\*\* PUBLIC DISCLOSURE COPY \*

Form (Rev January 2020)

932001 01-20-20

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

		of the Treasury enue Service	Go to www.irs.gov/Form990 for instructions and the latest	1/21/1	Open to Public Inspection
_			ndar year, or tax year beginning $\mathrm{APR}1,2019$		,
	Check if	C Name	of organization	D Employer identific	cation number
X	Addr		VIEW FOUNDATION, INC.		
느	Nam	ge   Doing	business as	39-60926	44
F	Initia returi Final returi	n Numb	er and street (or P.O. box if mail is not delivered to street address)  Room/suite  BAY VIEW	E Telephone number 608-256-	
	termi	ő- <del>├                                   </del>	r town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	1,256,563.
	Amer	nded Mara D	ISON, WI 53715-1482	H(a) Is this a group re	
	Appli		and address of principal officer ALEXIS LONDON	for subordinates	
	pend		AS C ABOVE	H(b) Are all subordinates in	
1 7	Гах-ех	cempt status	X 501(c)(3)	7	list (see instructions)
J	Nebs	ite: VWW	.BAYVIEWFOUNDATION.ORG	H(c) Group exemption	` '
K	orm o	f organization:	X Corporation		State of legal domicile, WI
Pa	art I	Summai			
Governance	1		nbe the organization's mission or most significant activities TO PROVIDE E,ARTS APPRECIATION & CULTURAL AWARENES		JMAN
Ē	2	Check this t			eate
Ş	3		voting members of the governing body (Part VI, line 1a)	3	10
Ğ	4		ndependent voting members of the governing body (Part VI, line 1b)	4	10
<b>م</b> ع چ	5	Total number	er of individuals employed in calendar year 2019 (Part V, line 2antemal Reveni	ue Servíce 5	36
į	6		er of volunteers (estimate if necessary) Received US B	Bank - USB 6	70
Activities	7 a		ted business revenue from Part VIII, column (C), line 12	7a	0.
٩			d business taxable income from Form 990-T, line 39	7b	0.
			SEP 43	ZUPrior Year	Current Year
•	8	Contribution	is and grants (Part VIII, line 1h)	240,150.	263,279.
E .	9	Program ser	vice revenue (Part VIII, line 2g)	1,075,198.	988,271.
Revenue	10	Investment	ncome (Part VIII, column (A), lines 3, 4, and 7d)	,UI 3,017.	5,013.
ш	11	Other reven	ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12	Total revenu	e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,318,365.	1,256,563.
	13	Grants and	similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	14		d to or for members (Part IX, column (A), line 4)	0.	0.
es	15	Salaries, oth	er compensation, employee benefits (Part IX, column (A), lines 5-10)	629,321.	553,708.
Expenses			fundraising fees (Part IX, column (A), line 11e)	0.	0.
×			ising expenses (Part IX, column (D), line 25)	504 004	
_	l		ses (Part IX, column (A), lines 11a-11d, 11f-24e)	531,231.	447,494.
	Į.		ses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,160,552.	1,001,202.
_ <u>S</u>	19	Revenue les	s expenses Subtract line 18 from line 12	157,813.	255,361.
ance		T-4-14-		ginning of Current Year	End of Year
Asse	20 21		(Part X, line 16)	72,836.	1,685,489.
Net Assets or Fund Balances	22		or fund balances Subtract line 21 from line 20	1,375,577.	1,630,938.
	rt II		re Block	1,3/3,3//	1,030,330.
			r, I declare that I have examined this return, including accompanying schedules and statement	ents, and to the hest of my	knowledge and belief it is
			te. Declaration of preparer (other than officer) is based on all information of which preparer		Miowicage and boller, it is
					020
Sigr	1	Signati	ire of officer / //	Date	
Her			XIS LONDON, EXECUTIVE DIRECTOR		
		ļ <b>'</b>	· · · · · · · · · · · · · · · · · · ·	ate Check	TI PTIN
Paid			Treparer 5 signature	0 (0 (0 )	_p0136333E
Prep		Firm's name	WEGNER CPAS, LLP	1 30.1 0.1. p.0 30.	39-0974031
Use			ss 2921 LANDMARK PL STE 300	rim s EIN > 3	77-071403I
330	J	i i i i s audre:	MADISON, WI 53713-4236	Phone no 60 s	3-274-4020
May	the "	RS discuss +	nis return with the preparer shown above? (see instructions)	Filotie 110.0 0 C	1,,,,
iviay	u IÇ II	<u> 4130435 t</u>	is return with the preparer shown above (see instructions)		LXYesNo_

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2019)

	m 990 (2019) BAYVIEW FOUNDATION, INC.	39-6092644	Page 2
Pa	art III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly describe the organization's mission		
•	THE BAYVIEW FOUNDATION SUPPORTS ITS CULTURALLY DIVERSE,	T.OW - TNCOME	
	FAMILIES IN REALIZING THEIR ASPIRATIONS BY PROVIDING AFF		
	HOUSING, FOSTERING CULTURAL PRIDE, AND BUILDING COMMUNIT	Y THROUGH	THE
	ARTS, EDUCATION, AND RECREATION.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	☐ Yes	No X
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		x X No
3		L res	NO
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe	rs, the total expenses,	, and
	revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 483,409 • including grants of \$ 0 • ) (Revenu	es 988,	, 271·)
	HOUSING PROJECT - BAYVIEW TOWNHOUSES IS COMPRISED OF 102	UNITS OF	
	RESIDENTIAL HOUSING INTENDED FOR LOW TO MODERATE INCOME		TN
	MADISON, WI. THE FOUNDATION HAS A SECTION 8 HOUSING ASSI		
			TEIN I
	AGREEMENT WITH THE UNITED STATES DEPARTMENT OF HOUSING A		
	DEVELOPMENT. APPROXIMATELY 280 RESIDENTS LIVE AT BAYVIEW	<i>1</i>	
4b		e \$	0.)
	COMMUNITY SUPPORT - BAYVIEW'S INTERNATIONAL CENTER FOR E	DUCATION AN	<u>1D</u>
	THE ARTS, THE CENTRALLY LOCATED COMMUNITY CENTER, PROVID	ES SOCIAL,	
	RECREATIONAL, EDUCATIONAL, AND CULTURAL PROGRAMS TO THE		
	RESIDENTS AS WELL AS THE COMMUNITY AT LARGE. BAYVIEW'S Y		MC
	IMPACT MORE THAN 85 UNDUPLICATED YOUTH AGES 7-18 ANNUALL		<u> </u>
			77
	FOCUS AREAS INCLUDE: ACADEMICS, SOCIAL/EMOTIONAL DEVELOP	MENT, HEAL'I	<u>'H</u>
	AND WELLNESS AND ARTS/CULTURE. BAYVIEW ALSO PROVIDES YOU	TH EMPLOYME	ENT
	PROGRAMMING DURING THE SUMMER MONTHS.		
		<u> </u>	
		<del></del>	
4-	15	<del></del>	<del></del>
4c	(Code) (Expenses \$) (Revenue	∍\$	)
			_
<u> </u>	Ottown and the Control of the Contro	<del></del>	
4d	Other program services (Describe on Schedule O )		
	(Expenses \$ including grants of \$ ) (Revenue \$		
4e	Total program service expenses ▶ 901,454.		
		Form 9	990 (2019)

Form 990 (2019) BAYVIEW FOUN
Part IV Checklist of Required Schedules

1 Is the organization described in section 501(k)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule 8, Schedule 9, Schedule of Contributors?  3 Did the organization regione of merce for indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II  5 Section 501(k)(6) organization. On the organization engage in abbrying activities, or have a section 501(k) election in effect during the tax year? If "Yes," complete Schedule C, Part II  5 Is the organization as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  6 Did the organization in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  7 Did the organization maintain any disonal advantation and any smaller funds or accounts? If "Yes," complete Schedule D, Part II  8 Did the organization maintain any disonal advantation and interest the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  9 Did the organization maintain and control years of the structures of the organization and the organization report an amount in Part X, line 21, for escrow or custodal account liability, serve as a custodan for amounts not lated in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  10 Did the organization diversity or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V  10 Did the organization report an amount for land buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V II  11 Did the organization report an amount for investments: program related in Part X, line 10; If "Yes," complete Schedule D, Part V II  11 Did the organization report an amount for other assets in Part X, line 10; that is 5% or more of its total assets reported in Part X, line 10; If "Yes," complete Schedule D, Par				Yes	No
2 Is the organization required to complete <i>Schedule G, Schedule G Controlution</i> 3 Did the organization engage in direct or undered patched campage activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 4 Section 801((3)) or granizations. Did the organization engage in lobbying activities, or have a section 501(fit) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization as extend 501((6)(5) or 501((6)(5) organization that receives membership dues, assessments, or similar amounts as defined in Pereirue Procedule G-Part II 6 Did the organization as extend 501((6)(5) organization that receives membership dues, assessments, or similar amounts as defined in Pereirue Procedule C, Part II 7 Did the organization manitaria any donor advised funds or any similar funds or accounts for which donors have the right to provide advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II 8 Did the organization manitaria reliections of works of art, historical freasures, or other similar assets? If "Yes," complete Schedule D, Part II 9 Did the organization in amount for Part X, une 21, for escrive or outstodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization report an amount for sind, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII 11 If the organization report an amount for sind, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VIII 11 Did the organization report an amount for revestments of the securities in Part X, line 10? If "Yes," complete Schedule D, Part VIII 12 Did the organization report an amount for the assets in Part X, line 10? If "Yes," complete Schedule D, Part VIII 13 Did the organization report an amount for the resolution of the securit	1	- , , , , , , , , , , , , , , , , , , ,	1	x	
3 Dut the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public offect if "Yes." complete Schedule C, Part if  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year" if "Yes." complete Schedule C, Part if  I sit the organization a section 501(c)(4), 501(c)(6), 601(c)(6),	2				
public office? If "Yes," complete Schedule C, Part I  8 Section SD ((s)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(th) electrion in effect during the tax year? If "Yes," complete Schedule C, Part III  1 is the organization a section 501(th)(3) 501(c)(s), or 501(c)(s) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure B-1919" If "Yes," complete Schedule C, Part III  6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part III  7 Id the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit courseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV  10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part X III  11 Did the organization report an amount for other liabilities in Part X, line 10. If "Yes," complete Schedule D, Part X III  12 Did the organization report an amount for other liabilities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 15? If "Yes," complete Schedule D, Part X III  13 Did the organi			<u> </u>		
dump the tax year? If 'Yes,' complete Schedule C, Part I'  1 is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98:19? If 'Yes,' complete Schedule C, Part III  2 bid the organization maintain any donor advised funds or any smillar funds or accounts for which donors have the right to provide advised on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part II  3 bid the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part III  4 bid the organization maintain collections of works of art, historical treasures, or other smillar assets? If 'Yes,' complete Schedule D, Part III  5 bid the organization maintain collections of works of art, historical treasures, or other smillar assets? If 'Yes,' complete Schedule D, Part III  6 bid the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV  10 bid the organization report an amount for Industry assets and propriets in the complete Schedule D, Part VIII  11 bid the organization report an amount for Industry assets and propriets schedule D, Part X, line 16? If 'Yes,' complete Schedule D, Part X, line 16? If 'Yes,' complete Schedule D, Part X, line 16? If 'Yes,' complete Schedule D, Part X, line 16? If 'Yes,' complete Schedule D, Part X, line 16? If 'Yes,' complete Schedule D, Part X, line 16? If 'Yes,' complete Schedule D, Part X, line 16? If 'Yes,' complete Schedule D, Part X, line 16? If 'Yes,' complete Schedule D, Part X, line 16? If 'Yes,' complete Schedule D, Part X, line 16? If 'Yes,' complete Schedule D, Part X, line 16? If 'Yes,' complete Schedule D			3		Х
5 Is the organization a section \$01(c)(4), 501(c)(5) or 501(c)(6) organization that receives membership dues, assessments, or smilar amounts as defined in Revenue Procedure 98:197 "Yes," complete Schedule C, Part III  6 Did the organization maintain any donor advised funds or any smillar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in clouding easements to preserve peen space, the environment, historic land areas, or historic structures? "If "Yes," complete Schedule D, Part III  7 Did the organization maintain collections of works of art, historical treasures, or other smilar assets? "Yes," complete Schedule D, Part III  8 Did the organization maintain collections of works of art, historical treasures, or other smilar assets? "Yes," complete Schedule D, Part III  9 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? "Yes," complete Schedule D, Part VII  10 Did the organization report an amount for investments other securities in Part X, line 10? "Yes," complete Schedule D, Part VII  11 Did the organization report an amount for or investments or there securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? "If "Yes," complete Schedule D, Part VIII  11 Did the organization report an amount for or investments program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? "If "Yes," complete Schedule D, Part VIII  11 Did the organization report an amount for orber assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? "If "Yes," complete Schedule D, Part X VIII  11 Did the organization report an amount for orber assets in Part X, line 15, that is 5%	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
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b Did the organization maintain any donor advised funds or any smilar funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II B Did the organization and areas, or historic structures? If "Yes," complete Schedule D, Part III B Did the organization and areas, or historic structures? If "Yes," complete Schedule D, Part III B Did the organization and an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV II If the organization or any of the following questions is "Yes," then complete Schedule D, Part X is a spipicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI II If the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI II	5				
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9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If Yes, "complete Schedule D, Part V 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI 11 Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XI 11 Did the organization report an amount for other labilities in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XI 11 Did the organization is separate or consolidated financial statements for the tax year include a footnote that addresses the organization is separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X and XI Is optional 13 is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 13 is the organization as chool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E, Parts X and XII is optional 13 is the organization report and part A line 12a, then completing Schedule D, Parts XI and XII is optional 13 is the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other ass	•		۵	x	
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b Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)° If "Yes," complete Schedule E  13			11f		X
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· · · · · · · · · · · · · · · · · · ·	b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
domestic government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21	· · · · · · · · · · · · · · · · · · ·			
		domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>

Part IV	Checklist	of Re	quired S	Schedules	(continued)
***					·

			Yes	: No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			T.,
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	22	┼	X
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No," go to line 25a	24a	↓	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	₩	∔—
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		}	
а	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c	_	+-
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24d	+	+
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		<b>†</b>	+
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%		1	
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	<b>├</b>	X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	İ		
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	]	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	1	$\vdash$	+
	instructions, for applicable filing thresholds, conditions, and exceptions)	1		ŀ
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	İ	]	
	"Yes," complete Schedule L, Part IV	28a	<u> </u>	X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c	<u> </u>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<b>-</b>	Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	20		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30	<del>                                     </del>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>	<del>                                     </del>	<del></del>
	Schedule N, Part II	32	1	x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	<b> </b>	Х
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<del> </del>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
Par	<del></del> · · ·			$\overline{}$
	Check if Schedule O contains a response or note to any line in this Part V	<del></del>		ك
1.	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  1b	4 I		1
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		1
932004	01-20-20		990 (	(2019)
	4		,	

	Statements Regarding Other InS Fillings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		ļ	
	filed for the calendar year ending with or within the year covered by this return  2a 36		- <del></del> -	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<u> </u>		<b> </b> —
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		├—
<b>4</b> a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4.		x
_	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
D	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		$\overline{\mathbf{x}}$
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	~		
	any contributions that were not tax deductible as chantable contributions?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
•	sponsoring organization have excess business holdings at any time during the year?	8_		
9	Sponsoring organizations maintaining donor advised funds.			
a b	Did the sponsoring organization make any taxable distributions under section 4966?  Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b	-	
10	Section 501(c)(7) organizations. Enter	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O	- 1	ĺ	1
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			<del></del> -
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	$\longrightarrow$	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			Х
	excess parachute payment(s) during the year?  If "You " one yestrictions and file Form 4730. Schodule N.	15		
16	If "Yes," see instructions and file Form 4720, Schedule N	16		$\overline{\mathbf{x}}$
13	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  If "Yes," complete Form 4720, Schedule O	.0		<del></del> -
-		Form	990 (	2019)

BAYVIEW FOUNDATION, INC. 39-6092644 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions XCheck if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 10 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 10 **b** Enter the number of voting members included on line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8ь Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13  $\overline{\mathbf{x}}$ Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official 15a X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a  $\overline{\mathbf{x}}$ 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's 16b exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶WI Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Uther (explain on Schedule O) Another's website Own website 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records ALEXIS LONDON - 608-256-7808

53715-1482

601 BAY VIEW, MADISON, WI

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

   List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and title	(B) Average hours per week	box	not c , unte cer an	Pos heck ss pe	rson	ıs bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
1)	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Ойісег	кеу етріоуее	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MARY BERRYMAN-AGARD	2.00	,,		3,5					•	_
PRESIDENT	2.00	Х	_	Х		⊢	⊢	0.	0.	0.
(2) CRAIG STANLEY VICE PRESIDENT	2.00	x		х		١.,		0.	ο.	0.
(3) SCOTT THORNTON	2.00	^		Λ			<u> </u>	0.	0.	<u>U</u> ,
TREASURER	2.00	x		X.				0.	0.	0.
(4) JEAN BERG	2.00		$\vdash$	^			$\vdash$	0.	•	0.
CO-SECRETARY	2.00	x		х				0.	0.	0.
(5) ASSITA DIARRA	2.00			-		-	-		0.	
CO-SECRETARY		x		х				0.	0.	0.
(6) CHUCK ERICKSON	2.00	F						-		
DIRECTOR THROUGH MAY		x						0.	0.	0.
(7) YANG CHA	2.00									
DIRECTOR		Х						0.	0.	0.
(8) TAG EVERS	2.00									
DIRECTOR		Х						0.	0.	0.
(9) KEN AXE	2.00									· - · · · -
DIRECTOR		X				L		0.	0.	0.
(10) XONG VANG	2.00							_		
DIRECTOR		Х						0.	0.	0.
(11) JAMES CORONA	2.00									
DIRECTOR	40.00	Х						0.	0.	0.
(12) ALEXIS LONDON	40.00			3,5				00 564		01 047
EXECUTIVE DIRECTOR		_		X				80,564.	0.	21,347
				_						
		Н	$\vdash$	$\dashv$		$\vdash$	_			
	<del></del>									
		$\vdash$	-	$\dashv$		$\vdash \vdash$				<del></del>
<del></del>				$\dashv$		H				
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Form **990** (2019)

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<u> </u>	Section A. Officers, Directors, True	stees, Key Em (B)	pioy	ees		<u>а ні</u> С)	igne	st (					/E\	
	(A)	Average			Pos		1		(D)	(E) Reportable			(F)	
	Name and title	hours per			neck	more	than is bot		Reportable compensation	compensation			stimate nount	
		week					or/trus		from	from related		_ u.	other	<b>.</b>
		(list any	ēcto			ļ			the	organization			pensa	
		hours for related	9 10	<u>a</u>		ľ	sated		organization (W-2/1099-MISC)	(W-2/1099-MI	SC)		rom th	
		organizations	rustee	l trust		ag	mpens		(VV-2/1099-IVIISC)			-	janizat d relat	
		below	Individual trustee or director	Institutional trustee	l 100	Key employee	est co	<u> </u>					anızatı	
		line)	를	Tig I	Officer	Key e	Highest compensated employee	Former						
			ļ	Ì										
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			1	l			ł							
1b	Subtotal	•						<b></b>	80,564.		0.	2	1,3	
С	Total from continuation sheets to Part V	II, Section A						▶	0.		0.			0.
<u>d</u>	Total (add lines 1b and 1c)							<u> </u>	80,564.		0.	2	1,3	<u>47.</u>
2	Total number of individuals (including but r	ot limited to th	ose	liste	ed at	bove	e) wt	no r	eceived more than \$100	,000 of reportab	le			^
	compensation from the organization	•••	—					_					Yes	No.
2	Did the evacuration list only former officer	director to let	aa 1			lovo		. b.o	shoot componented amp	dayaa aa	ſ		162	NO
3	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s		<i>e</i> , F	кеу є	empi	ioye	e, or	nig	inest compensated emp	noyee on		3		X
4	For any individual listed on line 1a, is the si		le co	amo	ensa	ation	n and	d otl	her compensation from	the organization	ŀ	<u> </u>		
•	and related organizations greater than \$15	•		•					•	o o.gazao		4	_	X
5	Did any person listed on line 1a receive or									dual for services				
	rendered to the organization? If "Yes," con	plete Schedul	e J f	or su	ıch j	pers	son					5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	•	•							·	pensa	ation f	rom	
	the organization Report compensation for	the calendar y	ear e	endi	ng w	vith	or w	rthir T		/ear				
	(A)  Name and business	address	NC	ONE	2				( <b>B</b> ) Description of s	ervices	c	<b>))</b> eamoe	) nsatior	n
								寸	- · · -					
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								-	<del></del>					
	Total number of independent contractors (	ncluding but a	ot lir	mite	d to	tho	م ا م	ted	Labove) who received m	ore than				
-	\$100,000 of compensation from the organi	•	J. 111		0	_	)		. 25575,5 10001704 11					
		<u> </u>		•							ı	Form !	990 (2	2019)

Pa	rt \	/!!	Statement of Revenu	е					
			Check if Schedule O contain	s a response	or note to any l				
						(A) Total revenue	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
						Total revenue		business revenue	l ,
									sections 512 - 514
nts nts	1	а	Federated campaigns	1a	6,006.	•			
ë ë		b	Membership dues	1b					
S, C		С	Fundraising events	1c		]			
ar		d	Related organizations	1d					
ë.Ë		е	Government grants (contribution	s) 1e	168,119.	]			
Š		f	All other contributions, gifts, grants,	and		]			
흌			similar amounts not included above	1f	89,154.				
Contributions, Gifts, Grants and Other Similar Amounts		g	Noncash contributions included in lines 1a-	1f 1g \$	2,042.	1			
a C		h	Total. Add lines 1a-1f		<b>•</b>	263,279.			
					Business Code				
e,	2	а	HUD SUBSIDY PAYM	ENTS	531110	631,531.	631,531.		
Program Service Revenue		b	RENTAL INCOME		531110	356,740.	356,740.		
Se		c				1			
e a a		ď			<del></del>				
Par		e				†		_	
حّ		f	All other program service revenu						
		g				988,271.			
	3	_	Investment income (including div	ridends, intere	est, and	·			
			other similar amounts)	<b>,</b>	<b>&gt;</b>	5,013.			5,013.
	4		Income from investment of tax-e	xempt bond r	proceeds -	*****			
	5		Royalties						
				(i) Real	(II) Personal				
	6	а	Gross rents 6a		,,				i
	`		Less rental expenses 6b			1			i
			Rental income or (loss) 6c						
			Net rental income or (loss)		<b>•</b>				
	7		` '	) Securities	(ii) Other				
	<u> </u>	_	assets other than inventory 7a	<u>′</u>	,,	1			
		ь	Less cost or other basis			-			
ē		_	and sales expenses 7b						
Other Revenue		c	Gain or (loss) 7c			-			
è			Net gain or (loss)		<b>•</b>				
er	R		Gross income from fundraising event	s (not					-
of H	Ĭ	_	including \$	` 1					
			contributions reported on line 1c						
			Part IV, line 18	8a					
		h	Less direct expenses	8b	1	†			
			Net income or (loss) from fundrai		<b></b>			_	
			Gross income from gaming activi					1	
	•	-	Part IV, line 19	9a		]			
		h	Less direct expenses	9b		1			
			Net income or (loss) from gaming		<b>•</b>			-	
			Gross sales of inventory, less ret						
		_	and allowances	10a					į
		h	Less cost of goods sold	10b		1			
			Net income or (loss) from sales o						'
		Ť	The most of (1000) from bales o	· inventory	Business Code				
Miscellaneous Revenue	11	a				-			
ine nue	•	b			<b>—</b>				
ela sve		c			<del></del>				<del></del>
Ş &			All other revenue						
Σ			Total. Add lines 11a-11d	,	<b></b>				
	12	_	Total revenue. See instructions			1,256,563.	988,271.	0.	5,013.
	12					_,,			<u> </u>

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# Form 990 (2019) BAYVIEW FOUND Part IX Statement of Functional Expenses

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

_	Check if Schedule O contains a respons	se or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
_	organizations, foreign governments, and foreign		Į		
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	74,661.	52,174.	13,546.	8,941.
6	Compensation not included above to disqualified	,	<u> </u>		
U	persons (as defined under section 4958(f)(1)) and		1		
	persons described in section 4958(c)(3)(B)			1	
7	Other salaries and wages	376,119.	351,028.	16,130.	8,961.
8	Pension plan accruals and contributions (include	3,0,1130	331,020.	10,130.	
0	section 401(k) and 403(b) employer contributions)	11,987.	11,648.	228.	111.
_	· · · · · · · · · · · · · · · · · · ·	59,654.	47,378.	11,828.	448
9	Other employee benefits	31,287.	27,532.	2,191.	1,564
10	Payroll taxes	31,207.	21,332.	2,131.	1,304
11	Fees for services (nonemployees)	1,300.		1 200	
а	Management	1,300.		1,300.	
Ь	Legal			11 000	
С	Accounting	11,000.		11,000.	
ď	Lobbying	_ <del>.</del>			
е	Professional fundraising services. See Part IV, line 17		<u> </u>		
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	81,977.	80,969.	946.	62
12	Advertising and promotion	1,079.	455.	624.	
13	Office expenses	44,341.	38,537.	5,214.	590.
14	Information technology	4,363.	3,435.	858.	70.
15	Royalties				·
16	Occupancy	229,568.	217,705.	11,056.	807.
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	10,668.	7,482.	2,686.	500.
20	Interest		<u> </u>		
21	Payments to affiliates			·	·
22	Depreciation, depletion, and amortization	53,647.	53,647.		<del></del>
23	Insurance	1,744.	1,657.	87.	<del></del>
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If	1			
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0)				
•	UPDRAFT EXPENSE	7,807.	7,807.		
b			.,,,,,,,,,	<del></del>	
				<del></del>	
C		<del></del>	<del> </del>		
d	All other currences				
	All other expenses	1,001,202.	901,454.	77,694.	22,054.
25_	Total functional expenses. Add lines 1 through 24e	<u> </u>	JU1,434.	11,094.	44,054.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.		1		
	Check here if following SOP 98-2 (ASC 958-720)				
932010	0 01-20-20		1.0		Form <b>990</b> (2019

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<u>Par</u>	רע	Balance Sneet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			326,862.	1	348,626
- 1	2	Savings and temporary cash investments			320,331.	2	563,152
	3	Pledges and grants receivable, net			4,535.	3	59,597
	4	Accounts receivable, net			55,027.	4	8,033
	5	Loans and other receivables from any current or	forme	r officer, director,			
		trustee, key employee, creator or founder, subst	antial o	contributor, or 35%			
		controlled entity or family member of any of thes	e pers	ons		5	
- 1	6	Loans and other receivables from other disquali	fied pe	rsons (as defined			
		under section 4958(f)(1)), and persons described	ın sec	tion 4958(c)(3)(B)		6	_
ş	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
₹	9	Prepaid expenses and deferred charges			9,498.	9	7,714
	10a	Land, buildings, and equipment cost or other					
1		basis Complete Part VI of Schedule D	10a	3,698,336.			<u> </u>
	b	Less accumulated depreciation	10b	3,009,730.	722,531.	10c	688,606
	11	Investments - publicly traded securities			11	_	
	12	Investments - other securities See Part IV, line 1		12			
	13	Investments - program-related See Part IV, line			13		
-	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	9,629.	15	9,761		
	16	Total assets. Add lines 1 through 15 (must equ	1,448,413.	16	1,685,489		
	17	Accounts payable and accrued expenses	58,869.	17	40,602		
	18	Grants payable		18			
	19	Deferred revenue	4,338.	19	4,188		
	20	Tax-exempt bond liabilities				20	<u> </u>
	21	Escrow or custodial account liability Complete I	Part IV	of Schedule D		21	
es	22	Loans and other payables to any current or form	er offic	er, director,		,	
		trustee, key employee, creator or founder, subst	antial c	contributor, or 35%	•		
Liabilities		controlled entity or family member of any of thes	e pers	ons		22	
-	23	Secured mortgages and notes payable to unrela	ted thu	rd parties		23	
	24	Unsecured notes and loans payable to unrelated	third j	parties		24	
	25	Other liabilities (including federal income tax, pa	*				
		parties, and other liabilities not included on lines	17-24)	Complete Part X	0.600		0.564
		of Schedule D			9,629.	25	9,761
-	26	Total liabilities. Add lines 17 through 25			72,836.	26	54,551
္က		Organizations that follow FASB ASC 958, che	ck her				
Net Assets of Fund Balances		and complete lines 27, 28, 32, and 33.					1 570 450
ala	27	Net assets without donor restrictions		-	1,323,833.	27	1,570,450
9	28	Net assets with donor restrictions		. — }	51,744.	28	60,488
5		Organizations that do not follow FASB ASC 9	58, che	eck here 🕨 📖			
5		and complete lines 29 through 33.					
is	29	Capital stock or trust principal, or current funds		<u>}</u>		29	
	30	Paid-in or capital surplus, or land, building, or eq	-	<u>-</u>	<u> </u>	30	
[ ]	31	Retained earnings, endowment, accumulated in	come, c	or other funds	1 275 575	31	1 (20 020
	32	Total net assets or fund balances		ļ	1,375,577.	32	1,630,938
	33	Total liabilities and net assets/fund balances			1,448,413.	33	1,685,489.

Form	990 (2019) BAYVIEW FOUNDATION, INC.	39-6	6092644	Pa	ge <b>12</b>
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,25		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,00		
3	Revenue less expenses Subtract line 2 from line 1	3			61.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,37	<u>5,5</u>	<u>77.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,63	<u>0,9</u>	<u> 38.</u>
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		i		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both		}		ł
	Separate basis Consolidated basis Both consolidated and separate basis				لــــا
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both			•	1 1
	Separate basis Consolidated basis Both consolidated and separate basis		<u>  </u>		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	·		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<b></b>
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho				لــــا
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audr	t		l
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit	t		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 (	(2019)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization BAYVIEW FOUNDATION, INC. 39-6092644 Reason for Public Charity Status (All organizations must complete this part ) See instructions The organization is not a private foundation because it is (For lines 1 through 12, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III ) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, rts supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations g Provide the following information about the supported organization(s) (iv) is the organization listed (ı) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Total

## Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	762,072.	796,166.	188,410.	240,150.	263,279.	2250077.
2	Tax revenues levied for the organ-				_		
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	762,072.	796,166.	188,410.	240,150.	263,279.	2250077.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly	,		•			
	supported organization) included				:		
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4						2250077.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	762,072.	796,166.	188,410.	240,150.	263,279.	2250077.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	530.	504.	459.	3,017.	5,013.	9,523.
9	Net income from unrelated business						-· -
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						2259600.
12	Gross receipts from related activities,	etc (see instruction	ons)			12 4	,020,591.
13	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	ix year as a section	n 501(c)(3)	
	organization, check this box and stop						
Sec	ction C. Computation of Publi	ic Support Per	rcentage				
14	Public support percentage for 2019 (In	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	99.58 %
15	Public support percentage from 2018	Schedule A, Part	II, line 14			15	99.86 %
16a	33 1/3% support test - 2019. If the o	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies	as a publicly suppo	orted organization	•			ightharpoons X
b	33 1/3% support test - 2018. If the o	rganization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	ıs box
	and stop here. The organization quali	fies as a publicly s	upported organiza	ation			▶□
17a	10% -facts-and-circumstances test	t <b>- 2019.</b> If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the "fac-	ts-and-circumstand	ces" test, check th	is box and stop h	ere. Explain in Par	t VI how the organ	ization
	meets the "facts-and-circumstances"	test The organizat	tion qualifies as a	publicly supported	organization		▶□
b	10% -facts-and-circumstances test	t - <b>2018.</b> If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	ie "facts-and-circur	mstances" test, ch	eck this box and s	stop here. Explain	in Part VI how the	
	organization meets the "facts-and-circ	umstances" test	The organization q	ualifies as a public	ly supported orga	nızatıon	▶□
18	Private foundation. If the organization	n did not check a t	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	<u>.</u>
					Sche	dule A (Form 990	or 990-EZ) 2019

## Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Se	ction A. Public Support	olow, piedoc com	proto : art,				
	endar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and		, , , , , , , , , , , , , , , , , , ,				1
	membership fees received (Do not				Ĭ		
	include any "unusual grants ")		ľ				
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose		ļ		1		
3	Gross receipts from activities that	·			†	<del>/</del>	†
_	are not an unrelated trade or bus-	1				[	
	iness under section 513						
4	Tax revenues levied for the organ-			<del>                                     </del>	<del>                                     </del>	<del>                                     </del>	†
•	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities		· -	<del>† -</del>	+-/	<del>                                     </del>	<del> </del>
J	furnished by a governmental unit to						
	the organization without charge			1	ď	į	
_	•			<del>                                     </del>	<del> </del>		<del></del>
	Total. Add lines 1 through 5			<del>                                     </del>	<del> </del>	<del>                                     </del>	<del></del>
7 6	Amounts included on lines 1, 2, and						
	3 received from disqualified persons Amounts included on lines 2 and 3 received			<del>                                     </del>	<del>                                     </del>		<del> </del>
٠	from other than disqualified persons that	!					
	exceed the greater of \$5,000 or 1% of the			/			
_	amount on line 13 for the year		· · · · · · · · · · · · · · · · · · ·	<del>  /                                     </del>	<del> </del>	<del> </del>	<del>                                     </del>
	Add lines 7a and 7b			<del>/</del>	<del> </del>		<del> </del>
	Public support. (Subtract line 7c from line 6)		/	<u> </u>	<u> </u>	<u> </u>	<u> </u>
	endar year (or fiscal year beginning in)	(=) 001E	(5) 2016	(-) 0017	(4) 0040	(=) 0010	(6) T-4-1
		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6 Gross income from interest,		<del> /</del>	ļ			<del>                                     </del>
100	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources		/	<del>                                     </del>	<del> </del>	<del> </del>	
	Unrelated business taxable income	,	/				
	(less section 511 taxes) from businesses	/		ļ	1	ļ	1
	acquired after June 30, 1975	<del></del>			<del> </del>		<del> </del>
	Add lines 10a and 10b	<del></del>			<del> </del>		
''	Net income from unrelated business activities not included in line 10b,	/ '			i		
	whether or not the business is	/ !				1	]
40	regularly carried on			<del></del>	<del> </del>	ļ	<del></del>
12	Other income Do not include gain or loss from the sale of capital	/	•			1	
	assets (Explain in Part VI)	<u>/</u>			<u> </u>	ļ	<del> </del>
	Total support. (Add lines 9, 10c, 11, and 12)	<u></u>		<u> </u>	l	L	<u> </u>
14	First five years. If the Form 990 is for	r the organization's	s first, second, thi	rd, fourth, or fifth t	tax year as a section	on 501(c)(3) organi	zation,
	check this box and stop here		<u></u>				
	ction C. Computation of Publ			<del></del>		<del> </del>	
	Public support percentage for 2019 (			column (f))		15	%
	Public support percentage from 2018					16	%
<u>5e</u>	ction D. Computation of Inve					T I	
17	/ -	•		ine 13, column (f))		17	
18	Investment income percentage from					18	%
19a	33 1/3% support tests - 2019. If the	-					1/ is not
	more than 33 1/3%, check this box a						<b>&gt;</b>
b	33 1/3% súpport tests - 2018. If the						
	line 18 is not more than 33 1/3%, che		-	•		-	<b>P</b>
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t			▶□
9320	23 09-25-19				Sch	edule A (Form 99	0 or 990-EZ) 2019

#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	3a		
	3b		
	3c		
	4b		
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	5a		
	5b	_	
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	9a		
	9b		
	9c		
-	10a		<del></del>
n 99	10b 90 or 99	0-EZ)	2019

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ig trust on l	Nov 20, 1970 (explain in	Part VI) See instructions.
	other Type III non-functionally integrated supporting organizations must co	omplete Se	ctions A through E	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or	T		
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see		-	
	instructions for short tax year or assets held for part of year)			
а	Average monthly value of secunties	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d	· · · · · · · · · · · · · · · · · · ·	
e	Discount claimed for blockage or other		<del>-</del>	,
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	. 4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		<u> </u>
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4	•	
5	Income tax imposed in prior year	5 -		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		]
7	Check here if the current year is the organization's first as a non-functional	ly integrate	d Type III supporting org	anization (see
	instructions)		1	

Schedule A (Form 990 or 990-EZ) 2019

Sec	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exempt			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposition			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	· -			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which t	he organization is responsive	;	
	(provide details in Part VI) See instructions	-		
9	Distributable amount for 2019 from Section C, line 6			
0	Line 8 amount divided by line 9 amount			
	· · · · · · · · · · · · · · · · · · ·	(i)	(ii)	(iii)
eci	cion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2019			
а	From 2014			
b	From 2015			
С	From 2016			
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
i				
i	Remainder Subtract lines 3g, 3h, and 3i from 3f		· · · ·	
4	Distributions for 2019 from Section D,			
	line 7 \$			
а	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			····
_	Remainder Subtract lines 4a and 4b from 4			
<u> </u>	Remaining underdistributions for years prior to 2019, if			
•	any Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2019 Subtract lines 3h			
•	and 4b from line 1. For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2020. Add lines 3			
•	and 4c			
_	Breakdown of line 7			
<u>B</u>				
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
e	Excess from 2019			

Schedule A (Form 990 or 990-EZ) 2019

		n 990 o <u>r</u> 990-	EZ) 20	19 BAY	<b>VIEW</b>	FO	UNDA	TION	, INC	•			39-	609264	4 Page 8
Part		pplementa	al Info	ormatio	n. Provid	de the	explana	ations re	quired by	Part II, II	ne 10, Par	t II, line 17	a or 17b, F	art III, line 12	
	Parl	t IV, Section A	۱, lines	1, 2, 3b, 3	3c, 4b, 4	c, 5a,	6, 9a, 9l	b, 9c, 11	la, 11b, ar	nd 11c, F	Part IV, Sec	ction B, lin	es 1 and 2,	Part IV, Sect	ion C,
	line	1, Part IV, Se	ction [	), lines 2 a	ind 3, Pa	art IV,	Section	E, lines	1c, 2a, 2b	, 3a, and	3b, Part	/, line 1, P	art V, Section	on B, line 1e,	Part V,
		tion D, lines 5 e instructions		a 8, and F	art v, Se	ection	E, lines	2, 5, an	a b Also c	complete	this part i	or any ad	ditional into	rmation	
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#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990.

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

2019
Open to Public Inspection

Name of the organization Employer identification number 39-6092644 BAYVIEW FOUNDATION, INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds Yes are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Nο Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear -Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the penodic monitoring, inspection, handling of 」Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) Yes and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items a Revenue included on Form 990, Part VIII, line 1 26,481. b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

		FOUNDATIO								Page 2
Pa	rt III Organizations Maintaining (									ued)
3	Using the organization's acquisition, access	ion, and other record	ds, che	ck any of the	following th	at make s	ignificant	use of its	3	
	collection items (check all that apply)		_							
а	Public exhibition	c	ן וַן	Loan or exc				T D E 170	. ~	
b	Scholarly research	e	, LX	Other DI	SPLAYE	D FOR	RES	IDENI	. <u>'S</u>	
С	Preservation for future generations									
4	Provide a description of the organization's c							ose in Pai	rt XIII	
5	During the year, did the organization solicit of	or receive donations	of art, h	nistorical trea	asures, or otl	ner sımılar	assets		_	
_	to be sold to raise funds rather than to be m								Yes	X No
Pa	rt IV Escrow and Custodial Arran		ete if th	e organizatio	on answered	"Yes" on	Form 990	0, Part IV,	line 9, or	
	reported an amount on Form 990, Pa								<u> </u>	
1a	Is the organization an agent, trustee, custod	lian or other intermed	diary for	r contribution	ns or other a	ssets not	ıncluded	_	_	
	on Form 990, Part X?							L	<b>∐</b> Yes	L No
Ь	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table						
							<u> </u>		Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f	·		
	Did the organization include an amount on F						ty?		<b>∐</b> Yes	Щ No
	If "Yes," explain the arrangement in Part XIII							_		<u> </u>
Pa	t V Endowment Funds. Complete				T					
		(a) Current year	(b)	Prior year	(c) Two yea	rs back (	d) Three y	ears back	(e) Four y	ears back_
1a	Beginning of year balance				ļ				_	
b	Contributions									
С	Net investment earnings, gains, and losses								ļ	
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs								ļ	
f	Administrative expenses									
g	End of year balance								1	
2	Provide the estimated percentage of the cur	rent year end baland	e (line '	1g, column (a	a)) held as					
а	Board designated or quasi-endowment		_%							
Ь	Permanent endowment	%								
С		%								
	The percentages on lines 2a, 2b, and 2c sho	*								
3a	Are there endowment funds not in the posse	ession of the organiza	ation th	at are held a	nd administe	ered for th	e organiz	zation	_	
	by								Y	'es No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization								3b	
4	Describe in Part XIII the intended uses of the		wment	funds						
Par										
	Complete if the organization answere			T						
	Description of property	(a) Cost or of		(b) Cost		` '	cumulate	ed	(d) Book	value
	<del></del>	basis (investri	nent)		other) 7,344.	аері	reciation		100	244
	Land					2 6	CE E	40		,344.
	Buildings			3,15	3,300.	2,6	65,5	±U•	48/	<u>,760.</u>
	Leasehold improvements			3.5	6 E1c	3	11 17	<del>   -</del>	10	226
	Equipment				6,516. 1,176.		44,19	<del>, , , , , , , , , , , , , , , , , , , </del>		,326.
	Other	aval Form 200 Ded	V a=1:	<del></del>			<del></del>	<del>_</del>		,606.
iotal	. Add lines 1a through 1e (Column (d) must e	quai rorm 990, Part	A, COIUI	กก ( <i>B), II</i> ne 1	uc)				000	,000.

Schedule D (Form 990) 2019

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

Schedule D (Form 990) 2019

932054 10-02-19

## **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

BAYVIEW FOUNDATION, INC.

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**Employer identification number** 39-6092644

FORM 990, PART VI, SECTION A, LINE 4:

THE BOARD UNANIMOUSLY APPROVED UPDATE TO BYLAWS TO MAKE BOARD TERMS FOR ELECTED OFFICIALS CONCURRENT WITH THEIR OFFICE TERMS. THE ORGANIZATIONAL DOCUMENTS WERE ALSO UPDATED TO REFLECT THE CHANGE IN ACCOUNTING PERIOD.

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

THE PREPARED FORM 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR, A MEMBER OF THE FINANCE COMMITTEE, AND THE PRESIDENT BEFORE THE RETURN IS FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

NO MEMBER OF THE BAYVIEW FOUNDATION BOARD OF DIRECTORS OR STAFF SHALL DERIVE ANY PERSONAL PROFIT OR GAIN, DIRECTLY OR INDIRECTLY, BY REASON OF HIS OR HER PARTICIPATION IN THE BAYVIEW FOUNDATION. EACH INDIVIDUAL SHALL DISCLOSE TO THE BAYVIEW FOUNDATION ANY PERSONAL INTEREST THAT HE OR SHE MAY HAVE IN ANY MATTER PENDING BEFORE THE ORGANIZATION AND SHALL REFRAIN FORM PARTICIPATION IN ANY DECISION ON SUCH MATTER.

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

THE ORGANIZATION MADE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.