 1b, and 1c	<b>1d</b>	

<b>All Other Passive Activities</b>		
2a Activities with net income (enter the amount from Part V, column (a))	<b>2a</b>	80,447.
b Activities with net loss (enter the amount from Part V, column (b))	<b>2b</b>	( 14 )
c Prior years' unallowed losses (enter the amount from Part V, column (c))	<b>2c</b>	( )
d Combine lines 2a, 2b, and 2c	<b>2d</b>	80,433.
3 Combine lines 1d and 2d. If this line is zero or more, stop here and include this form with your return; all losses are allowed, including any prior year unallowed losses entered on line 1c or 2c. Report the losses on the forms and schedules normally used		<b>3</b>

- If line 3 is a loss and:
- Line 1d is a loss, go to Part II.
  - Line 2d is a loss (and line 1d is zero or more), skip Part II and go to line 10.

**Caution:** If your filing status is married filing separately and you lived with your spouse at any time during the year, **do not** complete Part II. Instead, go to line 10.

**Part II Special Allowance for Rental Real Estate Activities With Active Participation**

**Note:** Enter all numbers in Part II as positive amounts. See instructions for an example.

4 Enter the <b>smaller</b> of the loss on line 1d or the loss on line 3	<b>4</b>	
5 Enter \$150,000. If married filing separately, see instructions	<b>5</b>	
6 Enter modified adjusted gross income, but not less than zero. See instructions <b>Note:</b> If line 6 is greater than or equal to line 5, skip lines 7 and 8 and enter -0- on line 9. Otherwise, go to line 7.	<b>6</b>	
7 Subtract line 6 from line 5	<b>7</b>	
8 Multiply line 7 by 50% (0.50). <b>Do not</b> enter more than \$25,000. If married filing separately, see instructions	<b>8</b>	
9 Enter the <b>smaller</b> of line 4 or line 8	<b>9</b>	

**Part III Total Losses Allowed**

10 Add the income, if any, on lines 1a and 2a and enter the total	<b>10</b>
11 <b>Total losses allowed from all passive activities for 2022.</b> Add lines 9 and 10. See instructions to find out how to report the losses on your tax return	<b>11</b>

**Part IV Complete This Part Before Part I, Lines 1a, 1b, and 1c. See instructions.**

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 1a)	(b) Net loss (line 1b)	(c) Unallowed loss (line 1c)	(d) Gain	(e) Loss
<b>Total.</b> Enter on Part I, lines 1a, 1b, and 1c ...					

**Part V Complete This Part Before Part I, Lines 2a, 2b, and 2c. See instructions.**

Name of activity	Current year		Prior years	Overall gain or loss	
	(a) Net income (line 2a)	(b) Net loss (line 2b)	(c) Unallowed loss (line 2c)	(d) Gain	(e) Loss
	See Attached Statement for Part V				
<b>Total.</b> Enter on Part I, lines 2a, 2b, and 2c ...	80,447.	-14.			

**Part VI Use This Part if an Amount Is Shown on Part II, Line 9. See instructions.**

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Special allowance	(d) Subtract column (c) from column (a)
<b>Total</b> .....					

**Part VII Allocation of Unallowed Losses. See instructions.**

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Ratio	(c) Unallowed loss
<b>Total</b> .....				

**Part VIII Allowed Losses. See instructions.**

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
<b>Total</b> .....				

**Part IX Activities With Losses Reported on Two or More Forms or Schedules.** See instructions.

Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
<b>Form or schedule and line number to be reported on (see instructions):</b> .....					
<b>1a</b> Net loss plus prior year unallowed loss from form or schedule .....					
<b>b</b> Net income from form or schedule .....					
<b>c</b> Subtract line 1b from line 1a. If zero or less, enter -0- .....					
<b>Form or schedule and line number to be reported on (see instructions):</b> .....					
<b>1a</b> Net loss plus prior year unallowed loss from form or schedule .....					
<b>b</b> Net income from form or schedule .....					
<b>c</b> Subtract line 1b from line 1a. If zero or less, enter -0- .....					
<b>Form or schedule and line number to be reported on (see instructions):</b> .....					
<b>1a</b> Net loss plus prior year unallowed loss from form or schedule .....					
<b>b</b> Net income from form or schedule .....					
<b>c</b> Subtract line 1b from line 1a. If zero or less, enter -0- .....					
<b>Total</b> .....					

Name of Activity	Current Year		Prior Year Unallowed Loss	Overall Gain or Loss	
	Net Income	Net Loss		Gain	Loss
	Rebel Industries - UBTI	0.		-14.	
PM PARTNERS	80,447.	0.		80,447.	
Totals	80,447.	-14.		80,447.	-14.

A Name	Form or Schedule	Gain/Loss	Prior Year C/O	Net Gain/Loss	Unallowed Loss	Allowed
						Loss
Rebel Industries	Sch E					
- UBTI		-14.		-14.		14.
PM PARTNERS	Sch E	80,447.		80,447.		
Totals		80,433.		80,433.		14.
Prior year carryovers allowed due to current year net activity income						
Total						14.

**Return by a U.S. Transferor of Property  
 to a Foreign Corporation**

OMB No. 1545-0026

▶ **Go to [www.irs.gov/Form926](http://www.irs.gov/Form926) for instructions and the latest information.**  
 ▶ **Attach to your income tax return for the year of the transfer or distribution.**

Attachment  
 Sequence No. **128**

**Part I U.S. Transferor Information** (see instructions)

Name of transferor <b>THE LOUIS AND GLORIA FLANZER PHILANTHROPIC TRUST C/O Bristol Consult</b>	Identifying number (see instructions) <b>14-6285967</b>
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- 1** Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?  Yes  No
- 2** If the transferor was a corporation, complete questions 2a through 2d.
- a** If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by five or fewer domestic corporations?  Yes  No
- b** Did the transferor remain in existence after the transfer?  Yes  No
- If not, list the controlling shareholder(s) and their identifying number(s).

Controlling shareholder	Identifying number

- c** If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation?  Yes  No
- If not, list the name and employer identification number (EIN) of the parent corporation.

Name of parent corporation	EIN of parent corporation

- d** Have basis adjustments under section 367(a)(4) been made?  Yes  No

- 3** If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such under section 367), complete questions 3a through 3d.
- a** List the name and EIN of the transferor's partnership.

Name of partnership	EIN of partnership

- b** Did the partner pick up its pro rata share of gain on the transfer of partnership assets?  Yes  No
- c** Is the partner disposing of its **entire** interest in the partnership?  Yes  No
- d** Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market?  Yes  No

**Part II Transferee Foreign Corporation Information** (see instructions)

4 Name of transferee (foreign corporation) <b>MASTER HOLDCO I LLC</b>	5a Identifying number, if any <b>98-1029194</b>
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6 Address (including country) <b>488 ROUTE DE LONGWY Luxembourg</b>	5b Reference ID number
--	------------------------

7 Country code of country of incorporation or organization  
**LU**

8 Foreign law characterization (see instructions)  
**CORPORATION**

- 9** Is the transferee foreign corporation a controlled foreign corporation?  Yes  No

**Part III Information Regarding Transfer of Property** (see instructions)

**Section A - Cash**

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash	12/16/2022		0.		

**10** Was cash the only property transferred?  Yes  No  
 If "Yes," skip the remainder of Part III and go to Part IV.

**Section B - Other Property (other than intangible property subject to section 367(d))**

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities	12/16/2022	SHARES GREENED	30.	2.	
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
<b>Totals</b>			<b>30.</b>	<b>2.</b>	

**11** Did the transferor transfer stock or securities subject to section 367(a) with respect to which a gain recognition agreement was filed?  Yes  No

**12 a** Were any assets of a foreign branch (including a branch that is a foreign disregarded entity) transferred to a foreign corporation?  Yes  No  
 If "Yes," go to line 12b.

**b** Was the transferor a domestic corporation that transferred substantially all of the assets of a foreign branch (including a branch that is a foreign disregarded entity) to a specified 10%-owned foreign corporation?  Yes  No  
 If "Yes," continue to line 12c. If "No," skip lines 12c and 12d, and go to line 13.

**c** Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation?  Yes  No  
 If "Yes," continue to line 12d. If "No," skip line 12d, and go to line 13.

**d** Enter the transferred loss amount included in gross income as required under section 91 ► \$ \_\_\_\_\_

**13** Did the transferor transfer property described in section 367(d)(4)?  Yes  No  
 If "No," skip Section C and questions 14a through 15.

**Section C - Intangible Property Subject to Section 367(d)**

Type of property	(a) Date of transfer	(b) Description of property	(c) Useful life	(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)						
<b>Totals</b>						



- 14 a Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years?  Yes  No
- b At the time of the transfer, did any of the transferred intangible property have an indefinite useful life?  Yes  No
- c Did the transferor choose to apply the 20-year inclusion period provided under Regulations section 1.367(d)-1(c)(3)(ii) for any intangible property?  Yes  No
- d If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) ► \$ \_\_\_\_\_
- 15 Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)?  Yes  No

**Supplemental Part III Information Required To Be Reported** (see instructions)

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**Part IV Additional Information Regarding Transfer of Property** (see instructions)

- 16 Enter the transferor's interest in the transferee foreign corporation before and after the transfer.  
(a) Before 0.000 % (b) After 0.371 %
- 17 Type of nonrecognition transaction (see instructions) ► \_\_\_\_\_
- 18 Indicate whether any transfer reported in Part III is subject to any of the following.
  - a Gain recognition under section 904(f)(3)  Yes  No
  - b Gain recognition under section 904(f)(5)(F)  Yes  No
  - c Recapture under section 1503(d)  Yes  No
  - d Exchange gain under section 987  Yes  No
- 19 Did this transfer result from a change in entity classification?  Yes  No
- 20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions)  Yes  No  
If "Yes," complete lines 20b and 20c.
- b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ► \$ \_\_\_\_\_
- c Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?  Yes  No
- 21 Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation covered by section 367(e)(1)? See instructions  Yes  No

Dougherty & Connell  
Certified Public Accountants  
450 Wireless Boulevard  
Hauppauge, NY 11788

November 14, 2023

THE LOUIS AND GLORIA FLANZER  
PHILANTHROPIC TRUST C/O Bristol Consult  
1266 FIRST STREET STE 1  
SARASOTA, FL 34236

THE LOUIS AND GLORIA FLANZER:

We have prepared and enclosed your 2022 Florida return.

FLORIDA FORM F-1120 RETURN:

The Florida Form F-1120 return has been prepared for electronic filing. If you wish to have it transmitted electronically to the Florida DOR, please contact our office and we will submit the electronic return to the Florida DOR. Do not mail the paper copy of the return to the Florida DOR.

No payment is required.

Your overpayment in the amount of \$2,500.00 has been applied to your Florida estimated tax.

A copy of the return is enclosed for your files. We suggest that you retain this copy indefinitely.

Warm Regards,

Kevin P. Dougherty

**Florida Tentative Income / Franchise Tax Return  
and Application for Extension of Time to File Return**

**1019**  
F-7004  
R. 01/17  
Rule 12C-1.051  
Florida Administrative Code  
Effective 01/17

**Information for Filing Florida Form F-7004**

F-7004  
R. 01/17

**When to file** - File this application on or before the original due date of the taxpayer's corporate income tax or partnership return. Do not file before the end of the tax year.

To file online go to [www.floridarevenue.com](http://www.floridarevenue.com)

**Penalties** - If you are required to pay tax with this application, failure to pay will void any extension of time and subject the taxpayer to penalties and interest. There is also a penalty for late-file return when no tax is due.

**Signature** - A person authorized by the taxpayer must sign Florida Form F-7004. They must be an officer or partner of the taxpayer; a person currently enrolled to practice before the Internal Revenue Service (IRS); or attorney or Certified Public Accountant qualified to practice before the IRS under Public Law 89-332.

**The Florida Form F-7004 must be filed** - To receive an extension of time to file your Florida return, Florida Form F-7004 must be timely filed, even if you have already filed a federal extension request. A federal extension by itself does not extend the time to file a Florida return.

An extension for Florida tax purposes may be granted, even though no federal extension was granted. See Rule 12C-1.0222, F.A.C., for information on the requirements that must be met for your request for an extension of time to be valid.

A. If applicable, state the reason you need the extension:

\_\_\_\_\_

B. Type of federal return filed: 990-T  
 Contact person for questions: Eric Kaplan  
 Telephone number: 917-915-0404  
 Contact Person email address: EKaplan@bristolllc.c

Extension of Time Request	Florida Income/Franchise Tax Due
1. Tentative amount of Florida tax for the taxable year	1. 4,000.00
2. LESS: Estimated tax payments for the taxable year	2. 0.00
3. Balance due - You must pay 100% of the tax tentatively determined due with this extension request.	3. 4,000.00

Transfer the amount on Line 3 to **Tentative tax due**.

**Make checks payable and mail to:**

FLORIDA DEPARTMENT OF REVENUE, 5050 W TENNESSEE STREET, TALLAHASSEE FL 32399-0135

244961  
10-04-22

**Florida Department of Revenue - Corporate Income Tax  
Florida Tentative Income / Franchise Tax Return  
and Application for Extension of Time to File Return**

**1019**  
F-7004  
R. 01/17

Name **THE LOUIS AND GLORIA FLANZER**  
 Address **PHILANTHROPIC TRUST C/O Bristol Consult**  
**1266 FIRST STREET**  
 City/State/ZIP **SARASOTA, FL 34236**

FEIN 14-6285967  
 Taxable Year End 12/31/22  
 FILING STATUS Partnership  S-corporation   
 All other federal returns to be filed   
 Tentative Tax Due \$ 4,000.00

Under penalties of perjury, I declare that I have been authorized by the above named taxpayer to make this application, that to the best of my knowledge and belief the statements herein are true and correct:

Sign Here: \_\_\_\_\_

Date: \_\_\_\_\_

146285967	0	0	0
3	0	0	0
20221231	0	0	0
0	0	0	0
012	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	400000

400000

8333 0 20221231 0002005030 4 3146285967 0000 7

**Florida Department of Revenue - Corporate Income Tax  
Declaration/Installment of Florida Estimated Income/Franchise Tax**

**1019**  
F-1120ES  
R. 01/17  
Rule 12C-1.051  
Florida Administrative Code  
Effective 01/17

**Information for Filing Florida Form F-1120ES**

F-1120ES  
R. 01/17

**1. Who must make estimated tax payments** - Every domestic or foreign corporation or other entity subject to taxation under the provisions of Chapter 220, Florida Statutes, must declare estimated tax for the taxable year if the amount of income tax liability for the year will be more than \$2,500.

Contact person for questions: Eric Kaplan  
Phone number: 917-915-0404  
Contact person email address: EKaplan@bristolllc.com

**To file online go to [www.floridarevenue.com](http://www.floridarevenue.com)**

**2. Due Date** - Generally, for a 6/30 tax year end, estimated tax must be paid on or before the last day of the 4th, 6th, and 9th month of the taxable year and the last day of the taxable year. For all other year ends, estimated tax is generally due on or before the last day of the 5th, 6th, and 9th month of the taxable year and the last day of the tax year. 25 percent (.25) of the estimated tax must be paid with each installment.

Estimated Tax Payment	Income/Franchise Tax
1. Amount of this installment	1. 625.00
2. Amount of overpayment from last year for credit to estimated tax and applied to this installment	2. 625.00
3. Amount of this payment (Line 1 minus Line 2)	3.

**3. Amended Declaration** - To prepare an amended declaration, write "Amended" on Florida Form F-1120ES and complete Lines 1 through 3 of the correct installment. You may file an amendment during any interval between installment dates prescribed for the taxable year. You must timely pay any increase in the estimated tax.

Transfer the amount on Line 3 to **Estimated tax payment** box on front.

**4. Interest and Penalties** - If you fail to comply with the law about filing a declaration or paying estimated tax, you will be assessed interest and penalties.

**Make checks payable and mail to:**

Florida Department of Revenue, 5050 W Tennessee Street, Tallahassee FL 32399-0135

244111 10-04-22

**Florida Department of Revenue - Corporate Income Tax  
Declaration/Installment of Florida Estimated Income/Franchise Tax**

**1019**  
F-1120ES  
R. 01/17

**Name** THE LOUIS AND GLORIA FLANZER  
**Address** PHILANTHROPIC TRUST C/O Bristol Consult  
1266 FIRST STREET  
**City/State/ZIP** SARASOTA, FL 34236

Installment # 1  
FEIN 14-6285967  
Taxable Year Ending 12/31/23  
Estimated Tax Payment \$

DOR USE ONLY  
\_\_\_ / \_\_\_ / \_\_\_

146285967	0	0	0
0	0	0	0
20231231	0	0	0
0	0	0	0
012	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0

0 8333 0 20231231 0002005033 8 3146285967 0000 7

**Florida Department of Revenue - Corporate Income Tax  
Declaration/Installment of Florida Estimated Income/Franchise Tax**

**1019**  
F-1120ES  
R. 01/17  
Rule 12C-1.051  
Florida Administrative Code  
Effective 01/17

**Information for Filing Florida Form F-1120ES**

F-1120ES  
R. 01/17

**1. Who must make estimated tax payments** - Every domestic or foreign corporation or other entity subject to taxation under the provisions of Chapter 220, Florida Statutes, must declare estimated tax for the taxable year if the amount of income tax liability for the year will be more than \$2,500.

Contact person for questions: Eric Kaplan  
Phone number: 917-915-0404  
Contact person email address: EKaplan@bristolllc.com

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Estimated Tax Payment	Income/Franchise Tax
1. Amount of this installment	1. 625.00
2. Amount of overpayment from last year for credit to estimated tax and applied to this installment	2. 625.00
3. Amount of this payment (Line 1 minus Line 2)	3.

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Transfer the amount on Line 3 to **Estimated tax payment** box on front.

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**Make checks payable and mail to:**

Florida Department of Revenue, 5050 W Tennessee Street, Tallahassee FL 32399-0135

244111 10-04-22

**Florida Department of Revenue - Corporate Income Tax  
Declaration/Installment of Florida Estimated Income/Franchise Tax**

**1019**  
F-1120ES  
R. 01/17

Name **THE LOUIS AND GLORIA FLANZER**  
**PHILANTHROPIC TRUST C/O Bristol Consult**  
Address **1266 FIRST STREET**  
City/State/ZIP **SARASOTA, FL 34236**

Installment # 2  
FEIN 14-6285967  
Taxable Year Ending 12/31/23  
Estimated Tax Payment \$

DOR USE ONLY  
\_\_\_ / \_\_\_ / \_\_\_

146285967	0	0	0
0	0	0	0
20231231	0	0	0
0	0	0	0
012	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0

0 8333 0 20231231 0002005033 8 3146285967 0000 7

**Florida Department of Revenue - Corporate Income Tax  
Declaration/Installment of Florida Estimated Income/Franchise Tax**

**1019**  
F-1120ES  
R. 01/17  
Rule 12C-1.051  
Florida Administrative Code  
Effective 01/17

**Information for Filing Florida Form F-1120ES**

F-1120ES  
R. 01/17

**1. Who must make estimated tax payments** - Every domestic or foreign corporation or other entity subject to taxation under the provisions of Chapter 220, Florida Statutes, must declare estimated tax for the taxable year if the amount of income tax liability for the year will be more than \$2,500.

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Phone number: 917-915-0404  
Contact person email address: EKaplan@bristolllc.com

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3. Amount of this payment (Line 1 minus Line 2)	3.

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Florida Department of Revenue, 5050 W Tennessee Street, Tallahassee FL 32399-0135

244111 10-04-22

**Florida Department of Revenue - Corporate Income Tax  
Declaration/Installment of Florida Estimated Income/Franchise Tax**

**1019**  
F-1120ES  
R. 01/17

Name **THE LOUIS AND GLORIA FLANZER**  
**PHILANTHROPIC TRUST C/O Bristol Consult**  
Address **1266 FIRST STREET**  
City/State/ZIP **SARASOTA, FL 34236**

Installment # 3  
FEIN 14-6285967  
Taxable Year Ending 12/31/23  
Estimated Tax Payment \$

DOR USE ONLY  
\_\_\_ / \_\_\_ / \_\_\_

146285967	0	0	0
0	0	0	0
20231231	0	0	0
0	0	0	0
012	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0

0 8333 0 20231231 0002005033 8 3146285967 0000 7

**Florida Department of Revenue - Corporate Income Tax  
Declaration/Installment of Florida Estimated Income/Franchise Tax**

**1019**  
F-1120ES  
R. 01/17  
Rule 12C-1.051  
Florida Administrative Code  
Effective 01/17

**Information for Filing Florida Form F-1120ES**

F-1120ES  
R. 01/17

**1. Who must make estimated tax payments** - Every domestic or foreign corporation or other entity subject to taxation under the provisions of Chapter 220, Florida Statutes, must declare estimated tax for the taxable year if the amount of income tax liability for the year will be more than \$2,500.

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**To file online go to [www.floridarevenue.com](http://www.floridarevenue.com)**

**2. Due Date** - Generally, for a 6/30 tax year end, estimated tax must be paid on or before the last day of the 4th, 6th, and 9th month of the taxable year and the last day of the taxable year. For all other year ends, estimated tax is generally due on or before the last day of the 5th, 6th, and 9th month of the taxable year and the last day of the tax year. 25 percent (.25) of the estimated tax must be paid with each installment.

Estimated Tax Payment	Income/Franchise Tax
1. Amount of this installment	1. 625.00
2. Amount of overpayment from last year for credit to estimated tax and applied to this installment	2. 625.00
3. Amount of this payment (Line 1 minus Line 2)	3.

**3. Amended Declaration** - To prepare an amended declaration, write "Amended" on Florida Form F-1120ES and complete Lines 1 through 3 of the correct installment. You may file an amendment during any interval between installment dates prescribed for the taxable year. You must timely pay any increase in the estimated tax.

Transfer the amount on Line 3 to **Estimated tax payment** box on front.

**4. Interest and Penalties** - If you fail to comply with the law about filing a declaration or paying estimated tax, you will be assessed interest and penalties.

**Make checks payable and mail to:**

Florida Department of Revenue, 5050 W Tennessee Street, Tallahassee FL 32399-0135

244111 10-04-22

**Florida Department of Revenue - Corporate Income Tax  
Declaration/Installment of Florida Estimated Income/Franchise Tax**

**1019**  
F-1120ES  
R. 01/17

**Name** THE LOUIS AND GLORIA FLANZER  
**Address** PHILANTHROPIC TRUST C/O Bristol Consult  
1266 FIRST STREET  
**City/State/ZIP** SARASOTA, FL 34236

Installment # 4  
FEIN 14-6285967  
Taxable Year Ending 12/31/23  
Estimated Tax Payment \$

DOR USE ONLY  
\_\_\_ / \_\_\_ / \_\_\_

146285967	0	0	0
0	0	0	0
20231231	0	0	0
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012	0	0	0
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0	0	0	0

0 8333 0 20231231 0002005033 8 3146285967 0000 7



Florida Corporate Income/Franchise Tax Return

F-1120, R. 01/23 1019

FEIN 14-6285967

For calendar year 2022 or tax year beginning

, 2022 ending

Rule 12C-1.051 Florida Administrative Code Effective 01/23 Page 1 of 6

833302022123100020050377314628596700007

Name THE LOUIS AND GLORIA FLANZER
PHILANTHROPIC TRUST C/O Bristol Consult
Address 1266 FIRST STREET
City/State/ZIP SARASOTA, FL 34236

Check here if any changes have been made to name or address

Computation of Florida Net Income Tax

Table with 2 columns: Description and Amount. Rows include Federal taxable income, State income taxes, Additions, Subtractions, Florida exemption, and Total amount due.

244081 10-04-22

Payment Coupon for Florida Corporate Income Tax Return

1019 F-1120 R. 01/23

Do Not Detach

YEAR ENDING 12/31/22

To ensure proper credit to your account, enclose your check with tax return when mailing.

Name THE LOUIS AND GLORIA FLANZER
PHILANTHROPIC TRUST C/O Brist
Address 1266 FIRST STREET
City/State/ZIP SARASOTA, FL 34236

If 6/30 year end, return is due 1st day of the 4th month after the close of the taxable year, otherwise return is due 1st day of the 5th month after the close of the taxable year.

Table with 4 columns of numbers: 146285967, 0, 0, 0; 20220101, 0, 0, 0; 20221231, 7727400, 0, 0; 00000000, 0.000000, 0, 0; 012, 0, 150000, 0; 202, 0, 0, 0; 7727400, 0, 400000, 0; 0, 5000000, 250000, -250000

-250000

8333 0 20221231 0002005037 7 3146285967 0000 7





THE LOUIS AND GLORIA FLANZER PHILANT

FEIN 14-6285967

1019 F-1120 R. 01/23 Page 2 of 6 12/31/22

This return is considered incomplete unless a copy of the federal return is attached. If your return is not signed, or improperly signed and verified, it will be subject to a penalty. The statute of limitations will not start until your return is properly signed and verified. Your return must be completed in its entirety.

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

Sign here, Title: Trustee, Preparer's signature: Kevin P. Dougherty, Date: 11/14/23, Preparer's PTIN: P00189079, Firm's name: Dougherty & Connell, 450 Wireless Boulevard, Hauppauge, NY, FEIN: 11-2973168, ZIP: 11788

All Taxpayers Must Answer Questions A through L Below - See Instructions

- A. State of incorporation:
B. Florida Secretary of State document number:
C. Florida consolidated return? YES NO [X]
D. Initial return Final return (final federal return filed)
E. Principal Business Activity Code (as pertains to Florida) 310000
F. A Florida extension of time was timely filed? YES NO [X]
G-1. Corporation is a member of a controlled group? YES NO [X]
G-2. Part of a federal consolidated return? YES NO [X]
G-3. The federal common parent has sales, property, or payroll in Florida? YES NO [X]
H. Location of corporate books: 1266 FIRST STREET, SUITE 1, SARASOTA, FL 34236
I. Taxpayer is a member of a Florida partnership or joint venture? YES NO [X]
J. Enter date of latest IRS audit:
K. Contact person concerning this return: Eric Kaplan, 917-915-0404, EKaplan@bristoll11c.com
L. Type of federal return filed 1120 1120S or 990-T

L

T

Online Information Reporting Requirement

Visit the Department website to obtain a list of the required information, due date, penalty rate and application to enter the information. (See section 220.27, Florida Statutes)

Where to Send Payments and Returns

Make check payable to and mail with return to:

Florida Department of Revenue
5050 W Tennessee Street
Tallahassee FL 32399-0135

If you are requesting a refund (Line 19), send your return to:

Florida Department of Revenue
PO Box 6440
Tallahassee FL 32314-6440

Remember:

- Make your check payable to the Florida Department of Revenue.
Write your FEIN on your check.
Sign your check and return.
Attach a copy of your federal return.
Attach a copy of your Florida Form F-7004 (extension of time) if applicable.



NAME THE LOUIS AND GLORIA FLANZER

FEIN 14-6285967

TAXABLE YEAR ENDING 12/31/22

<b>Schedule I - Additions and/or Adjustments to Federal Taxable Income</b>	
1. Interest excluded from federal taxable income (see instructions)	1.
2. Undistributed net long-term capital gains (see instructions)	2.
3. Net operating loss deduction (attach schedule)	3.
4. Net capital loss carryover (attach schedule)	4.
5. Excess charitable contribution carryover (attach schedule)	5.
6. Employee benefit plan contribution carryover (attach schedule)	6.
7. Enterprise zone jobs credit (Florida Form F-1156Z)	7.
8. Ad valorem taxes allowable as an enterprise zone property tax credit (Florida Form F-1158Z)	8.
9. Guaranty association assessment(s) credit	9.
10. Rural and/or urban high-crime area job tax credits	10.
11. State housing tax credit	11.
12. Florida tax credit scholarship program credit (credit for contributions to nonprofit scholarship-funding organizations)	12.
13. New worlds reading initiative credit	13.
14. Strong families tax credit (credit for contributions to eligible charitable organizations)	14.
15. New markets tax credit	15.
16. Entertainment industry tax credit	16.
17. Research and development tax credit	17.
18. Energy economic zone tax credit	18.
19. s. 168(k), IRC, special bonus depreciation	19.
20. Depreciation of qualified improvement property (see instructions)	20.
21. Expenses for business meals provided by a restaurant (see instructions)	21.
22. Film, television, and live theatrical production expenses (see instructions)	22.
23. Internship tax credit	23.
24. Other additions (attach schedule)	24.
25. Total Lines 1 through 24. Enter total on this line and on Page 1, Line 3.	25.

<b>Schedule II - Subtractions from Federal Taxable Income</b>	
1. Gross foreign source income less attributable expenses (a) Enter s. 78, IRC, income \$ _____ (b) plus s. 862, IRC, dividends \$ _____ (c) plus s. 951A, IRC, income \$ _____ (d) less direct and indirect expenses and related amounts deducted under s. 250, IRC \$ _____	1.
2. Gross subpart F income less attributable expenses (a) Enter s. 951, IRC, subpart F income \$ _____ (b) less direct and indirect expenses \$ _____	2.
Note: Taxpayers doing business outside Florida enter zero on Lines 3 through 6, and complete Schedule IV.	
3. Florida net operating loss carryover deduction (see instructions)	3.
4. Florida net capital loss carryover deduction (see instructions)	4.
5. Florida excess charitable contribution carryover (see instructions)	5.
6. Florida employee benefit plan contribution carryover (see instructions)	6.
7. Nonbusiness income (from Schedule R, Line 3)	7.
8. Eligible net income of an international banking facility (see instructions)	8.
9. s. 168(k), IRC, special bonus depreciation (see instructions)	9.
10. Depreciation of qualified improvement property (see instructions)	10.
11. Film, television, and live theatrical production expenses (see instructions)	11.
12. Other subtractions (attach schedule)	12.
13. Total Lines 1 through 12. Enter total on this line and on Page 1, Line 5.	13.



NAME THE LOUIS AND GLORIA FLANZER

FEIN 14-6285967

TAXABLE YEAR ENDING 12/31/22

<b>Schedule III - Apportionment of Adjusted Federal Income</b>					
<b>III-A For use by taxpayers doing business outside Florida, except those providing insurance or transportation services.</b>					
	(a) WITHIN FLORIDA (Numerator)	(b) TOTAL EVERYWHERE (Denominator)	(c) Col. (a) ÷ Col. (b) Rounded to Six Decimal Places	(d) Weight <small>If any factor in Column (b) is zero, see note on Pg 9 of the instructions.</small>	(e) Weighted Factors Rounded to Six Decimal Places
1. Property (Schedule III-B below)				X 25% or	
2. Payroll				X 25% or	
3. Sales (Schedule III-C below)				X 50% or	
4. Apportionment fraction (Sum of Lines 1, 2, and 3, Column [e]). Enter here and on Schedule IV, Line 2.					<b>1.000000</b>
<b>III-B For use in computing average value of property (use original cost).</b>	WITHIN FLORIDA		TOTAL EVERYWHERE		
	a. Beginning of year	b. End of year	c. Beginning of year	d. End of year	
1. Inventories of raw material, work in process, finished goods					
2. Buildings and other depreciable assets					
3. Land owned					
4. Other tangible and intangible (financial org. only) assets (attach schedule)					
5. Total (Lines 1 through 4)					
6. Average value of property					
a. Add Line 5, Columns (a) and (b) and divide by 2 (for within Florida) ..... 6a. _____					
b. Add Line 5, Columns (c) and (d) and divide by 2 (for total everywhere) ..... 6b. _____					
7. Rented property (8 times net annual rent)					
a. Rented property in Florida ..... 7a. _____					
b. Rented property Everywhere ..... 7b. _____					
8. Total (Lines 6 and 7). Enter on Line 1, Schedule III-A, Columns (a) and (b).					
a. Enter Lines 6 a. plus 7 a. and also enter on Schedule III-A, Line 1, Column (a) for total average property in Florida ..... 8a. _____					
b. Enter Lines 6 b. plus 7 b. and also enter on Schedule III-A, Line 1, Column (b) for total average property Everywhere ..... 8b. _____					
<b>III-C Sales Factor</b>	(a) TOTAL WITHIN FLORIDA (Numerator)		(b) TOTAL EVERYWHERE (Denominator)		
1. Sales (gross receipts)	<b>N/A</b>				
2. Sales delivered or shipped to Florida purchasers			<b>N/A</b>		
3. Other gross receipts (rents, royalties, interest, etc. when applicable)					
4. TOTAL SALES (Enter on Schedule III-A, Line 3, Columns [a] and [b])					
<b>III-D Special Apportionment Fractions (see instructions)</b>	(a) WITHIN FLORIDA	(b) TOTAL EVERYWHERE	(c) FLORIDA Fraction ([a] ÷ [b]) Rounded to Six Decimal Places		
1. Insurance companies (attach copy of Schedule T - Annual Report)					
2. Transportation services					

<b>Schedule IV - Computation of Florida Portion of Adjusted Federal Income</b>	
1. Apportionable adjusted federal income from Page 1, Line 6	1.
2. Florida apportionment fraction (Schedule III-A, Line 4)	2.
3. Tentative apportioned adjusted federal income (multiply Line 1 by Line 2)	3.
4. Net operating loss carryover apportioned to Florida (attach schedule; see instructions)	4.
5. Net capital loss carryover apportioned to Florida (attach schedule; see instructions)	5.
6. Excess charitable contribution carryover apportioned to Florida (attach schedule; see instructions)	6.
7. Employee benefit plan contribution carryover apportioned to Florida (attach schedule; see instructions)	7.
8. Total carryovers apportioned to Florida (add Lines 4 through 7)	8.
9. Adjusted federal income apportioned to Florida (Line 3 less Line 8; see instructions)	9.



NAME THE LOUIS AND GLORIA FLANZER

FEIN 14-6285967

TAXABLE YEAR ENDING 12/31/22

<b>Schedule V - Credits Against the Corporate Income/Franchise Tax</b>	
1. Florida health maintenance organization consumer assistance assessment credit (attach assessment notice)	1.
2. Capital investment tax credit (attach certification letter)	2.
3. Enterprise zone jobs credit (from Florida Form F-1156Z attached)	3.
4. Community contribution tax credit (attach certification letter)	4.
5. Enterprise zone property tax credit (from Florida Form F-1158Z attached)	5.
6. Rural job tax credit (attach certification letter)	6.
7. Urban high-crime area job tax credit (attach certification letter)	7.
8. Hazardous waste facility tax credit	8.
9. Florida alternative minimum tax (AMT) credit	9.
10. Contaminated site rehabilitation tax credit (voluntary cleanup tax credit) (attach tax credit certificate)	10.
11. State housing tax credit (attach certification letter)	11.
12. Florida tax credit scholarship program credit (credit for contributions to nonprofit scholarship-funding organizations) (attach certificate)	12.
13. New worlds reading initiative credit (attach certificate)	13.
14. Strong families tax credit (credit for contributions to eligible charitable organizations) (attach certificate)	14.
15. New markets tax credit	15.
16. Entertainment industry tax credit	16.
17. Research and development tax credit	17.
18. Energy economic zone tax credit	18.
19. Internship tax credit	19.
20. Other credits (attach schedule)	20.
21. Total credits against the tax (sum of Lines 1 through 20 not to exceed the amount on Page 1, Line 11). Enter total credits on Page 1, Line 12	21.

**Schedule R - Nonbusiness Income**

**Line 1. Nonbusiness income (loss) allocated to Florida**

<u>Type</u>	<u>Amount</u>
_____	_____
_____	_____
_____	_____
Total allocated to Florida .....	1. _____
(Enter here and on Page 1, Line 8)	

**Line 2. Nonbusiness income (loss) allocated elsewhere**

<u>Type</u>	<u>State/country allocated to</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
Total allocated elsewhere .....		2. _____

**Line 3. Total nonbusiness income**

Grand total. Total of Lines 1 and 2 .....	3. _____
(Enter here and on Schedule II, Line 7)	



NAME THE LOUIS AND GLORIA FLANZER FEIN 14-6285967 TAXABLE YEAR ENDING 12/31/22

**Estimated Tax Worksheet  
For Taxable Years Beginning On or After January 1,**

1. Florida income expected in taxable year .....	1.	\$	<u>77,274.00</u>
2. Florida exemption \$50,000 (Members of a controlled group, see instructions on Page 14 of Florida Form F-1120N) .....	2.	\$	<u>50,000.00</u>
3. Estimated Florida net income (Line 1 less Line 2) .....	3.	\$	<u>27,274.00</u>
4. Total Estimated Florida tax (5.5% of Line 3) .....		\$	<u>1,500.00</u>
Less: Credits against the tax .....	4.	\$	<u>1,500.00</u>

5. Computation of installments:

Payment due dates and payment amounts:	If 6/30 year end, last day of 4th month,		
	otherwise last day of 5th month - Enter 0.25 of Line 4 .....	5a.	_____
	Last day of 6th month - Enter 0.25 of Line 4 .....	5b.	_____
	Last day of 9th month - Enter 0.25 of Line 4 .....	5c.	_____
	Last day of fiscal year - Enter 0.25 of Line 4 .....	5d.	_____

NOTE: If your estimated tax should change during the year, you may use the amended computation below to determine the amended amounts to be entered on the declaration (Florida Form F-1120ES).

1. Amended estimated tax .....	1.	\$	_____
2. Less:			
(a) Amount of overpayment from last year elected for credit to estimated tax and applied to date .....	2a.	\$	_____
(b) Payments made on estimated tax declaration (Florida Form F-1120ES) .....	2b.	\$	_____
(c) Total of Lines 2(a) and 2(b) .....	2c.	\$	_____
3. Unpaid balance (Line 1 less Line 2(c)) .....	3.	\$	_____
4. Amount to be paid (Line 3 divided by number of remaining installments) .....	4.	\$	_____

**References**

*The following documents were mentioned in this form and are incorporated by reference in the rules indicated below. The forms are available online at [floridarevenue.com/forms](http://floridarevenue.com/forms).*

Form F-2220	Underpayment of Estimated Tax on Florida Corporate Income/Franchise Tax	Rule 12C-1.051, F.A.C.
Form F-7004	Florida Tentative Income/Franchise Tax Return and Application for Extension of Time to File Return	Rule 12C-1.051, F.A.C.
Form F-1156Z	Florida Enterprise Zone Jobs Credit Certificate of Eligibility for Corporate Income Tax	Rule 12C-1.051, F.A.C.
Form F-1158Z	Enterprise Zone Property Tax Credit	Rule 12C-1.051, F.A.C.
Form F-1120N	Instructions for Corporate Income/Franchise Tax Return	Rule 12C-1.051, F.A.C.
Form F-1120ES	Declaration/Installment of Florida Estimated Income/Franchise Tax	Rule 12C-1.051, F.A.C.



THE LOUIS AND GLORIA FLANZER PHILANTHROP

1019  
F-1120  
R. 01/23

FEIN 14-6285967  
DATA Page 1 of 2

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2727400	0	0	0
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THE LOUIS AND GLORIA FLANZER PHILANTHROP

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F-1120  
R. 01/23

FEIN 14-6285967  
DATA Page 2 of 2

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