SCANNED
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<u>~</u>
2021

	For cal	(and proxy tax ander year 2019 or other tax year beginning MAY 1			oU33(e)) and ending APF	30, 2020		2019
partment of the Treasury		▶,Go to www.irs.gov/Form990T	for instruc	tions and t	he latest inform	ation.	(7/	Open to Public Inspection fo 50 1(c)(3) Organizations Only
rnal Revenue Service		Do not enter SSN numbers on this form as i				ation is a 501(c)	~	501(c)(3) Organizations Only byer identification number
Check box if address changed		Name of organization (Check box if no THE ANDY WARHOL FOUNDATION FO	_	ed and see	instructions.)		(Emp	oloyees' trust, see uctions)
Exempt under section	Print	VISUAL ARTS, INC.						13-3410749
501(c)(34	10	Number, street, and room or suite no. If a P.	O. box. see	Instruction	is.	-		lated business activity code instructions)
408(e) 220(e)	Туре	65 BLEECKER STREET, 7TH FL.	,					·
408A530(a)		City or town, state or province, country, and	ZIP or fore	eign postal (odę	,		
529(a)		NEW YORK, NY 10012	 				9000	99
ook value of all assets t end of year	200	F Group exemption number (See instruction G Check organization type X 501(c)			7 501/4) 45004	, ,	(a) truet	Other trust
299,541,		G Check organization type X 501(ction's unrelated trades or businesses.	c) corporat	1011	501(c) trust	the only (or first)	(a) trust	
	-	NERSHIP INVESTMENT INCOME				, complete Parts I-		
		ce at the end of the previous sentence, comple	ete Parts I	and II. com				
usiness, then complete F				,				
ouring the tax year, was t	he corp	orațion a subsidiary in an affiliated group or a	parent-sul	bsidiary cor	trolled group?	•	Y	es X No
		fying number of the parent corporation. 🕨						
he books are in care of		HE FOUNDATION		1 4		one number		,
		le or Business Income		(<i>P</i>) Income	(B) Expens	es Serio	(C) Net
Gross receipts or sales		c Balance						
Less returns and allow Cost of goods sold (So			2				1888	
Gross profit. Subtract		•	3					3,00,52,727,500, 1,110,20,32
Capital gain net income			4a		12,781.			12,781
		art II, line 17) (attach Form 4797)	46					
Capital loss deduction	for trus	ts	40				60°4.1 (16°) Est. 12.5.2	
Income (loss) from a p	artners	hip or an S corporation (attach statement)	5	_	32,015.	STMT 16		32,015
Rent income (Schedule			6					
Unrelated debt-finance		•	_ 7	-		 		ļ
		nd rents from a controlled organization (Sched n 501(c)(7), (9), or (17) organization (Schedu	_	+			•	
Exploited exempt activ			10	+	-/-			<u> </u>
Advertising income (Se	-	, ,	11		/			
Other income (See ins		-	12			SEL TREAT		
Total Combine lines	3 throu	nh 12	13	X	44,796.			44,796
		t Taken Elsewhere (See instruction			deductions.)			
/ /		e directly connected with the unrelated-l	business	income.)			T	
Compensation of office	ers, dı	ectors, and trustees (Schedule RIVED	-01	"			14	
Salaries and wages Repairs and maintena		/ KLOZ	1881				, <u>15</u> 16	
Bad debts	11166	MAR 29 2021	0-8				17	
Interest (attach sched	ule) (se	e instructions 9	三三二	S	EE STATEME	NT 17	18	3,850
Taxes and licenses	,	62) OGDEN, U	: \				19	
Depreciation (attach F	orm 45	62) OGDEN, O			20	<u>.</u> .		1
Less depreciation clar	med or	Schedule A and elsewhere on return			21a	<u></u>	21b	
Depletion		/					22	
Contributions to defer		hpensation plans		=			23	
Employee benefit pro	- /	hadula IX					24	
Excess exempt expen							25 26	
Other deductions (att					EE_STATEME	NT 18.	27-	34;399
Total deductions. Ad			-				28	38,249
		come before net operating loss deduction. Su	ıbtract line	28 from Jin	e_13		29	6,547
,		oss arising in tax years beginning on or after-	/	•				
(see instructions)			1 1.		EE STATEME	NT 19) 30	6,547
		come. Subtract line 30 from line 29	1 Y	118 1			/ 31	1 0

) THE ANDY WARHOL FOUNDATION FOR THE VISUAL ARTS,	INC.			13-341074	9 Page 2
Part	III.	Total Unrelated Business Taxable Income					
32	otal of	of unrelated business taxable income computed from all unrelated trades o	r businesses (s	see instructions)		82	0.
33 £	Amoun	nts paid for disallowed fringes	b).	ار اس		83	
34	Charital	able contributions (see instructions for limitation rules)	\mathcal{U}	i V X I		84	0.
		inrelated business taxable income before pre-2018 NOLs and specific dedu	ction Shires	line 34 from the sum of	of lines 32 and 33	35	
		tion for net operating loss arising in tax years beginning before January 1,	=			36	
		of unrelated business taxable income before specific deduction. Subtract lin	,	•		37	
		ic deduction (Generally \$1,000, but see line 38 instructions for exceptions)		00	<	8 38	1,000.
		ited business taxable income. Subtract line 38 from line 37. If line 38 is g		a 27	•	♥ 	
		he smaller of zero or line 37	Ji catci tilali illi	c 37,			0.
		Tax Computation		····		39	
							0.
•		izations Taxable as Corporations. Multiply line 39 by 21% (0.21)			•	► 40 EXESTED	
41/	_	Taxable at Trust Rates. See instructions for tax computation. Income tax	on the amoun	t on line 39 from;	_		
		ax rate schedule or Schedule D (Form 1041)				► 41 <u></u>	
	-	tax. See instructions			•	► 42	
		ative minimum tax (trusts only)				43	
		Noncompliant Facility Income. See instructions				44	
		Add lines 42, 43, and 44 to line 40 or 41, whichever applies				45	0.
·	/ 	Tax and Payments				I Surve I	
46a ʃ	Foreign	n tax credit (corporations attach Form 1118; trusts attach Form 1116)		46a			
b (Other c	credits (see instructions)	111	46b			
c	General	ıl busıness credit. Attach Form 3800	111	46c			
d (Credit f	for prior year minimum tax (attach Form 8801 or 8827)	v .	46d			
e ·	Total c	redits. Add lines 46a through 46d				46e	
47	Subtrac	ct line 46e from line 45				47	0.
48	Other ta	axes. Check if from: Form 4255 Form 8611 Form 86	97 🔲 Form	n 8866 🔲 Other	(attach schedule) 48	
49	Total ta	ax. Add lines 47 and 48 (see instructions)				49	0.
50	2019 ne	et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (I	k), line 3:	1		50	0.
		nts: A 2018 overpayment credited to 2019	~ 400	U \$1a	50,000	o. 4111	
ь:	2019 es	stimated tax payments	Q.	51b			
		posited with Form 8868		51c			
		n organizations: Tax paid or withheld at source (see instructions)		51d			
	-	o withholding (see instructions)		51e			
		for small employer health insurance premiums (attach Form 8941)		511			
		credits, adjustments, and payments: Form 2439		i i			
֓֟ ֞		form 4136 Other	Total	▶ \\ 5 g			
52		payments. Add lines 51a through 51g			-	52	50,000.
	•	ted tax penalty (see instructions). Check if Form 2220 is attached		1		53	
		e. If line 52 is less than the total of lines 49, 50, and 53, enter amount owe		·	_	54	
		syment. If line 52 is larger than the total of lines 49, 50, and 53, enter amo			i	\$5	50,000.
. /	•	the amount of line 55 you want: Credited to 2020 estimated tax	unt overpaid	50,000. R	efunded	56	0.
		Statements Regarding Certain Activities and Other	er Informa				
		time during the 2019 calendar year, did the organization have an interest ii					Yes No
		financial account (bank, securities, or other) in a foreign country? If "Yes,"				•	Yes No
		Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter	•	•			
		rount 114, neport of Foreign bank and Financial Accounts. If fes, enter	the name of the	e loreigh country			X
	here						$\frac{\lambda}{x}$
		the tax year, did the organization receive a distribution from, or was it the	grantor of, or	transferor to, a fore	eign trust?		A THE PARTY OF THE
		" see instructions for other forms the organization may have to file.	. .				
		he amount of tax-exempt interest received or accrued during the tax year inder penalties of perjury, I declare that I have examined this return, including accompany	spa schodulos en	d statements and to the	a hast of million	uladge and holist ships	METHER SARRY
Sign		orrect, and complete. Declaration of preparer (other than taxpayer) is based on all informa-				viedge and belief, it is true	'• _
Here		VITO Ollara 126/2001				May the IRS discuss this	return with
11616		Signature of officer	CFO & TF	REASURER		the preparer shown below	
		Signature of officer Date	Title	,		instructions)? X Ye	es No
	-	Print/Type preparer's name Preparer's signature		Date	Check	if PTIN	-
Paid			. 44	_,,,,	self- employe		
Prep	arer	JAMES J. REILLY James Re	illy	3/4/2021	_	P00183769	
Use (Firm's name CONDON O'MEARA MCGINTY DONNELLY LI	JP /		Firm's EIN	13-36282	<u>255</u>
	•	ONE BATTERY PARK PLAZA					
		Firm's address NEW YORK, NY 10004			Phone no.		
923711 0	1-27-20					Form 99	90-T (2019)

Schedule A - Cost of Goods Sole	d. Enter me	ethod of invent	ory v	aluation N/A	_					
1 Inventory at beginning of year	4	,		Inventory at end of year	<u> </u>		6			
2 Purchases	2		1	Cost of goods sold. Su		ına 6	-0-			
3 Cost of labor										
4a Additional section 263A costs						arti,	7	1		
	. l		8 Do the rules of section 263A (with respect to						'es	No
· · · · · · · · · · · · · · · · · · ·	4a		ľ		•					 _
b Other costs (attach schedule) 4b property produced or acquired						ioi resale) apply to				
5 Total. Add lines 1 through 4b Schedule C - Rent Income (From	5 n Beal Br	nerty and	Dore	the organization?	0250	d With Real Prop	ortv)	<u>_</u>		
(see instructions)	ii Neai Fi	operty and	Cit	solial Froperty E	Casc	u with near rop	City)		
(dee mandenens)										
1. Description of property										
(1)										
(2)										
(3)										
(4)				······		·				
2.	Rent received o	r accrued		·· · · · · · · · · · · · · · · · · · ·						-
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	of	of rent for pe	rsonal	onal property (if the percentag property exceeds 50% or if ed on profit or income)	ge	3(a) Deductions directly columns 2(a) ai	connec nd 2(b) (cted with the incor attach schedule)	me in	
(1)										
(2)	<u> </u>							•		
(3)		•				- · ··· -		· -		
(4)				·						
Total	0. To	otal .			0.		-			
(c) Total income. Add totals of columns 2(a) an	nd 2/h) Enter	····			-	(b) Total deductions.				
here and on page 1, Part I, line 6, column (A)	10 E(D). E11101	.			٥.	Enter here and on page 1, Part I, line 6, column (B)	•			٥.
Schedule E - Unrelated Debt-Fin	anced In	come (see I	nstru	ctions)		1				
		,	_	. Gross income from		3. Deductions directly con to debt-finance				
1 December of debt financed			'	or allocable to debt-	(a)	Straight line depreciation		(b) Other dedu	ctions	
Description of debt-financed p	roperty		financed property		` '	(attach schedule)	(attach sch			
	·						\bot			
(1)							$oldsymbol{oldsymbol{oldsymbol{eta}}}$			
(2)							\perp			
(3)							\bot			
(4)			L			<u> </u>				
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adju of or alloc debt-financed (attach sch	able to d property	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable de (column 6 x total e 3(a) and 3	of colu	ins Imns
(1)				%			T			
(2)				%						
(3)				%			\top	-		
(4)				%						
· · · · · · · · · · · · · · · · · · ·						nter here and on page 1, Part I, line 7, column (A)		Enter here and on Part I, line 7, colu		
Totals				▶		0				٥.
Total dividends-received deductions included	ın column 8			-						0.
		_	-			···		Form 99	0-T (2019)

				Exempt	Controlled O	rganızat	ons				
Name of controlled organization	ame of controlled organization 2. Employer identification number					ments made include		Part of column 4 that is luded in the controlling inization's gross income		6. Deductions directly connected with income in column 5	
(1)		_									
(2)											<u> </u>
(3)											
(4)											
Nonexempt Controlled Organi	ızatıons										<i>c</i>
7. Taxable Income		nrelated inconsee instructions		9. Total	of specified payr made	πents	10. Part of column the controllingross	nn 9 tha ng orgar i income	nization's	11. Dec with	luctions directly connected income in column 10
(1)					<u>-</u>					-	
(2)	<u> </u>										
(3)											
(4)											
		·	•		•	_	Add colum Enter here and line 8, c		o 1, Part I, A).	Enter he	d columns 6 and 11 are and on page 1, Part I, ine 8, column (B)
<u>Totals</u> Schedule G - Investme	nt Incon	no of a S	Soction	501/a\/7	(A) (A) or (17\ Or	ranization		0.		0
	ructions)	ne or a s	ection	30 T(C)(7	7, (9), or (i /) Org	gamization				•
1. Desc	cription of incol	me			2. Amount of	ıncome	3. Deduction directly conne (attach sched	cted	4. Set-a (attach s		5. Total deductions and set-asides (col. 3 plus col. 4)
(1)											
(2)											_
(3)	*										· ·
(4)											
Totals Schedule I - Exploited	Exempt	Activity	Incom	► e, Other	Enter here and Part I, line 9, co	lumn (A)	ng Income				Enter here and on page Part I, line 9, column (B)
(see instri	1	ross business	directly	penses connected	4. Net incomfrom unrelated business (co	trade or	5. Gross inco		6. Exp		7. Excess exempt expenses (column 6 minus column 5,
exploited activity	trade or t		of un	oduction related ss income	minus colum gain, compute through	e cols 5	is not unrelat business inco		colun		but not more than column 4).
(1)											
(2)											
(3)									,		1
(4)	Enter her			re and on					r Ask		Enter here and on page 1,
Totals >	page 1, line 10,	col (A)	line 10	1, Parti, , col (B) 0.							Part II, line 25
Schedule J - Advertisi	ng Incon		nstructio	ns)	g name of the second of the second se			~ ~ N × OE27		_ n ~ amount. To	
Part II Income From					solidated	Basis		•			,
1. Name of periodical	:	2. Gross advertising income	adv	3. Direct vertising costs	4. Advert or (loss) (co col 3) If a ga cols 5 th				6. Reade costs		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)											
(2)		<u> </u>									
(4)				•							
Totals (carry to Part II, line (5))	•	•	٥.	(). <u> </u>						(
		•									Form 990-T (201

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) Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7 7. Excess readership costs (column 6 minus column 5, but not more than column 4) 2. Gross advertising income 3. Direct 5. Circulation 6. Readership 1. Name of periodical advertising costs (1) (2) (3) (4) Totals from Part I ▶ 0 ٥. Enter here and on page 1, Part I, line 11, col (A) Enter here and on page 1, Part I, line 11, col (B) on page 1, Part II, line 26 Totals, Part II (lines 1-5) Schedule K - Compensation of Officers, Directors, and Trustees ٥.

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	•
(3)		%	•
(4) SEE STATEMENT 20		%	
Total. Enter here and on page 1. Part II. line 14		<u> </u>	_

Form 990-T (2019)

	INCOME (LOSS) FROM PA	RTNERSHIPS	STATEMENT 16
DESCRIPTION			NET INCOME OR (LOSS)
BAUPOST VALUE PARTNERS,			
(EIN: 26-2208448) - ORI		(LOSS)	-20,471
SUMMIT ROCK PRIVATE EQU (EIN: 61-1732265) - ORI		(LOSS)	63,364
SUMMIT ROCK PRIVATE EQU	JITY PORTFOLIO III		·
(EIN: 82-1682057) - ORI		(LOSS)	-9,856
SUMMIT ROCK PRIVATE EQU (EIN: 83-3412914) - ORI		(LOSS)	-1,022
TOTAL INCLUDED ON FORM	990-T, PAGE 1, LINE 5		32,015
FORM 990-T	INTEREST PAI	D	STATEMENT 17
DESCRIPTION			· AMOUNT
INVESTMENT INTEREST EXE	PENSE		3,850
TOTAL TO FORM 990-T, PA	AGE 1, LINE 18		3,850
FORM 990-T	OTHER DEDUCTI	ONS	STATEMENT 18
DESCRIPTION .			AMOUNT
	TIONS		34,399
OTHER PARTNERSHIP DEDUC			
OTHER PARTNERSHIP DEDUC	GE 1, LINE 27		34,399
TOTAL TO FORM 990-T, PA		EDUCTION	
	NET OPERATING LOSS D	EDUCTION	34,399 STATEMENT 19
FOTAL TO FORM 990-T, PA	NET OPERATING LOSS D		STATEMENT 19
TOTAL TO FORM 990-T, PA	NET OPERATING LOSS D LOSS PREVIOUSLY	EDUCTION LOSS REMAINING	

NAME	TITLE	PERCENT	COMPENSATION
JOEL WACHS	PRESIDENT	.00%	
KATHLEEN C. MAURER	TREAS./SEC./CFO	.00%	
DONALD WARHOLA	VICE PRESIDENT	.00%	
CATHERINE OPIE	DIRECTOR	.00%	
SHANA BERGER	DIRECTOR	.00%	
CARRIE MAE WEEMS	DIRECTOR	.00%	
SHANA BERGER CARRIE MAE WEEMS RUBY LERNER JONATHAN LEE	DIRECTOR	.00%	
JONATHAN LEE	DIRECTOR	.00%	
ADAM D. WEINBERG	DIRECTOR	.00%	
JULIAN ZUGAZAGOITIA	DIRECTOR	.00%	
COURTNEY FINK	DIRECTOR	.00%	
DEBORAH KASS	DIRECTOR	.00%	
JOHN TAFT	DIRECTOR	.00%	
ANNE PASTERNAK	DIRECTOR	.00%	
PAUL HA	DIRECTOR	.00%	
NAOMI BECKWITH	DIRECTOR	.00%	
CORY DAVIS	DIRECTOR	.00%	
DEBORAH WILLIS	DIRECTOR	.00%	
KRISTAN KENNEDY	DIRECTOR	.00%	

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

	e		•		Empl	oyer identification number
	THE ANDY WARHOL FOUNDATION	FOR THE .				
	VISUAL ARTS, INC.				13-	3410749
Did '	he corporation dispose of any investmen	nt(s) in a qualified opportu	nity fund during the tax y	/ear [?]		► Yes X No
If "Y	es," attach Form 8949 and see its instru	ctions for additional requir	ements for reporting you	ir gain or loss		
4635 294	Short-Term Capital Gai	ins and Losses (See	instructions.)	_		· ·
to en	nstructions for how to figure the amounts ter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gai or loss from Form(s) 894	n 9,	(h) Gain or (loss) Subtract column (e) from column (d) and
roun	form may be easier to complete if you do off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column (g) *********************************	combine the result with column (g)
; ;	Fotals for all short-term transactions eported 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 ransactions on Form 8949, leave this line blank and go to line 1b	:	-			
1b `	Totals for all transactions reported on					
	orm(s) 8949 with Box A checked					
	otals for all transactions reported on					
	orm(s) 8949 with Box B checked					
	otals for all transactions reported on	•	,			
	orm(s) 8949 with Box C checked		<u> </u>			
	Short-term capital gain from installment sales	•	17		4	
	Short-term capital gain or (loss) from like-kind	•			5	
	Jnused capital loss carryover (attach computa	•			6	(
	Net short-term capital gain or (loss). Combine $\operatorname{Art}[\mathbf{H}_{i,k}]$ Long-Term Capital Gain			<u>. </u>	7	l
	nstructions for how to figure the amounts	is and Losses (See	Instructions.)	1		<u> </u>
		7.45	1 /- 1	1		1 163
to en	ter on the lines below.	(d) Proceeds	(e)	(g) Adjustments to gail	n Q	(h) Gain or (loss). Subtract
to en	form may be easier to complete if you	(0) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gail or loss from Form(s) 894 Part II, line 2, column (g	n 9,)	(1) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
This round	·	Proceeds	(e) Cost (or other basis)	(g) Adjustments to gail or loss from Form(s) 894 Part II, line 2, column (g	9,	column (e) from column (d) and
to en This round 8a	form may be easier to complete if you doff cents to whole dollars. Totals for all long-term transactions reported in Form 1099-B for which basis was eported to the IRS and for which you have to adjustments (see instructions). However, if you choose to report all these transactions in Form 8949, leave this line blank and go to	Proceeds	(or other basis)	(g) Adjustments to gail or loss from Form(s) 894 Part II, line 2, column (g	9,))	column (e) from column (d) and
to en This round 8a	form may be easier to complete if you doff cents to whole dollars. Totals for all long-term transactions reported in Form 1099-B for which basis was eported to the IRS and for which you have to adjustments (see instructions). However, if you choose to report all these transactions in Form 8949, leave this line blank and go to one 8b	Proceeds	(or other basis)	(g) Adjustments to gail or loss from Form(s) 894 Part II, line 2, column (g	n 9,))	column (e) from column (d) and
to en This round 8a	form may be easier to complete if you off cents to whole dollars. Totals for all long-term transactions reported on Form 1099-B for which basis was eported 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 ine 8b Totals for all transactions reported on	Proceeds	Cost (or other basis)	(g) Adjustments to gail or loss from Form(s) 894 Part II, line 2, column (g	9,	column (e) from column (d) and combine the result with column (g)
to en This round 8a	form may be easier to complete if you of off cents to whole dollars. Totals for all long-term transactions reported on Form 1099-B for which basis was eported 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 one 8b Totals for all transactions reported on form(s) 8949 with Box D checked Totals for all transactions reported on form(s) 8949 with Box E checked	Proceeds	(or other basis)	(g) Adjustments to gail or loss from Form(s) 894 Part II, line 2, column (g	n 9,))	column (e) from column (d) and combine the result with column (g)
to en This round 8a	form may be easier to complete if you of off cents to whole dollars. Totals for all long-term transactions reported on Form 1099-B for which basis was eported 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 one 8b Totals for all transactions reported on form(s) 8949 with Box D checked	Proceeds	(or other basis)	(g) Adjustments to gain or loss from Form(s) 894 Part II, line 2, column (g	9,	column (e) from column (d) and combine the result with column (g)
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to en This round 8a 6 8b 7 9 7 10 7 11	form may be easier to complete if you of cents to whole dollars. Totals for all long-term transactions reported on Form 1099-B for which basis was eported 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 inter 8b. Totals for all transactions reported on form(s) 8949 with Box D checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked.	Proceeds (sales price)	(or other basis)	(g) Adjustments to gail or loss from Form(s) 894 Pert II, line 2, column (g	11	column (e) from column (d) and combine the result with column (g)
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8a 8b 9 10 11 12 13 14 15	form may be easier to complete if you of off cents to whole dollars. Totals for all long-term transactions reported on Form 1099-B for which basis was eported 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 one 8b. Totals for all transactions reported on form(s) 8949 with Box D checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked.	from Form 6252, line 26 or 3 d exchanges from Form 8824 : lines 8a through 14 in colum	(or other basis)	(g) Adjustments to gain or loss from Form(s) 894 Part II, line 2, column (g	11 12 13 14	column (e) from column (d) and combine the result with column (g)
8a 8b 9 10 11 12 13 14 15 P. 16 16	form may be easier to complete if you of off cents to whole dollars. Totals for all long-term transactions reported on Form 1099-B for which basis was eported 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 one 8b. Totals for all transactions reported on form(s) 8949 with Box D checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked.	from Form 6252, line 26 or 3 d exchanges from Form 8824 tlines 8a through 14 in colum 11 li	(or other basis) 7 In h al loss (line 15)	Part II, line 2, column (g	11 12 13 14 15	column (e) from column (d) and combine the result with column (g) 12,781.
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8a 6 8 9 5 10 6 11 12 13 14 15 Per 18 18	form may be easier to complete if you of off cents to whole dollars. Totals for all long-term transactions reported on Form 1099-B for which basis was eported 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 one 8b. Totals for all transactions reported on form(s) 8949 with Box D checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box F checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked. Totals for all transactions reported on form(s) 8949 with Box E checked.	from Form 6252, line 26 or 3 d exchanges from Form 8824 lines 8a through 14 in colum 11 li lie 7) over net long-term capit capital gain (line 15) over ne 1120, page 1, line 8, or the pr	(or other basis) 7 In h al loss (line 15) t short-term capital loss (line	Part II, line 2, column (g	11 12 13 14 15	column (e) from column (d) and combine the result with column (g)

LHA

Schedule D (Form 1120) 2019

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

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1 THE ANDY WARHOL FOUNDATION FOR THE

Social security number or taxpayer identification no.

VISUAL ARTS, INC.

13-3410749

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,

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

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)	(e) Cost or other basis See the Note below and see Column (e) in the instructions	loss. If y in column column (f	nt, if any, to gain or ou enter an amount (g), enter a code in). See instructions. (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
BAUPOST VALUE PARTNERS,						agadanone	
L.P IV (EIN: 26-2208448)	-		-			· ·	<23,436.>
SUMMIT ROCK PRIVATE EQUITY						· · · · ·	
PORTFOLIO II (EIN:							
61-1732265)							21,889.
SUMMIT ROCK PRIVATE EQUITY							
PORTFOLIO III (EIN:	<u> </u>						
82-1682057)							14,328.
				-			
			· ·				
			_				
					-		
					-		
2 Totals. Add the amounts in colur negative amounts). Enter each to Schedule D, line 8b (if Box D above is checked), or line 10 (if E	tal here and incluove is checked),	ide on your line 9 (if Box E					12,781.

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

923012 12-11-19

Form 8949 (2019)