

Form **990-T****Exempt Organization Business Income Tax Return**
(and proxy tax under section 6033(e))

OMB No 1545-0687

2017Department of the Treasury
Internal Revenue ServiceFor calendar year 2017 or other tax year beginning 7/1/2017, and ending 6/30/2018Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

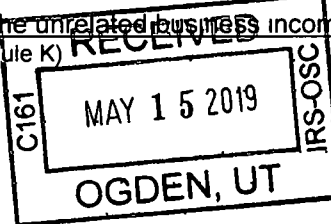
Open to Public Inspection for
501(c)(3) Organizations Only

A <input type="checkbox"/> Check box if address changed B Exempt under section <input checked="" type="checkbox"/> 501 (C) (3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)	Print or Type Name of organization (<input type="checkbox"/> Check box if name changed and see instructions) TRUSTEES OF TUFTS COLLEGE Number, street, and room or suite no. If a P.O. box, see instructions 169 HOLLAND STREET, ATTN TAX DEPT City or town State ZIP code SOMERVILLE MA 02144 Foreign country name Foreign province/state/county Foreign postal code	D Employer identification number (Employees' trust, see instructions) 04-2103634
		E Unrelated business activity codes (See instructions) 722320 525990

C Book value of all assets at end of year 646,586,839	F Group exemption number (See instructions)
G Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust	
H Describe the organization's primary unrelated business activity PHYSIOLOGY, INVESTMENTS, CATERING, CONFERENCES	
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the name and identifying number of the parent corporation	
J The books are in care of THOMAS S MCGURTY, VP FINANCE/TREAS Telephone number (617) 627-3264	

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales 3,083,348			
b	Less returns and allowances			
c	Balance	3,083,348		
2	Cost of goods sold (Schedule A, line 7)	538,182		
3	Gross profit Subtract line 2 from line 1c	2,545,166		2,545,166
4 a	Capital gain net income (attach Schedule D)			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	7,695		7,695
c	Capital loss deduction for trusts			
5	Income (loss) from partnerships and S corporations (attach statement)	-2,631,530		-2,631,530
6	Rent income (Schedule C)			
7	Unrelated debt-financed income (Schedule E)			
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule F)			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			
10	Exploited exempt activity income (Schedule I)			
11	Advertising income (Schedule J)			
12	Other income (See instructions, attach schedule)	839,768		839,768
13	Total. Combine lines 3 through 12	761,099	0	761,099

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income)			
14	Compensation of officers, directors, and trustees (Schedule K)		
15	Salaries and wages		827,698
16	Repairs and maintenance		
17	Bad debts		
18	Interest (attach schedule)		
19	Taxes and licenses		
20	Charitable contributions (See instructions for limitation rules)		
21	Depreciation (attach Form 4562)	200,776	
22	Less depreciation claimed on Schedule A and elsewhere on return		200,776
23	Depletion		
24	Contributions to deferred compensation plans		
25	Employee benefit programs		
26	Excess exempt expenses (Schedule I)		
27	Excess readership costs (Schedule J)		
28	Other deductions (attach schedule)		1,560,794
29	Total deductions. Add lines 14 through 28		2,589,268
30	Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13		-1,828,169
31	Net operating loss deduction (limited to the amount on line 30)		
32	Unrelated business taxable income before specific deduction Subtract line 31 from line 30		-1,828,169
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)		
34	Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32		-1,828,169



Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here ☐ **See instructions and**

a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)

(1) \$ 50,000 (2) \$ 25,000 (3) \$ 9,925,000

b Enter organization's share of (1) Additional 5% tax (not more than \$11,750) \$

(2) Additional 3% tax (not more than \$100,000) \$

c Income tax on the amount on line 34

35c

36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from ☐ Tax rate schedule or ☐ Schedule D (Form 1041)

36

37 Proxy tax. See instructions

37

38 Alternative minimum tax

38

39 Tax on Non-Compliant Facility Income. See instructions

39

40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies

40

0

Part IV Tax and Payments

41 a Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)

41a

b Other credits (see instructions)

41b

c General business credit. Attach Form 3800 (see instructions)

41c

d Credit for prior year minimum tax (attach Form 8801 or 8827)

41d

e Total credits. Add lines 41a through 41d

41e

0

42 Subtract line 41e from line 40

42

0

43 Other taxes. Check if from ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule)

43

44 Total tax. Add lines 42 and 43

44

0

45 a Payments. A 2016 overpayment credited to 2017

45a

b 2017 estimated tax payments

45b

c Tax deposited with Form 8868

45c

d Foreign organizations. Tax paid or withheld at source (see instructions)

45d

e Backup withholding (see instructions)

45e

f Credit for small employer health insurance premiums (Attach Form 8941)

45f

g Other credits and payments ☐ Form 2439

☐ Form 4136 ☐ Other

Total

45g

0

46 Total payments. Add lines 45a through 45g

46

0

47 Estimated tax penalty (see instructions). Check if Form 2220 is attached ☐

47

48 Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed

48

0

49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid

49

0

50 Enter the amount of line 49 you want **Credited to 2018 estimated tax**

Refunded

50

0

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51 At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here

Yes No

☒ ☐

52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file

☒ ☐

53 Enter the amount of tax-exempt interest received or accrued during the tax year \$

☐ ☐

Sign Here

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

Thomas J. M. B. B.

05/09/19

VP FIN /TREASURER

Signature of officer

Date

Title

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

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

Firm's name

Firm's EIN

Firm's address

Phone no

Schedule A—Cost of Goods Sold. Enter method of inventory valuation ▶

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2	538,182	7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2		
3 Cost of labor	3			7	538,182
4 a Additional section 263A costs (attach schedule)	4a		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
b Other costs (attach schedule)	4b				
5 Total. Add lines 1 through 4b	5	538,182			

Schedule C—Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property		
(1)		
(2)		
(3)		
(4)		
2. Rent received or accrued		
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0	0
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ▶ 0

Schedule E—Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 × column 6)	8. Allocable deductions (column 6 × total of columns 3(a) and 3(b))
(1)		%	0	0
(2)		%	0	0
(3)		%	0	0
(4)		%	0	0
Totals ▶			Enter here and on page 1, Part I, line 7, column (A) 0	Enter here and on page 1, Part I, line 7, column (B) 0
Total dividends-received deductions included in column 8 ▶				

Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)
Totals			0	0

Schedule G—Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				0
(2)				0
(3)				0
(4)				0
		Enter here and on page 1, Part I, line 9, column (A)	Enter here and on page 1, Part I, line 9, column (B)	
Totals		0	0	

Schedule I—Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)			0			0
(2)			0			0
(3)			0			0
(4)			0			0
		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 26
Totals		0	0			0

Schedule J—Advertising Income (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0	0	0	0	0

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)			0			0
(2)			0			0
(3)			0			0
(4)			0			0
Totals from Part I ▶	0	0				0
Totals, Part II (lines 1-5) ▶	0	0				0

Schedule K—Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14 ▶			0

Sales and Other Dispositions of Capital Assets

- Go to www.irs.gov/Form8949 for instructions and the latest information.
 ► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

TRUSTEES OF TUFTS COLLEGE

Social security number or taxpayer identification number

04-2103634

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I **Short-Term.** Transactions involving capital assets you held 1 year or less are short term. For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a, you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- ☒ **(A)** Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)
☐ **(B)** Short-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
☐ **(C)** Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo, day, yr)	(c) Date sold or disposed of (Mo, day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	PARTNERSHIP INVESTMENTS	VARIOUS	VARIOUS	14,625				14,625
2 Totals.	Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).			14,625	0		0	14,625

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side

Social security number or taxpayer identification number

TRUSTEES OF TUFTS COLLEGE

04-2103634

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II **Long-Term.** Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a, you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☒ **(D)** Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

☐ **(E)** Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS

☐ **(F)** Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	PARTNERSHIP INVESTMENTS	VARIOUS	VARIOUS	-171,123				-171,123
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶				-171,123	0		0	-171,123

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column (g)* in the separate instructions for how to figure the amount of the adjustment.

**SCHEDULE D
(Form 1120)**Department of the Treasury
Internal Revenue Service**Capital Gains and Losses**

- ▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.
- ▶ Go to www.irs.gov/Form1120 for instructions and the latest information

OMB No 1545-0123

2017

Name

TRUSTEES OF TUFTS COLLEGE

Employer identification number

04-2103634

Part I Short-Term Capital Gains and Losses—Assets Held One Year or Less

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				0
1b Totals for all transactions reported on Form(s) 8949 with Box A checked	14,625			14,625
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				0
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				0
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37				4
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824				5
6 Unused capital loss carryover (attach computation)				6 (314,927)
7 Net short-term capital gain or (loss) Combine lines 1a through 6 in column h				7 -300,302

Part II Long-Term Capital Gains and Losses—Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				0
8b Totals for all transactions reported on Form(s) 8949 with Box D checked	-171,123			-171,123
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				0
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				0
11 Enter gain from Form 4797, line 7 or 9				11
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37				12
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824				13
14 Capital gain distributions (see instructions)				14
15 Net long-term capital gain or (loss) Combine lines 8a through 14 in column h				15 -171,123

Part III Summary of Parts I and II

16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)	16	0
17 Net capital gain Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)	17	0
18 Add lines 16 and 17 Enter here and on Form 1120, page 1, line 8, or the proper line on other returns	18	0

Note: If losses exceed gains, see Capital losses in the instructions

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2017

HTA

Part IV Alternative Tax for Corporations with Qualified Timber Gain. Complete Part IV only if the corporation has qualified timber gain under section 1201(b). Skip this part if you are filing Form 1120-RIC. See instructions.

19	Enter qualified timber gain (as defined in section 1201(b)(2))	19		
20	Enter taxable income from Form 1120, page 1, line 30, or the applicable line of your tax return	20		
21	Enter the smallest of (a) the amount on line 19, (b) the amount on line 20, or (c) the amount on Part III, line 17	21		0
22	Multiply line 21 by 23.8% (0.238)	22		0
23	Subtract line 17 from line 20. If zero or less, enter -0-	23		0
24	Enter the tax on line 23, figured using the Tax Rate Schedule (or applicable tax rate) appropriate for the return with which Schedule D (Form 1120) is being filed	24		0
25	Add lines 21 and 23	25		0
26	Subtract line 25 from line 20. If zero or less, enter -0-	26		0
27	Multiply line 26 by 35% (0.35)	27		0
28	Add lines 22, 24, and 27	28		0
29	Enter the tax on line 20, figured using the Tax Rate Schedule (or applicable tax rate) appropriate for the return with which Schedule D (Form 1120) is being filed	29		0
30	Enter the smaller of line 28 or line 29. Also enter this amount on Form 1120, Schedule J, line 2, or the applicable line of your tax return	30		0

Depreciation and Amortization
(Including Information on Listed Property)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.**2017**Attachment
Sequence No **179**

Name(s) shown on return TRUSTEES OF TUFTS COLLEGE	Business or activity to which this form relates 990T	Identifying number 04-2103634
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Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	0
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions	5	0
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	0
9	Tentative deduction Enter the smaller of line 5 or line 8	9	0
10	Carryover of disallowed deduction from line 13 of your 2016 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11	12	0
13	Carryover of disallowed deduction to 2018 Add lines 9 and 10, less line 12	13	0

Note: Don't use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	200,776

Part III MACRS Depreciation (Don't include listed property) (See instructions)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2017	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		<input type="checkbox"/>

Section B - Assets Placed in Service During 2017 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	

Section C - Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System

20 a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (See instructions)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	200,776
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2017)

Line 5 (990-T) - Income from Partnerships and S Corporations

1	Share of partnership gross income from unrelated trade or business	1	-2,631,530
2	Share of partnership deductions directly connected to unrelated trade or business	2	
3	Share of S Corporation income (loss) excluding capital gains	3	
4	Total	4	-2,631,530

Line 12 (990-T) - Other Income

1	From Form 6478 - Biofuel Producer Credit	1	0
2	From Form 8864 - Biodiesel and Renewable Diesel Fuels Credit	2	0
3	Bad debt recoveries	3	
4	Proceeds received from employer-owned life insurance contracts issued after August 17, 2006	4	
5	Recapture of excess depreciation including Sec 179 expense deduction	5	0
6	QUALIFIED TRANSPORTATION FRINGE BENEFIT INCOME ADDBACK	6	839,768
7		7	
8		8	
9		9	
10		10	
11		11	
12		12	
13		13	
14	Total other income	14	839,768

Line 20 (990-T) - Charitable Contributions

Check ("X") box	<input checked="" type="checkbox"/> Corporations	Cash	1,457
	<input type="checkbox"/> Trusts 50%	Non Cash under \$5000	
	<input type="checkbox"/> Trusts (combined)	Non Cash over \$5000	

1 Contributions for current year Enter the contributions by type		Amount	Deduction Allowed in Current Year	Adjustment under Section 170(d)(2)(B)	New Carryover
Corporations	10% limitation	1,457	0		1,457
Trusts	170(b)(1)(A) 50% limitation		0		0
	30% limitation		0		0
2 Carryover from:					
a 5th preceding period	2a				
Corporations	10% limitation	768	0		768
Trusts	170(b)(1)(A) 50% limitation	0	0		0
	30% limitation	0	0		0
b 4th preceding period	2b				
Corporations	10% limitation	0	0		0
Trusts	170(b)(1)(A) 50% limitation	0	0		0
	30% limitation	0	0		0
c 3rd preceding period	2c				
Corporations	10% limitation	1,676	0		1,676
Trusts	170(b)(1)(A) 50% limitation	0	0		0
	30% limitation	0	0		0
d 2nd preceding period	2d				
Corporations	10% limitation	1,195	0		1,195
Trusts	170(b)(1)(A) 50% limitation	0	0		0
	30% limitation	0	0		0
e 1st preceding period	2e				
Corporations	10% limitation	2,243	0		2,243
Trusts	170(b)(1)(A) 50% limitation	0	0		0
	30% limitation	0	0		0
3 Totals	3	7,339	0	0	7,339
4 Carryover to expire next year due to 5 year limitation				4	768
5 Total contribution carryover to next year				5	6,571

Computation of Section 179 Deduction for Estimated Charitable Contribution

6 Taxable Income computed without contribution deduction or Section 179	6	-1,828,169
7 Section 179 deduction for purposes of contribution limitation	7	0
8 Taxable income less Section 179 deduction Subtract line 7 from line 6	8	0
9 Maximum contribution limitation Enter 10 percent of line 8	9	0
10 Contribution deduction considering Section 179 limitation Smaller of line 3, column A or line 9	10	0

Computation of Actual Charitable Contribution

11 Actual Section 179 deduction	11	0
12 Taxable income less actual Section 179 deduction Subtract line 11 from line 6	12	-1,828,169
13 Net operating loss deductions limited by line 12	13	-1,828,169
14 Taxable income for purposes of contribution deduction Subtract line 13 from line 12	14	0
15 Maximum contribution limitation Enter 10 percent of line 14	15	0
16 Actual contribution deduction Smaller of line 3, col A, or line 15	16	0

Line 28 (990-T) - Other Deductions

1 SUPPLIES & OTHER EXPENSE	1	1,090,146
2 ADMINISTRATIVE ASSESSMENT	2	470,648
3 Total other deductions	3	1,560,794
4 Total deductions less expenses for offsetting credits	4	1,560,794

Line 35c (990-T) - Tax Computation for Members of a Controlled Group

Check one of the apportionment plans below

☐ Equal apportionment plan Enter the percentage to use _____☒ Unequal apportionment plan Enter the amounts below

1	Enter the corporation's share of the \$50,000 taxable income bracket	<u>50,000</u>
2	Enter the corporation's share of the \$25,000 taxable income bracket	<u>25,000</u>
3	Enter the corporation's share of the \$9,925,000 taxable income bracket	<u>9,925,000</u>

	(A) Current Member	(B) Total Group
1 Enter unrelated business taxable income (line 34, page 1, Form 990-T)	<u>1</u> 0	
2 Enter line 1 or the corporation's share of the \$50,000 taxable income bracket, whichever is less	<u>2</u> 0	<u>0</u>
3 Subtract line 2 from line 1	<u>3</u> 0	<u>0</u>
4 Enter line 3 or the corporation's share of the \$25,000 taxable income bracket, whichever is less	<u>4</u> 0	<u>0</u>
5 Subtract line 4 from line 3	<u>5</u> 0	<u>0</u>
6 Enter line 5 or the corporation's share of the \$9,925,000 taxable income bracket, whichever is less	<u>6</u> 0	<u>0</u>
7 Subtract line 6 from line 5	<u>7</u> 0	<u>0</u>
8 Enter 15% of line 2	<u>8</u> 0	<u>0</u>
9 Enter 25% of line 4	<u>9</u> 0	<u>0</u>
10 Enter 34% of line 6	<u>10</u> 0	<u>0</u>
11 Enter 35% of line 7	<u>11</u> 0	<u>0</u>
12 If the taxable income of the controlled group exceeds \$100,000, enter this member's share of the smaller of (a) 5% of the excess over \$100,000, or (b) \$11,750 (See instructions)	<u>12</u> 0	<u>0</u>
13 If the taxable income of the controlled group exceeds \$15,000,000, enter this member's share of the smaller of (a) 3% of the excess over \$15,000,000, or (b) \$100,000 (See instructions)	<u>13</u> 0	<u>0</u>
14 Add lines 8 through 13 Enter current member amount here and on line 35c, page 2, Form 990-T	<u>14</u> 0	<u>0</u>

Line 6 (Sch D (1120)) - Capital Loss Carryover

Capital Loss		Loss Carryback		Loss Carryover		Current Year		
Year	Amount	Preceding Years	Amount Used	Subsequent Years	Amount Used	Available	Amount Used in 2017	Remaining Loss to 2018
2016	19,303	2013	0					
		2014	0					
		2015	0			19,303	0	19,303
2015	295,624	2012	0					
		2013	0					
		2014	0	2016	0	295,624	0	295,624
2014	0	2011	0					
		2012	0	2016	0			
		2013	0	2015	0	0	0	0
2013	0	2010	0	2016	0			
		2011	0	2015	0			
		2012	0	2014	0	0	0	0
2012	0	2009	0	2016	0			
		2010	0	2015	0			
		2011	0	2014	0			
				2013	0	0	0	

- 1** Total unused capital loss carryover available **1** (314,927)
2 Current year short-term gain or (loss) **2** 14,625
3 Current year long-term gain or (loss) **3** (171,123)
 Subtotal (sum of lines 1, 2, and 3) (471,425)
- 4** Capital loss from current year **4** 156,498
 Lines 4a, 4b, and 4c must be completed if there is a current year capital loss per IRC 1212(a)(1).
4a Capital loss to be carried back to 2014 Enter amount or zero **4a** _____
4b Capital loss to be carried back to 2015 Enter amount or zero. **4b** _____
4c Capital loss to be carried back to 2016 Enter amount or zero **4c** _____
File Form 1139 or Form 1120X to carryback current year capital loss to a prior year.
4d Total loss carried back (reduces total losses available on Line 5) **4d** 0
5 Total losses available to 2018 **5** 471,425

Codes for Unrelated Business Activity (990-T)

If engaged in more than one unrelated business activity, select up to two codes for the principal activities. List first the largest in terms of gross unrelated income, then the next largest. Be sure to classify your unrelated activities, rather than your related activities. For example, code income from advertising in publications as 541800, Advertising and related services, rather than selecting a code describing a printing or publishing activity. Also, if possible, select a code that more specifically describes your unrelated activity, rather than a code for a more general activity.

Please enter your Unrelated Business Activity Code(s) here

722320

525990

OR

Select a principal activity category Accommodation and Food Services

AND

Select a subcategory Food Services and Drinking Places

AND

Select the first Activity Caterers

If required, select the second principal activity category

Finance and Insurance

AND

Select a subcategory Funds, Trusts, and Other Financial Vehicles

AND

Select the second Activity Other Financial Vehicles (including mortgage REITs & closed-end investment funds)

Line 31 (990-T) - Net Operating Loss Carryover

Carryover Period	Beginning Loss Period (M/D/YYYY)	Ending Loss Period (M/D/YYYY)	Amount of Net Operating Loss	Amount Used in Prior Years/ Carrybacks	Adjustment Under Sec 170(d)(2)(B)	Adjustments	Amount Available This Year	Amount Used This Year	Expiring Losses	Net Operating Loss Available for Carryover	Cumulative Unused Net Operating Loss
20th Preceding Period			0	0	0	0	0	0	0	0	0
19th Preceding Period			0	0	0	0	0	0	0	0	0
18th Preceding Period			0	0	0	0	0	0	0	0	0
17th Preceding Period			0	0	0	0	0	0	0	0	0
16th Preceding Period			0	0	0	0	0	0	0	0	0
15th Preceding Period			0	0	0	0	0	0	0	0	0
14th Preceding Period			0	0	0	0	0	0	0	0	0
13th Preceding Period			0	0	0	0	0	0	0	0	0
12th Preceding Period	7/1/2005	6/30/2006	25,340	0	0	0	25,340	0	0	25,340	25,340
11th Preceding Period	7/1/2006	6/30/2007	810,917	0	0	0	810,917	0	0	810,917	836,257
10th Preceding Period	7/1/2007	6/30/2008	1,269,767	0	0	0	1,269,767	0	0	1,269,767	2,106,024
9th Preceding Period	7/1/2008	6/30/2009	2,427,854	0	0	0	2,427,854	0	0	2,427,854	4,533,878
8th Preceding Period	7/1/2009	6/30/2010	5,141,368	0	0	0	5,141,368	0	0	5,141,368	9,675,246
7th Preceding Period	7/1/2010	6/30/2011	3,439,344	0	0	0	3,439,344	0	0	3,439,344	13,114,590
6th Preceding Period	7/1/2011	6/30/2012	2,259,410	0	0	0	2,259,410	0	0	2,259,410	15,374,000
5th Preceding Period	7/1/2012	6/30/2013	2,157,221	0	0	0	2,157,221	0	0	2,157,221	17,531,221
4th Preceding Period	7/1/2013	6/30/2014	2,962,114	0	0	0	2,962,114	0	0	2,962,114	20,493,335
3rd Preceding Period	7/1/2014	6/30/2015	1,300,900	0	0	0	1,300,900	0	0	1,300,900	21,794,235
2nd Preceding Period	7/1/2015	6/30/2016	2,207,518	0	0	0	2,207,518	0	0	2,207,518	24,001,753
1st Preceding Period	7/1/2016	6/30/2017	697,033	0	0	0	697,033	0	0	697,033	24,698,786
Current Period	7/1/2017	6/30/2018	1,828,169				1,828,169			1,828,169	26,526,955

Taxable Income Before Net Operating Loss: 0Total Net Operating Loss Used This Year: 0

990-T, PART V, LINE 5 - FOREIGN ACCOUNTS

Description	Total
1 BURKINA FASO	
2 CHILE	
3 CHINA	
4 ETHIOPIA	
5 FRANCE	
6 GERMANY	
7 GHANA	
8 HONG KONG	
9 JAPAN	
10 KENYA	
11 MEXICO	
12 SIERRA LEONE	
13 SPAIN	
14 UGANDA	
15 UNITED KINGDOM	
Total	

Gain / Loss Summary (8949)

Federal		Short Term	Long Term
1	Proceeds (sales price)	1 14,625	-171,123
2	Gain (Loss)	2 14,625	-171,123
3	28% Gain (Loss)	3 <input type="text"/>	0
AMT			
4	Proceeds (sales price)	4 14,625	-171,123
5	Gain (Loss)	5 14,625	-171,123
6	28% Gain (Loss)	6 <input type="text"/>	0
State			
7	Proceeds (sales price)	7 14,625	-171,123
8	Gain (Loss)	8 14,625	-171,123