POSTWARK DATE MAY 2 0 2021

Form	990-T		and proxy ta		der section 603		LUIII	OMBN	o. 1545-0047		
		For cale	ndar year 2019 or other tax year begi				0 20 20	9)	@10		
Denart	ment of the Treasury	, 01 5010	► Go to www.irs.gov/Form99						U I J		
	Revenue Service	▶ Do	not enter SSN numbers on this form					Open to Pt	ublic Inspection for Organizations Only		
A	Check box if				ne changed and see instru				ation number		
	address changed		TRUSTEES OF THE UNIV OF PENNA RETIREE MED & (Employees' trust, see instructions.)								
ВЕхе	empt under section	L	DEATH BENEFITS TRU	23	-2769744	1					
X	501(C)(36)	Print	Number, street, and room or suite no	. If a P.O.	box, see instructions.						
	408(e) 220(e)	or Type							ss activity code		
	408A 530(a)	type	3451 WALNUT STREET				(See	instructions.)			
	529(a)		City or town, state or province, coun	try, and Z	IP or foreign postal code						
	ok value of all assets	ant afference to these	PHILADELPHIA, PA 1	9104-	6221		52				
at e	end of year	F Gro	up exemption number (See instruc	ctions.)	>		0.000.000.000.000.000.000.000.000.000.		***************************************		
5	555999026.	G Che	ck organization type > 50	1(c) cor	poration X 50	1(c) trust	401(a	i) trust	Other trust		
H Er	nter the number of	the orga	nization's unrelated trades or busin	esses.	▶ 1	Des	cribe the on	-			
tra	ade or business her	re ▶ _ <i>I</i>	ATCH 1		. If only o	ne, complete Pa	arts I-V. If mo	ore than one,	describe the		
fir	st in the blank spa	ace at the	end of the previous sentence, co	omplete							
tra	ade or business, the	en compl	ete Parts III-V.		<u> </u>						
I D	uring the tax year,	was the	corporation a subsidiary in an aff	iliated gr	oup or a parent-subsidia	ary controlled gro	oup?	>	Yes X No		
<u> </u>	"Yes," enter the na	ame and	identifying number of the parent c	orporatio	on, 🕨						
			ICHAEL A. LUKASEK		Telep	hone number 🕨	215-746	-8243			
Par	t Unrelated	Trade	or Business Income		(A) Income	(B) E	xpenses		(C) Net		
1 a	Gross receipts or	sales									
b	Less returns and allowa		c Balance								
2			ule A, line 7)								
3			2 from line 1c		b-mai-star marks						
4a			ittach Schedule D)		128,87	'8.			128,878.		
b:			Part II, line 17) (attach Form 4797)								
C	Capital loss dedu	ction for	rusts	. 4c							
5		The same of the sa	r an S corporation (attach statement)		-4,53	B2. ATC	CH 2		-4,532.		
6							RECE	IVED			
7			come (Schedule E)				1 \ han \ / ha	IVLL			
8			ents from a controlled organization (Schedule	-		1	- KAAV ®	1 2001			
9			1(c)(7), (9), or (17) organization (Schedule C	· 	***************************************		MAY 2	* (U(0		
10			ncome (Schedule I)			base					
11	Advertising incom	ne (Sched	dule J)	1			OGDE	NI UT			
12			ctions; attach schedule)	. 12	104 04			ALC: NO PERSONAL PROPERTY.	7.04.246		
			ough 12		124,34		\ (D 1		124,346.		
Fal			Taken Elsewhere (See ins ne unrelated business inco		ons for limitations c	n aeauctions	s.) (Deauc	tions mus	t be directly		
						<u> </u>					
14			directors, and trustees (Schedule I		V .						
15			e e e e e e e e e e e e e e e e e e e								
16 17											
18	Interest (attach s	chodulo)	(see instructions)	4: 4 4 ;4		АТС	'H 3 4		11,816.		
, 10 ∢ 19			(see instructions);						491.		
20			4562).			876	,222.				
° 20			I on Schedule A and elsewhere on				,222. 21				
22			** * * * * * * * * * * * * * * * * * *								
23			compensation plans						<u> </u>		
24			S				W				
25			Schedule I)								
26			Schedule J)				1/2				
27			schedule)						31,139.		
28			es 14 through 27					N.	43,446.		
29			ole income before net operation						80,900.		
30			ng loss arising in tax years begin	_					<u>importante e differenza (h. 2.).</u> . Gasta de la compositación de la		
31		•	le income. Subtract line 30 from li	. •		•			80,900.		
			Notice, see instructions.				<u> </u>		rm 990-T (2019)		

9X2740 1.000 8161MX 1467

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3

16

		t III Total Unrelated Business Taxable Income			raye Z
1					
	32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	1	0.0	000
1		instructions)	82	80,	900.
	33	Amounts paid for disallowed fringes	83		
	34	Charitable contributions (see instructions for limitation rules)	34	1	,427
	35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction Subtract line		-	
	00	r .	3.5	79.	473.
	••	34 from the sum of lines 32 and 33	133	,	
	36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		4.0	000
		instructions)			800.
	37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37		673.
	38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,	000.
	39	Unrelated business taxable income. Subtract line 38 from line 37 If line 38 is greater than line 34			
		enter the smaller of zero or line 37	39	37,	673.
	Dar	Tax Computation	 		
\			40		
()	40	Organizations Taxable as Corporations Multiply line 39 by 21% (0 21)	40		
•	41	Trusts Taxable at Trust Rates. See instructions for tax computation Income tax on		_	
		the amount on line 39 from ☐ Tax rate schedule or ☐ X Schedule D (Form 1041)	41	6,	<u>490.</u>
	42	Proxy tax. See instructions	42		
	43	Alternative minimum tax (trusts only)	43	3,	794.
	44	Tax on Noncompliant Facility Income. See instructions	44		
	_		45	10.1	284.
		Total Add lines 42, 43, and 44 to line 40 or 41, whichever applies	 49	1072	
(Par		,		
1		Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 46a	.		
\	b	Other credits (see instructions)			
	С	General business credit Attach Form 3800 (see instructions) 46c			
	d	Credit for prior year minimum tax (attach Form 8801 or 8827)	1 i		
		Total credits. Add lines 46a through 46d	46'e		
		-		10-	284.
	47	Subtract line 46e from line 45	 	107.	
	48	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule) .	- 1	10	204
	49	Total tax. Add lines 47 and 48 (see instructions)	49	10,	284.
	50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3. #	50		
	51 a	Payments A 2018 overpayment credited to 2019			
	b	2019 estimated tax payments] []		
	C	Tax deposited with Form 8868	1		
	_		1		
	d	Foreign organizations Tax paid or withheld at source (see instructions)	1		
	е	Backup withholding (see instructions)	↓		
	f	Credit for small employer health insurance premiums (attach Form 8941)	1		
	g	Other credits, adjustments, and payments Form 2439			
		X Form 4136 52. Other Total ▶ 51g 52.	1.1		
	52	Total payments. Add lines 51a through 51g	52	35,	545.
	53	Estimated tax penalty (see instructions) Check if Form 2220 is attached	53		
			54		
	54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	1 - T	25	261
•	₅ 5	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	23,	261.
\	<u> </u>	Enter the amount of line 55 you want	56		
1	Par	tVI Statements Regarding Certain Activities and Other Information (see instruction	s)		
	57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or	other a	uthority Yes	No
		over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may	ay have	to file	
		FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the			1
		and the contract of the contra	(Or Orgin	000,	X
		here >			+
	58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign	ign trust?	• • • •	 ^-
		If "Yes," see instructions for other forms the organization may have to file			İ
	59	Enter the amount of tax-exempt interest received or accrued during the tax year \$\blacktriangle\$\$			
		Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the t	est of my	knowledge and bel	lief, it is
	Sigr	true correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge			
	Here			S discuss this i	
	пен		tri the pi einstruction:	reparer shown I	7 P
			e instruction:		No_
	Paid	Print/Type pheparer's name Preparer's signature Date Chec	k └── ıf	PTIN P00858	8530
		ANIONIO C. ROSSO - Abauti C - Auror C 2 / 28 / 20 / 20 Self-e	employed	1 3 3 3 3	
	Prep	TEIRM'S DAMA PRICE MICHAEL PROPERTY TO THE TEIRM'S		13-40083	
	use	Only Firm's address > 2001 MARKET STREET, SUITE 1800 Phoni	e no 2	67-33-30	000
o	JSA	DUTTA DEL DUTA DA 10102		Form 990-T	
9X2	741 1 00 Q 1	161MX 1467 V 19-7.3F			/
	0.1	101HW 1401			

Cim 555 (E515)									, age e
Schedule A - Cost of Go	oods Sold. En	ter method	of invente	ory valuation I	-				
1 Inventory at beginning of y	rear 1			6 Inventory	at end of yea	ır	6		
2 Purchases	2	-				d. Subtract line			
3 Cost of labor	3			6 from lin	ne 5 Enter	here and in Part			
4a Additional section 263A co	osts			I, line 2			7		
(attach schedule)	4a			8 Do the	rules of	section 263A (w	th respe	ect to Ye	s No
b Other costs (attach schedu						or acquired for			
5 Total. Add lines 1 through				to the orga	anization?	<u> </u>			X
Schedule C - Rent Income	e (From Real P	roperty a	nd Perso	nal Property	Leased V	ith Real Proper	ty)		
(see instructions)						•			
Description of property	,								
(1)						<u>-</u>			
(2)			-	-					-
(3)									
(4)									
	2. Rent recei	ved or accrue	ed						
(a) From personal property (if the	percentage of rent	(b) F	rom real and	personal property	(if the	3(a) Deductions di	rectly conne	ected with the i	ncome
for personal property is more th	nan 10% but not	percenta	age of rent fo	or personal property	exceeds	in columns 2(a) and 2(b) (attach s			
more than 50%))	50% or	of the rent is	based on profit or	income)				
(1)									
(2)					***				
(3)									
(4)				· · · · · · · · · · · · · · · · · · ·					
Total		Total							
(c) Total income. Add totals of c	olumns 2(a) and 2(b) Enter				(b) Total deduction Enter here and on			
here and on page 1, Part I, line 6		•				Part I, line 6, colum			
Schedule E - Unrelated D			e instructi	ions)					
		,		income from or	3. [Deductions directly con		or allocable to)
1. Description of de	bt-financed property			to debt-financed	(a) Straigh	debt-finance		Other deduction	
			p	roperty		ch schedule)		tach schedule)	
(1)									
(2)									-
(3)				· · -					
(4)	· · ·								
4. Amount of average	5 Average adju			Column		-	9 110	ocable deduction	
acquisition debt on or allocable to debt-financed	of or alloca debt-financed			divided		income reportable n 2 x column 6)		6 x total of col	
property (attach schedule)	(attach sche		by	column 5	(Column	1 2 x column o)	3	(a) and 3(b))	
(1)				%					
(2) .				%			_		
(3)				%					
(4)				%					
			•	-		e and on page 1,		ere and on pa	
					Part I, lin	e 7, column (A)	Part I, I	ine 7, column	n (B)

Form **990-T** (2019)

Total dividends-received deductions included in column 8 .

Schedule F - Interest, Annu	uities, Royanties						tions (see	Instructio	ns)		
		Exe	mpt Cor	ntrolled Org	ganızatıd	ons					
Name of controlled organization	2. Employer identification number.	31		ited income istructions)		of specifie nts made	d included	f column 4 that in the control on's gross inc	lling	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 instruct			otal of specific		ınclu	art of column ded in the col zation's gross	ntrolling		. Deductions directly nected with income in column 10	
(1)											
(2)	_										
(3)											
(4)											
Totals					▶ ') Orga	Ente Part	columns 5 a here and on I, line 8, colui	page 1, mn (A)	Ent	id columns 6 and 11 er here and on page 1, rt I, line 8, column (B)	
1 Description of income	2. Amount of		1.7.7.	3. Deduction directly contact (attach sci	ctions nnected		4. Se	t-asides schedule)		5. Total deductions and set-asides (col 3 plus col 4)	
(1)											
(2)											
(3)											
(4)											
Totals	Enter here and of Part I, line 9, co	olumn (A)								Enter here and on page 1, Part I, line 9, column (B)	
Schedule I-Exploited Exe	empt Activity In	come, O	tner in	an Advert	ising ir	come	(see instru	ictions)		 	
Description of exploited activity	2. Gross unrelated business income from trade or business	3 Expe direct connects product unrelations	ctly ed with tion of ated	4. Net incor from unrela or business 2 minus co If a gain, c cols 5 thr	ted trade (column lumn 3) ompute	from a	ess income ictivity that unrelated ess income	6 Exper attributal columi	ble 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)	Enter here page 1, line 10,	Part I,			· ,		J		Enter here and on page 1, Part II, line 25	
Schedule J-Advertising Ir	ncome (see instr	uctions)									
Part I Income From Per			Consoli	idated Ba	sis						
1. Name of periodical	2 Gross advertising income	3. Di advertisir	rect	4. Adver gain or (lo 2 minus c a gain, cc cols 5 thr	rtising ss) (col ol 3) If ompute	I	rculation come	6 Reade costs		7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)			<u>_</u> _		•						
(2)								1			
(3)											
(4)											
Totals (carry to Part II, line (5))									_	5 000 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)

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)		<u> </u>				
(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) ▶			,			

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

1. Name	2 Title	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		•	

Form **990-T** (2019)

SCHEDULE I (Form 1041)

Alternative Minimum Tax - Estates and Trusts

OMB No 1545-0092

2019

Department of the Treasury

► Attach to Form 1041.

▶ Go to www.irs.gov/Form1041 for instructions and the latest information. Internal Revenue Service

Name of estate or trust Employer identification number TRUSTEES OF THE UNIV OF PENNA RETIREE MED & 23-2769744 Estate's or Trust's Share of Alternative Minimum Taxable Income 79,473 Adjusted total income or (loss) (from Form 1041, line 17) ESBTs, see instructions. . . 1 154 2 2 3 Taxes 3 4 5 5 6 6 7 7 8 8 9 Exercise of incentive stock options (excess of AMT income over regular tax income)....... 9 10 Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) 10 -50511 11 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 12 12 13 Passive activities (difference between AMT and regular tax income or loss) ATCH .6 13 14 15 15 16 16 17 17 18 18 19 19 20 20 474 21 21 22 Alternative tax net operating loss deduction (See the instructions for the limitation that applies) 22 23 Adjusted alternative minimum taxable income Combine lines 1 through 22 645 Note: Complete Part II below before going to line 24 Income distribution deduction from Part II, line 42 24 25 26 81,645. 27 Estate's or trust's share of alternative minimum taxable income Subtract line 26 from line 23. If line 27 is

- \$25,000 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c The estate or trust isn't liable for the alternative minimum tax
- Over \$25,000, but less than \$183,500, go to line 43
- \$183,500 or more, enter the amount from line 27 on line 49 and go to line 50
- ESBTs, see instructions

Pa	t II Income Distribution Deduction on a Minimum Tax Basis		
28	Adjusted alternative minimum taxable income (see instructions)	28	88,119.
29	Adjusted tax-exempt interest (other than amounts included on line 7)	29	
30	Total net gain from Schedule D (Form 1041), line 19, column (1) If a loss, enter -0	30	
31	Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable		
	purposes (from Form 1041, Schedule A, line 4)	31	
32	Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)	32	
33	Capital gains computed on a minimum tax basis included on line 23	33	(128,373.)
34	Capital losses computed on a minimum tax basis included on line 23. Enter as a positive amount	34	
35	Distributable net alternative minimum taxable income (DNAMTI) Combine lines 28 through 34 If zero		
	or less, enter -0	35	
36	Income required to be distributed currently (from Form 1041, Schedule B, line 9)	36	
37	Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)	37	
38	Total distributions Add lines 36 and 37	38	
39	Tax-exempt income included on line 38 (other than amounts included on line 7)	39	
40	Tentative income distribution deduction on a minimum tax basis. Subtract line 39 from line 38	40	

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

JSA

Schedule I (Form 1041) (2019)

23-2769744 Income Distribution Deduction on a Minimum Tax Basis (continued. Tentative income distribution deduction on a minimum tax basis. Subtract line 29 from line 35. If zero 41 Income distribution deduction on a minimum tax basis. Enter the smaller of line 40 or line 41 42 42 Alternative Minimum Tax 43 \$25,000 44 81,645. 44 \$83.500 45 46 47 25,000. 48 48 56,645. 49 Go to Part IV of Schedule I to figure line 50 if the estate or trust has qualified dividends or has a gain on lines 18a and 19 of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary) Otherwise, if line 49 is • \$194,800 or less, multiply line 49 by 26% (0 26) 10,284. Over \$194,800, multiply line 49 by 28% (0 28) and subtract \$3,896 from the result 50 51 51 10,284. 52 52 6,490. 53 Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedule G, line 2a) . . 53 Alternative minimum tax. Subtract line 53 from line 52 If zero or less, enter -0- Enter here and on 3,794. Line 50 Computation Using Maximum Capital Gains Rates Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D Tax Worksheet, or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the instructions before completing this part 56,645. 55 Enter the amount from line 49... 55 Enter the amount from line 26 of Schedule D (Form 1041), line 13 of the 56 Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as 75,598. 56 Enter the amount from Schedule D (Form 1041), line 18b, column (2) (as refigured for the AMT, if necessary) If you didn't complete Schedule D 57 2,647. If you didn't complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 56. Otherwise, add lines 56 and 57. and enter the smaller of that result or the amount from line 10 of the 78,245 Schedule D Tax Worksheet (as refigured for the AMT, if necessary) 56,645. Enter the smaller of line 55 or line 58......... 59 59 60 If line 60 is \$194,800 or less, multiply line 60 by 26% (0.26). Otherwise, multiply line 60 by 28% 61 62 Maximum amount subject to the 0% rate 62 \$2,650 Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as figured for the regular tax) If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 63 2,650.Subtract line 63 from line 62 If zero or less, enter -0-. 64 64 56,645. 2,650

Schedule I (Form 1041) 2019

66

67

66

53,995

Enter the smaller of line 64 or line 65. This amount is taxed at 0%

Pai	t IV Line 50 Computation Using Maximum Capital Gains Rates	(conti	nued)		
68	Maximum amount subject to rates below 20%	68	\$12,950	į	-
69	Enter the amount from line 64	69	2,650.		
70	Enter the amount from line 27 of Schedule D (Form 1041), line 18 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 23, if zero or less, enter -0		0.650	,	
	Add line 69 and line 70		2,650.	·	
72	Subtract line 71 from line 68 If zero or less, enter -0		10,300.	١.,	
73	Enter the smaller of line 67 or 72		10,300.		1 5 4 5
74	Multiply line 73 by 15% (0 15)			74	1,545.
75	Add lines 66 and 73	75	12 , 950 <u>.</u>	ļ	
	If lines 75 and 55 are the same, skip lines 76 through 80 and go to line 81. O	therv	rise, go to line 76.		
76	Subtract line 75 from line 65	76	43,695.		
77	Multiply line 76 by 20% (0 20)			77	8,739.
	If line 57 is zero or blank, skip lines 78 through 80 and go to line 81. Othe	rwise	, go to line 78.		
78	Add lines 60, 75, and 76				,
79	Subtract line 78 from line 55	79	<u> </u>		
80	Multiply line 79 by 25% (0 25)			80	
81	Add lines 61, 74, 77, and 80			81	10,284.
82	If line 55 is \$194,800 or less, multiply line 55 by 26% (0 26) Otherwise, multiply				
	and subtract \$3,896 from the result			82	14,728.
83	Enter the smaller of line 81 or line 82 here and on line 50			83	10,284.

Schedule I (Form 1041) (2019)

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T. ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10 ▶ Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No 1545-0092

Name of estate or trust TRUSTEES OF THE UNIV O	F PENNA RET	IREE MED &	Employer identific	ation nu	ımber	
DEATH BENEFITS TRUST			23-27697	44		
Did you dispose of any investment(s) in a qualified opportur	•	•		Ye	s X No	
If "Yes," attach Form 8949 and see its instructions for addit	ional requirements f	or reporting your gail	n or loss			
Note: Form 5227 filers need to complete only Parts I and II						
Part I Short-Term Capital Gains and Losses - Ger	erally Assets Hel	One Year or Les	s (see instruc	<u>tions)</u>		
See instructions for how to figure the amounts to enter on	(4)	(-)	(g) Adjustments		(h) Gain or (loss Subtract column (
the lines below	(d) Proceeds	(e) Cost	to gain or loss f	rom	from column (d) ai	nd
This form may be easier to complete if you round off cents to whole dollars	(sales price)	(or other basis)	Form(s) 8949, P line 2, column		combine the result column (g)	with
			-		<u>·</u>	
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			Į.			
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			i			7
2 Totals for all transactions reported on Form(s) 8949						
with Box B checked		1				
3 Totals for all transactions reported on Form(s) 8949					-	
with Box C checked						
		•				
4 Short-term capital gain or (loss) from Forms 4684, 62	252, 6781, and 8824			4	-4,08	<u>4.</u>
			ל אמיימינענע		54.50	
5 Net short-term gain or (loss) from partnerships, S cor	porations, and other	estates or trusts:	THEORIE !	5	54,53	<u>5.</u>
6 Short-term capital loss carryover Enter the amount Carryover Worksheet			Capital Loss	6 (,	١
7 Net short-term capital gain or (loss). Combine line			here and on	0 (<u> </u>
line 17, column (3) on the back				7	50,44	4.
Part II Long-Term Capital Gains and Losses - Ger	nerally Assets Hel	d More Than One	Year (see inst		ns)	
See instructions for how to figure the amounts to enter on			(g)		(h) Gain or (loss	 ;)
the lines below	(d) Proceeds	(e) Cost	Adjustments to gain or loss t		Subtract column (from column (d) a	
This form may be easier to complete if you round off cents	(sales price)	(or other basis)	Form(s) 8949, P	art II, 📗 🤄	combine the result column (g)	
to whole dollars			inte 2, column	(9)	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					_ 1	í
with Box D checked					- 4	•
with Box E checked			1			
10 Totals for all transactions reported on Form(s) 8949				+		
with Box F checked					~	
11 Long-term capital gain or (loss) from Forms 2439, 46		d 8824		11	-6,12	5.
12 Net long-term gain or (loss) from partnerships, S corp				12	54,58	
13 Capital gain distributions				13		
14 Gain from Form 4797, Part I				14	29,98	2.
15 Long-term capital loss carryover Enter the amour	nt, if any, from line	14 of the 2018	Capital Loss			
Carryover Worksheet				15 ()
16 Net long-term capital gain or (loss). Combine lines					70 40	. 4
line 18a, column (3) on the back				16 L	78,43	
THE PROPERTY OF THE PROPERTY OF ACTIVATION SEE THE INSTRUCTIONS TO FO			50		COLUMN TOWARD	eu 13

Par	t III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(2) T-4-1
	Caution: Read the instructions before completing this pa	rt	(see instr)	or trust's	(3) Total
17	Net short-term gain or (loss)	17		50,444.	50,444
18	Net long-term gain or (loss):				
а	Total for year	18a		78,434.	78,434
b	Unrecaptured section 1250 gain (see line 18 of the worksheet).	18b		2,836.	2,836
С	28% rate gain	18c			
19	Total net gain or (loss). Combine lines 17 and 18a ▶	19		128,878.	128,878

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 18a and 19, column (2), are net gains, go to Part V, and don't complete Part IV If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Camyover Worksheet, as necessary

20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of				
а	The loss on line 19, column (3) or b \$3,000	20	()
Note	:: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 23 (or Form 990-T, line 39)			complete the	Capita
Loss	Carryover Worksheet in the instructions to figure your capital loss carryover				

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 23, is more than zero

Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if

- Either line 18b, col (2) or line 18c, col (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero

Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 39, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero.

21	Enter taxable income from Form 1041, line 23 (or Form 990-T, line 39)	21			
22	Enter the smaller of line 18a or 19 in column (2)	·			
	but not less than zero	J			
23	Enter the estate's or trust's qualified dividends]]			
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 23				
24	Add lines 22 and 23]			
25	If the estate or trust is filing Form 4952, enter the	1			
	amount from line 4g, otherwise, enter -0 ▶ 25				
26	Subtract line 25 from line 24 If zero or less, enter -0	26		Ì	,
27	Subtract line 26 from line 21 If zero or less, enter -0	27		7	
28	Enter the smaller of the amount on line 21 or \$2,650	28		1	
29	Enter the smaller of the amount on line 27 or line 28	29		7	
30	Subtract line 29 from line 28 If zero or less, enter -0- This amount is taxed at	0%		30	
31	Enter the smaller of line 21 or line 26	31			
32	Subtract line 30 from line 26	32			
33	Enter the smaller of line 21 or \$12,950	33		7	
34	Add lines 27 and 30	34		7	
35	Subtract line 34 from line 33 If zero or less, enter -0	35		7	
36	Enter the smaller of line 32 or line 35	36		٦	
37	Multiply line 36 by 15% (0 15)			37	
38	Enter the amount from line 31	38			
39	Add lines 30 and 36	39		7	
40	Subtract line 39 from line 38 If zero or less, enter -0	40		٦.	
41	Multiply line 40 by 20% (0 20)		>	41	
42	Figure the tax on the amount on line 27 Use the 2019 Tax Rate Schedule for Estates				
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)	42			
43	Add lines 37, 41, and 42	43			
44	Figure the tax on the amount on line 21 Use the 2019 Tax Rate Schedule for Estates			7	
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)	44			
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 here and	on Form	1041, Schedule	7	
	G, Part I, line 1a (or Form 990-T, line 41)			45	5,395.

3800 om

General Business Credit



OMB No 1545-0895

2019 Attachment Sequence No 22

Internal Revenue Service (99)
Name(s) shown on return

► Go to www.irs.gov/Form3800 for instructions and the latest information.

You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return

Sequence No 2

TRUS	TEES OF THE UNIV OF PENNA RETIREE MED &		3-2/69/44
Part I	Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT)	
	(See instructions and complete Part(s) III before Parts I and II)		
1	General business credit from line 2 of all Parts III with box A checked	1	
2	Passive activity credits from line 2 of all Parts III with box B checked 2 917.		
3	Enter the applicable passive activity credits allowed for 2019 See instructions	3	917.
4	Carryforward of general business credit to 2019 Enter the amount from line 2 of Part III with		<u> </u>
•	box C checked See instructions for statement to attach	4	108.
5	Carryback of general business credit from 2020 Enter the amount from line 2 of Part III with	-	100.
3	· · · · · · · · · · · · · · · · · · ·	اہا	
c	box D checked See instructions	5	1 025
6	Add lines 1, 3, 4, and 5	6	1,025.
Part II		 r	
7	Regular tax before credits		
	• Individuals Enter the sum of the amounts from Form 1040 or 1040-SR, line 12a, and		
	Schedule 2 (Form 1040 or 1040-SR), line 2, or the sum of the amounts from Form		
	1040-NR, lines 42 and 44		
	• Corporations Enter the amount from Form 1120, Schedule J, Part I, line 2, or the		
	applicable line of your return	7	
	• Estates and trusts Enter the sum of the amounts from Form 1041, Schedule G,		
	lines 1a and 1b, or the amount from the applicable line of your return		
8	Alternative minimum tax		
•	• Individuals Enter the amount from Form 6251, line 11		
	• Corporations Enter -0	8	
	• Estates and trusts Enter the amount from Schedule I (Form 1041), line 54		
	Estates and trusts. Enter the amount from Schedule (Form 1041), whe 34)		
•	Add been 7 and 0	9	
9	Add lines 7 and 8	-	
10a	Foreign tax credit		
	Certain allowable credits (see instructions)		
C	Add lines 10a and 10b	10c	<u> </u>
11	Net income tax. Subtract line 10c from line 9 If zero, skip lines 12 through 15 and enter -0- on line 16	11	
12	Net regular tax. Subtract line 10c from line 7 If zero or less, enter -0-		
13	Enter 25% (0 25) of the excess, if any, of line 12 over \$25,000 See		
-	instructions]	
14	Tentative minimum tax]	
• •	Individuals Enter the amount from Form 6251, line 9		
	• Corporations Enter -0		
	• Estates and trusts Enter the amount from Schedule I (Form 1041),	1	
	line 52	15	
15	Enter the greater of line 13 or line 14	15	
16	Subtract line 15 from line 11 If zero or less, enter -0	16	
17	Enter the smaller of line 6 or line 16 · · · · · · · · · · · · · · · · · ·	17	
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition,	ľ	
	or reorganization		

For Paperwork Reduction Act Notice, see separate instructions.

Form 3800 (2019)

Part II Allowable Credit (continued)

ган	Anowable Oreal (Continued)		
lote:	If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and ente	er -0- (on line 26
18	Multiply line 14 by 75% (0 75) See instructions	18	
19	Enter the greater of line 13 or line 18	19	
20	Subtract line 19 from line 11 If zero or less, enter -0	20	
21	Subtract line 17 from line 20 If zero or less, enter -0	21	
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	
23	Passive activity credit from line 3 of all Parts III with box B checked 23		
24	Enter the applicable passive activity credit allowed for 2019 See instructions	24	
25	Add lines 22 and 24	25	
26	Empowerment zone and renewal community employment credit allowed Enter the smaller of line 21 or line 25	26	
27	Subtract line 13 from line 11, If zero or less, enter -0	27	
28	Add lines 17 and 26	28	
29	Subtract line 28 from line 27 If zero or less, enter -0	29	
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked 32		
33	Enter the applicable passive activity credits allowed for 2019 See instructions	33	
34	Carryforward of business credit to 2019 Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked See instructions for statement to attach	34	,
35	Carryback of business credit from 2020 Enter the amount from line 5 of Part III with box D checked See instructions	35	
36	Add lines 30, 33, 34, and 35	36	***
37	Enter the smaller of line 29 or line 36	37	
38	Credit allowed for the current year. Add lines 28 and 37 Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return Individuals Schedule 3 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 51. Corporations Form 1120, Schedule J, Part I, line 5c	38	Form 3800 (2019)

orm 38	000 (2019)			Page 3
	shown on return		Identifying number	
TRUS	STEES OF THE UNIV OF PENNA RETIREE MED &		23-2769744	
Part		tructio		
	lete a separate Part III for each box checked below. See instructions			
ΑĖ	General Business Credit From a Non-Passive Activity E Reserved			
В	General Business Credit From a Passive Activity F Reserved			
c		Busin	ness Credit Carryforwa	ırds
Ď [General Business Credit Carrybacks H Reserved		,	
	you are filing more than one Part III with box A or B checked, complete and attach first an a	ddition	nal Part III combining an	nounts from all Parts
	with box A or B checked Check here if this is the consolidated Part III			
	(a) Description of credit		(b)	(c)
	On any line where the credit is from more than one source, a separate Part III is needed for e	ach	If claiming the credit from a pass-through	Enter the appropriate
	arough entity		entity, enter the EIN	amount
	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
	Reserved	1b		917.
	Increasing research activities (Form 6765)	1c		
	Low-income housing (Form 8586, Part I only)	1d		
	Disabled access (Form 8826) (see instructions for limitation)	1e		-
	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
	Indian employment (Form 8845)	1g		-
	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
J	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j		
	Employer-provided child care facilities and services (Form 8882) (see			
	Instructions for limitation)	1k		
ı	Biodiesel and renewable diesel fuels (attach Form 8864)	11		nr — .
	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
	Nonconventional source fuel (carryforward only)	10		
	Energy efficient home (Form 8908)	1p		
	Energy efficient appliance (carryforward only)	1q_		
	Alternative motor vehicle (Form 8910)	1r		
	Alternative fuel vehicle refueling property (Form 8911)	1s		
	Enhanced oil recovery credit (Form 8830)	1t		
	Mine rescue team training (Form 8923)	1u		
	Agricultural chemicals security (carryforward only)	1v		
	Employer differential wage payments (Form 8932)	1w		
	Carbon oxide sequestration (Form 8933)	1x		
	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
	Qualified plug-in electric vehicle (carryforward only)	1z		
	Employee retention (Form 5884-A)	1aa		
	Other Oil and gas production from marginal wells (Form 8904) and certain	1bb		
22		1zz		
2	other credits (see instructions)	2		917
2	Enter the amount from Form 8844 here and on the applicable line of Part II	3		<u> </u>
3	• • • • • • • • • • • • • • • • • • • •	4a		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a 4b		
b	Work opportunity (Form 5884)	46 4c		
C	Biofuel producer (Form 8478)	4d		4
d	Low-income housing (Form 8586, Part II)	4u 4e	 	<u></u>
e	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4e 4f	 	9,513
f		41 4g	 	7,010
g	Qualified railroad track maintenance (Form 8900)	49 4h		
h i	Increasing research activities (Form 6765)	4i		
'	Employer credit for paid family and medical leave (Form 8994)	4j	 	13
J Z	Other	4z		1,560
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		11,090

12,007. Form **3800** (2019)

Add lines 2, 3, and 5 and enter here and on the applicable line of Part II

_		2
F	ane.	.5

Form 3800 (2019) Identifying number Name(s) shown on return TRUSTEES OF THE UNIV OF PENNA RETIREE MED &

Part III General Business Credits or Eligible Small Business Credits (see instructions) 23-2769744

Com			51.07			
. [plete a separate Part III for each box checked below See instructions					
A		·				
В		Reserved Eligible Small Business Credit Carryforwards				
C		buşı	ness Credit Carrylorwa	arus		
D (General Business Credit Carrybacks H Reserved		ant Dark III annaharan a			
	f you are filing more than one Part III with box A or B checked, complete and attach first an a III with box A or B checked Check here if this is the consolidated Part III					
	(a) Description of credit	• • •	(b)	(c)		
	On any line where the credit is from more than one source, a separate Part III is needed for e through entity	ach	If claiming the credit from a pass-through entity, enter the EIN	Enter the appropriate amount		
	Investment (Form 3468, Part II only) (attach Form 3468)	1a	entity, enter the Life	amount		
b		1b				
c	Increasing research activities (Form 6765)	1c	04-3514360	4.		
d	Low-income housing (Form 8586, Part I only)	1d	0.0021000			
e	Disabled access (Form 8826) (see instructions for limitation)	1e				
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f				
g	Indian employment (Form 8845)	1g				
9 h		 1h	 -			
i	New markets (Form 8874)	1i				
i	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j				
, k	Employer-provided child care facilities and services (Form 8882) (see					
•	instructions for limitation)	1k				
ı	Biodiesel and renewable diesel fuels (attach Form 8864)	11				
	Low sulfur diesel fuel production (Form 8896)	1m				
n	5 4 11 4 4 45 00000	1n				
0	NI I I I I I I I I I I I I I I I I I I	10				
p	5 (5 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	1p				
q	For a service of the second and a second and	1q				
r	Alternative motor vehicle (Form 8910)	1r	· -			
s	4.5 4 5 1 1 4 5 1 4 5 1 (5 0044)	1s				
t	Enhanced oil recovery credit (Form 8830)	1t		-		
u		1u				
v	A Hard the second and the second and the	1v				
v	5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1w				
×	0 1 (5 0000)	1x				
v	Qualified plug-in electric drive motor vehicle (Form 8936)	1y				
,	Qualified plug-in electric vehicle (carryforward only)	1z				
	a Employee retention (Form 5884-A)	1aa		<u> </u>		
	b General credits from an electing large partnership (carryforward only)	1bb				
	z Other Oil and gas production from marginal wells (Form 8904) and certain					
	other credits (see instructions)	1zz				
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		4.		
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3				
4a		4a		_		
b	144 1 4 4 (5 5004)	4b				
С	D. f I (F 0470)	4c				
d		4d	04-3514360	4.		
е	Describbe destruction of and and and laden and made destruction (Form 2025)	4e				
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	04-3514360	44.		
g	O alfant and transfer and transfer and (Farma (0000))	4g				
h		4h				
i	Increasing research activities (Form 6765)	4i				
i	Employer credit for paid family and medical leave (Form 8994)	4j	98-1377130	13.		
z		4z	04-3514360	1,528.		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		1,589.		
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		1,593.		

	300 (2019)			Page 3
Name(s) shown on return		Identifying number	_
	STEES OF THE UNIV OF PENNA RETIREE MED &		23-276974	4
Part		tructi	ons)	
Comp	lete a separate Part III for each box checked below See instructions			
A	General Business Credit From a Non-Passive Activity E Reserved			
В	General Business Credit From a Passive Activity F Reserved			
c		l Busi	ness Credit Carryforwa	rds
D L	General Business Credit Carrybacks H Reserved			
	you are filing more than one Part III with box A or B checked, complete and attach first an a			
	with box A or B checked Check here if this is the consolidated Part III	<u> </u>	(b)	
	(a) Description of credit		If claiming the credit	(c) Enter the
	On any line where the credit is from more than one source, a separate Part III is needed for exercise partity.	each	from a pass-through	appropriate
	Investment (Form 3468, Part II only) (attach Form 3468)	1a	entity, enter the EIN	amount

0	Reserved		47-3260122	3.
ن م	Low-income housing (Form 8586, Part I only)		77 3200122	<u></u>
d	Disabled access (Form 8826) (see instructions for limitation)		<u> </u>	
e f	Renewable electricity, refined coal, and Indian coal production (Form 8835)			
-	Indian employment (Form 8845)			
g h	Orphan drug (Form 8820)			
 i	New markets (Form 8874)	1i		
i	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1i		
j k	Employer-provided child care facilities and services (Form 8882) (see			
	instructions for limitation)	1k		
1	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)			
0	Nonconventional source fuel (carryforward only)			
р	Energy efficient home (Form 8908)			
q	Energy efficient appliance (carryforward only)			
r	Alternative motor vehicle (Form 8910)			
s	Alternative fuel vehicle refueling property (Form 8911)			
t	Enhanced oil recovery credit (Form 8830)			
u	Mine rescue team training (Form 8923)	1u		
	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)	1w		
x	Carbon oxide sequestration (Form 8933)			
у	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
z	Qualified plug-in electric vehicle (carryforward only)			
aa	Employee retention (Form 5884-A)	1aa		
	General credits from an electing large partnership (carryforward only)	1bb		
ZZ	Other Oil and gas production from marginal wells (Form 8904) and certain	ľ		
	other credits (see instructions)	1zz	<u></u>	
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I \dots	2		3.
3	Enter the amount from Form 8844 here and on the applicable line of Part II \dots	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b		
С	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586, Part II)	4d	-	
е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e	00 05 4 6000	0.460
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)		98-0546998	9,469.
g	Qualified railroad track maintenance (Form 8900)			 ·
h	Small employer health inclinance premilims (Form XVA1)	∆ h	1	

Form **3800** (2019)

Increasing research activities (Form 6765)......

Employer credit for paid family and medical leave (Form 8994).

Add lines 4a through 4z and enter here and on the applicable line of Part II

Add lines 2, 3, and 5 and enter here and on the applicable line of Part II

4i

4j

98-0546998

Form 3800 (2019)	<u> </u>
Name(s) shown on return	Identifying number
TRUSTEES OF THE UNIV OF PENNA RETIREE MED &	23-2769744
Part III General Business Credits or Eligible Small Business Credits (see Instru	uctions)

C	General Business Credit Carryforwards General Business Credit Carrybacks H Reserved	Busi	ness Credit Carryforwai	us
l If	you are filing more than one Part III with box A or B checked, complete and attach first an a			
- 111	with box A or B checked Check here if this is the consolidated Part III	<u></u>	l I	
	 (a) Description of credit On any line where the credit is from more than one source, a separate Part III is needed for enrough entity 	each	(b) If claiming the credit from a pass-through entity, enter the EIN	(c) Enter the appropriate amount
	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Reserved	1b		
	Increasing research activities (Form 6765)	1c	98-0546998	553
	Low-income housing (Form 8586, Part I only)	1d		
е	Disabled access (Form 8826) (see instructions for limitation)	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f	•	
g	Indian employment (Form 8845)	1g		
h	Orphan drug (Form 8820)	1h	_	
i	New markets (Form 8874)	_1i		
j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	_ <u>1j</u> _		
k	Employer-provided child care facilities and services (Form 8882) (see	ļ		
	instructions for limitation)	1k		
	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (carryforward only)			
р	Energy efficient home (Form 8908)			
q	Energy efficient appliance (carryforward only)			
r	Alternative motor vehicle (Form 8910)			
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)			
V	Agricultural chemicals security (carryforward only)	1v		
w	Employer differential wage payments (Form 8932)			
x	Carbon oxide sequestration (Form 8933)		ļ	
У	Qualified plug-in electric drive motor vehicle (Form 8936)			
	Qualified plug-in electric vehicle (carryforward only)	1z		
	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (carryforward only)	1bb		
ZZ	Other Oil and gas production from marginal wells (Form 8904) and certain	İ	!	
	other credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I \dots	2		553
3	Enter the amount from Form 8844 here and on the applicable line of Part II \dots	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b		
С	Biofuel producer (Form 6478)	4c		_
d	Low-income housing (Form 8586, Part II)	4d		
е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		
j	Employer credit for paid family and medical leave (Form 8994)	4j	<u> </u>	
z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II			
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		553

_		2
Pao	e	J

Form 3800 (2019) Name(s) shown on return Identifying number 23-2769744 TRUSTEES OF THE UNIV OF PENNA RETIREE MED & General Business Credits or Eligible Small Business Credits (see instructions) Complete a separate Part III for each box checked below See instructions Reserved Α General Business Credit From a Non-Passive Activity X F Reserved В General Business Credit From a Passive Activity С General Business Credit Carryforwards G Eligible Small Business Credit Carryforwards н Reserved D General Business Credit Carrybacks If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts 1 III with box A or B checked Check here if this is the consolidated Part III . (c) Enter the (a) Description of credit If claiming the credit Note: On any line where the credit is from more than one source, a separate Part III is needed for each from a pass-through appropriate pass-through entity entity, enter the EIN amount Investment (Form 3468, Part II only) (attach Form 3468) 1b 37-1862818 357 Increasing research activities (Form 6765) 1c 1d Low-income housing (Form 8586, Part I only) 1e Renewable electricity, refined coal, and Indian coal production (Form 8835) 1f 1g 1h New markets (Form 8874) 1i Small employer pension plan startup costs (Form 8881) (see instructions for limitation) 1j Employer-provided child care facilities and services (Form 8882) (see instructions for limitation) 1k 11 Biodiesel and renewable diesel fuels (attach Form 8864) m Low sulfur diesel fuel production (Form 8896) Distilled spirits (Form 8906) 1n 10 Energy efficient home (Form 8908).......... 1p Energy efficient appliance (carryforward only) 1q Alternative motor vehicle (Form 8910) 1r Alternative fuel vehicle refueling property (Form 8911) 1s 1t 1u Agricultural chemicals security (carryforward only) 1v 1w Carbon oxide sequestration (Form 8933)......... 1x Qualified plug-in electric drive motor vehicle (Form 8936)....... 1y Qualified plug-in electric vehicle (carryforward only) 1z aa Employee retention (Form 5884-A)............ 1aa **bb** General credits from an electing large partnership (carryforward only) 1bb zz Other Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions) 1zz Add lines 1a through 1zz and enter here and on the applicable line of Part I 2 2 Enter the amount from Form 8844 here and on the applicable line of Part II 3 3 Investment (Form 3468, Part III) (attach Form 3468) 4a

Work opportunity (Form 5884)

Biofuel producer (Form 6478)......

Renewable electricity, refined coal, and Indian coal production (Form 8835)

Employer social security and Medicare taxes paid on certain employee tips (Form 8846)

Qualified railroad track maintenance (Form 8900)

Increasing research activities (Form 6765)

Employer credit for paid family and medical leave (Form 8994)

Add lines 4a through 4z and enter here and on the applicable line of Part II Add lines 2, 3, and 5 and enter here and on the applicable line of Part II

Other

Form 3800 (2019)

i

4b

4d

4e

4f

4g

4h

4i

4j

4z

D	2
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orm :	800 (2019)			Page 3
Vame(s) shown on return		Identifying number	
TRU	STEES OF THE UNIV OF PENNA RETIREE MED &		23-2769744	<u> </u>
Pari	General Business Credits or Eligible Small Business Credits (see ins	tructio	ns)	
Com	plete a separate Part III for each box checked below. See instructions			
Α	General Business Credit From a Non-Passive Activity E Reserved			
В	General Business Credit From a Passive Activity F Reserved			
-		Busin	ess Credit Carryforwa	ards
ם ס	General Business Credit Carrybacks H Reserved	000,,,,	oos oroak oan yronno	
_	f you are filing more than one Part III with box A or B checked, complete and attach first an a	ddition	al Part III combining ar	mounts from all Parts
	I with box A or B checked Check here if this is the consolidated Part III			
•	(a) Description of credit		(b)	(c)
	• • • • • • • • • • • • • • • • • • • •		If claiming the credit	Enter the
	On any line where the credit is from more than one source, a separate Part III is needed for ethrough entity		from a pass-through entity, enter the EIN	appropriate amount
	Investment (Form 3468, Part II only) (attach Form 3468)	1a	entity, enter the Life	amount
		1b		
	Reserved	1c	ATCH 222	99.
C	Increasing research activities (Form 6765)		ATCH 23	9
d	Low-income housing (Form 8586, Part I only)	1d	AICH 25	
e	Disabled access (Form 8826) (see instructions for limitation)	1e		
Ţ	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
9	Indian employment (Form 8845)	1g		-
h	Orphan drug (Form 8820)	1h		<u> </u>
!	New markets (Form 8874)	1i		
J	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	_1j		
k	, , ,			
_	instructions for limitation)	1k		
ı	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	<u>1n</u>		
0	Nonconventional source fuel (carryforward only)	10	-	
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	<u>1q</u>		
r	Alternative motor vehicle (Form 8910)	<u>1r</u>		
s	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
	Agricultural chemicals security (carryforward only)	1v		
	Employer differential wage payments (Form 8932)	1w		
x	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
Z	, , , , , , , , , , , , , , , , , , , ,	1z		
	Employee retention (Form 5884-A)	1aa		
	General credits from an electing large partnership (carryforward only)	1bb		
Z	Other Oil and gas production from marginal wells (Form 8904) and certain			
	other credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		108
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4 a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
b	Work opportunity (Form 5884)	4b		
С	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586, Part II)	4d	ATCH 244	23
е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	ATCH 255	28,733
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h		
i	Increasing research activities (Form 6765)	4i		
j	Employer credit for paid family and medical leave (Form 8994)	4j	ATCH 266	14
z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		28,756
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		28,864

28,864. Form **3800** (2019)

_{Form} 4136

Credit for Federal Tax Paid on Fuels

Department of the Treasury Internal Revenue Service (99) ► Go to www.irs.gov/Form4136 for instructions and the latest information

OMB No 1545-0162

2019
Attachment
Sequence No. 23

interna	Revenue Service (99)				Sequence No	, 23
Name	(as shown on your income tax return)			Taxpayer identifi	cation number	
TRU	JSTEES OF THE UNIV OF PENNA	RETIREE M	ED &	23-2769	9744	
	Caution: Claimant has the name and address of claims on lines 1c and 2b (type of use For claims on lines 1c and 2b (type of credit card issuer	13 or 14), 3d,	4c, and 5, cla	imant has not waiv	ed the right to make t	he claim
1	Nontaxable Use of Gasoline			Note:	CRN is credit reference	number
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Off-highway business use		\$ 183	71.0)		
b	Use on a farm for farming purposes		183	>		362
С	Other nontaxable use (see Caution above line 1)		183		s 13.	
d	Exported		184			411
	Nontaxable Use of Aviation Gasoline	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Use in commercial aviation (other than foreign trade)		\$ 15		\$	354
b	Other nontaxable use (see Caution above line 1)		193			324
С	Exported		194			412
d	LUST tax on aviation fuels used in foreign trade		001			433
3	Nontaxable Use of Undyed Diesel Fuel					
	Claimant certifies that the diesel fuel did not contain visexception. If any of the diesel fuel included in this claim			ve, attach an explanati	on and check here	. ▶
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Nontaxable use		\$ 243	159.0	1	
b	Use on a farm for farming purposes		243	}	\$ 39.	360
С	Use in trains		243			353
d	Use in certain intercity and local buses (see Caution					

4	Nontaxable Use of	Hadwad Ka	(Other	Than Karasana	Hood in Aviotion)
4	Nontaxable use of	unavea ke	rosene (Utner	inan Kerosene	used in Aviation)

	Claimant certifies that the kerosene did not contain visible evidence of dye Exception. If any of the kerosene included in this claim did contain visible evidence of dye, attach an explanation and check here							
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN		
а	Nontaxable use taxed at \$ 244	1	\$ 243	<u> </u>		 		
b	Use on a farm for farming purposes		243		\$	346		
С	Use in certain intercity and local buses (see Caution							
	above line 1)		17			347		
d	Exported		244			414		
е	Nontaxable use taxed at \$ 044		043			377		
f	Nontaxable use taxed at \$ 219		218			369		

17

244

For Paperwork Reduction Act Notice, see the separate instructions.

Form **4136** (2019)

350

413

JSA

above line 1)

e Exported

5 Kerosene Used in Aviation (se	ee Caution above line 1)
---------------------------------	---------------------------------

_		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a.	Kerosene used in commercial aviation (other than foreign trade) taxed at \$ 244		\$ 200		\$	417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$ 219		175			355
С	Nontaxable use (other than use by state or local government) taxed at \$ 244		243			346
d	Nontaxable use (other than use by state or local government) taxed at \$ 219		218			369
е	LUST tax on aviation fuels used in foreign trade		001			433

6 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel

Registration No. >

Claimant certifies that it sold the diesel fuel at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the diesel fuel did not contain visible evidence of dye

	Exception. If any of the diesel fuel included in this claim did contain visible evidence of dye, attach an explanation and check here 🕨 📙							
		(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN			
а	Use by a state or local government	\$ 243		\$	360			
b	Use in certain intercity and local buses	17			350			

7 Sales by Registered Ultimate Vendors of Undyed Kerosene (Other Than Kerosene For Use in Aviation)

Registration No. >

Claimant certifies that it sold the kerosene at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the kerosene did not contain visible evidence of dye.

Exception If any of the kerosene included in this claim did contain visible evidence of dye, attach an explanation and check here 🕨 🔝							
	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN			
Use by a state or local government	\$ 243	7					
Sales from a blocked pump	243	5	\$	346			
Use in certain intercity and local buses	17			347			

8 Sales by Registered Ultimate Vendors of Kerosene For Use in Aviation

Registration No. 🕨

Claimant sold the kerosene for use in aviation at a tax-excluded price and has not collected the amount of tax from the buyer, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. See the instructions for additional information to be submitted

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Use in commercial aviation (other than foreign trade) taxed at \$ 219		\$ 175		s	355
b	Use in commercial aviation (other than foreign trade) taxed at \$ 244		200			417
¢	Nonexempt use in noncommercial aviation		025			418
d	Other nontaxable uses taxed at \$ 244		243			346
е	Other nontaxable uses taxed at \$ 219		218			369
f	LUST tax on aviation fuels used in foreign trade		001			433

Form 4136 (2019)

а



9 Reserved for future use

Registration No. ▶

		(b) Rate	(c) Gallons of alcohol	(d) Amount of credit	(e) CRN
а	Reserved for future use			\$	
b	Reserved for future use		-		

10 Biodiesel or Renewable Diesel Mixture Credit

Registration No. ▶

Biodiesel mixtures. Claimant produced a mixture by mixing biodiesel with diesel fuel. The biodiesel used to produce the mixture met ASTM D6751 and met EPA's registration requirements for fuels and fuel additives. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, the Statement of Biodiesel Reseller. Renewable diesel mixtures. Claimant produced a mixture by mixing renewable diesel with liquid fuel (other than renewable diesel). The renewable diesel used to produce the renewable diesel mixture was derived from biomass, met EPA's registration requirements for fuels and fuel additives, and met ASTM D975, D396, or other equivalent standard approved by the IRS. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller, both of which have been edited as discussed in the instructions for line 10. See the instructions for line 10 for information about renewable diesel used in aviation.

		(b) Rate	(c) Gallons of biodiesel or renewable diesel	(d) Amount of credit	(e) CRN
а	Biodiesel (other than agri-biodiesel) mixtures	\$ 1 00		\$	388
b	Agri-biodiesel mixtures	1 00			390
С	Renewable diesel mixtures	1 00			307

11 Nontaxable Use of Alternative Fuel

Caution: There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See instructions

		(a) Type of use	(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credit	(e) CRN
а	Liquefied petroleum gas (LPG) (see instructions)		\$ 183		\$	419
b	"P Series" fuels		183			420
С	Compressed natural gas (CNG) (see instructions)		183			421
d	Liquefied hydrogen		183			422
е	Fischer-Tropsch process liquid fuel from coal					
	(including peat)		243			423_
f	Liquid fuel derived from biomass		243			424
g	Liquefied natural gas (LNG) (see instructions)		243			425
h	Liquefied gas derived from biomass		183			435

12 Alternative Fuel Credit

Registration No. >

		(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credit	(e) CRN
а	Liquefied petroleum gas (LPG) (see instructions)	\$ 50		\$	426
b	"P Series" fuels	50		•	427
С	Compressed natural gas (CNG) (see instructions)	50			428
d	Liquefied hydrogen	50			429
е	Fischer-Tropsch process liquid fuel from coal (including peat)	50			430
f	Liquid fuel derived from biomass	50			431
g	Liquefied natural gas (LNG) (see instructions)	50			432
h	Liquefied gas derived from biomass	50			436
i	Compressed gas derived from biomass	50			437

Form **4136** (2019)



13 **Registered Credit Card Issuers**

Registration No. ▶

		(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Diesel fuel sold for the exclusive use of a state or local government	\$ 243		\$	360
b	Kerosene sold for the exclusive use of a state or local government	243			346
С	Kerosene for use in aviation sold for the exclusive use of a state or local government taxed at \$ 219	218			369

Nontaxable Use of a Diesel-Water Fuel Emulsion

	Caution: There is a reduced credit rate for use in certain intercity and local buses (type of use 5). See instructions											
	,	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN						
а	Nontaxable use		\$ 197	_	\$	309						
b	Exported		198			306						

Diesel-Water Fuel Emulsion Blending

Registration No. ▶

	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
Blender credit	\$ 046		\$	310

Exported Dyed Fuels and Exported Gasoline Blendstocks

		(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Exported dyed diesel fuel and exported gasoline blendstocks taxed at \$ 001	\$ 001		\$	415
b	Exported dyed kerosene	001			416
17	Total income tax credit claimed. Add lines 1 through 16, column (d) Enter 13 (Form 1040 or 1040-SR), line 12, Form 1120, Schedule J, line 20b, Form 11041, Schedule G, line 16b, or the proper line of other returns	120-S, line 23	3c, Form	\$ 52.	1

Form **4136** (2019)

Department of the Treasury

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

Attachment Sequence No 179

Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates Identifying number TRUSTEES OF THE UNIV OF PENNA RETIREE MED & DEATH BENEFITS TRUST 23-2769744 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 (b) Cost (business use only) (c) Elected cost (a) Description of property 6 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 10 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 12 Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2020 Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property See instructions.) 17 17 MACRS deductions for assets placed in service in tax years beginning before 2019 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2019 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (business/investment use (e) Convention (f) Method (g) Depreciation deduction placed in period service only—see instructions) 3-year property 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L 25 vrs g 25-year property 27 5 yrs MM S/L h Residential rental 27 5 yrs. MM S/L property MM S/L 39 yrs. i Nonresidential real S/L MM property Section C-Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System S/L 20a Class life 12 yrs S/L b 12-year S/L 30 yrs. MM c 30-year MM S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 21 Listed property Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

Form 4562 (2019) (Include automobiles, certain other vehicles, certain aircraft, and property used **Listed Property** Part V entertainment, recreation, or amusement) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No (e)
Basis for depreciation (f) (g) (h) Business/ Type of property (list Date placed Recovery Method/ Depreciation Elected section 179 nvestment use Cost or other basis (business/investment vehicles first) in service Convention period deduction cost percentage Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions 25 26 Property used more than 50% in a qualified business use % % % 27 Property used 50% or less in a qualified business use % S/L-% S/L-S/L-% 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (c) (e) Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 6 30 Total business/investment miles driven during the year (don't include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal Yes No Yes Yes No No Yes No Yes No Yes No use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions No Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles Part VI Amortization

Amortization					
(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begin	ns during your 20°	19 tax year (see instruction	ns)		
INT. DRILLING COST	07/01/2019	1,563,609	59E(2)	_ 5.0	312,722
43 Amortization of costs that beg	an before your 201	l9 tax year		43	563,500
44 Total. Add amounts in column	44	876,222			

23-2769744

ATTACHMENT 3

FORM 990T - PART II - LINE 18: INVESTMENT INTEREST

INVESTMENT INTEREST EXPENSE DEDUCTION (FORM 4952, LINE 8)

11,816.

FORM 990T - PART II - LINE 18: NON-INVESTMENT INTEREST

11,816.

V 19-7.3F



23-2769744

ATTACHMENT 4

FORM 990T - TOTAL OTHER DEDUCTIONS

OTHER DEDUCTIONS WITH QUALIFIED BUSINESS INCOME DEDUCTION DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD)

OTHER DEDUCTIONS FROM NON K-1 ACCOUNTING FEES

31,139.

TOTAL: LINE 28 - OTHER DEDUCTIONS

31,139.

EIN: 23-2769744

FOR THE YEAR ENDED JUNE 30, 2020

FORM 990-T, PART II, LINE 36 - NOL ARISING IN TAX YEARS BEGINNING BEFORE JANUARY 1, 2018 NET OPERATING LOSS CARRYOVER

<u>Y</u> ear	_	Amount ailable				t Carried	
6/30/2018		40,800		40,800		-	
	\$	40,800	\$	40,800	\$		
NET OPERA	TING 1	LOSS CARRYF	ORWARD I	0 6/30/2021	\$		

EIN: 23-2769744

FOR THE YEAR ENDED JUNE 30, 2020

FORM 3800, PART III, LINE 1C

INCREASING RESEARCH ACTIVITIES CREDIT CARRYOVER

Year	-	mount ailable	Current Year Amount Used		Amount Carried to Next Year	
6/30/2016	\$	1	\$	-	\$	1
6/30/2017		4		_		4
6/30/2018		5		-		5
6/30/2019		89		-		89
6/30/2020		917		-		917
_	\$	1,016	\$	_	\$	1,016
INCREASING RESEA	RCH ACTIV	/ITIES CREDIT (CARRYFORWAR	о то 6/3 <u>0</u> /2021	\$	1,016

EIN: 23-2769744

FOR THE YEAR ENDED JUNE 30, 2020

FORM 3800, PART III, LINE 1D

LOW INCOME HOUSING PRE-2008 CREDIT CARRYOVER

Year	Amount Available		Current Year Amount Used		Amount Carried to Next Year	
6/30/2017	\$	6	\$	-	\$	6
6/30/2018		3		_		3
6/30/2019		-		_		_
6/30/2020		-		-		-
	\$	9	\$		\$	9
LOW INCOME HOUSIN	G PRE-2008	CREDIT CA	ARRYFORWARD 1	ro 6/30/2021	\$	9

EIN: 23-2769744

FOR THE YEAR ENDED JUNE 30, 2020

FORM 3800, PART III, LINE 4D

LOW INCOME HOUSING POST-2007 CREDIT CARRYOVER

Year		ount lable	Current Year Amount Used		Amount Carried to Next Year	
6/30/2017	\$	17	\$	-	\$	17
6/30/2018		-		-		-
6/30/2019		6				6
6/30/2020		` 4		-		4
	\$	27	\$		\$	27
LOW INCOME HOUS	ING POST-	2007 CREDIT	CARRYFORWARI	то 6/30/2021	\$	27

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FOR THE YEAR ENDED JUNE 30, 2020

FORM 3800, PART III, LINE 4F

EMPLOYER SOCIAL SECURITY TAXES PAID ON CERTAIN TIPS CREDIT CARRYOVER

Year	Amount Available				Current Year Amount Used		Amount Carried to Next Year	
6/30/2016	\$	27	\$	-	\$	27		
6/30/2017		6,038		-		6,038		
6/30/2018		11,943		_		11,943		
6/30/2019		10,725		-		10,725		
6/30/2020		9,513		_		9,513		
	\$	38,246	\$	-	\$	38,246		
EMPLOYER SOCIAL SECURITY	TAXES	PAID ON CERTAIN T	IPS CREDIT CARR	YOVER TO 6/30/2021	\$	38,246		

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FOR THE YEAR ENDED JUNE 30, 2020

FORM 3800, PART III, LINE 4J

EMPLOYER CREDIT FOR PAID FAMILY AND MEDICAL LEAVE

Year	Amount Available		Current Year Amount Used		 Carried kt Year
6/30/2019	\$	14	\$	_	\$ 14
	\$	14	\$	-	\$ 14
EMPLOYER CREDIT FOR I	PAID FAMILY AN	D MEDICAL LEA	VE CREDIT CARRY	YOVER TO 6/30/2021	\$ 14