11.	\
المنهج	رن.
100	7/
(,)	' /

Form 990-T	E	kempt Organization				rn	OMB No 1545-0687			
·	For cale	(and proxy tax under section 6033(e)) For calendar year 2018 or other tax year beginning $01/01$, 2018, and ending $12/31$, 20 18								
Department of the Treasury		► Go to www irs gov/Form9		<u> </u>						
Internal Revenue Service	▶ Do	not enter SSN numbers on this fori	c)(3)	Open to Public Inspection for 501(c)(3) Organizations Only						
A Check box if address changed		Name of organization (Check	box if na	ime changed and see instruction	is)		oyer identification number oyees' trust, see instructions)			
B Exempt under section	1	CHARLES KOCH INSTI	TUTE							
X 501(C)(O3_)	Print	Number, street, and room or suite n	o IfaP C) box, see instructions	·	27-4	967732			
408(e) 220(e	Type						ated business activity code			
408A 530(a	1,750	1320 N COURTHOUSE	ROAD	STE 500		(See in	structions)			
529(a)		City or town, state or province, cou	ntry, and	ZIP or foreign postal code						
C Book value of all assets	1	ARLINGTON, VA 2220	1			9000	99			
at end of year	F Gro	oup exemption number (See instru	ictions)	>		•				
350,550,999.	G Che	eck organization type X 5	01(c) cc	prporation 501(c) trust	401(a)	trust Other trust			
H Enter the number of	f the orga	anization's unrelated trades or busi	nesses	▶ 2	Describe	the only	(or first) unrelated			
trade or business he	ere ▶PAI	RTNERSHIP INCOME FRO	M K-1	If only one,	complete Parts I	-V If more	e than one, describe the			
first in the blank sp	ace at the	e end of the previous sentence, of	complete	Parts I and II, complete a S	chedule M for ea	ch additioi	nal			
trade or business, the	nen compl	ete Parts III-V								
I During the tax year	, was the	corporation a subsidiary in an at	filiated g	group or a parent-subsidiary of	controlled group?		▶ Yes X No			
If "Yes," enter the r	name and	identifying number of the parent	corporati							
J The books are in ca	re of ▶St	USAN MOTIFF		Telephor	ne number > 70	3-875-	-1658			
Part I Unrelated	Trade	or Business Income		(A) Income	(B) Exper	ses	(C) Net			
1 a Gross receipts or	sales									
b Less returns and allow	ances	c Balance	▶ 1c							
2 Cost of goods so	old (Sched	dule A, line 7)	. 2							
3 Gross profit Su	btract line	2 from line 1c	. 3							
4a Capital gain net	income (a	attach Schedule D)	. 4a	8,538.			8,538.			
b Net gain (loss) (F	orm 4797,	Part II, line 17) (attach Form 4797).	. 4b	-11,924.			-11,924.			
c Capital loss ded	uction for	trusts	. 4c							
5 Income (loss) from a	partnership o	or an S corporation (attach statement)	. 5	5,253,004.	ATCH 1		5,253,004.			
6 Rent income (Sc	hedule C)		. 6							
7 Unrelated debt-f	ınanced ır	ncome (Schedule E)	. 7		DEO					
8 Interest, annuities, ro	yalties, and re	ents from a controlled organization (Schedule	F) 8		REC	EIVE	D			
		01(c)(7) (9), or (17) organization (Schedule			0)					
·	•	ncome (Schedule I)			NOV 2	5 2019	<u>} 8 </u>			
-		dule J)			(D)	- 1010				
		ctions, attach schedule)		5,249,618.	0055	Spiron de la c	5,249,618.			
		rough 12			OGDE					
		t be directly connected with				=xeebt=	THE COUNTY IDUCTIONS,			
						144				
·		directors, and trustees (Schedule								
						i				
		(see instructions)								
•							259,682.			
		See instructions for limitation rule:					498,994.			
		4562)		(1		· ·				
		d on Schedule A and elsewhere or				226				
						23				
		compensation plans								
		s								
· · ·		Schedule I)				· ·				
		Schedule J)				1				
		schedule)								
		es 14 through 28					758,676.			
		ole income before net operation					4,490;942.			
		ng loss arising in tax years begin	-							
		le income Subtract line 31 from l	ne 30 .	<u> </u>	<u> </u>	32	4,496,942.			
For Paperwork Reduc	tion Act I	Notice, see instructions.					Form 990-T (2018)			
8X2/40 1500 5425DW K9	22 11	/11/2019 4:24:56 PM	V J	18-7.6F	094135		CALLO PAGE			

	Ommusso Moon Institute	٠.	1507702
	990-T (2018)		Page 2
Pa	rt III Total Unrelated Business Taxable Income	, -	
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	4,490,942.
24		34	129,532.
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions),	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum	1 1	
	of lines 33 and 34	36	4,620,474.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
38	Unrelated business taxable income Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36	38	4,619,474.
Day	t IV Tax Computation	30	
		39	970,090.
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0 21)	39	
40	Trusts Taxable at Trust Rates. See instructions for tax computation income tax on		
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041)	40	
41	Proxy tax. See instructions	41	
42	Alternative minimum tax (trusts only).	42	
43	Tax on Noncompliant Facility Income See instructions	43	
44	Total Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	970,090.
Par	t V Tax and Payments		
45 a	Foreign lax credit (corporations attach Form 1118, trusts attach Form 1116) 45a	.	
	Other credits (see instructions)	-	
	General business credit Attach Form 3800 (see instructions)	- 1	
	Credit for prior year minimum tax (attach Form 8801 or 8827)		
		45e	
46	Subtract line 45e from line 44.	46	970,090.
	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule).	47	
47			970,090.
48	Total tax Add lines 46 and 47 (see instructions)	48	3,0,030.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	
	Payments A 2017 overpayment credited to 2018	1	
	2018 estimated tax payments		
	Tax deposited with Form 8868	- 1	
	Foreign organizations Tax paid or withheld at source (see instructions) 50d		
	Backup withholding (see instructions)	1	
	Credit for small employer health insurance premiums (attach Form 8941) 50f	`	
g	Other credits, adjustments, and payments Form 2439	- 1	
	Form 4136 Other Total ▶ 50g		
51	Total payments. Add lines 50a through 50g	51	692,000.
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached	52	23,623.
		53	301,713.
	Overpayment. If Iline 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	
	Enter the amount of line 54 you want Credited to 2019 estimated tax Refunded	55	
Part		,	
	At any time during the 2018 calendar year, did the organization have an interest in or a signature or		authority Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the f		1 '1
	here >		X
			
	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreig	n trust /	••••
	if "Yes," see instructions for other forms the organization may have to file		.
58	Enter the amount of tax-exempt interest received or accrued during the tax year \$	1 01	knowledge and bolist it is
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the bettrue, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	umy	Knowledge and Deller, It IS
Sign	May	the IF	RS discuss this return
Here	livan / loty / TREASURER with	the p	reparer shown below
	Signature of officer Dale Title (see	nstruction	s) ² X Yes No
	Print/Type preparer's name Preparer's signature of f Date Check	lif	PTIN
Paid	MICHAEL J ENGLE /// X, / L 11/15/19 self-em	ployed	P00482834
Prepa	BYEY Firm's name BKD, LLP		44-0160260
Use (Only Table 1201 WAINITE SHITE 1700 KANSAS CITY MO 64106-2246 at		5-221-6300

Firm's address > 1201 WALNUT, SUITE 1700, KANSAS CITY, MO 64106-2246 Phone no 816-221-6300

Form 990-T (2018)

Form 990-T (2018)

Enter here and on page 1,

Part I, line 7, column (B)

(4)

Total dividends-received deductions included in column 8

Enter here and on page 1,

Part I, line 7, column (A)

• • •	CHARLES	KOCH INS	TITU	JTE				. 2	27-4	967732 Page 4
Schedule F-Interest, Annu					lled Or	ganiza	tions (see	instruction	ons)	
,				ntrolled Org					•	
1 Name of controlled organization	2 Employer identification numb	er 3 Ne	et unrel	ated income nstructions)	4 Total	of specifie	d included	f column 4 li in the contro on's gross in	olling	6 Deductions directly connected with income in column 5
(1)										
(2)								_		
(3)										
(4)										
Nonexempt Controlled Organia						10.0	art of column	O that is	1.	Deductions directly
7 Taxable Income	8 Net unrelated in (loss) (see instruct	I .		Total of specific ayments made		ınclu	ded in the co ization's gros	ntrolling		nected with income in column 10
(1)										
(2)										
(3)										
(4)						Add	f columns 5 a	nd 10	Δ,	dd columns 6 and 11
						Ente	r here and on I, line 8, colu	page 1,	Ent	ter here and on page 1, rt I, line 8, column (B)
Totals	<u></u>				▶					
Schedule G-Investment Ir	ncome of a Sec	tion 501(c	:)(7),	(9), or (17) Orga	nizatio	n (see ins	tructions)		
1 Description of income	2 Amount of	ıncome		3 Deduction of the 3 directly cor (attach sch	nected			t-asides schedule)		5 Total deductions and set-asides (col 3 plus col 4)
(1)				_						
(2)										
(3)										
(4)										
	on page 1, olumn (A)						•		Enter here and on page 1, Part I, line 9, column (B)	
Totals ▶										
Schedule I-Exploited Exe	empt Activity In	come, Oth	er Th	an Advert	ising Ir	come	(see instru	ctions)		
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expens directly connected productio unrelate business in	with n of	4 Net incor from unrelat or business 2 minus col If a gain, co cols 5 thro	ed trade (column umn 3) ompute	from a	oss income activity that i unrelated ess income	6 Expe attributa colum	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)									_	
(2)										
(3)										
(4)										
	Enter here and on page 1, Part I, line 10, col (A)	Enter here a page 1, Page 10, col	art I,							Enter here and on page 1, Part II, line 26
Totals		untin==>		<u> </u>					-	
Schedule J- Advertising In Part I Income From Per			neel	idated Par	eie					
Part I Income From Per	Todicals Report	ed on a Co	onsoi	luateu bas	515			1		
1 Name of periodical	2 Gross advertising income	3 Directising .		4 Adver gain or (los 2 minus co a gain, co cols 5 thre	ss) (col of 3) If mpute	_	irculation ncome	6 Read cos		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)		-								
(2)										
(3)]						
(4)										
· · · · · · · · · · · · · · · · · · ·										
Totals (carry to Part II, line (5))				_						Form 990-T (2018)

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I ▶						
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	1000				<u> </u>	

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

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

Form 990-T (2018)

SCHEDULE D (Form 1120)

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T

Employer identification number

Department of the Treasury Internal Revenue Service

► Go to www irs gov/Form1120 for instructions and the latest information

OMB No 1545-0123

CHARLES KOCH INSTITUTE 27-4967732 Short-Term Capital Gains and Losses (See instructions Part I (g) Adjustments to gain (h) Gain or (loss) See instructions for how to figure the amounts to enter on or loss from Form(s) Subtract column (e) from the lines below Proceeds Cost 8949, Part I, line 2, column (d) and combine This form may be easier to complete if you round off cents to (sales price) (or other basis) the result with column (g) column (a) whole dollars 1a. Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However if you choose to report all these transactions on Form 8949 1b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 with Box C checked 49.887 226. 49,661. 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 5 Unused capital loss carryover (attach computation) 6 49,661. 7 Net short-term capital gain or (loss) Combine lines 1a through 6 in column h Part II Long-Term Capital Gains and Losses (See instructions See instructions for how to figure the amounts to enter on (q) Adjustments to gain (h) Gain or (loss) (e) the lines below or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part II, line 2, column (d) and combine This form may be easier to complete if you round off cents to (sales price) (or other basis) the result with column (g) column (g) whole dollars 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 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 42,845. 42,845. Enter gain from Form 4797, line 7 or 9 11 Long-term capital gain from installment sales from Form 6252, line 26 or 37 12 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 Capital gain distributions (see instructions) 14 Net long-term capital gain or (loss) Combine lines 8a through 14 in column h 15 42,845. Summary of Parts I and II Part III Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 49,661. 16 42,845. 17 Net capital gain Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) 17 92,506. Add lines 16 and 17 Enter here and on Form 1120, page 1, line 8, or the proper line on other returns Note If losses exceed gains, see Capital losses in the instructions

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

Schedule D (Form 1120) 2018

Form 8949

Sales and Other Dispositions of Capital Assets

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

OMB No 1545-0074

Department of the Treasury File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D Internal Revenue Service

Attachment Sequence No 12A

Name(s) shown on return

CHARLES KOCH INSTITUTE

Social security number or taxpayer identification number

27-4967732

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions) For long-term transactions, see page 2

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was

reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a, you aren't required to report these transactions on Form 8949 (see instructions) You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS X (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss 1 If you enter an amount in column (g) (e) (h) enter a code in column (f) Cost or other basis See the Note below Gain or (loss) (c) (d) (a) See the separate instructions Date sold or Proceeds Subtract column (e) Description of property Date acquired and see Column (e, disposed of (sales price) from column (d) and (Example 100 sh XYZ Co) (Mo, day, yr) in the separate (g) (Mo, day, yr) (see instructions) combine the result Code(s) from Amount of with column (a) instructions adjustment VARTOUS STCG FROM PARTNERSHIP K-1 VARTOUS 226 -226 STCG 40% OF SECTION 1256 GAIN VARTOUS VARIOUS 3,502 3,502 STCG FROM EFPRP PARTNERSHIP K-1 VARIOUS VARTOUS 21.523 21,523 VARIOUS STCG 40% OF SEC 1256 GAIN EFPRP VARIOUS 24.862 24,862 2 Totals Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B 49.887 226 above is checked), or line 3 (if Box C above is checked)

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

For Paperwork Reduction Act Notice, see your tax return instructions JSA

Form 8949 (2018)

Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side CHARLES KOCH INSTITUTE

Social security number or taxpayer identification number

27-4967732

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions) For short-term transactions, see page 1

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported

to the IRS and for w 8a, you aren't require							dule D, line
You must check Box D, E, or F be a separate Form 8949, page 2, for more of the boxes, complete as ma (D) Long-term transactions re (E) Long-term transactions re X (F) Long-term transactions needs	each applic any forms wit eported on F eported on F	able box If y h the same b orm(s) 1099- orm(s) 1099-	ou have more lo lox checked as y B showing basis B showing basis	ng-term transa ou need was reported to	o the IRS (see	vill fit on this pa	
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 pnce) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	If you enter an a enter a co	any, to gain or loss amount in column (g), de in column (f) trate instructions (g) Amount of adjustment	(h) Gain or (loss) Subtract column (e from column (d) and combine the result with column (g)
LTCG FROM PARTNERSHIP K-1	VARIOUS	VARIOUS	10				10
LTCG 60% OF SECTION 1256 GAIN	VARIOUS	VARIOUS	5,252				5,252
		l		l	l		l

LTCG FROM EFPRP PARTNERSHIP K-1	VARIOUS	VARIOUS	291		291
LTCG 60% OF SEC 1256 GAIN EFPRP	VARIOUS	VARIOUS	37,292		37,292
2 Totals Add the amounts in columns negative amounts) Enter each total Schedule D, line 8b (if Box D above	here and in	clude on your			42.045

above is checked), or line 10 (if Box F above is checked) ▶ 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

42,845

Form 8949 (2018)

CHARLES KOCH INSTITUTE EIN 27-4967732 12/31/2018

FORM 990-T - CHARITABLE CONTRIBUTIONS CARRYFORWARD

YEAR ENDING	ORIGINAL CONTRIBUTIONS	UTILIZED	REMAINING
12/31/2014	903,359	(395,492)	507,867
12/31/2015	932,606	(536,087)	396,519
12/31/2016	798,674	(153,221)	645,453
12/31/2017	1,007,583	(195,403)	812,180
12/31/2018	827,641	(499,141)	328,500
			-
CHARITABLE CONTRIBU	TIONS CARRYFORWARD AVA	ILABLE FOR 2019	2,690,519

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for **Unrelated Trade or Business**

OMB No 1545-0687

Department of the Treasury

For calendar year 2018 or other tax year beginning $\underline{-01/01}$, 2018, and ending

12/31 .20 18

Employer identification number

27-4967732

20

22b

23

24

25

26

27

28

29

30

32

Internal Revenue Service Name of organization

CHARLES KOCH INSTITUTE

▶ Go to www irs gov/Form990T for instructions and the latest information

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

	Unrelated business activity code (see instructions) ► 90009 Describe the unrelated trade or business ► EFPRP INVES		TS LLC PARTNERSHI	P K-1		
Pa	Unrelated Trade or Business Income		(A) Income	(B) Expenses		(C) Net
1 a	Gross receipts or sales					
b	Less returns and allowances C Balance	1c				
2	Cost of goods sold (Schedule A, line 7)	2				
3	Gross profit Subtract line 2 from line 1c	3				
4a	Capital gain net income (attach Schedule D)	4a	83,968.			83,968.
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach					
	statement) ATCH 4 .	5	-142,325.			-142,325.
6	Rent income (Schedule C)	6				
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled					-
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)					
	organization (Schedule G)	9				
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule)	12				
13	Total Combine lines 3 through 12	13	-58,357.			-58,357.
Par	deductions must be directly connected with the ur	relate	ed business income)			tions,
14	Compensation of officers, directors, and trustees (Schedule K)				14	
15	Salaries and wages				15	
16	Repairs and maintenance				16	
17	Bad debts			í	17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses				19	

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2018

-58,357.

-58,357.

20

21 22

23

24

25

26

27

28

29

30

31

Charitable contributions (See instructions for limitation rules) . .

Contributions to deferred compensation plans

Excess readership costs (Schedule J)...........

Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see

Less depreciation claimed on Schedule A and elsewhere on return 22a

ATTACHMENT 1

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

NET ORDINARY INCOME - BAIH, LP K-1

5,253,004.

INCOME (LOSS) FROM PARTNERSHIPS

5,253,004.

	
ATTACHMENT	2

FORM	990T	_	PART	ΙI	-	LINE	20	_	CHARITABLE	CONTRIBU	JTIONS

UNRELATED TRADE OR BUSINESS INCOME ADD: DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD)	5,249,618. 0.
LESS: DEDUCTIONS W/O CHARITABLE CONTRIBUTIONS & DPAD & NOL CARRYOVER	259,682.
CHARITABLE CONTRIBUTION LIMITATION (10%)	* 10% 498,994.
CHARITABLE CONTRIBUTION .	498,994.
CHARITABLE CONTRIBUTION DEDUCTION (SMALLER OF THE ABOVE TWO)	498,994.

ATTACHMENT 3

SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

NAME AND ADDRESS	TITLE	BUSINESS PERCENT	COMPENSATION
ARIANNE MASSEY (PARTIAL) 1320 N COURTHOUSE ROAD STE 500 ARLINGTON, VA 22201	VICE PRESIDENT, TALENT DEV.	0	0.
BRIAN HOOKS 1320 N COURTHOUSE ROAD STE 500 ARLINGTON, VA 22201	PRESIDENT/DIRECTOR .	0	0.
CHARLES CHASE KOCH 1320 N COURTHOUSE ROAD STE 500 ARLINGTON, VA 22201	DIRECTOR/VICE CHAIRMAN	0	0.
CHARLES G. KOCH . 1320 N COURTHOUSE ROAD STE 500 ARLINGTON, VA 22201	CHAIRMAN	0	0.
ELIZABETH B. KOCH 1320 N COURTHOUSE ROAD STE 500 ARLINGTON, VA 22201	DIRECTOR	0	0.
RICHARD FINK (PARTIAL) 1320 N COURTHOUSE ROAD STE 500 ARLINGTON, VA 22201	VICE CHAIRMAN	0	0.
DALE GIBBENS 1320 N COURTHOUSE ROAD STE 500 ARLINGTON, VA 22201	EXECUTIVE VICE PRESIDENT	0	0.
WILLIAM RUGER 1320 N COURTHOUSE ROAD STE 500 ARLINGTON, VA 22201	VICE PRESIDENT-RESEARCH/POLICY	0	0.
BRIAN MENKES 1320 N COURTHOUSE ROAD STE 500 ARLINGTON, VA 22201	SECRETARY	0	0.
ROBERT HEATON 1320 N COURTHOUSE ROAD STE 500 ARLINGTON, VA 22201	TREASURER - OUTGOING	0	0.

ATTACHMENT 3 (CONT'D)

SCHD.	Κ,	FORM	990-т,	COMPENSATION	ΟF	OFFICERS,	DIRECTORS,	&	TRUSTEES

NAME AND ADDRESS	TITLE	BUSINESS PERCENT	COMPENSATION
SUSAN MOTIFF 1320 N COURTHOUSE ROAD STE 500 ARLINGTON, VA 22201	TREASURER	0	0.
TOTAL COMPENSATION			0.

ATTACHMENT 4

EFPRP INVESTMENTS LLC PARTNERSHIP K-1

SCHEDULE M LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

NET ORDINARY INCOME - EFPRP INVESTMENTS K-1

-142,325.

INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

-142,325.