#### 990-PF

Department of the Treasury Internal Revenue Service

#### **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

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

2019

OMB No. 1545-0047

Open to Public Inspection

► Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2019 or tax year beginning Oct 1, 2019, and ending Sep 30, 2020 Name of foundation A Employer identification number The Coast Foundation, Inc. 74-6087573 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 707 Hill Country Drive 114 (210) 464-1030 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ Kerrville TX 78028-5910 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here . . . ▶ Final return Amended return 2. Foreign organizations meeting the 85% test, X Address change Name change check here and attach computation · · ▶ □ H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated under ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation section 507(b)(1)(A), check here . . . . ▶ Fair market value of all assets at J Accounting method: ☒ Cash ☐ Accrual If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ 61,733. (Part I, column (d), must be on cash basis.) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net amounts in columns (b), (c), and (d) may not necessarily equal for charitable expenses per income income purposes books the amounts in column (a) (see instructions).) (cash basis only) 1 Contributions, gifts, grants, etc., received (attach schedule) Check ► X if the foundation is not required to attach Sch. B 2 3 Interest on savings and temporary cash investments 242. 242. Dividends and interest from securities . . . . 4 Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a Revenue Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . 7 Net short-term capital gain . . . . . Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold . . . c Gross profit or (loss) (attach schedule) . . . . Other income (attach schedule) . . . . . . 11 12 Total. Add lines 1 through 11 . . . . . . . 242. 242 Compensation of officers, directors, trustees, etc. 13 Operating and Administrative Expenses 14 Other employee salaries and wages . . . . . 15 Pension plans, employee benefits . . . . . 16a Legal fees (attach schedule)

ā	17	Interest				
==	187970	Interest				
2	18	Taxes (attach schedule) (see instructions) See. Stmt	7.			
Administra	19	Depreciation (attach schedule) and depletion				
ō	20	Occupancy			the state of the s	
	21	Travel, conferences, and meetings				
and	22	Printing and publications				
6	23	Other expenses (attach schedule) See. Stmt.	800.			800.
Operating and	24	Total operating and administrative expenses.  Add lines 13 through 23	3,332.			3,325.
ğ	25	Contributions, gifts, grants paid				
0	26	Total expenses and disbursements. Add lines 24 and 25	3,332.			3,325.
	27	Subtract line 26 from line 12:				
	а	Excess of revenue over expenses and disbursements	-3,090.			
	b	Net investment income (if negative, enter -0-) .		242.		

2,525.

c Adjusted net income (if negative, enter -0-)

Accounting fees (attach schedule) L-16b Stmt

Other professional fees (attach schedule) . .

2,525.

	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	E	nd of	year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash—non-interest-bearing	0.		0.	0.
	2	Savings and temporary cash investments	64,823.	61,73	3.	61,733.
	3	Accounts receivable -				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ►				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable	A			
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)	No.			
	7	Other notes and loans receivable (attach schedule) ▶				
		Less: allowance for doubtful accounts ▶				
Assets	8	inventories for sale or use				
SSE	9	Prepaid expenses and deferred charges				
ä	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments - corporate stock (attach schedule)				
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments - other (attach schedule)				
	14	Land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule)				
	15	Other assets (describe ▶)				
	16	<b>lotal assets</b> (to be completed by all filers—see the				
		instructions. Also, see page 1, item I)	64,823.	61,73	3.	61,733.
	17	Accounts payable and accrued expenses				
S	18	Grants payable				
iţie	19	Deferred revenue				
þi	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe				
	23	Total liabilities (add lines 17 through 22)				
Balances		Foundations that follow FASB ASC 958, check here				
Ē		and complete lines 24, 25, 29, and 30.				
ale	24	Net assets without donor restrictions				
8	25	Net assets with donor restrictions				
Ĕ		Foundations that do not follow FASB ASC 958, check here ► 🗵				
Ī	00	and complete lines 26 through 30.				
ō	26	Capital stock, trust principal, or current funds				
şţs	27	Paid-in or capital surplus, or land, bldg., and equipment fund				
SS	28	Retained earnings, accumulated income, endowment, or other funds	64,823.	61,73		
A	29 30	Total net assets or fund balances (see instructions)	64,823.	61,73	3.	
Net Assets or Fund	30	<b>Total liabilities and net assets/fund balances</b> (see instructions)	64 000	61 70	2	
	rt III	Analysis of Changes in Net Assets or Fund Balances	64,823.	61,73	3.	
-		al net assets or fund balances at beginning of year—Part II, colu	mn (a) line 20 (must	agree with	T	
'		of year figure reported on prior year's return)			1	64,823.
2		er amount from Part I, line 27a			2	-3,090.
3					3	3,090.
4		lines 1, 2, and 3			4	61,733.
-					5	01,700.
6	Tota	reases not included in line 2 (itemize) ►	Part II, column (b), lin	e 29	6	61,733.

	(a) List and describe the kind(s 2-story brick warehouse;	cosses for Tax on Investmen s) of property sold (for example, real estate or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a						
b						
С						
d						
е			-			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale		n or (loss) f) minus (g))
a						
b						
d						
e						
Е	Complete only for assets showi	ng gain in column (h) and owned by the	ne foundation	on 12/31/69		-
	70 200 200 20 COVID-10	(j) Adjusted basis		ss of col. (i)		I. (h) gain minus t less than -0-) <b>or</b>
(7. <u>24</u> 2)	(i) FMV as of 12/31/69	as of 12/31/69	The state of the s	. (j), if any		rom col. (h))
a b						with the same of t
C						
d						
e						Y THE STREET
2	Capital gain net income or (r	( If gain also	enter in Pa	art Lline 7		
	Part I, line 8				2	
r o ect is t	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the se	ection 4942 tax on the distributable	d Tax on N tion 4940(a) le amount o	tax on net invest	tment income.)	☐ Yes ⊠
ect as t Ye:	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't quality.	r Section 4940(e) for Reduce the foundations subject to the section part blank. The ection 4942 tax on the distributable alify under section 4940(e). Do no	d Tax on N tion 4940(a) le amount o t complete t	tax on net invest f any year in the his part.	t Income tment income.) base period?	☐ Yes ⊠
or o sect	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the ses," the foundation doesn't quality the foundation doesn't quality the appropriate amounts.	r Section 4940(e) for Reduce the foundations subject to the section part blank. Section 4942 tax on the distributable	d Tax on N tion 4940(a) le amount o t complete t	tax on net invest f any year in the his part.	t Income tment income.) base period?	
ect s t Ye:	Qualification Under ptional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't quality.	r Section 4940(e) for Reduce the foundations subject to the section part blank. The ection 4942 tax on the distributable alify under section 4940(e). Do no	d Tax on N tion 4940(a) le amount or t complete t see the instr	tax on net invest f any year in the his part.	t Income tment income.) base period? aking any entries.	(d) tribution ratio divided by col. (c))
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1a Exempt operating foundations described in section (440(gi)2, check here □ and enter "NA" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ □ and enter 1% of Part I, line 27b. All other elements (foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12; oc. (b). Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0.) Add lines 1 and 2  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0.) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0. Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0. Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0. Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0. Tax based with application for extresion of time to file (Form 8868)  Exempt foreign organizations—tax withheld at source Tax paid with application for extresion of time to file (Form 8868)  Tax due. If the total of lines 6 at through 6d Tax due. If the total of lines 6 at through 6d Tax due. If the total of lines 5 and 6 is more than line 7, enter amount owed  Tax due. If the total of lines 5 and 6 is more than line 7, enter amount owed  Tax due. If the total of lines 5 and 6 is more than line 7, enter amount owed  Tax due. If the total of lines 5 and 6 is more than line 7, enter amount owed  Tax due. If the total of lines 5 and 6, enter the amount overpaid  Tax due. If the total of lines 5 and 6, enter the amount overpaid  Tax due. If the total of lines 5 and 6, enter the amount overpaid  Tax due. If the total of lines 5 and 6, enter the amount overpaid  Tax due. If the total of lines 6 at through 6d  Tax due. If the total of lines 6 at 100 due to 100 due	Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—se	e instr	uctio	ns)
Date of fulling or determination latter:    Cattach copy of letter if necessary—see instructions    1   5.	1a				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ and enter 15 of Part I, line 727b.  c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)  3 Add lines 1 and 2.  3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5  5 Credits/Payments:  a 2019 estimated tax payments and 2018 overpayment credited to 2019  6 Exempt foreign organizations—tax withheld at source  6 December 1 of 10 trace 1 of 10 trac					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  3	b				5.
Part I, line 12, col. (b)  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-1  3 Add lines 1 and 2  5 Subtitle A (nocme) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-1  5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-1  5 Coredits/Payments:  2 019 estimated tax payments and 2018 overpayment credited to 2019  6 Backup withholding erroneously withheld at source  6 Bb Exempt foreign organizations— tax withheld at source  6 Bc Care Tax paid with application for extension of time to file (Form 8868)  6 Backup withholding erroneously withheld  7 Total credits and payments. Add lines 6a through 6d  8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached  8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  11 Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded  11 Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded  11 During the tax year. did the foundation attempt to influence any national, state, or local legislation or did it participate or intervenie in any political campaign?  10 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition  11 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  12 Chi Che foundation file Form 1120-POL for this year?  13 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation made any changes, not previously reported to the IRS; if the during instrument, articles of incorporation, or bylaws, or other similar instruments? If Yes," attach a conformed copy of the chan		here ▶ ☐ and enter 1% of Part I, line 27b			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0- 2 3	C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of			
3 Add lines 1 and 2 4 Subtitle A (income) lax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-5 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 5 Credits/Payments: 2019 settimated tax payments and 2018 overpayment credited to 2019 6a b Exempt foreign organizations—tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld at source 6b d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 6 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 7 Total credits and payments. Add lines 6a through 6d 6 Enter the amount of line 10 to be: Credited to 2020 estimated tax ► Refunded ▶ 10 0 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10 0 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10 0 The amount of line 10 to be: Credited to 2020 estimated tax ► Refunded ▶ 11  Part VII-A Statements Regarding Activities 1 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  bid it spend more than \$100 during the year (either directly or indirectly) for political purposses? See the instructions for the definition  If the answer is "Yee" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation in connection with the activities.  c Did the foundation file Form 1120-PDL for this year?  d) Charte remover the ement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$  Has the foundation have any exhapes, not previously reported to the IRS, in its governing instrument					
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Has the foundation engaged in any activities that have not previously been reported to the IRS?	е		1		
If "Yes," attach a detailed description of the activities.  3	2		2	THE ROLL OF	v
Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.  AB Did the foundation have unrelated business gross income of \$1,000 or more during the year?  BI If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T.  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?  Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV  Enter the states to which the foundation reports or with which it is registered. See instructions.  TX  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation.  By Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV  Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	2				+^
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<ul> <li>Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: <ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?</li> <li>Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV</li> </ul> </li> <li>Ba Enter the states to which the foundation reports or with which it is registered. See instructions. ►  TX  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation</li></ul>	5				×
<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?</li></ul>		If "Yes," attach the statement required by General Instruction T.			
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?</li> <li>Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV</li> <li>Enter the states to which the foundation reports or with which it is registered. See instructions. ►</li> <li>TX</li> <li>If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation</li></ul>	6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
conflict with the state law remain in the governing instrument?		By language in the governing instrument, or			
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complete Part XIV	9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	or "		
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					×
	10				
	10			)	×

Part	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	^
	Website address ► N/A			
14	The books are in care of ▶ Charles F. Hall, Jr. Telephone no. ▶ (210)	64-	1030	
15	Located at ► 707 Hill Country Drive #114 Kerrville TX ZIP+4 ► 78028- Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	-591	0	<b>&gt;</b> [
	and enter the amount of tax-exempt interest received or accrued during the year	•		
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	<ul> <li>(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes</li> <li>(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a</li> <li>disqualified person?</li> </ul>			
	disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes × No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to $1a(1)$ – $(6)$ , did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		
	Organizations relying on a current notice regarding disaster assistance, check here ▶ □			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c		×
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  20 , 20 , 20 , 20	20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		×
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		×

Part	VII-B	Statements Regarding Activities	for Which Form	4720 N	May Be R	equire	d (contin	nued)			age C
5a	During	the year, did the foundation pay or incur	any amount to:				1-0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Yes	No
		ry on propaganda, or otherwise attempt t		on (secti	ion 4945(e)	)? .	Yes	X No			
	(2) Infl	uence the outcome of any specific public ectly or indirectly, any voter registration dr	c election (see secti	ion 495	5); or to ca	arry on,	Yes	× No			
		vide a grant to an individual for travel, stu					Yes	X No			
	(4) Pro	ovide a grant to an organization other than stion 4945(d)(4)(A)? See instructions	n a charitable, etc., o	organiza	ation descr	ibed in	Yes	× No			
	(5) Pro	ovide for any purpose other than religious poses, or for the prevention of cruelty to c	, charitable, scientifi	ic, litera	ry, or educ	ational		× No			
b	If any a	answer is "Yes" to 5a(1)-(5), did any of thulations section 53.4945 or in a current no	ne transactions fail to	o qualif	y under the	e except	tions des				
		zations relying on a current notice regardi							5b		
С	If the a	answer is "Yes" to question 5a(4), does to the maintained expenditure responsibility	he foundation claim	exemp	otion from		Yes	No			
		attach the statement required by Regula,"					☐ Yes	□ ио			
6a	Did the	e foundation, during the year, receive any				miums	Yes	× No			
b	Did the	e foundation, during the year, pay premiun	ns, directly or indirec	ctly, on	a personal	benefit			6b	100000	×
255		" to 6b, file Form 8870.									
7a		time during the tax year, was the foundation									
b		"," did the foundation receive any proceeds					ansaction	1? .	7b		
8		foundation subject to the section 4960 ta eration or excess parachute payment(s) do									
Dari	VIII	Information About Officers, Direc								3400	
rai	VIII	and Contractors	tors, Trustees, F	oundai	uon wana	igers, r	rignly P	ald E	mpioy	ees,	
1	List all	officers, directors, trustees, and found	lation managers an	nd their	compens	ation S	ee instru	ctions			
-			(b) Title, and average	(c) Cor	npensation	(d) C	ontributions	s to	(e) Expe	nee ac	count
	Out To an act of	(a) Name and address	hours per week devoted to position		ot paid, ter -0-)		red compe		other a	allowar	ices
		F. Hall, Jr.  O West, Suite C Boerne TX 78006	Pres. & Sec. 0.01		0			_			_
//		. Hall	Vice President		0.	- M		0.			0.
		.0 West, Suite C Boerne TX 78006	0.01		0.			0.			0.
STATE OF THE PARTY		Hershner	Treasurer		<u> </u>			<u> </u>			<del></del>
		.0 West, Suite C Boerne TX 78006	0.01		0.			0.			0.
2	"NONI	ensation of five highest-paid employed E."	es (other than thos	se inclu	uded on li	ne 1—s	ee instr	uction	s). If no	one,	enter
	(a) Name	and address of each employee paid more than \$50,00	(b) Title, and a hours per v devoted to p	week	(c) Comper	nantion	(d) Contribution Complete (d) Contribution C	benefit deferred	(e) Expe		
NONE											
					Surrey average						
							<del></del>	î			
Tatal	العام الم	of other employees asid are \$50,000							•		
Total	number	of other employees paid over \$50,000 .	• • • • •	• •		• •	• • •		0 Form <b>99</b>	O DE	(0010)

3 Five highest-paid independent contractors for professional services. See instructions. If none.	enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of sen	
NONE	
otal number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	• 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as	the number of
organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
	0
2	
3	
4	
· · · · · · · · · · · · · · · · · · ·	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NONE	
	0
2	
All others are great related in a threat Continue to	
All other program-related investments. See instructions.	
3 NONE	
	0
Fotal. Add lines 1 through 3	• 0
	Form <b>990-PF</b> (201
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Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ian found	dations
	see instructions.)	3	,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	62,795.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	62,795.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	62,795.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	942.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	61,853.
6	Minimum investment return. Enter 5% of line 5	6	3,093.
Part		oundatio	ons
	and certain foreign organizations, check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	3,093.
2a	Tax on investment income for 2019 from Part VI, line 5 2a 5.		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	5.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,088.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	3,088.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	3,088.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	3,325.
b	Program-related investments—total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		11.00
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3,325.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,325.
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whethe	r the foundation
	- The state of the		000 DE

Part	XIII Undistributed Income	(see instruction	ns)			1 age <b>0</b>
			(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 f line 7					3,088.
2 a	Undistributed income, if any, as of the Enter amount for 2018 only	e end of 2019:				
b	Total for prior years: 20 , 20	20				
3	Excess distributions carryover, if					
а	From 2014	3,649.				
b	From 2015	820.				
C	From 2016	9,092.				
d	From 2017	11,969.				
e	From 2018	7,018.				
f	Total of lines 3a through e		32,548.			
4	Qualifying distributions for 2019 to	The state of the s	32,340.			
4	line 4: ▶ \$3,325.					
а	Applied to 2018, but not more that	ın line 2a .	0			
b	Applied to undistributed income (Election required—see instruction					
С	Treated as distributions out of con					
ч	required—see instructions) Applied to 2019 distributable amo				V V	
e	Remaining amount distributed our		027			3,088.
5	270	100	237.			
3	Excess distributions carryover ap (If an amount appears in column amount must be shown in column	(d), the same				
6	Enter the net total of each indicated below:	column as				
a	Corpus. Add lines 3f, 4c, and 4e. S	ubtract line 5	32,785.			
b	Prior years' undistributed incor line 4b from line 2b	me. Subtract		0.		
С	Enter the amount of prior years' income for which a notice of dobeen issued, or on which the setax has been previously assessed	eficiency has ction 4942(a)				
d	Subtract line 6c from line amount—see instructions	6b. Taxable		0.		
е	Undistributed income for 2018.					
	4a from line 2a. Taxable					
	instructions				0.	
f	Undistributed income for 2019. § 4d and 5 from line 1. This amodistributed in 2020	ount must be				0
_						0.
7	Amounts treated as distributions to satisfy requirements imposed 170(b)(1)(F) or 4942(g)(3) (Elect required—see instructions)	d by section tion may be				
8	Excess distributions carryover fr	om 2014 not				
	applied on line 5 or line 7 (see ins		3,649.			
9	Excess distributions carryove Subtract lines 7 and 8 from line 6		29,136.			
10	Analysis of line 9:		25,250.			
а	Excess from 2015	820.				
b	Excess from 2016	9,092.				
C	Excess from 2017	11,969.				
d	Excess from 2018	7,018.				
e	Excess from 2019	237.				

Part :	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9	))	N/A
1a	If the foundation has received a ruling	or determination	letter that it is a	private operating		
	foundation, and the ruling is effective fo					
b	Check box to indicate whether the four		operating founda		ection	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each year listed	(a) 2019	<b>(b)</b> 2018	(c) 2017	(d) 2016	
b	85% of line 2a					
C	Qualifying distributions from Part XII,					
	line 4, for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
a	"Assets" alternative test-enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3					
-	of minimum investment return shown in					
	Part X, line 6, for each year listed					
C	"Support" alternative test-enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part		on (Complete th	is part only if t	the foundation h	ad \$5.000 or m	ore in assets at
	any time during the year-					
1	Information Regarding Foundation					
а	List any managers of the foundation before the close of any tax year (but of					by the foundation
1	NONE	only it tries have oc	minbated more ti	Tiai 1 \$5,000). (See 3	ection 307 (u)(2).)	
	List any managers of the foundation	who own 10% or	more of the sto	ock of a corporation	n (or an equally la	arge portion of the
	ownership of a partnership or other e					
1	NONE					
2	Information Regarding Contribution Check here ► 🖾 if the foundation unsolicited requests for funds. If the f complete items 2a, b, c, and d. See ir	only makes controundation makes	ibutions to prese	elected charitable		
a	The name, address, and telephone nu		dress of the perso	on to whom applica	ations should be a	ddressed:
	The hame, address, and tolephone he	anno or ornan aut	2.000 01 1110 90100	on to whom applied	and the direction of the	
b	The form in which applications should	d be submitted and	d information and	d materials they sho	ould include:	
С	Any submission deadlines:					
	Any restrictions or limitations on av	warde euch as h	v geographical a	areas charitable fi	elds kinds of ins	etitutions or other
u	factors:	varus, sucii as D	y geographical a	areas, criantable II	olus, Killus Ul IIIS	situations, or other

Part XV Supplementary Information (cor 3 Grants and Contributions Paid During	the Year or Approv	ed for Eutur	a Payment	
Recipient	If recipient is an individual,	Foundation		
	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of	Purpose of grant or contribution	Amount
Name and address (home or business)  a Paid during the year	or substantial contributor	recipient		
a raid during the year				
Total				3a
b Approved for future payment	<u> </u>			Ja
one				
Total				3b

ter gros	s amounts unless otherwise indicated.	Unrelated bus	siness income	Excluded by section	n 512, 513, or 514	(6)
l Prog	ram service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exem function income (See instructions
a	an service revenue.			+		
b						
c						
d _						
e _						
f _						
	ees and contracts from government agencies					
	bership dues and assessments					
	est on savings and temporary cash investments ends and interest from securities			14	242.	
	ental income or (loss) from real estate:					
	ebt-financed property					
	ot debt-financed property					
	ental income or (loss) from personal property					
	r investment income					
	or (loss) from sales of assets other than inventory					
Net i	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory					
1 Othe	r revenue: a				and the second second second second	
b _						
С _						
d						
1/20mm						
e _	otal Add columns (b) (d) and (a)				0.40	
2 Subt	otal. Add columns (b), (d), and (e)				242.	242
2 Subt 3 Tota	I. Add line 12, columns (b), (d), and (e)					242
2 Subt 3 Tota ee work	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation					242
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
Subt Totale work	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
Subta Total ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
Subta Total ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
Subta Tota e work art XV ne No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
Subta Tota e work art XV	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
Subta Total ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	
2 Subt 3 Tota ee work art XV ine No.	<ul> <li>Add line 12, columns (b), (d), and (e)</li> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>		ent of Exem	pt Purposes	13	mportantly to totions.)

		Organizatio							Yes	No
	in se	he organization di ection 501(c) (ot nizations?	rectly or indirectly her than section	engage in any of the 501(c)(3) organize	ne following with an ations) or in sec	ny other organization 527, relati	ation describe ng to politica	d	165	140
а			orting foundation to	o a noncharitable e	exempt organizatio	on of:		1000		
_								1a(1)		×
								1a(2)		×
b		r transactions:								
			a noncharitable exi					1b(1)	-	×
			ts from a noncharit					1b(2)	-	×
			equipment, or other					1b(3		×
	(4) F	Reimbursement ar	rangements					1b(4	-	×
	(5) L	oans or loan guar	rantees					1b(5	-	×
	(6) F	Performance of se	rvices or members	hip or fundraising	solicitations			1b(6	-	+ ^
C	Shar	ring of facilities, ed	quipment, mailing I	ists, other assets,	or paid employees			have the		
) Lin		e in any transaction (b) Amount involved	on or sharing arran	charitable exempt organ	nization (d) De	escription of transfers	, transactions, and	I sharing a	rranger	nents
**************************************										
	des	scribed in section	rectly or indirectly 501(c) (other than ne following schedu	section 501(c)(3)) only.	or in section 527?		npt organizati		Yes	X I
		(a) Name of orga	inization	(b) Type	of organization		(0) 5333, [2]			
										-
		······································				1.1.1	to the best of my	cnowledge :	and beli	ef, it is
	n c	Under penalties of perjun correct, and complete. D	y, I declare that I have exa eclaration of preparer (other	mined this return, includir er than taxpayer) is based	7 22 Presid	es and statements, and th preparer has any kno dent & Secre	Ma	y the IRS on the prepare instruction	arer sho	wn be
Sig He	,	Signature of officer or	Y	Date	Title Title	Date		PTI	N	
Sig He			ror's name	Preparer's sign	ture,	Date	Check 5	C if		
He		Print/Type prepa	ilei Silaille	1.	(). I	02 105 10		loved   DO	0111	1735
He Pa	id	W	Dagley, CPA	Tim he	Payley	01/25/2	2021 self-emp	loyed PO	0114	1138
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# Additional information from your Form 990-PF: Return of Private Foundation

#### Form 990-PF: Return of Private Foundation

**Taxes** 

Taxes	Co	ntinuation Statement		
Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
Excise Tax	7.			
Total	7			

#### Form 990-PF: Return of Private Foundation

Other Expenses

**Continuation Statement** 

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
Insurance	800.			800.
Total	800.			800.

## Legal and Professional Fees

2019

Name	Employer Identification No.
The Coast Foundation, Inc.	74-6087573

#### Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	-				
	-				
	_				-
al to Form 990	)-PF, Part I, Line 16a				

#### Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Eric M. Dagley, CPA	Acctg. & Tax	2,525.			2,525
					-
Total to Form 990-F	PF, Part I, Line 16b	2,525.			2,525

#### Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
-14- 5 00	0-PF, Part I, Line 16c				-

# AFFIDAVIT OF PUBLICATION

The State of Texas: The County of Kerr:		
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Sworn to and subscribed be Kerrville Daily Times, on the which witness my hand and	efore me by the said Greg is thel day of ê0 d seal of office.	Shrader, Publisher of the LaryA.D. 2021, to certify
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The Annual Returns and Exemption Application of the Coast Foundation, Inc. are available for public inspection during regular business hours at:

Principal Office 707 Hill Country Drive Suite 114 Kerrville, TX 78028 Charles F. Hall, Jr., President Tel: 210-464-1030

# Form 8879-E0

Department of the Treasury

# IRS e-file Signature Authorization for an Exempt Organization For calendar year 2019, or fiscal year beginning Oct 1 , 2019, and ending Sep 30, 20 20 Do not send to the IRS. Keep for your records.

OMB No. 15	545-1878
------------	----------

lame of exempt organization	Employer identification number
he Coast Foundation, Inc.	74-6087573
lame and title of officer	
harles F Hall, Jr., President & Secretar	
Part I Type of Return and Return Information (V	Vhole Dollars Only)
check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the a	m 8879-EO and enter the applicable amount, if any, from the return. If you amount on that line for the return being filed with this form was blank, then ak (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the in Part I.
la Form 990 check here ► □ b Total revenue, if any (Form 990 check here ► □ b Total r	form 990, Part VIII, column (A), line 12) 1b
	y (Form 990-EZ, line 9)
Ba Form 1120-POL check here ► □ b Total tax (Form	
la Form 990-PF check here $\blacktriangleright$ 🗵 b Tax based on invest	
5a Form 8868 check here ► □ b Balance Due (Form 886	
a Torri ood check here P	50, 1116 00)
Part II Declaration and Signature Authorization	of Officer
	ne above organization and that I have examined a copy of the
return, and the financial institution to debit the entry to this a Agent at 1-888-353-4537 no later than 2 business days prior nvolved in the processing of the electronic payment of taxes	software for payment of the organization's federal taxes owed on this account. To revoke a payment, I must contact the U.S. Treasury Financial or to the payment (settlement) date. I also authorize the financial institutions as to receive confidential information necessary to answer inquiries and sonal identification number (PIN) as my signature for the organization's ent to electronic funds withdrawal.  to enter my PIN  8 7 5 7 3 as my signature  Enter five numbers, but
	do not enter all zeros
being filed with a state agency(ies) regulating charities ERO to enter my PIN on the return's disclosure conser  As an officer of the organization, I will enter my PIN as If I have indicated within this return that a copy of the the IRS Fed/State program, I will enter my PIN on the IRS.	do not enter all zeros  return. If I have indicated within this return that a copy of the return is as part of the IRS Fed/State program, I also authorize the aforementioned nt screen.  s my signature on the organization's tax year 2019 electronically filed return return is being filed with a state agency(ies) regulating charities as part of
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### IRS e-file Authentication Statement

2019

► Keep for your records

Name(s) Shown on Return	Employer ID No.
The Coast Foundation, Inc.	74-6087573
A — Practitioner PIN Authorization	
QuickZoom to the Federal Information Worksheet to enter PIN information	
	a a se
Please indicate how the taxpayer(s) PIN(s) are entered into the program.  Officer entered PIN	•
ERO entered Officer's PIN	
B — Signature of Electronic Return Originator	
ERO Declaration:	
I declare that the information contained in this electronic tax return is the information	
Corporation. If the Exempt Organization furnished me a completed tax return, I o	
contained in this electronic tax return is identical to that contained in the return p Organization. If the furnished return was signed by a paid preparer, I declare I ha	
paid preparer's identifying information in the appropriate portion of this electronic	
preparer, under the penalties of perjury, I declare that I have examined this elect	tronic return, and to the
best of my knowledge and belief, it is true, correct, and complete. This declaration	on is based on all
information of which I have any knowledge.	
I am signing this Tax Return by entering my PIN below.	
ERO's PIN (EFIN followed by any 5 numbers)	94859 Self-Select PIN 14138
C — Signature of Officer	
Perjury Statement:	
Under penalties of perjury, I declare that I am an officer of the above Exempt Or	
examined a copy of the Exempt Organization's 2019 electronic income tax return	, , ,
schedules and statements and to the best of my knowledge and belief, it is true,	correct, and complete.
Consent to Disclosure:	
I consent to allow my electronic return originator (ERO), transmitter, or intermed	
the Exempt Organization's return to the IRS and to receive from the IRS (a) an a	
reason for rejection of the transmission, (b) an indication of any refund offset, (c) processing the return or refund, and (d) the date of any refund.	) the reason for any delay in
Electronic Funds Withdrawal Consent (if applicable):	
I authorize the U.S. Treasury and its designated Financial Agent to initiate an ele (direct debit) entry to the financial institution account indicated in the tax prepara	
of the Exempt Organization's federal taxes owed on this return, and the financia	
entry to this account. To revoke a payment, I must contact the U.S. Treasury Fir	
1-888-353-4537 no later than 2 business days prior to the payment (settlement)	date. I also authorize the
financial institution involved in the processing of the electronic payment of taxes	
information necessary to answer inquiries and resolve issues related to the payr	nent.
I am signing this Tax Return and Electronic Funds Withdrawal Consent, if self-selected PIN below.	applicable, by entering my
Officer's DIN	07573
Officer's PIN	

#### **Electronic Filing Information Worksheet**

nation Worksheet 2019

► Keep for your records Name(s) shown on return Identifying number The Coast Foundation, Inc. 74-6087573 Part I — State Electronic Filing: Check this box to force state only filing for all states selected to be filed electronically Part II — Electronic Return Originator Information The ERO Information below will automatically calculate based on the preparer code entered on the return. For returns that are prepared as a "Non-Paid Preparer" (XNP) or "Self-Prepared" (XSP) For returns that are marked as a "Non-Paid Preparer" (XNP) or "Self-Prepared" (XSP) **ERO Name** ERO Electronic Filers Identification Number (EFIN) ERIC M. DAGLEY, CPA 794859 **ERO Address ERO Employer Identification Number** 16850 Saturn Lane, Suite 100 State ZIP Code **ERO Social Security Number or PTIN** Houston TX 77058 P00114138 Country Part III - Paid Preparer Information Firm Name Preparer Social Security Number or PTIN ERIC M. DAGLEY, CPA P00114138 Preparer Name **Employer Identification Number** Eric M. Dagley, CPA Address Phone Number Fax Number 16850 Saturn Lane, Suite 100 (281)480-4849City ZIP Code State Houston 77058 TXCountry Preparer E-mail Address CPADIVER@aol.com Part IV - Selection of Additional Amended Returns Check this box to file another federal amended return electronically File another Amended Form 114 Report of Foreign Bank and Financial Accounts (FBAR) electronically Check this box to file another state and/or city amended return electronically Select the state and/or city amended return(s) to file electronically. State/City \* California State Exempt Part V - Name Control