

EXTENDED TO NOVEMBER 15, 2019

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0687

2018

For calendar year 2018 or other tax year beginning _____, and ending _____

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).

Department of the Treasury Internal Revenue Service

Open to Public Inspection for 501(c)(3) Organizations Only

Header section A-G containing organization name (DAVID & INEZ MYERS FOUNDATION), address (25701 SCIENCE PARK DRIVE, CLEVELAND, OH 44122, 7302), EIN (34-6560945), and group exemption number (900099).

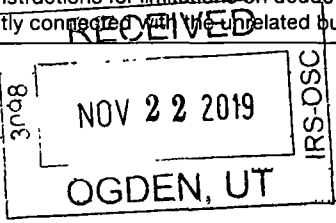
Section H: Enter the number of the organization's unrelated trades or businesses. 1. Describe the only (or first) unrelated trade or business here: SEE STATEMENT 1.

Section I: During the tax year, was the corporation a subsidiary in an affiliated group or a parent subsidiary controlled group? No.

Section J: The books are in care of BARRY REIS. Telephone number 216-593-2900.

Table for Part I: Unrelated Trade or Business Income. Columns: (A) Income, (B) Expenses, (C) Net. Rows 1a-13. Total income: 309,944.

Table for Part II: Deductions Not Taken Elsewhere. Columns: (A) Income, (B) Expenses, (C) Net. Rows 14-32. Total deductions: 0. Unrelated business taxable income: 309,944.



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SEE STATEMENT 3

Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Includes lines 33-38 for unrelated business taxable income.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 39-44 for tax computation.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 45a-55 for tax and payments.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Line number, Description, and Yes/No. Includes lines 56-58 for statements regarding activities.

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer: [Signature] Date: 11/15/19 Title: TREASURER

May the IRS discuss this return with the preparer shown below (see instructions)? Yes [] No [X]

Table for Paid Preparer Use Only. Includes fields for name, signature, date, firm name, address, and phone number.

Schedule A - Cost of Goods Sold. Enter method of inventory valuation **N/A**

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3 Cost of labor	3				
4a Additional section 263A costs (attach schedule)	4a				
b Other costs (attach schedule)	4b		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
5 Total. Add lines 1 through 4b	5				

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions)

1. Description of property

(1)
(2)
(3)
(4)

2. Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) **0.**

(b) Total deductions. Enter here and on page 1, Part I, line 8, column (B) **0.**

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A) 0.	Enter here and on page 1, Part I, line 7, column (B) 0.
Total dividends-received deductions included in column 8			0.	0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
Totals			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)
			0.	0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
Totals		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)
		0.		0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	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 and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 26
		0.	0.			0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated 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 (carry to Part II, line (5))		0.	0.			0.

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

1. Name of 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	0.	0.				0.
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col (A) 0.	Enter here and on page 1, Part I, line 11, col (B) 0.				Enter here and on page 1, Part II, line 27 0.

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)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

FORM 990-T	DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY	STATEMENT	1
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FLOW THROUGH OF INCOME OR LOSS FROM VARIOUS PARTNERSHIPS.

TO FORM 990-T, PAGE 1

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 2
DESCRIPTION		NET INCOME OR (LOSS)
CLEVELAND FEDERATION PE I, LLC - INTEREST INCOME		353.
DAVIDSON KEMPNER INSTITUTIONAL PARTNERS - ORDINARY BUSINESS INCOME (LOSS)		<386.>
EIG ENERGY XIV-A, LP - ORDINARY BUSINESS INCOME (LOSS)		39,591.
EIG ENERGY XVI, LP - ORDINARY BUSINESS INCOME (LOSS)		<52,945.>
LEXIN AMTRUST REAL ESTATE PARTNERS LP - ORDINARY BUSINESS INCOME (LOSS)		2,437.
LEXINGTON MIDDLE MARKET INVESTORS III CAYMAN AIV - ORDINARY BUSINESS INCOME		329.
LEXINGTON MIDDLE MARKET INVESTORS III, LP - ORDINARY BUSINESS INCOME (LOSS)		<9,455.>
LEXINGTON MIDDLE MARKET INVESTORS IV, LP - ORDINARY BUSINESS INCOME (LOSS)		<49,133.>
OCH-ZIFF REAL ESTATE TE FUND LP - ORDINARY BUSINESS INCOME (LOSS)		184,251.
TRG FORESTRY FUND 8-B LP - ORDINARY BUSINESS INCOME (LOSS)		<9,454.>
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5		105,588.

FORM 990-T NET OPERATING LOSS DEDUCTION STATEMENT 4

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/05	2,570,475.	2,570,475.	0.	0.
12/31/08	2,752.	2,752.	0.	0.
12/31/09	707,864.	707,864.	0.	0.
12/31/10	746,007.	304,395.	441,612.	441,612.
12/31/11	408,169.	0.	408,169.	408,169.
NOL CARRYOVER AVAILABLE THIS YEAR			849,781.	849,781.

Capital Gains and Losses
 ▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.
 ▶ Go to www.irs.gov/Form1120 for instructions and the latest information.

2018

Name DAVID & INEZ MYERS FOUNDATION	Employer identification number 34-6560945
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Part I Short-Term Capital Gains and Losses (See instructions.)			
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)
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, leave this line blank and go to line 1b			
1b Totals for all transactions reported on Form(s) 8949 with Box A checked			
2 Totals for all transactions reported on Form(s) 8949 with Box B checked			
3 Totals for all transactions reported on Form(s) 8949 with Box C checked			1,911.
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37			4
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824			5
6 Unused capital loss carryover (attach computation)			6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h			7 1,911.

Part II Long-Term Capital Gains and Losses (See instructions.)			
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, 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 with Box D checked			
9 Totals for all transactions reported on Form(s) 8949 with Box E checked			
10 Totals for all transactions reported on Form(s) 8949 with Box F checked			92,038.
11 Enter gain from Form 4797, line 7 or 9			11 110,407.
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37			12
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824			13
14 Capital gain distributions			14
15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h			15 202,445.

Part III Summary of Parts I and II	
16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)	16 1,911.
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)	17 202,445.
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns.	18 204,356.

Note: If losses exceed gains, see **Capital losses** in the instructions.

