990-T Exempt Organization Business Income Tax Return						OMB No. 1545-00	47
Form •	(and proxy tax under section 6033(e))					0000	•
		For cal	endar year 2023 or other tax year beginning, and e			2023	5
	ent of the Treasury Revenue Service		Go to www.irs.gov/Form990T for instructions and the not enter SSN numbers on this form as it may be made public if you	latest information. ur organization is a 501(c)(3).		Open to Public Inspec 501(c)(3) Organization	
A	Check box if		Name of organization (Check box if name changed and see instr	ructions.)	D Emp	oloyer identification nu	ımber
	address changed.		THE COMMUNITY FOUNDATION FOR NORTHEAST FLORIDA, INC.		_	0 615074	_
B Exe	mpt under section		9-615074 up exemption number				
X	501(c)(3)	or	Number, street, and room or suite no. If a P.O. box, see instructions.		(see	instructions)	
- 4	408(e) 220(e)	Туре	245 RIVERSIDE AVENUE, 310		-		
	408A 530(a)		City or town, state or province, country, and ZIP or foreign postal code		-	Check box if	
- ;	529(a)529A		JACKSONVILLE, FL 32202	,396,947.	┦╸┕	an amended r	etum
			DR Valde of all accord at one of the		State	college/universit	
G Ch	neck organization	type		Other tidat	_ Ottato	oonogo, arnivoron	.,
			6417(d)(1)(A) Applicable entity Credit from Form 8941 Refund shown on Form	2/30 Flective paym	ent amo	unt from Form 3	800
H Ch	neck if filing only to	o claim	Credit from Form 8941 Refund shown on Form ation filing a consolidated return with a 501(c)(2) titleholding cor				
			ed Schedules A (Form 990-T)			2	
J Er	ter the number of	attache	e corporation a subsidiary in an affiliated group or a parent-subs	idiary controlled group?		Yes X N	0
K Du	unng the tax year, "Vec." enter the n	was un ame an	d identifying number of the parent corporation				
	ne books are in car		GRACE M. SACERDOTE, CPA, EVP/CFO	Telephone number	904-	356-4483	
Part		elate	Business Taxable Income				
1	Total of unrelated	d busine	ess taxable income computed from all unrelated trades or busing	esses (see instructions)	1	830,3	<u>51.</u>
2					2	A this last of the	
3	Add lines 1 and 2				3	830,3	
4	Charitable contril	butions	(see instructions for limitation rules) STMT 1 S	rmt 2	4	82,9	
5	Total unrelated b	usiness	taxable income before net operating losses. Subtract line 4 from	m line 3	5	747,4	16.
6	Deduction for net	t operat	ing loss. See instructions		6		
7	Total of unrelated	d busine	ess taxable income before specific deduction and section 199A	deduction.		D 4 D 4	1.0
	Subtract line 6 from	om line	5		7	747,4	
8	Specific deduction	on (gene	erally \$1,000, but see instructions for exceptions)		8	1,0	00.
9			duction, See instructions			1,0	0.0
10	Total deductions	s. Add	ines 8 and 9		10	746,4	
_11			able income. Subtract line 10 from line 7. If line 10 is greater the	nan line 7, enter zero	11	740,4	10.
Parl					1	156,7	47.
1	Organizations ta	axable a	as corporations. Multiply Part I, line 11 by 21% (0.21)			130,7	
2			rates. See instructions for tax computation. Income tax on the		2		
			Tax rate schedule or Schedule D (Form 1041)		3		
3			ons				
4			instructions		5		
5			acility income. See instructions		6		
6			ph 6 to line 1 or 2, whichever applies		7	156,7	47.
Parl	t III Tax and						
1a			rations attach Form 1118; trusts attach Form 1116)	1a 0	. 63		
b	Other credits (see			1b	- 76		
c			Attach Form 3800 (see instructions)	1c			
d			mum tax (attach Form 8801 or 8827)	1d			
е	Total credits. Ad			1e 2	156,7	4.77	
2		act line 1e from Part II, line 7					
3a	Amount due from	n Form	4255	3a	_		
b	Amount due from	n Form	8611	3b	-113		
C	Amount due from	n Form	***************************************	3c	710		
d	Amount due from			3d	- 121		
е	Other amounts d			3e	- ~		0.
f	Total amounts du	ue, Add	lines 3a through 3e	-f	3f		
4	Total tax. Add lin	nes 2 ar	nd 3f (see instructions).	eierrea unaer	4	156,7	47.
	section 1294. I	Enter ta	x amount here		5	130,77	0.
5			lity paid from Form 965-A, Part II, column (k)		1 0	Form 990-T	
LHA	For Paperwork R	leduction	on Act Notice, see instructions. 323701 11-20-23				,/



Department of the Treasury Internal Revenue Service Ogden, UT 84201-0074

125345.606465.225248.19185 1 AB 0.593 532 րկլիկերժեպիդյուրդիցհեիցկինիկիաիկերի

Notice	CP211A		
Tax period	December 31, 2023		
Notice date	August 26, 2024		
Employer ID number	59-6150746		
To contact us	Phone 877-829-5500		

Page 1 of 1



THE COMMUNITY FOUNDATION FOR % GRACE SACERDOTE 245 RIVERSIDE AVENUE IACKSONVILLE FL 32202

125345

Important information about your December 31, 2023, Form 990T

We approved your Form 8868, Application for Automatic Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your December 31, 2023, Form 990T, Exempt Organization Business Income Tax Return. Your new due date is November 15, 2024.

What you need to do

File your December 31, 2023, Form 990T by November 15, 2024, electronically. The IRS will not accept Form 990T filed on paper for tax years ending on or after July 31,

You may use software offered by visiting IRS.gov/eomefproviders.

Additional information

- Visit IRS.gov/cp211a.
- Go to IRS.gov/charities or call 877-829-5500 to learn more about electronic filing requirements.
- Keep this notice for your records.

Part		Tax and Payments (continued)						
		ents: Preceding year's overpayment cred	ited to the current year	6a				
b	Curre	nt year's estimated tax payments. Check	if section 643(g) election			ELEVI CONTRACTOR		
		s		6b	118,000.			
С		eposited with Form 8868		6c				
d	Foreig	n organizations: Tax paid or withheld at	source (see instructions)	6d				
		p withholding (see instructions)						
		for small employer health insurance pre				2.4		
		ve payment election amount from Form 3				8-7.1		
g h		ent from Form 2439		1 1		3.00		
		from Form 4136		0.1				
i		(see instructions)				E S		
7	Total	payments. Add lines 6a through 6j				7 11	.8,0	00.
8		ated tax penalty (see instructions). Check				8		
9	Tay d	ue. If line 7 is smaller than the total of line	es 4, 5, and 8, enter amount owed			9 3	88,7	<u>47.</u>
10	Over	payment. If line 7 is larger than the total of	of lines 4, 5, and 8, enter amount over	rpaid		10		
11	Enter	the amount of line 10 you want: Credite	d to 2024 estimated tax		Refunded	11		
Part	IV :	Statements Regarding Certain	Activities and Other Informa	tion (see i	instructions)			
1	At an	time during the 2023 calendar year, did	the organization have an interest in o	or a signatur	e or other authority		Yes	No
•	over a	financial account (bank, securities, or ot	her) in a foreign country? If "Yes," the	e organizatio	on may have to file		63	188
	FinCE	N Form 114, Report of Foreign Bank and	Financial Accounts. If "Yes," enter the	ne name of t	he foreign country		177.7	E 2.1
	here							<u>X</u>
2	During	the tax year, did the organization receiv	e a distribution from, or was it the gra	antor of, or t	ransferor to, a			
		n trust?						_X_
	If "Ye	s," see instructions for other forms the or	ganization may have to file.					155
3	Enter	the amount of tax-exempt interest receive	ed or accrued during the tax year		\$		8.3	
4	Enter	available pre-2018 NOL carryovers here	\$ Do not					184
	show	n on Schedule A (Form 990-T). Don't redu	ice the NOL carryover shown here by	any deduct	ion reported on Part	I, line 6.		
5	Post-2	2017 NOL carryovers. Enter the Business	Activity Code and available post-201	7 NOL carry	overs. Don't reduce			347
	the ar	nounts shown below by any NOL claimed	d on any Schedule A, Part II, line 17 f	or the tax ye	ar. See instructions.			
		Business Activity Co			able post-2017 NOL		17.0	
		523	000	\$	2,1	83,835.	350	1865
				\$				
				\$				
				\$				-
6 a	Reser	ved for future use						
		ved for future use					1	
Part '		Supplemental Information						
Provide	any a	dditional information. See instructions.						
	T.	der penalties of perjury, I declare that I have examined	this return, including accompanying schedules and	d statements, an	d to the best of my knowled	dge and belief, it is tro	ıe,	
Sign	cc	rrect, and complete. Declaration of preparer (other than	taxpayer) is based on all information of which pre	Dalei lias ally Kit	Owledge.			
Here		CHM SULLETAN		EASURE	R M	ay the IRS discuss th e preparer shown bel		vith
110.0	=	gnature of officer	Date Title	DIAD OICE.			es X	No
		,	Preparer's signature	Date	Check i	f PTIN		
		Print/Type preparer's name		Duto	self-employed	1		
Paid		DANA ALEXANDER	DANA ALEXANDER	09/30/		P01425	283	
Prepa		ALDE DICCO		,,	Firm's EIN	72-139		1
Use C	nly	Firm's name CARR, RIGGS 7411 FILLE	RTON STREET, SUITE	300				
			LE, FL 32256		Phone no. 9	04.356.6	023	
		Film 5 address DACTEDOTA TEL	,				90-T	(2023)

Form 8879-TE

IRS E-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545	-0047
OMB No. 1545	-0047

For calendar year 2023, or fiscal year beginning

, 2023, and ending

2023

Department of the Treasury Internal Revenue Service

Name of filer

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

Go to www.irs.gov/Form8879TE for the latest information.

THE COMMUNITY FOUNDATION FOR NORTHEAST FLORIDA, INC.

EIN or SSN

59-6150746

Name and title of officer or person subject to tax

GRACE SACERDOTE EXECUTIVE VP/TREASURER

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

i idii oi	O III IO III I CAICII					
1a	Form 990 check here		b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	. 1b	
2a	Form 990-EZ check here		b	Total revenue, if any (Form 990-EZ, line 9)	_ 2b	
	Form 1120-POL check here		b	Total tax (Form 1120-POL, line 22)	3b _	
	Form 990-PF check here			Tax based on investment income (Form 990-PF, Part V, line 5)		
	Form 8868 check here	$\overline{\Box}$		Balance due (Form 8868, line 3c)		
	Form 990-T check here	$\overline{\mathbf{x}}$		Total tax (Form 990-T, Part III, line 4)		156,747
	Form 4720 check here			Total tax (Form 4720, Part III, line 1)		
	Form 5227 check here	Ħ		FMV of assets at end of tax year (Form 5227, Item D)		
	Form 5330 check here	H		Tax due (Form 5330, Part II, line 19)		
	Form 8038-CP check here	-		Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	
Part	II Declaration and S	Signatu	ure	Authorization of Officer or Person Subject to Tax		
Inder r	penalties of periury I declare th	at X	Lar	m an officer of the above entity or I am a person subject to tax with re	spect to	(name
of antita		ut [(EIN) and that I have	e exam	ined a copy of the

2023 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

ERO firm name

PIN:	check	one	box	only
------	-------	-----	-----	------

X Lauthorize CARR, RIGGS & INGRAM, LLC

to enter my PIN

32256

Enter five numbers, but do not enter all zeros

as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2023 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Part III Certification and Authentication

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

59168336331

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature

CARR, RIGGS & INGRAM, LLC

Date 09/30/24

ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

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

Form 8879-TE (2023)

FORM 990-T	CONTRIBUTIONS	STATEMENT 1
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
VARIOUS	N/A	82,654.
CHARITABLE CONTRIBUTIONS - JUNIPER CAPITAL II, L.P.	N/A	79.
CHARITABLE CONTRIBUTIONS - JUNIPER CAPITAL III L.P.	N/A	249.
CHARITABLE CONTRIBUTIONS - NORTHGATE IV LP	N/A	1.
CHARITABLE CONTRIBUTIONS - NORTHGATE V LP	N/A	43.
CHARITABLE CONTRIBUTIONS - PARK STREET CAPITAL NATURAL	N/A	
RESOURCE FUND		1.
CHARITABLE CONTRIBUTIONS - NEWLIN ENERGY PARTNERS II, LP	N/A	8.
TOTAL TO FORM 990-T, PART I, LI	INE 4	83,035.

FORM 990-T	CONTRIBUTIONS SUMMARY		STATEMENT 2
	CONTRIBUTIONS SUBJECT TO 100% LIMIT CONTRIBUTIONS SUBJECT TO 25% LIMIT		
FOR TAX FOR TAX FOR TAX	OF PRIOR YEARS UNUSED CONTRIBUTIONS YEAR 2018 YEAR 2019 YEAR 2020 YEAR 2021 YEAR 2022		
TOTAL CARE	YOVER ENT YEAR 10% CONTRIBUTIONS	83,035	_
TOTAL CONT	RIBUTIONS AVAILABLE COME LIMITATION AS ADJUSTED	83,035 82,935	_
EXCESS 100	TRIBUTIONS % CONTRIBUTIONS SS CONTRIBUTIONS	100 0 100	
ALLOWABLE	CONTRIBUTIONS DEDUCTION		82,935
TOTAL CONT	RIBUTION DEDUCTION		82,935

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

Yes X No

Name THE COMMUNITY FOUNDATION FOR

NORTHEAST FLORIDA, INC.

Employer Identification number

59-6150746

Did the corporation dispose of any investmer If "Yes," attach Form 8949 and see its instruc	nt(s) in a qualified opportur	nity fund during the tax y	ear?r gain or loss.		Yes 🕰 No
	ne and Losses - Ass	ets Held One Year	or Less		
Part I Short-Term Capital Gai See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gai		(h) Gain or (loss) Subtract column (e) from column (d) and combine the
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column (g	g)	result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked					
4 Short-term capital gain from installment sales				4	
5 Short-term capital gain or (loss) from like-kind				5	, X
6 Unused capital loss carryover (attach computa	ition)			6	1
7 Net short-term capital gain or (loss). Combine Part II Long-Term Capital Gain	e lines 1a through 6 in column	hTho	n One Veer	7	
Part II Long-Term Capital Gail	ns and Losses - Ass	ets neid wore ma	Il Olle Teal		(h) Gain or (loss)
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)		Subtract column (e) from column (d) and combine the result with column (g)
round off cents to whole dollars.			E. L. R. SANSA RES	Veril.	
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked				_	
9 Totals for all transactions reported on					
Form(s) 8949 with Box E checked				_	
10 Totals for all transactions reported on					37,525.
Form(s) 8949 with Box F checked					6,274.
11 Enter gain from Form 4797, line 7 or 9				11_	0,2/4.
12 Long-term capital gain from installment sales				12	
13 Long-term capital gain or (loss) from like-kind	d exchanges from Form 8824		1	13	
14 Capital gain distributions				14	43,799.
15 Net long-term capital gain or (loss). Combine		<u>n h</u>		15	45,177.
Part III Summary of Parts I and				40	
16 Enter excess of net short-term capital gain (lir	ne 7) over net long-term capit	al loss (line 15)	. 7\	16	43,799.
17 Net capital gain. Enter excess of net long-term	capital gain (line 15) over ne	t snort-term capital loss (lin	e /)	17 18	43,799.
18 Add lines 16 and 17. Enter here and on Form		plicable line on other return	ıs /L	10	10,,,,,,
Note: If losses exceed gains, see Capital Los	Ses in the manuchona.				
LILLA For Department Boduction Act Motion	eas the Instructions for Form	1120		8	Schedule D (Form 1120) 2023

LHA

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

THE COMMUNITY FOUNDATION FOR NORTHEAST FLORIDA, INC.

Social security number or taxpayer identification no.

59-6150746

TOTELLED T T DOMESTO, TITLE	
Before you check Box D, E, or F below, see whether you received any Form(s) is statement will have the same information as Form 1099-B. Either will show whe broker and may even tell you which box to check.	1099-B or substitute statement(s) from your broker. A substitute other your basis (usually your cost) was reported to the IRS by your
nrover and may even tell you writen box to theth.	

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) insactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

X (F) Long-term transactions no							
1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see Column (e) in the instructions	160	nt, if any, to gain or ou enter an amount (g), enter a code in . See instructions. (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
						aujustilient	
BAIN CAPITAL							
SENIOR LOAN FUND,				-			34 214.
LP				-			34,214. 3,311.
NORTHGATE V LP							3,311.
			A				
	-						
,							
		-					
				+			
	-			1			
					- X X X		
2 Totals. Add the amounts in colu							
negative amounts). Enter each to					1773		
Schedule D, line 8b (if Box D ab					100		27 525
above is checked) or line 10 (if							37,525.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2023)

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

Department of the Treasury Internal Revenue Service

Attach to your tax return. Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

	e(s) shown on return						laer	nurying number
	E COMMUNITY FOUNDAT:						١.	59-6150746
	RTHEAST FLORIDA, IN			2000 5 (1)	1000 D 1000 C		Т.	33 0130710
1a	Enter the gross proceeds from sales						1a	
	(or substitute statement) that you are	including on line	n lines 2 10 on		ertial dispositions o		10	
b	b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets							
_	MACRS assets Enter the total amount of loss that yo	u are including o	n lines 2 and 10	due to the partial	dispositions of MA	CRS		
C							1c	
Pa	rt I Sales or Exchanges of	Property Use	ed in a Trade	or Business	and Involuntar	y Convers	ions	From Other
	Than Casualty or Theft	-Most Prope	rty Held Mo	re Than 1 Yea	r (see instruction	s)		
_	(a) Description	(b) Date acquired	(C) Date sold	(d) Gross sales	(e) Depreciation allowed or	(f) Cost or ot basis, plus	ner	(g) Gain or (loss)
2	of property	(mo., day, yr.)	(mo., day, yr.)	price	allowable since	improvements a		Subtract (f) from the sum of (d) and (e)
SE	EE STATEMENT 11				acquisition	expense or sa	le	
							-	
							-	
							\dashv	
							3	
3	Gain, if any, from Form 4684, line 39						4	
4	Section 1231 gain from installment sa						5	
5	Section 1231 gain or (loss) from like-k						6	
6	Gain, if any, from line 32, from other t Combine lines 2 through 6. Enter the	nan casuarry or t	nert				7	6,274.
7	Partnerships and S corporations. R	gain or (loss) her	e and on the ap	the instructions for	r Form 1065, Sche			
	line 10, or Form 1120-S, Schedule K,	line 9. Skip lines	8, 9, 11, and 12	below.	,, , , , , , , , , , , , , , , , , , , ,	,		
	Individuals, partners, S corporation				loss, enter the am	ount		
	from line 7 on line 11 below and skip	lines 8 and 9. If li	ine 7 is a gain aı	nd you didn't have	any prior year sect	tion		
	1231 losses, or they were recaptured	in an earlier year	, enter the gain	from line 7 as a lo	ng-term capital gair	n on		
	the Schedule D filed with your return	and skip lines 8,	9, 11, and 12 b	elow.				
8	Nonrecaptured net section 1231 loss	es from prior yea	rs. See instructi	ons			8	
9	Subtract line 8 from line 7. If zero or le	ess, enter -0 If li	ne 9 is zero, ent	er the gain from lir	ne 7 on line 12 belo	w. If		
	line 9 is more than zero, enter the am	ount from line 8	on line 12 below	and enter the gai	n from line 9 as a lo	ong-term		
	capital gain on the Schedule D filed w						9	6,274.
Pa	rt II Ordinary Gains and I	osses (see ins	structions)					
10	Ordinary gains and losses not includ	ed on lines 11 th	rough 16 (includ	de property held 1	year or less):			
	Ordinary game and looses het meta-							
_								
_								
11	Loss, if any, from line 7						11	()
	Gain, if any, from line 7 or amount fro						12	
13	Gain, if any, from line 31						13	
14	Net gain or (loss) from Form 4684, line						14	
15	Ordinary gain from installment sales f						15	
16	Ordinary gain or (loss) from like-kind e	exchanges from F	orm 8824				16	
17	Combine lines 10 through 16						17	VIDER HILLINGS BEEN
18	For all except individual returns, enter			appropriate line of	your return and sk	ip lines		
	a and b below. For individual returns,	complete lines a	and b below.			F-4 #		
а	If the loss on line 11 includes a loss fr	om Form 4684, I	ine 35, column	(b)(ii), enter that pa	rt of the loss here.	Enter the		
	loss from income-producing property						10-	AND THE PARTY OF
	as an employee.) Identify as from "Fo	rm 4797, line 18a	a." See instructi	ons	o and an Cahadula		18a	
b	Redetermine the gain or (loss) on line						18b	
_	(Form 1040), Part I, line 4						.00	Form 4797 (2023)

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2023)

Part III Gain From Disposition of Prope	rty Und	er Sections 124	5, 1250, 1252	2, 125	4, and 1255 (see	instructions)
19 (a) Description of section 1245, 1250, 1252, 1254		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)			
A						
В						
С						
D			1			
These columns relate to the properties on lines 19A through 19D.		Property A	Property	в	Property C	Property D
20 Gross sales price (Note: See line 1a before completing.						
21 Cost or other basis plus expense of sale						
22 Depreciation (or depletion) allowed or allowable						
23 Adjusted basis. Subtract line 22 from line 21			-			
24 Total gain. Subtract line 23 from line 20	24			-		
25 If section 1245 property:	t					
a Depreciation allowed or allowable from line 22	25a					
b Enter the smaller of line 24 or 25a						
26 If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.	ו					
a Additional depreciation after 1975. See instructions	26a					
b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b			-		
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c					
d Additional depreciation after 1969 and before 1976						
e Enter the smaller of line 26c or 26d	26e					
f Section 291 amount (corporations only)	26f					
g Add lines 26b, 26e, and 26f	26g					
27 If section 1252 property: Skip this section if you didn' dispose of farmland or if this form is being completed for a partnership.	ır					
a Soil, water, and land clearing expenses				_		
b Line 27a multiplied by applicable percentage			-	_		
c Enter the smaller of line 24 or 27b	27c			-		
28 If section 1254 property: a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instruction.	28a					
b Enter the smaller of line 24 or 28a	28b					
29 If section 1255 property: a Applicable percentage of payments excluded from income under section 126. See instructions	29a					
b Enter the smaller of line 24 or 29a. See instructions	29b		J			
Summary of Part III Gains. Complete property	columns	A through D through	n line 29b before	going t	to line 30.	
30 Total gains for all properties. Add property column	ns A throu	ıgh D, line 24			30	
31 Add property columns A through D, lines 25b, 26	g, 27c, 28	b, and 29b. Enter he	re and on line 13		31	
32 Subtract line 31 from line 30. Enter the portion from	m casual	ty or theft on Form 4	684, line 33. Ente	er the p	ortion	
from other than casualty or theft on Form 4797, li Part IV Recapture Amounts Under Sect	ne 6 i ons 17 9	9 and 280F(b)(2)	When Busin	ess U	se Drops to 50%	or Less
(see instructions)						
					(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation a				33		
34 Recomputed depreciation. See instructions				34		
35 Recapture amount. Subtract line 34 from line 33.	See the ir	structions for where	to report	35		4707
318012 12-27-23						Form 4797 (202

FORM 4797	PROI	ERTY HEI	D MORE THAN	ONE YEAR	STA	ATEMENT 11
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
LEVEL EQUITY GROWTH PARTNERS I						-4.
NEWBURY EQUITY PARTNERS LP NORTHGATE IV LP PARK STREET						-27. -16.
CAPITAL NATURAL RESOURCE FUN						81.
SRA/BUILDING 051 CORP MILL CREEK						4,362.
PRIVATE EQUITY FUND IV, L.P. MILL CREEK						800.
PRIVATE EQUITY FUND V, L.P.						1,078.
TOTAL TO 4797, PA	RT I, LINE	2				6,274.

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

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

A Name of the organization THE COMMUNITY FOUNDATI NORTHEAST FLORIDA, INC.	B Employer identification number 59-6150746						
C Unrelated business activity code (see instructions) 52300	: 1	of 2					
E Describe the unrelated trade or business INVESTMENT I	N LI	MITED PARTER	NSHIP				
Part I Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net		
Turki -	_		M-VA-1-5-5	15.00	ngari datea 17		
1a Gross receipts or sales							
b Less returns and allowances c Balance	1c						
2 Cost of goods sold (Part III, line 8)	3			310			
3 Gross profit. Subtract line 2 from line 1c	3		E ENSINE				
4a Capital gain net income (attach Schedule D (Form 1041 or Form		39,437.			39,437.		
1120)). See instructions	4a	39,437.	AND THE PARTY OF	7.0	55/25		
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b		STATE OF THE				
c Capital loss deduction for trusts	4c			-			
5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 3	5	2,002,717.			2,002,717.		
6 Rent income (Part IV)	6						
7 Unrelated debt-financed income (Part V)	7						
8 Interest, annuities, royalties, and rents from a controlled							
organization (Part VI)	8						
9 Investment income of section 501(c)(7), (9), or (17)							
organizations (Part VII)	9						
10 Exploited exempt activity income (Part VIII)	10						
11 Advertising income (Part IX)	11						
12 Other income (see instructions; attach statement)	12			1000	2,042,154.		
13 Total. Combine lines 3 through 12							
Part II Deductions Not Taken Elsewhere. See instruction directly connected with the unrelated business in	ncome						
1 Compensation of officers, directors, and trustees (Part X)				1	450.		
2 Salaries and wages				2	424.		
3 Repairs and maintenance				3			
4 Bad debts				4			
5 Interest (attach statement). See instructions				5	200		
6 Taxes and licenses				6	380.		
7 Depreciation (attach Form 4562). See instructions		7					
8 Less depreciation claimed in Part III and elsewhere on return		8a		8b			
9 Depletion				9			
10 Contributions to deferred compensation plans				10	137.		
	Excess exempt expenses (Part VIII)						
42 Evance roadership costs (Part IX)				13	400 000		
14 Other deductions (attach statement)		SEE STAT	EMENT 4	14	122,328.		
15 Total deductions. Add lines 1 through 14				15	123,719.		
Unrelated business income before net operating loss deduction. S column (C)	Subtract	line 15 from Part I, line 1	3,	16	1,918,435.		
- I to the state of the state o		STMT 5	STMT 7	17	1,534,748.		
17 Deduction for net operating loss. See instructions 18 Unrelated husiness taxable income. Subtract line 17 from line 1	6			18	383,687.		

Schedule A (Form 990-T) 2023

For Paperwork Reduction Act Notice, see instructions.

Schedi Part	III Cost of Goods Sold Enter meth	od of inventory valuation	on		
1	Inventory at beginning of year			1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)	4			
5	Other costs (attach statement)	5			
6	Total. Add lines 1 through 5	6			
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter h	ere and in Part I, line 2			Yes No
9	Do the rules of section 263A (with respect to property p	roduced or acquired fo	r resale) apply to the o	organization?	. Tes No
Part	IV Rent Income (From Real Property and	Personal Propert	y Leased With N	ear Property)	
1	Description of property (property street address, city, st	ate, ZIP code). Check i	r a dual-use. See instit	actions.	
	A				
	B				
	<u> </u>				
	D []	A	В	С	D
2	Rent received or accrued				
2 a	From personal property (if the percentage of				
a	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
-	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
c	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
				. (90%)	0.
3	Total rents received or accrued. Add line 2c, columns A	through D. Enter here	and on Part I, line 6, c	olumn (A)	0.
	Deductions directly connected with the income				
4	in lines 2a and 2b (attach statement)				
_	Total deductions. Add line 4, columns A through D. Er	tar here and on Part I	line 6. column (B)		0.
5 Part		e instructions)			
1	Description of debt-financed property (street address, c		eck if a dual-use. See	instructions.	
'	A	,			
	В				
	c 🗆				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property		4		
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
_	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
•	financed property (attach statement)	%	%	%	%
6	Divide line 4 by line 5	70	,,,		
7 8	Total gross income (add line 7, columns A through D).	Enter here and on Part	I, line 7, column (A)		0.
0	Total gross mooning (and line 1, solution) through by				
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A three	ough D. Enter here and	on Part I, line 7, colur	nn (B)	0.
11	Total dividends-received deductions included in line	10			0.
				Cobodula /	(Form 990-T) 2023

Part VI Interest, Annu	ities. R	ovalties, and Re	ents Fro	m Contro	lled O	rganization	S (see	instruct	ions)	
T dit VI mitoroogramio	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			Е	xempt Contro	lled Org	anization	s	
Name of controlled organization		2. Employer identification number			al of specified ments made that is included controlling org tion's gross in		ncluded Iling orga	in the niza-	Deductions directly connected with ncome in column 5	
(1)										
(2)										
(3)										
(4)										
				Controlled Or		ons 10. Part	of colum	n 0	44 D	eductions directly
7. Taxable Income	ir	Net unrelated acome (loss) e instructions)	1	otal of specif yments mad		that is inc	luded in	the ation's	11. Deductions directly connected with income in column 10	
(1)										
(2)										
(3)										
(4)										
						Add colum Enter here line 8, c	and on I	Part I,	Part I, Enter here and on Part I,	
Totals				-1				0.		0.
		of a Section 50	1(c)(7), (I .	ee instru		. Take a	5. Total deductions
1. Desc	1. Description of income		2. Amount of income		0,2000000000000000000000000000000000000		4. Set- attach st			
(1)										
(2)										
(3)										
(4)				Add amou	ınto in			L.		Add amounts in
				column 2						column 5. Enter
				here and or						here and on Part I, line 9, column (B).
				line 9, colu	mn (A).					0.
Totals		Activity Income,	Other 1	Than Adve		Income	logo inot	nuctions)		
			, Other i	Hall Auve	a dong	g income	See IIISI	ructions		
Description of exploite	ed activity:	. for any bounds and bound	-ass Enta	r hara and a	Dort I	line 10. colum	n (Δ)		2	
2 Gross unrelated busin	ess incom	e from trade or busi	ness. Ente	inoce income	Fnterl	here and on Pa	ırıyay arti			
3 Expenses directly connected with production of unrelated business income. Enter here and on Part I,							3			
line 10, Column (b)										
									4	
Ines o through /	lines 5 through 7 Gross income from activity that is not unrelated business income								5	
									6	
	eas Subtr	act line 5 from line 6	S. but do no	ot enter more	than th	ne amount on I	ine			
7 Excess exempt expen4. Enter here and on F									7	
4. Litter fiele and Off F	art in inio	1 dem						e.	chadula	A (Form 990-T) 2023

FORM 990-T (A) INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 3
DESCRIPTION	NET INCOME OR (LOSS)
JUNIPER CAPITAL II, L.P ORDINARY BUSINESS INCOME (LOSS)	674,87
JUNIPER CAPITAL II, L.P SECTION 59(E)(2) EXPENDITURES -	0 06
OTHER INCOME (LOS	-377,969
JUNIPER CAPITAL III L.P ORDINARY BUSINESS INCOME (LOSS)	2,194,85
UNIPER CAPITAL III L.P SECTION 59(E)(2) EXPENDITURES -	-651,89
THER INCOME (LOS EVEL EQUITY GROWTH PARTNERS I LP - ORDINARY BUSINESS	00=7==
NCOME (LOSS)	-4,38
INDSAY GOLDBERG IV REIT AIV L.P DIVIDEND INCOME	4
INDSAY GOLDBERG V L.P INTEREST INCOME	5
INDSAY GOLDBERG V L.P DIVIDEND INCOME	99 58,65
ATERRA LLC - ORDINARY BUSINESS INCOME (LOSS)	50,05
ONTAUK TRIGUARD FUND V LP - ORDINARY BUSINESS INCOME	-3,51
LOSS) EWBURY EQUITY PARTNERS LP - ORDINARY BUSINESS INCOME	0,02
EWBURY EQUITY PARTNERS IF - ORDINARI BUSINESS INCOME	-22
EWBURY EQUITY PARTNERS LP - INTEREST INCOME	1.
EWBURY EOUITY PARTNERS LP - OTHER PORTFOLIO INCOME (LOSS)	
ORTHGATE IV LP - ORDINARY BUSINESS INCOME (LOSS)	5,58
ORTHGATE IV LP - INTEREST INCOME	5 21
ORTHGATE IV LP - DIVIDEND INCOME	-17
ORTHGATE V LP - ORDINARY BUSINESS INCOME (LOSS)	Σ,
ORTHGATE V LP - INTEREST INCOME ORTHGATE V LP - SECTION 59(E)(2) EXPENDITURES - OTHER	
NCOME (LOSS)	-1
ARK STREET CAPITAL NATURAL RESOURCE FUND - ORDINARY	
USINESS INCOME (LOSS)	6,77
ARK STREET CAPITAL NATURAL RESOURCE FUND - NET RENTAL	
EAL ESTATE INCOME	
ARK STREET CAPITAL NATURAL RESOURCE FUND - OTHER	
ORTFOLIO INCOME (LOSS) ARK STREET CAPITAL NATURAL RESOURCE FUND - OTHER INCOME	
LOSS)	2
ARK STREET CAPITAL NATURAL RESOURCE FUND - SECTION	
9(E)(2) - OTHER INCOME	-1,50
EAL ESTATE RECOVERY FUND LLC - ORDINARY BUSINESS INCOME	75,50
LOSS)	75,50
ILL CREEK ENHANCED INCOME FUND LP SERIES I - ORDINARY	9,83
USINESS INCOME (LOSS RIVATE EQUITY INVESTMETN FUND IV, LP - ORDINARY BUSINESS	2,00
NCOME (LOSS)	
EWLIN ENERGY PARTNERS II, LP - ORDINARY BUSINESS INCOME	
LOSS)	27,39
EWLIN ENERGY PARTNERS II, LP - SEC 59(E)(2) EXPENDITURES	15 26
OTHER INCOME (LO	-15,26
ILL CREEK PRIVATE EQUITY FUND IV, L.P ORDINARY	-88
USINESS INCOME (LOSS) ILL CREEK PRIVATE EQUITY FUND IV, L.P SEC 59(E)(2) EXP	00
OTHER INCOME (L	-27
ILL CREEK PRIVATE EQUITY FUND V, L.P ORDINARY BUSINESS	
NCOME (LOSS)	4,82

TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5

2,002,717.

FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 4
DESCRIPTION		AMOUNT
	THE OWN CONCUMENTS AND THE	107,798.
	EES ON CONSULTING UBI	1,129.
IT COST/OCCUPANCY OTHER DEDUCTIONS - PO	RTFOLIO FROM LINDSAY GOLDBERG IV L.P.	21.
	RTFOLIO FROM LINDSAY GOLDBERG IV REIT	21.
AIV L.P. OTHER DEDUCTIONS - PO	RTFOLIO FROM LINDSAY GOLDBERG V L.P.	11,983.
	RTFOLIO FROM LINDSAY GOLDBERG V RP AI	319.
LP	RTFOLIO FROM NORTHGATE IV LP	406.
	ORTFOLIO FROM NORTHGATE V LP	323.
OTHER DEDUCTIONS - PO	ORTFOLIO FROM JUNIPER CAPITAL II, L.P.	_
SECTION 59(E)(2	Ittl Oblo Inon Contact of the Contac	79.
OTHER DEDUCTIONS - PO SECTION 59(E)(2	RTFOLIO FROM JUNIPER CAPITAL III L.P.	249.
TOTAL TO SCHEDULE A,	PART II, LINE 14	122,328.

ORM 990-T (A)	POST 2017 NOL SCHEDULE	STATEMENT 5
PRIOR YEAR POST 2017 NOL	NOL DEDUCTION	CARRYFORWARD OF POST 2017 NOL
2,183,835.	1,534,748.	649,087.
2,183,835.	1,534,748.	649,0

990-T SCH A		POST-201	7 NET OPERATING	LOSS DEDUCTION	STATEMENT 6
TAX YEAR	LOSS SU	USTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18 12/31/19 12/31/20 12/31/21 12/31/22		528,571. 193,715. 447,239. 921,081. 93,229.	0. 0. 0. 0.	528,571. 193,715. 447,239. 921,081. 93,229.	528,571. 193,715. 447,239. 921,081. 93,229.
NOL CARRYOV	ER AVAI	LABLE THIS	YEAR	2,183,835.	2,183,835.

SCH A (990-T)	SCHEDULE A NOL DETAIL	STATEMENT 7
TAXABLE INCOME FROM THIS ENTITIES PORTI	ALL ENTITIES ON OF TAXABLE INCOME	2,365,099. 1,918,435.
THIS ENTITIES PERCE	NTAGE OF PRE-2018 NET OPERATING LOSS ED PRE-2018 NET OPERATING LOSS	81.11%
TAXABLE INCOME AFTE 80% INCOME LIMITATI	R PRE-2018 NET OPERATING LOSS ON	1,918,435. 1,534,748.
POST-2017 AVAILABLE	NET OPERATING LOSS OR 80% LIMITATION	2,183,835. 1,534,748.

THE COMMUNITY FOUNDATION FOR

Social security number or taxpayer identification no.

59-6150746

NORTHEAST FLOR	IDA, INC.	•				1 100	1.00,10
Before you check Box D, E, or F below the same information and may even tell you which he	ow, see whether y ation as Form 109 hox to check	ou received any 99-B. Either will :	SHOW WHELHER YOU	Dasis (usuany your	00019 1140		
Part II Long-Term. Transaction	ons involving capita	ıl assets you held r	nore than 1 year are	generally long-term (s	ee instructio	ons). For short-term t	ransactions,
see page 1. Note: You may aggregate al	long-term transact	ions reported on F	orm(s) 1099-B showi	ng basis was reported	to the IRS	and for which no adj	ustments or ctions).
	Ole e ele ambe ama ba	se If we are there are h	ov applice for vour lang-	term transactions combin	ete a sebarate	Form 6949, page 2, 101 1	each applicable box.
f you have more long-term transactions than will	fit on this page for one	or more of the boxes	, complete as many form	S WILL THE SAME DOX CHOC	acca do you no		
(D) Long-term transactions rep	ported on Form(s) 1099-B showin	g basis was repor	ted to the IRS (see	Note and	ove)	
(E) Long-term transactions rep				ported to the ins			
X (F) Long-term transactions no				(.)	Adjustmer	t, if any, to gain or	(h)
1 (a)	(b)	(c)	(d) Proceeds	(e) Cost or other	loss. If v	ou enter an amount	Gain or (loss).
Description of property	Date acquired	Date sold or disposed of	(sales price)	basis. See the	in column	(g), enter a code in . See instructions.	Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)		Note below and	(f)	(g)	from column (d) & combine the result
		(IVIO., day, yr.)		see Column (e) in the instructions	Code(s)	Amount of	with column (g)
				the instructions	0000(0)	adjustment	With column (9)
BAIN CAPITAL							
SENIOR LOAN FUND,				-			34,214.
LP							3,311.
NORTHGATE V LP							3,311.
				-			
	ļ						
							
							-
							
				ļ			
2 Totals. Add the amounts in colu							
negative amounts). Enter each to							
Schedule D, line 8b (if Box D ab	ove is checked),	line 9 (if Box E			PI E		37,525.
above is checked), or line 10 (if	Box F above is ci	hecked)					31,343.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

Name

Employer identification number

THE COMMUNITY FOUNDATION FOR	
NORTHEAST FLORIDA, INC.	59-6150746
Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year?	Yes X N

If "Yes," attach Form 8949 and see its instru Part I Short-Term Capital Ga	ctions for additional require	ements for reporting you sets Held One Year	r gain or loss.		
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to g or loss from Form(s) 8' Part I, line 2, column	949,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
round off cents to whole dollars. 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on Form(s) 8949 with Box A checked					
Totals for all transactions reported on Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked	from Forms COFO, line OC or 2	7		4	
4 Short-term capital gain from installment sales				5	
5 Short-term capital gain or (loss) from like-kin				6	(
6 Unused capital loss carryover (attach computa	ation)	. h		7	1
7 Net short-term capital gain or (loss). Combin Part II Long-Term Capital Gai	e lines ta through 6 in column	ets Held More Tha	n One Year		
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to g or loss from Form(s) 8 Part II, line 2, column	949,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on					
Form(s) 8949 with Box E checked			-		
10 Totals for all transactions reported on					37,525.
Form(s) 8949 with Box F checked				44	1,912.
11 Enter gain from Form 4797, line 7 or 9				11	1,512.
12 Long-term capital gain from installment sales	from Form 6252, line 26 or 3	7		13	
13 Long-term capital gain or (loss) from like-kin	d exchanges from Form 8824				
14 Capital gain distributions				14	39,437.
15 Net long-term capital gain or (loss). Combin	e lines 8a through 14 in colum	<u>ın h</u>		1 13	33,1371
Part III Summary of Parts I and		-1.1 /line 45\		16	
16 Enter excess of net short-term capital gain (li	ne /) over net long-term capita	al loss (line 15)		17	39,437.
17 Net capital gain. Enter excess of net long-tern	n capital gain (line 15) over ne	t snort-term capital loss (III	ic 1)	18	39,437.
18 Add lines 16 and 17. Enter here and on Form		plicable line on other return	19	10	33,2074
Note: If losses exceed gains, see Capital Los	sses in the instructions.				

For Paperwork Reduction Act Notice, see the Instructions for Form 1120. LHA

Schedule D (Form 1120) 2023

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

OMB No. 1545-0184

Attach to your tax return.

Go to www.irs.gov/Form4797 for instructions and the latest information.

Identifying number

	THE COMMUNITY FOUNDATION FOR ORTHEAST FLORIDA, INC.							59-6150746
10	Enter the gross proceeds from sales	or exchanges rep	orted to you for	2023 on Form(s) 1	099-B or 1099-S			
ıa	(or substitute statement) that you are	including on line	2, 10, or 20				1a	
h	Enter the total amount of gain that yo	u are including o	n lines 2, 10, an					
	MACRS assets						1b	
c	Enter the total amount of loss that you	u are including o	n lines 2 and 10	due to the partial	dispositions of MA	CRS		
Ů							1c	
Pa	rt I Sales or Exchanges of	Property Use	ed in a Trade	or Business	and Involuntai	y Convers	sions	From Other
	Than Casualty or Theft	-Most Prope	rty Held Moi	re Than 1 Year	(see instruction	ns)		
	(a) Description	(b) Date acquired	(C) Date sold	(d) Gross sales	(e) Depreciation allowed or	(f) Cost or o		(g) Gain or (loss)
2	of property	(mo., day, yr.)	(mo., day, yr.)	price	allowable since	improvements	and	Subtract (f) from the sum of (d) and (e)
SE	E STATEMENT 10				acquisition	expense of s	sale	
							_	
						L		
3	Gain, if any, from Form 4684, line 39						3	
	Section 1231 gain from installment sa						4	
5	Section 1231 gain or (loss) from like-k						5	
6	Gain, if any, from line 32, from other t						6	1,912.
7	Combine lines 2 through 6. Enter the	gain or (loss) her	e and on the ap	propriate line as fo	llows		7	1,914.
	Partnerships and S corporations. R line 10, or Form 1120-S, Schedule K,	eport the gain or line 9. Skip lines	(loss) following 8, 9, 11, and 12	the instructions fo below.	r Form 1065, Sche	edule K,		
	Individuals, partners, S corporation from line 7 on line 11 below and skip 1231 losses, or they were recaptured the Schedule D filed with your return	lines 8 and 9. If li in an earlier year	ine 7 is a gain ar r, enter the gain	nd you didn't have from line 7 as a lor	any prior year sec	tion		
8	Nonrecaptured net section 1231 loss	es from prior yea	rs. See instructi	ons			8	
9	Subtract line 8 from line 7. If zero or le	ess, enter -0 If li	ne 9 is zero, ent	er the gain from lin	e 7 on line 12 belo	ow. If		
	line 9 is more than zero, enter the am	ount from line 8	on line 12 below	and enter the gair	n from line 9 as a le	ong-term		
	capital gain on the Schedule D filed w						9	1,912.
Pa	rt II Ordinary Gains and I							
10	Ordinary gains and losses not includ	ed on lines 11 th	rough 16 (includ	de property held 1	year or less):	10		
11	Loss, if any, from line 7						11	()
12	Gain, if any, from line 7 or amount fro	m line 8, if applic	able				12	
13	Gain, if any, from line 31						13	
	Net gain or (loss) from Form 4684, line						14	
15	Ordinary gain from installment sales f	rom Form 6252,	line 25 or 36				15	
16	Ordinary gain or (loss) from like-kind e	exchanges from F	Form 8824				16	
17	Combine lines 10 through 16						17	
18	For all except individual returns, enter	r the amount fror	n line 17 on the	appropriate line of	your return and sl	kip lines		
	a and b below. For individual returns,	complete lines a	and b below.					
а	If the loss on line 11 includes a loss fr	om Form 4684,	line 35, column	(b)(ii), enter that pa	rt of the loss here.	Enter the	15	
	loss from income-producing property	on Schedule A (Form 1040), line	16. (Do not includ	e any loss on prop	erty used		
	as an employee.) Identify as from "Fo	rm 4797, line 18:	a." See instructi	ons			18a	
b	Redetermine the gain or (loss) on line	17 excluding the	e loss, if any, on	line 18a. Enter her	e and on Schedul	e 1		
	(Form 1040), Part I, line 4						18b	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2023)

THE COMMUNITY FOUNDATION FOR 59-6150746 Page 2 Form 4797 (2023) NORTHEAST FLORIDA, INC. Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions) (c) Date sold (b) Date acquired (a) Description of section 1245, 1250, 1252, 1254, or 1255 property: (mo., day, yr.) (mo., day, yr.) В C D These columns relate to the properties on **Property D** Property C Property A Property B lines 19A through 19D. 20 Gross sales price (Note: See line 1a before completing.) 20 Cost or other basis plus expense of sale 21 21 22 Depreciation (or depletion) allowed or allowable ... Adjusted basis. Subtract line 22 from line 21 23 24 Total gain. Subtract line 23 from line 20 If section 1245 property: 25a a Depreciation allowed or allowable from line 22 ... 25b **b** Enter the **smaller** of line 24 or 25a If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291. 26a a Additional depreciation after 1975. See instructions b Applicable percentage multiplied by the smaller 26b of line 24 or line 26a. See instructions c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip 26c lines 26d and 26e 26d d Additional depreciation after 1969 and before 1976 26e e Enter the smaller of line 26c or 26d 26f f Section 291 amount (corporations only) g Add lines 26b, 26e, and 26f 26g If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership. 27a a Soil, water, and land clearing expenses b Line 27a multiplied by applicable percentage 27b 27c c Enter the smaller of line 24 or 27b If section 1254 property: a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, 28a mining exploration costs, and depletion. See instructions 28b b Enter the smaller of line 24 or 28a If section 1255 property: a Applicable percentage of payments excluded

29b Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

29a

from income under section 126. See instructions b Enter the smaller of line 24 or 29a. See instructions

	Total gains for all properties. Add property columns A through D, line 24	30	
30	Total gains for all properties. Add property columns A through 5, line 2.		
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion		
	from other than casualty or theft on Form 4797. line 6	32	

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less

	(see instructions)			
			(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33		
	Recomputed depreciation. See instructions	34		
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35		Faura 4797 (2022)

318012 12-27-23

Form **4/9/** (2023)

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

NORTHEAST

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

THE COMMUNITY FOUNDATION FOR

INC.

FLORIDA,

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

B Employer identification number

59-6150746

c (Unrelated business activity code (see instructions) 52300	0		D Sequen	ce: 2	of 2
E [Describe the unrelated trade or business INVESTMENTS	IN S	CORPORATION	S		
Pa			(A) Income	(B) Expens	ses	(C) Net
1a	Gross receipts or sales					
b	Less returns and allowancesc Balance	1c			1911	Summer States
2	Cost of goods sold (Part III, line 8)	2		The last		
3	Gross profit. Subtract line 2 from line 1c	3				
4 a	Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	4a	4,362.			4,362.
1.	1120)). See instructions Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b		Maria Compa	ukita.	
b		4c			A. 1845.	
- C	Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach	10		(Op. 15)		
5	statement) STATEMENT 8	5	446,314.			446,314.
6	Rent income (Part IV)	6				
7	Unrelated debt-financed income (Part V)	7				
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Part VI)	8				
9	Investment income of section 501(c)(7), (9), or (17)					
	organizations (Part VII)	9				
10	Exploited exempt activity income (Part VIII)	10				
11	Advertising income (Part IX)	11		See N. C.	STEEL BOOK	
12	Other income (see instructions; attach statement)	12	150 676			450,676.
<u>13</u>	Total. Combine lines 3 through 12	13	450,676.			
Pa	Deductions Not Taken Elsewhere. See instruct directly connected with the unrelated business in	come				
1	Compensation of officers, directors, and trustees (Part X)				1	3,359.
2	Salaries and wages				2	
3	Repairs and maintenance					
4	Bad debts				4	
5	Interest (attach statement). See instructions				5	100
6	Taxes and licenses				6	180.
7	Depreciation (attach Form 4562). See instructions				100.00	
8	Less depreciation claimed in Part III and elsewhere on return		8a		8b	
9	Depletion				9	
10	Contributions to deferred compensation plans			,	10	160
11	Employee benefit programs				11	469.
12	Excess exempt expenses (Part VIII)				12	
13	Excess readership costs (Part IX)				13	
14	Other deductions (attach statement)		SEE STATE	EMENT 9	14	4.
15	Total deductions. Add lines 1 through 14				15	4,012.
16	Unrelated business income before net operating loss deduction. S					110 001
	column (C)				16	446,664.
17	Deduction for net operating loss. See instructions				17	0.
18	Unrelated business taxable income. Subtract line 17 from line 1	6			18	446,664.
Eau I	Paperwork Reduction Act Notice, see instructions.				Schedule /	A (Form 990-T) 2023

For Paperwork Reduction Act Notice, see instructions.

chedule	A (Form 990-T) 2023						Page
art III		hod of inventory valuation	n				
1 In	ventory at beginning of year				1		
2 P	urchases				2		
	ost of labor				3		
4 A	dditional section 263A costs (attach statement)				4		-
5 O	ther costs (attach statement)				5		
6 T e	otal. Add lines 1 through 5				6		_
7 In	ventory at end of year				7		
в С	ost of goods sold. Subtract line 7 from line 6. Enter	here and in Part I, line 2			8	7., F	7
9 D	the rules of section 263A (with respect to property	produced or acquired for	resale) apply to the o	rganization?		Yes	No
art IV	Rent Income (From Real Property and	l Personal Propert	y Leased With Re	eal Propert	y)		
1 D	rescription of property (property street address, city, s	state, ZIP code). Check if	a dual-use. See instru	ctions.			
Α	1						
В							
C							
D							
_		A	В	С		D	
2 R	ent received or accrued						
	rom personal property (if the percentage of						
	ent for personal property (if the percentage of						
	ut not more than 50%)						
	rom real and personal property (if the						
	ercentage of rent for personal property exceeds						
	0% or if the rent is based on profit or income)						
	otal rents received or accrued by property.						
A	dd lines 2a and 2b, columns A through D						
	otal deductions. Add line 4, columns A through D. E	nter here and on Part I, I	ne 6, column (B)				0
art V	Unrelated Debt-Financed Income (s						
1 D	escription of debt-financed property (street address,	city, state, ZIP code). Ch	eck if a dual-use. See	instructions.			
A							
В							
C	;						_
D							
		Α	В	С		D	
	ross income from or allocable to debt-financed						
	roperty						
3 D							
, 0	eductions directly connected with or allocable						
	eductions directly connected with or allocable o debt-financed property						
to	•						
to a S	debt-financed property						
to a S b O	o debt-financed property traight line depreciation (attach statement)						
to a S ² b O c To	o debt-financed property traight line depreciation (attach statement) other deductions (attach statement) otal deductions (add lines 3a and 3b,						
to a Si b O c To	o debt-financed property traight line depreciation (attach statement) other deductions (attach statement) otal deductions (add lines 3a and 3b, olumns A through D)						
to a S ² b O c Te co	o debt-financed property ctraight line depreciation (attach statement) other deductions (attach statement) otal deductions (add lines 3a and 3b, olumns A through D)						
to a Si b O c To co A	o debt-financed property ctraight line depreciation (attach statement) other deductions (attach statement) otal deductions (add lines 3a and 3b, columns A through D) cmount of average acquisition debt on or allocable odebt-financed property (attach statement)						
a Sib O C To Co Co A	o debt-financed property itraight line depreciation (attach statement) ither deductions (attach statement) iotal deductions (add lines 3a and 3b, iolumns A through D) imount of average acquisition debt on or allocable o debt-financed property (attach statement) iverage adjusted basis of or allocable to debt-						
a Sib O C To CO A A fin	o debt-financed property itraight line depreciation (attach statement) itraight line depreciation (attach statement) ither deductions (attach statement) iotal deductions (add lines 3a and 3b, iolumns A through D) imount of average acquisition debt on or allocable io debt-financed property (attach statement) inverage adjusted basis of or allocable to debt- inanced property (attach statement)		%		%		
to a S'b O C C C C C C C C C C C C C C C C C C	o debt-financed property itraight line depreciation (attach statement) other deductions (attach statement) otal deductions (add lines 3a and 3b, olumns A through D) imount of average acquisition debt on or allocable o debt-financed property (attach statement) iverage adjusted basis of or allocable to debt- nanced property (attach statement) ivide line 4 by line 5	96	%		%		
to a S'b O C C C C C C C C C C C C C C C C C C	o debt-financed property itraight line depreciation (attach statement) other deductions (attach statement) otal deductions (add lines 3a and 3b, olumns A through D) imount of average acquisition debt on or allocable o debt-financed property (attach statement) iverage adjusted basis of or allocable to debt- nanced property (attach statement) ivide line 4 by line 5	9%					
to a S S b O C T C C C C C C C C S S A S S S S S S S S S	o debt-financed property itraight line depreciation (attach statement) other deductions (attach statement) otal deductions (add lines 3a and 3b, olumns A through D) imount of average acquisition debt on or allocable o debt-financed property (attach statement) iverage adjusted basis of or allocable to debt- nanced property (attach statement) ivide line 4 by line 5	9%					9
a Sib O C C To C C C C C C C C C C C C C C C C	o debt-financed property itraight line depreciation (attach statement) other deductions (attach statement) otal deductions (add lines 3a and 3b, olumns A through D) amount of average acquisition debt on or allocable o debt-financed property (attach statement) average adjusted basis of or allocable to debt- nanced property (attach statement) olivide line 4 by line 5 aross income reportable. Multiply line 2 by line 6 arotal gross income (add line 7, columns A through D	9%					0.
to a Si b O c To cool to	o debt-financed property itraight line depreciation (attach statement) other deductions (attach statement) otal deductions (add lines 3a and 3b, olumns A through D) imount of average acquisition debt on or allocable o debt-financed property (attach statement) iverage adjusted basis of or allocable to debt- nanced property (attach statement) ivide line 4 by line 5	%). Enter here and on Part	I, line 7, column (A)				

Part VI Interest, Annu	ities, Re	oyalties, and Re	ents Fro	m Contro	lled O	rganization	S (se	e instruct	ions)	
					Е	xempt Contro	lled Or	ganization	s	
 Name of controlled organization 		2. Employer	3. Net			the first of the standard			Deductions directly	
		identification		ne (loss)	payn	nents made		included ofling orga	niza.	connected with
		number	(see ins	structions)				gross inc		ncome in column 5
(1)										
2)										
3)										
(4)										
				Controlled Or		1			5	I it is a second
7. Taxable Income		Net unrelated	1	otal of specifi		10. Part of that is income.				eductions directly onnected with
		come (loss)	pa	yments mad	e	controlling			_	me in column 10
	(see	e instructions)				gross	incom	e	IIICO	THE IT COMMITTEE
(1)										
(2)										
3)									-	
4)			l			Add colum		od 10	Add o	columns 6 and 11.
						Enter here				here and on Part I,
						line 8, c			line	e 8, column (B).
								0.		0.
Fotals Investment	ncome	of a Section 50	1(c)(7) (9) or (17)	Organ	nization (s	ee inst	ructions)		
	cription of		.(-)(-), (2. Amour	nt of	3. Deduction	ons	4. Set-		5. Total deductions and set-asides
						(attach stater				(add cols 3 and 4)
(1)										
(2)										
(3) (4)										
7)				Add amou		TOTAL ST	33		No.	Add amounts in
				column 2.						column 5. Enter
				line 9, colu						line 9, column (B).
Totals					0.		3.763	Hide		0.
Part VIII Exploited E	xempt A	ctivity Income,	Other 1	Than Adve	ertising	Income (see ins	tructions)		
Description of exploite	ed activity:									
2 Gross unrelated busin	ess incom	e from trade or busir							2	
3 Expenses directly con	nected wit	h production of unre	elated busi	iness income	. Enter h	nere and on Pa	art I,			
line 10, column (B)									3	
4 Net income (loss) from										
lines 5 through 7									4	
5 Gross income from ac									5	
6 Expenses attributable									6	
7 Excess exempt expen									_	
4. Enter here and on F	art II, line	12							7	- /E 000 T 0000

STATEMENT 8
NET INCOME OR (LOSS)
440,347. 5,967.
446,314.
STATEMENT 9
AMOUNT
4.
4.

FORM 4797	PRO	ERTY HELD	MORE THAN	ONE YEAR	STA	ATEMENT 10
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
LEVEL EQUITY GROWTH PARTNERS I						-4.
NEWBURY EQUITY PARTNERS LP NORTHGATE IV LP PARK STREET						-27. -16.
CAPITAL NATURAL RESOURCE FUN MILL CREEK						81.
PRIVATE EQUITY FUND IV, L.P. MILL CREEK						800.
PRIVATE EQUITY FUND V, L.P.						1,078.
TOTAL TO 4797, PA	RT I, LINE	2				1,912.

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

Yes X No

Name THE COMMUNITY FOUNDATION FOR

NORTHEAST FLORIDA, INC.

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year?

Employer identification number

59-6150746

Part I Short-Term Capital Ga	ine and Losses - Ass	ats Held One Year	orless	_	
Part I Short-Term Capital Ga See instructions for how to figure the amounts					(h) Gain or (loss)
to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss from Form(s) 894		Subtract column (e) from column (d) and combine the
This form may be easier to complete if you	(sales price)	(or other basis)	Part I, line 2, column (g	3)	result with column (g)
round off cents to whole dollars. 1a Totals for all short-term transactions			PARTURN RETRYET	Page 1	
reported on Form 1099-B for which basis					
was reported to the IRS and for which you have no adjustments (see instructions).					
However, if you choose to report all these					
transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked				_	
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked				-	
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked				4	
4 Short-term capital gain from installment sale	s from Form 6252, line 26 or 37			5	
5 Short-term capital gain or (loss) from like-kin				6	()
6 Unused capital loss carryover (attach compu	tation)			7	
7 Net short-term capital gain or (loss). Combin Part II Long-Term Capital Ga	ine and Losses - Asse	ts Held More Tha	n One Year		
See instructions for how to figure the amounts					(h) Gain or (loss)
to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss from Form(s) 894	9,	Subtract column (e) from column (d) and combine the
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Part II, line 2, column (3)	result with column (g)
8a Totals for all long-term transactions reported					
on Form 1099-B for which basis was reported to the IRS and for which you have					
no adjustments (see instructions). However,					
if you choose to report all these transactions on Form 8949, leave this line blank and go to					
line 8b	-				
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked	-				
9 Totals for all transactions reported on					
Form(s) 8949 with Box E checked 10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked					
				11	4,362.
12 Long-term capital gain from installment sale	s from Form 6252, line 26 or 37			12	
13 Long-term capital gain or (loss) from like-kii	nd exchanges from Form 8824			13	
				14	1 0.50
15 Net long-term capital gain or (loss). Combin	ne lines 8a through 14 in column	h		15	4,362.
Part III Summary of Parts I an	d II			_	
16 Enter excess of net short-term capital gain (I	ine 7) over net long-term capital	loss (line 15)		16	1 262
17 Net capital gain. Enter excess of net long-ter				17	4,362.
40 Add lines 16 and 17 Enter here and on Form	1120 page 1 line 8 or the app	licable line on other return	ns .	18	4,304.

For Paperwork Reduction Act Notice, see the Instructions for Form 1120. LHA

Note: If losses exceed gains, see Capital Losses in the instructions.

Schedule D (Form 1120) 2023

Form **4797**

Department of the Treasury Internal Revenue Service

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

ler Sections 179 and 280F(b)(2))

Attach to your tax return.

Attach to your tax return.

Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

Attachment 27

Identifying number Name(s) shown on return THE COMMUNITY FOUNDATION FOR 59-6150746 NORTHEAST FLORIDA, INC. 1a Enter the gross proceeds from sales or exchanges reported to you for 2023 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 1a b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of 1b MACRS assets c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (e) Depreciation (f) Cost or other (g) Gain or (loss) (d) Gross sales (C) Date sold (a) Description (b) Date acquired allowed or basis, plus Subtract (f) from the 2 improvements and allowable since (mo., day, vr.) (mo., day, yr.) sum of (d) and (e) expense of sale acquisition 4,362. SRA/BUILDING 051 CORP 3 Gain, if any, from Form 4684, line 39 4 Section 1231 gain from installment sales from Form 6252, line 26 or 37 5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 6 Gain, if any, from line 32, from other than casualty or theft 6 4,362. Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Nonrecaptured net section 1231 losses from prior years. See instructions Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term 4,362. capital gain on the Schedule D filed with your return. See instructions Part II Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): 11 Loss, if any, from line 7 12 Gain, if any, from line 7 or amount from line 8, if applicable 12 13 Gain, if any, from line 31 13 14 Net gain or (loss) from Form 4684, lines 31 and 38a 14 15 Ordinary gain from installment sales from Form 6252, line 25 or 36 16 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 17 Combine lines 10 through 16 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below. a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used 18a as an employee.) Identify as from "Form 4797, line 18a." See instructions b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 18b (Form 1040), Part I, line 4

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Form **4797** (2023)

LHA For Paperwork Reduction Act Notice, see separate instructions.

59-6150746 Page 2 Form 4797 (2023) NORTHEAST FLORIDA, INC. Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions) (c) Date sold (b) Date acquired (a) Description of section 1245, 1250, 1252, 1254, or 1255 property: (mo., day, yr.) (mo., day, yr.) В C D These columns relate to the properties on Property D Property C Property B **Property A** lines 19A through 19D. 20 Gross sales price (Note: See line 1a before completing.) 20 Cost or other basis plus expense of sale 21 21 22 Depreciation (or depletion) allowed or allowable ... 22 Adjusted basis. Subtract line 22 from line 21 23 24 Total gain. Subtract line 23 from line 20 If section 1245 property: a Depreciation allowed or allowable from line 22 **2**5a 25b b Enter the smaller of line 24 or 25a If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291. 26a a Additional depreciation after 1975. See instructions b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions 26b c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip 26c lines 26d and 26e 26d d Additional depreciation after 1969 and before 1976 26e e Enter the smaller of line 26c or 26d 26f f Section 291 amount (corporations only) 26g g Add lines 26b, 26e, and 26f If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership. a Soil, water, and land clearing expenses 27a **b** Line 27a multiplied by applicable percentage 27b 27c c Enter the smaller of line 24 or 27b If section 1254 property: a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, 28a mining exploration costs, and depletion. See instructions b Enter the smaller of line 24 or 28a 28b If section 1255 property: a Applicable percentage of payments excluded 29a from income under section 126. See instructions 29b b Enter the smaller of line 24 or 29a. See instructions Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30. 30 Total gains for all properties. Add property columns A through D, line 24 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6 Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (see instructions) (b) Section (a) Section 280F(b)(2) 179 33 Section 179 expense deduction or depreciation allowable in prior years 34 Recomputed depreciation. See instructions

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