## **SCHEDULE A** (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

OMB No. 1545-0047 2020

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of the organization

Employer identification number

**USATF THREE RIVERS ASSOCIATION** 25-1568423 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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 331/3% 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 331/3% 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . . Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-10) support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

Part	Support Schedule for Organization (Complete only if you checked the Part III. If the organization fails to	e box on line	e 5, 7, or 8 of	Part I or if the	e organizatio	n failed to qua	
Secti	on A. Public Support	quality und	er trie tests in	sted below, p	lease comple	ete Fart III.)	
	dar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2010	(b) 2017	(6) 2010	(u) 2013	(6) 2020	(i) Total
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				e odnom se s E n oposenie	officeroy's plot	medili i medili 7
3	The value of services or facilities furnished by a governmental unit to the organization without charge	ete p la lagood Lagoon	day of case			Physical Control of the Control of t	
4	Total. Add lines 1 through 3				100	Normal ex	
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)	minae in himb no di strante fittimi stati no brigalifici no di ancient	Math Rich Made A to have feat A to have Math A comp or or account to the	consiste of the state of the st	con Visitado de Visitado De O Colhodo Pedrago Pou Pedrago Pou	in other me off objects to be classed a toole rand about the	
6	Public support. Subtract line 5 from line 4						
Secti	on B. Total Support	wil burgar si		AL LUSIN	Service of the service of		
Calen	dar year (or fiscal year beginning in) ▶	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4				atta manana		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	visite statis Sector for Me Side norkoca					sonali la esnali sa enan
9	Net income from unrelated business activities, whether or not the business is regularly carried on	va pekonu ma e tanbono Bana A pre-					T (7 )
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		le sulten in l Sen outstand & Autoolook	elm stylba ma tu tyli tug juo at tuoti ataka		enga A II saya Tanan na masa Sanan angan	
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First 5 years. If the Form 990 is for the			d. third. fourth.	or fifth tax v	12 ear as a section	n 501(c)(3)
	organization, check this box and stop he						▶□
Secti	on C. Computation of Public Support	rt Percentaç	je	ni vi		31 1 39 1 3	
14 15	Public support percentage for 2020 (line Public support percentage from 2019 Sc 33 <sup>1</sup> /3% support test—2020. If the organ	hedule A. Parl	II. line 14 .			14 15	% %
16a	box and stop here. The organization qua	ilifies as a pub	olicly supported	dorganization			🕨 🗆
b	33 <sup>1</sup> / <sub>3</sub> % support test—2019. If the organ this box and stop here. The organization	ization did no qualifies as a	t check a box of publicly support	on line 13 or 16 orted organizat	Sa, and line 15	is 33 <sup>1</sup> / <sub>3</sub> % or m	nore, check
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization metal Part VI how the organization meets the organization	neets the facts facts-and-cire	s-and-circums cumstances te	tances test, chest. The organi	neck this box a zation qualified	and <b>stop here</b> s as a publicly	Explain in supported
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization in Part VI how the organization meets the organization	on meets the t	facts-and-circu	imstances test test. The organ	, check this bo	ox and stop he	re. Explain
18	Private foundation. If the organization instructions			e 13, 16a, 16b			

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.	)

	ion A. Public Support		1 1 2 1 1 2 2 1 /	w, picase oo			
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	26,444	21,456	23,150	26,185	12,199	109,434
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	23,525					
3	Gross receipts from activities that are not an unrelated trade or business under section 513	25,525	27,979	21,496	48,601	284	121,885
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	Notes and a second					
5	The value of services or facilities furnished by a governmental unit to the organization without charge	Alle LIDDED (vilka)				TE AND SHIP OF	enanti.
6 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	49,969	49,435	44,646	74,786	12,483	231,319
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	A Arada kalengo E Berlinskoulo e La akraa Turki e					20100 1028 1 1 1 1 1
8	Add lines 7a and 7b						231,319
Secti	ion B. Total Support				<u> </u>		231,317
	idar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	49,969	49,435	44,646	74,786	12,483	231,319
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	159	151	172	178	116	776
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	randa Lagaret exampla en el la		ent on Post			770 2402 7 3144 7
C	Add lines 10a and 10b	159	151	172	178	116	776
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		regasi cantan Bana mesara		2 p. III ? !		TERROR I
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.)	50,128	49,586	44,818	74,964	12,599	232,095
14	First 5 years. If the Form 990 is for the organization, check this box and stop here		first, second,	third, fourth, o			501(c)(3)
Secti	on C. Computation of Public Support	Percentage					
15	Public support percentage for 2020 (line 8,	column (f), div	rided by line 1	3, column (f))		15	99.6 %
16	Public support percentage from 2019 Scho	edule A, Part III	, line 15			16	99.7 %
	on D. Computation of Investment Inc	ome Percent	tage				
17	Investment income percentage for 2020 (lin					17	0.3 %
18 19a	Investment income percentage from <b>2019 33</b> <sup>1</sup> / <sub>3</sub> % <b>support tests—2020.</b> If the organiz 17 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this box a	ation did not o	heck the box	on line 14, and	d line 15 is mo	re than 331/3% ted organization	0.2 % , and line n . • •
b	331/3% support tests—2019. If the organiza line 18 is not more than 331/3%, check this be	tion did not che	eck a box on li	ne 14 or line 19	a. and line 16	s more than 33	1/3% and
20	Private foundation. If the organization did						

Part IV Supporting Organizations

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

Jecu	on A. All Supporting Organizations	T	Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by		Dies	140
	class or purpose, describe the designation. If historic and continuing relationship, explain.	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)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported			
•	organization was described in section 509(a)(1) or (2).  Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	2		
3a	lines 3b and 3c below.	За		e silie s
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b	130	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c	90.55W	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a	ELA.	E.S
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	out.	
С	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
r.	purposes.  Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	4c		
5a	answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , 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).	5a		
b		5b		
С	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? If "Yes," provide detail in <b>Part VI</b> .			
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	6		
1	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	COW NAME OF	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	78	i.e.
b	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	1.24	
С	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	90		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
b	5:11 Line to the contract business hadings in the tay year? (Use Schedule C. Form 4720 to	Maria.	Th.	

determine whether the organization had excess business holdings.)

10b

Part	IV Supporting Organizations (continued)			3
VES			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
		11a		
	A family member of a person described in line 11a above?	11b		
Has the organization accepted a gift or contribution from any of the following persons?     A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?     A family member of a person described in line 11a above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.     Section B. Type I Supporting Organizations	11c			
<ul> <li>Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officer directors, or trustees at all times during the tax year? 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 support organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</li> <li>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? If "Yes," explain in Pair VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</li> <li>Section C. Type II Supporting Organizations</li> <li>Were a majority of the organization's directors or trustees during the tax year also a majority of the director or trustees of each of the organization's supported organization(s)? 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).</li> <li>Section D. All Type III Supporting Organizations</li> <li>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 to year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the</li> </ul>				
Occu	on B. Type I Supporting Organizations			N.
			Yes	No
1	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 officers, directors, or trustees were allocated among the			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
4	Ways a majority of the expeniention's diseases as to the desired as the desired a		Yes	No
	or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed	25 (32) 3 (32)		
Cooti		1		
Secu	on b. All Type III Supporting Organizations		V	N1 -
1	Did the organization provide to each of its supported organizations, but he lest day of the fifth would be		Yes	No
	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	1		
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	2		
3	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Secti				
		instru	ctions	s).
a				
b				
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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	2a		
b		2b		
3 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> 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>If "Yes" or "No," provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3h		

1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	g tru nizat	st on Nov. 20, 1970 (e <i>xpla</i> ions must complete Section	in in <b>Part VI</b> ). <b>See</b> ons A through E.
Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		1 524 C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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	ilga alik e gradiceom stato ga 1865, maj ja del "1869 suegae	
7	Other expenses (see instructions)	7		124,132,118
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B—Minimum Asset Amount	10	(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):		er et ar en en en eus a Arene e l'empere de la cit	
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	10		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):		a k o english of o the Thomas agree of to days	DENERGO DE LA COMPONIO DEL COMPONIO DE LA COMPONIO DEL COMPONIO DE LA COMPONIO DEL COMPONIO DE LA COMPONIO DEL COMPONIO DE LA COMPONIO DEL COMPONIO DE LA COMPONIO DE LA COMPONIO DEL COMPONIO DE LA COMPONIO DE LA COMPONIO DE LA COMPONIO DEL COMPONIO DEL COMPONIO DE LA COMPONIO DEL COMPONIO D
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 0.015 of line 3 (for greater amount, see instructions).	4	mg regional partition	C1124 At 100 9 9 9
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C—Distributable Amount		and the second of the second o	Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2	OBSTRUCTORY SOURCES AND	CONTRACTOR OF THE
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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	regional pale susceptibility of the second	
7	Check here if the current year is the organization's first as a non-function (see instructions).		ntegrated Type III support	ing organization

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continue	d)	
Sect	ion D—Distributions				Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		1	
2	Amounts paid to perform activity that directly furthers exe				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required-	provide details in <b>Part</b>	VI)	5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	***************************************
8	Distributions to attentive supported organizations to which	h the organization is res	ponsive		3009
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	ns	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
С	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from				
	Section D, line 7: \$				
<u>a</u>	Applied to underdistributions of prior years		The state of the s	Anticonor III	
b	Applied to 2020 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	<b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2016				
b	Excess from 2017				
С	Excess from 2018				
d	Excess from 2019				
е	Excess from 2020				

B, lines 1 and 3a, and 3b; F	art IV, Section A, lin d 2; Part IV, Sectior Part V, line 1; Part V	nes 1, 2, 3b, 3c, 4b, 4 n C, line 1; Part IV, S <sup>/</sup> , Section B, line 1e;	ns required by Part II, lir Ic, 5a, 6, 9a, 9b, 9c, 11a ection D, lines 2 and 3; Part V, Section D, lines litional information. (See	a, 11b, and 11c; Part Part IV, Section E, lin 5, 6, and 8; and Part	IV, Section es 1c, 2a, 2b
			in the second se		
			A1 (12) A (1)		
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