For Paperwork Reduction Act Notice, see instructions.

V 19-7 1F

Deduction for net operating loss arising in tax years beginning on or after January

Unrelated business taxable income Subtract line 30 from line 29

0191697-00004

30

921 P

PAGE 62

-158,442

Form 990-T (2019)

Par	t III 、	Total Unrelated Business Taxable	e Income				_
32	Total o	of unrelated business taxable income con	mputed from all unjelated the	des or businesses	(see		
•	instruct	ons)			32		
33	Amount	s paid for disallowed fringes			33		
34		ble contributions (see instructions for limitation i					
35		inrelated business taxable income before					_
•-		the sum of lines 32 and 33			1 1 1	(0
36		on for net operating loss arising in			- 1		_
50		ions)			1 1 1		
27		unrelated business taxable income before spe					—
37		•				1,000	<u> </u>
38		deduction (Generally \$1,000, but see line 38				1,000	<u>_</u>
39		ed business taxable income Subtract line		-	1 1 1	(0
		e smaller of zero or line 37		<u> </u>	3'9		_
		Tax Computation		<u> </u>		 	—
40/	•	zations Taxable as Corporations Multiply line 3					
41	Trusts		structions for tax computat	. \			
		ount on line 39 from Tax rate schedule o					_
42		ax. See instructions	$\cdots \cdots $		▶ 42		
43		tive minimum tax (trusts only)			43		
44		Noncompliant Facility Income. See instructions	s		44		_
45		dd lines 42, 43, and 44 to line 40 or 41, which	never applies	 <u> </u>	4 ² 5		_
		Tax and Payments					_
		tax credit (corporations attach Form 1118, trus		6a			
b	Other o	redits (see instructions),	10.07.	l6b			
С	Genera	I business credit Attach Form 3800 (see instruc	ations) \. /. / \. \	16c			
d	Credit f	or prior year minimum tax (attach Form 8801 o	эг 8827) Х	16d			
е	Total co	redits. Add lines 46a through 46d			46e		_
47	Subtrac	t line 46e from <u>line 45 </u>	. <u></u>	. <u></u>	47		_
48	Other ta	xes Check if from Form 4255 Form 8611	1 Form 8697 Form 8866	Other (attach sched	dule) . 48		_
49	Total ta	x Add lines 47 and 48 (see instructions)			49	(0
50	2019 n	et 965 tax liability paid from Form 965-A or For	ine 3مال (k), rm 965-B, Part II, columh	3	50		
51 a	Paymer	nts A 2018 overpayment credited to 2019	في بندي المارية	1a 100,0	000	"	
		stimated tax payments],		
		posited with Form 8868					
		organizations Tax paid or withheld at source (s					
е	Backup	withholding (see instructions)		1e			
f	Credit f	or small employer health insurance premiums ((attach Form 8941)	1f			
g		redits, adjustments, and payments Form 2					
_		orm 4136 Other	Total ► 5	1g			
52	Total p	ayments. Add lines 51a through 51g			52	100,000)
53	-	ed tax penalty (see instructions) Check if Form			53		_
54		e. If line 52 is less than the total of lines 49, 50					
55		yment. If line 52 is larger than the total of lines			4 4	100,000	5
56		e amount of line 55 you want		Refunde		25,000	<u> </u>
Par	t VI	Statements Regarding Certain A		rmation (see instru	uctions)	•	_
57	At any	time during the 2019 calendar year, did				authority Yes No	— o
	•	financial account (bank, securities, or other	•	•		·	_
		Form 114, Report of Foreign Bank and		-			
		JAPAN				, x	
58		the tax year, did the organization receive a dist	tribution from, or was it the grant	or of, or transferor to	a foreign trust?	, X	_
	_	see instructions for other forms the organization			a roroigir bust	· · · · 	—
59	•	ne amount of tax-exempt interest received or ac					
73		nder penalties of perjury, I declare that I have examined		dules and statements, and t	a the best of my	knowledge and belief if	t is
Sig	l tr	ue, correct, and complete Declaration of preparer (other than t	taxpayer) is based on all information of which				
Her		Katha Mara-		nancial Officer, and		RS discuss this return	
ner		ignature of officer	Date Treasure	er	with the p (see instruction	oreparer shown below	ı
		Print/Type preparer's name	Preparer's signature	Date		PTIN	٥
Paid	i	SCOTT THOMPSETT	Sith Shampatt	11/5/2020	Check if	P00741490	
	oarer	CDANE ELLOPIEDA ELL	<u>. L</u>	121/0/2020	self-employed	36-6055558	—
•	Only	Firm's name GRANT THORNTON LLI		Y 10017-2013		2-599-0100	—

%

%

% %

Form 990-T (2019)

Enter here and on page 1,

Part I, line 7, column (B)

(1)

(2) (3)

(4)

Total dividends-received deductions included in column 8

Enter here and on page 1, Part I, line 7, column (A)

Page 4

Schedule F – Interest, Ann	uities, Royalties	, and R	ents Fr	om Contro	lled O	ganiza	tions (see	e instructi	ons)	
				ntrolled Org			_			
Name of controlled organization	2 Employer identification number	\$1		ated income instructions)	included in the controlling		olling	6 Deductions directly connected with income in column 5		
(1)						-				
(2)				•						
(3)										
(4)										
Nonexempt Controlled Organiz	zations									
7 Taxable Income	8. Net unrelated in (loss) (see instruction			Total of specific ayments made		ınclud	rt of column led in the cor zation's gross	ntrolling		Deductions directly inected with income in column 10
(1)										
(2)									_	
(3)										
(4)							columns 5 a			id columns 6 and 11
Totals		 tion 50	 1(c)(7),	(9), or (17		Part	here and on I, line 8, colur	nn (A)		er here and on page 1, rt I, line 8, column (B)
1 Description of income	2 Amount of	income		3 Deduction of the 3 directly cortain (attach school)	nected			t-acides		5 Total deductions and set-asides (col. 3 plus col. 4)
(1)										
(2)			_				_			
(3)										
(4)	ļ <u>.</u>									<u></u>
Totals	Enter here and of Part I, line 9, or	olumn (A)	Mar Th		:_: l			-4		Enter here and on page 1, Part I, line 9, column (8)
Schedule I-Exploited Exe	empt Activity in	come, C	tner in	ian Advert	ising ir	icome (see instru	Ctions)		
1 Description of exploited activity	2. Gross unrelated business income from trade or business	connec produc unre	ctly	from unrelated or business 2 minus coll f a gain, coll f			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)					_					
Totals ▶	Enter here and on page 1, Part I, line 10, col (A)		re and on , Part I, col (B)							Enter here and on page 1, Part II, line 25
Schedule J- Advertising In	ncome (see instri	uctions)		<u> </u>						···· ·
Part I Income From Per			Consol	idated Bas	sis					
Tarti moome Hom To										T
1. Name of periodical	2 Gross advertising income		4 Advertisin gain or (loss) (2 minus col 3 a gain, compt cols 5 through		ss) (col ol 3) If mpute	If 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)) ▶									,	5 990 T (2010)

Form **990-T** (2019)

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.)

2 through 7 on a ii	ine-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 26
Totals, Part II (lines 1-5) ▶					<u> </u>	
Schedule K - Compensation	n of Officers, D	irectors, and Tr	ustees (see instr	uctions)		

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** (2019)

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning $\frac{07/01}{}$, 2019, and ending 06/30 ,20 20

► Go 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)

Name of the organization

COUNCIL ON FOREIGN RELATIONS, INC

Unrelated Business Activity Code (see instructions) ▶ 541800

Employer identification number

13-1628168

1,842,133

	Describe the unrelated trade or business ADVERTISING				
Pa	Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales				
ь	Less returns and allowances c Balance ▶	1c			
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit Subtract line 2 from line 1c	3			
4a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
c	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5_			
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)				
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17)				
	organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)ATCH. 5.	11	951,243	1,842,133	-890,890
12	Other income (See instructions, attach schedule)	12			

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income)

13

951,243

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts		
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses		
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21Ь	
22	Depletion	22	
23	Contributions to deferred compensation plans		
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)		
27	Other deductions (attach schedule)	27	4,016
28	Total deductions Add lines 14 through 27		4,016
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-894,906
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions).	30	
31	Unrelated business taxable income Subtract line 30 from line 29		-894,906

For Paperwork Reduction Act Notice, see instructions

13 Total. Combine lines 3 through 12.....

Schedule M (Form 990-T) 2019

-890,890

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an **Unrelated Trade or Business**

OMB No 1545-0047

Department of the Treasury

For calendar year 2019 or other tax year beginning $\frac{07/01}{}$, 2019, and ending 06/30 .20 20

Internal Revenue Service

▶ Go 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).

Name of the organization

COUNCIL ON FOREIGN RELATIONS, INC

Employer identification number

13-1628168

Unrelated Business Activity Code (see instructions) ▶ 900099 Describe the unrelated trade or business ► EVENT PLANNING

Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net Gross receipts or sales c Balance Less returns and allowances 2 Cost of goods sold (Schedule A, line 7)..... Gross profit Subtract line 2 from line 1c 3 3 4a Capital gain net income (attach Schedule D) 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797). . 4b 4c Income (loss) from a partnership or an S corporation (attach 5 5 6 6 Unrelated debt-financed income (Schedule E). 7 8 Interest, annuities, royalties, and rents from a controlled 8 9 Investment income of a section 501(c)(7), (9), or (17) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J)....... 11 1,082,197 1,082,197 12 Other income (See instructions, attach schedule) ATCH. 7. 1,082,197 1,082,197 Total. Combine lines 3 through 12...... 13

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income)

14	Compensation of officers, directors, and trustees (Schedule K).	14	
15	Salaries and wages		500,783
16	Repairs and maintenance		82,682
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	
22	Depletion	22	
23	Contributions to deferred compensation plans	23	· · · · · · · · · · · · · · · · · · ·
24	Employee benefit programs		83,367
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule)	27	475,043
28	Total deductions. Add lines 14 through 27	28	1,141,875
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-59,678
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions).	30	
31	Unrelated business taxable income Subtract line 30 from line 29	31	-59,678

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

4960HS 700J

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

Department of the Treasury

For calendar year 2019 or other tax year beginning $\frac{07/01}{}$, 2019, and ending

Internal Revenue Service Name of the organization ▶ Go 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)

Employer identification number

COUNCIL ON FOREIGN RELATIONS, INC

13-1628168

Unrelated Business Activity Code (see instructions) ▶ 531120 Describe the unrelated trade or business ▶ DEBT FINANCED INCOME

Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales				_
ь	Less returns and allowances c Balance	1c			
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit Subtract line 2 from line 1c	3			
4a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E), . ATCH. 9.	7	40,400	102,698	-62,298
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (
-	organization (Schedule G)	9		1	
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	H			
12	Other income (See instructions, attach schedule)				
13	Total. Combine lines 3 through 12		40,400	102,698	-62,298

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)		
27	Other deductions (attach schedule)	27	2,677
28	Total deductions. Add lines 14 through 27	_	2,677
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-64,975
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions).		
31_	Unrelated business taxable income Subtract line 30 from line 29	31	-64,975

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2019

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

ORDINARY INCOME FROM LIMITED PARTNERSHIP INV.

-31,800.

INCOME (LOSS) FROM PARTNERSHIPS

-31,800.

ATTA	CHMENT	3

FORM 990T - PART II - LINE 18 - INTEREST

FROM INVESTMENTS IN LIMITED PARTNERSHIPS

PART II - LINE 18 - INTEREST

11,011.

11,011.

FORM 990T - PART II - LINE 27 - TOTAL OTHER DEDUCTIONS

PORTFOLIO EXPENSES FROM LIMITED PARTNERSHIPS TAX PREPARATION FEES ALLOCATED INVESTMENT FEES

48,649.

18,743.

5,290.

PART II - LINE 27 - OTHER DEDUCTIONS

72,682.

Α	TT	AC	CHM	1EN	T	6
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FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

TAX PREPARATION FEES

4,016.

PART II - LINE 27 - OTHER DEDUCTIONS

4,016.

FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

ADMINISTRATIVE EXPENSES	255,079.
SECURITY SERVICES	101,416.
UTILITIES	45,399.
EVENT EXPENSES	30,000.
CONSULTING SERVICES	21,094.
OFFICE EXPENSES	20,716.
TAX PREPARATION FEES	1,339.

PART II - LINE 27 - OTHER DEDUCTIONS

475,043.

FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

TAX PREPARATION FEES

2,677.

PART II - LINE 27 - OTHER DEDUCTIONS

2,677.

NET OPERATING LOSS SCHEDULE - PRIOR 6/30/2019

	LOSS	AMOUNT	AMOUNT OF LOSS
TAX YEAR	GENERATED	UTILIZED	CARRIED-FORWARD
6/30/2012	(239, 383)	239,383	_
6/30/2013	(87,088)	87,088	_
6/30/2014			
6/30/2015			_
6/30/2016			-
6/30/2017	(69,727)	2,387	(67,340)
6/30/2018	(72,882)	_	(72,882)

NOL AVAILABLE FOR USE IN 6/30/2021

(140,222)

NET OPERATING LOSS - POST 6/30/2019

BUCKET 1: INVESTMENT IN LIMITED PARTNERSHIPS

	LOSS	AMOUNT	AMOUNT OF LOSS
TAX YEAR	GENERATED	UTILIZED	CARRIED-FORWARD
6/30/2019	(262,602)	-	(262, 602)
6/30/2020	(158, 442)		(158, 442)

NOL AVAILABLE FOR USE IN 6/30/2021

(421,044)

NET OPERATING LOSS - POST 6/30/2019 BUCKET 2:ADVERTISING

	LOSS	AMOUNT	AMOUNT OF LOSS		
TAX YEAR	GENERATED	UTILIZED	CARRIED-FORWARD		
6/30/2019	(276, 737)		(276,737)		
6/30/2020	(894,906)	_	(894, 906)		

NOL AVAILABLE FOR USE IN 6/30/2021

(1, 171, 643)

NET OPERATING LOSS - POST 6/30/2019

BUCKET 3: EVENT PLANNING

	LOSS	AMOUNT	AMOUNT OF LOSS	
TAX YEAR	GENERATED	UTILIZED	CARRIED-FORWARD	
6/30/2020	(59, 678)	<u>-</u>	(59, 678)	

NOL AVAILABLE FOR USE IN 6/30/2021

(59,678)

NET OPERATING LOSS - POST 6/30/2019 BUCKET 4: DEBT FINANCED PROPERTY

TAX YEAR	LOSS GENERATED	AMOUNT UTILIZED	AMOUNT OF LOSS CARRIED-FORWARD		
6/30/2019	(48,640)	-	(48, 640)		
6/30/2020	(64, 975)		(64, 975)		

NOL AVAILABLE FOR USE IN 6/30/2021

(113, 615)

CAPITAL LOSS CARRY FORWARD SCHEDULE:

TAX YEAR	AMOUNT GENERATED	AMOUNT UTILIZED	AMOUNT CARRIED-FORWARD	
	·			
6/30/2020	(3,358)		(3, 358)	

AMOUNT CARRIED-FORWARD TO 6/30/2021

(3, 358)

SCHEDULE D (Form 1120)

Capital Gains and Losses

OMB No 1545-0123

Department of the Treasury Internal Revenue Service

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-ISC, 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

Vame	, , , , , , , , , , , , , , , , , , ,				Employ	er identifica	ation nu	mber
COUN	ICIL ON FOREIGN RELATIONS, INC				-	13-1628	3168	
Old th	ne corporation dispose of any investment(s) in a	qualified opportuni	ty fund during the ta	ax year?	▶[Yes	X	No
<u>f "Ye</u>	s," attach Form 8949 and see its instructions fo			your gain or lo	ss			
<u>Part</u>	Short-Term Capital Gains and Losses	(See instructions)	· · · · · · · · · · · · · · · · · · ·				
	See instructions for how to figure the amounts to enter on the lines below	(d)	(e)	(g) Adjustments or loss from Fo		(h) Gain o		'a) from
	This form may be easier to complete if you round off cents to	Proceeds	Cost	8949, Part I, lir		column (c		
	whole dollars	(sales pnce)	(or other basis)	column (g)		the result	with coli	umn (g)
та	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					!		
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked							
	Totals for all transactions reported on Form(s) 8949		_	 				_
-	with Box B checked							
3	Totals for all transactions reported on Form(s) 8949	-		<u> </u>		<u> </u>		
-	with Box C checked	1,970				ľ		1,970
								-
4	Short-term capital gain from installment sales from F	Form 6252, line 26 or 3	7		. 4	-	<u></u>	-
5	Short-term capital gain or (loss) from like-kind exchar	nges from Form 8824			5_	-		
					1	١,		
6	Unused capital loss carryover (attach computation)			• • • • • • • •	· _6_	(
7	Net short-term capital gain or (loss) Combine lines 1	1a through 6 in column	h <u></u>	<u></u>	. 7			1,970
<u>Pa</u> rt	Long-Term Capital Gains and Losses	(See instructions.)						
	See instructions for how to figure the amounts to enter on the lines below	(d) Proceeds	(e) Cost	(g) Adjustments or loss from For 8949, Part II, III	m(s)	(h) Gain o Subtract of column (co	column (
	This form may be easier to complete if you round off cents to whole dollars	(sales pnce)	(or other basis)	column (g)	le 2,	the result	•	
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						_	
86	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					1		
10	Totals for all transactions reported on Form(s) 8949						-	
	with Box F checked	-5,328	. <u> </u>	<u> </u>				5,328
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	⁷		12			
12								
		nges from Form 8824			13			
13	Long-term capital gain or (loss) from like-kind exchar	nges from Form 8824			13			
					·			
13 14 15	Long-term capital gain or (loss) from like-kind exchar Capital gain distributions (see instructions)				14		-5	5,328
13 14 15	Long-term capital gain or (loss) from like-kind exchar Capital gain distributions (see instructions)				14		_ 5	5,328
13	Long-term capital gain or (loss) from like-kind exchar Capital gain distributions (see instructions)	a through 14 in column	h	· · · · · · · · · · · · · · · · · · ·	14		-5	5,328
13 14 15 Part	Long-term capital gain or (loss) from like-kind exchar Capital gain distributions (see instructions) Net long-term capital gain or (loss) Combine lines 8 III Summary of Parts I and II Enter excess of net short-term capital gain (line 7) or	a through 14 in column	h		15		_ ;	5,328
13 14 15 Part	Long-term capital gain or (loss) from like-kind exchar Capital gain distributions (see instructions) Net long-term capital gain or (loss) Combine lines 8	ver net long-term capitat	h	ss (line 7)	14 15 16 17		_ ;	5,328

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. Attachment

Department of the Treasury Internal Revenue Service

OMB No 1545-0074

Name(s) shown on return

Social security number or taxpayer identification number

13-1628168

COUNCIL ON FOREIGN RELATIONS, INC

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 generally short-term (see instructions) 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
X	(C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) (c) Date acquired Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, if If you enter an enter a co See the sepa	(h) Gain or (loss) Subtract column (e)		
(Example 100 sh XYZ Co)	(Mo , day, yr)	ite acquired , , , ,	(sales pnce)	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)
ST GAIN FROM LP'S	VAR	VAR	1,970				1,970
				-	<u>-</u>		
						<u> </u>	
					<u> </u>		
					1		
						4	
		<u>-</u>					
2 Totals Add the amounts in columns negative amounts) Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C at	l here and inc is checked), lin	lude on your e 2 (if Box B	1,970				1,970

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 (2019)

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 13-1628168 COUNCIL ON FOREIGN RELATIONS, INC

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 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).

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

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

(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired	"EU disposed of	Proceeds	(d) Cost or other basis Proceeds See the Note below (sales pnce) and see Column (e)	Adjustment, if If you enter an enter a co See the sepa	(h) Gain or (loss) Subtract column (e) from column (d) and	
	(Mo , day, yr)	(Mo , day, yr)	(see instructions)		(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
LT LOSS FROM LP'S	VAR	VAR	-5,328				-5,328
				-			
						<u> </u>	
	-						
							
-							
					. –		
2 Totals Add the amounts in columns negative amounts) Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	here and incli is checked), line	ude on your e 9 (if Box E	-5, 328				-5,328

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 (2019)

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