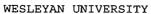


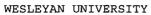
Form 990-T	Ex	empt Organi			iness Ind der section			irn	ОМВ	No 1545-0687	
ronn ooo i	For ealer	- (and pi ndar year 2018 or other ta						20 1 9	G)M10	
- Department of the Treasury	ror cale	Go to www irs go								<u> </u>	
Internal Revenue Service	▶ Do	not enter SSN numbers						1(c)(3)	Open to 501(c)(3	Public Inspection for Organizations Only	
A Check box if address changed		Name of organization (Check be	ox if nar	ne changed and s	ee instruction	ns)			fication number see instructions)	
B Exempt under section	1	WESLEYAN UNI	VERSITY								
X 501(C 123_)	Print	Number, street, and roor	n or suite no 1	faPO	box, see instruction	ons			0646959		
408(e) 220(e		(See instructions)									
408A530(a		237 HIGH STR					.	-			
529(a) C Book value of all assets	-	City or town, state or pro MIDDLETOWN,		•	iP or foreign posta	ar code		520	200		
at end of year	F Gro	up exemption number (-			1 320			
1541592000.		ck organization type				501(c) trust	401(a) trust	Other trust	
H Enter the number o								,	ly (or first)	unrelated	
trade or business he	re ▶ <u>A</u> '	TCH 1			1	f only one	, complete Parts	I-V If mo	ore than one	e, describe the	
first in the blank sp	ace at the	end of the previous se	entence, cor	mplete	Parts I and II, c	omplete a s	Schedule M for e	ach addıtı	onal		
trade or business, the						_					
		corporation a subsidiar				subsidiary	controlled group	¹⁷	▶ L	Yes [X] No	
		identifying number of t ESLEYAN UNIVER:		rporation	on 🕨	Tolopho	ne number ▶ 8	60-685	-2000		
		or Business Incom			(A) Inco		(B) Exp			(C) Net	
1a Gross receipts or		or Business inten			(1,7,1110)		(-, -, -,			4	
b Less returns and allow			c Balance	1c			•]	
2 Cost of goods so	old (Sched	ule A, line 7)		2							
		2 from line 1c	.\	3		,					
4a Capital gain net	ıncome (a	ttach Schedule D)		4a		7,909.				537,909.	
=		Part II, line 17) (attach Fo		4b	-1	0,715.	-			-10,715.	
•		rusts		4c	-3 00	8,127.	A TOTAL			-3,088,127.	
		r an S corporation (attach state		6	-3,00	0,127.	ATCH	<u> </u>		3,000,127.	
		come (Schedule E)		7							
		ents from a controlled organizati		<u> </u>			· · · · · · · · · · · · · · · · · · ·				
·		1(c)(7), (9), or (17) organization									
10 Exploited exemp	t activity ii	ncome (Schedule I) .		10							
11 Advertising incom	ne (Sched	fule J)		11							
•		tions, attach schedule)		12	0.56	0.000				-2,560,933.	
Part II Deduction	ines 3 thr	ough 12		13		0,933.	doductions)	(Event			
		be directly connec						(Except	ioi conti	ibutions,	
14 Compensation o	f officers.	directors, and trustees (Schedule K)	i	REC	FIVE	2	14	. [
15 Salaries and wag	es			:: I				15			
16 Repairs and mail	ntenance			[8	8)' (f. 54 s'		16	3		
17 Bad debts				۶۱	31 . JOF 6	9 2020). §	<u> 17</u>	<u>, </u>		
18 Interest /attach	chedule) i	(see instructions)					اخذا	<u>18</u>	B		
19 Taxes and license	es			· · Ŀ	OGDE	Ν, ⊍7	r .	19		7,771.	
		See instructions for limit						20)		
21 Depreciation (att22 Less depreciatio	acn rorm n claimed	4562) on Schedule A and els	ewhere on re	eturn		222			 h		
					_						
		compensation plans									
		3									
		Schedule I)							i		
		chedule J)									
		chedule)						3 a. 2		237,031.	
		s 14 through 28						13 2 2		-2,805,735.	
		le income before ne	-					- 1		-2,603,733.	
31 Deduction for ne32 Unrelated busine	s operatin	g loss arising in tax ye e income Subtract line	31 from line	.g 0/1 0	, and January	., 2010 (SE	o maducions)	2\ 3		-2,805,735.	
For Paperwork Reduc										om 990-T (2018)	





Form	990-T (2018)			F	Page 2
Par					
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see				
33	Instructions)	1 1	-2,8	05.7	735.
	·	 		,	
34	Amounts paid for disallowed fringes	· —			
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see				
	Instructions)				
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum				
	of lines 33 and 34	· 36	-2,8	05,7	735.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	. 37			
38	Unrelated business taxable income Subtract line 37 from line 36 If line 37 is greater than line 36.	. [
	enter the smaller of zero or line 36	38	-2,8	05,7	735.
Par	t IV Tax Computation				
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0 21)	39			
40	Trusts Taxable at Trust Rates. See instructions for tax computation Income tax on				
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041)				
41	Proxy tax. See instructions	\rightarrow			
42	Alternative minimum tax (trusts only)				
43	Tax on Noncompliant Facility Income. See instructions	-			
44	Total Add lines 41, 42, and 43 to line 39 or 40, whichever applies	. 44			
	t V Tax and Payments				
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a	-			
	Other credits (see instructions)	-			
	General business credit Attach Form 3800 (see instructions)	-			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	_			
	Total credits. Add lines 45a through 45d	45e			
46	Subtract line 45e from line 44	46			
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule).	. 47			
48	Total tax. Add lines 46 and 47 (see instructions)	. 48			0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2				
	Payments A 2017 overpayment credited to 2018				
	2018 estimated tax payments	7			
	Tax deposited with Form 8868	7			
C	Foreign organizations Tax paid or withheld at source (see instructions) 50d	┥			
	500	-			
e		⊣			
Ť	Credit for small employer health insurance premiums (attach Form 8941) 50f	-			
g	Other credits, adjustments, and payments Form 2439				
	Form 4136 Other Total ▶ 50g	┥╻╻╽			
51	Total payments. Add lines 50a through 50g	1 —			
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached	52			_
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	► 53			
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	► 54			
55	Enter the amount of line 54 you want				
Pai	t VI Statements Regarding Certain Activities and Other Information (see instruction	ns)	····	,	
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature of	r other	authority	Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization in	nay hav	e to file		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	foreign	n country		
	here ▶FR, GM, IT, SP			х	
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore	eian trus	t?	·	Х
Ų,	If "Yes," see instructions for other forms the organization may have to file	olgii aao	`		
58	Enter the amount of tax-exempt interest received or accrued during the tax year > \$				
58	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the	best of m	ny knowledge a	nd beli	ef, it is
e:	true, correct, and complete. Declaration of phenerical than taxpaver) is based on all information of which preparer has any knowledge				
Sig	1	•	IRS discuss		
Her	• · <u> </u>		preparer sho		ר ו
		ee mstructi	ions)? X Yes	5	No_
Paid	Che	ck L if			-
	OZPOT	-employed			
-	Only Films name PRENG BBE	ı's EIN ▶	13-5565		
036	Firm's address > 60 SOUTH STREET, BOSTON, MA 02111	na na 6°	17-988-1	000	

Form 990-T (2018)





Form 990-T (2018)				_						ļ	Page 3
Schedule A - Cost of Go	ods Sold. Er	iter method	of invent	tory va	aluation	▶N/A					
1 Inventory at beginning of ye	ear 1			6	Inventory	at end of year	ar	6			
2 Purchases	2			7	Cost of	goods so	old Subtract line				
3 Cost of labor	3	_			6 from	line 5 Er	nter here and in		ŀ		
4a Additional section 263A co	sts				Part I, Im	e2		7	<u> </u>		
(attach schedule)	4a			8	Do the	rules of	section 263A (v	with r	espect to	Yes	No
b Other costs (attach schedul	le) . 4b				property	produced	or acquired fo	r resa	ale) apply		'
5 Total Add lines 1 through					to the or	ganization? .	· · · · · · · · · · · ·		<u></u>	<u> </u>	
Schedule C - Rent Income	(From Real P	roperty ar	nd Perso	nal P	ropert	y Leased V	Vith Real Prope	rty)			
(see instructions)											
1 Description of property	<u></u> .							_			
(1)	<u> </u>										
(2)											
(3)											
(4)							1				
	2. Rent recei	ved or accrue	ed				_				
			rom real and				3(a) Deductions directly connected with the income			ome	
			age of rent for personal property exceeds r if the rent is based on profit or income)				ın columns 2	(a) and :	2(b) (attach sc	hedule)	
		30700		- 50000							
(1)											
(2)											
(3)											
(4)											
Total		Total					(b) Total deduction	one			
(c) Total income. Add totals of co		•		Enter here and on page 1,			1,				
here and on page 1, Part I, line 6							Part I, line 6, colu	mn (B)	<u> </u>		
Schedule E - Unrelated Do	ebt-Financed I	ncome (se	e instruct	tions)		1	5 . I I I			1	
			2 Gross			3 1		onnected with or allocable to nced property			
1 Description of deb	t-financed property		allocable	to debi			ht line depreciation	• •	(b) Other ded		
					, 	(atta	ach schedule)		(attach sche	edule)	
(1)											
(2)											
(3)						<u> </u>					
(4)											
4 Amount of average acquisition debt on or	 Average adjution of or allocation 			Colum		7 Gross	income reportable		Allocable de		
allocable to debt-financed	debt-financed	property		divide columi			n 2 x column 6)	(col	umn 6 x total 3(a) and 3		nns
property (attach schedule)	(attach sch	edule)		Jointil					5(a) and c	\~ <i>II</i>	
(1)			<u> </u>		9						
(2)											
(3)					- 9	4					
(4)					9						
							re and on page 1, ne 7, column (A)		er here and rt I, line 7, co		

Form **990-T** (2018)

Total dividends-received deductions included in column 8

Form 990-T (2018)	WESLEYAN					_				646959	Page 4
Schedule F-Interest, Anni	uities, Royalties				_		t ions (see	instructio	ns)		
		Exem	pt Cor	ntrolled Org	ganızatı	ons					
Name of controlled organization	2 Employer identification number	er į		ted income structions)	ı	of specifie nts made	d included	f column 4 th in the contro ion's gross inc	lling	6 Deduction connected with the column column	ith income
(1)											
(2)											_
(3)											_
(4)											
Nonexempt Controlled Organi	zations							··· ·			
7 Taxable Income	8 Net unrelated in (loss) (see instruct	T T		otal of specific syments made		ınclu	art of column ded in the co ization's gros	ntrolling		Deductions of nected with in column 10	come in
(1)											
(2)											
(3)											
(4)									•		
						Ente	columns 5 a here and on I, line 8, colu	page 1,	Ent	dd columns 6 a ter here and on irt I, line 8, colu	page 1,
Totals					▶						
Schedule G-Investment In	ncome of a Sec	tion 501(c	:)(7), (9), or (17) Orga	nizatio	n (see ins	tructions)			
1 Description of income	2 Amount of		3 Deductions				4 Se	t-asides schedule)	5 Total deductions and set-asides (col plus col 4)		es (col 3
(1)											
(2)											
(3)											
(4)											
	Enter here and o Part I, line 9, co									Enter here and Part I, line 9, o	
Totals ▶ Schedule I – Exploited Exe		come Oth	er Tha	n Adverti	sina Ir	come	see instri	ictions)	_		
Ochedule 1 Exploited Ext		Jonie, Jui	-				occ mone				
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expens directly connected production unrelated business inc	with n of d	4 Net inconfrom unrelated or business 2 minus colling a gain, colling 5 three collings.	ed tradé (column umn 3) ompute	from a	ess income ctivity that unrelated ess income	6 Exper attributal columi	ble to	7 Excess exper (column column 5 more colum	nses 6 minus i, but not than
(1)										+	
(2)											
(3)					-		-				
(4)											
	Enter here and on page 1, Part I, line 10, col (A)	Enter here ar page 1, Pa line 10, col	ırt I,							Enter he on pa Part II, I	ge 1,
Totals		4									
Schedule J- Advertising Ir			me el'	dated De-	·io						
Part I Income From Per	logicals Report	ed on a Co	onsone	dated Bas	SIS			Τ			
1 Name of periodical	2 Gross advertising income	3 Directadvertising of		4 Advertigain or (los 2 minus co a gain, coi cols 5 thro	s) (col ol 3) If mpute		rculation come	6 Reade costs		7 Excess r costs (co minus colu not mor colum	olumn 6 ımn 5, but re than
(1)	 					_					
(2)						-		1		7	•
(3)	 	-								7	
(4)	<u> </u>							1			
	 									1	
Totals (carry to Part II, line (5))			ļ							Form 990	-T (2018)

Page 5

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)						
(2)						
(3)						
(4)				•		
Totals from Part I ▶			· .			
•	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)	-			Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)					•	

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

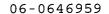
1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)	•	%	
(4)		%	
Total. Enter here and on page 1, Part II,	line 14		

Form 990-T (2018)



ORGANIZATION'S ONLY UNRELATED TRADE OR BUSINESS ACTIVITY

INVESTMENTS IN LIMITED PARTNERSHIPS



FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS OR S CORPORATIONS

UBTI FROM PARTNERSHIPS

-3,088,127.

INCOME (LOSS) FROM PARTNERSHÍPS

-3,088,127.





FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

INVESTMENT MANAGEMENT FEES TAX PREPARATION FEES

199,031. 38,000.

PART II - LINE 28 - OTHER DEDUCTIONS

237,031.

WESLEYAN UNIVERSITY

EIN: 06-0646959

FISCAL YEAR ENDED JUNE 30, 2019

FORM 990-T, LINE 35

PRE-2018 NET OPERATING LOSS CARRYOVER

			<u>UTILIZED IN</u>	<u>UTILIZED IN</u>	AMOUNT
TAX YEAR	GENERATED		PRIOR YEARS	CURRENT YEAR	<u>REMAINING</u>
6/30/2016	175,035		-	-	175,035
6/30/2017	1,869,004		(510,641)	-	1,358,363
6/30/2018	1,409,853	*	-	<u> </u>	1,409,853
	3,453,892		(510,641)	-	2,943,251

* THE NET OPERATING LOSS GENERATED IN THE TAX YEAR ENDED JUNE 30, 2018 HAS BEEN ADJUSTED IN ACCORDANCE WITH REVENUE RULING 81-88. THE \$22,592 INCREASE IN NOL IS DUE TO THE RETROACTIVE REPEAL OF SECTION 512(a)(7).

FORM 990-T, LINE 31

POST-2018 NET OPERATING LOSS CARRYOVER

ACTIVITY NUMBER: 520000

		<u>UTILIZED IN</u>	<u>UTILIZED IN</u>	AMOUNT
TAX YEAR	<u>GENERATED</u>	PRIOR YEARS	CURRENT YEAR	<u>REMAINING</u>
6/30/2019	2,805,735			2,805,735
	2,805,735		-	2,805,735

FORM 990-T, LINE 20

CHARITABLE CONTRIBUTION CARRYFORWARD

TAX YEAR	GENERATED	UTILIZED	EXPIRED	<u>AMOUNT</u> REMAINING
6/30/2014	53		(53)	
6/30/2015	52	-	-	52
6/30/2016	935			935
6/30/2017	19,053			19,053
6/30/2018	19,796			19,796
6/30/2019	8,466	-		8,466
_	48,355	-	(53)	48,302

SCHEDULE D (Form 1120)

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

Employer identification number

Department of the Treasury Internal Revenue Service Name

► Go to www irs gov/Form1120 for instructions and the latest information

OMB No 1545-0123

WES	LEYAN UNIVERSITY				(06-0646959
Part	Short-Term Capital Gains and Losses	(See instructions.))			
	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	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments or loss from Form 8949, Part I, line column (g)	1(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	whole dollars 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			COLUMN (g)		in continue continue (g)
1 b	O Totals for all transactions reported on Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	117,613.			T	117,613.
4	Short-term capital gain from installment sales from I	Form 6252, line 26 or 37	' 		4	
5	Short-term capital gain or (loss) from like-kind exchain	nges from Form 8824			5	
6	Unused capital loss carryover (attach computation)				6	(
	Net short-term capital gain or (loss) Combine lines		1 <u>.</u>	<u> </u>	7	117,613.
Par		(See instructions.)		1		1000 000
	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 or loss from Form 8949, Part II, line column (g)	n(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8 a	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 8b					
8 t	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked	420,296.				420,296.
11	Enter gain from Form 4797, line 7 or 9				11	
12	Long-term capital gain from installment sales from F	Form 6252, line 26 or 37	••••••		12	
13	Long-term capital gain or (loss) from like-kind exchar	nges from Form 8824			13	
14	Capital gain distributions (see instructions)		14			
15 Par	Net long-term capital gain or (loss) Combine lines 8	a through 14 in column	h	· · · · · · · · · · · · · · · · · · ·	15	420,296.
		.				
16	Enter excess of net short-term capital gain (line 7) o	ver net long-term capital	loss (line 15)		16	117,613.
17 18	Net capital gain Enter excess of net long-term capit Add lines 16 and 17 Enter here and on Form 1120,				17	420,296. 537,909.
10	Note: If losses exceed gains, see Capital losses in the		. spor mile on other re-			

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

Schedule D (Form 1120) 2018

Sales and Other Dispositions of Capital Assets ► Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No 1545-0074

Internal Revenue Service

► 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	-	•		1	Social sec	=	taxpayer identificat	ion number
WESLEYAN UNIVERSITY						_	0646959	
Before you check Box A, B, or C below, statement will have the same informat broker and may even tell you which bo.	on as Form 10							
Part I Short-Term. Transac instructions). For long				1 year	or less	are genera	lly short-term (see
Note: You may aggre reported to the IRS a Schedule D, line 1a	and for which	h no adjustr	nents or codes	are re	quired	Enter the to	otals directly or	า
You must check Box A, B, or C be complete a separate Form 8949, for one or more of the boxes, com	page 1, for e	ach applicab	le box If you ha	ve mor	e short-	term transac	-term transaction tions than will fit o	s, on this page
(A) Short-term transactions (B) Short-term transactions (X) (C) Short-term transactions	reported on F	orm(s) 1099	-B showing basis				e Note above)	
(a) Description of property	(b) Date acquired	(c) Date sold or	Proceeds	Cost or d	ther basis lote below	Adjustment, if If you enter an enter a co See the sep	(h) Gain or (loss) Subtract column (e)	
(Example 100 sh XYZ Co)	(Mo , day, yr)	disposed of (Mo , day, yr)			separate uctions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
PARTNERSHIP FLOW THROUGH ST			117,613					117,613
				<u> </u>				
				ļ				_
							`	

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)

117,613

117,613

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

For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2018)

Form 8949 (2018)	Attachment Sequence No	12A	Page 2

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

WESLEYAN UNIVERSITY

Social security number or taxpayer identification number

06-0646959

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

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions) 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).

	* * * * * F * * * * F					<u>′</u>	
You must check Box D, E, or F I a separate Form 8949, page 2, for	or each applic	able box If y	ou have more lo	ng-term transa	es for your lo actions than v	ong-term transac vill fit on this pa	tions, complete ge for one or
more of the boxes, complete as m							
(D) Long-term transactions	reported on F	orm(s) 1099	-B showing basis	was reported to	o the IRS (see	e Note above)	
(E) Long-term transactions	reported on F	orm(s) 1099-	B showing basis	wasn't reporte	ed to the IRS		
X (F) Long-term transactions				·			
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 Column (e) 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)		(h) Gain or (loss) Subtract column (e) from column (d) and
					See the separate instructions		
					(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
PARTNERSHIP FLOW THROUGH LT			420,296				420,296
		-			-		
						_	
							_
	-					-	
2 Totals Add the amounts in columns	(d), (e), (q), 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)			420,296				420,296
above is checked), or line to (if Box F above is checked)			l	I .	l		L

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

Form 8949 (2018)