Form 990

Department of the Treasury Internal Revenue Service

Т

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

► Go to www.irs.gov/Form990 for instructions and the latest information. ar, or tax year beginning and ending



AF	For th	e 2020 calendar year, or tax year beginning and	ending		
B (Check i applical	C Name of organization		D Employer identifi	cation number
	Addr	ge CFSA PROPERTIES IV, INC.			
	Nam Char	e		84-42482	70
	Initia		Room/suite		-
	Final		noon, ound	251-438-	
	term			G Gross receipts \$	407,308.
				H(a) Is this a group re	
	Appl tion		ER	for subordinates	
	pend	PO BOX 990, MOBILE, AL 36601		H(b) Are all subordinates in	ncluded? Yes No
11	Tax-e	xempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1)	or 527		list. See instructions
٦١	Webs	ite:▶N/A		H(c) Group exemptio	n number 🕨
KF	orm o	of organization: 🔀 Corporation 📄 Trust 📄 Association 📄 Other 🕨	L Year	of formation: 2019	A State of legal domicile: AL
Pa	art I	-			
-	1	Briefly describe the organization's mission or most significant activities: CFSA	PROPE	ERTIES, IV, I	INC. SHALL
Governance		BE OPERATED FOR THE BENEFIT OF THE COMMUN	IITY F	OUNDATION OF	SOUTH
rna	2	Check this box 🕨 🦳 if the organization discontinued its operations or dispos	sed of more	e than 25% of its net as	sets.
ove	3	Number of voting members of the governing body (Part VI, line 1a)			5
		Number of independent voting members of the governing body (Part VI, line 1b)			0
es és	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)			0
vitie	6	Total number of volunteers (estimate if necessary)		6	0
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
_	k	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.
				Prior Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		0.	407,308.
nué	9	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
£	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0.	407,308.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	fits paid to or for members (Part IX, column (A), line 4)		0.
ŝ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	. k	• Total fundraising expenses (Part IX, column (D), line 25) 🛛 🕨	0.		
Ш	1 11	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		0.	176,849.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		0.	176,849.
	19	Revenue less expenses. Subtract line 18 from line 12		0.	230,459.
OL SO			В	eginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)		0.	3,730,459.
Net Assets or	21	Total liabilities (Part X, line 26)		0.	3,500,000.
ERe	22	Net assets or fund balances. Subtract line 21 from line 20		0.	230,459.
Pa	art II				
Und	er per	alties of perjury, I declare that I have examined this return, including accompanying schedule	s and statem	ients, and to the best of my	/ knowledge and belief, it is

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer MARY KATHLEEN MILLER, P Type or print name and title	RESIDENT	Date					
Paid		Preparer's signature Date CAROLYN F MCKEAN 11/	12/21 Check PTIN if self-employed P00621079					
Preparer	Firm's name 🕒 CARR, RIGGS & ING	RAM, LLC	Firm's EIN ▶ 72-1396621					
Use Only	Firm's address PO BOX 70106							
	MOBILE, AL 36670		Phone no. 251 . 473 . 5550					
May the I	May the IRS discuss this return with the preparer shown above? See instructions 🛛 🚺 Yes 🔲 No							
032001 12-2	32001 12-23-20LHAFor Paperwork Reduction Act Notice, see the separate instructions.Form 990 (2020)							

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2020) CFSA	PROPERTIES	IV, INC.		84-4248270	Page 2
Pa	t III Statement of Program		-			
			to any line in this Par	t III	<u></u>	
1	Briefly describe the organization's SEE SCHEUDLE O	mission:				
2	Did the organization undertake any	y significant program s	services during the y	ear which were not listed on the		
					Yes	X No
-	If "Yes," describe these new service					v .
3	Did the organization cease conduct If "Yes," describe these changes of		ant changes in how i	conducts, any program services?	Yes	XNo
4	Describe the organization's progra		ments for each of its	three largest program services, as	s measured by expenses.	
	Section 501(c)(3) and 501(c)(4) org revenue, if any, for each program s	anizations are required				ıd
4a	(Code:) (Expenses \$		including grants of \$) (Reve	enue \$)
	SEE SCHEDULE O					
4b	(Code:) (Expenses \$		including grants of \$) (Beve	enue \$)
	(0000) (Expenses ¢					/
4c			including grants of t) (paur	enue \$	
40	(Code:) (Expenses \$) (neve	side ¢)
Act	Other program convince (Decent	on Schodula C \				
4d	Other program services (Describe (Expenses \$	on Schedule O.) including grants of \$	6) (Revenue \$	١	
4e			4			
					Form 9	90 (2020)
032002	2 12-23-20					
			2			

2020.05010 CFSA PROPERTIES IV, INC. 06321__1

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		<u>X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		77
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-		77
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		v
~	Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	-		v
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			v
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			v
	Part VI	11a		<u> </u>
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	4.4%		х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	44.		х
А	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	11c		<u></u>
a		11d	x	
•	Part X, line 16? If "Yes," complete Schedule D, Part IX	11e	X	
-	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	TIE		
f	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
120	Schedule D, Parts XI and XII	12a		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
D.		12b		х
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	. 14		
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		Х
)32003	12-23-20	Form	990 (2020)

032003 12-23-20

3 2020.05010 CFSA PROPERTIES IV, INC. 06321__1

Form	990	(2020)
	330	

Part M Checklist of Required Schedules control of the organization report more than 55000 of grants or cher assistance to or for domastic individuals on Part X: cell Molecular Schedule / Art / Ar	Form	990 (2020) CFSA PROPERTIES IV, INC. 84-4	24827	'0 F	age 4
22 Did the organization report more than \$5:000 of genite or other assistance to or domestic individuals on Part X, Guine X, Construct Schedule / Part / and M Image: Construction of the organization and the part of the part X is construct Schedule / Part / and M Image: Construction of the organization and the part of the part X is construct Schedule / Part / and M Image: Construction of the part of the Part X is construction of the organization is construction. The part of the part X is construction of the part part of the part of the part of the part of th	Par	TIV Checklist of Required Schedules (continued)			
Part K, column (A), line 2? (f 'Yes, 'complete Schedule / Parts and ill 22 X 23 Did the organization answer 'Yes' for Part IV, Schedule A, for 3 about compensation of the organization sourcent is Schedule J. 23 X 24a Did the organization have a tax-exampt bond issue with an outstanding principal amount of more than \$100,000 as of the isst day of the year, that was issued alter Docember 31, 2002? if 'Yea, 'narwer lines 24b through 24b and complete Schedule K. If 'No,' go to line 25a 24a Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24a 24a 21b Oth the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24d 24d 22s Section \$01(c)(3), \$01(c)(4), and \$01(c)(20) organizations. Did the organization orgagin in an excess benefit transaction with a disqualified period in an excess benefit transaction with a disqualified period in an excess benefit transaction with a disqualified period in an excess benefit transaction with a disqualified period in an excess benefit transaction with a disqualified period rung memory exert and that the transaction harm of the angle Schedule L, Part I 25b X 27 Did the organization nerouse any anound on Part X, line 5 or 22, for reselvables from or payables to any current or former officer, director, trustee, key employee, creator of founder, substantial contributor or angle Schedule L, Part IV 26c X 27 Did the organization nerouse tan subsche and cases peremosel IV 'Yes, 'complete Schedule L, Part IV 26a </th <th></th> <th></th> <th></th> <th>Yes</th> <th>No</th>				Yes	No
23 Dot the organization answer "Yes" to Part NI, Section A, line 3.4, or 5 about compensated employees? If "Yes," complete Schedule J. 23 X 24a Dot the organization harves it as exempt bond issue with an outstanding principal amount of more than \$100,000 as of the tast day of the year, that was insued after Disembid \$3,12002 "If "Yes," narver lines 240 through 24 and complete Schedule K. If "Yoc," is the section of the organization matrix any necession section the than a refunding accrew at any time during the year' to defause any tax secure bonds? 24a 24b Did the organization matrix any necession account of the than a refunding accrew at any time during the year' to defause any tax secure bonds? 24a 25 Section 50(10), 50(10),41 (He tanggad in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been regorded on any of the organization organization are affect the organization and the tanggad in an excess benefit transaction has not been regorded on any of the organization are prior year, and that the transaction haves that the regord on an excess benefit transaction with a disquartistic contributor or a prior year, and that the transaction have of the organization are prior any of these person? If "Yes," complete Schedule L, Part I 25b 25 Dot the organization are prior bar. Schedule and contributor or a fifth and any current or form officer, director, trustee, key employee, creator of founder, substantial contributor or any of these person? If "Yes," complete Schedule L, Part II 26c X 26 Dot the organization are	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
and former offices, directors, trustees, key employees, and highest comparisated employees? If 'Yes, ' complete Schedule I, A'' is a size waten to hood lesus with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes, ' answer lines 244 bitrough 244 and complete Schedule I, K I' No, ' go to line 25a 24a Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24a Z4b D Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24d Z4d D Did the organization invest any increasing and indivest of the organization argae in an excess benefit transaction with a disqualified period 0.100 the organization argae in an excess benefit transaction with a disqualified period 0.100 the organization's period from the organization's particles. Schedule L, Part I 25a X D Did the organization argue the organization's prior Forms 980 or 980-CF2 // Y'es, ' complete Schedule L, Part I 25b X D Did the organization provide any of these perions? // Y'es, ' complete Schedule L, Part I 25b X D Did the organization provide any of these perions? // Y'es, ' complete Schedule L, Part I 25b X D Did the organization provide any of these perions? // Y'es, ' complete Schedule L, Part I 25b X D Did the organization provide any of these perions? 1''es, ' complete Schedule L, Part I 25b X D Did the organization provide any of these perions? 1''es, ' complete Schedule L, Part I 25b <td></td> <td></td> <td> 2</td> <td>2</td> <td><u> </u></td>			2	2	<u> </u>
Schedule J 23 X 44a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the Schedule K, If Yeo, ' completed Schedule K, If Yeo, ' complete Schedu	23				
24a Det the organization have a tax-exempt bond issue with an udstanding principal amount of more than \$100,000 as of the last day of the year, that was issue after December 31, 2002? // 'Yes,' answer lines 24b through 24d and complete Schedule K, // 'No,' go to line 25a 24a X b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24a X c Did the organization invest any proceeds of tax-exempt bonds outstanding at my time during the year to defease any tax-exempt bonds? 24d X 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a clisqualified person in a prior year, and that the transaction with a clisqualified person in a prior year, and that the transaction with a clisqualified person in a prior year, and that the transaction with a clisqualified person in a prior year, and that the transaction with a clisqualified person in a prior year, and that the transaction with a clisqualified person in a prior year, and that the transaction with a clisqualified person in a prior year, and that the transaction with a clisqualified person in a prior year, and that the grane point any amount on Part X, line 5 or 22, for receivables from or payable to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, and X, line 5 or 22, for receivables from or payable to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or anyloyee thereol, a prior to a set person 27, if "Yes," complete Schedule L, Part I V Zein X 28 Was the organization n		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
at day of the year, that was issued after December 31, 2002? If 'Yea,' answer lines 24b through 24d and complete 24a X b Dot the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b 24b c Dot the organization maintain an escrow account offer than a refunding server at any time during the year to detease any tax-sempt bonds? 24d 24d 2 Section 50(16)(8), 501(44) and 550(1c)(29) organizations. Dot the organization engage in an excess benefit transaction with a disqualified perion during the year? <i>I 'Yea</i> ,' complete Schedule L, Part I 25a X 2 B Section 50(16)(8), 501(44) and 550(1c)(29) organizations. Dot the organization engage in a price sees the fit transaction with a disqualified perion during the year? <i>I 'Yea</i> ,' complete Schedule L, Part I 25a X 2 B Dot the organization export at its engaged in an oxeose benefit transaction with a disqualified perion during the year? <i>I 'Yea</i> ,' complete Schedule L, Part I 25b X 2 B Dot the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or to a 35% concluded any of these person? II 'Yea,' complete Schedule L, Part II 26b X 2 B Out the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, or substantial contributors? If 'Yea,' complete Schedule L, Part IV 27b X 2 M Dat the organization receive contributions of any of these person? II 'Yea,' complete Schedule L, Part IV 28b X			2	3	
Schedule K. If 'We,''go to fine 25a 24a X Do Did the organization maintain an escrow account other than a refunding scrow at any time during the year to defease any tax exempt bonds? 24b X 25a Bection 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 24d Zdd 25a Bection 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year? 26 X 25a Beckline L, Part I 25a X 25a X 25b Did the organization avare that 1 engaged in an excess benefit transaction with a disqualified person in a prior year? 26b X 25b Did the organization avare that 1 engaged in an excess benefit transaction with a disqualified person in a prior year? 26b X 27b Did the organization avare that 1 engaged in an excess benefit transaction with a disqualified person in a prior year? 26b X 27b Did the organization avare that 1 engaged in an excess benefit transaction with a disqualified person in a prior year? 26b X 27b Did the organization avare expected on any of the organization avare prior of trans the person 21 ("Yea," complete Schedule L, Part IV 27b X	24a				
b Det the organization mest any proceeds of tax-exempt bands beyond a temporary period exception? 24b c Did the organization mest any proceeds of tax-exempt bands? 24c d Did the organization atta as an "on behalf Of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization atogen in a necesses benefit transaction with a disqualified person during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(2) organizations. Did the organization appeal in a necesses benefit transaction that a disqualified person during the year? 25a 25b Did the organization active that it engaged in an excesse benefit transaction that a disqualified person during the year? 25b 26b Did the organization appears that it engaged in an excesse benefit transaction that on or parksteption or parksteption committee methods, consolition, substantial contributor on 35% 25b 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or to a 35% concluded and the organization provide a grant or other assistance to the following parties (see Schedule L, Part II) 28a X 27 Did the organization earby the approximation with and or the following parties (see Schedule L, Part IV) 28a X 28 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If Y'yes, complete Schedule L, Part IV <					v
c Did the organization maintain an escow account other than a refunding escrew at any time during the year to defease any tax-exempt bonds? 246 d Did the organization acts as an 'on behafi of' issuer for bonds outstanding at any time during the year? 246 22a Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 25a 23b Is the organization axis as an 'on behafi of' issuer for bonds outstanding at any time during the year? 25a 24a Zeta Zeta 25b X Schedule L, Part I 25a 25ch Did the organization report any amount on Part X, line 5 or 22, for rescivables from or payables to any current or form organization provide agrant or ther assistance to any current or form officer, fuestor, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereor) or annihy member of any or these persons? Y xes, "complete Schedule L, Part II 26 X 28 Was the organization provide thereory of raminy member of any or these persons? Y -Yes, "complete Schedule L, Part II 26 X 28 Was the organization approve thereory of raminy member of any or these persons? Y -Yes, "complete Schedule L, Part II 26 X 28 Was the organization envise thereory of raminy member of any individual de	h		·····		
any tax-seempt bonds? 24c Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the yea? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in an excess benefit transaction with a dispublified person during the yea? // trye, 'complete Schedule L, Part I 25a 25a Did the organization aver that the engage in an excess benefit transaction with a dispublified person during the yea? // trye, 'complete Schedule L, Part I 25a 25b Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or tamily member of any of these persons? // trye, 'complete Schedule L, Part I 26b 27 Did the organization approximation schemes to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or 35% controlled entity finally member of any of these persons? // trye, 'complete Schedule L, Part II 27 28 Was the organization approximation schemes transaction with one of the following parties (see Schedule L, Part II) 28 X 29 Was the organization receive more than 255.000 non-cost contributions? // trye, 'complete Schedule L, Part II 28a X 29 Did the organization neceve contributions of at, historical trassense, or due similated conservation contributions? // trye, 'complete Schedule L, Part II 28b X 20 Did the organization neceve contributions of at, historical tresense, or conters initia assets, or qualified conservati					+
d Did the organization act as an 'on behalf of 'issuer for bonds outstanding at any time during the year? 24d 25a Section 501(\$2), 501(\$1,4, and 501(\$20) grapmatrizens. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yea,' complete Schedule L, Part I 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 590 or 990-E27 If 'Yea,' complete Schedule L, Part I 25a X 27D Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereol, a grant selection committee member, or to a 35% controlled entity (including an employee) thereol, a grant selection committee member, or to a 35% controlled entity (including an employee) creator or founder, or substantial contributor? If 'Yea,' complete Schedule L, Part II 26 X 28 Was the organization report beree of an any individual described in line 28a? If 'Yea,' complete Schedule L, Part II 26 X 29 A tarily member of any of the organizations described in line 28a or 28b? If 'Yea,' complete Schedule L, Part II 28 X 29 A tarily member of any of the organization contributors? If 'Yea,' complete Schedule L, Part II <	U		24	lc.	
256 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? if "Yes," complete Schedule L, Part I 25a X 250 Section 501(c)(3), 501(c)(4), and 501(c)(29) organization spice Schedule L, Part I 25a X 250 Ut the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or 35% 26 X 270 Did the organization avariation complote thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 28 Was the organization a part to a business transaction with one of the following parties (see Schedule L, Part II) 28 X 29 Did the organization and part to a business transaction with one of the following parties (see Schedule L, Part II) 28 X 29 Did the organization receive more than \$25,000 in non-eash contributions? If "Yes," complete Schedule I, Part II 28 X 29 Did the organization reliquicity. trustee, key employee, creator or founder, substantial contributor or 10 and \$25,000 in non-eash contributions? If "Yes," complete Schedule N, Part I 30 X	d				+
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 28b X 260 Did the organization proof any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 270 Did the organization provide agrant or other assistance to any of these persons? If "Yes," complete Schedule L, Part II 26 X 280 Was the organization provide agrant or other assistance to any of these person? If "Yes," complete Schedule L, Part II 26 X 280 Was the organization provide berreport or transmitter member, or to a 55% controlled entity individual desorted in line 28a? If "Yes," complete Schedule L, Part IV 28a X 280 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X 280 Did the organization neceive contributions of art, historical trasaures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule I, Part IV <td< td=""><td></td><td></td><td></td><td></td><td></td></td<>					
b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27: 11 'Yes,' complete Schedule I, Part I 28b X 20 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or anyloyee, creator or founder, substantial contributor or anyloyee thread I, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II 26 X 217 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thread I) or any of these persons? If 'Yes,' complete Schedule L, Part II 27 X 218 Was the organization applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? II Yes,' complete Schedule L, Part IV 28a X 20 Did the organization receive contributions of an, historical treasures, or other similar asset, or qualified conservation contributions? IF 'Yes,' complete Schedule I, Inex 218 280 X 320 Did the organization necelve any payment from or hapse isolate schedule R, Part I 301 X 331			25	ā	x
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? # 'Yes, ' complete Schedule L, Part I 250 X 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of natily member of any of these persons? If 'Yes, ' complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof or family member of any of these persons? If 'Yes, ' complete Schedule L, Part II 27 X 28 Was the organization a party to a business transaction with one of the tollowing parties (see Schedule L, Part IV instructions, for applicable, conditions, and exceptions); 28a X 29 DA family member of any individual described in line 28a' If 'Yes, ' complete Schedule L, Part IV 28a X 29 Dd the organization receive more individuals and/or organizations described in lines 28a or 28b? If 'Yes,' complete Schedule L, Part IV 28a X 29 Dd the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule N, Part I 31 X 30 Dd the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule N, Part I 31 X 31 Did the organization receive more than \$25,000	b				
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity of family member of any of these persons? If "Nes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thrend, or family member of any of these persons? If "Nes," complete Schedule L, Part II 28 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part II) 28 X 29 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? II 28 X 20 A family member of any of these persons? If "Nes," complete Schedule L, Part IV 28 X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV 28 X 20 Did the organization releve ore that 325,000 in non-cash contributions? If "Yes," complete Schedule N, Part I 30 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X					
or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, function, trustee, key employee, creator or founder, substantial contributor or employee thereof, agrant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part III. 27 X 29 Matinity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV. 28a X 20 A current of former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 28a X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV. 28c X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 30 X 30 Did the organization receive any trusteempt or taxable entity? If "Yes," complete Schedule N, Part II 31 X 34 Was the organization receive any tax-exempt or taxable entity? If "Yes," complete Schedule N, Part II. 32 X 35 Did the organization receive any		Schedule L, Part I	25	5b	X
controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV) 28aa X 29 A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28aa X 29 DA family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more mane individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 28a X 29 Did the organization receive more than 250,00 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization sell, exchange, dispose of, or transfer more than 25% of Its net assets? If "Yes," complete Schedule N, Part I 31 X 31 Did the organization near-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 X <td>26</td> <td>Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current</td> <td></td> <td></td> <td></td>	26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereol, a grant selection committee member, or to a 35% controlled entity (including an employee) thereol, or family member of any of these persons? If "res," complete Schedule L, Part IV 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28a X 29 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X 20 Did the organization receive more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 28c X 20 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 20 X 30 Did the organization sele, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 31 Did the organization receive more than 301.7701.37 If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 33 X 32 Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 35 X 33 Did the organization and have		or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): 28a X 2 A 35% controlled entity of one or more individual as and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV 28b X 2 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical reasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 33 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 X 34 Was the organization networe than 25% of its net assets? If "Yes," complete Schedule N X <td></td> <td>controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II</td> <td> 2</td> <td>6</td> <td><u> </u></td>		controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	2	6	<u> </u>
entity (including an employee thereof) or family member of any of these persons? /f 'Yes,' complete Schedule L, Part II 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 X 29 A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? /f 28a X 20 A family member of any individual described in line 28a? /f 'Yes,' complete Schedule L, Part IV 28a X 20 A family member of any individual described in line 28a? /f 'Yes,' complete Schedule L, Part IV 28a X 20 Did the organization receive more than \$25,000 in non-cash contributions? /f 'Yes,' complete Schedule M 29 X 30 Did the organization receive more than \$25,000 in non-cash contributions? /f 'Yes,' complete Schedule M 30 X 31 Did the organization receive more than \$25,000 in non-cash contributions? /f 'Yes,' complete Schedule N, Part I 30 X 32 Did the organization receive more than \$25,000 in non-cash contributions? /f 'Yes,' complete Schedule N, Part I 30 X 33 Did the organization receive and than \$25,000 in non-cash contributions? /f 'Yes,' complete Schedule N, Part I 30 X 33 Did the organization sell, exchange, dispose of, or transfer	27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. 28a X 28 A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28a X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 X 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 30 X 31 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "yes," complete Schedule M. 30 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, Iine 1 33 X 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, Iine 1 34 X 34 <t< td=""><td></td><td></td><td></td><td></td><td> <u></u></td></t<>					<u></u>
instructions, for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // 28a X b A family member of any individual described in line 28a? // *Yes," complete Schedule L, Part IV c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? // 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? // fr *Yes," complete Schedule M 29 X 10 Did the organization receive more than \$25,000 in non-cash contributions? // fr *Yes," complete Schedule M 29 X 20 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // fr *Yes, " complete Schedule M 29 X 10 Did the organization receive contributions of art, historical treasures, or other similar assets? // fr *Yes," complete 20 X 20 Did the organization liquidate, terminate, or dissolve and cease operations? // fr *Yes," complete Schedule N, Part I 20 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? // fr *Yes," complete Schedule R, Part I 21 Did the organization related to any tax-exempt or taxable entity? // fr *Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 23 Sa X 24 Was the organization related to any tax-exempt or taxable entity? // fr *Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 23 Sa C X 24 Did the organization. Did the organization make any transfers to an exempt non-charitable related organization? 25 Organization complete Schedule R, Part V, line 2 26 X 27 Did the organization complete Schedule R, Part V, line 2 28 X 29 Did the organization complete Schedule R, Part V, line 2 29 C X 20 Did the organization complete Schedule R, Part V, line 2 20 C X 20 Did the organization complete Schedule R, Part V, line 2 20 C X 20 Did the organization complete Schedule R, Pa			2	7	
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // // *** 28a X b A family member of any individual described in line 28a? // **** ****** 28b X c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? // **** 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? // ***** ************************************	28				
"Yes," complete Schedule L, Part IV 28a X b A family member of any individual described in line 28a? // fryes," complete Schedule L, Part IV 28b X c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? // fryes," complete Schedule L, Part IV 28c X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // fryes," complete Schedule M 29 X 30 Did the organization inciduate, terminate, or dissolve and cease operations? // fryes," complete Schedule N, Part I 30 X 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? // fryes," complete Schedule R, Part I 31 X 33 Did the organization related to any tax-exempt or taxable entity? // fryes," complete Schedule R, Part I, III, or IV, and Part V, ine 1 34 X 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, ine 2 35b 35 Did the organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>					
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If 28c X "Yes," complete Schedule L, Part IV 28c X 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 X 31 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 33 Did the organization related to any tax exempt or taxable entity? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization neated to any tax exempt or taxable entity? If "Yes," complete Schedule R, Part II. 34 X 35a Did the organization controlled entity within the meaning of section 512(b)(13)? 35a X 35a Did the organization conduct more than 5% of its activities through an entity this is not a related organization 37 X 35a Did the organization conduct more than 5% of its activities through an entity that is not a related organization <td>а</td> <td></td> <td>0</td> <td></td> <td>v</td>	а		0		v
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? // 28 29 Did the organization receive more than \$25,000 in non-cash contributions? /// *Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? /// *Yes," complete Schedule M 30 X 31 Did the organization includidate, terminate, or dissolve and cease operations? /// *Yes," complete Schedule N, Part I 31 X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-32 rd 301.7701-32 rd *Yes," complete Schedule R, Part I 33 X 34 Was the organization nelated to any tax-exempt or taxable entity? // *Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Yes," complete Schedule R, Part V, line 2 35b 35a X 37 Did the organization conduct more than \$% of its activities through an entity that is not a related organization? 36 X 38 Section 501(c)(3) organizations. Did the organization complete Schedule Q and provide explanations in Schedule O for Part VI, line 2 3	h		·····		
"Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 30 X 31 Did the organization ilquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 33 Did the organization van 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I 32 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization neceive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 37 X 37 Did the organization complete Schedule B, Part V, li			····· <u>zo</u>	30	
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 30 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part I 32 X 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 34 X 35a Did the organization. Nave a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 36 36 37 Did the organization complete Schedule O of Part VI, line 2 36 36 X 36 Section 501(c)(3) organization. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule	C		25	20	x
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 X 31 Did the organization ilquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 33 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35a X 35a Did the organization. Now a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization complete Schedule R, Part V, line 2 36 X 38 Did the organization complete Schedule C on provide explanations in Schedule O or Part VI, lines 11b and 19? 37 X	29		·····		
contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 33 X X 31 X 34 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 35 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 36a X 35a Did the organization. Sold the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 35b 36b 36 X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization complete Schedule R, Part V, line 2 36 X 38 Did the organization complete Schedule O and provide explanations i			····· =		+
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 33 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 33 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 34 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization nelated to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501(c)(3) organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V 36 X 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 X 38 Did the or			3	0	x
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.2 and 301.7701.3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 35a X 35 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 X Y Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line i	31		3	1	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X 9 If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 35a X 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 37 X 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance V V 14 0 1b 0 1b 0 1c Ves V 38 X V V V V V V V V V V V	32				
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 X 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 36 X 37 Did the organization complete Schedule O and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance 38 X Check if Schedule O contains a response or note to any line in this Part V 38 X 1a Enter the number reported in Box 3 of Form 1096. Enter -0 if not applicable 1a 1a 0 1b 0		Schedule N, Part II	3	2	X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X b If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 X Note: All Form 990 filers are required to complete Schedule O O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Yes Yes Check if Schedule O contains a response or note to any line in this Part V Ia 0 1a 0 1a O Ib O 1b 0 1c	33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> 35b 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 X Note: All Form 990 filers are required to complete Schedule O Part V 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1a 0 1b 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 1b 0 1c			3	3	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a X b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> 35b 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 X 9att V Statements Regarding Other IRS Filings and Tax Compliance 38 X 1a 0 1b 0 1b 0 1a 0 1b 0 1b 0 1c 1a 0 1b 0 1c 1c	34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 37 X 38 Did the organization complete Schedule O complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance 38 X 1a O 1b O 1b 0 b Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 1b 0 b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1a 1a 0 1b 0 1c			····		
within the meaning of section 512(b)(13)? /f "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 36 X 38 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 X 38 Did the organization complete Schedule 0 and provide explanations in Schedule 0 for Part VI, lines 11b and 19? 37 X 38 Did the organization complete Schedule 0 complete Schedule 0 38 X Note: All Form 990 filers are required to complete Schedule 0 Yes Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule 0 contains a response or note to any line in this Part V 1a 0 1b 0 b Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1c <td></td> <td></td> <td> 35</td> <td>5a</td> <td></td>			35	5a	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 X Note: All Form 990 filers are required to complete Schedule O Yes Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 1b 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 1b 0 1c Check if b corganization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1a 0 1b 0 1a E	b				
If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 X 98 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 X 98 Did the organization complete Schedule O complete Schedule O 38 X 99 Flere Y Statements Regarding Other IRS Filings and Tax Compliance 38 X 91 Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 1b 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 1c				5b	┼──
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 X Note: All Form 990 filers are required to complete Schedule O Yes No Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No 1a Inter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b b b Store of Forms W-2G included in line 1a. Enter -0- if not applicable Cold the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	36				
and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R, Part VI</i> 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O 90 Filers are required to complete Schedule O 93 X Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 10 10 10 10 10 10 10 10 10 10 10 10 10 1	07		3	6	
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 X Note: All Form 990 filers are required to complete Schedule O 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Image: Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c	37			-	v
Note: All Form 990 filers are required to complete Schedule 0 38 X Part V Statements Regarding Other IRS Filings and Tax Compliance Yes No Check if Schedule O contains a response or note to any line in this Part V Image: Check if Schedule O contains a response or note to any line in this Part V Image: Check if Schedule O contains a response or note to any line in this Part V Yes No 1a 0 1a 1b 0 1a 1b 0 1a 1a	20		····· ³	<u> </u>	
Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a 0 b Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c	30	• • • • • •	2	e x	
Check if Schedule O contains a response or note to any line in this Part V Yes No 1a 1a 0 Ves No b Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 Ves No c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 1c	Par	t V Statements Regarding Other IRS Filings and Tax Compliance	<u></u> ്യ	~ <u>_ ^</u>	<u> </u>
Yes No 1a 0 b Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c		Check if Schedule O contains a reasonable or note to any line in this Bart V			\square
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c					No
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1c (gambling) winnings to prize winners? 1c	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming Image: Complex comp			0		
032004 12-23-20 Form 990 (2020)		(gambling) winnings to prize winners?			
	032004	+ 12-23-20	Fo	orm 990	(2020)

2020.05010 CFSA PROPERTIES IV, INC. 06321__1

	990 (2020) CFSA PROPERTIES IV, INC. 84-4248	270	Р	age 5
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		r	
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand 13c			37
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			77
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			37
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			

Form **990** (2020)

032005 12-23-20

Form 990	(2020)
----------	--------

CFSA PROPERTIES IV, INC.

84-4248270 Page 6

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	Į į	5		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b		<u>ן</u>		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with	any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	t supervision			
	of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or			
	more members of the governing body?			7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st					
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea	r by th	e following:			
а	The governing body?			8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	it the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such cha	apters	, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ befoi	re filing the form?	11a		Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	12b		
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	′es," a	lescribe			
	in Schedule O how this was done			12c		
13	Did the organization have a written whistleblower policy?			13		X
14	Did the organization have a written document retention and destruction policy?			14		Х
15	Did the process for determining compensation of the following persons include a review and approval	l by in	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	nent w	rith a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	e its p	articipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	izatior	ı's			
	exempt status with respect to such arrangements?	<u></u>		16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed $ ightarrow AL$					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	nd 990	-T (Section 501(c)(3)s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website Upon request Other (explain	on So	chedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con	nflict o	of interest policy, ar	d finan	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's boo		d records 🕨			
	COMMUNITY FOUNDATION OF SOUTH ALABAMA - 251-438-559	1				
	PO BOX 990, MOBILE, AL 36601					
032006	12-23-20			Form	990	(2020)
	6					

^{2020.05010} CFSA PROPERTIES IV, INC. 06321_1

Form 990	(2020)
----------	--------

Part VII	Compensation of Officers,	, Directors, Trustees,	, Key Employees,	Highest Co	ompensated
	Employees, and Independe	ent Contractors			

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average	(do			ition	l than d	200	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	id a d	irecto	r/trus I	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	trust		98	bens		(W-2/1099-MISC)		organization and related
	below	ual tr	tional		yolqr	t con	_			organizations
	line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) MARY KATHLEEN MILLER	1.00				-		-			
PRESIDENT		x		x				0.	0.	0.
(2) REBECCA BYRNE	2.00									
SECRETARY		x		x				0.	0.	0.
(3) SAM COVERT	1.00									
TREASURER		x		х				0.	0.	0.
(4) CHRIS FOGARTY	0.00									
DIRECTOR		x						0.	0.	0.
(5) ASHLEY BONNER	0.00									
DIRECTOR		x						0.	Ο.	0.
		1								
		1								
		1								
		1								
		1								
		1								
032007 12-23-20				_	_					Form 990 (2020)

		990 (2020) CFSA PRO									84-42	2482	270	Pa	ige 8
Name and title Average must define the set of	Par			oloy	ees,			ghes	t C		· ,				
organizations below inc) is is is is is is is is is is is is is i		Name and title Average hours per box, unless person is both an the difference of the difference of						n	Esti amo	imate ount c					
c Total from continuation sheets to Part VII, Section A 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.			hours for related organizations below	Individual trustee or director	the organizations					fro orgai and	m the nizati relate	e on ed			
c Total from continuation sheets to Part VII, Section A 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.				-											
c Total from continuation sheets to Part VII, Section A 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.															
c Total from continuation sheets to Part VII, Section A 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.				-											
c Total from continuation sheets to Part VII, Section A 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.				-								-+			
c Total from continuation sheets to Part VII, Section A 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.												-+			
c Total from continuation sheets to Part VII, Section A 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.															
c Total from continuation sheets to Part VII, Section A 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.												-+			
c Total from continuation sheets to Part VII, Section A 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.												+			
d Total (add lines 1b and 1c) ● 0. 0. 0. 0. 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 X 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 X 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 4 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (B) (C) (A) (B) (C) Compensation Compensation 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation Compensation 2 (A) (B) (C) Compensation Compensation	1b	Subtotal		<u> </u>				<u> </u>							
compensation from the organization 0 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 X 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 X 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (C) 1 Complete this table for your five highest address NONE Description of services Compensation (A) (B) (C) Compensation (D) (D) (D) 1 Complete of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization (D) (D) 2 Total number of independent contractors (including but not limited to those listed above) who received more		Total (add lines 1b and 1c)					<u></u>			0.		0.			
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 X 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 X 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization? (C) Mame and business address NONE Description of services Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0	2		not limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	;			-
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 4 X 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (C) (A) (B) (C) Name and business address NONE Description of services Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0	3	v ,			-	•	-		Ŭ		-	F		Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. 6 (C) (A) (B) (C) Compensation Name and business address NONE Description of services Compensation 0 Image: Complete this table of provide the contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. Image: Compensation for the calendar year ending with or within the organization of services Compensation Image: None Image: Compensation for the calendar year ending with or within the organization of services Compensation Image: Compensation for the calendar year ending with or within the organization of services Compensation Compensation Image: Compensation for the calendar year ending with or within the organization of services Compensation Compensation Image: Compensation for the calendar year ending with or within the organization Image: Compensation Image: Compensation Image	4	For any individual listed on line 1a, is the su	um of reportabl	e co	mpe	ensat	tion	and	oth	ner compensation from t	he organization				
Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address NONE Description of services Compensation Compensation 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation	5	Did any person listed on line 1a receive or a	accrue comper	nsati	on fr	roma	any	unre	elate	ed organization or individ	dual for services				
the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) (B) (C) Name and business address NONE Description of services Compensation Image: Compensation of services Image: Compensation of services Compensation Image: Compensation of services Image: Compensation of services Compensation Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation of services Image: Compensation from the organization image: Compensation of services Image: Compensation of services Image: Compensation of services	Sec		nplete Schedule	<u>e J 1</u>	or sl	<u>icn r</u>	bers	on .				<u></u>	5		21
(A) Name and business address NONE (B) Description of services (C) Compensation Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of services Image: Comparison of the organization of compensation from the organization of th	1											ensati	on fror	n	
\$100,000 of compensation from the organization		(A)								(B)		Cc			1
\$100,000 of compensation from the organization															
\$100,000 of compensation from the organization															
\$100,000 of compensation from the organization															
\$100,000 of compensation from the organization															
\$100,000 of compensation from the organization		Total number of independent contractors (noludina hut -	ot	oito	4 + ~ +	thee		tod	abova) who received	are then				
	2		•		niteo	u tO 1			req	above) who received mo	bre than		-orm 9	90 (2	020)

032008 12-23-20

Check if Scheade D contains a response or note to any time in the Bert III (A) (C) Unrelated Comparison of the any time in the Bert III (A) (C) (C) (C) Unrelated Comparison of the any time in the Bert III (A) (C)				2020) CFSA PROPERTI	IES IV, IN	NC.		84-4248	270 Page 9
Page of the second s	Pa	rt V	/	Statement of Revenue					
Total rownue Petite and de reserver Image and the server Reserver <				Check if Schedule O contains a response	or note to any lin				
agended of the second secon							Related or exempt	Unrelated	Revenue excluded from tax under
Boy Membership dues 10 Id Id Id	S S	1	а	Federated campaigns 1a					
geogram 2 a business Code a a b a a b a a a c a a a d a a a g Total. Add lines 2a 2f a a d income from investment of tax exempt bond proceeds a f income from investment of tax exempt bond proceeds a g (i) Real (i) Personal a g a Gross rents Ge a g (i) Securtles (i) Other a rassts other than inventory ra ra a ra Gross mount from subs of assis spenses ra a a g a Gross income from lundraising events (not including \$ a a including \$ of a a a g a Gross income from lundraising events a a g a Gross income from gaming activites a a <t< th=""><th>rant</th><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	rant								
geogram 2 a business Code a a b a a b a a a c a a a d a a a g Total. Add lines 2a 2f a a d income from investment of tax exempt bond proceeds a f income from investment of tax exempt bond proceeds a g (i) Real (i) Personal a g a Gross rents Ge a g (i) Securtles (i) Other a rassts other than inventory ra ra a ra Gross mount from subs of assis spenses ra a a g a Gross income from lundraising events (not including \$ a a including \$ of a a a g a Gross income from lundraising events a a g a Gross income from gaming activites a a <t< th=""><th>, Mo G</th><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	, Mo G								
good of the set	ar <i>J</i>				407,308.				
good of the set	imil İmil		е	Government grants (contributions) 1e					
good of the set	er S		f						
geogram 2 a business Code a a b a a b a a a c a a a d a a a g Total. Add lines 2a 2f a a d income from investment of tax exempt bond proceeds a f income from investment of tax exempt bond proceeds a g (i) Real (i) Personal a g a Gross rents Ge a g (i) Securtles (i) Other a rassts other than inventory ra ra a ra Gross mount from subs of assis spenses ra a a g a Gross income from lundraising events (not including \$ a a including \$ of a a a g a Gross income from lundraising events a a g a Gross income from gaming activites a a <t< th=""><th>Dthe</th><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	Dthe								
geogram 2 a business Code a a b a a b a a a c a a a d a a a g Total. Add lines 2a 2f a a d income from investment of tax exempt bond proceeds a f income from investment of tax exempt bond proceeds a g (i) Real (i) Personal a g a Gross rents Ge a g (i) Securtles (i) Other a rassts other than inventory ra ra a ra Gross mount from subs of assis spenses ra a a g a Gross income from lundraising events (not including \$ a a including \$ of a a a g a Gross income from lundraising events a a g a Gross income from gaming activites a a <t< th=""><th>onti</th><td></td><td>-</td><td></td><td></td><td>407 209</td><td></td><td></td><td></td></t<>	onti		-			407 209			
group 2 a	<u>0</u>		h	Total. Add lines 1a-11		407,308.			
30 a c a		2	-		Busiliess Code				
g Total. Add lines 2a-21 ▶ 3 Investment income (including dividends, interest, and other similar amounts). ▶ 4 Income from investment of tax exempt bond proceeds ▶ 5 Royatties ● 6 a Gross rents 6 a (i) Personal b Less: rental expenses 0 0 c Rental income or (loss) ● ● 7 a Gross amount from sales of assets other than invertory Tax 0 ● a dise seponses 7a 1 ● b Less: cost or other basis and sales expenses 7a 1 0 a Gross income from fundraing events (not including \$	vice	2							
g Total. Add lines 2a-21 ▶ 3 Investment income (including dividends, interest, and other similar amounts). ▶ 4 Income from investment of tax exempt bond proceeds ▶ 5 Royatties ● 6 a Gross rents 6 a (i) Personal b Less: rental expenses 0 0 c Rental income or (loss) ● ● 7 a Gross amount from sales of assets other than invertory Tax 0 ● a dise seponses 7a 1 ● b Less: cost or other basis and sales expenses 7a 1 0 a Gross income from fundraing events (not including \$	Ser								
g Total. Add lines 2a-21 ▶ 3 Investment income (including dividends, interest, and other similar amounts). ▶ 4 Income from investment of tax exempt bond proceeds ▶ 5 Royatties ● 6 a Gross rents 6 a (i) Personal b Less: rental expenses 0 0 c Rental income or (loss) ● ● 7 a Gross amount from sales of assets other than invertory Tax 0 ● a dise seponses 7a 1 ● b Less: cost or other basis and sales expenses 7a 1 0 a Gross income from fundraing events (not including \$	am		d						
g Total. Add lines 2a-21 ▶ 3 Investment income (including dividends, interest, and other similar amounts). ▶ 4 Income from investment of tax exempt bond proceeds ▶ 5 Royatties ● 6 a Gross rents 6 a (i) Personal b Less: rental expenses 0 0 c Rental income or (loss) ● ● 7 a Gross amount from sales of assets other than invertory Tax 0 ● a dise seponses 7a 1 ● b Less: cost or other basis and sales expenses 7a 1 0 a Gross income from fundraing events (not including \$	- Go		е						
3 investment income (including dividends, interest, and other similar amounts). 4 income from investment of tax-exempt bond proceeds 5 Royatties 6a Gross rents 7 Gross amount from sales of account from sales of assets other than inventory 7 Gross income from sales of contributions reported on line tc). See 9 Gross income from fundraising events 8 Gross income from gaming activities. See 9 Gross income from gaming activities. See 9a Gross income or (loss) from gaming activities. See 9a Gross sales of inventory. 9a Gross income from gaming activities. See 9a Gross sales of inventory. 9a Gross sales of inventory. 9a <th>Ł</th> <td></td> <td>f</td> <td>All other program service revenue</td> <td></td> <td></td> <td></td> <td></td> <td></td>	Ł		f	All other program service revenue					
other similar amounts) income from investment of tax exempt bond proceeds income from investory income from investo			g						
4 Income from investment of tax-exempt bond proceeds 5 Royaties 6 a 7 Boss rents 6 a 6 a 7 Boss rents 6 a 6 a 7 Boss rents 10 Securities 7 Boss rents 10 Securities 7 Boss rents 10 Securities 10 Securities 10 Ress rents 10 Ress rents 10 Ress rents 11 Income from investment of tax exempts 12 Total revenue 10 Ress rents 10 Boss rents 11 Income from inufraising events 12		3							
5 Royalties 0) Real 0) Personal 6 a 0) Real 0) Personal b Less: rental expenses 6b a c Rental income or (loss) a a d Net rental income or (loss) a a d Net rental income or (loss) a a assets other than inventory b Less: cost or other basis b a a a a a c Gain or (loss) 7b a a d Net gain or (loss) 7b a a d Net gain or (loss) b a a d Ross income from fundralsing events (not including \$ or thurdralsing events as a a a a a a a a a a a a a a a a a									
B a Gross rents Ga (i) Peal (ii) Personal b Less: rental expenses Gb									
6 a Gross rents 6a b Less: rental expenses 6a c Rental income or (loss) 6c d Net rental income or (loss) 6c 7 a Gross amount from sales of assets other than inventory 7a b Less: cost or other basis and sales expenses 7a c Gain or (loss) 7c a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses b Less: direct expenses c Gos income from gaming activities. See Part IV, line 19 b Less: direct expenses 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses gaming activities. See a direct expenses c Net income or (loss) from sales of inventory. b Less: direct expenses gaming activities. See		5		Royalties					
b Less: rental expenses 6b c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 7 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8 a Gross income from gaming activities. See Part IV, line 19 9 a Gross sales of inventory, less returns and allowances 0 a Gross sales of inventory, less returns and allowances 10 a Gross sales of inventory, less returns and allowances 11 a c All other revenue a Tal revenue. See instructions 40 All other revenue		6	а						
c Rental income or (loss) d Net rental income or (loss) 7 a forss amount from sales of assets other than inventory b Less: cost or other basis and sales expenses and sales expenses 7b 7a Gain or (loss) 7b 7c 7c 7		Ŭ							
7 a Gross amount from sales of assets other than inventory 7 a Gross adduct from sales of assets other than inventory b Less: cost or other basis and sale sepanses c Gain or (loss) c Gain or (loss) d Net gain or (loss) d Net gain or (loss) a a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses g Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses g Gross ales of inventory, less returns and allowances including 4 Gross of goods sold c Net income or (loss) from sales of inventory e Net income or (loss) from sales of inventory b Less: direct expenses g Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses g a Gross income from gaming activities. in a dalowances in a									
assets other than inventory Ta b Less: direct expenses Ba ga ga ga ga <th></th> <td></td> <td>d</td> <td>Net rental income or (loss)</td> <td></td> <td></td> <td></td> <td></td> <td></td>			d	Net rental income or (loss)					
B Less: cost or other basis and sales expenses 70 70 c Gain or (loss) 70 70 d Net gain or (loss) 70 70 ocntributions reported on line 1c). See Part IV, line 18 8a 8b b Less: direct expenses 8b c Net income or (loss) from fundraising events 91 g Gross income from gaming activities. See Part IV, line 19 9a 9 a Gross sales of inventory, less returns and allowances 10a 10 a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory 8usiness Code g Int a 90 90 c Met income or (loss) from sales of inventory 10a c Met income or (loss) from sales of inventory 10a c Met income or (loss) from sales of inventory 100 <		7	а	Gross amount from sales of (i) Securities	(ii) Other				
and sales expenses 7b c Gain or (loss) d Net gain or (loss) d Net gain or (loss) d Net gain or (loss) and sales expenses of d Net gain or (loss) or contributions reported on line 1c). See Ba Part IV, line 18 Ba b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a 9 a Gross income from gaming activities 9 a Gross sales of inventory, less returns and allowances ID a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory b States Code 11 a				assets other than inventory 7a					
generation c Gain or (loss) 7c d Net gain or (loss)			b						
d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 Ba b Less: direct expenses g a Gross income or (loss) from fundraising events o Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9 b Image: second from gaming activities 0 a Gross sales of inventory, less returns and allowances 10 a Gross from gaming activities b Less: cost of goods sold c Net income or (loss) from sales of inventory c Net income or (loss) from sales of inventory c Image: second from gaming activities b Less: cost of goods sold c Mu other revenue c Image: second from gaming activities c Image: second fr	nue								
contributions reported on line 1c). See Part IV, line 18 b b Less: direct expenses c 9 a Gross income from gaming activities. See Part IV, line 19 9 a Gross cincome from gaming activities. See Part IV, line 19 b Less: direct expenses 9 a Gross sales of inventory, less returns and allowances 10 a b Less: cost of goods sold 10 b c d All other revenue e Total revenue. See instructions 407, 308.									
contributions reported on line 1c). See Part IV, line 18 b b c 9 a Gross income from gaming activities. See Part IV, line 19 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses b Less: direct expenses 9 a Gross income from gaming activities. See Part IV, line 19 9 a C Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold 10 b c d All other revenue e Total revenue. See instructions 407, 308.	ar R				····· •				
contributions reported on line 1c). See Part IV, line 18 b b c o e n b e b b c n d d d d d d d d d d d d d d d d d d d d d d d d <td< th=""><th>Gŧ</th><td>0</td><td>a</td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	Gŧ	0	a						
Part IV, line 18 8a b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9b 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10 a Gross sales of inventory, less returns and allowances 10 a Less: cost of goods sold c Net income or (loss) from sales of inventory b Less: cost of goods sold c Met income or (loss) from sales of inventory c Met income or (loss) from sales of inventory d All other revenue e Total revenue. See instructions 407, 308. 0.	Ŭ								
b Less: direct expenses 8b c Net income or (loss) from fundraising events 9 a grass income from gaming activities. See Part IV, line 19 b Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b b Less: cost of goods sold 10b c vet income or (loss) from sales of inventory b Less: cost of goods sold 10a b c d d d d d d d d d d d d d d <td< th=""><th></th><td></td><td></td><td></td><td>a</td><td></td><td></td><td></td><td></td></td<>					a				
9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold 10a c Net income or (loss) from sales of inventory b Less: cost of goods sold 10a and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory c All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions			b		0				
Part IV, line 19 9a b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10 a Gross sold b Less: cost of goods sold c Net income or (loss) from sales of inventory b Less: cost of goods sold 11 a Business Code b Less: cost of goods log c All other revenue e Total. Add lines 11a-11d 407, 308. 0. 0.					►				
b Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory b 11 a b c d All other revenue e Total. Add lines 11a-11d b 12 Total revenue. See instructions b 407, 308. 0. 0. 0. 0.		9	а						
c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory b Business Code b Business Code c All other revenue e Total revenue. See instructions 407, 308. 0.									
10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold 0b c Net income or (loss) from sales of inventory Image: state of the set of									
and allowances 10a b Less: cost of goods sold c Net income or (loss) from sales of inventory sogentiation Business Code b Sogentiation c Sogentiation b Sogentiation c Sogentiation d All other revenue e Total revenue. See instructions 407,308. 0.		10							
b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory Business Code 11 a Business Code Out of the second seco		10	a	-	a				
c Net income or (loss) from sales of inventory Image: State of the second			b						
Business Code Business Code b	_								
e Total. Add lines 11a-11d ▶ 407,308. 0.			•						
e Total. Add lines 11a-11d ▶ 407,308. 0.	e	11	а						
e Total. Add lines 11a-11d ▶ 407,308. 0.	lane		b						
e Total. Add lines 11a-11d ▶ 407,308. 0.	Sevel								
12 Total revenue. See instructions	Mis								
		10				407 308	0	0	0
	03200								Form 990 (2020)

Form	990 (2020
------	-------	------

CFSA PROPERTIES IV, INC. Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX **(D)** Fundraising (B) (C) (A) Do not include amounts reported on lines 6b, Program service expenses Total expenses Management and general expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 1 and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 5 Compensation of current officers, directors, trustees, and key employees Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 9 10 Payroll taxes 11 Fees for services (nonemployees): Management а b Legal С Accounting Lobbying d Professional fundraising services. See Part IV, line 17 е Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 13 Office expenses Information technology 14 Royalties 15 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 25,615. 25,615. 20 Interest Payments to affiliates 21 22 Depreciation, depletion, and amortization 23 Insurance Other expenses. Itemize expenses not covered 24 above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 151,234. 151,234. RENT а b С d All other expenses е 176,849. 0. 176,849. 0. Total functional expenses. Add lines 1 through 24e 25 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

10

032010 12-23-20

Form 990 (2020)

Check here if following SOP 98-2 (ASC 958-720)

Form 990 (PROPERTIES	IV,	INC.
Part X	Balance Sheet			

		Check if Schedule O contains a response or note to any line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1	1,029,705.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%		_	
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined		•	
	_			6	
ets	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
-	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
	Ι.	basis. Complete Part VI of Schedule D 10a		10	
		Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	2,700,754.
	15	Other assets. See Part IV, line 11		15	3,730,459.
	16	Total assets. Add lines 1 through 15 (must equal line 33)		16	5,750,459.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liat	00	controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	0.	05	3,500,000.
	06	of Schedule D		25 26	3,500,000.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here		20	3,300,000.
ŝ		and complete lines 27, 28, 32, and 33.			
nce	07	• • • • • • •		27	
ala	27 28			27	
ар	20	Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here X		20	
'n					
<u>م</u>	29	and complete lines 29 through 33.	0.	29	0.
ets		Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund		29 30	0.
SS	30			30 31	230,459.
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		31	230,459.
Ž	32 33	Total net assets or fund balances		32 33	3,730,459.
	00	1 Juan maniningo and ther addeto/ 10110 Natatives		55	Form 990 (2020)

032011 12-23-20

14091115 794202 06321

Form	1990 (2020) CFSA PROPERTIES IV, INC.	84-424	8270	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	407		
2	Total expenses (must equal Part IX, column (A), line 25)	2	176	5,84	49.
3	Revenue less expenses. Subtract line 2 from line 1	3	230),4	59.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			0.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	230),4	<u>59.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit			
	Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	

Form **990** (2020)

032012 12-23-20

SCHEDUL	E A.
---------	------

Department of the Treasury Internal Revenue Service

14

(Form	990	or	990-EZ)
۰.		000	U 1	000 LL,

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2020
Open to Public Inspection

Name of the organization				Emp	oloyer identification numb
CFSA PROPERTI	ES IV, INC.				84-4248270
Part I Reason for Public Charity Status	(All organizations must c	omplete th	nis part.) S	ee instructions.	
The organization is not a private foundation because it is	: (For lines 1 through 12, c	heck only o	one box.)		
1 A church, convention of churches, or associated as a church of the c	tion of churches described	in sectio	n 170(b)(1	I)(A)(i).	
2 A school described in section 170(b)(1)(A)(ii)	. (Attach Schedule E (Form	n 990 or 99	90-EZ).)		
3 A hospital or a cooperative hospital service or	ganization described in se	ection 170	(b)(1)(A)(ii	ii).	
4 A medical research organization operated in c city, and state:	onjunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii).	Enter the hospital's name,
5 An organization operated for the benefit of a c	ollege or university owned	l or operate	ed by a go	overnmental unit de	escribed in
section 170(b)(1)(A)(iv). (Complete Part II.)					
6 A federal, state, or local government or govern	nmental unit described in	section 17	′0(b)(1)(A)	(v).	
7 An organization that normally receives a subs	tantial part of its support fr	om a gove	ernmental	unit or from the ge	neral public described in
section 170(b)(1)(A)(vi). (Complete Part II.)					
8 A community trust described in section 170	ɔ)(1)(A)(vi). (Complete Par	t II.)			
9 An agricultural research organization describe	ed in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a land-	grant college
or university or a non-land-grant college of ag	iculture (see instructions).	Enter the r	name, city	, and state of the c	ollege or
university:					
10 An organization that normally receives (1) more					
activities related to its exempt functions, subj				-	
income and unrelated business taxable incom	ie (less section 511 tax) fro	m busines	ses acqui	red by the organiza	ation after June 30, 1975.
See section 509(a)(2). (Complete Part III.)					
11 An organization organized and operated exclu					
12 X An organization organized and operated exclu	•	-		· · ·	
more publicly supported organizations descril				-	
lines 12a through 12d that describes the type a X Type I. A supporting organization operated,		-		· · · ·	
the supported organization(s) the power to organization. You must complete Part IV ,		majonty o	i the direc		the supporting
b Type II. A supporting organization supervise		ion with its	sunnorte	d organization(s)	by baying
control or management of the supporting of					
organization(s). You must complete Part I	-	ame persoi	15 11 141 00	ntiol of manage the	e supported
c Type III functionally integrated. A support		in connect	ion with a	and functionally int	earated with
its supported organization(s) (see instruction	• •			-	ogratod mili,
d Type III non-functionally integrated. A su					proanization(s)
that is not functionally integrated. The organ				• •	•
requirement (see instructions). You must c		•		-	
e X Check this box if the organization received	•				oe III
functionally integrated, or Type III non-funct				51 · , 51 · , 51	
	, , , , , , , , , , , , , , , , , , , ,				1
g Provide the following information about the support					····· •
(i) Name of supported (ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount of mone	etary (vi) Amount of other
organization	(described on lines 1-10 above (see instructions))	Yes	No	support (see instruc	tions) support (see instruction
THE COMMUNITY					
	<u> </u>			1	

over identification number 84 - 4248270

more publicly supported or	•					Check the box in
lines 12a through 12d that	describes the type of	f supporting organizatior	n and comple	ete lines	12e, 12f, and 12g.	
a X Type I. A supporting orga	inization operated, se	upervised, or controlled	by its suppo	rted org	anization(s), typically by	giving
the supported organization	on(s) the power to req	gularly appoint or elect a	a majority of	the direc	tors or trustees of the su	upporting
organization. You must c	omplete Part IV, Se	ections A and B.				
b Type II. A supporting org	anization supervised	or controlled in connect	tion with its s	supporte	d organization(s), by hav	ving
control or management o	f the supporting orga	anization vested in the sa	ame persons	that co	ntrol or manage the supp	ported
organization(s). You mus	t complete Part IV,	Sections A and C.				
c Type III functionally inte	grated. A supportin	g organization operated	in connectio	n with, a	and functionally integrate	ed with,
its supported organization	n(s) (see instructions)). You must complete I	Part IV. Sect	tions A.	D, and E.	
d Type III non-functionally	.,.	•	-		-	zation(s)
that is not functionally int	•	0 0 1				
requirement (see instructi	0	e ,	2		•	
e X Check this box if the orga		•	-			
functionally integrated, or					турс і, турс іі, турс іі	
f Enter the number of supported of						1
g Provide the following information	•	d organization(a)				±
(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the organiz in your governing	ation listed	(v) Amount of monetary	(vi) Amount of other
organization		(described on lines 1-10	Yes	document? No	support (see instructions)	support (see instructions)
THE COMMUNITY		above (see instructions))	165	NO		
FOUNDATION OF SOUTH	62 1260202	7	v		0	
FOUNDATION OF SOUTH	03-1200203	/	X		0.	
Total					0.	0.
LHA For Paperwork Reduction Act N	otice, see the Instru	uctions for Form 990 o	r 990-EZ. o	32021 01-	25-21 Schedule A (For	rm 990 or 990-EZ) 2020
·		13				
91115 794202 06321		2020.05	010 CF	SA PI	ROPERTIES IV,	INC. 06321

Schedule A (Form 990 or 990-EZ) 2020 CFSA PROPERTIES IV, INC.

84-4248270 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
~							
	Public support. Subtract line 5 from line 4.						
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4		(6) 2017		(0) 2013	(e) 2020	
8	Gross income from interest,						
Ŭ	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
-	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First 5 years. If the Form 990 is for th	e organization's f	irst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stop						>
See	ction C. Computation of Publi	c Support Per	rcentage				
14	Public support percentage for 2020 (I	ine 6, column (f), c	divided by line 11,	column (f))		14	%
	Public support percentage from 2019					15	%
16 a	33 1/3% support test - 2020. If the c	organization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies		-				
b	33 1/3% support test - 2019. If the c						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test		-				
	and if the organization meets the fact			-	-	vi now the organiz	
	meets the facts-and-circumstances te	-		• • • •	•	17	
b	10% -facts-and-circumstances test		-				IU% Or
	more, and if the organization meets the						
10	organization meets the facts-and-circu Private foundation If the organization			-			
10	Private foundation. If the organizatio	THUIL HOL CHECK a		Ja, 100, 17a, 01 17		edule A (Form 990	
					301		

032022 01-25-21

Schedule A (Form 990 or 990-EZ) 2020 CFSA PROPERTIES IV, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sect	ion A. Public Support						
Calenc	lar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 0	Gifts, grants, contributions, and						
r	nembership fees received. (Do not						
i	nclude any "unusual grants.")						
r	Gross receipts from admissions, nerchandise sold or services per- ormed, or facilities furnished in						
a	iny activity that is related to the organization's tax-exempt purpose						
3 (Gross receipts from activities that						
	re not an unrelated trade or bus- ness under section 513						
4 T	ax revenues levied for the organ-						
i	zation's benefit and either paid to or expended on its behalf						
	he value of services or facilities						
	urnished by a governmental unit to						
	he organization without charge						
	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	received from disqualified persons						
fr	mounts included on lines 2 and 3 received om other than disqualified persons that xceed the greater of \$5,000 or 1% of the						
	mount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.) ion B. Total Support						
Calenc	lar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 A	Amounts from line 6						
C	Bross income from interest, lividends, payments received on ecurities loans, rents, royalties, and income from similar sources						
	Inrelated business taxable income						
(less section 511 taxes) from businesses						
а	cquired after June 30, 1975						
	Add lines 10a and 10b						
11 N a v	Net income from unrelated business activities not included in line 10b, whether or not the business is egularly carried on						
c	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)						
14 F	irst 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organizati	on,
		0		-			
	ion C. Computation of Publi						, <u> </u>
15 F	Public support percentage for 2020 (I	ine 8, column (f), d	livided by line 13,	column (f))		15	%
16 F	Public support percentage from 2019	Schedule A, Part	III, line 15			16	%
	ion D. Computation of Inves						
17 li	nvestment income percentage for 20	020 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
	nvestment income percentage from					18	%
	3 1/3% support tests - 2020. If the					3 1/3%, and line 1	7 is not
	nore than 33 1/3%, check this box ar						>
	3 1/3% support tests - 2019. If the						and
	ne 18 is not more than 33 1/3%, che						
	Private foundation. If the organization						
	01-25-21						0 or 990-EZ) 2020
			15	5			-

2020.05010 CFSA PROPERTIES IV, INC. 06321_1

Yes

Х

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

No

Х

х

Х

Х

х

Х

х

х

Х

Х

Х

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes." *complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

16

032024 01-25-21

Schedule A (Form 990 or 990-EZ) 2020

Pa	rt IV Sı	pporting Organizations (continued)			
				Yes	No
11	Has the or	ganization accepted a gift or contribution from any of the following persons?			
а	A person	who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below	, the governing body of a supported organization?	11a		X
b	A family m	ember of a person described in line 11a above?	11b		X
с	A 35% coi	ntrolled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in P		11c		X
Sec	tion B. T	ype I Supporting Organizations			
				Yes	No
1	more supp directors, effectively	verning body, members of the governing body, officers acting in their official capacity, or membership of one or ported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) operated, supervised, or controlled the organization's activities. If the organization had more than one supported on, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	•	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	Х	
2	Did the or	ganization operate for the benefit of any supported organization other than the supported			
	organizati	on(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI ho	w providing such benefit carried out the purposes of the supported organization(s) that operated,			
		l, or controlled the supporting organization.	2		X
Sec	tion C. T	ype II Supporting Organizations			
				Yes	No
1	Were a ma	ajority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees	s of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or manage	ment of the supporting organization was vested in the same persons that controlled or managed			
	the suppo	rted organization(s).	1		
Sec	tion D. A	Il Type III Supporting Organizations			
				Yes	No
1	Did the or	ganization provide to each of its supported organizations, by the last day of the fifth month of the			
	organizati	on's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a	copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organizati	on's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any	of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organizati	on(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organi	zation maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason	of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant	voice in the organization's investment policies and in directing the use of the organization's			
	income or	assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			

supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the meth	od that the organization	used to satisfy the	e Integral Part Test dur	ing the year (see instructions).
---	--------------------------------	--------------------------	---------------------	--------------------------	----------------------------------

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с		The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instructions).	
---	--	---	---	--

17

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.* 032025 01-25-21

Schedule A (Form 990 or 990-EZ) 2020

3

2a

2b

3a

3b

Yes No

14091115 794202 06321

2020.05010 CFSA PROPERTIES IV, INC. 06321_1

Schedule A	(Form 990 or 990-EZ) 2020	CFSA	PROPERTIES	IV,	INC.	
Part V	Type III Non-Function	nally In	tegrated 509(a)(3) Sup	porting	Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in* **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functiona	lly integrated		inization (see

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2020

032026 01-25-21

1

Schedule A (Form 990 or 990-EZ) 2020 CFSA PROPERTIES IV, INC.

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations _{(continu}	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive	•		
	(provide details in Part VI). See instructions.	-		8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	าร	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
a	From 2015				
b	From 2016				
C	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if			T	
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

032027 01-25-21

Schedule A	(Form 990 or 990-EZ) 2020 CFSA	PROPERTIES	IV, INC.		84-4248270 Page 8
Part VI	Supplemental Information. Part IV, Section A, lines 1, 2, 3b, 3c, line 1; Part IV, Section D, lines 2 and Section D, lines 5, 6, and 8; and Par (See instructions.)	13, Farriv, Section E,	11105 10, 2a, 2b,	Ja, and JD, Fail V, line T, r	art V, Section D, line Te, Fart V,
					adula & (Earm 000 ar 000 EZ) 000
32028 01-25-2	1		20	Sch	nedule A (Form 990 or 990-EZ) 202

14091115 794202 06321

SC	HEDULE D	Supplementa	al Financial Statements		OMB No. 1545-0047
	n 990)	Complete if the org	anization answered "Yes" on Form 990,		2020
Depart	ment of the Treasury		, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.		Open to Public
Interna	I Revenue Service		90 for instructions and the latest information	Inspection	
Nam	e of the organization	on CFSA PROPERTIES IV	TNC	Emp	ployer identification number 84-4248270
Pa	rt I Organiza	ations Maintaining Donor Advise	d Funds or Other Similar Funds or A	Accour	
		n answered "Yes" on Form 990, Part IV, lin			
	5	, , ,	(a) Donor advised funds	(b) Fun	nds and other accounts
1	Total number at er	nd of year			
2	Aggregate value of	f contributions to (during year)			
3	Aggregate value of	f grants from (during year)			
4		t end of year			
5	-		writing that the assets held in donor advised fu		
•			exclusive legal control?		Yes No
6	•		dvisors in writing that grant funds can be used		
			r donor advisor, or for any other purpose confe	°.	Yes No
Pa			ganization answered "Yes" on Form 990, Part I		
1		servation easements held by the organization		<u>, into 7</u> .	
•		of land for public use (for example, recrea	· · · · ·	storically	important land area
		f natural habitat	Preservation of a ce	-	-
	Preservation	of open space			
2	Complete lines 2a	through 2d if the organization held a qualit	fied conservation contribution in the form of a d	onserva	tion easement on the last
	day of the tax year				Held at the End of the Tax Year
а					
b					
С			ucture included in (a)	2c	
d			after 7/25/06, and not on a historic structure		
3			accord autionuiched au torminated by the area	2d	during the tax
3	year ►	valion easements modified, transferred, rei	eased, extinguished, or terminated by the orga	mzation	during the tax
4		where property subject to conservation easily as a subject to c	sement is located		
5		tion have a written policy regarding the per			
		orcement of the conservation easements if			Yes No
6	Staff and voluntee	r hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserva-	ion ease	ements during the year
	▶				
7	Amount of expens	es incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation e	asemen	ts during the year
	►\$				
8			e satisfy the requirements of section 170(h)(4)(
•			on easements in its revenue and expense state		
9		-	note to the organization's financial statements		
		ounting for conservation easements.		nat dest	
Pa			Art, Historical Treasures, or Other	Simila	r Assets.
	Complete if	the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization	elected, as permitted under FASB ASC 95	8, not to report in its revenue statement and ba	alance sł	neet works
	of art, historical tre	easures, or other similar assets held for put	blic exhibition, education, or research in further	ance of p	public
	service, provide in	Part XIII the text of the footnote to its finar	ncial statements that describes these items.		
b	-		8, to report in its revenue statement and balan		
			exhibition, education, or research in furtheran	ce of pul	olic service,
	-	ng amounts relating to these items:		•	۴
				•	\$
2	.,		asures, or other similar assets for financial gain		\$
2		ints required to be reported under FASB A	asures, or other similar assets for financial gair SC 958 relating to these items:	, provide	,
а	-				\$
		eduction Act Notice, see the Instructions			* Schedule D (Form 990) 2020

LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 99
032051	12-01-20

14091115 794202 06321

25						
2020.05010	CFSA	PROPERTIES	IV,	INC.	06321	_1

PartIIII Organizations Contributed Contributed 3 Using the organization's accession, accession, and other records, check any of the following that make significant use of its collection items (check all that apply): d Loan or exchange program a Public exhibition d Loan or exchange program b Scholarly research e Other c Preservation for future generations c No Part IV Escrow and Custodial Arrangements. Complete if the organization sollect or receive donations or other inserved "Yes" on Form 990, Part X, line 21. Is the organization an agent, trustee, custodial arrow other intermediary for contributions or other assets not included on form 990, Part X, line 21. Is the organization include an amount on Form 990, Part X, line 21. Is the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability? Is the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability? Is theorganizatin account liability? Is theorganization
collection items (check all that apply): d Loan or exchange program a Public exhibition d Chan or exchange program b Colority research e Other c Preservation for future generations e Other c Preservation for future generations collections and explain how they further the organization's collection? Yee No Part IV Excrow and Custodial Arrangements. Complete if the organization sollection? Yee No Part IV Excrow and Custodial Arrangements. Complete if the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on form 990, Part X, line 21. for escrow or custodial account liability? Ves No b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII No Int 'Yes'' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Provide a designated on part XIII. 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial accounti liability? Yes'
a □ Ublic exhibition d □ chan or exchange program b □ Scholarly research 0 Other c □ Preservation for future generations 4 Provide a description of the organization's collectors and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to tes other asset. Ves No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part XIII. To is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIII. To is the organization an agent, fustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIII. To is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Image: Part V Endowment Funds. 1a Beginning of year balance (a) C
b Scholarly research e Other c Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV Excrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 21. Ta is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Ta is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Ta is the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If 'Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answere? 'Yes' on Form 990, Part X, line 21. No b If 'Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answere? 'Yes' on Form 990, Part X, line 20. No c No I
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV Escrow and Custodial Arrangements. Complete if the organization answerd "Ves" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table:
 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If 'Yes,'' explain the arrangement in Part XIII and complete the following table: Amount Id d Additions during the year Id d Id d Id and the organization an agent, trustee, custodian or other if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization has been provided on Part XIII Part V Endowment Funds. Complete if the organization has been provided on Part XIII If a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e) Four years back (e) Four years back (f) Rourset provide the expansion of the organization (has been provided on Part XIII. (h) Prior year (c) Two years back (d) Three years back (e) Four years back (f) Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment >% b Permanent endowment >% b Premanent funds not in the possession of the organization that are held and administered for the organization by: (f) Unrelated organiza
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets
to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. Yes No b if "Yes," explain the arrangement in Part XIII and complete the following table: Amount 1c 1d 1d 1d 1d 1d 1d 1d 1e 1d 1e 1d 1e 1e 1c 1d 1e 1c 1d 1e 1c
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount 1 c Beginning balance 1 1 1 1 1 1 4 1
reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount 1c 1d c Beginning balance 1d 1e 1d 1e d Additions during the year 1e 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part X, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back a No (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back a for the expenditures for facilities
1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No b if 'Yes," explain the arrangement in Part XIII and complete the following table: Amount Ic c Beginning balance Ic Amount Ic d Additions during the year Id Ic Id e Distributions during the year Id Id Id Id e Distributions during the year Id
on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIII and complete the following table: Amount c Beginning balance 1d d Additions during the year 1d e Distributions during the year 1d f Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "sequent the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Yes No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Yes No a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back a Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back a Grants or scholarships
c Beginning balance Arnount d Additions during the year 1d e Distributions during the year 1e f Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Yes No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Image: Second Seco
c Beginning balance 1c 1d d Additions during the year 1d 1e e Distributions during the year 1f 1e f Ending balance 1f 1e 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back c Net investment earnings, gains, and losses (b) Prior year (c) Two years back (d) Three years back (e) Four years back d Grants or scholarships (b) Prior year (c) Two years back (d) Three years back (e) Four years back </td
d Additions during the year 1d e Distributions during the year 1f f Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Yes No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (d) Three years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back a Grants or scholarships (a) Current year end balance (line 1g, column (a)) held as: (a) Current year end balance (line 1g, column (a)) held as: (a) Current year end balance (line 1g, column (a)) held as: (b) Permanent endowment)
e Distributions during the year 1e f Ending balance 1f 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Ves No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back c Net investment earnings, gains, and losses (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back d Grants or scholarships (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back f Administrative expenditures for facilities (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back g End of year balance (a) Current year (b) Prior year (c) Two years back (e) Four years back 2 Provide the estimated percentage of the current
f Ending balance If 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII Yes No Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (e) Four years back 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (e) Four years back c Net investment earnings, gains, and losses (b) Prior year (c) Two years back (e) Four years back d Grants or scholarships (c) Two years back (e) Four years back (e) Four years back e Other expenditures for facilities (b) Prior year (c) Two years back (e) Four years back g End of year balance (i) Administrative expenses (ii) Courtent year end balance (line 1g, column (ai) held as: (ii) Permanent endowment) (iii) Related organizations %
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b. If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Image: Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Ia Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (e) Four years back c Net investment earnings, gains, and losses (a) Current year (b) Prior year (c) Two years back (e) Four years back d Grants or scholarships (a) Current year (b) Prior year (c) Two years back (e) Four years back e Other expenditures for facilities (a) Current year (b) Prior year (c) Two years back (e) Four years back g End of year balance (a) Current year (b) Prior year (c) Two years back (e) Four years back g End of year balance (b) Prior year (c) Two years back (c) Two years back (e) Four years back g End of year balance (b) Point year (c) Two years back (e) Four years (f) Point year g End of year ba
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (e) Four years back c Net investment earnings, gains, and losses (a) Current year (b) Prior year (c) Two years back (e) Four years back c Net investment earnings, gains, and losses (a) Current year (b) Prior year (c) Two years back (e) Four years back c Other expenditures for facilities (a) Current year (b) Prior year (c) Two years back (e) Four years back g End of year balance (a) Current year (b) Prior year (c) Two years back (e) Four years back g
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (c) Two years back (d) Three years back (e) Four years back b Contributions (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions (b) Prior year (c) Two years back (d) Three years back (e) Four years back c Net investment earnings, gains, and losses (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back c Net investment earnings, gains, and losses (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back c Net investment earnings, gains, and losses (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back e Other expenditures for facilities (a) Current year (b) Part and programs (c) Current year end balance (line 1g, column (a) held as: (a) Current year end balance (in endowment) (c) Term
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance
1a Beginning of year balance
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % the percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs
d Grants or scholarships
e Other expenditures for facilities and programs
and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations
f Administrative expenses
g End of year balance
 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶% b Permanent endowment ▶% c Term endowment ▶% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations
a Board designated or quasi-endowment % b Permanent endowment % c Term endowment % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) Unrelated organizations 3a(i) (ii) Related organizations 3a(ii)
b Permanent endowment ▶% c Term endowment ▶% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations
c Term endowment ▶% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations
The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations 3a(ii) 3a(ii)
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: Yes No (i) Unrelated organizations 3a(i) (ii) Related organizations 3a(ii)
by: (i) Unrelated organizations (ii) Related organizations 3a(ii) 3a(ii) 3a(ii)
(i) Unrelated organizations 3a(i) (ii) Related organizations 3a(ii)
(ii) Related organizations 3a(ii)
 b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds.
Part VI Land, Buildings, and Equipment.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.
Description of property (a) Cost or other (b) Cost or other (c) Accumulated (d) Book value
basis (investment) basis (other) depreciation
1a Land
b Buildings
c Leasehold improvements
d Equipment
e Other
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)
Schedule D (Form 990) 202

032052 12-01-20

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ►		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) CONSTRUCTION IN PROGRESS	2,547,064.
(2) LOAN ORGINATION FEES, NET OF ACCUM AMORTIZATION	153,690.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	2,700,754.
Part X Other Liabilities.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) NOTE PAYABLE – NMTC	935,550.
(3) NOTE PAYABLE – LEVERAGED LOAN	2,564,450.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	3,500,000.
O Lick White for an extension of the Deck VIII and the the test of the foretests to the second structure test statements. If	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2020

032053 12-01-20

Sche	dule D (Form 990) 2020 CFSA PROPERTIES IV, INC	•	84-4248270 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Sta	tements With Reven	ue per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	.)	
Pa	rt XII Reconciliation of Expenses per Audited Financial St	atements With Exper	nses per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	'8 <u>.</u>)	
Pa	rt XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

032054 12-01-20

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.

INC.



84-4248270

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CFSA PROPERTIES IV,

ALABAMA, AN ORGANIZATION EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION

501(C)(3) OF THE CODE AS A NON-PRIVATE FOUNDATION AS DESCRIBED IN

SECTION 509(A)(1) OF THE CODE.

FORM 990, PART VI, SECTION B, LINE 11B:

THE 990 IS POSTED TO THE THE AUDIT COMMITTEE IS EMAILED A COPY FOR REVIEW.

ORGANIZATION'S WEBSITE. THE BOARD OF DIRECTORS ARE NOTIFIED WHEN THE 990 IS POSTED.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE

29

NOT AVAILABLE TO THE PUBLIC.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032211 11-20-20

Schedule O (Form 990 or 990-EZ) 2020

2020.05010 CFSA PROPERTIES IV, INC. 06321__1

2020 DEPRECIATION AND AMORTIZATION REPORT

FORM 99	90 PAGE 10							990							
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone