Form	990-T	E	Exempt Organization Business Income Tax Return	L	OMB No. 1545-0047
			(and proxy tax under section 6033(e))		0004
		For ca	endar year 2024 or other tax year beginning, and ending	_ ·	2024
	nent of the Treasury Revenue Service	D	Go to www.irs.gov/Form990T for instructions and the latest information. o not enter SSN numbers on this form as it may be made public if your organization is an 501(c)(3).		Open to Public Inspection for 501(c)(3) Organizations Only
A	Check box if address changed.		THE COMMUNITY FOUNDATION FOR		oloyer identification number
	mpt under section	1	NORTHEAST FLORIDA, INC.		9-6150746 up exemption number
=	501( <b>c</b> )( <b>3</b> ) 408(e) 220(e)	or Type	Number, street, and room or suite no. If a P.O. box, see instructions.  245 RIVERSIDE AVENUE, 310		instructions)
=	408A 530(a) 529(a) 529A		City or town, state or province, country, and ZIP or foreign postal code  JACKSONVILLE, FL 32202	F _	Check box if
		С Во	ok value of all assets at end of year		an amended return.
<b>G</b> CI	neck organization t	type	X 501(c) corporation 501(c) trust 401(a) trust Other trust 6417(d)(1)(A) Applicable entity	State	college/university
H C	neck if filing only to	o claim	Credit from Form 8941 Refund shown on Form 2439 Elective paymen	t amo	unt from Form 3800
I C	neck if a 501(c)(3)	organiz	ation filing a consolidated return with a 501(c)(2) titleholding corporation		
			ed Schedules A (Form 990-T)		2
	•		e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? d identifying number of the parent corporation		Yes X No
L Th	ne books are in car	re of	GRACE M. SACERDOTE, CPA, EVP/CFO Telephone number 9	04-	356-4483
Pari			d Business Taxable Income ess taxable income computed from all unrelated trades or businesses (see instructions)	1	661,134.
2				2	002,2020
3				3	661,134.
4	Charitable contrib	outions	(see instructions for limitation rules) STMT 1 STMT 2	4	66,013.
5			s taxable income before net operating losses. Subtract line 4 from line 3	5	595,121.
6			ring loss. See instructions	6	-
7	Total of unrelated	d busine	ess taxable income before specific deduction and section 199A deduction.		
	Subtract line 6 fro	om line	5	7	595,121.
8	Specific deductio	on (gene	erally \$1,000, but see instructions for exceptions)	8	1,000.
9	Trusts. Section 1	199A de	eduction. See instructions	9	
10	Total deductions	s. Add	lines 8 and 9	10	1,000.
11			able income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	594,121.
Par	t II Tax Com				104 565
1			as corporations. Multiply Part I, line 11 by 21% (0.21)	1	124,765.
2			rates. See instructions for tax computation. Income tax on the amount on		
			Tax rate schedule or Schedule D (Form 1041)	2	
3	Proxy tax. See in			3	
4a			i, Part I , line 3, column (q)	4a	
b			instructions	4b	
5 6	Tax on noncomm	ium tax	sailitu inaama. Coo inatrustiona	5 6	
7			acility income. See instructions  the 6 to line 1 or 2, whichever applies	7	124,765.
Par				,	12177031
1a	Foreign tax credit	t (corpo	orations attach Form 1118; trusts attach Form 1116)		
b	Other credits (see	e instru	ctions) 1b		
С			Attach Form 3800 (see instructions)		
d			mum tax (attach Form 8801 or 8827)		
е	Total credits. Ad	d lines	1a through 1d	1e	101 = 1=
2			rt II, line 7	2	124,765.
3a			is, Part I, line 3, column (r) (see instructions)		
b	Amount due from				
С	Amount due from				
d	Amount due from				
e	Other amounts do	•			^
f 4			lines 3a through 3e	3f	0.
4			nd 3f (see instructions).	4	124,765.



Department of the Treasury Internal Revenue Service Ogden, UT 84201-0074 Tax period December 31, 2024

Notice date June 2, 2025

Employer ID number 59-6150746

To contact us Phone 877-829-5500

Page 1 of 1

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162856.674692.485816.27132 1 AB 0.593 372



THE COMMUNITY FOUNDATION FOR % GRACE SACERDOTE 245 RIVERSIDE AVE STE 310 JACKSONVILLE FL 32202-4945

162856

Important information about your December 31, 2024, Form 990T

# We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans.

We approved the Form 8868 for your December 31, 2024, Form 990T, Exempt Organization Business Income Tax Return. Your due date is now November 15, 2025.

#### What you need to do

File your December 31, 2024, Form 990T by November 15, 2025, electronically. The IRS will not accept Form 990T filed on paper. For more information, see <a href="https://linear.org/length/linear.gov/eoefile">IRS.gov/eoefile</a>.

You can find available tax return filing software at IRS.gov/eomefproviders.

#### Additional information

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

Form 9									age 2
Part		Tax and Payments (continued)				T-T		_	0.
5		nt net 965 tax liability paid from Form 965				5		_	
6 a	Paym	ents: Preceding year's overpayment cred	ited to the current year	6a					
b		nt year's estimated tax payments. Check		—  <u>.</u> .	157,000.				
		s		6b	157,000.				
c	Tax d	eposited with Form 8868		6c					
d		n organizations: Tax paid or withheld at							
е	Backu	p withholding (see instructions)		6e					
f		for small employer health insurance prei							
g		e payment election amount from Form 3							
h	-	ent from Form 2439							
i		from Form 4136							
j	Other	(see instructions)				7	157	0	00.
7	Total	payments. Add lines 6a through 6j	7.5 0000 :			8			
8	Estim	ated tax penalty (see instructions). Check	If Form 2220 is attached			9			
9	Tax d	ue. If line 7 is smaller than the total of line	es 4, 5, and 6, enter amount owed			10	32	, 2:	35.
10	Overp	ayment. If line 7 is larger than the total of	of lines 4, 5, and 6, enter amount ove	32,2	35 Refunded	11			0.
11 Down	- 10	the amount of line 10 you want: Credited Statements Regarding Certain	Activities and Other Informa	ation (se					
Part		time during the 2024 calendar year, did						Yes	No
1	At any	rtime during the 2024 calendar year, did financial account (bank, securities, or ot	her) in a foreign country? If "Yes " th	e organiza	tion may have to file				
	over a	N Form 114, Report of Foreign Bank and	Financial Accounts If "Yes " enter t	he name o	f the foreign country		1		
	_	N Form 114, Report of Foreign Bank and	Triancial / toocartes. In 100, ortes		,				X
	here	the tax year, did the organization receiv	e a distribution from or was it the or	antor of, o	r transferor to, a				
2		n trust?					L		X_
	toreig	s," see instructions for other forms the or	ganization may have to file.						
		the amount of tax-exempt interest receive			\$				
3		available pre-2018 NOL carryovers here	\$ Do no	t include a	ny post-2017 NOL car	ryover			
4	chove	n on Schedule A (Form 990-T). Don't redu	ice the NOL carryover shown here by	y any dedu	ction reported on Part	I, line 6.			
5	Doct-0	2017 NOL carryovers. Enter the Business	Activity Code and available post-20	17 NOL cai	rryovers. Don't reduce			- =	
3	the ar	nounts shown below by any NOL claimed	d on any Schedule A, Part II, line 17 f	for the tax	year. See instructions.				
	tile ai	Business Activity Co		Ava	ilable post-2017 NOL	carryover			
		523		\$	6	49,08	37.	- 1	
				\$					
				\$				- 1	
				\$					
6 a	Reser	ved for future use							
		ved for future use							
Part	V	Supplemental Information							
Provide	anv a	dditional information. See instructions.							
						halia	f it in trun		
	Ur	der penaties of perjury, I declare that I have examined rrect, and complete. Declaration of prepare follow than	this return, including accompanying schedules an taxpayer) is based on all information of which pre	nd statements, eparer has any	knowledge.	ige and bene	1, 11 13 1 40,		
Sign	00	- this is the	EXECU	LIVE	Ma	ay the IRS dis			ith
Here		NI Parus W		EASUR		e preparer sh structions)?	and an artist of	(see	No I
	Si	gnature of officer				_	163	- 1	140
		Print/Type preparer's name	Preparer's signature	Date	Check i	f PTIN			
Paid					self-employed				
Prepa	rer				F11 - F181		_	_	
Use C		Firm's name			Firm's EIN				
- , •	-				Phone no.				
		Firm's address			Lugue no.	F	orm 99	0-T	2024)
								,	

#### Form 8879-TE

## IRS E-file Signature Authorization for a Tax Exempt Entity

2024, and	ending	, 20

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information.

THE COMMUNITY FOUNDATION FOR Name of filer NORTHEAST FLORIDA,

For calendar year 2024, or fiscal year beginning

INC.

GRACE SACERDOTE EXECUTIVE VP/TREASURER

**EIN or SSN** 

59-6150746

Part I Type of Return and Return Inform
---

Name and title of officer or person subject to tax

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.

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	
3a	Form 1120-POL check here		b	Total tax (Form 1120-POL, line 22)	***************************************	3b	
4a	Form 990-PF check here		b	Tax based on investment income (Form 990-PF, Part V, line 5	)	4b _	
5a	Form 8868 check here		b	Balance due (Form 8868, line 3c)		5b	
6a	Form 990-T check here	X		Total tax (Form 990-T, Part III, line 4)		6b _	124,765.
7a	Form 4720 check here		b	Total tax (Form 4720, Part III, line 1)	***************************************	7b _	
8a	Form 5227 check here		b	FMV of assets at end of tax year (Form 5227, Item D)		8b	
9a	Form 5330 check here		b	Tax due (Form 5330, Part II, line 19)		9b	
10a	Form 8038-CP check here			Amount of credit payment requested (Form 8038-CP, Part III,		10b	
Part	Part II Declaration and Signature Authorization of Officer or Person Subject to Tax						
Under	penalties of perjury, I declare that	at X	l an	n an officer of the above entity or I am a person subject to	tax with respe	ect to (	name
of entity	y)			, (EIN) an	d that I have e	examir	ned a copy of the

2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and 2024 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.

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

X	Lauthoriza	CRT	ADVISORS.	T.T.C

to enter my PIN

32256

ERO firm name

Enter five numbers, but do not enter all zeros

as my signature on the tax year 2024 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 2024 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.

Signature of officer or person subject to tax

Part III | Certification and Authentication

number (EFIN) followed by your five-digit self-selected PIN.

ERO's EFIN/PIN. Enter your six-digit electronic filing identification

50571436331

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2024 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

CRI ADVISORS, LLC

Date

**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 (2024)

FORM 990-T	CONTRIBUTIONS	STATEMENT 1		
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT		
VARIOUS	N/A	66,013.		
TOTAL TO FORM 990-T, PART I, L	INE 4	66,013.		

FORM 990-T	CONTRIBUTIONS SUMMARY		STATEMENT 2
QUALIFIED CONTRIBUTIONS QUALIFIED CONTRIBUTIONS			
CARRYOVER OF PRIOR YEARS FOR TAX YEAR 2019 FOR TAX YEAR 2020 FOR TAX YEAR 2021 FOR TAX YEAR 2022 FOR TAX YEAR 2023	S UNUSED CONTRIBUTIONS		
TOTAL CARRYOVER TOTAL CURRENT YEAR 10% (	CONTRIBUTIONS	66,013	
	TOTAL CONTRIBUTIONS AVAILABLE TAXABLE INCOME LIMITATION AS ADJUSTED		
EXCESS CONTRIBUTIONS EXCESS 100% CONTRIBUTION TOTAL EXCESS CONTRIBUTION		0 0 0	_
ALLOWABLE CONTRIBUTIONS	DEDUCTION		66,013
TOTAL CONTRIBUTION DEDUC	CTION		66,013

#### SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

THE COMMUNITY FOUNDATION FOR

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

2024

Name

Employer identification number

NORTHEAST FLORIDA,	INC.			59-	6150746
Did the corporation dispose of any investment of "Yes," attach Form 8949 and see its instruction.					Yes X No
Part I Short-Term Capital Gai	ins and Losses - Ass	ets Held One Year	or Less		
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 ga or loss from Form(s) 89 Part I, line 2, column	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (d)
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					Tocal Mar osial Margaret
<b>1b</b> Totals for all transactions reported on					
Form(s) 8949 with <b>Box A</b> checked					
2 Totals for all transactions reported on					
Form(s) 8949 with <b>Box B</b> checked					
3 Totals for all transactions reported on					
Form(s) 8949 with <b>Box C</b> checked					-195.
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 37	,		4	
5 Short-term capital gain or (loss) from like-kind	d exchanges from Form 8824			5	
6 Unused capital loss carryover (attach computa	ation)			6	(
7 Net short-term capital gain or (loss). Combine	e lines 1a through 6 in column	h		7	-195.
Part II Long-Term Capital Gain	ns and Losses - Ass	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 ga or loss from Form(s) 89 Part II, line 2, column	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
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	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	49,	Subtract column (e) from column (d) and combine the
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.  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	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	49,	Subtract column (e) from column (d) and combine the
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.  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	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	49,	Subtract column (e) from column (d) and combine the
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.  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	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	49,	Subtract column (e) from column (d) and combine the
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.  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	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	49,	Subtract column (e) from column (d) and combine the
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.  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	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	49,	Subtract column (e) from column (d) and combine the
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.  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	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	(g)	Subtract column (e) from column (d) and combine the result with column (g)
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.  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 Enter gain from Form 4797, line 7 or 9	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	49,	Subtract column (e) from column (d) and combine the result with column (g)
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.  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 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sales	(d) Proceeds (sales price)  from Form 6252, line 26 or 37	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	11	Subtract column (e) from column (d) and combine the result with column (g)
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.  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 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sales  13 Long-term capital gain or (loss) from like-kind	(d) Proceeds (sales price)  from Form 6252, line 26 or 37 d exchanges from Form 8824	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	11 12 13	Subtract column (e) from column (d) and combine the result with column (g)
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.  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 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sales 13 Long-term capital gain or (loss) from like-king	(d) Proceeds (sales price)  from Form 6252, line 26 or 37 d exchanges from Form 8824	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	11 12	Subtract column (e) from column (d) and combine the result with column (g)
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.  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 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sales  13 Long-term capital gain or (loss) from like-kind	(d) Proceeds (sales price)  from Form 6252, line 26 or 37 d exchanges from Form 8824	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	11 12 13	Subtract column (e) from column (d) and combine the result with column (g)
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.  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 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sales 13 Long-term capital gain or (loss) from like-king 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combine	(d) Proceeds (sales price)  from Form 6252, line 26 or 37d exchanges from Form 8824	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	11 12 13	Subtract column (e) from column (d) and combine the result with column (g)
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.  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 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sales 13 Long-term capital gain or (loss) from like-king 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combine	(d) Proceeds (sales price)  from Form 6252, line 26 or 37 d exchanges from Form 8824 et lines 8a through 14 in column 11 II	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	11 12 13 14 15	Subtract column (e) from column (d) and combine the result with column (g)

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

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

Schedule D (Form 1120) 2024

# Form **8949**Department of the Treasury

Internal Revenue Service

Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No. 1545-0074
2024

Attachment

Name(s) shown on return

THE COMMUNITY FOUNDATION FOR NORTHEAST FLORIDA, INC.

Social security number or taxpayer identification no.

59-6150746

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part | Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2. Note: You may aggregate all short-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 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-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 (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS X (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or 1 (d) (h) (c) (e) loss. If you enter an amount Proceeds Description of property Date sold or Cost or other Gain or (loss). Date acquired in column (g), enter a code in (sales price) Subtract column (e) basis. See the (Example: 100 sh. XYZ Co.) (Mo., day, yr.) disposed of column (f). See instructions. Note below and from column (d) & (Mo., day, yr.) (g) Amount of see *Column (e*) ir combine the result Code(s) with column (g) the instructions adjustment MILL CREEK PRIVATE EQUITY FUND IV, <112 L.P. MILL CREEK PRIVATE EQUITY FUND V, 198. TIFF DIVERSIFYING STRATEGIES FUND <281.> 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked)

**Note:** If you checked Box A 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.

23011 12-18-24 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2024)

73-00405

Attachment Sequence No. 12A

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

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

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 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 Cabadula D. line Sarviou aren't required to report these transactions on Form 8949 (see instructions). 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)

(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

X (F) Long-term transactions not	reported to you	on Form 1099-B	1				
1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis. See the	loss. If you	nt, if any, to gain or ou enter an amount (g), enter a code in ). See instructions.	(h) Gain or (loss). Subtract column (e)
		(Mo., day, yr.)		Note below and see Column (e) in the instructions	(f) Code(s)	(g) Amount of adjustment	from column (d) & combine the result with column (g)
NEWBURY EQUITY							
PARTNERS LP							<26.>
NORTHGATE V LP							270.
MILL CREEK PRIVATE							
EQUITY FUND IV,							
L.P.							1,364.
MILL CREEK PRIVATE							
EQUITY FUND V,							
L.P.							238.
TIFF DIVERSIFYING							
STRATEGIES FUND,							
LP							<936.>
-							
-							
-							
-							-
				+			
				1			
-							<del>                                     </del>
							<del>                                     </del>
O Tatala Add the assessment in		 					<del>                                     </del>
2 Totals. Add the amounts in colur		. , .					
negative amounts). Enter each to		-					
Schedule D, line 8b (if Box D abo	• •	•					910.
above is checked), or line 10 (if E	<b>sox F</b> above is ch	necked)		1		I	) JIU.

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** (2024)

Department of the Treasury Internal Revenue Service

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

Attach to your tax return.

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

OMB No. 1545-0184

		TON FOR					lae	ntifying number
	E COMMUNITY FOUNDAT RTHEAST FLORIDA, IN							59-6150746
	Enter the gross proceeds from sales		ported to you for	2024 on Form(s)	1099-B or 1099-S			0130740
	(or substitute statement) that you are		•				1a	
b	Enter the total amount of gain that y		•					
	MACRS assets							
С	c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS							
	assets						1c	
Pa	rt I Sales or Exchanges of					-	sions	s From Other
	Than Casualty or Thef	T-Most Prope	гту неіа мо	re inan 1 Yea	1	·		Γ
2	(a) Description	(b) Date acquired	(C) Date sold	(d) Gross sales	(e) Depreciation allowed or	(f) Cost or on the basis, plu		(g) Gain or (loss)
αт	of property	(mo., day, yr.)	(mo., day, yr.)	price	allowable since acquisition	improvements expense of		Subtract (f) from the sum of (d) and (e)
SI	EE STATEMENT 11				aoquionion	охропос от	Juio	
3	Gain, if any, from Form 4684, line 39	)		1			3	
4	Section 1231 gain from installment						4	
5	Section 1231 gain or (loss) from like						5	
6	Gain, if any, from line 32, from other						6	
7	Combine lines 2 through 6. Enter the	e gain or (loss) her					7	-701.
	Partnerships and S corporations.	Report the gain or	r (loss) following	the instructions for	or Form 1065, Sche	edule K,		
	line 10, or Form 1120-S, Schedule K	, line 9. Skip lines	8, 9, 11, and 12	2 below.				
	Individuals, partners, S corporatio							
	from line 7 on line 11 below and skip		-	•				
	1231 losses, or they were recapture the Schedule D filed with your return	•			ng-term capitai gali	n on		
							_	
8	Nonrecaptured net section 1231 los	•					8	
9	Subtract line 8 from line 7. If zero or line 9 is more than zero, enter the ar							
	capital gain on the Schedule D filed			ŭ	ii iioiii iiile 9 as a id	ong-term	9	
							9	
Pa	rt II Ordinary Gains and	Losses (see in:	structions)					
10	Ordinary gains and losses not inclu	ded on lines 11 th	rough 16 (inclu	de property held 1	year or less):			
11							11	( 701.)
12	Gain, if any, from line 7 or amount fr						12	
13	Gain, if any, from line 31						13	
14	Net gain or (loss) from Form 4684, li						14	
15	Ordinary gain from installment sales						15	
16	Ordinary gain or (loss) from like-kind						16	-701.
17					from rations and al		17	-701.
18	For all except individual returns, enter a and b below. For individual returns			appropriate line of	i your return and Sh	up iiries		
9	If the loss on line 11 includes a loss	•		(h)(ii) enter that no	art of the loss here	Enter the		
a	loss from income-producing propert	•	•					
	as an employee.) Identify as from "F						18a	
b	Redetermine the gain or (loss) on lin							
		•					18b	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2024)

Forr	m 4797 (2024) NORTHEAST FLORIDA,	INC.				59-615	0746	6 Page <b>2</b>
Pa	rt III Gain From Disposition of Propert	ty Und	er Sections 1245	, 1250, 1252	2, 125	54, and 1255	(see	instructions)
19	(a) Description of section 1245, 1250, 1252, 1254, o	or 1255	property:			(b) Date acquir (mo., day, yr.		(c) Date sold (mo., day, yr.)
_A								
<u>B</u>								
_ <u>C</u>								
_ <u>D</u>								
	These columns relate to the properties on lines 19A through 19D.		Property A	Property	В	Property	С	Property D
20	Gross sales price ( <b>Note:</b> See line 1a before completing.)	20	,			,		
21	Cost or other basis plus expense of sale	21						
22	Depreciation (or depletion) allowed or allowable	22						
23	Adjusted basis. Subtract line 22 from line 21	23						
24	Total gain. Subtract line 23 from line 20	24						
25	If section 1245 property:							
	Depreciation allowed or allowable from line 22	25a						
	Enter the <b>smaller</b> of line 24 or 25a	25b						
26	If section 1250 property: If straight line depreciation	200						
20	was used, enter -0- on line 26g, except for a corporation subject to section 291.							
-	Additional depreciation after 1975. See instructions	26a						
		200						
I.	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 <b>or</b> line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
	Additional depreciation after 1969 and before 1976	26d						
	Enter the <b>smaller</b> of line 26c or 26d	26e						
-	Eliter the <b>Smaller</b> of line 200 of 200	200						
_	Costion 201 amount (cornerations only)	26f						
	Section 291 amount (corporations only)  Add lines 26b, 26e, and 26f	26g						
	If section 1252 property: Skip this section if you didn't	20g						
	dispose of farmland or if this form is being completed for a partnership.							
	Soil, water, and land clearing expenses	27a						
	Line 27a multiplied by applicable percentage	27b						
	Enter the smaller of line 24 or 27b	27c						
	If section 1254 property: Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
	Enter the smaller of line 24 or 28a	28b						
	If section 1255 property: Applicable percentage of payments excluded from income under section 126. See instructions	29a						
b	Enter the <b>smaller</b> of line 24 or 29a. See instructions	29b						
Su	mmary of Part III Gains. Complete property of	columns	A through D through	ine 29b before	going	to line 30.		
30	Total gains for all properties. Add property columns	A throu	ıgh D, line 24				30	
31	Add property columns A through D, lines 25b, 26g,						31	
32	Subtract line 31 from line 30. Enter the portion from		ty or theft on Form 468	34, line 33. Ente	er the	portion		
Dr	from other than casualty or theft on Form 4797, line Irt IV Recapture Amounts Under Section	6	0 and 280E/h)/2) \	Nhon Busin		Ico Drone to	32 50%	orloss
ГС	(see instructions)	)115 1 <i>1</i> 3	9 and 2001(b)(2)	Wileli Busili	C33 (	ose Drops to	<b>30</b> /6	OI Less
	(See Instructions)					(a) Section	1	(b) Section
						1/9		280F(b)(2)
33	Section 179 expense deduction or depreciation allo				33		$\longrightarrow$	
34					34		$\longrightarrow$	
<u>35</u>	Recapture amount. Subtract line 34 from line 33. Se	<u>ee the in</u>	<u>istructions for where to </u>	o report	35			

Form **4797** (2024)

FORM 4797	PRO	PERTY HELI	MORE THAN	ONE YEAR	ST	ATEMENT 11
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
LEVEL EQUITY GROWTH PARTNERS I LP MATERRA LLC NEWBURY EQUITY PARTNERS LP NORTHGATE V LP PARK STREET						-175. -273. 7. -16.
CAPITAL NATURAL RESOURCE FUN						-244.
TOTAL TO 4797, PA	RT I, LINE	2				-701.

#### **SCHEDULE A** (Form 990-T)

### **Unrelated Business Taxable Income** From an Unrelated Trade or Business

OMB No. 1545-0047

Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service 501(c)(3) Organizations Only THE COMMUNITY FOUNDATION FOR B Employer identification number Name of the organization NORTHEAST FLORIDA, INC. 59-6150746 523000 Unrelated business activity code (see instructions) **D** Sequence: Describe the unrelated trade or business INVESTMENT IN LIMITED PARTNERSHIP Part I Unrelated Trade or Business Income (C) Net (A) Income (B) Expenses 1a Gross receipts or sales **b** Less returns and allowances 1c Cost of goods sold (Part III, line 8) 2 2 Gross profit. Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D (Form 1041 or Form 715. 1120)). See instructions 4a -701. Net gain (loss) (Form 4797) (attach Form 4797). See instructions 4b Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 3 247,539. 247,539. Rent income (Part IV) 6 Unrelated debt-financed income (Part V) 7 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 8 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) Exploited exempt activity income (Part VIII) 10 10 Advertising income (Part IX) 11 11 Other income (see instructions; attach statement) 12 12 247,553. 13 **Total.** Combine lines 3 through 12 Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income 19,490. Compensation of officers, directors, and trustees (Part X) 20,843. 2 2 Salaries and wages 3 3 Repairs and maintenance 4 4 Bad debts Interest (attach statement). See instructions 5 5 6,404. Taxes and licenses 6 6 Depreciation (attach Form 4562). See instructions 7 Less depreciation claimed in Part III and elsewhere on return 8b 8 9 Depletion \_\_\_\_\_ 9 10 10 Contributions to deferred compensation plans 6,155. Employee benefit programs 11 11 Excess exempt expenses (Part VIII) 12 12 Excess readership costs (Part IX) 13 13 143,330. Other deductions (attach statement) SEE STATEMENT 4 14 14 196,222. Total deductions. Add lines 1 through 14 15 15 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, 16

For Paperwork Reduction Act Notice, see instructions.

column (C)

Unrelated business taxable income. Subtract line 17 from line 16

Deduction for net operating loss. See instructions STMT 5 STMT

Schedule A (Form 990-T) 2024

16

17

18

17

51,331.

41,065.

10,266.

n -	_	_	
rа	a	e	- 2

Part	III Cost of Goods Sold Enter meth	nod of inventory valuati	ion		Page Z
1	Inventory at beginning of year	•		1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year			_	
8	Cost of goods sold. Subtract line 7 from line 6. Enter h				
9	Do the rules of section 263A (with respect to property p				Yes No
Part					
1	Description of property (property street address, city, st				
-	A	,,			
	В				
	c $\square$				
	D				
		Α	В	С	D
2	Rent received or accrued		_	-	
a	From personal property (if the percentage of				
_	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)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
		•			
3	Total rents received or accrued. Add line 2c, columns A	through D. Enter here	and on Part I. line 6. o	olumn (A)	0.
	Deductions directly connected with the income				
4	in lines 2a and 2b (attach statement)				
	,	•	•		
5	Total deductions. Add line 4, columns A through D. Er	nter here and on Part I,	line 6, column (B)		0.
Part		ee instructions)			
1	Description of debt-financed property (street address, or	city, state, ZIP code). C	heck if a dual-use. See	instructions.	
	A				
	В				
	c 🗆				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
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	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6	,,	,,	,,,	70
8	<b>Total gross income</b> (add line 7, columns A through D).	. Enter here and on Par	t I, line 7. column (A)		0.
-	<u> </u>		, , , , , ,		<u> </u>
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A three	ough D. Enter here and	d on Part I, line 7, colur	nn (B)	0.
11	Total dividends-received deductions included in line				0.

Part	VI Interest, Annu	ities, Ro	yalties, and Re	ents Fro	m Contro	lled O	rganization	<b>S</b> (se	e instruct	ions)	Page 3
	·					E	Exempt Contro	lled Org	ganization	s	
	Name of controlled organization	d	2. Employer identification number			al of specified nents made that is included controlling organical specifies.		rt of colur included olling orga	nn 4 in the aniza-	5. Deductions directly connected with income in column 5	
(1)											
(2)											
(3)											
(4)				<u> </u>							
	Tavabla la acces				Controlled Or			-£ l	0	44.1	Dankarationa dinantha
,	. Taxable Income	in	Net unrelated come (loss) e instructions)		otal of specif yments mad		that is inc controlling gross	luded ii	n the ation's	(	Deductions directly connected with ome in column 10
(1)											
(2)											
(3)											
(4)											
							Add colum Enter here line 8, c	and on	Part I,	Enter	columns 6 and 11. here and on Part I, ne 8, column (B).
Totals									0.		0.
Part	VII Investment I	ncome	of a Section 50	1(c)(7), (	9), or (17)	Orgar	nization (s	ee instr	uctions)		
	1. Desc	cription of	income		2. Amou incon		3. Deduction directly connected (attach states	ected	<b>4.</b> Set- (attach st		5. Total deductions and set-asides (add cols 3 and 4)
(1)											
(2)											
(3)											
(4)					A alal avec av						A dal a manusata in
					Add amou column 2.						Add amounts in column 5. Enter
					here and or	,					here and on Part I,
Totals					line 9, colu	mn (A).					line 9, column (B).
Part	VIII Exploited E	xemnt A	ctivity Income	Other T	l Than Δdve		Income /	(agg ing	tructions)		0.
1	Description of exploite		totivity income,	, Other I	Hall Adve	, uoni	g moonie (	See IIIS	tructions)		
2	Gross unrelated busine	-	e from trade or busi	ness Ente	r here and o	n Part I	line 10 colum	n (A)		2	
3	Expenses directly con						•	. , .			_
-	line 10, column (B)		•							3	
4	Net income (loss) from										
	lines 5 through 7									4	
5	Gross income from ac	tivity that i	s not unrelated busi	iness incor	ne					5	
6	Expenses attributable									6	
7	Excess exempt expens	ses. Subtr	act line 5 from line 6	S, but do no	ot enter more	e than th	ne amount on I	ine			
	4. Enter here and on P	art II, line	12							7	

Schedule A (Form 990-T) 2024

Part		Advertising Income					r ago 1
1		s) of periodical(s). Check box if report	ina two or	more periodicals on a	a consolidated basi	S.	
	A	]					
	В						
	c						
	D						
Enter a		for each periodical listed above in the	e correspo	ndina column.			
	arrio arrio	To oden pendalah netad abeve in tin	о обтобре	A	В	С	D
2	Gross	advertising income					
a		olumns A through D. Enter here and c		ne 11. column (A)	•		0.
_		g	<b>,</b>				
3	Direct	advertising costs by periodical					
а		olumns A through D. Enter here and c		ne 11, column (B)	•		0.
		Ğ					
4	Advert	ising gain (loss). Subtract line 3 from	line				
	2. For	any column in line 4 showing a gain,					
	comple	ete lines 5 through 8. For any column	in				
	line 4 s	showing a loss or zero, do not comple	ete				
	lines 5	through 7, and enter -0- on line 8					
5	Reade	rship costs					
6		tion income					
7		readership costs. If line 6 is less that					
		subtract line 6 from line 5. If line 5 is l					
		ne 6, enter -0-					
8		s readership costs allowed as a					
		tion. For each column showing a gain					
		enter the lesser of line 4 or line 7					
а		e 8, columns A through D. Enter the	greater of	the line 8a columns to	otal or -0- here and	on	0.
Part	Y Part II,	line 13	irectors	and Truetope	(\)		<u> </u>
· uit		beinpendation of Officere, b		, and madeced	(See Instructions)	3. Percentage	4. Compensation
		1. Name		<b>2.</b> Title		of time devoted	attributable to
		1. Name		2. 1110		to business	unrelated business
(1) G]	RACE	M SACERDOTE, CPA	EXEC.	. VP/CFO		5.97%	17,363.
		H OLIVER	PRESI			3.60%	1,451.
	OHN 2			PRESIDENT		3.60%	676.
(4)						%	
Total	. Enter h	ere and on Part II, line 1					19,490.
Part	XI :	Supplemental Information (	see instruc	ctions)		·	
				-			

FORM 990-T (A) INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 3
DESCRIPTION	NET INCOME OR (LOSS)
JUNIPER CAPITAL II, L.P ORDINARY BUSINESS INCOME (LOSS)	-18,417.
JUNIPER CAPITAL II, L.P ORDINARY BUSINESS INCOME (LOSS) JUNIPER CAPITAL III L.P ORDINARY BUSINESS INCOME (LOSS) LEVEL EQUITY GROWTH PARTNERS I LP - ORDINARY BUSINESS	280,061.
INCOME (LOSS)	-4,791.
LINDSAY GOLDBERG IV L.P INTEREST INCOME	1.
LINDSAY GOLDBERG IV L.P OTHER INCOME (LOSS)	-53 <b>.</b>
LINDSAY GOLDBERG V L.P INTEREST INCOME	30.
LINDSAY GOLDBERG V L.P DIVIDEND INCOME	2.
LINDSAY GOLDBERG V L.P OTHER INCOME (LOSS)	-380.
MATERRA LLC - ORDINARY BUSINESS INCOME (LOSS)	-73,509 <b>.</b>
MONTAUK TRIGUARD FUND V LP - ORDINARY BUSINESS INCOME	73,303.
(LOSS)	-5,409.
NEWBURY EQUITY PARTNERS LP - ORDINARY BUSINESS INCOME	3, 103.
(LOSS)	-70.
NEWBURY EQUITY PARTNERS LP - INTEREST INCOME	23.
NEWBURY EQUITY PARTNERS LP - OTHER PORTFOLIO INCOME (LOSS)	28.
NEWBURY EQUITY PARTNERS LP - OTHER INCOME (LOSS)	-11.
NORTHGATE IV LP - ORDINARY BUSINESS INCOME (LOSS)	2,573.
NORTHGATE V LP - ORDINARY BUSINESS INCOME (LOSS)	-548 <b>.</b>
NORTHGATE V LP - INTEREST INCOME	4.
NORTHGATE V LP - OTHER INCOME (LOSS)	-272 <b>.</b>
PARK STREET CAPITAL NATURAL RESOURCE FUND - ORDINARY	- Z / Z •
BUSINESS INCOME (LOSS)	359.
PARK STREET CAPITAL NATURAL RESOURCE FUND - ROYALTIES	14.
PARK STREET CAPITAL NATURAL RESOURCE FUND - NOTALITES  PARK STREET CAPITAL NATURAL RESOURCE FUND - OTHER INCOME	14.
(LOSS)	-1.
PARK STREET CAPITAL NATURAL RESOURCE FUND - OTHER INCOME	-1.
(LOSS)	-2.
REAL ESTATE RECOVERY FUND LLC - ORDINARY BUSINESS INCOME	-2.
(LOSS)	64,993.
MILL CREEK PRIVATE EQUITY FUND IV, L.P ORDINARY	04,333.
BUSINESS INCOME (LOSS)	319.
MILL CREEK PRIVATE EQUITY FUND V, L.P ORDINARY BUSINESS	319.
INCOME (LOSS)	2,595.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	247,539.

649,087.

FORM 990-7	Г (A)		OTHER DEDUCTI	ONS	STATEMENT 4
DESCRIPTIO	ON				AMOUNT
INVESTMENT	— Г ADVISOF	RY FEES ON (	CONSULTING UBI		10,189
IT COST/O	CCUPANCY				122,481
PROFESSION	NAL FEES				10,616
			FROM LINDSAY GOL		7
			FROM LINDSAY GOL		11
			FROM NORTHGATE V		23
NATURAL RI			FROM PARK SIREEI	CAPITAL	3.
WIII OIWILL IVI	1000RCL 1	OND			3.
TOTAL TO S	SCHEDULE	A, PART II,	LINE 14		143,330
FORM 990-	г (A)		POST 2017 NOL SCH	EDULE	STATEMENT 5
PRIOR YEA			NOL DEDUCTION	CARRYFO POST 20	RWARD OF 17 NOL
6	49,087.		41,065.		608,022.
990-T SCH	A	POST-201	7 NET OPERATING	LOSS DEDUCTION	STATEMENT 6
			LOSS		
			PREVIOUSLY	LOSS	AVAILABLE
		SUSTAINED	APPLIED	REMAINING	THIS YEAR
TAX YEAR	LOSS				
	LOSS	193,715.	193,715.	0.	0.
12/31/19	LOSS	193,715. 447,239.	193,715. 447,239.	0.	0.
TAX YEAR 12/31/19 12/31/20 12/31/21 12/31/22	LOSS				

649,087.

NOL CARRYOVER AVAILABLE THIS YEAR

SCH A (990-T) SCHEDULE A	NOL DETAIL	STATEMENT 7
TAXABLE INCOME FROM ALL ENTITIES THIS ENTITIES PORTION OF TAXABLE	INCOME	702,199. 51,331.
THIS ENTITIES PERCENTAGE OF PRE-20 THIS ENTITIES ALLOWED PRE-2018 NET		7.31% 0.
TAXABLE INCOME AFTER PRE-2018 NET 80% INCOME LIMITATION	OPERATING LOSS	51,331. 41,065.
POST-2017 AVAILABLE LESSER OF POST-2017 NET OPERATING	LOSS OR 80% LIMITATION	649,087. 41,065.

# Form **8949**Department of the Treasury

Internal Revenue Service

**Sales and Other Dispositions of Capital Assets** 

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Go to www.irs.gov/Form8949 for instructions and the latest information.

2024

Attachment

Name(s) shown on return

THE COMMUNITY FOUNDATION FOR NORTHEAST FLORIDA, INC.

Social security number or taxpayer identification no.

59-6150746

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute
statemént will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your
broker and may even tell you which box to check.
Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term
transactions, see page 2.
Note: You may aggregate all short-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 1a; you aren't required to report these transactions on Form 8949 (see instructions).
You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box.
f you have more short-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.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)								
(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS								
X (C) Short-term transactions no	t reported to you	ı on Form 1099-E	3					
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	loss. If you	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)	
MILL CREEK PRIVATE						,		
EQUITY FUND IV,								
L.P.							-112.	
MILL CREEK PRIVATE								
EQUITY FUND V,								
L.P.							198.	
riff Diversifying								
STRATEGIES FUND,								
LP							-281.	
2 Totals. Add the amounts in colun	nns (d), (e), (g), aı	nd (h) (subtract						
negative amounts). Enter each tot	tal here and inclu	ide on your						
Cobodula D. line 4h /if Day A aba	va ia abaakad\ I	ina O (if Day D		1			l	

**Note:** If you checked Box A 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.

23011 12-18-24 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8949** (2024)

above is checked), or line 3 (if Box C above is checked)

Attachment Sequence No. 12A Page 2

Form 8949 (2024)

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

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

broker and may even tell you which box to check.

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)

(E) Long-term transactions not reported to you on Form 1099-B

Adjustment, if any, to gain or 1 (a) (b) (c) (d) (e) (h) loss. If you enter an amount Proceeds Cost or other Gain or (loss). Description of property Date sold or Date acquired in column (g), enter a code in (sales price) basis. See the Subtract column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) disposed of column (f). See instructions. from column (d) & Note below and (Mo., day, yr.) see *Column (*e) ir combine the result Amount of Code(s) with column (g) the instructions adjustment NEWBURY EQUITY PARTNERS LP -26. 270. NORTHGATE V LP MILL CREEK PRIVATE EQUITY FUND IV, L.P. 1,364. MILL CREEK PRIVATE EQUITY FUND V, L.P. 238. TIFF DIVERSIFYING STRATEGIES FUND, -936. LΡ 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E 910. above is checked), or line 10 (if Box F above is checked)

**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 (2024)

#### SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

THE COMMUNITY FOUNDATION FOR

#### **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

2024

Name

Employer identification number

NORTHEAST FLORIDA,	INC.			59-	6150746
Did the corporation dispose of any investmen	nt(s) in a qualified opportur	ity fund during the tax ye	ear?		Yes X No
If "Yes," attach Form 8949 and see its instruc					
Part I Short-Term Capital Gai	ns and Losses - Ass	ets Held One Year	or Less		
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	49,	(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)	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 <b>Box A</b> checked					
2 Totals for all transactions reported on					
Form(s) 8949 with <b>Box B</b> checked					
3 Totals for all transactions reported on					
Form(s) 8949 with <b>Box C</b> checked					-195.
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 3	7		4	
5 Short-term capital gain or (loss) from like-kind	d exchanges from Form 8824			5	
6 Unused capital loss carryover (attach computa	ation)			6	( )
7 Net short-term capital gain or (loss). Combine	e lines 1a through 6 in column	h		7	-195.
Part II Long-Term Capital Gai	ns and Losses - Ass	ets Held More Thai	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.	<b>(d)</b> Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (q)
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					
<b>8b</b> Totals for all transactions reported on					
Form(s) 8949 with <b>Box D</b> checked					
9 Totals for all transactions reported on					
Form(s) 8949 with <b>Box E</b> checked					
10 Totals for all transactions reported on					010
Form(s) 8949 with <b>Box F</b> checked					910.

17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns

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

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

13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h

12 Long-term capital gain from installment sales from Form 6252, line 26 or 37

16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)

Schedule D (Form 1120) 2024

910.

715.

715

73-00405

11

12

13

14

15

16

17

LHA

**11** Enter gain from Form 4797, line 7 or 9

Part III Summary of Parts I and II

14 Capital gain distributions

Department of the Treasury Internal Revenue Service

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

Attach to your tax return.

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

OMB No. 1545-0184

Nam	ne(s) shown on return						Ide	ntifying number
TH	E COMMUNITY FOUNDAT	ION FOR						
NO	RTHEAST FLORIDA, IN	C.						59-6150746
1a	Enter the gross proceeds from sales (or substitute statement) that you are		•				4.	
<b>L</b>		_			utial diapositions		1a	
D	Enter the total amount of gain that you MACRS assets	_		=	•		4h	
_	MACRS assets  Enter the total amount of loss that you						1b	
C	•	ou are including o	on lines 2 and 10	due to the partial	dispositions of wir	iono	1c	
Pa	art I Sales or Exchanges of	Property Use	ed in a Trade	or Business	and Involunta	v Conver	sions	From Other
	Than Casualty or Thef					_		
	<del>-</del>	T			(e) Depreciation	(f) Cost or o	other	(2) 2
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(C) Date sold (mo., day, yr.)	(d) Gross sales price	allowed or allowable since	basis, plu improvements		( <b>g</b> ) Gain or (loss) Subtract (f) from the
SI		expense of		sum of (d) and (e)				
3	Gain, if any, from Form 4684, line 39	1		1			3	
4	Section 1231 gain from installment s						4	
5	Section 1231 gain or (loss) from like-						5	
6	Gain, if any, from line 32, from other						6	
7	Combine lines 2 through 6. Enter the				Harris .		7	-701.
•	Partnerships and S corporations.		=			edule K		, , , = .
	line 10, or Form 1120-S, Schedule K				1 1 01111 1000, 0011	oddio IX,		
	Individuals, partners, S corporation	n shareholders. a	and all others.	If line 7 is zero or a	loss, enter the an	nount		
	from line 7 on line 11 below and skip							
	1231 losses, or they were recaptured	d in an earlier yea	r, enter the gain	from line 7 as a lor	ng-term capital gai	n on		
	the Schedule D filed with your return	and skip lines 8,	9, 11, and 12 be	elow.				
8	Nonrecaptured net section 1231 loss	ses from prior yea	ars. See instructi	ons			8	
9	Subtract line 8 from line 7. If zero or				ne 7 on line 12 belo	ow. If		
	line 9 is more than zero, enter the an	nount from line 8	on line 12 below	and enter the gair	n from line 9 as a l	ong-term		
	capital gain on the Schedule D filed	with your return.	See instructions				9	
Da	art II Ordinary Gains and	Losses (and in	otw.otiono)					
1 6	Ordinary dams and	LOSSES (see in	structions)					
10	Ordinary gains and losses not include	ded on lines 11 th	rough 16 (includ	de property held 1	year or less):			
				1				
11							11	( 701.)
12	Gain, if any, from line 7 or amount from	om line 8, if applic	cable				12	
13	Gain, if any, from line 31						13	
14	Net gain or (loss) from Form 4684, lir	nes 31 and 38a					14	
15	Ordinary gain from installment sales						15	
16	Ordinary gain or (loss) from like-kind	exchanges from I	Form 8824				16	
17							17	-701.
18	For all except individual returns, enter	er the amount from	m line 17 on the	appropriate line of	your return and s	kip lines		
	a and b below. For individual returns	, complete lines a	a and b below.					
а	If the loss on line 11 includes a loss t	from Form 4684,	line 35, column	(b)(ii), enter that pa	rt of the loss here.	Enter the		
	loss from income-producing property							
	as an employee.) Identify as from "Fo						18a	
b	Redetermine the gain or (loss) on line	e 17 excluding the	e loss, if any, on	line 18a. Enter her	e and on Schedul	e 1		
	(Form 1040) Part I line 4						10h	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2024)

Pai	t III Gain From Disposition of Propert	y Und	er Sections 124	5, 1250, 1252	, 125	64, and 1255	(see ir	nstructions)
19	(a) Description of section 1245, 1250, 1252, 1254, o	or 1255	property:			<b>(b)</b> Date acqui (mo., day, yr		(c) Date sold (mo., day, yr.)
Α								
В								
С								
D								
	These columns relate to the properties on lines 19A through 19D.		Property A	Property	В	Property	С	Property D
20	Gross sales price ( <b>Note:</b> See line 1a before completing.)	20						
21	Cost or other basis plus expense of sale	21						
22	Depreciation (or depletion) allowed or allowable	22						
23	Adjusted basis. Subtract line 22 from line 21	23						
24	Total gain. Subtract line 23 from line 20	24						
25	If section 1245 property:							
а	Depreciation allowed or allowable from line 22	25a						
b	Enter the <b>smaller</b> of line 24 or 25a	25b						
	<b>If section 1250 property:</b> If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
а	Additional depreciation after 1975. See instructions	26a						
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b						
	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						
	Additional depreciation after 1969 and before 1976	26d						
	Enter the <b>smaller</b> of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
	Add lines 26b, 26e, and 26f	26g						
	<b>If section 1252 property:</b> Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.							
	Soil, water, and land clearing expenses	27a						
	Line 27a multiplied by applicable percentage	27b						
	Enter the <b>smaller</b> of line 24 or 27b	27c						
а	If section 1254 property: Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
	Enter the <b>smaller</b> of line 24 or 28a	28b						
а	If section 1255 property: Applicable percentage of payments excluded from income under section 126. See instructions	29a						
b	Enter the <b>smaller</b> of line 24 or 29a. See instructions	29b						
Sun	nmary of Part III Gains. Complete property of	columns	A through D through	line 29b before	aoina	to line 30.		
30	Total gains for all properties. Add property columns	A throu	gh D, line 24				30	
31	Add property columns A through D, lines 25b, 26g,	27c, 28	b, and 29b. Enter her	e and on line 13			31	
32	Subtract line 31 from line 30. Enter the portion from	r casualt	y or theft on Form 46	84, line 33. Ente	r the p	oortion		
_	from other than casualty or theft on Form 4797, line	6	100057.15		· · · · · · · · · · · · · · · · · · ·		32	
Pa	t IV Recapture Amounts Under Section	ns 179	and 280F(b)(2)	When Busin	ess l	Jse Drops to	50% c	or Less
	(see instructions)					_	<del></del>	
						(a) Section 179	1	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allo	wable ir	n prior years		33			
					34			
	Recapture amount. Subtract line 34 from line 33. Se				35			

#### **SCHEDULE A** (Form 990-T)

## **Unrelated Business Taxable Income** From an Unrelated Trade or Business

	ment of the Treasury I Revenue Service	Open to Public Inspection for 501(c)(3) Organizations Only					
<b>A</b> N	lame of the organizati	B Employer 59-61		cation number 46			
<u>c</u> .	Inrelated business	activity code (see instructions) 5230	00		<b>D</b> Sequence	э: 2	2 of 2
	Jacariba tha upralat	ted trade or business INVESTMENT	IN S	CORPORATION			
			<u> </u>		I		
Pa	rt I Unrelated	Trade or Business Income		(A) Income	(B) Expense	s	(C) Net
1a	Gross receipts or	sales					
b	Less returns and alle		1c				
2	Cost of goods sol						
3	•	ract line 2 from line 1c					
4 a		ncome (attach Schedule D (Form 1041 or Form					
	1120)). See instru	· ·	4a				
b	Net gain (loss) (Fo	orm 4797) (attach Form 4797). See instructions	4b				
С	Capital loss deduc	ction for trusts	4c				
5	•	n a partnership or an S corporation (attach					
		STATEMENT 8	5	688,606.			688,606.
6		t IV)	6				
7		anced income (Part V)					
8		, royalties, and rents from a controlled					
	organization (Part	VI)	8				
9		e of section 501(c)(7), (9), or (17)					
	organizations (Par	t VII)	9				
10		activity income (Part VIII)					
11		ne (Part IX)					
12		e instructions; attach statement)					
13	Total. Combine lin	nes 3 through 12	13	688,606.			688,606.
Pai		ns Not Taken Elsewhere. See instruc		r limitations on de	eductions. Ded	uctior	ns must be
	directly co	onnected with the unrelated business i	income				
1	Compensation of	officers, directors, and trustees (Part X)				1	3,864.
2	Salaries and wage	es				2	
3		tenance				3	
4	Bad debts					4	
5	Interest (attach st	atement). See instructions				5	
6	Taxes and license					6	31,424.
7		ch Form 4562). See instructions					
8	Less depreciation	claimed in Part III and elsewhere on return		8a		8b	
9	Depletion					9	
10		deferred compensation plans				10	
11		programs				11	533.
12		rpenses (Part VIII)				12	
13		costs (Part IX)				13	4 44-
14		(attach statement)		SEE STA	PEMENT 9	14	1,917.
15						15	37,738.
16		ss income before net operating loss deduction.					650 060
						16	650,868.
17	Deduction for net	operating loss. See instructions				17	υ

For Paperwork Reduction Act Notice, see instructions.

18 Unrelated business taxable income. Subtract line 17 from line 16

Schedule A (Form 990-T) 2024

650,868.

age	2

Part	III Cost of Goods Sold Enter meth	nod of inventory valuati	on		r ago <u>=</u>
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)				
6	<b>Total.</b> Add lines 1 through 5				
7	Inventory at end of year			_	
8	Cost of goods sold. Subtract line 7 from line 6. Enter h				
9	Do the rules of section 263A (with respect to property p	*			Yes No
Part					
1	Description of property (property street address, city, st	ate, ZIP code). Check	if a dual-use. See instr	uctions.	
	A SRA/BUILDING 051 CORPORA				BEACH, F
	В			-	
	c 🔲				
	D				
		Α	В	С	D
2	Rent received or accrued			_	
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)	0.			
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	500/ '(1) 1 1 (1)	0.			
С	Total rents received or accrued by property.	0.1			
C	Add lines 2a and 2b, columns A through D				
	Add lines 2a and 2b, coldinins A through b	L			
3	Total rents received or accrued. Add line 2c, columns A	through D. Enter here	and an Bart Llina 6	oolumn (A)	0.
3	Deductions directly connected with the income	t tillough b. Enter here	and on Part I, line o, t	column (A)	<del></del>
4	•	0.			
4	in lines 2a and 2b (attach statement)	0 • [			
5	Total deductions. Add line 4, columns A through D. Er	star hard and an Bart I	ling 6 column (P)		0.
Part		o instructions)	inie o, column (b)		<u></u>
1	Description of debt-financed property (street address, c		hack if a dual-use. See	instructions	
•	A 5345 PINE TREE DRIVE, MI			, manachona.	
	В				
	c 🗆				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed	^	В		
_		0.			
3	property  Deductions directly connected with or allocable	•			
3	•				
_	to debt-financed property	0.			
a	Straight line depreciation (attach statement)	0.			
b	Other deductions (attach statement)	0.			
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)	0.			
5	Average adjusted basis of or allocable to debt-	<u>,</u>			
	financed property (attach statement)	0.			-
6	Divide line 4 by line 5	0.000%	%	9/	%
7	Gross income reportable. Multiply line 2 by line 6	0.			
8	<b>Total gross income</b> (add line 7, columns A through D).	Enter here and on Par	t I, line 7, column (A)	<u>-</u>	0.
	r				
9	Allocable deductions. Multiply line 3c by line 6	0.			
10	Total allocable deductions. Add line 9, columns A thro				0.
11	Total dividends-received deductions included in line	10			0.

Schedule A (Form 990-T) 2024

Schedule A (Form 9  Part VI Intere	990-1) 2024 est. Annu	ities R	oyalties, and Re	ents Fro	m Contro	lled O	rganization	S (c	ee instruct	ione)		Page 3
i ait vi intere	ot, Aiiit		Jyanico, and me	110	0011010		xempt Contro					
Name of controlled     organization		2. Employer identification number			4. Tota	al of specified nents made	5. Part of column 4 that is included in the controlling organization's gross income		mn 4 in the aniza-	he connected with a-		
(1)												
(2)												
(3)												
(4)												
		1			Controlled O		ons					
7. Taxable Ind	come	ir	Net unrelated acome (loss) e instructions)	9. Total of specified payments made		10. Part of column 9 that is included in the controlling organization's gross income		in the zation's	11. Deductions directly connected with income in column 10		nected with	
(1)												
(2)												
(3)												
(4)												
							Add colum Enter here line 8, c	and or	n Part I, (A).	Ente	er he	umns 6 and 11. re and on Part I, s, column (B).
Totals									0.			0.
Part VII Inve			of a Section 50	1(c)(7), (	9), or (17)	Orgar	nization (s	ee inst	ructions)			
	<b>1.</b> Desc	cription of	income		2. Amou incon		3. Deduction directly connumber (attach states	ected	4. Set- (attach st	asides tatemen	nt)	and set-asides (add cols 3 and 4)
(1) INVESTME	NT IN	S CO	RPORATION			0.		0.		0	١.	0.
(2)												
(3)												
(4)												
Totals					Add amou column 2 here and of line 9, colu	Enter n Part I,						Add amounts in column 5. Enter nere and on Part I, line 9, column (B).
Part VIII Exp	oloited E	xempt A	ctivity Income,	Other 1	han Adve	ertising	Income	see in	structions)			
1 Description									,			
•		•	e from trade or busi	ness. Ente	r here and o	n Part I,	line 10, colum	n (A)		2		
			h production of unre				•	. ,				
										3		
4 Net income	(loss) from	unrelated	trade or business.	Subtract lir	ne 3 from line	e 2. If a ç	gain, complete					
lines 5 thro	•									4		
	me from ac	tivity that i	s not unrelated busi	iness incor	me					5		
			entered on line 5							6		
			act line 5 from line 6	s, but do no	ot enter more	e than th	ne amount on I	ine				
4 Enter he	re and on P	art II line	12							17		

Schedule A (Form 990-T) 2024

Part	IX	Advertising Income					<u> </u>
1	Nam	e(s) of periodical(s). Check box if report	ting two or	more periodicals on a	consolidated basis	i.	
	Α						
	в						
	С						
	D [						
Enter	amoun	ts for each periodical listed above in the	e correspoi	nding column.			
		•		A	В	С	D
2	Gros	s advertising income					
а	Add	columns A through D. Enter here and c		e 11, column (A)			0.
		-					
3	Direc	et advertising costs by periodical					
а		columns A through D. Enter here and c	n Part I, lin	e 11, column (B)			0.
4	Adve	ertising gain (loss). Subtract line 3 from	line				
	2. Fo	r any column in line 4 showing a gain,					
	com	olete lines 5 through 8. For any column	in				
	line 4	showing a loss or zero, do not comple	ete				
	lines	5 through 7, and enter -0- on line 8					
5	Read	lership costs					
6	Circu	ılation income					
7	Exce	ss readership costs. If line 6 is less tha	n				
	line 5	5, subtract line 6 from line 5. If line 5 is	less				
	than	line 6, enter -0-					
8	Exce	ss readership costs allowed as a					
	dedu	iction. For each column showing a gain	on				
		$4$ , enter the lesser of line 4 or line 7 $\dots$					
а		line 8, columns A through D. Enter the					•
D	Part	II, line 13		T 1			0.
<u>Part</u>	Χ	Compensation of Officers, D	rectors,	, and Trustees (s	see instructions)	T	
						3. Percentage	4. Compensation
		1. Name		2. Title		of time devoted	attributable to
0	D 7 CT	M CACEDDOME CDA	סמעם	TID / CEO		to business	unrelated business
	KACI	E M SACERDOTE, CPA	EVEC.	VP/CFO		1.33%	3,864.
(2)						%	
(3)						%	
4)						%	
Total	l Entor	hara and an Bart II line 1					3,864.
Part		here and on Part II, line 1  Supplemental Information (					3,004.
rait	ΛI	Supplemental information (	see instruc	tions)			
_							

FORM 990-T (A)	INCOME (LOSS) FROM S CORPORATIONS	STATEMENT 8
DESCRIPTION		NET INCOME OR (LOSS)
SRA/BUILDING 051 CORP SRA/BUILDING 051 CORP	672,860. 15,746.	
TOTAL INCLUDED ON SCHE	688,606.	
FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 9
DESCRIPTION		AMOUNT
PROFESSIONAL FEES IT COSTS/OCCUPANCY		1,180. 737.
TOTAL TO SCHEDULE A, P	ART II, LINE 14	1,917.

FORM 4797	PRO	PERTY HEL	D MORE THAI	N ONE YEAR	ST.	ATEMENT 10
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
LEVEL EQUITY GROWTH PARTNERS I LP MATERRA LLC						-175. -273.
NEWBURY EQUITY PARTNERS LP NORTHGATE V LP PARK STREET						7. -16.
CAPITAL NATURAL RESOURCE FUN						-244.
TOTAL TO 4797, PA	RT I, LINE	2				-701.