Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0047 **2021**

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

Open to Public Inspection

		dar year 2021 or tax year beginning $08/01/21$, a	and ending $07/3$	1/22	_	oyer identification num				
		foundation	dation ARBOR VILLAGE IMPROVEMENT							
					0.1	0004005				
		CIATION C/O RICHARD COUGH and street (or P.O. box number if mail is not delivered to street add	drage) I Di			-0024907 hone number (see instru	-ti\			
		BOX 52	uless) Ro	oom/suite	1	7-288-5461	Cuoris)			
_ <u>_</u>	itv or tov	wn, state or province, country, and ZIP or foreign postal code								
		HARBOR ME 04609			C If exe	mption application is pen	ding, check here ▶			
			rn of a former public cl	harity	D 1. Fo	reign organizations, chec	k here			
		Final return Amended	•	. ,		reign organizations meeti				
		Address change Name cha	ange		1	% test, check here and a	_			
ш	Chack	type of organization: X Section 501(c)(3) exempt private			E If priv	ato foundation status was	s terminated under			
Ë.		n 4947(a)(1) nonexempt charitable trust Other taxable				ate foundation status wa: n 507(b)(1)(A), check he				
<u> </u>		rket value of all assets at J Accounting method:		rual	-	foundation is in a 60-mor				
		— ·	Z Casii Acc		1	section 507(b)(1)(B), ch				
	•	► \$ 1,485,748 (Part I, column (d), must				(-)(-)(-)				
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements			
•	arti	amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net in inco		(c) Adjusted net income	for charitable purposes			
_	_	the amounts in column (a) (see instructions).)	books	11100	ille	lilcome	(cash basis only)			
	1	Contributions, gifts, grants, etc., received (attach schedule)	51,100							
	2	Check ▶ ☐ if the foundation is not required to attach Sch. B								
	3	Interest on savings and temporary cash investments	147		147	147				
	4	Dividends and interest from securities	30,419		30,419	30,419				
	5a	Gross rents								
Ф	b	Net rental income or (loss)								
Revenue	6a	Net gain or (loss) from sale of assets not on line 10 $$ STMT $$ 1	16,886							
	b	Gross sales price for all assets on line 6a 29, 207								
	7	Capital gain net income (from Part IV, line 2)			0					
	8	Net short-term capital gain				0				
	9	Income modifications								
	10a	Gross sales less returns and allowances								
	b	Less: Cost of goods sold								
	С	Gross profit or (loss) (attach schedule)								
	11	Other income (attach schedule) STMT 2	570			570				
_	12	Total. Add lines 1 through 11	99,122		30,566	31,136				
S	13	Compensation of officers, directors, trustees, etc	0							
xpenses	14	Other employee salaries and wages								
Sel	15	Pension plans, employee benefits								
X		Legal fees (attach schedule)								
	b	Accounting fees (attach schedule) STMT 3	700		4 100					
Ĭ.	C	Other professional fees (attach schedule) STMT 4	4,308		4,123					
stra	17	Interest CITIME F	0.7.6		07.0					
i <u>s</u>	18	Taxes (attach schedule) (see instructions) STMT 5	276		276					
and Administrative	19	Depreciation (attach schedule) and depletion	F 000				F 006			
A	20	Occupancy	5,926				5,926			
Þ	21	Travel, conferences, and meetings								
	22	Printing and publications Other expenses (att. sch.) STMT 6	15 004				15 004			
Operating	23	Uniter expenses (att. scn.) SIMI 6	15,024				15,024			
ati	24	Total operating and administrative expenses.	26 224		4 200		20 050			
ě	25	Add lines 13 through 23	26,234		4,399	0	20,950			
ŏ		Contributions, gifts, grants paid	2,000		4 200	0	2,000			
_	26	Total expenses and disbursements. Add lines 24 and 25	28,234		4,399	U	22,950			
	27	Subtract line 26 from line 12:	70,888							
	a	Excess of revenue over expenses and disbursements	70,088		26,167					
	b	Net investment income (if negative, enter -0-)			Z0,10/	21 126				
	С	Adjusted net income (if negative, enter -0-)				31,136				

Fc	rm 990	O-PF (2021) BAR HARBOR VILLAGE IMPROVEMENT	01-002490	17	Page 2
	Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
П	1	Cash – non-interest-bearing			
	2	Savings and temporary cash investments	362,314	351,696	351,696
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att. schedule)			
	-	Less: allowance for doubtful accounts ▶ 0			
,,	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			_
Ass	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule) SEE STMT 7	506,683	589,152	1,134,052
	C	Investments – corporate bonds (attach schedule)	3007003	3077132	1/131/032
	11	Investments – land, buildings, and equipment: basis ▶			
	••	Less: accumulated depreciation (attach sch.)			
	12	Investments - mortgage loans			
	13	Investments – mortgage loans Investments – other (attach schedule)			
	14	Land huildings and equipment hasis			
	17	Land, buildings, and equipment: basis ► Less: accumulated depreciation (attach sch.) ►			
	15				
	16	Other assets (describe ►) Total assets (to be completed by all filers – see the			
	10	instructions. Also, see page 1, item I)	868,997	940,848	1,485,748
\dashv	17		000,001	740,040	1,403,740
	18	Accounts payable and accrued expenses			
S	19	Grants payable			
먪	20	Deferred revenue Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
۳	22				
		· · · · · · · · · · · · · · · · · · ·	0	0	
\dashv	23	Total liabilities (add lines 17 through 22) Foundations that follow FASB ASC 958, check here ▶ □	U	U	
s		and complete lines 24, 25, 29, and 30.			
Net Assets or Fund Balances	24	•			
a		Net assets without donor restrictions			
Ba	25	Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here X X			
힏		and complete lines 26 through 30.			
교	26	-			
5	26	Capital stock, trust principal, or current funds			
ţ	27	Paid-in or capital surplus, or land, bldg., and equipment fund	868,997	040 040	
SSe	28	Retained earnings, accumulated income, endowment, or other funds		940,848	
ĕ	29	Total net assets or fund balances (see instructions)	868,997	940,848	
Ę	30	Total liabilities and net assets/fund balances (see	060 007	0.40 0.40	
_	Dawi I	instructions)	868,997	940,848	
	Part I		ot careo milita		
1		net assets or fund balances at beginning of year – Part II, column (a), line 29 (must be a firm a protected on prior yearly patents)	•		0.00 0.00
_		of-year figure reported on prior year's return)			868,997
2	Ente	r amount from Part I, line 27a r increases not included in line 2 (itemize) ► SEE STATEMENT 8		2	70,888
			963		
		ines 1, 2, and 3		-	940,848
		eases not included in line 2 (itemize)			040 040
ь	ıotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b	א, ווne ∠y	6	940,848

		BOR VILLAGE IMPROVE		01-0024907		Page 3
Pa	(a) List and describe the	Ad Losses for Tax on Investm kind(s) of property sold (for example, real eouse; or common stock, 200 shs. MLC Co.)	estate,	(b) How acquired P – Purchase D – Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	N/A			D Bonaton		
b	•					
С						
d						
<u>e</u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		in or (loss) (f) minus (g))
<u>a</u>						
<u>b</u>						
<u>d</u> e						
_	Complete only for assets showing	gain in column (h) and owned by the f	L foundation on 12/31/6	<u> </u>	W 0 : (0	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(j) Adjusted basis (k) Excess			il. (h) gain minus it less than -0-) or from col. (h))
а						
b						
c						
d						
<u>e</u>						
2 (Capital gain net income or (net ca	apital loss) If gain, also enter in				
2 1	Not about torm conital agin or (loc	If (loss), enter -0- in	_		2	
		s) as defined in sections 1222(5) and (column (c). See instructions. If (loss), or	·			
			7		3	
		ed on Investment Income (Sec		940(b), or 4948–		ns)
		lescribed in section 4940(d)(2), check I		· · ·		,
		etter: (attach cop			ons) 1	364
b		enter 1.39% (0.0139) of line 27b. Exem				
		2, col. (b)				
2	Tax under section 511 (domesti	c section 4947(a)(1) trusts and taxable	foundations only; otl	hers, enter -0-)	2	0
3						364
4		ic section 4947(a)(1) trusts and taxable		thers, enter -0-)	4	0
5		ome. Subtract line 4 from line 3. If zero	or less, enter -0-		5	364
6	Credits/Payments:		1	1		
а		nd 2020 overpayment credited to 2021				
b	Exempt foreign organizations –	tax withheld at source	6k			
G C		ension of time to file (Form 8868)	I			
d 7	Backup withholding erroneously				7	
8	Enter any nenalty for undernav	d lines 6a through 6d	if Form 2220 is attack	ched	8	
9	Tax due. If the total of lines 5 a	nd 8 is more than line 7, enter amount	owed		8	364
10	Overpayment. If line 7 is more	than the total of lines 5 and 8, enter the	amount overpaid		10	301
11		e: Credited to 2022 estimated tax		Refund		

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Pa	art VI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. • \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	 ■ By language in the governing instrument, or 			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ► ME:			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2021 or the tax year beginning in 2021? See instructions for Part XIII. If "Yes,"			
	complete Part XIII	9	Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	Website address \blacktriangleright N/A The books are in care of \blacktriangleright JONATHAN NICHOLSON Telephone no. \blacktriangleright 207-2 3 1/2 CLEFSTONE ROAD	88-5	546	1
	Located at ▶ BAR HARBOR ME ZIP+4 ▶ 04609	1		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here			▶
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			

_Pa	art 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
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)		X
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified			
	person?	1a(2)		Χ
	(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? (Exception. Check "No" if the foundation			
	agreed to make a grant to or to employ the official for a period after termination of government service, if			
	terminating within 90 days.)	1a(6)		X
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
С	Organizations relying on a current notice regarding disaster assistance, check here			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2021? N/A	1d		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2021, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2021?	2a		X
	If "Yes," list the years ▶ 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement – see instructions.) N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20 , 20 , 20 , 20			
3a	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	If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to 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 2021.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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 2021?	4b		X

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Form	990-PF (2021) BAR HARBOR VILLAGE IMPROVEMENT	01-0	024907			Pa	age 6		
Pa	art VI-B Statements Regarding Activities for Which Form 4	1720 May Be F	Required (con	tinued)					
5a	During the year did the foundation pay or incur any amount to:					Yes	No		
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	1945(e))?			5a(1)		Χ		
	(2) Influence the outcome of any specific public election (see section 4955); or to								
	indirectly, any voter registration drive?				5a(2)		X		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?				5a(3)		X		
	(4) Provide a grant to an organization other than a charitable, etc., organization								
	(4)(A)? See instructions				5a(4)		X		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or						3.7		
	the prevention of cruelty to children or animals?				5a(5)		X		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under	•		NT / 70					
	in Regulations section 53.4945 or in a current notice regarding disaster assistant	ce? See instruction	าร	N/A	5b				
C	Organizations relying on a current notice regarding disaster assistance, check he			▶ ∐					
d	If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro			NT / 7\	E				
	maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d).			N/A	5d				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	v promiume on a	norconal						
va									
b	benefit contract?Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?								
	If "Yes" to 6b, file Form 8870.	isonal benefit cont			6b		X		
7a	'a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?								
b									
8									
	excess parachute payment(s) during the year?				8		Х		
Pa	art VII Information About Officers, Directors, Trustees, Fo				ees,				
	and Contractors								
<u>1 I</u>	ist all officers, directors, trustees, and foundation managers and their comp	pensation. See in	structions.						
		(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(a) E	pense a	ecount		
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		r allowa			
		devoted to position	oritor o y	compensation					
SE	E STATEMENT 9								
					<u> </u>				
2	Compensation of five highest-paid employees (other than those included or	n line 1 – see ins	tructions). If non	e. enter	1				
_	"NONE."			,					
		(b) Title, and average		(d) Contributions to					
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		pense ad r allowa			
		devoted to position		compensation	Otric	allowa	1003		
NC	NE								
					<u> </u>				
					1				
	Laurehau et ethau amalauraa naid arra 650 000	<u> </u>			1				
ı ota	I number of other employees paid over \$50.000				١-		0		

Form 990-PF (2021) BAR HARBOR VILLAGE IMPROVEMENT 01-0024907 Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services **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 Expenses organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 MAINTAIN AND BEAUTIFY THE DEGREGORIE PARK 11,148 MAINTAIN AND BEAUTIFY THE GLEN MARY PARK 3 MAINTAIN AND BEAUTIFY THE HOWE MEMORIAL PARK 1,960 Part VIII-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount 1 N/A

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All other program-related investments. See instructions.

Total. Add lines 1 through 3

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Pa	art IX Minimum Investment Return (All domestic foundations must complete this part. Forei	gn fou	ndations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	1,141,612
b	Average of monthly cash balances	1b	357,005
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,498,617
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 1e	2	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,498,617
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see		
	instructions)	4	22,479
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	1,476,138
6	Minimum investment return. Enter 5% (0.05) of line 5	6	73,807
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	g found	dations
	and certain foreign organizations, check here \blacktriangleright $\boxed{\mathbb{X}}$ and do not complete this part.)		
1	Minimum investment return from Part IX, line 6	1	
2a	Tax on investment income for 2021 from Part V, line 5		
b	Income tax for 2021. (This does not include the tax from Part V.)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1		
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII,		
_	line 1	7	
_Pa	art XI Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		00.050
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	22,950
b	Program-related investments – total from Part VIII-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	22,950

22,950 Form **990-PF** (2021)

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Pa	rt XII Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
		Corpus	Years prior to 2020	2020	2021
1	Distributable amount for 2021 from Part X, line 7				
2	Undistributed income, if any, as of the end of 2021:				
а	Enter amount for 2020 only				
b	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2021:				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
	From 2020				
f	Total of lines 3a through e				
4	Qualifying distributions for 2021 from Part XI,				
	line 4: ▶ \$22,950				
	Applied to 2020, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				
d	Applied to 2021 distributable amount	00.050			
	Remaining amount distributed out of corpus	22,950			
5	Excess distributions carryover applied to 2021				
	(If an amount appears in column (d), the same				
_	amount must be shown in column (a).)				
6	Enter the net total of each column as				
_	indicated below:	22 050			
a		22,950			
D	Prior years' undistributed income. Subtract				
_	line 4b from line 2b				
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)				
	too has have any family assessed				
ч	subtract line 6c from line 6b. Taxable				
u	amount – see instructions				
۵	Undistributed income for 2020. Subtract line				
·	4a from line 2a. Taxable amount – see				
	instructions				
f	Undistributed income for 2021. Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2022				
7	Amounts treated as distributions out of corpus				
-	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2016 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2022.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
d	Excess from 2020				
e	Excess from 2021				

DAA

Form **990-PF** (2021)

Pa	art XIII Private Operating Fo	undations (see in	structions and Part	VI-A, question 9)		· ·
1a	If the foundation has received a ruling or	determination letter th	at it is a private operati	ing		
	foundation, and the ruling is effective for	2021, enter the date of	of the ruling	>		N/I
b	Check box to indicate whether the found	ation is a private opera	ating foundation describ	ped in section X 49	42(j)(3) or 4942	(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Total
	income from Part I or the minimum	(a) 2021	(b) 2020	(c) 2019	(d) 2018	(e) Total
	investment return from Part IX for					
	each year listed	31,136	25,342	26,240	25,819	108,537
b	85% (0.85) of line 2a	26,466		22,304	21,946	92,257
С	Qualifying distributions from Part XI,		·	·	·	
	line 4, for each year listed	22,950	29,853	177,712	170,361	400,876
d	Amounts included in line 2c not used directly	•			,	•
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c	22,950	29,853	177,712	170,361	400,876
3	Complete 3a, b, or c for the	227330	257033	1,,,,12	1707301	1007070
3	alternative test relied upon:					
а	"Assets" alternative test – enter:					
а	(1) Value of all assets	2,408,748	2,478,897	2,085,349	2,115,680	9,088,674
	(2) Value of assets qualifying under	2,400,740	2,470,007	2,003,347	2,113,000	7,000,074
		923,000	923,000	923,000	923,000	3,692,000
L	section 4942(j)(3)(B)(i)		923,000	923,000	923,000	3,092,000
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in					
	Part IX, line 6, for each year listed					
С	"Support" alternative test – enter:					
	Total support other than gross investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties) N/A					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section $4942(j)(3)(B)(iii)$ N/A					
	(3) Largest amount of support from					
	an exempt organization N/A					
_	(4) Gross investment income N/A		41-1	h	-l ¢5 000 -n mn	!tt
Pa	art XIV Supplementary Inform			ne roundation na	a \$5,000 or more	in assets at
_	any time during the y		tions.)			
1	Information Regarding Foundation Ma	•	th 00/ - f th t - t - l	and the second second second	harden formale Com	
а	List any managers of the foundation who				•	
	before the close of any tax year (but only	/ if they have contribut	ed more than \$5,000).	(See section 507(d)(2)	.)	
_	N/A	b.a. aa. 100/ a.r. na	and of the otable of o		anually large parties	af 4b a
b	List any managers of the foundation				equally large portion	or the
	ownership of a partnership or other entity) of which the foundat	ion has a 10% or great	er interest.		
_	N/A					
2	Information Regarding Contribution, C					
	Check here ► X if the foundation only		•	•	•	
	unsolicited requests for funds. If the four		ants, etc., to individuals	s or organizations unde	er other conditions,	
	complete items 2a, b, c, and d. See instr					
а	The name, address, and telephone numb	per or email address o	f the person to whom a	applications should be	addressed:	
	N/A					
b	The form in which applications should be	e submitted and inform	ation and materials the	y should include:		
	N/A					
С	Any submission deadlines:					
	N/A					
d	Any restrictions or limitations on awards,	such as by geographi	ıcaı areas, charitable fie	eias, kinds of institution	ns, or other	
	factors:					
	N/A					

Supplementary Information (continued) Part XIV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year BAR HARBOR HISTORICAL SOCIETY 127 WEST STREERT 501(C)3 BAR HARBOR ME 04609 DONATION 2,000 ▶ 3a 2,000 Total **b** Approved for future payment N/A ▶ 3b Total

F	Part XV-A	Analysis of Income-Producing Act	ivities				- 9-
Ent	ter gross amo	ounts unless otherwise indicated.		d business income	Excluded	d by section 512, 513, or 514	
1	Program sei	rvice revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
	ŭ						
	f						
	g Fees an	nd contracts from government agencies					
2	Membership	dues and assessments					570
3	Interest on s	savings and temporary cash investments					147
		nd interest from securities					30,419
		come or (loss) from real estate:					
	a Debt-fina	anced property					
	b Not deb	ot-financed property					
6	Net rental in	ncome or (loss) from personal property					
		tment income					
8	Gain or (loss	s) from sales of assets other than inventory					16,886
		or (loss) from special events					
10	Gross profit	or (loss) from sales of inventory					
		ue: a					
	d						
	е						
12	Subtotal. Ad	ld columns (b), (d), and (e)		0		0	48,022
13	Total. Add I	ine 12, columns (b), (d), and (e)				13	48,022
(Se	e worksheet	in line 13 instructions to verify calculations.)					
F	Part XV-B	Relationship of Activities to the Activities					
	Line No. ▼	Explain below how each activity for which income of the foundation's exempt purposes (other than b		` '		, ,	accomplishment
	4	INVESTMENT INCOME IS DIS	TRIBUTEI	FOR PARK	UPKE	EP	

Pa		Information Rega	arding Tra	ansfers To an	d Transactio	ns and Relationships V	Vith Noncharitab	le Ex	empt	i
1			irectly engag	e in any of the fol	lowing with any	other organization described			Yes	No
•		01(c) (other than section								
	organizations		31. 00 . (0)(0)	o.ga <u>_</u> aoo, o	000 02.,	naming to political				
	Ü	om the reporting found	lation to a no	oncharitable exemi	nt organization o	f:				
u								1a(1)		Х
	• • • • • • • • • • • • • • • • • • • •									X
h	Other transc	ootiono:						1a(2)		21
	Other transa							4 1- /4 \		v
	` '	assets to a noncharit						1b(1)		X
	(2) Purchas	es of assets from a n	oncharitable	exempt organizati	on			1b(2)		X
	(3) Rental c	of facilities, equipment,	or other ass	sets				1b(3)		X
	(4) Reimbur	sement arrangements	8					1b(4)		X
	(5) Loans o	r loan guarantees						1b(5)		X
	(6) Performa	ance of services or m	embership o	r fundraising solici	tations			1b(6)		X
								1c		X
d	If the answe	r to any of the above	is "Yes," con	nplete the following	g schedule. Colui	mn (b) should always show the	fair market			
	value of the	goods, other assets, o	or services g	iven by the reporti	ng foundation. If	the foundation received less th	an fair market			
	value in any	transaction or sharing	arrangemer	nt, show in column	(d) the value of	the goods, other assets, or se	rvices received.			
(a	a) Line no.	(b) Amount involved	(c) Nam	e of noncharitable exem	pt organization	(d) Description of transfers	transactions, and sharing a	rrangeme	ents	
N/ <i>P</i>	A									
2a						c-exempt organizations		П.,	7.7	1
		section 501(c) (other		501(c)(3)) or in se	ection 527?			Y₀	es X	No
b		nplete the following sc	hedule.	Т						
) Name of organization		(b) Type of o	organization	(c) Des	cription of relationship			
N	1/A									
						edules and statements, and to the best which preparer has any knowledge.	of my knowledge and belief	it is true	θ,	
	Correct, an	id complete. Declaration of p	reparer (orner r	nan taxpayer) is baseu	on all information of	which preparer has any knowledge.	May the IRS disc	uss this r	eturn	
Sign	1						with the preparer	shown b		٦ ا
Here							See instructions.		Yes	No
						TRF	ASURER			
	Signa	ture of officer or trustee			Date	Title				
	- 	pe preparer's name			Preparer's signatur		Date			$\overline{\Box}$
	Filliviy	о рівраїві в Папів			Freparers Signatul	· ·	Date		Check	∐ if
Paid	ELLEN	I CLEVELAND					11/0	7/22	self-em	pioyea
repa	rer -		T.C		1			1229	1 1010	
Jse (Only Firm's n			1 2						
Firm's address P.O. BOX 543 Firm's EIN 01-02191										

01-0024907

Federal Statements

FYE: 7/31/2022

Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

	How Received											
Whom Sold			Sale Price		Cost	Cost Expense					Net Gain / Loss	
		12/31/21	\$	PURCHASE 29,207 \$	12,321	\$		\$		\$	16,886	
TOTAL			\$	29,207 \$	12,321	\$_	0	\$	0	\$_	16,886	

Statement 2 - Form 990-PF, Part I, Line 11 - Other Income

Description	enue per Books	vestment come	4	sted Net come
MEMBERSHIP DUES	\$ 570	\$	\$	570
TOTAL	\$ 570	\$ 0	\$	570

Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	 Total	Net stment	,	usted Net	_	aritable rpose
ACCOUNTING	\$ 700	\$ 	\$		\$	
TOTAL	\$ 700	\$ 0	\$	0	\$	0

Statement 4 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	 Total	_ Inv	Net vestment	Adju N	sted et	aritable urpose
FIDUCIARY FEES LEGAL	\$ 4,123 185	\$	4,123	\$		\$
TOTAL	\$ 4,308	\$	4,123	\$	0	\$ 0

01-0024907

FYE: 7/31/2022

Federal Statements

Statement 5 - Form 990-PF, Part I, Line 18 - Taxes

Description	 Total	Inve	Net estment	 usted Net	_	aritable urpose
EXCISE	\$ 276	\$	276	\$	\$	
TOTAL	\$ 276	\$	276	\$ 0	\$	0

Statement 6 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES	\$	\$	\$	\$
REPAIRS AND MAINTENANCE (PROG MISCELLANEOUS	13,108 1,916			13,108 1,916
TOTAL	\$ 15,024	\$0	\$0	\$ 15,024

Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	E	Beginning of Year	 End of Year	Basis of Valuation	_	Fair Market Value
COMMON STOCKS	\$	506,683	\$ 589,152	COST	\$	1,134,052
TOTAL	\$	506,683	\$ 589,152		\$	1,134,052

BHVIA Bar Harbor Village Improvement 11/7/2022 01-0024907 Federal Statements

FYE: 7/31/2022

Statement 8 - Form 990-PF, Part III, Line 3 - Other Increases

Description	 Amount
FEDERAL REFUND	\$ 963
TOTAL	\$ 963

01-0024907

FYE: 7/31/2022

Federal Statements

Statement 9 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
RICHARD COUGH PO BOX 52 BAR HARBOR ME 04609	PRESIDENT	1.00	0	0	0
ANDREW SHEA 42 HANCOCK STREET BAR HARBOR ME 04609	VICE PRESIDE	1.00	0	0	0
JONATHAN NICHOLSON 3 1/2 CLEFSTONE ROAD BAR HARBOR ME 04609	TREASURER	1.00	0	0	0
THOMAS TESTA PO BOX 950 BAR HARBOR ME 04609	DIRECTOR	1.00	0	0	0
JEFFERSON DOBBS 30 GREELEY AVE. BAR HARBOR ME 04609	DIRECTOR	1.00	0	0	0
PAUL COSTON 38 RODICK STREET BAR HARBOR ME 04609	DIRECTOR	1.00	0	0	0
KIM SWAN PO BOX 46 BAR HARBOR ME 04609	SECRETARY	1.00	0	0	0
HELENE HARTON 5 DERBY LANE BAR HARBOR ME 04609	DIRECTOR	1.00	0	0	0
DAVID WITHAM JR 10 DES ISLE AVE BAR HARBOR ME 04609	DIRECTOR	1.00	0	0	0
ERIN COUGH	DIRECTOR	1.00	0	0	0

01-0024907 FYE: 7/31/2022

Federal Statements

11/7/2022

Statement 9 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)

Name and Address

Title

Average Hours

Compensation

Benefits

Expenses

HOLLAND AVE

BAR HARBOR ME 04609

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

2021

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-PF.

▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

DDOMENTT

BAR HARBOR VILLAGE IMPROVEMENT ASSOCIATION C/O RICHARD COUGH

Employer identification number

01-0024907

Organization type (check one):							
Filers o	f:	Section:					
Form 99	90 or 990-EZ	501(c)() (enter number) organization					
		4947(a)(1) nonexempt charitable trust not treated as a private foundation					
		527 political organization					
Form 99	90-PF	X 501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
	Only a section 501(c)(7),	overed by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See					
Genera	l Rule						
_		ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 property) from any one contributor. Complete Parts I and II. See instructions for determining a ributions.					
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						
must a	nswer "No" on Part IV, li	isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it ine 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 the filing requirements of Schedule B (Form 990).					

Name of organization

BAR HARBOR VILLAGE IMPROVEMENT

Employer identification number 01-0024907

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	GLADYS F ONEIL CHARITABLE TRUST 693 STILLWATER AVE BANGOR ME 04401	\$ 32,600	Person X Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
. 2	JOHN AND DEBORAH DARLING 4141 HIGEL AVENUE SARASOTA FL 34242	\$ 17,500	Person X Payroll Noncash (Complete Part II for noncash contributions.)					
(a)	(b)	(c)	(d)					
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a)	(b)	(c)	(d)					
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					