Form <b>990-T</b>	E	Exempt Organization Bus			Tax Retu	rn	ОМВ	No 1545-0687	
	(and proxy tax under section 6033(e)) (40% For calendar year 2018 or other tax year beginning SEP 1, 2018 and ending AUG 31, 201							2018	
	Forca					119		U IO	
Department of the Treasury Internal Revenue Service	<b>•</b>	► Go to www.irs.gov/Form990T for ir ► Do not enter SSN numbers on this form as it may				3).	Open to P 501(c)(3) (	Public Inspection for Organizations Only	
A Check box if address changed		Name of organization ( Check box if name of	(Em	oloyer (dent) ployees' tru ructions.)	fication number ist, see				
B Exempt under section	Print	CATALYST INC.	1	13-19	92402				
X 501(C1/3)	_ or	or Number, street, and room or suite no. If a P.O. box, see instructions.							
408(e) 220(e)	Туре	Type 120 WALL STREET, NO. 15 FL							
408A 530(a) 529(a)		City or town, state or province, country, and ZIP of NEW YORK, NY 10005	r foreig	n postal code	10015				
C Book value of all assets at end of year		F Group exemption number (See instructions.)	<b></b>						
41,612,8	00.	G Check organization type ► X 501(c) cor	poratio	n 501(c) trust	40	l(a) trust		Other trust	
H Enter the number of the	organiza	tion's unrelated trades or businesses. 🕨	1	Describe	the only (or first)	unrelate	d		
trade or business here	<b>&gt;</b>			If only one	, complete Parts I	-V If mor	e than on	θ,	
describe the first in the b	lank opa	ico at tho ond of the provious sentence, complete Pa	ırts I an	id II, complete a Schedul	o M for oach addit	ional trad	o or		
business, then complete		* * * * * * * * * * * * * * * * * * * *		<del></del>					
		oration a subsidiary in an affiliated group or a parei	nt cubc	idiary controlled group?	•	۷ 🗀 ۲	′os <u>∑X</u>	<b>∑</b> No	
- <del>'</del>		trying number of the parent corporation.				010	<u> </u>	7600	
		PATYANA BASIS le or Business Income		Y	none number		·514-		
		le or Business income	T	(A) Income	(B) Expen	388	+	(C) Net	
t a Gross receipts or sale  b Less returns and allow		c Balance	١.,						
2 Cost of goods sold (S			1c 2			<del></del> -	+		
3 Gross profit. Subtract			3			<del></del>	+		
4 a Capital gain net incom			4a		<del> </del> - · -		†		
		art II, line 17) (attach Form 4797)	4b				<del>                                     </del>		
c Capital loss deduction			4c		•		†		
•		ship or an S corporation (attach statement)	5				1		
6 Rent income (Schedu									
7 Unrelated debt-finance	•	ne (Schedule E)	7				1	····	
8 Interest, annuities, roy	alties, a	nd rents from a controlled organization (Schedule F)	8						
9 Investment income of	a sectio	on 501(c)(7), (9), or (17) organization (Schedule C)	9		Ī				
10 Exploited exempt activ	vity inco	me (Schedule I)	10		I		1		
11 Advertising income (S	Schedule	J)	11		·				
12 Other income (See ins	struction	s; attach schedule)	12				<u> </u>		
13 Total, Combine lines	3 throu	gh 12	13	0.	l			· · · · · · · · · · · · · · · · · · ·	
		t Taken Elsewhere (See instructions for			,				
		itions, deductions must be directly connected	with t	ne unrelated business	income)	<del></del>			
·	icers, dii	rectors, and trustees (Schedule K)		<del></del>		14	<del> </del>		
15 Salaries and wages		REC	EIL	/ED		15	┼		
16 Repairs and mainten	ance					16	<del> </del>		
17 Bad debts	ما دماناه	e instructions)	17	2020 8		17	+		
<ul><li>18 Interest (attach sche</li><li>19 Taxes and licenses</li></ul>	auie) (Si	e instructions)		-020		18	+		
	nne /Sac	instructions for limitation rules)		——]ॡऻ		19	╁┈┈	<del></del>	
21 Depreciation (attach	•	1 000	EN,	UT 21		20	┼──		
•		Schedule A and elsewhere on return		228			1		
23 Depletion	iiiiiou oi	Ochedule A and disemble on return		224		23			
24 Contributions to defe	rred cor	mnensation nians				24	† – –		
25 Employee benefit pro		mpanism punio				25	$\vdash$		
26 Excess exempt exper	-	hedule I)				26	<del>                                     </del>		
27 Excess readership co	•	27	1						
28 Other deductions (at	•	28	T						
29 Total deductions. A		•				29		0.	
	Unrolated business taxable income before not operating loss deduction. Subtract line 29 from line 13								
		oss arising in tax years beginning on or after Janua				30 31		0.	
•	-	ncome. Subtract line 31 from line 30				32		0.	
		work Reduction Act Notice, see instructions.				•	Form	990-T (2018)	

**Preparer** 

**Use Only** 

Firm's name ► MARKS PANETH LLP

Firm's address ► NEW YORK,

685 THIRD AVENUE

NY 10017

11-3518842

Phone no. 212-503-8800

Firm's EIN

Schedule A - Cost of Good	s Sold. Enter	r method of inver	ntory valuation N/	A				
1 Inventory at beginning of year	6 Inventory at end of ye							
2 Purchases	2		7 Cost of goods sold.	Subtract	line 6			
3 Cost of labor	3		from line 5. Enter her	e and in	Part I,			
4 a Additional section 263A costs			line 2			7		
(attach schedule)	48		8 Do the rules of section	with respect to		Yes	No	
<ul> <li>Other costs (attach schedule)</li> </ul>	4b		property produced or	acquired	for resale) apply to			
5 Total. Add lines 1 through 4b	5		the organization?					
Schedule C - Rent Income (see instructions)	(From Real	Property and	Personal Property	Lease	d With Real Prop	erty)		
Description of property								
(1)								
(2)								
(3)								
(4)								
		ved or accrued	· · · · · · · · · · · · · · · · · · ·		2(a) Deductions directly		ited with the means in	
(a) From personal property (if the per rent for personal property is mor 10% but not more than 50%	e than	of rent for p	and personal property (if the percent personal property exceeds 50% or if not is based on profit or income)	tage	3(a) Deductions directly columns 2(a) a	nd 2(b) (	attach schedule)	
(1)								
(2)							_	
(3)								
(4)								
Total	0.	Total	···	0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, columns		nter -		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<b>&gt;</b>		0.
Schedule E - Unrelated De	bt-Financed	Income (see	instructions)					
			Gross income from or allocable to debt-		3 Deductions directly con to debt-finan		erty	
Description of debt-f	inanced property		financed property	(a)	Straight line depreciation (attach schedule)	ļ	(b) Other deductions (attach schedule)	3
(1)					<del></del>	+		
(2)						†		
(3)			<u> </u>		<del></del>	$\top$	·	
(4)			-	1		$\top$		
4. Amount of average acquisition debt on or allocable to debt-innanced property (attach schedule)	of or debt-fina	e adjusted basis allocable to anced property h schedule)	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8 Allocable deduction (column 6 x total of column 3(a) and 3(b))	
(1)			%			$\top$		
(2)			%					
(3)			%					
(4)	<u> </u>		%			L.		
		-			Enter here and on page 1, Part I, line 7, column (A)		Enter here and on page Part I, line 7, column (E	
Totals			•	•	0			0.
Total dividends-received deductions	ncluded in column	n 8	•		<u> </u>	一		0.

Schedule F - Interest,	annuitie:	s, Royai	ties, an	<del>,                                      </del>	Controlled O			tion	S (see in:	structio	ns)	
1 Name of controlled organization		ıdentif	ployer cation ber	3. Net unr	related income e instructions)			includ	Part of column 4 that is cluded in the controlling parization's gross income		connected with income	
(1)				<del></del>								
(2)												
(3)							·		-			
(4)			<u>.</u>					<u> </u>			· · · · · · · · · · · · · · · · · · ·	
Nonexempt Controlled Organiz	zations											
7. Taxable Income 8. Net unrelated income (loss) (see instructions)			9. Total	Total of specified payments made			10. Part of column 9 that is included in the controlling organization's gross income			Deductions directly connected with income in column 10		
(1)					•							
(2)												
(3)												
(4)						I						
							Add colum Enter here and line 8, c	on page	1, Part I,		dd columns 6 and 11 here and on page 1, Part I, line 8, column (B)	
Totals						▶			0.	<u> </u>	0.	
Schedule G - Investmer		ne of a S	Section	501(c)(7	), (9), or ( <sup>-</sup>	17) Org	anization					
		-	~			Ī	3. Deduction		4. Set-	20120	5. Total deductions	
1, Descr	option of inco	me			2. Amount of	income	directly conne (attach sched			schedule)	and set-asides (col 3 plus col 4)	
(1)												
(2)												
(3)			_									
(4)									}			
					Enter here and o Part I, line 9, col	lumn (A)	Part I, III			Enter here and on page 1, Part I, line 9, column (B)		
Totals	<b>-</b>	A . Atta .	1	<u> </u>	Th A -l.	0.	- 1				0.	
Schedule I - Exploited I (see instru	_	ACTIVITY	income	e, Other	rnan Agv	erusin	g income					
			3 5		4. Net incorr	ne (loss)					7 5	
Description of exploited activity			onnected duction elated	from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7		5 Gross inco from activity to is not unrelate business inco	hat attributable to		able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)		
(1)		_										
(2)						]						
(3)												
(4)												
	Enter here page 1,	Part I,	Enter her page 1,	Part I,							Enter here and on page 1,	
<u>-</u>	line 10,	` '	line 10,								Part II, line 26	
Totals ► Schedule J - Advertisin	a Incon	0.		0.							0.	
Part I Income From F					olidated	Raeie						
moome from t	Cilodio	uio i iepi	nted of	i a cons	ondated	Dusis						
1. Name of periodical		2. Gross advertising income		Direct rtising costs	4. Adverti or (loss) (co col 3) If a ga cols. 5 th	ol 2 minus iin, compute	5. Circulati	ion	6. Read		7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)												
(2)					_							
(3)					_							
(4)				<del></del>	-		<u> </u>				<u> </u>	
Totals (carry to Part II, line (5))	<b>•</b>	(	<u>.                                    </u>	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 penodical		2. Gross advertising income	3. Direct advertising costs	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)							<u> </u>
(3)							
(4)							-
Totals from Part I	▶	0.	0.		-	<del>*</del>	0.
		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)	▶	0.	0.				0.

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

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

Form 990-T (2018)

FORM 990-T

NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST STATEMENT 1

NAME OF COUNTRY

CANADA SWITZERLAND INDIA AUSTRALIA JAPAN