** Electronically signed at the Form 990 Online Website (efile.form990.org) **								
Form 8	8453-TE Tax Exempt Entity Declaration and Signature for Electronic Filing			0	MB No. 1545-0047			
		For calendar year 20	21, o	0				
Department of the Treasury Internal Revenue Service For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 8038-CP 2021							2021	
Name o	f filer				EIN or S	SSN	SN	
AMER	ICAN CHARITAE	BLE TRUST INC				45-	45-5565349	
Part	Type of	Return and Return	Jrn	Information				
6a, 7a 6b, 7b	, 8a, 9a, or 10a , 8b, 9b, or 10b	pelow, and the amo	unt able	nts. For all other forms, enter whole dollars only. If you check th on that line of the return being filed with this form was blank, th e, blank (do not enter -0-). If you entered -0- on the return, ther Part I.	en leav	e line	1b, 2b, 3b, 4b, 5b,	
1a	Form 990 chec	k here 🕨 🗹	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)		1b	159,671	
2a	Form 990-EZ	heck here . 🕨 🗌	b	Total revenue, if any (Form 990-EZ, line 9)		2b		
3a	Form 1120-PO	L check here ► 🗌	b	Total tax (Form 1120-POL, line 22)		3b		
4a	Form 990-PF	heck here . 🕨 🗌	b	Tax based on investment income (Form 990-PF, Part VI, line	5).	4b		
5a	Form 8868 che	ck here . 🛛 🕨 🗌	b	Balance due (Form 8868, line 3c)		5b		
6a	Form 990-T ch	eck here 🛛 . 🕨 🗌	b	Total tax (Form 990-T, Part III, line 4)		6b		
7a	Form 4720 che	ck here . 🛛 🕨 🗌	b	Total tax (Form 4720, Part III, line 1)		7b		
8a	Form 5227 che	ck here . 🛛 🕨 🗌	b	FMV of assets at end of tax year (Form 5227, Item D)		8b		
9a	Form 5330 che	ck here . 🛛 🕨 🗌	b	Tax due (Form 5330, Part II, line 19) . .		9b		

10a Form 8038-CP check here **b** Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10b

Part II Declaration of Officer or Person Subject to Tax

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11a I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

b If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/ 990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that 🗹 I am an officer of the above named entity or 🗌 I am the person subject to tax with respect to (name of entity) , (EIN) ,

and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign	Janya Schwindt	November 10, 2022	Tanya Schwindt, Chief Financial Officer		
Here	Signature of officer or person subject to tax	Date	Title, if applicable		
Part III	Declaration of Electronic Return Origin	nator (ERO) and Paid P	reparer (see instructions)		

I declare that I have reviewed the above return and that the entries on Form 8453-TE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The entity officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use	ERO's signature		Date	Check if also paid preparer	Check if self- employed	ERO's SSN or PTIN
	Firm's name (or yours if self-employed),					EIN
Only	address, and ZIP code	/				Phone no.

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid	Print/Type preparer's name	Preparer's signature	Date	Check if self- employed
Preparer	Firm's name ►	Firm's EIN ►		
Use Only	Firm's address ►	Phone no.		