	,		1 1	Exempt Organiz	ation Ruein	AGG	Income Ta	y Retur	, I	OMB No	o. 1545-0687
	'Form	990-T			xy tax under				_ 1		
			Fa- a-t-	• •			, ,	. 7	700	<del>~</del> 2(	<b>)17</b>
	Danasta	nent of the Treesury	ror cale	endar year 2017 or other tax y ► Go to <i>www.irs.gov/i</i>					!-		
2019	•	Revenue Service	▶Do	not enter SSN numbers on t					1(c)(3).		ilic Inspection for quinizations Only
2	$\overline{\Box}$	Check box If address changed		Name of organization (			·				cation number
L		npt under section	Print	UNIVERSITY OF NOTRE	DAME DU LAC				(Employ	rees' trust,	see instructions.)
MAY: 1	<b>√</b> 50	on(C)(03)	or	Number, street, and room or	suite no. If a P.O. box	, see In	structions.			35-0868	
<b>≥</b>	<b>□</b> 40		Туре	CONTROLLER'S OFFICE			<u> </u>			ed busines structions.)	ss activity codes
	<u> </u>	DBA 🗆 530(a)		City or town, state or province		foreign	postal code			ĺ	
₩.		29(a)		NOTRE DAME, IN 46556					5259		541800
POSTEMAN DATE	at en	yalue of all assets d of year		roup exemption number neck organization type I			n [] 5016	) trust	401(a) t	5067	Other trust
至	H De			n's primary unrelated bu							
				e corporation a subsidiary							
. 夏			1	and identifying number	_	•	•	y controlled g	.оцр	., _	.00 (2).10
				► ANDREW PALUF	<u> </u>			phone numbe	r Þ	(574)	631-3288
				e or Business Incom	10		(A) Income		penses	T	(C) Net
	1a	Gross receipts	or sale	98 2,054,329				,	, in	ii	( ) m
	b	Less returns and	allowance	es 0	c Balance ▶	1c	2,054,329			_  	
	2	-		Schedule A, line 7)	・ハループ	2	3,153,983	L			والمناب المناب
	3	-	1	t line 2 from line 1c	7 Thi	3	(1,099,654)				)99,654)
	48		B.	me (attach Schedule D)		48	16,866,571			16,	866,571
	b		1-	4797, Part II, line 17) (atta	•	4b	0			₽	- 0
	С 5	Capital loss de	,	n for trusts erships and S corporations	(attach statement)	4c 5	(16,586,311)			/18 5	
•	6	Rent income (		•	•	6	(10,386,311)		0	(10,5	00,311)
	7	•		ped income (Schedule E		7	0		0	<del> </del>	<del>-  </del>
	8			and rents from controlled organ		8	0		-6	1	
	9			ction 501(c)(7), (9), or (17) organ		9	0	1	0	1	0
	10		•	ivity income (Schedule f)		10	0		0		0
	11	Advertising inc	ome (S	Schedule J)		11	0		0		0
	12	•		ructions; attach schedule	)	12	1,659,001				659,001
<u> </u>	13	Total. Combin				13	839,607		_0 _		839,607
	Part			Taken Elsewhere (Se be directly connected					ept for co	entribution	ons,
•	14			cers, directors, and trust			siness income.)		. 14	<del>1 -</del>	
•	15	Salaries and w							. 15	╁	73,287
:	16	Repairs and m	1 -	ınce					. 16	_	0
3	17	Bad debts .							17		0
)	18	Interest (attach	1	lule)				<u>.</u>	. 18		0
}	19	Taxes and lice						Statement .	. 19		144,143
	20			ns (See instructions for					. 20	<u>.</u>	0
•	21			Form 4562) imed on Schedule A and				0	001	4	اه
•	22 23					ium .	. 22a	<u> </u>	. 22t	<del>' </del>	
-	23 24	Contributions	dele	red doe to the ambiguitant	1	• •			. <u>23</u>	<del>  -</del> -	<del></del>
	25	Employee ben	prod		1	• •			. 25	<del>  -</del> -	
	26	Excess exemp	PENDER	grams 1999 (Sehēdyle)					. 26	†	0
	27	Excess readen		sts (Schedule J)	1				. 27		0
	28	Other deducted	Pa (atte	CH-SCHOOUID			See	Statement	. 28	6,1	127,109
	29	Total deducto	ins. 🎑	<b>레바카카에</b> 28	1				. 29	6,3	344,539
	30	Unrelated busin	iess tax	kable income before net					_	(5,5	04,932)
	31			duction (limited to the a						ļ	0
	32			xable income before sp						(5,5	04,932)
	33 34	Specific deduc	tion (G	enerally \$1,000, but see	Ine 33 instruction	IS for	exceptions) .	 ter then line	. 33	-	0
	<b>J</b>	enter the small	er of 74	taxable income. Subtra		. JZ.	II III III OO IS BLAK		30 34	15.6	04,932)
	=			Notice and instructions		•			محراد م		990-T (2017)

624

Lett					
35	Organizations Taxable as Corporations. See instructions for tax computation. Controlled gro	oup			
	members (sections 1561 and 1563) check here ▶ ✓ See instructions and:				1
а	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)				
	(1) \$ (2) \$ (3) \$	*			
b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)				1
	(2) Additional 3% tax (not more than \$100,000)		X 2	_	
с 36	Income tax on the amount on line 34		35c		}
30	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax the amount on line 34 from:   Tax rate schedule or  Schedule D (Form 1041)				-
37			36		-
38	Proxy tax. See instructions	42	37	10.044	1
39	Alternative minimum tax	.4 6	38	16,911	1-
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies	44	40	16.011	╁
	V Tax and Payments	.77	1 40	16,911	<u> </u>
41a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) . 41a		<b>30</b>		Τ
b	Other credits (see instructions)				1
c	General business credit Attach Form 3800 (see instructions)				
ď	Credit for prior year minimum tax (attach Form 8801 or 8827)				
e		Be	41e	16,911	
42	Subtract line 41e from line 40		42	0	+
43	Other,taxes Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	•	43	0	+
44	Total tax. Add lines 42 and 43	. 48		0	+
45a	Payments: A 2016 overpayment credited to 2017				
b	2017 estimated tax payments	-			
С	Tax deposited with Form 8868				
d	Foreign organizations: Tax paid or withheld at source (see instructions) . 45d			-	
е	Backup withholding (see instructions)				
f	Credit for small employer health insurance premiums (Attach Form 8941) . 45f				
g	Other credits and payments:	•			
	✓ Form 4136				
46	Total payments. Add lines 45a through 45g	J	46	616,140	
47	Estimated tax penalty (see instructions) Check if Form 2220 is attached		47		
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed	▶	48	0	
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid . \$\mathcal{A}\$		49	616,140	
250	Enter the amount of line 49 you want Credited to 2018 estimated tax ▶ 300,000 Refunded	<b>▶</b> 3	>50	316,140	
Part	Statements Regarding Certain Activities and Other Information (see instructions)			·	
51	At any time during the 2017 calendar year, did the organization have an interest in or a signature of				No
	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization				
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the here BR, CH, CI, EI, FR, IS, IT, KE, MP, MX, UK	e ror	eign co		
52				·····	
JŁ	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a If YES, see instructions for other forms the organization may have to file.	rore	ign trusi	(/ . (35:2030)	de Zeria
53	Enter the amount of tax-exempt interest received or accrued during the tax year > \$			0	經歷
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the	e best	of my kn		ef it is
Sign	true, correct, and complete Daclaration of preparer (other than taxpayer) is based on all information of which preparer has any knowle	dge			
Here	-5/13/19 EXECUTIVE VICE PRESIDENT	<b>—</b> [	with the	IRS discuss this preparer shown	below
	Signature of officer Date Title	— <u> </u>	(see instr	uctions)? []Yes [	□No
Paid	Print/Type preparer's name Preparer's signature Date	Г. <sup>-</sup>		PTIN	
	TRAVIS I PATTON		ck ∐ ı employe	11   200000	623
Prepa	I F DDICEWATEDUOLISEC CODEDS LLD		's EIN ▶	13-400832	
Use C	Firm's address > 600 13TH STREET NW, SUITE 1000, WASHINGTON, DC 20005-3333		ne no	(202) 414-10	

Form **990-T** (2017)

Sche	dule A-Cost of Goods S	Sold. E	nter m	ethod of II	nvento	ry va	aluation >						
1	Inventory at beginning of ye	ear	1	0		6	Inventory	at	end of year	6		0	
2	Purchases	. [	2	0		7	Cost of	ge	oods sold. Subtract				
3	Cost of labor	. [	3	0					line 5. Enter here and				
4a	Additional section 263A						ın Part I, li	ne	2	7	3,15	53,983	
	(attach schedule)	· [	4a			8			s of section 263A (wit			Yes	No
þ	Other costs (attach schedul	le)	4b	3,153,983			property p	oro	duced or acquired for	resale	e) apply		
5	Total. Add lines 1 through 4		5	3,153,983			to the org	ani	ization?				✓
	dule C—Rent Income (Freinstructions)	rom Re	eal Pro	perty and	d Pers	onal	Property	Le	ased With Real Pro	perty	y)		
1. Desc	ription of property				•								
(1)							·		<del></del>			-	
(2)													
(3)													
(4)													
	2. R	Rent recei	ved or ac	crued									-
	om personal property (if the percentag personal property is more than 10% b more than 50%)		perce	b) From real an entage of rent 6 or if the rent	for perso	nal pro	perty exceeds		3(a) Deductions directly in columns 2(a) and				•
(1)			$\overline{}$										_
(2)								T				-	
(3)				<del></del>									
(4)		-	1			-	··	ヿ					
Total		0	Total					0	/b) T-4-1 d- d				
(c) Tot	al income. Add totals of column	s 2(a) an	nd 2(b), E	Enter					(b) Total deductions. Enter here and on page	1.			
here ar	nd on page 1, Part I, line 6, colum	າກ (À)	`.	<b>•</b>				0	Part I, line 6, column (B)				0
Sche	dule E-Unrelated Debt-I	Financ	ed Inc	come (see	ınstruc	tions	)						
							ome from or		<ol><li>Deductions directly con debt-financ</li></ol>			cable to	
	Description of debt-final	nced prop	perty		allocat		lebt-financed perty	7	a) Straight line depreciation (attach schedule)	(t	Other de		
[1)													
2)													
3)													
(4)										L			
	Amount of average acquisition debt on or locable to debt-financed operty (attach schedule)	debt-fin	ge adjuste allocable anced proched	e to operty		6. Co 4 div by col	ided	,	7. Gross income reportable (column 2 x column 6)		Allocable de nn 6 × total 3(a) and	l of colun	
(1)					<b></b>		%	Г			- ··· · -		
2)				-			%	Г					
3)							%						
4)					l		%	Г					
	•								nter here and on page 1, Part I, line 7, column (A).		here and I, line 7, c		
<b>Fotals</b>							<b>.</b>		o				0
rotal d	ividends-received deductions i	ncluded	ın colun	nn 8			,		▶				0

Form **990-T** (2017)

Schedule F-Interest, Ann	uities	, Royalties,	and Ren	ts From	Controlled Or	ganizations (se	e instruc	ctions)	
					Organizations		·		
Name of controlled organization		2. Employer  Ification number		lated income instructions)	4. Total of specific payments made		controlling	conr	Deductions directly nected with income in column 5
(1)								<u> </u>	
(2)				······································					•
(3)		1						1	
(4)							-		
Nonexempt Controlled Organia	ations	S							
7. Taxable Income		l. Net unrelated ind (loss) (see instructi			otal of specified yments made	10. Part of colur included in the organization's gr	controlling	conne	Deductions directly ected with income in column 10
(1)	_							<u> </u>	
(2)		- <del></del>							
(3)									
(4)	_	<del></del>						<u> </u>	
						Add columns Enter here and Part I, line 8, co	on page 1,	Enter	columns 6 and 11 here and on page 1, , line 8, column (B)
Totals	•	<del> </del>				<u> </u>	0		
Schedule G-Investment I	ncon	ne of a Secti	on 501(						
1. Description of income		2. Amount of	income	direc	Deductions ctly connected ach schedule)	4. Set-aside (attach sched		and s	otal deductions set-asides (col. 3 plus col. 4)
(1)									
(2)									
(3)				<u> </u>					
(4)									
Totals .	•	Enter here and Part I, line 9, co	olumn (A)		<b>J</b> Edit			Part I, II	re and on page 1, ine 9, column (B)
Schedule I—Exploited Exe	mpt /	Activity Inco	me, Oth	er Than	Advertising la	ncome (see inst	tructions)	<u> </u>	
Description of exploited activit	у	2. Gross unrelated business incon from trade or business	ne conni prod un	expenses irectly ected with luction of irelated ess income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cots 5 through 7		6. Exp attribut: colun	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)									
(2)									
(3)									
(4) Totals		Enter here and page 1, Part I line 10, col (A	, page	nere and on 1, Part I, 0, col (B)					Enter here and on page 1, Part II, line 26
Schedule J-Advertising Ir	ncom	e (see instruc	tions)		CALCULATION OF THE SECOND	SAN TOTAL OF STREET VICENCE CONTROL OF STREET	market a sea more and	DOSSE VENERAL SERVICE	· · · · · · · · · · · · · · · · · · ·
Part I Income From Pe				Consolid	dated Basis				
1. Name of periodical	ì	2. Gross advertising income	3.	Direct ising costs	gain or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7	5. Circulation income	6. Read cos	•	7. Evcess readership costs (column 6 minus column 5, but not more than column 4)
(1)									
(2)									
(3)									
4)		L							40.0
Totals (carry to Part II, line (5))	<b>•</b>		0	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.)

2 through 7 on a	line-by	-line basis.)					
1. Name of penodical		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, bu not more than column 4)
(1)							
(2)							
(3)							
(4)							
Totals from Part I .	<b>•</b>	0	0				C
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				on page 1,
Totals, Part II (lines 1-5)	. ▶	0	0				C
Schedule K-Compensatio	n of O	fficers, Direc	tors, and Trus				
4 11					3. Percent of	4. Compensat	on attributable to

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			0

Form **990-T** (2017)

# **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

OMB No 1545-0172

Internal Revenue Service (99)	► Go to	www.irs.gov/Form45	62 for instruct	tions and the late	st information.		Sequence No 179	
Name(s) shown on return	-	Busine	ess or activity to	which this form relate	es	Identi	fying number	
UNIVERSITY OF NOTRE	DAME DU LAC	5259	90, 541800			35-0868188		
Part I Election To	Expense Ce	rtain Property Un	der Section	179				
Note: If you	have any list	ed property, comp	lete Part V b	efore you con	nplete Part I.			
1 Maximum amount	(see instruction	s)				1	510,000	
2 Total cost of section	on 179 property	placed in service (se	ee instruction	s)		2		
3 Threshold cost of	section 179 pro	perty before reduction	on in limitation	n (see instructioi	ns)	3	510,000	
4 Reduction in limita	tion. Subtract li	ne 3 from line 2. If ze	ero or less, en	nter -0		4	(	
5 Dollar limitation for	or tax year. Su	btract line 4 from li	ne 1. If zero	or less, enter	-0 If married filing			
separately, see ins	tructions					5	510,000	
6 (a) D	escription of proper	rty	(b) Cost (bus	iness use only)	(c) Elected cost			
7 Listed property. Er	ter the amount	from line 29		7		0		
8 Total elected cost	of section 179 p	property. Add amoun	its in column	(c), lines 6 and 7		8	C	
9 Tentative deduction	n. Enter the <mark>sm</mark>	aller of line 5 or line	8			9	C	
10 Carryover of disallo	wed deduction	from line 13 of your	2016 Form 4	562		10		
11 Business income lim	itation. Enter the	smaller of business in	come (not less	than zero) or line	5 (see instructions)	11	C	
12 Section 179 expens	se deduction. A	dd lines 9 and 10, b	ut don't enter	more than line	11	12		
13 Carryover of disallo	wed deduction	to 2018. Add lines 9	and 10, less	line 12 ▶ [	13	0		
Note: Don't use Part II o							AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	
Part II Special Dep					e listed property.) (S	ee ins	tructions.)	
14 Special depreciation					<del></del>			
during the tax year	(see instruction	ns)				14		
15 Property subject to						15		
16 Other depreciation						16		
Part III MACRS De			property.) (S	See instruction	s.)	1 1	<del></del>	
	· · · · · · · · · · · · · · · · · · ·		Section A					
17 MACRS deductions	s for assets place	ced in service in tax v		na before 2017		17	<del></del>	
18 If you are electing								
asset accounts, ch		<u>.</u>	_		_			
Section E					General Depreciation	Syste	m	
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) De	preciation deduction	
19a 3-year property								
<b>b</b> 5-year property								
c 7-year property	en a	· · · · ·						
d 10-year property					· ·			
e 15-year property								
f 20-year property			_					
g 25-year property			25 yrs		S/L			
h Residential rental		· · · · · · · · · · · · · · · · · · ·	27 5 yrs	MM	S/L			
property		· · ·	27 5 yrs.	MM	S/L			
i Nonresidential real			39 yrs.	MM	S/L			
property			00 7.0.	MM	S/L		<u></u>	
Section C-	-Assets Place	d in Service During	2017 Tax Ye		ternative Depreciatio	n Svst	em	
20a Class life		<u> </u>			S/L	<b></b>		
b 12-year			12 yrs.		S/L			
c 40-year	CONTRACTOR TO SERVICE SECTION		40 yrs	MM	S/L			
Part IV Summary (	See instruction	ns.)	1 40 yrs 1	IAIIAI	J/ L			
21 Listed property. Ent					· ·	21	0	
22 Total. Add amount			lines 19 and	20 in column (n	), and line 21. Enter	<del>+</del>	<u> </u>	
		of your return. Partne				22	n	
23 For assets shown a								
portion of the basis					23			

Page	2
, age	_

Form	4562	(2017)	

Form 4562		ige 2
Part V	Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property	perty
	used for entertainment, recreation, or amusement.)	·
	Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only	24a,
	OAb columns (a) there is be (a) of Continue A all of Continue D. and Continue O. franctical la	

		or any ve dumns (a)											expen	ise, coi	mplete c	nly 24a
	Section A-									ctions	for limit	s for pa	asseng	er auto	mobiles	)
24	a Do you have ev	idence to su	ipport the t	ousiness/in	vestment	use clar	med? [	Yes	□ No □	24b	f "Yes,"	is the e	vidence	written	? 🗌 Yes	S □ No
Тур	(a) be of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment u percentage	<b>I</b>	(d) other basi		(e) s for depr ness/inve use only	estment	(f) Recover period	,	(g) fethod/ invention		(h) epreciation deduction		(i) Elected se co:	
25	Special depre															
26											1 20	.1				
	· · · · · ·			%								T				
			9	6					-	$\top$		İ				
			9	6	•											
27	Property used	d 50% or I	ess in a c	ualified b	usiness	use:										
			9	6						S/						
				6		.				S/		ļ				
			9	<u> </u>		_			_	S/	L .	ļ			1777	
28											28			0		
29	Add amounts	ın columr	ı (ı), lıne 2											29		0
^									e of Vel		_					
to ve	iplete this sectio our employees, f	in for venic	the guest	y a sole p	roprietor	, partne	er, or other	her "mo	ore than t	% OW	ner," or	related	person.	. If you	provided	vehicles
io y	our employees, in	1131 0113WC	ine quesi	10113 111 36	ŗ						Ť		T T		T -	
30	Total business/ the year (don't				Vehi	a) cle 1		(b) icle 2	Vehi	cle 3		(d) :cle 4	Ve	(e) hicle 5		(f) licle 6
	Total commutin	g miles dri	ven during	the year			-									
	Total other miles driven															
	Total miles di lines 30 throug	gh 32 .			(	)		0	(	)		0		0		0
34	Was the veh- use during off-				Yes	No	Yes	No	Yes	No_	Yes	No	Yes	No	Yes	No
35	Was the vehic than 5% owner															
36	Is another vehic	le available	for perso	nal use?										1		
		Section	C-Ques	tions for	Employ	ers W	ho Pro	vide V	ehicles	for Us	e by Th	eir Em	ployee	es		
Ansv more	wer these quest e than 5% owne	tions to de ers or rela	etermine i ted perso	f you mee ns (see in	t an exc structio	eption ns).	to com	pleting	Section	B for	vehicle	s used	by em	ployees	s who <b>ar</b>	en't
37	Do you mainta your employee	ain a writt	en policy	statemer	t that p	rohibits	s all pe	rsonal	use of v	ehicles	s, includ	ling co	mmutir	ng, by	Yes	No
38	_	ain a writt	en policy	statemer	nt that p	rohibit	s perso	nal us	e of veh	icles, o	except	commi	uting, b wners	y your		
39															<del> </del>	<b></b> -
40		le more th	nan five ve	ehicles to	your er	nploye	es, obt	ain info	ormation	from	your er	nploye	es abo	ut the		
41	Do you meet t	he require	ments co	ncerning	qualified	d auton	nobile d	demon	stration i	use? (S	See inst	ruction	s) .			
Dat	Note: If your a		37, 38, 3	9, 40, or 4	I IS "YE	s," doi	n't com	piete S	ection E	for th	e cover	ea ven	icles.			
rai	Amortiz	Lation							<del>-                                    </del>		<del></del>	(e)				<del></del>
	(a) Description (	of costs	0	(b) ate amortiza begins	ation	Amor	(c) tizable an	nount	Co	(d) de secti	on	Amortizi period percent	or	Amortiz	(f) ation for th	is year
42	Amortization o	f costs the	at begins	during yo	ur 2017	tax ye	ar (see	instruc	tions)							
	Amortization o		-	-		-							43			24,647
44	Total. Add an	nounts in d	column (f)	. See the	instruct	ons fo	r where	to ren	ort	_			44		6.0	24.647

# **Credit for Federal Tax Paid on Fuels**

OMB No 1545-0162

Attachment Sequence No 23

Department of the Treasury Internal Revenue Service (99)

► Go to www.irs.gov/Form4136 for instructions and the latest information.

Name (as shown on your income tax return) UNIVERSITY OF NOTRE DAME DU LAC

35-0868188

, Caution: Claimant has the name and address of the person who sold the fuel to the claimant and the dates of purchase. For claims on lines 1c and 2b (type of use 13 or 14), 3d, 4c, and 5, claimant has not waived the right to make the claim. For claims on lines 1c and 2b (type of use 13 or 14), claimant certifies that a certificate has not been provided to the credit card issuer.

1	Nontaxable Use of Gasoline Note: CRN I	s credit reference num	ber.			
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Off-highway business use	ara et er	\$ 183	355 )		
b	Use on a farm for farming purposes		.183	} }		362
C	Other nontaxable use (see Caution above line 1)		183	· J	\$ 65	
d	Exported	<b>泛照经验证证证</b>	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)	<b>建筑</b> 地震计	\$ 15		\$	354
b	Other nontaxable use (see Caution above line 1)		193		l	324
С	Exported		194			412
d	LUST tax on aviation fuels used in foreign trade		001			433

## Nontaxable Use of Undyed Diesel Fuel

	Exception. If any of the diesel fuel included in this claim	(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
3	Nontaxable use		\$ 243	}		
	Use on a farm for farming purposes		243	<del></del> }	\$	. 360
:	Use in trains		243			353
ı	Use in certain intercity and local buses (see Caution above line 1)		17			350
	Exported		.244			413

# Nontaxable Use of Undyed Kerosene (Other Than 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		\$ 243	}		
ъ-	Use on a farm for farming purposes		243	<u>J</u>	\$	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

### Kerosene Used in Aviation (see Caution above line 1)

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	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	<b>新语义独占信</b>	001			433

# 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 cr	redit	(e) CRN
а	Use by a state or local government	\$ 243	•	\$		360
b	Use in certain intercity and local buses	17				350

# 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
а	Use by a state or local government	\$ 243	)		
b	Sales from a blocked pump	243		\$	346
С	Use in certain intercity and local buses	17		<u>                                     </u>	347

# 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		\$	355
b	Use in commercial aviation (other than foreign trade) taxed at \$ 244		200			417
С	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 (2017)

#### Reserved for future use

### Registration No. ▶

		(b) Rate	(c) Gallons of alcohol	(d) Amount of credit	(e) CRN
а	Reserved for future use		C Sales January	S PRINTED AND PAGE	10年10日
b	Reserved for future use		STAN SOUTH	<b>於確認機器</b>	

#### **Biodiesel or Renewable Diesel Mixture Credit**

#### Registration No. ▶

Biodiesel's 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 process, 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, the Statement of Biodiesel Reseller, both of which have been edited as discussed in the Instructions for Form 4136 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

### 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

Registration No. ▶ **Alternative Fuel Credit** 12

		(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credi	(e) CRN
а	Liquefied petroleum gas (LPG) (see instructions)	\$ 50	4,912	\$ 2,456	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

13	Registered Credit Card Issuers	Reg			
		(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

## 14 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			

# 15 Diesel-Water Fuel Emulsion Blending

# Registration No. ▶

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

# 16 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

11 U		<b>Total income tax credit claimed.</b> Add lines 1 through 16, column (d). Enter here and on Form 1040, line 72; Form 1120, Schedule J, line 19b; Form 1120S, line 23c, Form 1041, line 24g, or the proper line of other returns. ▶	17	\$	2,521	
------	--	--	----	----	-------	--

Form **4136** (2017)

# Form **4626**

Department of the Treasury Internal Revenue Service

# **Alternative Minimum Tax—Corporations**

► Attach to the corporation's tax return.

▶ Go to www.irs.gov/Form4626 for instructions and the latest information.

OMB No 1545-0123

2017

Employer identification number

UNIVERSITY OF NOTRE DAME DU LAC 35-0868188 Note: See the instructions to find out if the corporation is a small corporation exempt from the alternative minimum tax (AMT) under section 55(e). 1 1 (5,504,932)2 Adjustments and preferences: 93,303 Amortization of certified pollution control facilities . . . . . . . . 2b С Amortization of mining exploration and development costs . . . . . . 2c Amortization of circulation expenditures (personal holding companies only) . . . . 2d е (98,896)2e f Merchant marine capital construction funds . . . . . . . . . . . . . . . . q Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only) . . . h Tax shelter farm activities (personal service corporations only) Passive activities (closely held corporations and personal service corporations only) . ı 21 m Tax-exempt interest income from specified private activity bonds . 2m 7,457,528 n 2n 20 14,818 Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 2o. 3 1,961,821 Adjusted current earnings (ACE) adjustment: a ACE from line 10 of the ACE worksheet in the instructions . . . . . . . . 1,961,821 Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a 4b 0 Multiply line 4b by 75% (0.75) Enter the result as a positive amount . . . . 0 4c d Enter the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments. See instructions. Note: You must enter an amount on line 4d 4d ACE adjustment. • If line 4b is zero or more, enter the amount from line 4c 0 4e • If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount 5 Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT . . . . . 5 1,961,821 6 1,765,639 7 Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a residual 196,182 8 Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c): Subtract \$150,000 from line 7 If completing this line for a member of a 11.546 8b Exemption. Subtract line 8b from \$40,000. If completing this line for a member of a controlled group, 28.454 8c Q 9 167,728 10 10 16,911 11 Alternative minimum tax foreign tax credit (AMTFTC). See instructions . . . . 11 12 12 16,911 13 Regular tax liability before applying all credits except the foreign tax credit . . . 13 0 Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0-. Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return 16,911

# Form 990T Part I, Line 5 Income (loss) from partnerships and S corporations

Description	Amount
Income (loss) from various partnerships, net	(16,586,311)
Total to Form 9	90-T, Part I, Line 5 (16,586,311)

# Form 990T Part I, Line 12 Other Income

Description	Amount
Athletic Center Special Events	224,401
Rental Activities	6,351
Corporate Sponsorships	1,230,672
Alumni Programs	298,108
Personal Appearances	17,500
Innovation Park at Notre Dame	(502,906)
512(a)(7)-Increase in Unrelated Business Taxable Income by Disallowed Fringe	384,875
Total to Form 990-T, Part I, Line 12	1,659,001

# Form 990T Part II, Line 19 Taxes and Licenses

Descrip	tion	Amount
Taxes		144,143
	Total to Form 990-T, Part II, Line 19	144,143

# Form 990T Part II, Line 28 Other Deductions

Des	scription	Amount
Professional Fees		102,462
Amortization (Form 4562)		6,024,647
	Total to Form 990-T, Part II, Line 28	6,127,109

# Schedule A, Line 4b Other Costs

Description	Amount
Food Service Expenses	593,912
Venue ND Expenses	2,001,363
Merchandise Expenses	37,981
Visitor Parking Expenses	7,692
U.S. Senior Open Expenses	301,350
Corporate Sponsored Research Expenses	211,685
Total to Schedule A, Line 4b	3,153,983

#### Form 990T Part II, Line 20 Charitable Contributions Carryforward Schedule Charitable Contribution Fiscal Year Amount Amount Used in Amount Used in Converted **Expiring During** Amount Generated Generated Remaining Prior Years \* **Current Year** Contributions Fiscal Year 6/30/2013 3,722,415 3,722,415 6/30/2014 5,655,329 5.655.329 6/30/2015 5,124,194 1,336,027 3,788,167 6/30/2016 5,946,085 -\_ -5,946,085 6/30/2017 4,633,774 4,633,774 6/30/2018 7,821,579 7,821,579 32,903,376 Totals 1,336,027 3,722,415 27,844,934

#### Form 990T Part II, Line 31 Net Operating Loss Deduction Carryforward Schedule Fiscal Year Amount Amount Used in Amount Used in Converted Section 965 Amount Prior Years \* Generated Generated **Current Year** Contributions Remaining Adjustment **NOL Expires** 6/30/2009 7,897,264 7,897,264 6/30/2010 9,775,797 11,938,414 2,162,617 --6/30/2011 18,512,778 18,512,778 6/30/2012 12,283,143 12,283,143 6/30/2013 3,409,496 3,409,496 6/30/2014 \_ --6/30/2015 1,336,027 1,336,027 6/30/2016 10,509,635 10,509,635 6/30/2017 12,280,386 12,280,386 6/30/2018 5,504,932 5,364,753 140,179 -

1,336,027

140,179

65,858,835

17,673,061

# Election To Forego Net Operating Loss Carryback IRC Section 172(b)(3)

82,336,048

Taxpayer Name: University of Notre Dame du Lac

Taxpayer ID Number: 35-0868188

Year-end: June 30, 2018

Totals

### Section 172(b)(3) Election

Pursuant to IRC Sec. 172(b)(3), taxpayer hereby elects to relinquish the entire carryback period with respect to the net operating loss(es) incurred in this tax year ended 6/30/2018.

<sup>\*</sup> Amount includes NOL used in prior years, along with IRS Audit Adjustments.

# Form 990T, Part III, Line 35c

# Tax Computation Worksheet for Members of a Controlled Group

1	Enter unrelated business taxable income (line 34, page 1, Form 990-T)	-5,504,932
2	Enter line 1 or corporation's share of the \$50,000 taxable income bracket, whichever is less	
3	Subtract line 2 from line 1	
4	Enter line 3 or corporation's share of the \$25,000 taxable income bracket, whichever is less	
5	Subtract line 4 from line 3	
6	Enter line 5 or corporation's share of the \$9,925,000 taxable income bracket, whichever is less	
7	Subtract line 6 from line 5	
8	Enter 15% of line 2	
9	Enter 25% of line 4	
10	Enter 34% of line 6	
11	Enter 35% of line 7	
12	If the taxable income of the controlled group exceeds \$100,000, enter this member's share of the smaller of: (a) 5% of the excess over \$100,000, or (b) \$11,750 (see instructions for additional 5% and additional 3% tax)	
13	If the taxable income of the controlled group exceeds \$15 million, enter this member's share of the smaller of (a) 3% of the excess over \$15 million, or (b) \$100,000 (see instructions for additional 5% and additional 3% tax)	
14	Add lines 8 through 13 Enter here and on line 35c, page 2, Form 990-T	0

# Description Other AMT Items Charitable Contribution Adjustment Other AMJustment 
14,818

Total to Form 4626, Line 20

Form 4626, Line 6

FORM 4626, LI	ne 20		AMI Charitable Contributions Carrytorward Schedule					
Fiscal Year	Amount	Amount Used in	Amount Used in		Charitable Contribution Expiring During	Amount		
Generated	Generated	Prior Years *	Current Year	Amount Utilized	Fiscal Year	Remaining		
6/30/2013	3,722,415	•	-	-	3,722,415	-		
6/30/2014	5,655,329	•	21,798	-	-	5,633,531		
6/30/2015	5,124,194	145,210	•	-	-	4,978,984		
6/30/2016	5,946,085	-	-	-	-	5,946,085		
6/30/2017	4,633,774	-	-	•	-	4,633,774		
6/30/2018	7,819,048		-	-	-	7,819,048		
Totals	32.900.845	145,210	21,798	_	3.722.415	29 011 422		

AMT NOL Carryforward Schedule

				· 	<u> </u>
Fiscal Year	Amount	Amount Used in	Amount Used in		Amount
Generated	Generated	Prior Years *	Current Year	<b>NOL Expires</b>	Remaining
6/30/2009	7,648,853	7,648,853	-	-	-
6/30/2010	11,794,479	9,970,085	1,765,639	-	58,755
6/30/2011	19,097,021	<u>-</u>	-	-	19,097,021
6/30/2012	12,295,548	-	•	-	12,295,548
6/30/2013	2,720,629	-	•	•	2,720,629
6/30/2014		-	-	•	-
6/30/2015	-	-	-	-	-
6/30/2016	10,716,569	-	-	-	10,716,569
6/30/2017	9,098,833	-	•	-	9,098,833
6/30/2018	٦.		-		
Totals	73,371,932	17,618,938	1,765,639		53,987,355

<sup>\*</sup> Amount includes NOL used in prior years, along with IRS Audit Adjustments.

# SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND

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

OMB No 1545-0123

Mama

UNIVERSITY OF NOTRE DAME DU LAC

Employer identification number 35-0868188

UN	VERSITY OF NOTRE DAME DU LAC					35-0868188
Pa	art I Short-Term Capital Gains and Losses -	-Assets Held O	ne Year or Les	s	-	
	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 or loss from For 8949, Part I, line column (g)	m(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1	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					0
1	Totals for all transactions reported on Form(s) 8949 with Box A checked					0
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					0
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked	120,377	0		0	120,377
4	Short-term capital gain from installment sales from Form	m 6252, line 26 or 3	37	•	4	
5	Short-term capital gain or (loss) from like-kind exchange	es from Form 8824			5	
6	Unused capital loss carryover (attach computation) .				6_	( 0)
7	Net short-term capital gain or (loss). Combine lines 1a ti	brough 6 in column	h		7	120,377
	t II Long-Term Capital Gains and Losses—			ear	1 '	120,577
	See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments or loss from Form	n(s)	(h) Gain or (loss) Subtract column (e) from
	This form may be easier to complete if you round off cents to whole dollars	(sales price)	(or other basis)	8949, Part II, line column (g)	2,	column (d) and combine the result with column (g)
86	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.					. 0
8t	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					0
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					0
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked	6,922,203	0		0	6,922,203
11	Enter gain from Form 4797, line 7 or 9				11	9,823,991
12	Long-term capital gain from installment sales from Form	n 6252, line 26 or 37	<b>7</b>		12	
<del>-</del> 13-	-Long-term-capital-gain-or-(loss)-from-like-kind-exchange	s-from-Form-8824_	—,—,—,—,—, <u>—</u> ,		13	
14	Capital gain distributions (see instructions)				14	
15 Par	Net long-term capital gain or (loss). Combine lines 8a thi till Summary of Parts I and II	<u> </u>	15	16,746,194		
16	Enter excess of net short-term capital gain (line 7) over r	net long-term capita	al loss (line 15) .		16	120,377
17	Net capital gain Enter excess of net long-term capital ga	aın (line 15) over ne	t short-term capita	l loss (line 7)	17	16,746,194
18	Add lines 16 and 17 Enter here and on Form 1120, page	-	oper line on other i	returns	18	16,866,571
	Note: If losses exceed gains, see Capital losses in the	ie instructions.				

# Form **8949**

# **Sales and Other Dispositions of Capital Assets**

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

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No 1545-0074

20**17**Attachment

Department of the Treasury Internal Revenue Service Name(s) shown on return

2, 3, 8b, 9, and 10 of Schedule D. Sequence No 12A

Social security number or taxpayer identification number

35-0868188

UNIVERSITY OF NOTRE DAME DU LAC

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 short term. 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

✓ (C) Short-term transaction	ns not reported	d to you on F	orm 1099-B				
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f) parate instructions.	(h) Gain or (loss). Subtract column (e)
(Example 100 sh XYZ Co)	(Mo , day, yr )	disposed of (Mo , day, yr )	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
FROM PARTNERSHIP K-1			120,202				120,20
FORM 6781, PART I			175				17:
						<u> </u>	
		-					-
						-	
2 Totals. Add the amounts in columning negative amounts) Enter each total Schedule D, line 1b (if Box A above is checked) or line 3 (if Box A above is checked) or line 3 (if Box A above is checked).	al here and inclu is checked), line	de on your 2 (if Box B	120 377	0			120.277

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

Cat No 37768Z

Fα	rm	894	19	120	11	7١

Attachment Sequence No 12A

12A Page 2

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

Social security number or taxpayer identification number

## UNIVERSITY OF NOTRE DAME DU LAC

35-0868188

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 long term. 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 which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐ (D) Long-term transact☐ (E) Long-term transact☐ (F) Long-term transact☐	ions reported or	n Form(s) 109	9-B showing bas	•	d to the IRS (see <b>Note</b> above orted to the IRS	)
1				(e)	Adjustment, if any, to gain or loss If you enter an amount in column (g),	-

1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of	Proceeds S	(e) Cost or other basis See the Note below	If you enter ar enter a c	of any, to gain or loss amount in column (g), code in column (f) parate instructions.	(h) Gain or (loss). Subtract column (e)	
(Example 100 sh XYZ Ćo)	(Mo , day, yr ) (sales price) and see Column (sales price) and see Column (in the separate instructions		(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)			
FROM PARTNERSHIP K-1			6,921,941				6,921,941	
FORM 6781, PART I			262				262	
•								
		· <del> </del>						
2 Totals. Add the amounts in columns negative amounts) Enter each total Schedule D, line 8b (if Box D above	here and include is checked), line	on your 9 (if Box E						
above is checked), or line 10 (if Box	► above is chec	ked) ►	6,922,203	0)		0	6,922,203	

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

**General Business Credit** 

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

OMB No 1545-0895

Identifying number

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

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

Attachment Sequence No 22

UNIV	ERSITY OF NOTRE DAME DU LAC	35-0868188
Par	Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (1	MT)
	(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 2 152,001	
3	Enter the applicable passive activity credits allowed for 2017. See instructions	3 152,001
4	Carryforward of general business credit to 2017. Enter the amount from line 2 of Part III with	
	box C checked. See instructions for statement to attach	4 286,178
5	Carryback of general business credit from 2018. Enter the amount from line 2 of Part III with	
	box D checked. See instructions	5
6	Add lines 1, 3, 4, and 5	6 - 438,179
Part	II Allowable Credit	
7	Regular tax before credits:	
	• Individuals. Enter the sum of the amounts from Form 1040, lines 44 and 46, or, the	
	sum of the amounts from Form 1040NR, 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 0
	• 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 35	
	• Corporations. Enter the amount from Form 4626, line 14	8 16,911
	• Estates and trusts. Enter the amount from Schedule i (Form 1041), line 56	
	•	
9	Add lines 7 and 8	9 16,911
•		
10a	Foreign tax credit	-
þ	Certain allowable credits (see instructions)	
С	Add lines 10a and 10b	10c 0
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11 16,911
12	Net regular tax. Subtract line 10c from line 7 If zero or less, enter -0-	
	1. 工作的 1	
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 33	
	Corporations. Enter the amount from Form 4626, line 12 }	
	Estates and trusts. Enter the amount from Schedule I	
	(Form 1041), line 54	TAX TO
15	Enter the greater of line 13 or line 14	15 0
16	Subtract line 15 from line 11. If zero or less, enter -0	16:911
17	Enter the smaller of line 6 or line 16	17 16,911
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition,	
	or reorganization.	

Par	Allowable Credit (Continued)			
Note	: If you are not required to report any amounts on lines 22 or 24 below, skip lines 18 through 25 and	enter	-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	16,911	<u> </u>
21	Subtract line 17 from line 20. If zero or less, enter -0	21	0	<u> </u>
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	435	
23	Passive activity credit from line 3 of all Parts III with box B checked 23 520			
24	Enter the applicable passive activity credit allowed for 2017. See instructions	24	520	
25	Add lines 22 and 24	25	955	
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0	
27	Subtract line 13 from line 11. If zero or less, enter -0	27	16,911	
28	Add lines 17 and 26	28	16,911	
29	Subtract line 28 from line 27 If zero or less, enter -0	29	0	
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 15,745			
33	Enter the applicable passive activity credits allowed for 2017. See instructions	33	15,745	
34	Carryforward of business credit to 2017. 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	32,064	
35	Carryback of business credit from 2018. 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	47,809	
37	Enter the smaller of line 29 or line 36	37	0	
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. Form 1040, line 54, or Form 1040NR, line 51			
	Corporations. Form 1120, Schedule J, Part I, line 5c	38	16,911	

OFM	2000	(2017)

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	00 (2017)		<del></del>			age
	shown on return		Ide	entifying r	ıumber	
UNIVER	RSITY OF NOTRE DAME DU LAC			3	5-0868188	
Part	General Business Credits or Eligible Small Business Credits (se	e ins	tructions)			
Compl	ete 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 $\square$	General Business Credit Carryforwards G  Eligible Small	Busir	ness Credit Cai	rrvforwa	rds	
	General Business Credit Carrybacks H Reserved			,		
	ou are filing more than one Part III with box A or B checked, complete and attach fir	ct on	additional Bort	III oombi	nina amounto fe	
all F	Parts III with box A or B checked Check here if this is the consolidated Part III.	St all a	additional Part	III COMIDI	ining amounts if	Ö
	(a) Description of credit		(b)	<del></del>		_=
Note: O	on any line where the credit is from more than one source, a separate Part III is needed for rough entity	each	If claiming the confrom a pass-through the confitty, enter the	ough	(c) nter the appropria amount	ate
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a				
b	Reserved	1b				
С	Increasing research activities (Form 6765)	1c			150,117	··
d	Low-income housing (Form 8586, Part I only)	1d			130,117	
e	Disabled access (Form 8826) (see instructions for limitation)	1e	<del></del>			
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		_		
	Indian employment (Form 8845)		· · · · · ·			
g h	Oraban drug /Form 9920)	1g	<del> </del>			
:	Orphan drug (Form 8820)	1h				
:	New markets (Form 8874)	1i				
j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1 <u>j</u>				
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		1		
m	Low sulfur diesel fuel production (Form 8896)	1m				
n	Distilled spirits (Form 8906)	1n				
0	Nonconventional source fuel (carryforward only)	10				
р	Energy efficient home (Form 8908)	1p				
q	Energy efficient appliance (carryforward only)	1q			-	
r	Alternative motor vehicle (Form 8910)	1r				
s	Alternative fuel vehicle refueling property (Form 8911)	1s		_	·	
t	Enhanced oil recovery credit (Form 8830)	-	•	<del></del> -	··	
		1t				
u	Mine rescue team training (Form 8923)	1u				
٧	Agricultural chemicals security (carryforward only)	1v				
W	Employer differential wage payments (Form 8932)	1w				
х	Carbon dioxide sequestration (Form 8933)	1x				
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y				
Z	Qualified plug-in electric vehicle (carryforward only)	1z				
aa	Employee retention (Form 5884-A)	1aa				
bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb				
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1zz			1,884	
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2			152,001	
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3			520	—
4a	Investment (Form 3468, Part III) (attach Form 3468)	-4a-			520	
b	Work opportunity (Form 5884)	4b		·		
					424	—
C	Biofuel producer (Form 6478)	4c				
ď	Low-income housing (Form 8586, Part II)	4d				
e	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			15,321	
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	Reserved	4j			i di	
Z	Other	4z				
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5			15,745	_
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6			168,266	
					Form 3800 (2	017)

Form 3800 (2017)

Name(s) shown on return Identifying number UNIVERSITY OF NOTRE DAME DU LAC 35-0868188 Part III General Business Credits or Eligible Small Business Credits (see instructions) Complete a separate Part III for each box checked below (see instructions). A General Business Credit From a Non-Passive Activity E @ Reserved **B** General Business Credit From a Passive Activity Reserved **G** Eligible Small Business Credit Carryforwards **C** ✓ General Business Credit Carryforwards H 🗷 Reserved 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 III with box A or B checked Check here if this is the consolidated Part III . . . . . . . (a) Description of credit (c) If claiming the credit Enter the appropriate 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 entity, enter the EIN amount pass-through entity Investment (Form 3468, Part II only) (attach Form 3468) . . . 1a 1b b 1c C Increasing research activities (Form 6765) . . d Low-income housing (Form 8586, Part I only) . . . . . . 1d Disabled access (Form 8826) (see instructions for limitation) . . . . . 1e e f Renewable electricity, refined coal, and Indian coal production (Form 8835) 1f g 1a Orphan drug (Form 8820) . . . . . . . . . . . . . h 1h 1i Small employer pension plan startup costs (Form 8881) (see instructions for limitation) 1j Employer-provided child care facilities and services (Form 8882) (see k 1k Biodiesel and renewable diesel fuels (attach Form 8864) . . . . 11 m Low sulfur diesel fuel production (Form 8896) . . . . . . 1m Distilled spirits (Form 8906) . . . . . . . . . 1n n Nonconventional source fuel (carryforward only) . . . . . 10 O Energy efficient home (Form 8908) . . . . . . . . . . р 1p Energy efficient appliance (carryforward only) . . q 1q Alternative motor vehicle (Form 8910) . . . . . . . . . . . . 1r Alternative fuel vehicle refueling property (Form 8911) . . . s 15 t Enhanced oil recovery credit (Form 8830) . . . . . . . . 1t Mine rescue team training (Form 8923) . . . . . . . u 1u Agricultural chemicals security (carryforward only) . . . . . . . 1v w Employer differential wage payments (Form 8932) . . . . . . . 1w 1x X Carbon dioxide sequestration (Form 8933) . . . . . . Qualified plug-in electric drive motor vehicle (Form 8936) . . 1y Qualified plug-in electric vehicle (carryforward only) . . . . . z 1z 1,445 1aa aa bb General credits from an electing large partnership (Schedule K-1 (Form 1065-B)) 1bb Other. Oil and gas production from marginal wells (Form 8904) and certain ZZ 1zz 2 2 Add lines 1a through 1zz and enter here and on the applicable line of Part I 286.178 3 Enter the amount from Form 8844 here and on the applicable line of Part II 435 4a Investment (Form 3468, Part III) (attach-Form-3468)-----4a b 4b 6,383 С Biofuel producer (Form 6478) 4c Low-income housing (Form 8586, Part II) . . . . . . . . . 4d d е Renewable electricity, refined coal, and Indian coal production (Form 8835) 4e Employer social security and Medicare taxes paid on certain employee tips (Form 8846) 4f 25,681 Qualified railroad track maintenance (Form 8900) . . . . . . . . . . g 4g Small employer health insurance premiums (Form 8941) . . . . . h 4h Increasing research activities (Form 6765) . . . . . . 4i 4j Other 4z z 5 Add lines 4a through 4z and enter here and on the applicable line of Part II 5 32,064 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II 318,677