

HGI US PROPERTY FUND IV, LLC
999 WATERSIDE DRIVE, SUITE 2300
NORFOLK, VA 23510

SHAPIRO FAMILY CREDIT SHELTER TRUST
100 CHERRY LANE
TEANECK, NJ 07666

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HGI US PROPERTY FUND IV, LLC
999 WATERSIDE DRIVE, SUITE 2300
NORFOLK, VA 23510
757-640-0800

SHAPIRO FAMILY CREDIT SHELTER TRUST
100 CHERRY LANE
TEANECK, NJ 07666

DEAR MEMBER:

ATTACHED IS YOUR COPY OF THE 2022 PARTNERSHIP FORM 1065 SCHEDULE K-1 AND SCHEDULE K-3. THESE SCHEDULES SUMMARIZE YOUR INFORMATION FROM THE PARTNERSHIP. THIS INFORMATION HAS BEEN PROVIDED TO THE INTERNAL REVENUE SERVICE WITH THE U.S. PARTNERSHIP RETURN OF INCOME, FORM 1065 AND SCHEDULE K-2. THE INFORMATION PROVIDED ON THESE SCHEDULES SHOULD BE ENTERED ON YOUR TAX RETURN, IN ACCORDANCE WITH THE INSTRUCTIONS FOR THE SCHEDULES K-1 AND K-3.

SCHEDULE K-3 COVERS A NUMBER OF TOPICS, SOME OF WHICH ARE RELEVANT TO INVESTORS OF THIS PARTNERSHIP AND SOME OF WHICH ARE NOT. TO THE EXTENT ANY SECTIONS OF THE SCHEDULE K-3 WERE DEEMED NOT APPLICABLE TO THE PARTNERS OF THIS PARTNERSHIP, THOSE PAGES OF THE FORM WERE EXCLUDED FROM YOUR INVESTOR PACKAGE.

THE FOOTNOTES AND STATEMENTS PROVIDE DISCLOSURES REQUIRED BY IRS REGULATIONS. THE TAX POSITIONS TAKEN BY THE PARTNERSHIP SHOULD NOT BE CONSTRUED AS TAX ADVICE. CONSULT YOUR TAX ACCOUNTANT REGARDING THESE STATEMENTS AND PROVIDE A COPY OF THESE SCHEDULES TO YOUR TAX RETURN PREPARER WITH YOUR OTHER TAX INFORMATION.

PLEASE REVIEW THIS DOCUMENT CAREFULLY. IF YOU BELIEVE CORRECTIONS ARE REQUIRED, PLEASE CONTACT US NO LATER THAN MAY 15, 2023.

FOR QUESTIONS REGARDING THIS TAX DOCUMENT, PLEASE REFERENCE THE FREQUENTLY ASKED QUESTIONS (FAQ) ON THE INVESTOR PORTAL. TO ACCESS THE INVESTOR PORTAL, GO TO WWW.HARBORGROUPOINT.COM, CLICK ON "INVESTORS". IF YOU NEED ASSISTANCE TO ACTIVATE OR LOG IN TO YOUR PORTAL ACCOUNT, OR NEED CORRECTIONS TO YOUR K-1, PLEASE CONTACT:

IN THE U.S.:
STEVEN HEATHERLY
(757) 333-4985
SHEATHERLY@HARBORG.COM

IN ISRAEL:
LAUREN NOAH
(03) 753-8400
LNOAH@HARBORG.COM

WE THANK YOU FOR THE OPPORTUNITY TO SERVE YOU.

VERY TRULY YOURS,

HGI US PROPERTY FUND IV, LLC

**Schedule K-1
(Form 1065)**Department of the Treasury
Internal Revenue Service**2022**

For calendar year 2022, or tax year

☒ Final K-1☐ Amended K-1

OMB No. 1545-0123

**Partner's Share of Income, Deductions,
Credits, etc.**

See separate instructions.

Part I Information About the Partnership**A** Partnership's employer identification number

27-5042056

B Partnership's name, address, city, state, and ZIP codeHGI US PROPERTY FUND IV, LLC
999 WATERSIDE DRIVE, SUITE 2300
NORFOLK, VA 23510**C** IRS center where partnership filed return:

E-FILE

D ☐ Check if this is a publicly traded partnership (PTP)**Part II Information About the Partner****E** Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)

85-6739086

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.SHAPIRO FAMILY CREDIT SHELTER TRUST
100 CHERRY LANE
TEANECK, NJ 07666**G** ☐ General partner or LLC
member-manager☒ Limited partner or other LLC
member**H1** ☒ Domestic partner☐ Foreign partner**H2** ☐ If the partner is a disregarded entity (DE), enter the partner's:

TIN _____ Name _____

I1 What type of entity is this partner? **TRUST****I2** If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here ☐**J** Partner's share of profit, loss, and capital:

	Beginning	Ending
Profit	1.0000000 %	0.0000000 %
Loss	1.0000000 %	0.0000000 %
Capital	1.0000000 %	0.0000000 %

Check if decrease is due to sale or exchange of partnership interest ☒**K** Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	\$ 456.	\$ 0.
Qualified nonrecourse financing	\$ 0.	\$ 0.
Recourse	\$ 0.	\$ 0.

Check this box if Item K includes liability amounts from lower-tier partnerships ☒**L Partner's Capital Account Analysis**

Beginning capital account	\$ 1,142.
Capital contributed during the year	\$
Current year net income (loss)	\$ 0.
Other increase (decrease) (attach explanation)	\$ -1,142.
Withdrawals and distributions	\$ ()
Ending capital account	\$ 0.

M Did the partner contribute property with a built-in gain (loss)?☐ Yes ☒ No If "Yes," attach statement. See instructions.**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning	\$
Ending	\$

**Part III Partner's Share of Current Year Income,
Deductions, Credits, and Other Items****1** Ordinary business income (loss) **0.****2** Net rental real estate income (loss)**3** Other net rental income (loss)**4a** Guaranteed payments for services**4b** Guaranteed payments for capital**4c** Total guaranteed payments**5** Interest income**6a** Ordinary dividends**6b** Qualified dividends**6c** Dividend equivalents**7** Royalties**8** Net short-term capital gain (loss)**9a** Net long-term capital gain (loss)**9b** Collectibles (28%) gain (loss)**9c** Unrecaptured section 1250 gain**10** Net section 1231 gain (loss)**11** Other income (loss)**12** Section 179 deduction**13** Other deductions**14** Self-employment earnings (loss)**15** Credits**16** Schedule K-3 is attached if
checked ☒**17** Alternative min tax (AMT) items**18** Tax-exempt income and
nondeductible expenses**19** Distributions**20** Other information**21** Foreign taxes paid or accrued**22** ☐ More than one activity for at-risk purposes***23** ☐ More than one activity for passive activity purposes*

*See attached statement for additional information.

For IRS Use Only

SCHEDULE K-1		CURRENT YEAR NET INCOME (LOSS) AND OTHER INCREASES (DECREASES)	
DESCRIPTION	AMOUNT	TOTALS	
TRANSFERRED CAPITAL		-1,142.	
TOTAL OTHER INCREASES OR DECREASES		-1,142.	

SCHEDULE K-1

FOOTNOTES

PARTNER FOOTNOTES FOR SECTION 199(A)

PURSUANT TO FINALIZED REGULATION SECTION 1.199A-1 THE PARTNERSHIP IS CONSIDERED A RELEVANT PASSTHROUGH ENTITY ("RPE") AND IS REQUIRED TO DETERMINE AND REPORT CERTAIN INFORMATION ATTRIBUTABLE TO ANY TRADES OR BUSINESSES IN WHICH IT IS DIRECTLY OR INDIRECTLY ENGAGED.

WITH RESPECT TO EACH TRADE OR BUSINESS IN WHICH THE PARTNERSHIP IS DIRECTLY ENGAGED, THE FOLLOWING INFORMATION IS BEING REPORTED TO YOU:

1. CLASSIFICATION AS A QUALIFIED TRADE OR BUSINESS ("QTB") OR A SPECIFIED SERVICE TRADE OR BUSINESS ("SSTB")
2. YOUR ALLOCABLE SHARE OF QUALIFIED ITEMS OF INCOME, GAIN, DEDUCTION AND LOSS ("QUALIFIED BUSINESS INCOME" OR "QBI")
3. YOUR ALLOCABLE SHARE OF W-2 WAGES
4. YOUR ALLOCABLE SHARE OF UNADJUSTED BASIS IMMEDIATELY AFTER ACQUISITION ("UBIA") OF QUALIFIED PROPERTY

TO THE EXTENT THE PARTNERSHIP HAS AGGREGATED ANY TRADES OR BUSINESSES, THE INFORMATION RELATED TO THAT AGGREGATION HAS BEEN REPORTED TO YOU ON AN ATTACHMENT TO YOUR SCHEDULE K-1.

THE AMOUNTS REPORTED ON LINE 20Z FOR EACH TRADE OR BUSINESS DO NOT INCLUDE SECTION 1231 GAINS OR LOSSES. THE TREATMENT OF SECTION 1231 GAINS OR LOSSES FOR PURPOSES OF SECTION 199A IS MADE BY THE INDIVIDUAL, TRUST, OR ESTATE CLAIMING THE SECTION 199A DEDUCTION. THEREFORE, SECTION 1231 GAINS OR LOSSES HAVE BEEN SEPARATELY PROVIDED.

YOUR TOTAL ALLOCABLE SHARE OF 199A RENTAL INCOME (LOSS) IS:	0.
YOUR TOTAL ALLOCABLE SHARE OF 1231 GAIN (LOSS) IS:	0.
YOUR TOTAL ALLOCABLE SHARE OF ORDINARY GAIN (LOSS) IS	0.
YOUR TOTAL ALLOCABLE SHARE OF REIT DIVIDENDS IS:	0.
YOUR TOTAL ALLOCABLE SHARE OF THE UNADJUSTED BASIS OF ASSETS	0.

PLEASE CONSULT YOUR TAX ADVISOR.

UNRELATED BUSINESS TAXABLE INCOME

PARTNERSHIP INCOME (LOSS) AND GAIN (LOSS) ARE UNRELATED DEBT FINANCED INCOME(UDFI) UNDER SECTION 514(A). FOR TAX EXEMPT PARTNERS, YOUR SHARE OF THE INCOME AND EXPENSES REPORTED TO YOU ON SCHEDULE K-1 THAT IS CONSIDERED UNRELATED BUSINESS TAXABLE INCOME IS:

NET RENTAL REAL ESTATE INCOME (LOSS)	0.
NET SECTION 1231 GAIN (LOSS)	0.
UNRECAPTURED SECTION 1250 GAIN	0.
LINE 13V OTHER DEDUCTIONS - 743(B) ADJUSTMENT	0.

Schedule K-3
(Form 1065)

Department of the Treasury
Internal Revenue Service

☒ Final K-3 ☐ Amended K-3
**Partner's Share of Income, Deductions,
Credits, etc.-International**

OMB No. 1545-0123

2022

For calendar year 2022, or tax year beginning _____, ending _____
See separate instructions.

Information About the Partnership		Information About the Partner	
A Partnership's employer identification number (EIN) 27-5042056		C Partner's SSN or Taxpayer Identification Number (TIN) (Do not use TIN of a disregarded entity. See instructions.) 85-6739086	
B Partnership's name, address, city, state, and ZIP code HGI US PROPERTY FUND IV, LLC 999 WATERSIDE DRIVE, SUITE 2300 NORFOLK, VA 23510		D Name, address, city, state, and ZIP code for partner entered in C. See instr. SHAPIRO FAMILY CREDIT SHELTER TRUST 100 CHERRY LANE TEANECK, NJ 07666	
E Check to indicate the parts of Schedule K-3 that apply.			
1 Does Part I apply? If "Yes," complete and attach Part I		1	X
2 Does Part II apply? If "Yes," complete and attach Part II		2	X
3 Does Part III apply? If "Yes," complete and attach Part III		3	X
4 Does Part IV apply? If "Yes," complete and attach Part IV		4	X
5 Does Part V apply? If "Yes," complete and attach Part V		5	X
6 Does Part VI apply? If "Yes," complete and attach Part VI		6	X
7 Does Part VII apply? If "Yes," complete and attach Part VII		7	X
8 Does Part VIII apply? If "Yes," complete and attach Part VIII		8	X
9 Does Part IX apply? If "Yes," complete and attach Part IX		9	X
10 Does Part X apply? If "Yes," complete and attach Part X		10	X
11 Does Part XI apply? If "Yes," complete and attach Part XI		11	X
12 Reserved for future use		12	
13 Does Part XIII apply? If "Yes," complete and attach Part XIII		13	X

For IRS Use Only

Name of partnership HGI US PROPERTY FUND IV, LLC	EIN 27-5042056	Name of partner SHAPIRO FAMILY CREDIT SHELTER TRU	SSN or TIN 85-6739086
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Part VIII Partner's Interest in Foreign Corporation Income (Section 960)

- A** EIN or reference ID number of controlled foreign corporation _____ **B** Separate category. See instructions _____
- C** If PAS was entered on line B, applicable grouping under Regulations section 1.904-4(c). See instructions _____
- D** Box is checked if there is more than one source country for a line. See attachment and instructions _____
- E** Box is checked if U.S. source income _____
- F** Box is checked if FORI or FOGEI _____

Amounts are in functional currency unless otherwise noted. See instructions.	(i) Country code	(ii) Partner's share of net income	(iii) Reserved for future use	(iv) Reserved for future use
1 Subpart F income groups				
a Dividends, interest, rents, royalties, and annuities (total) _____				
(1) Unit: _____				
(2) Unit: _____				
b Net gain from certain property transactions (total) _____				
(1) Unit: _____				
(2) Unit: _____				
c Net gain from commodities transactions (total) _____				
(1) Unit: _____				
(2) Unit: _____				
d Net foreign currency gain (total) _____				
(1) Unit: _____				
(2) Unit: _____				
e Income equivalent to interest (total) _____				
(1) Unit: _____				
(2) Unit: _____				
f Other _____				
(1) Unit: _____				
(2) Unit: _____				
g Foreign base company sales income (total) _____				
(1) Unit: _____				
(2) Unit: _____				
h Foreign base company services income (total) _____				
(1) Unit: _____				
(2) Unit: _____				
i Full inclusion foreign base company income (total) _____				
(1) Unit: _____				
(2) Unit: _____				
j Insurance income (total) _____				
(1) Unit: _____				
(2) Unit: _____				
k International boycott income (total) _____				
l Bribes, kickbacks, and other payments (total) _____				
m Section 901(j) (total) _____				

Name of partnership HGI US PROPERTY FUND IV, LLC	EIN 27-5042056	Name of partner SHAPIRO FAMILY CREDIT SHELTER TRU	SSN or TIN 85-6739086
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Part VIII Partner's Interest in Foreign Corporation Income (Section 960) (continued)

Amounts are in functional currency unless otherwise noted. See instructions.	(i) Country code	(ii) Partner's share of net income	(iii) Reserved for future use	(iv) Reserved for future use
2 Recaptured subpart F income				
3 Tested income group (total)				
(1) Unit:				
(2) Unit:				
4 Residual income group (total)				
(1) Unit:				
(2) Unit:				
5 Total				

Part IX Partner's Information for Base Erosion and Anti-Abuse Tax (Section 59A)**Section 1 - Applicable Taxpayer** (see instructions)

Description	(a) Total	(b) Total ECI gross receipts	(c) Total non-ECI gross receipts
1 Gross receipts for section 59A(e)			
2 Gross receipts for the first preceding year	15,129.	15,129.	
3 Gross receipts for the second preceding year			
4 Gross receipts for the third preceding year			
5 Amounts included in the denominator of the base erosion percentage as described in Regulations section 1.59A-2(e)(3)			

Section 2 - Base Erosion Payments and Base Erosion Tax Benefits (see instructions)

Description	(a) Total	(b) Total base erosion payments	(c) Total base erosion tax benefits
6 Reserved for future use			
7 Reserved for future use			
8 Purchase or creations of property rights for intangibles (patents, trademarks, etc.)			
9 Rents, royalties, and license fees			
10 a Compensation/consideration paid for services not excepted by section 59A(d)(5)			
b Compensation/consideration paid for services excepted by section 59A(d)(5)			
11 Interest expense			
12 Payments for the purchase of tangible personal property			
13 Premiums and/or other considerations paid or accrued for insurance and reinsurance as covered by sections 59A(d)(3) and 59A(c)(2)(A)(iii)			
14 a Nonqualified derivative payments			
b Qualified derivative payments excepted by section 59A(h)			
15 Payments reducing gross receipts made to surrogate foreign corporation			
16 Other payments-specify:			
17 Base erosion tax benefits related to payments reported on lines 6 through 16, on which tax is imposed by section 871 or 881, with respect to which tax has been withheld under section 1441 or 1442 at the 30% (0.30) statutory withholding tax rate			

Name of partnership HGI US PROPERTY FUND IV, LLC	EIN 27-5042056	Name of partner SHAPIRO FAMILY CREDIT SHELTER TRU	SSN or TIN 85-6739086
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Part IX Partner's Information for Base Erosion and Anti-Abuse Tax (Section 59A) (continued)**Section 2 - Base Erosion Payments and Base Erosion Tax Benefits** (see instructions) (continued)

	(a) Total	(b) Total base erosion payments	(c) Total base erosion tax benefits
18 Portion of base erosion tax benefits reported on lines 6 through 16, on which tax is imposed by section 871 or 881, with respect to which tax has been withheld under section 1441 or 1442 at reduced withholding rate pursuant to income tax treaty. Multiply ratio of percentage withheld divided by 30% (0.30) times tax benefit. See instructions			
19 Total base erosion tax benefits (subtract the sum of lines 17 and 18 from the sum of lines 8 through 16)			
20 Reserved for future use			
21 Reserved for future use			
22 Reserved for future use			

Part X Foreign Partner's Character and Source of Income and Deductions**Section 1 - Gross Income**

Description	(a) Total	(b) Partner determination	Partnership Determination				
			ECI		Non-ECI		
			(c) U.S. source	(d) Foreign source	(e) U.S. source (FDAP)	(f) U.S. source (other)	(g) Foreign source
1 Ordinary business income (gross)							
2 Gross rental real estate income							
3 Other gross rental income							
4 Guaranteed payments for services ...							
5 Guaranteed payments for use of capital							
6 Interest income							
7 Dividends							
8 Dividend equivalents							
9 Royalties and license fees							
10 Net short-term capital gain							
11 Net long-term capital gain							
12 Collectibles (28%) gain							
13 Unrecaptured section 1250 gain							
14 Net section 1231 gain							
15 Reserved for future use							
16 Reserved for future use							
17 Reserved for future use							
18 Reserved for future use							
19 Reserved for future use							
20 Other income (loss) not included on lines 1 through 19							
21 Gross income (sum of lines 1 through 20)							

Part I

General Information

Partner's SS # or Federal EIN (Do not use EIN of a disregarded entity. See instr.) 85-6739086	Partnership's Federal EIN 27-5042056
Partner's Name SHAPIRO FAMILY CREDIT SHELTER TRUST	Partnership's Name HGI US PROPERTY FUND IV, LLC
Street Address 100 CHERRY LANE	Partnership's Street Address 999 WATERSIDE DRIVE, SUITE 2300
City State ZIP Code TEANECK, NJ 07666	City State ZIP Code NORFOLK, VA 23510
What type of entity is partner? <u>NT</u> (see instructions) Code Date partner's interest in partnership began: <u>02/15/2011</u> Month Day Year <input checked="" type="checkbox"/> Final NJK-1 <input type="checkbox"/> Hedge Fund <input type="checkbox"/> Amended NJK-1 <input type="checkbox"/> Member of Composite Return <input type="checkbox"/> If the partner is a disregarded entity, check the box and enter the partner's: Federal EIN Name	Enter partner's percentage of: (i) Before Decrease or Termination (ii) End of Year Profit Sharing <u>1.0000000</u> % <u>0.0000000</u> % Loss Sharing <u>1.0000000</u> % <u>0.0000000</u> % Capital Ownership <u>1.0000000</u> % <u>0.0000000</u> %

Part II

Income Information

Income Classification	A. Total Distribution	NJ-1040 Filers Enter Amounts on Line Shown Below	B. New Jersey Source Amounts	NJ-1040NR Filers
1. Partnership Income (Loss)				
2. Net Guaranteed Payments				
3. Partner's 401(k) Contribution				
4. Distributive Share of Partnership Income (loss) (Line 1 plus line 2 minus line 3)		Line 21		Line 23
5. Pension		Line 20a		
6. Net Gain (Loss) From Disposition of Assets as a Result of a Complete Liquidation		Line 19		Line 19

Part III

Partner's Information

1. Nonresident Partner's Share of NJ Tax	1.	Line 10b, Page 1, CBT-100 Line 8b, Page 1, CBT-100S Line 10, Page 1, CBT-100U Schedule T, NJ-CBT-1065 Line 52, NJ-1040NR Line 23, NJ-1080C Line 35a, NJ-1041
2. Partner's HEZ Deduction	2.	
3. Partner's Sheltered Workshop Tax Credit	3.	
4. Share of Pass-Through Business Alternative Income Tax	4.	

Part IV

Supplemental Information (Attach Schedule)

This Form May be Reproduced



Department of Taxation and Finance
New York Partner's Schedule K-1
Tax Law - Article 22 (Personal Income Tax)

288851 11-04-22

IT-204-IP

For calendar year 2022 or tax year beginning

and ending

☒ Final K-1

119

☐ Amended K-1

Partners: Before completing your income tax return, see Form IT-204-IP-I, *Partner's Instructions for Form IT-204-IP* (available at www.tax.ny.gov).

Partnership's information (see instructions)

Partnership's name (as shown on Form IT-204) HGI US PROPERTY FUND IV LLC	Partnership's EIN 275042056
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A Mark an ☒ in the box if either applies to your entity ☐ Publicly traded partnership ☐ Portfolio investment partnership

B Tax shelter registration number, if any **B**

C Business allocation percentage **C** %

Partner's information (see instructions)

Partner's name SHAPIRO FAMILY CREDIT SHELTER TRUST			Partner's identifying number 856739086
Partner's address 100 CHERRY LANE			
City TEANECK	State NJ	ZIP code 07666	

D The partner is a (mark an ☒ in the appropriate box) ☐ General partner or LLC member-manager ☒ Limited partner or other LLC member

E What is the tax filing status of the partner? (Mark an ☒ in the appropriate box, if known.) ☐ Individual ☒ Estate/trust ☐ Partnership

F If the partner is a disregarded entity or grantor trust, enter the tax ID of the entity or individual reporting the income, if known **F**

G Did the partner sell its entire interest during the tax year? **G** Yes ☐ No ☒

H Partner's share of profit, loss, and capital		Beginning	Ending
1) Profit	H1	1.0000%	0.0000%
2) Loss	H2	1.0000%	0.0000%
3) Capital	H3	1.0000%	0.0000%

I Partner's share of liabilities at the end of the year		
1) Nonrecourse	I1	
2) Qualified nonrecourse financing	I2	
3) Recourse	I3	

J Partner's capital account analysis		
1) Beginning capital account	J1	1142
2) Capital contributed during the year - cash	J2	
3) Capital contributed during the year - property	J3	
4) Current year increase (decrease)	J4	-1142
5) Withdrawals and distributions - cash	J5	
6) Withdrawals and distributions - property	J6	
7) Ending capital account	J7	
8) Method of accounting (mark an <input checked="" type="checkbox"/> in the appropriate box)		

☒ Tax basis ☐ GAAP ☐ Book ☐ Other (submit explanation)

K Resident status (mark an ☒ in all boxes that apply; see instructions)

<input type="checkbox"/> NYS full-year resident	<input type="checkbox"/> Yonkers full-year resident	<input type="checkbox"/> NYC full-year resident
<input type="checkbox"/> NYS part-year resident	<input type="checkbox"/> Yonkers part-year resident	<input type="checkbox"/> NYC part-year resident
<input checked="" type="checkbox"/> NYS nonresident	<input type="checkbox"/> Yonkers nonresident	

L If the partner was included in a group return, enter the special NYS identification number, if known **L**

NO HANDWRITTEN ENTRIES ON THIS FORM

118001221019



M Was Form IT-2658-E filed with the partnership? **M** Yes ☐ No ☐

N NYS estimated tax paid on behalf of partner (from Form IT-2658-NYS)

	Date	Amount
1) First installment	N1	
2) Second installment	N2	
3) Third installment	N3	
4) Fourth installment	N4	
Total NYS estimated tax paid on behalf of partner (add lines N1 through N4)	N	

O Estimated MCTMT paid on behalf of partner (from Form IT-2658-MTA)

	Date	Amount
1) First installment	O1	
2) Second installment	O2	
3) Third installment	O3	
4) Fourth installment	O4	
Total estimated MCTMT paid on behalf of partner (add lines O1 through O4)	O	

P Did the partnership elect to pay the pass-through entity tax (PTET) for the current tax year? **P** Yes ☐ No ☒

If Yes, what residency status was assigned to this partner for purposes of computing the pass-through entity taxable income (PTE taxable income)? (Mark an X in the appropriate box; see instructions)

Resident ☐ Nonresident ☐

Partner's share of income, deductions, etc.

A - Partner's distributive share items	B - Federal K-1 amount	C - New York State amount
1 Ordinary business income (loss)	1	1
2 Net rental real estate income (loss)	2	2
3 Other net rental income (loss)	3	3
4 Guaranteed payments	4	4
5 Interest income	5	5
6 Ordinary dividends	6	6
7 Royalties	7	7
8 Net short-term capital gain (loss)	8	8
9 Net long-term capital gain (loss)	9	9
10 Net section 1231 gain (loss)	10	10
11 Other income (loss) <i>Identify:</i>	11	11
12 Section 179 deduction	12	12
13 Other deductions <i>Identify:</i>	13	13
14 This line intentionally left blank	14	14
15 Net earnings (loss) from self-employment	15	15
16 Tax-exempt income and nondeductible expenses	16	16
17 Distributions - cash and marketable securities	17	17
18 Distributions - other property	18	18
19 Other items not included above that are required to be reported separately to partners	19	19
<i>Identify:</i>		

NO HANDWRITTEN ENTRIES ON THIS FORM

118002221019



Partner's share of New York modifications (see instructions)**20** New York State additions

	Number	A - Total amount	B - New York State allocated amount
20a	EA-		
20b	EA-		
20c	EA-		
20d	EA-		
20e	EA-		
20f	EA-		

21 Total addition modifications (total of column A, lines 20a through 20f)**21** **22** New York State subtractions

	Number	A - Total amount	B - New York State allocated amount
22a	ES-		
22b	ES-		
22c	ES-		
22d	ES-		
22e	ES-		
22f	ES-		

23 Total subtraction modifications (total of column A, lines 22a through 22f)**23** **24** Additions to itemized deductions

	Letter	Amount
24a		
24b		
24c		
24d		
24e		
24f		

25 Total additions to itemized deductions (add lines 24a through 24f)**25** **26** Subtractions from itemized deductions

	Letter	Amount
26a		
26b		
26c		
26d		
26e		
26f		

27 Total subtractions from itemized deductions (add lines 26a through 26f)**27** **28** This line intentionally left blank**28**

NO HANDWRITTEN ENTRIES ON THIS FORM

118003221019



Partner's other information

29a Partner's share of New York source gross income	29a	
29b MCTD allocation percentage (<i>see instructions</i>)	29b	%
29c Partner's share of receipts from the sale of goods by manufacturing	29c	
29d Partner's share of New York adjusted basis of qualified manufacturing property	29d	

Partner's credit information**Part 1 - Flow-through credit bases and information****Brownfield redevelopment tax credit** (*Form IT-611, IT-611.1, or IT-611.2*)

		A - Form IT-611	B - Form IT-611.1	C - Form IT-611.2
30 Site preparation credit component	30			
31 Tangible property credit component	31			
32 On-site groundwater remediation credit component	32			

33 This line intentionally left blank	33	
34 This line intentionally left blank	34	
35 This line intentionally left blank	35	

QEZE tax reduction credit (*Form IT-604*)

36 QEZE employment increase factor	36	
37 QEZE zone allocation factor	37	
38 QEZE benefit period factor	38	

Excelsior jobs program tax credit (*Form IT-607*)

39 Excelsior jobs tax credit component	39	
40 Excelsior investment tax credit component	40	
41 Excelsior research and development tax credit component	41	
42 Excelsior real property tax credit component	42	
42a Excelsior child care services tax credit component	42a	

Farmers' school tax credit (*Form IT-217*)

43 Acres of qualified agricultural property	43	
44 Acres of qualified conservation property	44	
45 Eligible school district property taxes paid	45	
46 Acres of qualified agricultural property converted to nonqualified use	46	

Other flow-through credit bases and information

Credit bases

Code	Amount	Code	Amount
47a		47d	
47b		47e	
47c		47f	

Credit information

Code	Information	Code	Information
47g		47j	
47h		47k	
47i		47l	

NO HANDWRITTEN ENTRIES ON THIS FORM

118004221019



Partner's credit information *(continued)***Part 2 - Flow-through credits, addbacks, and recaptures**

- 48 Long-term care insurance credit *(Form IT-249)*
- 49 Investment credit *(including employment incentive credit and historic barn rehabilitation credit; Form IT-212)*
- 50 Research and development - investment credit *(Form IT-212)*
- 51 Other flow-through credits

48	
49	
50	

Code	Amount
51a	
51b	
51c	
51d	

Code	Amount
51e	
51f	
51g	
51h	

- 52 Addbacks of credits and recaptures

Code	Amount
52a	
52b	
52c	

Code	Amount
52d	
52e	
52f	

Part 3 - START-UP NY tax elimination credit information *(Form IT-638)*

- 53 START-UP NY business certificate number *(Form DTF-74)*
- 54 Year of START-UP NY business tax benefit period
- 55 START-UP NY area allocation factor

53	
54	
55	

Partner's share of New York adjustments due to decoupling from the IRC *(see instructions)*

	A - Total amount	B - New York State allocated amount
1 Total of New York additions	1	
2 Total of New York subtractions	2	

NO HANDWRITTEN ENTRIES ON THIS FORM

118005221019



2022 Form 502
Schedule VK-1

Virginia Pass-Through Entity
Owner's Share of Income and
Virginia Modifications and Credits



CHECK IF -

☒ Final

If SHORT Period Return: Beginning Date _____, 2022; Ending Date _____

☐ Amended Return: Enter Reason Code _____

☐ Owner is Participating in a Unified Nonresident Individual Income Tax Return

Owner Information		Pass-Through Entity (PTE) Information	
Name	FEIN or SSN	Name	FEIN
SHAPIRO FAMILY CREDIT S	85-6739086	HGI US PROPERTY FUND IV,	27-5042056
Address		Address	Taxable Year End Date
100 CHERRY LANE		999 WATERSIDE DRIVE, SUI	12/31/22
Address Continued		Address Continued	
City or Town, State, and ZIP Code		City or Town, State, and ZIP Code	
TEANECK, NJ 07666		NORFOLK, VA 23510	

Additional Owner Information (see instructions)

- | | |
|---|---------------|
| a. Date owner acquired interest in the PTE (MM/DD/YYYY) | a. 01/01/2021 |
| b. Owner's entity type (Enter code) | b. TE |
| c. Owner's participation type (Enter code) | c. LLM |
| d. Owner's participation percentage (Example: 47.35%) | d. 0.00 % |
| e. Amount withheld by PTE for the owner | e. 0 .00 |
| f. If owner or entity is exempt from withholding, enter an exemption code | f. |

Distributive or Pro Rata Income and Deductions (see instructions)

- | | |
|---------------------------------|--------|
| 1. Total taxable income amounts | 1. .00 |
| 2. Total deductions | 2. .00 |
| 3. Tax-exempt interest income | 3. .00 |

Allocation and Apportionment

- | | |
|--|-----------------|
| 4. Income allocated to Virginia (owner's share from PTE's Schedule 502A, Section C, Line 2) | 4. .00 |
| 5. Income allocated outside of Virginia (owner's share from PTE's Schedule 502A, Section C, Line 3(e)) | 5. .00 |
| 6. Apportionable income (owner's share from PTE's Schedule 502A, Section C, Line 4) | 6. .00 |
| 7. Virginia apportionment percentage (from PTE's Schedule 502A, Section B - percent from Line 1 or Line 2(f), or 100%) | 7. 100.000000 % |

Virginia Additions - Owner's Share

- | | |
|--|---------|
| 8. Fixed date conformity - depreciation | 8. .00 |
| 9. Fixed date conformity - other | 9. .00 |
| 10. Net income tax or other tax used as a deduction in determining taxable income (see instructions) | 10. .00 |
| 11. Interest on municipal or state obligations other than from Virginia | 11. .00 |
| 12. Other additions (see Form 502 instructions for addition codes.) | |

Code	Amount	Code	Amount
12a. <input type="text"/>	.00	12b. <input type="text"/>	.00
12c. <input type="text"/>	.00	12d. <input type="text"/>	.00

- | | |
|--|---------|
| 13. Total Additions (add Lines 8-11 and 12a-12d) | 13. .00 |
|--|---------|

Virginia Subtractions - Owner's Share

- | | |
|---|---------|
| 14. Fixed date conformity - depreciation | 14. .00 |
| 15. Fixed date conformity - other | 15. .00 |
| 16. Income from obligations of the United States | 16. .00 |
| 17. Other subtractions (see Form 502 instructions for subtraction codes.) | |

Certification Number (if applicable)	Code	Amount
17a. <input type="text"/>	<input type="text"/>	.00
17b. <input type="text"/>	<input type="text"/>	.00
17c. <input type="text"/>	<input type="text"/>	.00
17d. <input type="text"/>	<input type="text"/>	.00

- | | |
|---|---------|
| 18. Total Subtractions. (add Lines 14-16 and 17a-17d) | 18. .00 |
|---|---------|

Use **Schedule SVK-1** if you are claiming more additions or subtractions than the Schedule VK-1 allows.

Refer to the Form 502 Instructions for addition and subtraction codes. Check this box and enclose Schedule SVK-1. ☐

THERE ARE NO ADJUSTMENTS OR CREDITS FOR THIS PARTNER.

**2022 Virginia
Schedule VK-1**

Page 2

Owner FEIN or SSN **85-6739086**
PTE FEIN **27-5042056****Virginia Tax Credits**

See the Schedule CR Instructions (individuals) or Schedule 500CR Instructions (corporations).

Part I - Nonrefundable Credits

1. State Income Tax Paid (see Form 502 Instructions) .....	.00
2. Neighborhood Assistance Act Tax Credit .....	.00
3. Biodiesel and Green Diesel Fuels Tax Credit .....	.00
4. Recyclable Materials Processing Equipment Tax Credit .....	.00
5. Vehicle Emissions Testing Equipment Tax Credit .....	.00
6. Major Business Facility Job Tax Credit .....	.00
7. Waste Motor Oil Burning Equipment Tax Credit .....	.00
8. Riparian Forest Buffer Protection for Waterways Tax Credit .....	.00
9. Reserved for Future Use	XXXXXXXXXXXXXXXXXXXX
10. Reserved for Future Use	XXXXXXXXXXXXXXXXXXXX
11. Reserved for Future Use	XXXXXXXXXXXXXXXXXXXX
12. Historic Rehabilitation Tax Credit .....	.00
13. Land Preservation Tax Credit .....	.00
14. Qualified Equity and Subordinated Debt Investments Tax Credit .....	.00
15. Communities of Opportunity Tax Credit .....	.00
16. Green Jobs Creation Tax Credit .....	.00
17. Farm Wineries and Vineyards Tax Credit .....	.00
18. International Trade Facility Tax Credit .....	.00
19. Port Volume Increase Tax Credit .....	.00
20. Barge and Rail Usage Tax Credit .....	.00
21. Livable Home Tax Credit .....	.00

22. Research and Development Expenses Tax Credit (Use this line if the taxpayer does not qualify for a refundable credit.) .....	.00
23. Education Improvement Scholarships Tax Credit .....	.00
24. Major Research and Development Expenses Tax Credit .....	.00
25. Food Crop Donation Tax Credit .....	.00
26. Worker Training Tax Credit .....	.00
27. Virginia Housing Opportunity Tax Credit .....	.00

Part II - Total Nonrefundable Credits**1. Total Nonrefundable Credits.**Add Part I, Lines 1-8 and 12-27 **.00****Part III - Refundable Credits**

1. Agricultural Best Management Practices Tax Credit .....	.00
2. 100% Coalfield Employment Enhancement Tax Credit from 2022 Form 306D, Part II, Section 1, Line 1 .....	.00
3. Full Credit: Enter amount from 2022 Form 306D, Part II, Section 2, Line 3 .....	.00
4. 85% Credit: Enter amount from 2022 Form 306D, Part II, Section 3, Line 5 .....	.00
5. Total Coalfield Employment Enhancement Tax Credit allowable this year (Add Lines 3 and 4) .....	.00
6. Reserved for Future Use	XXXXXXXXXXXXXXXXXXXX
7. Motion Picture Production Tax Credit .....	.00
8. Research and Development Expenses Tax Credit .....	.00
9. Conservation Tillage and Precision Agricultural Equipment Tax Credit .....	.00
10. Pass-Through Entity Elective Tax Payment Credit .....	.00

Part IV - Total Refundable Credits**1. Total Refundable Credits.**(Add Part III, Lines 1, 5, and 7-10) ... **.00**

NOTICE: You received this Schedule VK-1 because the above-named PTE earned income from Virginia sources and has passed through to you a portion of that Virginia source income based on your ownership of the PTE. A copy of this schedule has been filed with the Department. Everyone who receives Virginia source income is subject to taxation by Virginia regardless of state of residency or domicile. You may be required to file a Virginia tax return even though you may be a nonresident individual or a business domiciled outside of Virginia. To determine if you are required to file a Virginia income tax return, consult a tax professional. Information and forms may be obtained at www.tax.virginia.gov, or by calling the Department at (804) 367-8031 (individuals) or (804) 367-8037 (businesses).

VA SCHEDULE VK-1

FOOTNOTES

THE ENTITY IS INVESTED IN A PARTNERSHIP THAT HAS OPERATIONS IN VIRGINIA. YOUR SHARE OF THE APPORTIONMENT FACTORS CAN BE FOUND BELOW.

YOUR SHARE OF VIRGINIA:

BUILDING

0.

LAND

0.

CONSTRUCTION IN PROGRESS

0.

PAYROLL

0.

GROSS REVENUE

0.

PLEASE CONSULT YOUR TAX ADVISOR.