

Form **990**
Department of the Treasury
Internal Revenue Service

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.

OMB No. 1545-0047
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2019, and ending 06-30-2020

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
THE COMMUNITY PRESERVATION CORPORATION

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
220 EAST 42ND STREET 16TH FLOOR

City or town, state or province, country, and ZIP or foreign postal code
NEW YORK, NY 10017

D Employer identification number
13-2792409

E Telephone number
(212) 869-5300

G Gross receipts \$ 279,925,026

F Name and address of principal officer:
RAFAEL E CESTERO
220 EAST 42ND STREET 16TH FLOOR
NEW YORK, NY 10017

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.COMMUNITYP.COM

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1974 **M** State of legal domicile: NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
TO COMBAT COMMUNITY DETERIORATION, PROMOTE THE GENERAL WELFARE, AND LESSEN THE BURDENS OF GOVERNMENT BY PROVIDING FINANCING FOR LOW & MODERATE INCOME HOUSING.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	13
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	178
6 Total number of volunteers (estimate if necessary)	6	0
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, line 39	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	10,211,635	64,667
9 Program service revenue (Part VIII, line 2g)	53,414,080	42,605,216
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	16,488,048	173,188,996
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	80,113,763	215,858,879
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,291,509	425,600
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	24,230,967	28,981,795
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	42,640,179	41,828,089
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	69,162,655	71,235,484
19 Revenue less expenses. Subtract line 18 from line 12	10,951,108	144,623,395

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	1,186,023,708	1,327,087,827
21 Total liabilities (Part X, line 26)	943,428,740	1,099,623,120
22 Net assets or fund balances. Subtract line 21 from line 20	242,594,968	227,464,707

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: *****
Date: 2021-04-07

DAVID ROTHBERG EVP & CFO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: Preparer's signature: Date: 2021-04-07

Check if self-employed PTIN: P00233256

Firm's name ▶ MSTILLER LLC Firm's EIN ▶ 58-0673524

Firm's address ▶ 250 E HARTSDALE AVE SUITE 34 HARTSDALE, NY 10530 Phone no. (914) 723-7743

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part 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:

TO COMBAT COMMUNITY DETERIORATION, PROMOTE THE GENERAL WELFARE, AND LESSEN THE BURDENS OF GOVERNMENT BY PROVIDING DEBT AND/OR EQUITY FINANCING FOR LOW & MODERATE INCOME HOUSING.

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

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? Yes 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 measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 59,125,000 including grants of \$ 425,600) (Revenue \$ 41,707,117)
See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 59,125,000

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, and Yes/No response. Rows include questions 1 through 21, with sub-questions a-f for items 10, 11, and 12. Questions cover topics like political activities, lobbying, donor funds, conservation easements, and financial reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

Part V Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Main form area containing questions 2a through 16, with various sub-questions and input fields. Includes a table with columns for question numbers and Yes/No responses.

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



Section A. Governing Body and Management

Table with 5 columns: Question, 1a, 1b, Yes, No. Rows include questions about voting members, family relationships, management control, and governance decisions.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 5 columns: Question, Yes, No. Rows include questions about local chapters, written policies, conflict of interest, whistleblower, document retention, and compensation.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed NY, GA
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection.
19 Describe in 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.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: DAVID ROTHBERG 220 EAST 42ND STREET 16TH FLOOR NEW YORK, NY 10017 (212) 869-5300

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, or 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.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
1c Total from continuation sheets to Part VII, Section A										
1d Total (add lines 1b and 1c)							13,552,702	467,889	2,150,380	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ **70**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
IBM CORPORATION PO BOX 643600 PITTSBURGH, PA 15264	INFORMATION TECHNOLOGY	868,063
WPG CONSULTING LLC 113 TENNENT ROAD MORGANVILLE, NJ 07751	INFORMATION TECHNOLOGY	481,800
MCCRACKEN FINANCIAL SOLUTIONS CORP 8 SUBURBAN PARK DRIVE BILLERICA, MA 01821	INFORMATION TECHNOLOGY	420,366
COHN REZNICK LLP 500 EAST PRATT STREET BALTIMORE, MD 21202	ACCOUNTING	292,000
CRAWFORD ADVERTISING ASSOCIATES LTD 216 CONGERS ROAD NEW CITY, NY 10956	ADVERTISING	243,041

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ **14**

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	64,667			
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a - 1f:\$	1g				
	h Total. Add lines 1a-1f		64,667			
Program Service Revenue	2a MORTGAGE LOAN INTEREST	Business Code 522292	26,453,679	26,453,679		
	b SERVICING FEES	522292	9,714,009	9,714,009		
	c MORTGAGE LOAN COMMITMENT FEES	522292	6,403,148	6,403,148		
	d NET RENTAL INCOME	531110	670,544	670,544		
	e OTHER SERVICING INCOME	522292	410,126	410,126		
	f All other program service revenue.		-1,046,290	-1,046,290		
	g Total. Add lines 2a-2f.		42,605,216			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		174,171,315		174,171,315	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real	7,264			
		(ii) Personal				
		b Less: rental expenses	7,264			
		c Rental income or (loss)	0			
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities	62,814,064	262,500		
		(ii) Other				
		b Less: cost or other basis and sales expenses	62,898,284	1,160,599		
		c Gain or (loss)	-84,220	-898,099		
	d Net gain or (loss)		-982,319	-898,099		-84,220
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18					
		b Less: direct expenses				
c Net income or (loss) from fundraising events						
9a Gross income from gaming activities. See Part IV, line 19						
	b Less: direct expenses					
	c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances						
	b Less: cost of goods sold					
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	Business Code					
11a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions		215,858,879	41,707,117	0	174,087,095	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 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	425,600	425,600		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	15,886,024	12,729,657	3,156,367	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	10,152,728	8,410,235	1,742,493	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	623,506	482,445	141,061	
9 Other employee benefits	1,088,151	918,460	169,691	
10 Payroll taxes	1,231,386	985,070	246,316	
11 Fees for services (non-employees):				
a Management				
b Legal	117,247	3,949	113,298	
c Accounting	482,753	482,753		
d Lobbying	40,000	40,000		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	501,028		501,028	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,117,623	520,108	597,515	
12 Advertising and promotion	695,006	695,006		
13 Office expenses	1,126,341	537,494	588,847	
14 Information technology	1,899,072	3,284	1,895,788	
15 Royalties				
16 Occupancy	2,124,878	1,816,438	308,440	
17 Travel	665,128	434,596	230,532	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	258,193	220,242	37,951	
20 Interest	21,911,184	21,911,184		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	1,249,433		1,249,433	
23 Insurance	628,814	15,297	613,517	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a LOAN LOSS RESERVE INCRE	7,975,918	7,975,918		
b DUES & SUBSCRIPTIONS	326,426	284,462	41,964	
c EMPLOYMENT AGENCY FEES	280,408		280,408	
d OTHER LOAN-RELATED EXPE	193,629	193,629		
e All other expenses	235,008	39,173	195,835	
25 Total functional expenses. Add lines 1 through 24e	71,235,484	59,125,000	12,110,484	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	247,954	1	2,841,307
	2 Savings and temporary cash investments	342,967,029	2	390,462,109
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	2,592,105	4	2,615,295
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	457,898	9	795,129
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	18,436,291		
	b Less: accumulated depreciation	10,895,569		
	11 Investments—publicly traded securities	61,504,109	11	173,653,934
	12 Investments—other securities. See Part IV, line 11	165,787,103	12	439,702
	13 Investments—program-related. See Part IV, line 11	548,352,293	13	699,470,252
	14 Intangible assets	40,477,033	14	40,110,962
	15 Other assets. See Part IV, line 11	15,651,144	15	9,158,415
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,186,023,708	16	1,327,087,827	
Liabilities	17 Accounts payable and accrued expenses	12,566,732	17	15,602,402
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	351,848,548	21	373,844,430
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	572,755,439	23	700,536,007
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	6,258,021	25	9,640,281
	26 Total liabilities. Add lines 17 through 25	943,428,740	26	1,099,623,120
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	231,643,860	27	225,867,056
	28 Net assets with donor restrictions	10,951,108	28	1,597,651
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	242,594,968	32	227,464,707	
33 Total liabilities and net assets/fund balances	1,186,023,708	33	1,327,087,827	

Part 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	215,858,879
2	Total expenses (must equal Part IX, column (A), line 25)	2	71,235,484
3	Revenue less expenses. Subtract line 2 from line 1	3	144,623,395
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	242,594,968
5	Net unrealized gains (losses) on investments	5	4,493,744
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 in Schedule O)	9	-164,247,400
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	227,464,707

Part XII Financial Statements and Reporting

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

		Yes	No
<p>1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____</p> <p>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.</p>			
<p>2a Were the organization's financial statements compiled or reviewed by an independent accountant?</p> <p>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:</p> <p><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2a		No
<p>b Were the organization's financial statements audited by an independent accountant?</p> <p>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:</p> <p><input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis</p>	2b	Yes	
<p>c 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?</p> <p>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.</p>	2c	Yes	
<p>3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</p>	3a		No
<p>b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.</p>	3b		

Additional Data

Software ID:

Software Version:

EIN: 13-2792409

Name: THE COMMUNITY PRESERVATION CORPORATION

Form 990 (2019)

Form 990, Part III, Line 4a:

THE COMMUNITY PRESERVATION CORPORATION (CPC) IS A PRIVATE NOT-FOR-PROFIT MORTGAGE LENDER AND INVESTOR SPECIALIZING IN THE FINANCING OF LOW AND MODERATE INCOME HOUSING. CPC'S MISSION IS TO WORK WITH GOVERNMENT TO PRESERVE AND DEVELOP AFFORDABLE HOUSING IN NEW YORK AND, TO A LESSER EXTENT, ELSEWHERE. IN ITS 46 YEARS OF EXISTENCE, CPC HAS FINANCED THE REHABILITATION OR CONSTRUCTION OF 182,286 AFFORDABLE HOUSING UNITS. DURING THE YEAR ENDED JUNE 30, 2020, CPC ORIGINATED \$521,585,194 OF PUBLIC AND PRIVATE FUNDS REPRESENTING FINANCING ON 4,881 UNITS.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
RAFAEL E CESTERO PRESIDENT & CEO, DIRECTOR	28.90	X		X				979,993	207,877	64,597
BRUCE A BEAL DIRECTOR	6.10 0.00	X						0	0	0
EDUARDO DIAZ-PEREZ DIRECTOR	0.00	X						0	0	0
INGRID GOULD ELLEN DIRECTOR	0.00	X						0	0	0
TODD A GOMEZ DIRECTOR	0.00	X						0	0	0
MICHAEL HEGARTY DIRECTOR	0.00	X						0	0	0
CAROL M JOSEPH DIRECTOR	0.00	X						0	0	0
MANUEL MENENDEZ JR DIRECTOR	0.00	X						0	0	0
RICHARD ROBERTS DIRECTOR	0.00	X						0	0	0
GARY RODNEY DIRECTOR	0.00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ANDERS TOMSON DIRECTOR	0.00	X						0	0	0
STEVEN J WEISS DIRECTOR	0.00	X						0	0	0
ALAN WIENER DIRECTOR	0.00	X						0	0	0
CAROLYN AU EXEC VICE PRESIDENT & COO	35.00			X				426,808	0	59,915
RICHARD A KUMRO EVP, GENL COUNSEL, SECY	0.00 9.20			X				324,395	115,463	51,503
DAVID ROTHBERG EXEC VICE PRESIDENT & CFO	33.00 2.00			X				450,624	27,598	66,758
SARAH J SINGMAN EXEC VICE PRESIDENT & COO	35.00			X				544,366	0	68,127
WANDA CHIN SENIOR VICE PRESIDENT	0.00 35.00			X				307,114	0	58,311
RICHARD P CONLEY SENIOR VICE PRESIDENT	35.00 0.00			X				312,384	0	33,748
JEFFREY B ELY SENIOR VICE PRESIDENT	34.70 0.30			X				317,287	3,039	53,481

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ANDREA D GLADSTONE SENIOR VICE PRESIDENT	35.00 0.00			X				274,252	0	53,387
THOMAS P MCGRATH SENIOR VICE PRESIDENT	35.00 0.00			X				389,406	0	54,167
CARY TODD MOORE SENIOR VICE PRESIDENT	35.00 0.00			X				254,617	0	29,293
DOUGLAS L OLCOTT SENIOR VICE PRESIDENT	35.00 0.00			X				290,263	0	59,298
NICHOLAS V PETRAGNANI JR SENIOR VICE PRESIDENT	35.00 0.00			X				242,860	0	55,456
ELIZABETH PROPP SENIOR VICE PRESIDENT	30.20 4.80			X				302,869	48,283	45,906
ROBERT L RIGGS SENIOR VICE PRESIDENT	35.00 0.00			X				332,591	0	63,750
WILLIAM C RUSSO IV SENIOR VICE PRESIDENT	35.00 0.00			X				365,636	0	39,133
MARY SCHOUENBORG-PADEN SENIOR VICE PRESIDENT	35.00 0.00			X				204,762	0	32,461
MICHAEL A SKREBUTENAS SENIOR VICE PRESIDENT	35.00 0.00			X				299,934	0	59,200

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ERIC B BEDERMAN VICE PRESIDENT	35.00 0.00			X				170,551	0	23,169
STEPHANIE C CANZANI VICE PRESIDENT	35.00 0.00			X				180,707	0	53,532
RICHARD T CARR VICE PRESIDENT	35.00 0.00			X				164,747	0	2,950
GEORGE CHUNG VICE PRESIDENT	35.00 0.00			X				197,309	0	32,759
JOYA COHEN VICE PRESIDENT	35.00 0.00			X				60,513	0	508
TRACY M CONLEY VICE PRESIDENT	35.00 0.00			X				125,599	0	15,526
MELANIE A CROCCO VICE PRESIDENT	34.70 0.30			X				202,352	1,938	58,108
ANDREW J D'AGOSTINO VICE PRESIDENT	35.00 0.00			X				157,718	0	50,555
TIMOTHY DEEGAN VICE PRESIDENT	35.00 0.00			X				248,169	0	31,952
JAIME S DEMASO VICE PRESIDENT	35.00 0.00			X				238,205	0	61,749

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL A DEWITT VICE PRESIDENT	35.00 0.00			X				188,502	0	24,435
SARAH C DUPERE OSTRO VICE PRESIDENT	35.00 0.00			X				138,272	0	38,065
SHARON S FIERSTEIN VICE PRESIDENT	34.70 0.30			X				251,901	2,413	32,598
ROGER G GARCIA VICE PRESIDENT	35.00 0.00			X				176,852	0	20,257
LAWRENCE G HAMMOND VICE PRESIDENT	35.00 0.00			X				211,957	0	54,855
LU JIN VICE PRESIDENT	26.30 8.70			X				154,174	51,391	43,813
JACLYN R KEANE VICE PRESIDENT	35.00 0.00			X				108,000	0	22,254
MICHAEL J KROOG VICE PRESIDENT	35.00 0.00			X				129,132	0	45,163
MARC S LEVINE VICE PRESIDENT	35.00 0.00			X				94,394	0	3,900
GLENN P LUNDE VICE PRESIDENT	35.00 0.00			X				168,513	0	20,724

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ERIN K MACHER VICE PRESIDENT	34.70 0.30			X				240,276	2,301	36,714
MATTHEW A MESKILL VICE PRESIDENT	35.00 0.00			X				72,705	0	10,889
JAMES P MILLARD VICE PRESIDENT	35.00 0.00			X				211,392	0	29,487
GOURI S MUKHERJEE VICE PRESIDENT	35.00 0.00			X				159,725	0	9,762
MATTHEW L NELSON VICE PRESIDENT	35.00 0.00			X				8,965	0	1,532
FERGUS P O'CONNELL VICE PRESIDENT	34.70 0.30			X				210,371	2,015	42,375
HELENE S RUDOLPH VICE PRESIDENT	35.00 0.00			X				259,877	0	58,320
MANDAR L SHILOTRI VICE PRESIDENT	34.70 0.30			X				235,266	2,253	22,029
MICHAEL K STATON SR VICE PRESIDENT	35.00 0.00			X				165,268	0	17,809
JOSEPH TANCREDI VICE PRESIDENT	35.00 0.00			X				274,275	0	39,943

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LINDA TANG VICE PRESIDENT	35.00 0.00			X				26,977	0	3,165
LOUIS J TIBERIO VICE PRESIDENT	35.00 0.00			X				78,500	0	16,553
JOHN J TUCCI VICE PRESIDENT	35.00 0.00			X				204,675	0	45,437
JAIME L TUOZZOLO VICE PRESIDENT	35.00 0.00			X				72,711	0	3,900
MICHELLE A VOLPE VICE PRESIDENT	35.00 0.00			X				149,479	0	19,413
DANIEL J WHEELER VICE PRESIDENT	35.00 0.00			X				230,701	0	57,634
ADAM P WILDSTEIN VICE PRESIDENT	35.00 0.00			X				156,915	0	17,064
BRENDA BARNABY AVP HUMAN RESOURCES GENERALIST	34.70 0.30					X		166,054	1,591	53,831
RACHEL A DUNCAN FHA MAP APPROVED UNDERWRITER	35.00 0.00					X		137,416	0	21,745
JANET T LE SENIOR UNDERWRITER	35.00 0.00					X		148,977	0	15,291

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHRISTINA L MORRISON AVP SENIOR ASSET MANAGER	35.00 0.00					X		174,226	0	11,680
LEON SHNAYDER MANAGER OF INFRASTRUCTURE SERVICES	34.70 0.30					X		180,223	1,727	30,444

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

2019

Open to Public Inspection

Name of the organization
THE COMMUNITY PRESERVATION CORPORATION

Employer identification number
13-2792409

Part I 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).**
- 4 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:
- 5 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.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 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.)
- 8 A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 An agricultural research organization described in **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).**
- 12 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.
 - a **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.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having 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.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **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.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, 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).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . . .						
3	The value of services or facilities furnished by a governmental unit to the organization without charge..						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . .						
6	Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4. . .						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . . .						
9	Net income from unrelated business activities, whether or not the business is regularly carried on. . .						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). . .						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (see instructions)					12	
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	
15	Public support percentage for 2018 Schedule A, Part II, line 14	15	
16a	33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b	33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a	10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b	10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,947,641	12,436,044	997,976	10,211,635	64,667	28,657,963
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	37,384,490	33,542,300	52,821,436	53,414,080	42,480,567	219,642,873
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	42,332,131	45,978,344	53,819,412	63,625,715	42,545,234	248,300,836
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.	3,006,254	3,611,975	5,359,458	3,819,712		15,797,399
c Add lines 7a and 7b.	3,006,254	3,611,975	5,359,458	3,819,712		15,797,399
8 Public support. (Subtract line 7c from line 6.)						232,503,437

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6.	42,332,131	45,978,344	53,819,412	63,625,715	42,545,234	248,300,836
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	400,688	8,650,546	4,728,945	16,599,890	174,171,315	204,551,384
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.	400,688	8,650,546	4,728,945	16,599,890	174,171,315	204,551,384
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	42,732,819	54,628,890	58,548,357	80,225,605	216,716,549	452,852,220

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	51.340 %
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	70.710 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	45.170 %
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	24.140 %

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization.

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization.

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
	3a		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
	4b		
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)? <i>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.</i>		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
	5a		
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?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
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? <i>If "Yes," provide detail in Part VI.</i>		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	8		
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))? <i>If "Yes," provide detail in Part VI.</i>		
	9a		
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? <i>If "Yes," provide detail in Part VI.</i>		
	9b		
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? <i>If "Yes," provide detail in Part VI.</i>		
	9c		
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)? <i>If "Yes," answer line 10b below.</i>		
	10a		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section 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):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 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	
Section 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	
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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 13-2792409

Name: THE COMMUNITY PRESERVATION CORPORATION

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

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2019
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If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization THE COMMUNITY PRESERVATION CORPORATION	Employer identification number 13-2792409
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	
Not over \$500,000	20% of the amount on line 1e.	
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	
Over \$17,000,000	\$1,000,000.	
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c. If zero or less, enter -0-		
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?	Yes		
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		55,000
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?		No	
j	Total. Add lines 1c through 1i			55,000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART II-B, LINE 1:	LOBBYING IS NOT A SUBSTANTIAL PART OF THE ACTIVITIES OF THE CORPORATION. DURING THE FISCAL YEAR ENDED JUNE 30, 2020, OFFICERS OF THE CORPORATION DID LOBBY WITH RESPECT TO FEDERAL, STATE, AND LOCAL LEGISLATION RELATING TO AFFORDABLE HOUSING ISSUES, AND THE CORPORATION RETAINED THE SERVICES OF LEGAL COUNSEL TO REPRESENT ITS INTERESTS WITH RESPECT TO LOCAL, STATE, AND FEDERAL LEGISLATIONS. THE CORPORATION ALSO SOMETIMES CONTRIBUTES ARTICLES OR OPINION PIECES TO PUBLICATIONS CONCERNING AFFORDABLE HOUSING ISSUES. DIRECT LOBBYING EXPENSES OF THIS NATURE FOR THE FISCAL YEAR ENDED JUNE 30, 2020, TOTALED \$40,000. LOBBYING EXPENSES OF CORPORATION OFFICERS FOR THE PERIOD (INCLUDING REIMBURSEMENT OF TRAVEL EXPENSES AND A PER HOUR PRORATION OF OFFICERS' SALARIES) ARE ESTIMATED TO HAVE BEEN LESS THAN \$15,000. THE CORPORATION'S TOTAL LOBBYING EXPENDITURES FOR THE FISCAL YEAR ENDED JUNE 30, 2020, ARE THEREFORE ESTIMATED TO HAVE BEEN LESS THAN \$55,000.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2019
Open to Public Inspection

▶ 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.

Name of the organization
THE COMMUNITY PRESERVATION CORPORATION

Employer identification number
13-2792409

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 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? Yes No

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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 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	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 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 SFAS 116 (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 SFAS 116 (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 SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶
- b** Permanent endowment ▶
- c** Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

- b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		4,674,143	224,260	4,449,883
c Leasehold improvements		4,485,978	2,726,994	1,758,984
d Equipment		9,276,170	7,944,315	1,331,855
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				7,540,722

Part VII Investments—Other Securities.

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

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

Part VIII Investments—Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) CONSTRUCTION LOANS	379,780,502	C
(2) CONSTRUCTION LOAN PARTICIPATIONS	175,698,786	C
(3) PERMANENT MORTGAGE LOANS	63,874,268	C
(4) PERMANENT LOAN PARTICIPATIONS	92,614,742	C
(5) LESS RESERVE FOR LOAN LOSSES	-21,963,564	C
(6) INVESTMENT IN REAL ESTATE	9,465,518	C
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	699,470,252	

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO PARTICIPANTS	9,640,281
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	9,640,281

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	59,262,507
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	4,493,744
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	5,540,912
e	Add lines 2a through 2d	2e	10,034,656
3	Subtract line 2e from line 1	3	49,227,851
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	501,028
b	Other (Describe in Part XIII.)	4b	166,130,000
c	Add lines 4a and 4b	4c	166,631,028
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	215,858,879

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	74,392,771
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	3,658,315
e	Add lines 2a through 2d	2e	3,658,315
3	Subtract line 2e from line 1	3	70,734,456
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	501,028
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	501,028
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	71,235,484

Part XIII Supplemental Information

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 13-2792409
Name: THE COMMUNITY PRESERVATION CORPORATION

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B:	AMONG ITS ACTIVITIES, THE CORPORATION MAKES CONSTRUCTION LOANS AND PERMANENT MORTGAGE LOAN S TO BORROWERS FOR LOW AND MODERATE INCOME HOUSING. IN CONJUNCTION WITH THOSE LOANS, THE C ORPORATION HOLDS BORROWER FUNDS IN ESCROW FOR THE PAYMENT OF REAL ESTATE TAXES, PROPERTY I NSURANCE PREMIUMS, INSPECTION FEES, AND OTHER LOAN-RELATED ITEMS. IN ADDITION, THE CORPORA TION HOLDS FUNDS BELONGING TO NEW YORK CITY DEPARTMENT OF HOUSING PRESERVATION AND DEVELOP MENT AND CERTAIN OTHER GOVERNMENT AGENCIES, WHICH PARTICIPATE IN CERTAIN OF THE CORPORATIO N'S LOANS, FOR FUTURE LOAN ADVANCES TO BORROWERS ON BEHALF OF THOSE AGENCIES. AT JUNE 30, 2020, THE CORPORATION HELD APPROXIMATELY \$214 MILLION OF BORROWER ESCROW FUNDS AND APPROXI MATELY \$160 MILLION OF GOVERNMENT AGENCY FUNDS.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	<p>THE CORPORATION USES A MORE-LIKELY-THAN-NOT THRESHOLD FOR RECOGNITION AND DE-RECOGNITION OF TAX POSITIONS TAKEN OR TO BE TAKEN IN A TAX RETURN. IN ACCORDANCE WITH ASC 740, INCOME TAXES, THE CORPORATION ASSESSED ITS TAX POSITIONS FOR ALL OPEN TAX YEARS AS OF JUNE 30, 2020, WHICH ARE FROM JULY 1, 2016 THROUGH JUNE 30, 2019. THE CORPORATION CONCLUDED THAT IT HAD NO MATERIAL UNCERTAIN TAX POSITIONS TO BE RECOGNIZED AT THIS TIME. IF THERE ARE INTEREST AND PENALTIES ON TAX POSITIONS, THE CORPORATION'S POLICY IS TO CLASSIFY THESE AS OTHER EXPENSES.</p>

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	INCOME OF NON-EXEMPT SUBSIDIARIES INCLUDED IN CONSOLIDATED AUDIT 4,380,313. IMPAIRMENT LOSS ON ASSET SOLD 1,160,599.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	DIVIDEND FROM NON-EXEMPT SUBSIDIARY 166,130,000.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	EXPENSES OF NON-EXEMPT SUBSIDIARIES INCLUDED IN CONSOLIDATED AUDIT 2,497,716. IMPAIRMENT LOSS ON ASSET SOLD 1,160,599.

Supplemental Information

Return Reference	Explanation
FORM 990, PART VIII, LINE 3 AND SCHEDULE D, PART XI, LINE 2D	DURING THE FISCAL YEAR ENDING 06/30/2020, CPC RESOURCES INC., A WHOLLY-OWNED NON-EXEMPT SUBSIDIARY OF THE ORGANIZATION, ISSUED A DIVIDEND TO THE ORGANIZATION OF \$166,130,000 WHICH RESULTED FROM THE SUBSIDIARY'S SALE OF AN INTEREST IN A LARGE REAL ESTATE PROJECT.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

Name of the organization THE COMMUNITY PRESERVATION CORPORATION

Employer identification number

13-2792409

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 17
3 Enter total number of other organizations listed in the line 1 table 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	THE CORPORATION MAKES CHARITABLE CONTRIBUTIONS FROM ITS OWN FUNDS FROM TIME TO TIME TO NON-PROFITS WITH WHICH THE CORPORATION COLLABORATES IN CARRYING OUT ITS TAX-EXEMPT PURPOSES. EXAMPLES INCLUDE THE NEW YORK HOUSING CONFERENCE AND THE CITIZENS HOUSING AND PLANNING COUNCIL, AMONG MANY OTHERS. THE CHARITABLE CONTRIBUTIONS ARE RELATIVELY MODEST IN AMOUNT, AND HELP MEET THE OPERATING BUDGETS OF THE RECIPIENT ORGANIZATIONS.

Additional Data

Software ID:
Software Version:
EIN: 13-2792409
Name: THE COMMUNITY PRESERVATION CORPORATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN FRIENDS OF GENESIS JERUSALEM INC 3 RICHLAND DRIVE SPRINGFIELD, NJ 07081	13-3640237	501(C)(3)	5,400				GENERAL SUPPORT
BANANA KELLY COMMUNITY IMPROVEMENT ASSOCIATION INC 863 PROSPECT AVE BRONX, NY 10459	13-2934000	501(C)(3)	20,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY FUTURES INC CENTER FOR AN URBAN FUTURE 120 WALL STREET NEW YORK, NY 10005	13-3185114	501(C)(3)	10,000				GENERAL SUPPORT
CITIZENS HOUSING & PLANNING COUNCIL OF NEW YORK INC 42 BROADWAY NEW YORK, NY 10004	13-1782468	501(C)(3)	40,863				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY DESIGN CENTER ROCHESTER INC 1115 EAST MAIN ST ROCHESTER, NY 14609	65-1188843	501(C)(3)	10,000				GENERAL SUPPORT
COMMUNITY LEAGUE OF THE HEIGHTS 500 WEST 159TH ST NEW YORK, NY 10032	13-2564241	501(C)(3)	30,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FIND AID FOR THE AGED INC 160 WEST 71ST STREET NEW YORK, NY 10023	13-2666921	501(C)(3)	10,000				GENERAL SUPPORT
HOPE COMMUNITY INC 174 EAST 104TH STREET NEW YORK, NY 10029	23-7013134	501(C)(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HUDSON RIVER HOUSING INC 313 MILL STREET POUGHKEEPSIE, NY 12601	22-2456648	501(C)(3)	6,036				GENERAL SUPPORT
MHANY MANAGEMENT INC 470 VANDERBILT AVE BROOKLYN, NY 11238	72-1303737	501(C)(3)	30,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MORTGAGE BANKERS ASSOCIATION OF NY INC PO BOX 7361 HICKSVILLE, NY 11802	52-1225868	501(C)(6)	5,280				GENERAL SUPPORT
NEW YORK HOUSING CONFERENCE 247 WEST 37TH ST NEW YORK, NY 10018	26-3846042	501(C)(3)	15,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW YORK UNIVERSITY 139 MACDOUGAL ST NEW YORK, NY 10012	13-5562308	501(C)(3)	10,500				GENERAL SUPPORT
SUPPORTIVE HOUSING NETWORK OF NEW YORK INC 247 WEST 37TH ST NEW YORK, NY 10018	13-3755149	501(C)(3)	5,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UP FOR GROWTH ACTION INC 1875 K STREET NW WASHINGTON, DC 20006	82-3579775	501(C)(4)	10,000				GENERAL SUPPORT
URBAN HOMESTEADING ASSISTANCE BOARD INC 120 WALL STREET NEW YORK, NY 10005	13-2902798	501(C)(3)	6,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
URBAN LAND INSTITUTE 2001 L STREET NW WASHINGTON, DC 20036	23-7133957	501(C)(3)	10,000				GENERAL SUPPORT
VINCENT DEPAUL FOUNDATION INC 1931 BUFFALO ROAD ROCHESTER, NY 14624	22-3884274	501(C)(3)	7,500				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTHAB INC 8 BASHFORD STREET YONKERS, NY 10701	06-1064281	501(C)(3)	14,613				GENERAL SUPPORT

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047

2019

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**

▶ **Attach to Form 990.**

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

Department of the Treasury
Internal Revenue Service

Name of the organization
THE COMMUNITY PRESERVATION CORPORATION

Employer identification number
13-2792409

Part I Questions Regarding Compensation

	Yes	No								
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?</p>	2									
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input checked="" type="checkbox"/> Compensation committee</td> <td><input checked="" type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a	No								
	4b	No								
	4c	No								
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a	No								
	5b	No								
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a	No								
	6b	No								
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.</p>	7	No								
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.</p>	8	No								
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

Part III **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
21 RICHARD T CARR VICE PRESIDENT	(i)	143,694	0	21,053	1,444	1,506	167,697	0
	(ii)	0	0	0	0	0	0	0
1 GEORGE CHUNG VICE PRESIDENT	(i)	133,260	37,000	27,049	21,141	11,618	230,068	0
	(ii)	0	0	0	0	0	0	0
2 MELANIE A CROCCO VICE PRESIDENT	(i)	140,146	48,535	13,671	21,272	36,501	260,125	0
	(ii)	1,342	465	131	204	131	2,273	0
3 ANDREW J D'AGOSTINO VICE PRESIDENT	(i)	123,993	15,000	18,725	19,490	31,065	208,273	0
	(ii)	0	0	0	0	0	0	0
4 TIMOTHY DEEGAN VICE PRESIDENT	(i)	204,894	27,000	16,275	9,765	22,187	280,121	0
	(ii)	0	0	0	0	0	0	0
5 JAIME S DEMASO VICE PRESIDENT	(i)	165,683	50,000	22,522	25,584	36,165	299,954	0
	(ii)	0	0	0	0	0	0	0
6 MICHAEL A DEWITT VICE PRESIDENT	(i)	150,157	12,000	26,345	22,867	1,568	212,937	0
	(ii)	0	0	0	0	0	0	0
7 SARAH C DUPERE OSTRO VICE PRESIDENT	(i)	106,384	20,000	11,888	16,640	21,425	176,337	0
	(ii)	0	0	0	0	0	0	0
8 SHARON S FIERSTEIN VICE PRESIDENT	(i)	171,324	52,497	28,080	26,249	5,829	283,979	0
	(ii)	1,641	503	269	251	269	2,933	0
9 ROGER G GARCIA VICE PRESIDENT	(i)	136,800	28,000	12,052	10,361	9,896	197,109	0
	(ii)	0	0	0	0	0	0	0
10 LAWRENCE G HAMMOND VICE PRESIDENT	(i)	150,325	35,000	26,632	23,872	30,983	266,812	0
	(ii)	0	0	0	0	0	0	0
11 LU JIN VICE PRESIDENT	(i)	113,637	26,250	14,287	17,063	16,300	187,537	0
	(ii)	37,879	8,750	4,762	5,688	4,762	61,841	0
12 MICHAEL J KROOG VICE PRESIDENT	(i)	98,507	20,000	10,625	15,068	30,095	174,295	0
	(ii)	0	0	0	0	0	0	0
13 GLENN P LUNDE VICE PRESIDENT	(i)	149,126	10,000	9,387	19,674	1,050	189,237	0
	(ii)	0	0	0	0	0	0	0
14 ERIN K MACHER VICE PRESIDENT	(i)	161,113	53,488	25,675	24,771	11,460	276,507	0
	(ii)	1,543	512	246	237	246	2,784	0
15 JAMES P MILLARD VICE PRESIDENT	(i)	160,663	39,000	11,729	23,102	6,385	240,879	0
	(ii)	0	0	0	0	0	0	0
16 GOURI S MUKHERJEE VICE PRESIDENT	(i)	120,891	19,000	19,834	697	9,065	169,487	0
	(ii)	0	0	0	0	0	0	0
17 FERGUS P O'CONNELL VICE PRESIDENT	(i)	146,309	48,535	15,527	14,506	27,581	252,458	0
	(ii)	1,401	465	149	139	149	2,303	0
18 HELENE S RUDOLPH VICE PRESIDENT	(i)	185,702	51,000	23,175	28,086	30,234	318,197	0
	(ii)	0	0	0	0	0	0	0
19 MANDAR L SHILOTRI VICE PRESIDENT	(i)	173,869	49,526	11,871	1,457	20,444	257,167	0
	(ii)	1,665	474	114	14	114	2,381	0

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
41 MICHAEL K STATON SR VICE PRESIDENT	(i)	115,535	24,000	25,733	13,364	4,445	183,077	0
	(ii)	0	0	0	0	0	0	0
1 JOSEPH TANCREDI VICE PRESIDENT	(i)	193,289	62,000	18,986	9,401	30,542	314,218	0
	(ii)	0	0	0	0	0	0	0
2 JOHN J TUCCI VICE PRESIDENT	(i)	144,037	45,000	15,638	21,239	24,198	250,112	0
	(ii)	0	0	0	0	0	0	0
3 MICHELLE A VOLPE VICE PRESIDENT	(i)	110,489	20,650	18,340	3,090	16,323	168,892	0
	(ii)	0	0	0	0	0	0	0
4 DANIEL J WHEELER VICE PRESIDENT	(i)	176,700	41,000	13,001	25,691	31,943	288,335	0
	(ii)	0	0	0	0	0	0	0
5 ADAM P WILDSTEIN VICE PRESIDENT	(i)	106,725	50,000	190	0	17,064	173,979	0
	(ii)	0	0	0	0	0	0	0
6 BRENDA BARNABY AVP HUMAN RESOURCES GENERALIST	(i)	128,609	34,668	2,777	17,825	35,808	219,687	0
	(ii)	1,232	332	27	171	27	1,789	0
7 RACHEL A DUNCAN FHA MAP APPROVED UNDERWRITER	(i)	107,964	12,000	17,452	1,030	20,715	159,161	0
	(ii)	0	0	0	0	0	0	0
8 JANET T LE SENIOR UNDERWRITER	(i)	117,668	24,768	6,541	2,528	12,763	164,268	0
	(ii)	0	0	0	0	0	0	0
9 CHRISTINA L MORRISON AVP SENIOR ASSET MANAGER	(i)	140,133	28,000	6,093	2,155	9,525	185,906	0
	(ii)	0	0	0	0	0	0	0
10 LEON SHNAYDER MANAGER OF INFRASTRUCTURE SERVICES	(i)	151,966	27,734	523	16,494	13,787	210,504	0
	(ii)	1,456	266	5	158	5	1,890	0

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No. 1545-0047

2019

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service

Name of the organization THE COMMUNITY PRESERVATION CORPORATION

Employer identification number

13-2792409

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

Table with 5 columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. \$
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

Table with 9 columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No)

Total \$

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) VARIOUS DIRECTORS	DIRECTORS		SEVERAL OF THE CORPORATION'S DIRECTORS AT ANY GIVEN TIME ARE INCUMBENT SENIOR OFFICIALS OF FINANCIAL INSTITUTIONS THAT PROVIDE CREDIT TO AND/OR HAVE TRANSACTIONS WITH THE CORPORATION IN THE ORDINARY COURSE OF BUSINESS, SUCH AS PURCHASING LOAN PARTICIPATIONS.		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)**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.

OMB No. 1545-0047

2019**Open to Public Inspection**

Department of the Treasury

Name of the organization

THE COMMUNITY PRESERVATION CORPORATION

Employer identification number

13-2792409

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	PRIOR TO FILING, A DRAFT COPY OF FORM 990 WAS REVIEWED FOR COMPLETENESS AND ACCURACY BY MEMBERS OF THE CORPORATION'S MANAGEMENT AND WAS ALSO SUPPLIED TO THE COMPENSATION COMMITTEE OF THE CORPORATION'S BOARD OF DIRECTORS FOR COMMENT. THE FINAL REVIEWED VERSION OF FORM 990 WAS THEN PROVIDED TO EACH MEMBER OF THE BOARD OF DIRECTORS PRIOR TO THE FORM'S ELECTRONIC FILING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	RESPONSES ARE REVIEWED BY THE ORGANIZATION'S INDEPENDENT AUDITORS AS PART OF THE ANNUAL FINANCIAL AUDIT.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	EACH YEAR THE CORPORATION PARTICIPATES IN MARKET SURVEYS RELEVANT TO BOTH THE REAL ESTATE FINANCIAL SERVICES INDUSTRY AND "GENERAL" INDUSTRIES, WHICH INCLUDES THE NOT FOR PROFIT IN DUSTRY. THE CORPORATION THEN BENCHMARKS ITS TOTAL COMPENSATION AGAINST A BLEND OF PEERS IN THE FINANCIAL SERVICES INDUSTRIES AND THE NOT FOR PROFIT INDUSTRY. THE CORPORATION'S COMP ENSATION COMMITTEE, COMPRISED OF MEMBERS OF THE BOARD OF DIRECTORS, REVIEWS AND APPROVES A NNUALLY THE RECOMMENDED TOTAL COMPENSATION FOR THE CORPORATION'S SENIOR MANAGEMENT AND APP ROVES GENERALLY, THE BASE COMPENSATION AND BONUS COMPENSATION TOTALS FOR REMAINDER OF THE CORPORATION. THE COMPENSATION COMMITTEE'S DECISIONS ARE BASED ON MARKET DATA, BUSINESS CON DITIONS AND THE OVERALL COMPETITIVE MARKETPLACE. THE CORPORATION'S BOARD OF DIRECTORS THEN REVIEWS AND APPROVES ALL FINAL COMPENSATION RECOMMENDATIONS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE CORPORATION'S CHARTER IS A PUBLIC DOCUMENT AVAILABLE FROM THE NEW YORK SECRETARY OF STATE. A SUMMARY OF THE CORPORATION'S AUDITED FINANCIAL STATEMENTS IS INCLUDED EACH YEAR IN THE CORPORATION'S ANNUAL REPORT, WHICH IS AVAILABLE ON THE CORPORATION'S WEBSITE, AND THE FULL AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON WRITTEN REQUEST. THE CORPORATION'S BY-LAWS, CONFLICT OF INTEREST POLICY AND SIMILAR DOCUMENTS ARE NOT GENERALLY MADE AVAILABLE TO THE PUBLIC.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	REDUCTION IN EQUITY IN NON-EXEMPT SUBSIDIARIES DUE TO DIVIDEND DISTRIBUTION -164,247,400.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XII, LINE 2C:	THE CORPORATION HAS HAD NO CHANGE FROM THE PRIOR YEAR IN THE PROCESS FOR SELECTION OF AUDITOR OR THE OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
THE COMMUNITY PRESERVATION CORPORATION

Employer identification number

13-2792409

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

See Additional Data Table

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) CPC RESOURCES INC 28 EAST 28TH STREET NEW YORK, NY 10016 13-3692436	REAL ESTATE INVESTMENT TRUST	NY	THE COMMUNITY PRESERVATION CORPORATION	C	238,513,254	440,518	100.000 %	Yes	
(2) CPC TRS LLC 28 EAST 28TH STREET NEW YORK, NY 10016 47-0979800	INVESTMENT, CONSULTING, REAL ESTATE DEVELOPMENT	NY	CPC RESOURCES INC	C	305,522	482,770	100.000 %	Yes	

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	Yes	
b Gift, grant, or capital contribution to related organization(s)		No
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)	Yes	
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)		No
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o Sharing of paid employees with related organization(s)	Yes	
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)CPC RESOURCES INC	A	7,264	CASH
(2)CPC RESOURCES INC	F	166,130,000	CASH
(3)CPC RESOURCES INC	N	25,736	CASH
(4)CPC RESOURCES INC	O	234,411	CASH
(5)CPC RESOURCES INC	Q	260,147	CASH

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 13-2792409
Name: THE COMMUNITY PRESERVATION CORPORATION

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
CPC REO LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			THE COMMUNITY PRESERVATION CORPORATION
CPC REO NJ LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			THE COMMUNITY PRESERVATION CORPORATION
CPC REO CT LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			THE COMMUNITY PRESERVATION CORPORATION
CPC FUNDING SPE 1 LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			THE COMMUNITY PRESERVATION CORPORATION
CPC FUNDING SPE 2 LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			THE COMMUNITY PRESERVATION CORPORATION
CPC FUNDING SPE 3 LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			THE COMMUNITY PRESERVATION CORPORATION
CPC COMMUNITY CAPITAL ADVISORS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			THE COMMUNITY PRESERVATION CORPORATION
CPC MORTGAGE COMPANY LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	AGENCY LENDING	NY			CPC COMMUNITY CAPITAL ADVISORS LLC
CCA CHARLOTTE SQUARE LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC COMMUNITY CAPITAL ADVISORS LLC
CCA 320 STERLING LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC COMMUNITY CAPITAL ADVISORS LLC
CCA RIVERDALE OSBORNE TOWERS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC COMMUNITY CAPITAL ADVISORS LLC
CCA 270 ST NICHOLAS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC COMMUNITY CAPITAL ADVISORS LLC
CCA BEDFORD ARMORY LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC COMMUNITY CAPITAL ADVISORS LLC
CCA ENY LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC COMMUNITY CAPITAL ADVISORS LLC
CCA ST ANN'S LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC COMMUNITY CAPITAL ADVISORS LLC
MILLBROOK NOMINEE LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO LLC
10505 BEACH HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO LLC
90035 MYRTLE HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	CT			CPC REO CT LLC
10682 HENRY STREET HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO LLC
10799 BARMANN HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO LLC

Form 990, Schedule R, Part I - Identification of Disregarded Entities

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Total income	(e) End-of-year assets	(f) Direct Controlling Entity
10756 ROSE STREET HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO LLC
10698 CONKLIN STREET HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO LLC
4212 FEDERAL STREET HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO NJ LLC
7960 FOURTH STREET HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO LLC
CORNERSTONE 7973 HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO LLC
CORNERSTONE 70240 HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO LLC
CORNERSTONE 70239 HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO LLC
CORNERSTONE 70238 HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO LLC
CORNERSTONE 70023 HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO LLC
7806 N GOODMAN STREET HOLDINGS LLC 28 EAST 28TH STREET 9TH FLOOR NEW YORK, NY 10016 13-2792409	TITLEHOLDER	NY			CPC REO LLC