Form 990-PF

Department of the Treasury

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

 \blacktriangleright Do not enter social security numbers on this form as it may be made public.

2018

OMB No 1545-0052

1	ntem	al Peven	ue Service	▶ Go to	www.irs.gov/Form990PF to	r instructions	and the	e latest	information		en to Public I	nspection
i	For	calen	dar year 20)18 or tax year be	ginning		, 2018,			/ Lindia	, 20	0
ī	Vame	of four	ndation				-		A Employe	r identification nun	nber	
	THI	E WII	LBUR AND	HILDA GLENN	FAMILY FOUNDATIO	N			58-63	32 8 896		
					ot delivered to street address)		Room/si	uite		e number (see instr	uctions)	
	42	Lend	ox Point	۵					(678)	608-4983		
7	City o	r town.	state or provin	nce, country, and ZIP or	foreign postal code		<u> </u>			ion application is pe	ending check	here ▶ □
	•		a GA 303	· ·	J .				• ii exempt	ion application is pe	riding, check	
-			all that app		urn Initial return	of a former	aublic cl	harity	D 1 Farasas	areastrons sho	ak bara	▶ □
	J (JIIECK	all that app	· —			Jubile el	· · · · · · · · · · · · · · · · · · ·	u i. Foreigr	organizations, che	JK Here	-
				☐ Final retu☐ Address						organizations mee		test,
-							tion A	, , 		nere and attach con foundation status w		under
, i					ection 501(c)(3) exempt p			ו די		07(b)(1)(A), check he		▶□
ļ					table trust Other tax							
Į.					J Accounting method	A Cash	☐ ACC	ruai		ndation is in a 60-me		on . \Box
				n Part II, col. (c),	Other (specify)				under sec	tion 507(b)(1)(B), ch	eck nere	▶□
					(Part I, column (d) must be	on cash basis)				1	
	Pa	rt I			xpenses (The total of	(a) Revenue		(b) Net i	nvestment	(c) Adjusted net	(d) Disbut	rsements ırıtable
				:olumns (b), (c), and (d in column (a) (see inst	may not necessarily equal	expenses p books	er		ome	income	purp (cash ba	
											(Casil Ga	isis Urily)
		1			received (attach schedule)							
2		2	_		not required to attach Sch. B							
		3	Interest on	savings and temp	orary cash investments	90,5		9	0,597.			
4.	ŀ	4	Dividends	and interest from	securities	1,398,2	32.	1,39	8,232.			
1		5a	Gross rent	s								
		b	Net rental	income or (loss)								
_	Revenue	6a	Net yanı o	ı (lüss) from sale c	f assets not on line 10	-31,4	24.					
120		b	Gross sales	price for all assets of	n line 6a <u>20,007,224.</u>		I	ı-6a	Stmt			
20	§	7	Capital gai	in net income (fror	n Part IV, line 2)				0.			
0 8 2020	œ	8	Net short-t	term capital gain						C).	[
0	Ì	9	Income mo	odifications .								i
Z		10a	Gross sales	less returns and allo	wances							1
JAN		b	Less Cost	t of goods sold								
_		C	Gross prof	fit or (loss) (attach	schedule)							
	- 1	11	Other inco	me (attach sched)	ule) See . Stmt	-296,3	04.	41	.0,003.			
SCANNED		12	Total. Add	l lines 1 through 1	1 <u></u>	1,161,1	01.	1,89	8,832.	C).	1
Σ	6	13	Compensa	ation of officers, di	rectors, trustees, etc.	190,0	00.				190	,000.
X	xpenses	14	Other emp	oloyee salaries and	l wages							
8	e	15	Pension pl	lans, employee be	nefits .	46,8	22.				4 6	,822.
••	Š	16a	Legal fees	(attach schedule)	ECFIVED TO							
	M	b	Accounting	g fees (attaon sch	equipor	248,2	31.	24	8,231.			
	ٳڲؚ	С	Other prof	essional fees (atta	ch schedule) L-160,34mi \	206,8	31.	20	6,831.			
	rat	17	Interest	اورا	instructions e Stmt	٤١						
	ist	18	Taxes (atta	ach schedule) (Se	instructions e Stmt	42,2	85.	4	2,285.			
	듩	19	Depreciati	on (attach schedu	te) and depleting U							
	튭	20	Occupanc	y . .	OGUEIN							
	۷	21	Travel, cor	nferences, and me		24,2	91.				24	,291.
	Ĕ	22	Printing an	nd publications		1,8	346.				1	.,846.
	g	23	Other expe	enses (attach sche	edule) See .St.mt	81,4	109.		31,409.			
	Operating and Administrative E	24			ninistrative expenses.						[
	ra			13 through 23		841,7	15.	57	78,756.		262	959.
	þę	25	Contribution	ons, gifts, grants p	oaid	6,234,0						,000.
	O	26			nents. Add lines 24 and 25	7,075,7		57	78,756.			,959.
		27		ne 26 from line 12								i
		а			nses and disbursements	5,914,6	14.					4
		b		-	negative, enter -0-) .			1.32	20,076.		—	i
				net income (if ned	•				<u>,,,,,,</u>	() .	

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2018)

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Form 990-PF (2018)

Beginning of year End of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) (a) Book Value (b) Book Value (c) Fair Market Value Cash-non-interest-bearing 1,970,733. 1,487,071 1,970,733. Savings and temporary cash investments 2 3 Accounts receivable ▶ Less allowance for doubtful accounts ▶ Pledges receivable ► Less allowance for doubtful accounts ▶ 5 Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . Other notes and loans receivable (attach schedule) ▶ Less: allowance for doubtful accounts ▶ Inventories for sale or use 9 Prepaid expenses and deferred charges Investments—U.S. and state government obligations (attach schedule) 10a Investments-corporate stock (attach schedule) L-10b Stmt <u>41,265,</u>717. 45.911.548. b 42,449,122. Investments—corporate bonds (attach schedule) L-10c Stmt 18,107,014. 13,408,492. 13,244,528 C Investments—land, buildings, and equipment: basis ▶ 11 Less: accumulated depreciation (attach schedule) ▶ 12 Investments-mortgage loans Investments—other (attach schedule) . L-13. Stmt 13 47,260,061. 44,376,902. 47,716,483. Land, buildings, and equipment: basis ▶ 14 Less: accumulated depreciation (attach schedule) ▶ Other assets (describe ▶ 15 Total assets (to be completed by all filers-see the 16 108,119,863, 102,205,249. 108,843,292. 17 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule) . 21 22 Other liabilities (describe ▶ Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here . **Fund Balances** and complete lines 24 through 26, and lines 30 and 31. 24 25 Temporarily restricted . . Permanently restricted . Foundations that do not follow SFAS 117, check here ▶ 🗵 and complete lines 27 through 31. ō Capital stock, trust principal, or current funds 108,119,863. 102,205,249. **Net Assets** Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) . . . 108,119,863. 102,205,249. Total liabilities and net assets/fund balances (see 108,119,863. 102,205,249. Analysis of Changes in Net Assets or Fund Balances Part III 1 Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with 108,119,863. -5,914,614. 2 Enter amount from Part I, line 27a 2 3 Other increases not included in line 2 (itemize) ▶ 3 4 102,205,249. 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . **6** | 102,205,249.

Part	V Capital Gains and	d Losses for Tax on Investin	ient income			
	(a) List and describe the k 2-story brick wareho	(b) How acquired P—Purchase D—Donation	(c) Date acquire (mo , day, yr)	d (d) Date sold (mo , day, yr)		
1a l	Nuveen Gresham Com	modity Fund		P	12/28/201	7 04/10/2018
b I	BNY Mellon - Vanqu	ard		P	12/03/2009	12/18/2018
c]	BNY Mellon Bond Fu	ınd		P	11/30/201	
d]	BNY Mellon Bond Fu	ınd LT		P	08/30/2019	04/12/2018
<u>e</u> 9	See Statement		· · · · · · · · · · · · · · · · · · ·	ļ		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		Gain or (loss) us (f) minus (g))
<u>a</u>	117,890.			115,913.		1,977.
<u> </u>	9,057,016.			9,545,255.		-488,239.
<u>c</u>	4,852,035.			4,955,760.		-103,725.
<u>d</u>	5,269,926.			5,421,760.		-151,834.
<u>е</u>	710,357.	Course seem is polymore (b) and award	by the foundation	0.		710,357.
	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) FMV as of 12/31/69 (i) Adjusted basis as of 12/31/69 (k) Excess of col (i) over col (j), if any		ss of col (i)	col (k), but	(Col (h) gain minus not less than -0-) or es (from col (h))	
а						1,977.
b						-488,239.
c		****				-103,725.
d	# ····	J. 2				-151,834.
<u>e</u>						<u>710,357.</u>
2	Capital gain net income of		also enter in Pa , enter -0- in Pa		2	-31,464.
•	Part I, line 8 V Qualification Und	der Section 4940(e) for Redurate foundations subject to the	uced Tax on N	Net Investment		-101,748.
	s," the foundation doesn't	e section 4942 tax on the distribu qualify under section 4940(e). Do ount in each column for each year	not complete t	this part.		☐ Yes ☑ No
	(a)		ar, see the mstr		aking any entire	(d)
Cale	Base period years endar year (or tax year beginning i			of noncharitable-use a	(00)	Distribution ratio (b) divided by col (c))
	2017	5,671,4		118,680,4		0.047788 0.051860
	2016 2015	5,938,1 6,637,6		114,502,7 123,295,0		0.053836
	2015	6,637,6		131,721,3		0.033836
	2013	7,242,1		141,809,7		0.048738
2	Total of line 1, column (d		-		2	0.251289
3		o for the 5-year base period—div foundation has been in existence			· •	0.050258
4	Enter the net value of nor	ncharitable-use assets for 2018 f	rom Part X, line	5	. 4	118,781,429.
5	Multiply line 4 by line 3				. 5	5,969,717.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		. 6	13,201.
7	Add lines 5 and 6					5,982,9 <u>18</u> .
8		ons from Part XII, line 4 eater than line 7, check the box ii				6,496,959. a 1% tax rate See the

Form 99	0-PF (2018)		F	Page 4	
Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	nstrı	ıctioı	1S)	
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.)			1	
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)				
b '	Domestic foundations that meet the section 4940(e) requirements in Part V, check	13,2	01.		
	here ► 🗵 and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of			1	
	Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.		
3		13,2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	<u> </u>	0.		
5		13,2			
6	Credits/Payments:		<u> </u>	$\overline{}$	
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 45,944.				
b	Exempt foreign organizations—tax withheld at source 6b				
C	Tax paid with application for extension of time to file (Form 8868) . 6c 0.				
d	Backup withholding erroneously withheld				
		45,9	44		
7 8	Enter any penalty for underpayment of estimated tax. Check here for if Form 2220 is attached	10,0			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9				
10		32,7	43		
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax > 32,743. Refunded > 11	<i>32,1</i>	13.	_	
	VII-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	T	Yes	No	
1a	participate or intervene in any political campaign?	1a		×	
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	···			
b	Instructions for the definition	16		×	
	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				
_	Did the foundation file Form 1120-POL for this year?	1c		\overline{x}	
C C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	- 	<u> </u>		
d	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
е					
0	on foundation managers. ► \$	2			
2				^	
_	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3			
4-	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	×		
4a	If "Yes," has it filed a tax return on Form 990-T for this year?	4a 4b	×		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	 ^	×	
5	If "Yes," attach the statement required by General Instruction T	- <u>-</u>		 ^ -	
•	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1	[
6	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X		
7	Enter the states to which the foundation reports or with which it is registered. See instructions.		×	 	
8a	·				
	GA				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	<u> </u>			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	×	<u> </u>	
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 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes,"	_			•
	complete Part XIV	9	ļ	×	4
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses	10	O DE	X (204.0)	
	BEV 02/01/19 PRO	orm 99	ツーアト	(2018)	

Form 9	99-PF (2018)		- 1	Page 5
Par	t VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions . See Statement.	12	×	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
	Website address ▶ www.glennfamilyfdn.org	-		
14	The books are in care of ▶ Suzanna Stribling Telephone no. ▶ (678)	-80	4983	
	Located at ▶ 42 Lenox Pointe Atlanta GA ZIP+4 ▶ 30324-			
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 2018, 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		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶	l'		
Par	t VII-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? Yes No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . Yes No.			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . X Yes No			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		l	
	foundation agreed to make a grant to or to employ the official for a period after			Ì
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions			-
	•	1b	_	×
_	Organizations relying on a current notice regarding disaster assistance, check here			
С	were not corrected before the first day of the tax year beginning in 2018?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	10		 ^
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2018?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	İ		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)			
		2b	-	├
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20 , 20 , 20 , 20			
За				
Ja	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2018 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 Schedule C, Form 4720, to determine if the	1		
	foundation had excess business holdings in 2018)	3b		×
4a	Print 4 to the state of the sta	4a		×
b				 ^
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4h	1-	╵┰

Part	VII-B Statements	Regarding Activities	s for W	hich Form	4720	May Be R	equire	d (contu	nued)			
5a	During the year, did the fo	oundation pay or incur	any am	ount to							Yes	No
		• •	-		n (sect	ion 4945(e))? .	☐ Yes	⊠ No			1
								_		1		
				•		•	-	_	⊠ No	}		
	<u> </u>							= '				
									⊠ NO	1		
]		
									⊠ No	1		
							cational	_		1		
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?											
b									scribed			
	in Regulations section 53	3.4945 or in a current no	tice reg	garding disas	ter assi	stance? So	ee instri	uctions		5b		
	Organizations relying on a	a current notice regardii	ng disa	ster assistan	ce, che	ck here			▶ 🗆			- 1
C	If the answer is "Yes" to	question 5a(4), does t	he four	ndation claim	exem	otion from	the tax					
	because it maintained ex	penditure responsibility	for the	grant? .				☐ Yes	☐ No			
	If "Yes," attach the stater	ment required by Regula	ations s	ection 53 49	45-5(d)							
6a							emiums					
				•				_	⊠ No			
b	Did the foundation, during	o the year, pay premiun	ns dire	ctly or indired	etly on	a personal	benefit	_	_			
•			,	ony or manor	July, U.	a porcorra			•	1		<u> </u>
7a			a narty i	to a prohibited	tay sh	elter transac	ction?	□Yes	⊠ No			
b		,		•								
8										1.5	-	-
0				•					⊠ No		l	
Dari												
rait		•	1013, 1	rustees, r	Juliud	tion man	agers,	inginy i	ald L	прісу	cc3,	
1			ation r	nanagers an	d their	compens	ation S	See instru	uctions	L_		
•	Elot all officers, all color	o, tractoco, ana roana	auom	nanagoro ar		Compone				<u> </u>		
			(b) Title	e, and average	(c) Co	mpensation	l (d) (Contribution	sto I	4.5		
	(a) Name and add	dress	ì hou	rs per week	`´(Hr	ot paid,	emplo	yee benefit	plans			
			hou devot	rs per week ed to position	`´(Hr	ot paid,	emplo	yee benefit	plans			
	mas K Glenn II		hou devot	rs per week ed to position	`´(Hr	ot paid, ter -0-)	emplo	yee benefit	plans ensation			ces
42]	mas K Glenn II Lenox Pointe Atlan		hou devote Trust	rs per week ed to position tee 8.00	`´(Hr	ot paid, ter -0-)	emplo	yee benefit	plans ensation			ces
42 l Lou	mas K Glenn II Lenox Pointe Atlan ise Glenn	nta GA 30324	hou devote Trust	rs per week ed to position tee 8.00	`´(Hr	ot paid, ter -0-)	emplo	yee benefit	plans ensation 0 .			O.
42 l Lou: 42 l	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan	nta GA 30324	Trus	rs per week ed to position tee 8.00 tee 8.00	`´(Hr	ot paid, ter -0-)	emplo	yee benefit	plans ensation 0 .			O.
42 l Lou 42 l Lou	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign	nta GA 30324 nta GA 30324	Trus	s per week ed to position tee 8.00 tee 8.00	`´(Hr	0 .	emplo	yee benefit	plans ensation 0.			0. 0.
42 l Lou 42 l Lou	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign	nta GA 30324 nta GA 30324	Trus	s per week ed to position tee 8.00 tee 8.00	`´(Hr	0 .	emplo	yee benefit	plans ensation 0.			0. 0.
42 I Lou: 42 I Lou: 42 I	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan	nta GA 30324 nta GA 30324 nac nta GA 30324	Trus	s per week ed to position tee 8.00 tee 8.00 tee 8.00	(Iff r	0 .	emplo	yee benefit	O.			0. 0.
42 I Lou: 42 I Lou: 42 I See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement	nta GA 30324 nta GA 30324 nac nta GA 30324	Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00	(lff r en	0. 0.	emplo and defe	yee benefit erred compe	0. 0.	other a	allowan	0. 0.
42 I Lou: 42 I Lou: 42 I	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h	nta GA 30324 nta GA 30324 nac nta GA 30324	Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00	(lff r en	0. 0.	emplo and defe	yee benefit erred compe	0. 0.	other a	allowan	0. 0.
42 I Lou: 42 I Lou: 42 I See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement	nta GA 30324 nta GA 30324 nac nta GA 30324	Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00	(lff r en	0. 0.	emplo and defe	yee benefit erred compe 46, see instr	plans ensation 0. 0. 0. vections	other a	allowan	0. 0.
42 J Lou: 42 J Lou: 42 J See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h "NONE."	nta GA 30324 nta GA 30324 nac nta GA 30324 nighest-paid employee	Trust Trust	8.00 tee 8.00 tee 8.00 tee 8.00 tee (b) Title, and a	1:se inclusiverage	0. 0. 0. 0. uded on li	emplo and defe	46,	0. 0. 0. separation	other a	one, (0. 0. 0. enter
42 J Lou: 42 J Lou: 42 J See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h	nta GA 30324 nta GA 30324 nac nta GA 30324 nighest-paid employee	Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00 tee 8.00 tee	1 se inclusiverage	0. 0.	emplo and defe	46, see instr (d) Contrib employee plans and	0. 0. 0. 822. ructions to benefit deferred	s). If no	one, (0. 0. 0. enter
42 J Lou: 42 J Lou: 42 J See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h "NONE."	nta GA 30324 nta GA 30324 nac nta GA 30324 nighest-paid employee	Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00 tee (b) Title, and a hours per verse.	1 se inclusiverage	0. 0. 0. 0. uded on li	emplo and defe	yee benefit erred compe 46, see instr (d) Contribi	0. 0. 0. 822. ructions to benefit deferred	s). If no	one, e	0. 0. 0. enter
42 1 Lou 42 1 Lou 42 1 See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h "NONE."	nta GA 30324 nta GA 30324 nac nta GA 30324 nighest-paid employee	Trust Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00 tee (b) Title, and a hours per verse.	1 se inclusiverage	0. 0. 0. 0. uded on li	emplo and defe	46, see instr (d) Contrib employee plans and	0. 0. 0. 822. ructions to benefit deferred	s). If no	one, e	0. 0. 0. enter
42 1 Lou 42 1 Lou 42 1 See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h "NONE."	nta GA 30324 nta GA 30324 nta GA 30324 nta GA 30324 highest-paid employee	Trust Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00 tee (b) Title, and a hours per verse.	1 se inclusiverage	0. 0. 0. 0. uded on li	emplo and defe	46, see instr (d) Contrib employee plans and	0. 0. 0. 822. ructions to benefit deferred	s). If no	one, e	0. 0. 0. enter
42 1 Lou 42 1 Lou 42 1 See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h "NONE."	nta GA 30324 nta GA 30324 nta GA 30324 nta GA 30324 highest-paid employee	Trust Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00 tee (b) Title, and a hours per verse.	1 se inclusiverage	0. 0. 0. 0. uded on li	emplo and defe	46, see instr (d) Contrib employee plans and	0. 0. 0. 822. ructions to benefit deferred	s). If no	one, e	0. 0. 0. enter
42 1 Lou 42 1 Lou 42 1 See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h "NONE."	nta GA 30324 nta GA 30324 nta GA 30324 nta GA 30324 highest-paid employee	Trust Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00 tee (b) Title, and a hours per verse.	1 se inclusiverage	0. 0. 0. 0. uded on li	emplo and defe	46, see instr (d) Contrib employee plans and	0. 0. 0. 822. ructions to benefit deferred	s). If no	one, e	0. 0. 0. enter
42 J Lou: 42 J Lou: 42 J See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h "NONE."	nta GA 30324 nta GA 30324 nta GA 30324 nta GA 30324 highest-paid employee	Trust Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00 tee (b) Title, and a hours per verse.	1 se inclusiverage	0. 0. 0. 0. uded on li	emplo and defe	46, see instr (d) Contrib employee plans and	0. 0. 0. 822. ructions to benefit deferred	s). If no	one, e	0. 0. 0. enter
42 1 Lou 42 1 Lou 42 1 See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h "NONE."	nta GA 30324 nta GA 30324 nta GA 30324 nta GA 30324 highest-paid employee	Trust Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00 tee (b) Title, and a hours per verse.	1 se inclusiverage	0. 0. 0. 0. uded on li	emplo and defe	46, see instr (d) Contrib employee plans and	0. 0. 0. 822. ructions to benefit deferred	s). If no	one, e	0. 0. 0. enter
42 1 Lou 42 1 Lou 42 1 See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h "NONE."	nta GA 30324 nta GA 30324 nta GA 30324 nta GA 30324 highest-paid employee	Trust Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00 tee (b) Title, and a hours per verse.	1 se inclusiverage	0. 0. 0. 0. uded on li	emplo and defe	46, see instr (d) Contrib employee plans and	0. 0. 0. 822. ructions to benefit deferred	s). If no	one, e	0. 0. 0. enter
42 1 Lou 42 1 Lou 42 1 See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h "NONE."	nta GA 30324 nta GA 30324 nta GA 30324 nta GA 30324 highest-paid employee	Trust Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00 tee (b) Title, and a hours per verse.	1 se inclusiverage	0. 0. 0. 0. uded on li	emplo and defe	46, see instr (d) Contrib employee plans and	0. 0. 0. 822. ructions to benefit deferred	s). If no	one, e	0. 0. 0. enter
42 1 Lou 42 1 Lou 42 1 See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h "NONE."	nta GA 30324 nta GA 30324 nta GA 30324 nta GA 30324 highest-paid employee	Trust Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00 tee (b) Title, and a hours per verse.	1 se inclusiverage	0. 0. 0. 0. uded on li	emplo and defe	46, see instr (d) Contrib employee plans and	0. 0. 0. 822. ructions to benefit deferred	s). If no	one, e	0. 0. 0. enter
42] Lou: 42] Lou: 42] See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h "NONE."	nta GA 30324 nta GA 30324 nta GA 30324 nta GA 30324 nighest-paid employee nployee paid more than \$50,00	Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00 tee (b) Title, and a hours per verse.	1 se inclusiverage	0. 0. 0. 0. uded on li	emplo and defe	46, see instr (d) Contrib employee plans and	0. 0. 0. 822. ructions to benefit deferred	s). If no	one, e	0. 0. 0. enter
42] Lou: 42] Lou: 42] See	mas K Glenn II Lenox Pointe Atlan ise Glenn Lenox Pointe Atlan isa Glenn D'Antign Lenox Pointe Atlan Statement Compensation of five h "NONE."	nta GA 30324 nta GA 30324 nta GA 30324 nta GA 30324 nighest-paid employee nployee paid more than \$50,00	Trust Trust	s per week ed to position tee 8.00 tee 8.00 tee 8.00 tee (b) Title, and a hours per verse.	1 se inclusiverage	0. 0. 0. 0. uded on li	ne 1—	46, see instr (d) Contrib employee plans and	plans ensation 0. 0. 822. ructions to benefit deferred sation	s). If no	one, e	0. 0. 0. enter

Form 990-PF (2018)

Form 9	PF (2018)	Page I
Par	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3	ive highest-paid independent contractors for professional services. See instructions. If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
Mon		1,7,111
Non	No.	
	None None	
		
	mber of others receiving over \$50,000 for professional services	• 10
Par	K-A Summary of Direct Charitable Activities	
	e foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number cations and other beneficiaries served, conferences convened, research papers produced, etc	ef Expenses
1	I/A	
		-
		·- 0.
2		
		-
3		
-		· -
	·····	· -
4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
•		· -
		· -
Par	Summary of Program-Related Investments (see instructions)	
De	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		
		· -
		·-
All	er program-related investments. See instructions	1
3		
-		
		·-

REV 02/01/19 PRO

BAA

Form **990-PF** (2018)

Form 990-PF (2018) Page 8 Minimum Investment Return (All domestic foundations must complete this part, Foreign foundations, Part X see instructions.) . Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: **1a** | 118,781,429. 1h 1,808,854. 1c 1d 120,590,283. **Total** (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 2 2 120,590,283. 3 3 Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see 4 1,808,854. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 118,781,429. ĸ 6 5,939,071. Distributable Amount (see instructions) (Section 4942())(3) and (i)(5) private operating foundations Part XI and certain foreign organizations, check here \(\subseteq \) and do not complete this part.) 5,939,071. 2a Income tax for 2018. (This does not include the tax from Part VI.) 2b 2c 13,201. 3 5,925,870. 3 4 4 5 5,925,870. Deduction from distributable amount (see instructions) . . . 6 6 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, 7 5,925,870. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 1a 6,496,959. **b** Program-related investments—total from Part IX-B 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 Amounts set aside for specific charitable projects that satisfy the: 3 3a 3b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 4 4 6,496,959. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.

Form **990-PF** (2018) BAA REV 02/01/19 PRO

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

5

6

13,201.

6,483,758.

qualifies for the section 4940(e) reduction of tax in those years

5

6

Form 990-PF (2018) Page **9**

art	Undistributed Income (see instruction	ns)			
		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7				5,925,870.
2	Undistributed income, if any, as of the end of 2018:				373237070.
_	Enter amount for 2017 only			5,857,123.	
b	Total for prior years: 20 , 20 , 20	······································			
3	Excess distributions carryover, if any, to 2018.	1			
а	From 2013 0 .				
b	From 2014				
С	From 2015 0 .				
d	From 2016 0 .				
е	From 2017		1		
f	Total of lines 3a through e .	0.			
4	Qualifying distributions for 2018 from Part XII, line 4: ► \$ 6,496,959.				
а	Applied to 2017, but not more than line 2a			5,857,123.	
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 2018 distributable amount			-	639,836.
e	Remaining amount distributed out of corpus	0.			0357030.
5	Excess distributions carryover applied to 2018	<u> </u>			
J	(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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b	Prior years' undistributed income Subtract line 4b from line 2b		0.		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0.		
е	Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount—see instructions			0.	
	Undistributed income for 2018 Subtract lines			U.	
f	4d and 5 from line 1. This amount must be distributed in 2019				5,286,034.
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 2013 not applied on line 5 or line 7 (see instructions).	0.			
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0.			
0	Analysis of line 9	***************************************		<u>,-, , , , , </u>	
а					
b	Excess from 2015 0 .				
С	Excess from 2016 0 .				
d	Excess from 2017 0.				
	Excess from 2018 0.				

Form 99	90-PF (2018)					Page 10
Part	XIV Private Operating Founda	tions (see ınstr	uctions and Par	t VII-A, question 9	9)	N/A
	If the foundation has received a ruling foundation, and the ruling is effective for			a private operating		
b	Check box to indicate whether the four			ation described in se	ection 4942(ı)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	investment return from Part X for each year listed	-				
b	85% of line 2a					
	Qualifying distributions from Part XII,					
	line 4 for each year listed .		ľ			
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.					
а	"Assets" alternative test-enter					
	(1) Value of all assets .					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)				ļ	
b	"Endowment" alternative test—enter 2/3/of minimum investment return shown in					
	Part X, line 6 for each year listed	·				
С	"Support" alternative test - enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or foyalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Information	n (Complete t	this part only if	the foundation h	nad \$5,000 or m	ore in assets at
	any time during the year-		-		. ,	
1	Information Regarding Foundation					
а	List any managers of the foundation	who have contrib	outed more than 2	2% of the total cont	ributions received	by the foundation
	before the close of any tax year (but o	only if they have o	contributed more	than \$5,000). (See s	section 507(d)(2))	
	NONE					
b	List any managers of the foundation	who own 10%	or more of the st	ock of a corporatio	n (or an equally la	arge portion of the
	ownership of a partnership or other e	ntity) of which the	e foundation has a	a 10% or greater int	erest	
	NONE					
2	Information Regarding Contribution					
	Check here ► 🗵 if the foundation					
	unsolicited requests for funds. If the f		s gifts, grants, etc	, to individuals or o	organizations unde	r other conditions,
	complete items 2a, b, c, and d. See in					
а	The name, address, and telephone nu	umber or email a	ddress of the pers	son to whom applica	ations should be a	ddressed:
	The form is which applications should	ho submitted a	nd information an	d materials they sho	ould include:	
b	The form in which applications should	ש ב supmiπed al	nu iniormation an	u materiais triey sno	Jula IIIciude.	
	Any submission deadlines:				<u> </u>	
	·					
d	Any restrictions or limitations on av	vards, such as	by geographical	areas, charitable f	ields, kinds of ins	stitutions, or other
	factors:					

Form 990-PF (2018)

3 Grants and Contributions Paid During t	he Year or Approv	ed for Fut	ture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of		Amount
	or substantial contributor	recipient	CONTRIBUTION	
a Paid during the year				
See list				
Atlanta GA 30324		PC	Operating support	6,234,000.
		ŀ	•	
		ŀ		
		^		
Total			▶ 3a	6,234,000.
b Approved for future payment				
See list				
Atlanta GA 30324		PC	See list	5,548,000.
				1
Total	<u>L</u>	<u> </u>	▶ 3t	5,548,000
Total	· · · · · ·	<u> </u>		13,348,000

	rt XVI		tivities				
Ente	er gros	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(e)
	•		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1	Prog	ram service revenue:			ļ	<u></u>	
	а <u>Р</u>	RI Interest			14	10,000.	10,000.
	b _				j		
	c						
	d _						
	e –						
	f -		-		İ		
	• –	and and contracts from any comment agencies			<u> </u>	-	
_	-	ees and contracts from government agencies				ļ	
2		bership dues and assessments			<u> </u>		
3		est on savings and temporary cash investments	523000	0.	14	90,597.	
4	Divid	ends and interest from securities	523000	0.	14	1,398,232.	
5	Net r	ental income or (loss) from real estate.					
	a D	Pebt-financed property					
	b N	lot debt-financed property					
6		ental income or (loss) from personal property					
7		r investment income					
8		or (loss) from sales of assets other than inventory			18	-31,424.	-31,424.
_		• •		.,	10	-31,424.	-31,424.
9		ncome or (loss) from special events	-		1		
10		s profit or (loss) from sales of inventory					
11		rrevenue a Partnership book income	523000	-306,304.	14	-306,304.	
	ь_				<u> </u>		
	c _						
	d _						
	е				ļ		
12	Subt	otal Add columns (b), (d), and (e)		-306,304.		1,161,101.	-21,424.
13	Tota	I. Add line 12, columns (b), (d), and (e)				13	833,373.
		sheet in line 13 instructions to verify calculation					•
<u> </u>		-B Relationship of Activities to the A		ent of Exemp	t Purposes		
	ne No.					I-A contributed in	montantly to the
	V	Explain below how each activity for which accomplishment of the foundation's exempt pur	rposes (other tha	n by providing fun	nds for such purp	oses) (See instruc	tions.)
1A		Represents income received from	m a Progra	m Pelated 1	Investment		
<u> </u>		Represents income received from	m a rrogra	m Rezacea i	IIIVCBCIICIIC	•	
							
					<u></u>		
							
				<u> </u>			
						<u></u>	
		"	*****				
				· ·			
							
		-				,	
_							
_			<u></u>				
							000 PF (2)

a ·	in section 501(c) (c organizations? Transfers from the re	directly or indirectly other than section	engage in any of the followi	ng with an	v other organization described	1	Yes	Nic
a '	Transfers from the re		Sorto, or organizations, o	r in sect	ion 527, relating to political	,	103	140
b (porting foundation t	o a noncharitable exempt or	ganization	n of:	1		
b	III Cash	porting loundation t	o a nonchamable exempt of	garnzation		1a(1)	_	×
	(2) Other assets .					1a(2)		×
	Other transactions:							
						1b(1)		×
			, -			1b(2)		×
			er assets			1b(3)	_	×
						1b(4)		×
						1b(5)		×
						1b(6)	├	×
					Column (b) should always sho		fair n	
					n. If the foundation received les			
					of the goods, other assets, or s			
(a) Line	no. (b) Amount involved	(c) Name of nonc	haritable exempt organization	(d) Desc	cription of transfers, transactions, and sl	naring arr	angem	ents
							<i></i>	
			· · · · · · · · · · · · · · · · · · ·					
			<u> </u>	-				
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				+ -	· · · · · · · · · · · · · · · · · · ·			
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		1		<u> </u>	-			
		1	•	1				
					**			
		501(c) (other than se	ection 501(c)(3)) or in section		nore tax-exempt organizations	☐ Y	es 🛭] No
	(a) Name of orga		(b) Type of organizatio	1	(c) Description of relat	ionship		
	(-,,		1,7,7		,			
				-				
		······································	1					
		***********			<u> </u>	· · · · · · · · · · · · · · · · · · ·		
•								
			ned this return, including accompanying han taxpayer) is based on all informatio		nd statements, and to the best of my know	edge and	belief,	t Is tru
Sign	 corrors and complete Dec 	TISTSTON OF DISCOSING INTROFT	nifemnatni ile na basen si naventer nen					_

Date

GA 30324-3169

Check if self-employed P01700183

Form 990-PF (2018)

Firm's EIN ➤ 58-2615903

Phone no. (678) 608-4987

Print/Type preparer's name

Firm's name

Firm's address ▶

William S. Porter

VALUATION ECONOMETRICS LLC

42 LENOX POINTE NE

ATLANTA

Paid

BAA

Preparer

Use Only

THE WILBUR AND HILDA GLENN FAMILY FOUNDATION

58-6328896

Form 990-PF: Return of Private Foundation

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

Continuation Statement

(a) List and describe (e.g., real estate, common stoc	(b) How acquired P-Purchase D-Donation	(c) Date	(d) Date			
BNY Mellon Capital Gai	n Distribution	P	12/15/15	04/12/18		
Berens Global Value Fu	nd - Holdback	-	P	08/12/10	06/30/18	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other us expense of sale	(h) Gain ((e) plus (g	(f) minus	
660,359.			0.		660,359.	
49,998.			0.		49,998.	
710,357.	0.		0.		710,357.	
Complete only for ass	ets showing gain in co e foundation on 12/31/	lumn (h) a 69		(1) Gains gain minus	col. (k),	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col. col. (j), if any	but not less than -0- or Losses (from col (h))		
					660,359.	
					49,998.	
0.	0.		0.		710,357.	

58-6328896

THE WILBUR AND HILDA GLENN FAMILY FOUNDATION

Form 990-PF: Return of Private Foundation

Continuation Statement Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

0 0 Expense account, other allowances 46,822. employee benefit plans and deferred Contributions to compensation 0 190,000. Compensation hours per week devoted to position Title, and average Exec. Director Trustee 40.00 8.00 Name and address Suzanna Stribling 42 Lenox Pointe Atlanta, GA 30324 Atlanta, GA 30324 42 Lenox Pointe Rand G. Hagen

·

46,822.

190,000.

58-6328896

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Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Other Income

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income
Partnership Taxable Income	-306,304.	1,156,526.	
Partnership UBTI		300,770.	
Partnership UBTI		-1,047,293.	
Program Related Income	10,000.		
Total	-296,304.	410,003.	

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose	
Federal Excise Tax					
Foreign Tax	42,285.	42,285.			
Total	42,285.	42,285.			

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Expense per Investment		Disbursement for charitable purpose
Bank Service Charges	81,409.	81,409.		
Total	81,409.	81,409.		

Form 990-PF: Return of Private Foundation

Part VII-A, line 12, Distribution to a Donor Advised Fund

Explanation Statement

Donor Advised Fund

All contributions to a DAF over which the Foundation has advisory privileges are contributions to an entity described in IRC Sec 501(c)(3) and 170(B)(1)(A)(VI).

Such funds will be used exclusively to fund grants to other entities that are exempt under IRC Sec 501 (c) (3).

As a result, they are included in the qualifying distributions of the Foundation.

Form 990-PF Part I, Line 6a

Net Gain or Loss From Sale of Assets

2018

Name	Employer Identification No
THE WILBUR AND HILDA GLENN FAMILY FOUNDATION	58-6328896
Asset Information:	А
Description of Property Nuveen Gresham Commodity Fund	
Business Code Exclusion Code	
Date Acquired 12/28/17 How Acquired . Purchased	
Date Sold04/10/18 Name of Buyer	
Check Box, if Buyer is a Business X	
Sales Price117, 890. Cost or other basis (do not reduce by depreciate	tion) 115.913.
Total Gain (Loss) . 1,977 . Accumulated Depreciation	
Description of Property BNY Mellon - Long term loss	-
Business Code Exclusion Code	
Date Acquired	
Date Sold04/10/18 Name of Buyer	
Check Box, if Buyer is a Business X	
Sales Price 9, 057, 016. Cost or other basis (do not reduce by depreciate	tion) 9 545 255
Sales Expense Valuation Method Total Gain (Loss)488,239 . Accumulated Depreciation	
Description of Property BNY Mellon Bond Fund - Short Terr	<u> </u>
Business CodeExclusion Code Date Acquired various How Acquired . Purchased	
· ·	
Date Soldvarious Name of Buyer	
Check Box, if Buyer is a Business X	tion) 4 055 760
Sales Price 4,852,035. Cost or other basis (do not reduce by deprecial	
Sales Expense Valuation Method	-
Total Gain (Loss)103,725. Accumulated Depreciation	
Description of Property BNY Mellon Bond Fund - Long term	
Business Code Exclusion Code	
Date Acquiredvarious How Acquired . Purchased	
Date Soldvarious Name of Buyer	
Check Box, if Buyer is a Business X	V\
Sales Price 5, 269, 926. Cost or other basis (do not reduce by deprecial	
Total Gain (Loss)151,794 . Accumulated Depreciation	
Description of Property See Net Gain or Loss from Sale of	Assets
Business Code Exclusion Code	
Date Acquired How Acquired	
Date Sold Name of Buyer	
Check Box, if Buyer is a Business	
Sales Price Cost or other basis (do not reduce by deprecia	tion)
Sales Expense Valuation Method	
Total Gain (Loss) Accumulated Depreciation	<u></u>
Totals:	
Total Gain (Loss) of all assets	
Gross Sales Price of all assets 20,007,224.	
Unrelated Business IncomeBusiness Code	
Excluded by section 512, 513, 514Exclusion Code	_
Related/Exempt Function Income	
	
QuickZoom here to Form 990-PF, Page 1	
QuickZoom here to Form 990-PF, Page 12	▶

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Additional information from your Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets Net Gain or Loss from Sale of Assets

Continuation Statement

Description of Property	Bu sin es s Co de	n	e Acq	How Acquired	Dat e Sol d	Name of Buyer	B u y er a B u si n e s s	Sale s Pric e	or other	Sale s Exp ense	Valuation Method	Total Gain or Loss	Accu mulat ed Depre ciatio n
BNY Mellon Capital Gain Distributions			variou s		variou s		х	660,359				660,359	
Berens Global Value Fund			variou s	Purchased	variou s			49,998				49,998	

Wilbur and Hilda Glenn Family Foundation - 2018 Forms 990PF and 990T - FEIN 58-6328896 - Page 19 of 20

Form 990-PF Part I, Lines 16a - 16c Legal and Professional Fees

2018

Name								Employer Identification No
THE	WILBUR	AND	HILDA	GLENN	FAMILY	FOUNDATION		<u>58-6328896</u>
-				···			<u> </u>	

Line 16a - Legal Fees

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

Line 16b - Accounting Fees

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

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
					-
					-
<u> </u>					
et Consulting Group	Investment Advice	206,831.	206,831.		-
	PF, Part I, Line 16c	206,831.	206,831.		

7 414 11						
Name THE WILBUR AND HILDA GLENN F		ver Identification No				
Line 10a - Investments - US and State Government Obligations:	US Govern Obligation Book Va	ons	f Year US Government Obligations FMV			
Tot to Fm 990-PF, Pt II, Ln 10a						
Line 10b - Investme	ents - Corporate	Stock:	Book Value		f Year Fair Market Value	
Aberdeen AMG SouthernSun Artisan International V See L-10b Stmt Totals to Form 990-PF, Part II, I			5,918, 6,892, 7,340, 22,297, 42,449,	964. 247. 700.	5,888,567. 5,048,259. 8,181,634. 26,793,088. 45,911,548.	
Line 10c - Investme	Line 10c - Investments - Corporate Bonds:					
BNY Mellon Fixed Income	e Portfolio		13,408,	492.	13,244,528.	
Totals to Form 990-PF, Part II, I	ine 10c		13,408,	492.	13,244,528.	
Line 12 - Investme	ents - Mortgage I	oans:	Book Value		of Year Fair Market Value	
Totals to Form 990-PF, Part II, I	_ine 12					
Line 13 - Inve	estments - Other	:	Book Value		f Year Fair Market Value	
AEW Core Property Trus AKO Fund Limited Bridger Swiftcurrent See L-13 Stmt Totals to Form 990-PF Part II.			4,500, 2,000, 2,000, 35,876, 44,376.	000. 000. 902.	4,725,205. 2,933,652. 1,889,672. 38,167,954.	
Bridger Swiftcurrent	_ine 13		2,000,	000. 902.	1,889,672	

THE WILBUR AND HILDA GLENN FAMILY FOUNDATION 58-6328896 FORM 990-PF, PART XV, GRANTS Year Ending December 31, 2018

			Foundatio	n	
Name and Address of Recipient			Status	Purpose of Grant	Amount
·				·	
Atlanta Community Food Bank	Atlanta	GA	PC	Capital Campaign	1,000,000
Atlanta Volunteer Lawyers Foundation	Atlanta	GA	PC	Program Support	50,000
Community Foundation for Greater Atlanta	Atlanta	GA	PC	Glenn Utility Fund	35,000
Community Foundation for Greater Atlanta	Atlanta	GA	PC	Every Student Every Community Fund	500,000
Emory Brain Health Center	Atlanta	GA	PC	General Operating Support	25,000
Emory School of Medicine	Atlanta	GA	PC	Child Psychiatry Fellowships	100,000
Georgia Budget and Policy Institute	Atlanta	GA	PC	General Operating Support	50,000
Georgia Grantmakers Alliance	Atlanta	GA	PC	Capacity Building	15,000
Global Growers Network	Avondale Estates	GA	PC	Capacity Building	50,000
Global Village Project	Decatur	GA	PC	General Operating Support	25,000
Grady Health Foundation	Atlanta	GA	PC	Capital Campaign	500,000
Interfaith Youth Core	Chicago	IL	PC	Program Support	10,000
Island Institute	Rockland	ME	PC	Impact Community Fund	500,000
Kındezi Schools	Atlanta	GA	PC	General Operating Support	500,000
LifeFlight of Maine Foundation	Camden	ME	PC	General Operating Support	100,000
Maine Coast Heritage Trust	Topsham	ME	PC	Capital Campaign	50,000
Mount Desert Island Hospital	Bar Harbor	ME	PC	Palliative Care Program	100,000
Mount Desert Island Hospital	Bar Harbor	ME	PC	Medical Education Program	300,000
Our House	Atlanta	GA	PC	General Operating Support	50,000
Park Pride	Atlanta	GA	PC	General Operating Support	50,000
Piedmont Healthcare Foundation	Atlanta	GA	PC	Capital Campaign	333,000
Piedmont Hospital	Atlanta	GA	PC	Capital Campaign	333,000
Purpose Built Schools Atlanta	Atlanta	GA	PC	Program Support	666,000
Second Helpings Atlanta	Atlanta	GA	PC	Capacity Building	75,000
Skyland Trail	Atlanta	GA	PC	Capital Campaign	667,000
The Common Market Georgia	East Point	GA	PC	Capacity Building	100,000
Wholesome Wave Georgia	Atlanta	GA	PC	Capacity Building	50,000
				Total	6,234,000
APPROVED FOR FUTURE PAYMENT					
Emory School of Medicine	Atlanta	GA	PC	Child Psychiatry Fellowships	100,000
Grove Park Foundation	Atlanta	GA	PC	Capital Campaign	100,000
Jacob's Ladder for Neurodevelopmental Learning	Atlanta	GA	PC	Capital Campaign	1,000,000
Skyland Trail	Atlanta	GA	PC	Capital Campaign	1,333,000
Westminster Schools	Atlanta	GA	PC	Capital Campaign	1,000,000
Wholesome Wave Georgia	Atlanta	GA	PC	Matching Grant for FINI Program	100,000
Georgia Budget and Policy Institute	Atlanta	GA	PC	General Operating Support	50,000
Kındezi Schools	Atlanta	GA	PC	General Operating Support	500,000
Auburn Seminary	New York	NY	PC	General Operating Support	50,000
Global Growers Network	Atlanta	GA	PC	Capacity Building	25,000
The Common Market Georgia	East Point	GA	PC	Capacity Building	125,000
Georgia Grantmakers Alliance/SECF	Atlanta	GA	PC	Capacity Building	15,000
Island Institute	Rockland	ME	PC	Impact Community Fund	1,000,000
Second Helpings Atlanta	Atlanta	GA	PC	Capacity Building	150,000
				•	

Total

5,548,000