	••				iv inge e	- , , , d	• 5			
	. (		Elm							\$
∜ Form	99051	E	cempt Orgai			siness Inc der section			rn [	OMB No 1545-0687
1 01111		For cale	dilu ndar year 2017 or othe						<b>0/</b> 1 8	<b>୭</b> ⋒17
Depar	tment of the Treasury	, , , , ,				nstructions and				
Interna	al Revenue Service	▶Do	not enter SSN numbe			· .				Open to Public Inspection for 501(c)(3) Organizations Only
A  _	Check box if address changed		Name of organization	( Check be	ox if na	me changed and see	nstruction	ıs)		yer identification number yees' trust, see instructions )
B Eve	empt under section		AMERICAN BI	IBLE SOCT	ЕТҮ					
	501( C )( 3 )	Print '	Number, street, and n			box, see instruction	s		13-16	623885
	408(e) 220(e)	or Type								ated business activity codes
	408A530(a)		101 N INDER	PENDENCE	MALL	E FL 8			(See in:	structions )
	529(a)	ļ	City or town, state or		-		code		5050	20
	ok value of all assets and of year		PHILADELPHI		_				52599	<del>_</del>
78	34,426,446		up exemption number ck organization type	<del>'</del>			501/6	:) trust	401(a)	trust Other trust
		ation's o	rimary unrelated bus	iness activity	► IN	VESTMENTS	IN LIM	ITED PARTN		
			corporation a subsid							1 1 1 1
			identifying number o		rporati	on 🕨				
			MARK WILSON,			,		ne number <b>&gt;</b> 21		
			or Business Inco	ome	1	(A) Incon	ne	(B) Expen	ses	(C) Net
1a	Gross receipts or			c Balance ▶						
ь 2	Cost of goods sol		ule A, line 7)		1c 2			·		
3			2 from line 1c		3		•			
4 a	Capital gain net ii	ncome (a	ttach Schedule D)	MAZ.	4a	166	,662			166,662
b			Part II, line 17) (attach		4b				-	
С	Capital loss dedu	ction for t	rusts		4c					
5			os and S corporations (a	•		-136	, 319	- ATCH 1		-136,319
6		•			6				_	
7 8			come (Schedule E)		7 8			<u> </u>	•	
9			nts from controlled organiz: 1(c)(7), (9), or (17) organiz					-	· · · · · ·	
10			ncome (Schedule I)		10			<del></del>		
11		-	lule J)		11					
12	•		tions, attach schedule		12		, 953	ATCH 2		135,953
13			ough 12				, 296	l location a X/I		166,296
Par			Taken Elsewher	•					except to	or contributions,
14			be directly conn directors, and trustee						14	_
15	Salaries and wage	es	directors, and trustee	3 (Ocheddie IV)		1	J. 4		. 15	
16	Repairs and main	tenance				. 4 MAD	0.1.2	019 - 0	16	
17	Bad debts		. <b>1</b> 			. log ivi An	عبعد عنسند	S   S	17	
18	Interest (attach so	chedule)					<del></del>	<del></del>	18	1.560
19	Taxes and license	s				OGI	JEN	<u>.V.I</u> .	19	1,560
20		•	See instructions for hi	•					20_	
21 22			on Schedule A and					· -		
23	·									
24			compensation plans							
25	Employee benefit	programs	5						25	
26			Schedule I)							
27			chedule J)							26 001
28			chedule)							36,881
29 30			s 14 through 28 le income before i							127,855
31			on (limited to the am							
32			e income before spe							127,855
33	Specific deduction	n (Gener	ally \$1,000, but see	line 33 instruc	tions fo	or exceptions)			/ 33	1,000
34	Unrelated busine	ess taxa	ble income Subtra	ict line 33 fr	om lir	ne 32 If line 33	3 is grea	ater than line s	3 1	
	enter the smaller of	of zero or	line 32			<u> </u>		<u>.</u> ./. ˈ	. 34	126,855
For P	raperwork Reduct 0 2,000 0 3 T D JSA 0 0	ion Act N	lotice, see instruction	3 30 DM	,, ,	7 7 10			7	Form <b>990-T</b> (2017
	3003TR \00	E 2/2	22/2019 1 4	3 30 PM	v 1	/-/ 10	'	0163877-00	J 3 Z	PAGE

4	
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Form	990-T (2017) AMERICAN BIBLE SOCIETY	13-1623885	Page 2
Pa	rt III Tax Computation	***	
35	Organizations Taxable as Corporations. See instructions for tax computation Controlled group	7	
	members (sections 1561 and 1563) check here ▶ See instructions and		
а	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)	1 1	
	(1)[\$ (2)[\$ (3)[\$	1	
b	Enter organization's share of (1) Additional 5% tax (not more than \$11,750) \$		
	(2) Additional 3% tax (not more than \$100,000)	] [	
С	Income tax on the amount on line 34	▶ 35c	29,707.
36	Trusts Taxable at Trust Rates See instructions for tax computation Income tax or	n	
	the amount on line 34 from Tax rate schedule or Schedule D (Form 1041).	36	
37	Proxy tax See instructions	<b>→</b> 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	29,707.
	t IV Tax and Payments	· · · · · · · · · · · · · · · · · · ·	
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 41a	4	
	Other credits (see instructions)	-	
C	General business credit Attach Form 3800 (see instructions)	4	
	Credit for prior year minimum tax (attach Form 8801 or 8827)	-  <u>                                   </u>	
	Total credits. Add lines 41a through 41d	416	29,707.
42 43	Subtract line 41e from line 40 .  Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8868 Other (attach schedule), and the form 8697 Other (atta	42	29,101.
		43	29,707.
45 2	Total tax Add lines 42 and 43		2377011
h	2017 estimated by payments	i'`	
c	Tax deposited with Form 8868. 51,600.		
ď	Foreign organizations Tax paid or withheld at source (see instructions)	1	
e	Backup withholding (see instructions)	1	
f	Credit for small employer health insurance premiums (Attach Form 8941)	1	
9		7	
	Other credits and payments  Form 2439  Other  Total		
46	Total payments. Add lines 45a through 45g	146	59,202.
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  Overpayment If line 46 is larger than the total of lines 44 and 47, enter amount overpaid.	48	
49			29,495.
	Enler the amount of line 49 you want: Credited to 2018 estimated tax ▶29, 495. Refunded		
/ Par			1 1
51	At any time during the 2017 calendar year, did the organization have an interest in or a signature or	- 1	Yes No
	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization m	•	
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If YES, enter the name of the here ▶ TURKEY, BRAZIL	toreign country	x
			X
	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore If YES, see instructions for other forms the organization may have to file	ign trust?	<del>-   ^ -</del>
53	Enter the amount of tax-exempt interest received or accrued during the tax year > \$		
	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
Sign	true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
Here			
		e instructions)? X Ye	
Detel	Print/Type preparer's name Proparer's signature C n Date Chec	k PTIN	
Paid	ALYCIA SOLECKI (Lucio C) Olich 1, 2/22/2019   selfe		72637
Prep Use	Only Firm's name GRANT THORNTON LLP 0 Firm's	s EIN ▶36-6055	558
-30	Firm's address > 2001 MARKET STREET, SUITE 700, PHILADELPHIA, PA 19103 Phone	215-561	-420 <u>0</u>

Form 990-T (2017)

## AMERICAN BIBLE SOCIETY

4	
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Form 990-T (2017)									Pa	age 3
Schedule A - Cost of Go	oods Sold. Er	ter method	d of invento				·		_	_
1 Inventory at beginning of y	/ear . 1	_		6 Inventory	at end of yea	ar	6			
<b>2</b> Purchases	2			7 Cost of	goods so	ld Subtract line				
3 Cost of labor	3			6 from I	ine 5 En	iter here and in				
4a Additional section 263A co	osts			Part I, line	2		7			
(attach schedule)	4a			8 Do the	rules of	section 263A (w	vith res	spect to	Yes	No
<b>b</b> Other costs (attach schedu	ıle) . <mark>4b</mark>					or acquired for			].	
5 Total Add lines 1 through	4b . 5			to the orga	inization? .			<u> </u>		Х
Schedule C - Rent Income	(From Real P	roperty a	nd Person	al Property	Leased V	Vith Real Proper	rty)			
(see instructions)									_	
1 Description of property										
(1)			· · · · · · · · · · · · · · · · · · ·							
(2)										
(3)										
(4)										
	2 Rent recei	ved or accru	ed							
for personal property is more than 10% but not percentage of rent for			age of rent for	personal property (if the r personal property exceeds based on profit or income)  3(a) Deductions directly in columns 2(a) and						ne
(1)										
(2)										
(3)	<del></del>									
(4)								•		
Total		Total								
(c) Total income Add totals of co	• • • • •	•				(b) Total deductio Enter here and on Part I, line 6, colur	page 1,	_		
here and on page 1, Part I, line 6 Schedule E - Unrelated De			ae instructio	ne)		Fait i, line 6, colur	IIII (D)			
Schedule L - Officialed Di	ebt-r manceu n	icome (se			3 [	Deductions directly cor	nected w	nth or allocable	to	
1 Description of deb	ot-financed property			ncome from or or debt-financed		debt-financ		•		
. 2000	, managa property			operty	(a) Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)			
(1)					(				,	
(2)									-	
(3)	<del></del>									
(4)							-			
4 Amount of average 5 Average adjusted basis acquisition debt on or of or allocable to debt-financed debt-financed property		4 0	Column divided olumn 5		income reportable n 2 x column 6)		Allocable deduction 6 x total of 3(a) and 3(b)	column	ıs	
property (attach schedule)	(attech sone			%						
(1)				%						—
(2) (3)				%				<del></del>		
(4)				/° %						
(7)			<u> </u>		Enter her	e and on page 1,	Enter	here and on	nage :	
	`					e 7, column (A)		, line 7, colur		
Totals										—

Form **990-T** (2017)



Page 4

Schedule F - Interest, Ann	uities, Royalties	s, and	Rents	Fro	m Contro	lled Or	ganizat	i <b>ons</b> (see	instruction	ons)	
		£	Exem	ot Co	ntrolled Or	ganızatı	วกร				
Name of controlled organization	2 Employer identification numb	ber	3. Net unrelated income (loss) (see instructions)		t .	otal of specified inc		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 Organ	ızatıons				·····						
7 Taxable Income	8 Net unrelated i	8 Net unrelated income (loss) (see instructions)			Total of specific ayments made		ınclu	art of column ded in the co zation's gros	ntrolling		Deductions directly inected with income in column 10
(1)											
(2)											
(3)											
(4)											-
Totals	noome of a So	· · · ·			(9) or (17	<b>&gt;</b>	Enter Part	columns 5 a here and on I, line 8, colu	page 1, mn (A)	Ent	dd columns 6 and 11 er here and on page 1, rt I, line 8, column (B)
Schedule G - Investment I		ction 5	טווכ	<u>,,,,</u>	3 Deduc		IIIZatio	·		· I	5 Total deductions
1 Description of income	2 Amount o	f income			directly cor (attach sch	nnected			et-asides schedule)		and set-asides (col 3 plus col 4)
<u>(1)</u>											
(2)											
(3)											
(4)									<u></u>		<u>.                                    </u>
Totals ▶ Schedule I - Exploited Ex	Enter here and Part I, line 9, c empt Activity In	column (A	)	r Tha	an Adverti	sing In	come (	see instru	ictions)		Enter here and on page 1, Part I, line 9, column (B)
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected wil production o unrelated business incon		uth of	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7		from a	ss income ctivity that unrelated ss income	6 Expe attributa colum	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(2)											
(3)											
(4)											
	Enter here and on page 1, Part I, line 10, col (A)	page	here and e 1, Part i 0, col i	Ц,					,		Enter here and on page 1, Part II, line 26
Totals			···		<u> </u>						<u>\</u>
Schedule J - Advertising I				n n - 11	alasa al ID - :	.:-					
Part I Income From Per	riodicais Repor	tea on	a Co	nsoli	dated Bas	SIS					
1 Name of periodical	2 Gross advertising income	I		3 Direct ga ertising costs a		ising s) (col ol 3) If mpute ough 7		culation come	6 Read cos		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)											į
(2)											
(3)					]						┐ !
(4)		-			1				_	_	7
· ·		_	-						1		,
Totals (carry to Part II, line (5))								<del>.</del>			Form <b>990-T</b> (2017)

Form 990-T (2017) 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 (2017)



13-1623885

ATTACHMENT 1

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

INCOME FROM LP INVESTMENTS

-136,319

INCOME (LOSS) FROM PARTNERSHIPS

-136,319



13-1623885

ATTACHMENT 2

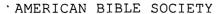
PART I - LINE 12 - OTHER INCOME

IRC SECTION 512- QUALIFIED TRANS FRINGE BENEFITS

135,953

PART I - LINE 12 - OTHER INCOME

135,953



13-1623885

ATTACHMENT 3

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

DOMESTIC PRODUCTION ACTIVITIES DEDUCTION UNDER SECTION 199

TAX PREPARATION FEES
PORTFOLIO EXPENSES OF LP INVESTMENTS
LP PORTFOLIO DEDUCTIONS

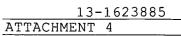
26,275

4,399 6,207

PART II - LINE 28 - OTHER DEDUCTIONS

36,881





FORM 990-T FISCAL YEAR CORPORATION TAX COMPUTATION APPLYING BL	ENDED TAX RATE
1 UNRELATED BUSINESS TAXABLE INCOME (PAGE1, PART II, LINE 34)	126,855
2 TAX ON LINE 1 FIGURED USING THE TAX RATE SCHEDULE OR TAX	
COMPUTATION WORKSHEET FOR MEMBERS OF A CONTROLLED GROUP .	32,723
3 TAX ON LINE 1 FIGURED USING THE 21% RATE	26,640
4 MULTIPLY LINE 2 BY THE NUMBER OF DAYS 184	
IN THE CORPORATION'S TAX YEAR BEFORE 01/01/2018	6,021,032
5 MULTIPLY LINE 3 BY THE NUMBER OF DAYS 181	
IN THE CORPORATION'S TAX YEAR AFTER 12/31/2017	4,821,840
6 DIVIDE LINE 4 BY THE TOTAL NUMBER OF DAYS 365	
IN THE CORPORATION'S TAX YEAR	16,496.
7 DIVIDE LINE 5 BY THE TOTAL NUMBER OF DAYS 365	,
IN THE CORPORATION'S TAX YEAR	13,211
	-
8 ADD LINES 6 AND 7 THE TOTAL TAX FOR THE FISCAL YEAR	29,707.

## 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

OMB No 1545-0123

Department of the Treasury Internal Revenue Service

► Go to www irs gov/Form1120 for instructions and the latest information Name Employer identification number AMERICAN BIBLE SOCIETY 13-1623885

Part	Short-Term Capital Gains and Losses	s - Assets Held O	ne Year or Less		
	See instructions for how to figure the amounts to enter on the lines below	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s)	Subtract column (e) from
	This form may be easier to complete if you round off cents to whole dollars	(sales price)	(or other basis)	8949, Part I, line 2, column (g)	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				
1 b	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		/		0
3	Totals for all transactions reported on Form(s) 8949		/		
	with Box C checked			<u> </u>	939
4	Short-term capital gain from installment sales from l	Form 6252, line 26 or 3	37		1
5	Short-term capital gain or (loss) from like-kind exchain	nges from Form 8824	/	5	<b>i</b>
6	Unused capital loss carryover (attach computation)		/ 		; ( )
_	Not the state of t				939
Part	Net short-term capital gain or (loss) Combine lines  Long-Term Capital Gains and Losses				939
rari	See instructions for how to figure the amounts to enter on	- i	1	(g) Adjustments to ga	ın (h) Gain or (loss)
	the lines below  This form may be easier to complete if you round off cents to whole dollars	(d)/ Procéeds (sales price)	(e) Cost (or other basis)	or loss from Form(s) 8949, Part II, line 2, column (g)	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 8b.			•	
8b	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				22.25
	with Box F checked			<u> </u>	-23,250
11	Enter gain from Form 4797, line 7 or 9				188,973
12	Long-term capital gain from installment sales from F	Form 6252, line 26 or 3	7		2
13	Long-term capital gain or (loss) from like-kind exchar		3		
14	Capital gain distributions (see instructions)				1
15	Net long-term capital gain or (loss) Combine lines 8	a through 14 in column	h	1	165,723
Part	Summary of Parts I and II	· ·		·····	
16	Enter excess of net short-term capital gain (line 7) o	ver net long-term capita	al loss (line 15)	10	939
17	Net capital gain Enter excess of net long-term capit	al gain (line 15) over n	et short-term capital los	s (line 7) 11	165,723
18	Add lines 16 and 17 Enter here and on Form 1120,				
	the corporation has qualified timber gain, also compli			<u>1</u> 1	166,662
	Note If losses exceed gains, see Capital losses in the	e instructions			

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

Schedule D (Form 1120) 2017

## Sales and Other Dispositions of Capital Assets

► Go to www irs gov/Form8949 for instructions and the latest information.

OMB No 1545-0074

Department of the Treasury Internal Revenue Service

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D

AMERICAN BIBLE SOCIETY

Social security number or taxpayer identification number

13-1623885

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

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

(B) Short-term transactions r  (C) Short-term transactions r	•		_	wash t report	Adjustment, if	any, to gain or loss amount in column (g),	<u></u>
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	enter a co See the sepa	(h) Gain or (loss) Subtract column (e	
(Example 100 sh XYZ Co )	(Mo , day, yr )	disposed of (Mo , day, yr )	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
SHORT TERM CAPITAL GAINS/(LOSSES)							939
<u> </u>							
		-					
		-					
_							
		_					
2 Totals Add the amounts in columns negative amounts) Enter each total Schedule D, line 1b (if Box A above	here and incl is checked), line	lude on your e 2 (if Box B					939

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 (2017)

8949 (2017)	Attachment Sequence No 12A	Page 2
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Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side.

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

Social security number or taxpayer identification number

AMERICAN BIBLE SOCIETY

13-1623885

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

Form

**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).

١	/ou	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)							
	П	(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS							

(a) Description of property (Example 100 sh XYZ Co )	(b) Date acquired (Mo , day, yr )	(c) Date sold or disposed (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			(h) Gain or (loss) Subtract column (e) from column (d) and
					(f) Code(s) from instructions	(g) Amount of adjustment	with column (g)
LONG TERM CAPITAL GAINS/(LOSSES)							-23,250
**						-	
					•		,
						-	
2 Totals Add the amounts in columns in negative amounts) Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	here and includ is checked), line	e on your 9 (if Box E					-23,250

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

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