Example Organization Business Income Tax Return (and proxy ax under section 6033(e)) Income I				١.	Sugarant Australian Bustan		Income Tou	D - A		Ĭ,	OMB No. 1545-06	587
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Graph Sobject Sobjec		Z sour C) (A3) Number, street and room or suite no. If a P.O. box, see instructions.							3	5-1052049		
Georgia Group several process Factor Group several process Group sev					1281 WIN HENTSCHEL BLVD							
Septe WEST LEANETTE, IN 47906-4182 523000				1300	City or town, state or province, country, and ZIP or	foreign	postal code	-	(500	instr	ictions.)	
Henter the number of the organization type Memory Sol'(c) corporation Sol'(c) trust 401(a) trust Under trust Under trust The trust Under trust Under trust Describe the organization is unrelated trades or businesses.	_	☐ 52	9(a)		WEST LAFAYETTE, IN 47906-4182						523000	
H Enter the number of the organization's unrelated trades or businesses. ▶ 1 Describe the only (or first) unrelated trade or business here ▶ INVESTMENTS If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. 1 During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ □ Yes ☑ No IF "Yes," enter the name and identifying number of the parent corporation. ▶ 1 The books are in care of ▶ SCOTT SEIDLE Telephone number ▶ (765) 588-1061 2 Total Unrelated Trade or Business Income 1 a Gross receipts or sales 0	•	C Book at end	yalue of all assets of year						1 4044			
trade or business here ► INVESTMENTS If only one, complete Parts I - IV. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ ▼ Sc IV No II *Yeas, "enter the name and Identifying number of the parent corporation.▶ I The books are in care of ▶ SCOTT SEIDLE Part Unrelated Trade or Business Income Valinceme Val												
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## "Yes," enter the name and identifying number of the parent corporation. ▶ The books are in care of SCOTT SEIDLE Telephone number (765) 588-1061 Telephone numbe	: 7					ID OF 8	parent-subsidiary co	ntrolled a	roup?		▶ ☐ Yes 🖟	No
The books are in care of SCOTT SEIDLE)		•		· · · · · · · · · · · · · · · · · · ·				•			
1a Gross receipts or sales		J Th	e books are in	care of	► SCOTT SEIDLE		Telephor	ne numbe	r 🕨		(765) 588-106	1
b Less returns and allowances		Part	Unrelate	d Trad	le or Business Income	·	(A) Income	(B) E	penses		(C) Net	
2 Cost of goods sold (Schedule A, line 7). 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		1a	•				_	٠٠٠ ,			Į	
3 Gross profit. Subtract line 2 from line 1c												1
4a 153,458			_	•	, , , , , , , , , , , , , , , , , , ,				- +			+
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 7 1 Unrelated debt-financed income (Schedule E) 7 0 0 0 0 0 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12 Part III Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K) 15 Salaries and wages 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 19 Taxes and licenses 19 33.552 20 Charitable contributions (See instructions for limitation rules) 21 Depreciation (attach Form 4562) 22 Charitable contributions (See instructions for limitation rules) 23 Depletion 24 Contributions to deferred compensation plans 25 Employee benefit programs 26 Excess exempt expenses (Schedule J) 27 Contributions to deferred compensation plans 28 Employee Depreciation claimed on Schedule A and elsewhere on return 29 Potal deductions. Add lines 14 through 28 20 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 (3.359,838) 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 (3.359,838) 31 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 (3.359,838)		-	•			<u>-</u>	·	<u> </u>				
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Other income (See instructions; attach schedule) 13		_	•	-	· · · · · · · · · · · · · · · · · · ·				 +			+
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32 Unrelated business taxable income. Subtract line 31 from line 30	6										(3,359,638)	1
		/					January 1, 2010 (See	. maaacaca			(3,359.838)	, '
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Form 99	o _z f (2018)					1	Page 2
Part !		otal Unrelated Business Taxable Income					
		f unrelated business taxable income computed from all unrelated trade	s or businesses (se	e I	Γ		
ι		tions)		33_	(3.35	9,838)]
34		ts paid for disallowed fringes		34			
35	Deduct	ion for net operating loss arising in tax years beginning before Ja	nuary 1, 2018 (se				_
	instruct	tions)		35		0	1
36		f unrelated business taxable income before specific deduction. Subtract				Ť	├
-		33 and 34		36	/3 35	9,838)	
37		c deduction (Generally \$1,000, but see line 37 instructions for exceptions		37	10,00	0,000)	
		ted business taxable income. Subtract line 37 from line 36. If line 37 is					
				9 38	10.05	A 0201	
		ne smaller of zero or line 36	······	7/1 38	(3,35	9,838)	L
		ax Computation		<u> </u>			
		zations Taxable as Corporations. Multiply line 38 by 21% (0.21)		39	_	0	
		Taxable at Trust Rates. See instructions for tax computation					
		ount on line 38 from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041		40			
	_	tax. See instructions		► 4 <u>1</u>	ļ		<u> </u>
		tive minimum tax (trusts only)					<u> </u>
		Noncompliant Facility Income. See instructions					ļ
		Add lines 41, 42, and 43 to line 39 or 40, whichever applies	<u> </u>	44		0	L
		ax and Payments					
,	-		45a	Ì ː			
			45b	l l			
			45c				
			45d	. #			1
		redits. Add lines 45a through 45d				0	<u> </u>
		ct line 45e from lin <u>e 44</u> <u>.</u> <u>.</u> <u>.</u>		46		0	<u> </u>
		kes. Check if from: 🔲 Form 4255 🗋 Form 8611 🔲 Form 8697 🔲 Form 8866 🗍 O		47		0	<u> </u>
		ax. Add lines 46 and 47 (see instructions)		48		0	Ļ
		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (i	1	49			<u> </u>
	-		50a 0				
			50b 0	⊣ ∣'			
			50c	{			ŀ
			50d	—			ľ
			50e				
		ar arrian amprojer maanin maaran promisire (amaari arria arri arri arri arri	50f	 			
		redits, adjustments, and payments: 🗌 Form 2439	1 1	- 11			
	☐ Form		50g 0	_			
		ayments. Add lines 50a through 50g		_ 51		0	L
52	Estimat	ed tax penalty (see instructions). Check if Form 2220 is attached	▶	□ 52			
		e. If line 51 is less than the total of lines 48, 49, and 52, enter amount ow		▶ <u>5</u> 3		0	L
	-	ryment. If line 51 is larger than the total of lines 48, 49, and 52, enter amo	1	► 54		0	L
		amount of line 54 you want: Credited to 2019 estimated tax ▶ 0		► 55	L	0	L
Part \		tatements Regarding Certain Activities and Other Information					
		time during the 2018 calendar year, did the organization have an interest				Yes	No
		financial account (bank, securities, or other) in a foreign country? If "Yes,				1	
		Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," ent	ter the name of the	foreign	country		
	here >						
	-	he tax year, did the organization receive a distribution from, or was it the grantor	of, or transferor to, a	toreign tn	ust? .		1
		" see instructions for other forms the organization may have to file.					
_58	Enter th	ne amount of tax-exempt interest received or accrued during the tax year	▶ \$		0	<u> </u>	<u> </u>
P:	Under true ca	ponoities of perjury, I declare that I have grammed this return, including accompanying schodules a	ing statements, and to the preparer has any knowled	o peat of my doe.	Knowledge	and be	ier, it is
Sign	N			May 1	he IRS disc		
Here		CFO AND TRE	ASURER		ne preparei structions)?		
	Signatu	re of officer Pafe Title					
Paid	ļ	Print/Type preparer's name Preparer's signature	Date 4/7/2020	Check [J 11 _	TIN NO 4 0 0 0	000
Prepa	rer	BRITTNEY KOCAJ Suithern Kocas	4/7/2020	self-emplo	,	01320	
Use C		Firm's name CROWE LLP		Firm's EIN		09216	
	,	Firm's address ▶ 401 EAST LAS OLAS BLVD, SUITE 1100, FORT LAUDERDA	LE, FL 33301-4230	Phone no.		202-80	
					Form 9	390-T	(2018)

	30-T (2018)									F	age 3
<u>Sche</u>	dule A—Cost of Goods Sold.	Ente	r method of ir	vento	ory va						
1	Inventory at beginning of year	1	0		6	Inventory a	at end of year	6		0	
2	Purchases	2	0	<u> </u>	7		goods sold. Subtract				
3	Cost of labor	3	0				line 5. Enter here and				
4a	Additional section 263A costs					in Part I, lir	ne 2	7		0	
	(attach schedule)	4a	0		8		les of section 263A (wit			Yes	No No
b	Other costs (attach schedule)	4b	0				roduced or acquired for				
_ 5	Total. Add lines 1 through 4b	5	0	1 1			anization?				\
Sche	dule C-Rent Income (From I	Real	Property and	Pers	onal	Property I	Leased With Real Pro	pert	y)		
_ (see	Instructions)							_			
1. Desc	ription of property										
(1)											
<u>(S)</u>											
<u>(3)</u>											
(4)											
	2. Rent re	ceived (or accrued								
	om personal property (if the percentage of re personal property is more than 10% but not more than 50%)		(b) From real an percentage of rent 50% or if the rent	for perso	onal pro	perty exceeds	3(a) Deductions directly in columns 2(a) and				18
<u>(1)</u>								_			
(2)											
(3)									_		
(4)											
Total		0 To	otal				0 (b) Total deductions				
(c) Tot	tal income. Add totals of columns 2(a)	and 2	(b). Enter				(b) Total deductions. Enter here and on page	1.			
	nd on page 1, Part I, line 6, column (A)				_		0 Part I, line 6, column (B)			_	0
Sche	dule E-Unrelated Debt-Fina	nced	Income (see	instruc	ctions)					
	Description of debt-financed p	roperty	,			come from or debt-financed	Deductions directly condebt-finance (a) Straight line depreciation	ed pro	perty		
					pro	perty 	(attach schedule)		(attach sch		
(1)				ļ. —				_			
(2)				-							
(3)				 							
(4)	4. Amount of average 5. Ave		djusted basis	-				 			
	acquisition debt on or cullocable to debt-financed debt	f or allo -financ	cable to ed property chedule)		4 di	olumn vided lumn 5	7. Gross income reportable (column 2 × column 6)		Allocable do umn 6 × tota 3(a) and	of colu	
<u>(1)</u>				<u> </u>		%					
<u>(2)</u>						%					
(3)						%					
(4)											
							Enter here and on page 1, Part I, line 7, column (A).		r here and t I, line 7, c		
Totals						▶	0				0
Total o	dividends-received deductions includ	led in d	column 8	<u> </u>	<u>.</u>	<u> </u>	.				0
									Form 9	90-T	(2018)

Form 990-T (2018)									Page 4
Schedule F-Interest, Ann	uities, Royaltie					anizations (see	e instruc	tions)	
Name of controlled organization	2. Employer Identification number	3. Net	unrelate	ontrolled ad income tructions)	Organizations 4. Total of specified payments made	5. Part of column included in the corganization's gro	ontrolling	conne	ductions directly octed with income in column 5
						-			_
(2)		- 				·			
(3)	-								
(4)		1						1	
Nonexempt Controlled Organi	zations	<u> </u>						1_	
7. Taxable Income	8. Net unrelated (loss) (see instr				tal of specified ments made	10. Part of colum included in the corganization's gro	ontrolling	connec	eductions directly sted with income in column 10
(1)									
(2)									<u>-</u>
(3)		-				<u> </u>			
(4)					·				
Totals		-				Add columns 5 Enter here and o Part I, line 8, co	n page 1,	Enter h Part I,	columns 6 and 11. here and on page 1, line 8, column (B).
Schedule G-Investment	Income of a Se	ction 5	01(c)	(7) (9)	or (17) Organi	zation (see inst			
1. Description of income		nt of income	1	3. direc	Deductions city connected ach schedule)	4. Set-aside	s	5. To and s	etal deductions et-asides (col. 3 olus col. 4)
(1)	-			/0				<u>'</u>	,
(2)	-					-			
• • • • • • • • • • • • • • • • • • • •							<u> </u>		
(4)			-					***************************************	
Totals	Enter here a Part I, line 9	nd on pag 9, column	ge 1, (A).						re and on page 1, ne 9, column (B).
Schedule I—Exploited Exc	empt Activity Ir	come.	-	r Than	Advertising In	come (see inst	ructions)	
Description of exploited activities	2. Groundelate	ss ed ncome le or	3. Exp dire connec produc unre	penses ectly ited with ction of stated s 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. Exp	penses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)		<u> </u>							
(2)									
(3)									
(4)	Enter here page 1, F line 10, \propto	Part I, ol. (A).	page 1	re and on , Part I, col. (B).					Enter here and on page 1, Part II, line 26.
Totals	noomo (see ise)	0		0					<u> </u>
Part I Income From F				`oneoli	dated Racic		·		
Part Income From F	eriodicais nep	orted 0	il a C	JU118U11	4. Advertising				7. Excess readership
1. Name of periodical	2. Gro advertis incom	ing g		Direct ling costs	gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income		dership ests	costs (column 6 minus column 5, but not more than column 4).
(1)									
(2)		<u></u>							
(3)									
(4)									
Totals (carry to Part II, line (5))	▶	0		0	0				0 Form 990-T (2018)

(3)

(4)
Total, Enter here and on page 1, Part II, line 14

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
	Enter here and or 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)		0				
Schedule K—Compensatio	n of Officers, Dire	ctors, and Tru	stees (see instr			
1. Name			2. Title	3. Percent of time devoted to business		tion attributable to ted business
(1)				96	3	
(2)				96		

Form **990-T** (2018)

0

%

% ►

Name of Partnership	EIN	UBI
AIM ACTIVITY		
(1) 1315 CAPITAL, LP	47-3220481	169,854
(2) ABBOTT CAPITAL PRIVATE EQUITY FUND IV LP	06-1623810	103,280
(3) ABRAMS CAPITAL PARTNERS I, L.P.	04-3455028	
(4) ARCLIGHT ENERGY PARTNERS FUND IV, LP	20-8419824	106,134
(5) ARCLIGHT ENERGY PARTNERS FUND V, LP	80-0334664	-94,336
(6) BAUPOST VALUE PARTNERS, L.PIV	26-2208448	-120,077
(7) BESSEMER VENTURE PARTNERS IX INSTITUTIONAL LP	98-1209568	
(8) BESSEMER VENTURE PARTNERS VIII INSTITUTIONAL, L.P.	98-0692068	
(9) CENTERFIELD CAPITAL PARTNERS, LP	36-4369010	
(10) CHARLESBANK EQUITY FUND IX, LP	35-2600984	-371,510
(11) CHARLESBANK EQUITY FUND VI, LP	26-0108217	-2,746
(12) CHARLESBANK EQUITY FUND VII, LP	32-0280123	133,100
(13) CHARLESBANK EQUITY FUND VIII, LP	47-1109521	-49,722
(14) COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VI, L.P.	25-1910076	-7,414
(15) COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS V, LP	06-1605326	-24,214
(18) COMMONFUND CAPITAL VENTURE PARTNERS VI, L.P.	06-1605325	-3,297
(17) COMMONFUND CAPITAL VENTURE PARTNERS VII, L.P.	16-1720044	-186
(18) CROSSHARBOR INSTITUTIONAL PARTNERS 2014, L.P.	30-0842329	22,567
(19) CROSSHARBOR INSTITUTIONAL PARTNERS II L P.	27-4335021	376,395
(20) CROW HOLDINGS REALTY PARTNERS IV, LP	20-3647770	-59,159
(21) CROW HOLDINGS REALTY PARTNERS V, LP	26-0655921	-23,648
(22) CROW HOLDINGS REALTY PARTNERS VI, LP	37-1695910	-68,359
(23) CROW HOLDINGS REALTY PARTNERS VII, LP	47-2211004	332,340
(24) CROW HOLDINGS REALTY PARTNERS VIII, LP	36-4853392	-3,773
(25) EIV CAPITAL FUND III LP	37-1843738	-62,805
(28) ENCAP ENERGY CAPITAL FUND X LP	47-2732735	-1,655,482
(27) ENCAP ENERGY CAPITAL FUND XI	81-4648210	-116,500
(28) ENERGY TRANSFER OPERATING L.P. (FKA ENERGY TRANSFER PARTNERS LP)	73-1493906	-7,998
(29) ENTERPRISE PRODUCTS PARTNERS LP	76-0568219	21,553
(30) FIRST RESERVE FUND XI, LP	20-5069838	62,038
(31) FR XI-E ONSHORE AIV, LP	74-3227850	2,397
(32) GREENFIELD ACQUISITION PARTNERS V, LP	68-0642757	-7,673
(33) GREENFIELD LAND PARTNERS I, LP	20-3748961	413
(34) HIGHFIELDS CAPITAL IV LP	11-3841276	-9,97
(35) INDIANA SEED FUND II, LLC	27-4416410	-15,771
(36) NATURAL GAS PARTNERS IX, L.P.	26-0632609	2,552
(37) NGP MIDSTREAM & RESOURCES, LP	20-8283524	62,747
(38) NGP NATURAL RESOURCES X, L.P.	45-4110691	-19,950
(39) OAKTREE OPPORTUNITIES FUND VIII, LP	98-0631695	-1,667
(40) OAKTREE OPPORTUNITIES FUND XB AIF (CAYMAN), LP	98-1208442	67
(41) OAKTREE OPPORTUNITIES FUND XB, L.P.	98-1187852	3,540
(42) PANTHEON USA FUND IV, LP	91-2051791	-132
(43) PLAINS ALL AMERICAN PIPELINE LP	76-0582150	2,469
(44) POLARIS GROWTH FUND I, L.P.	32-0573565	1,264
(45) POLARIS PARTNERS VIII (AIV), LP	82-2267129	-49,060
(48) PROVIDENCE EQUITY PARTNERS VI,LP	20-5898480	1,484
(47) RIVA CAPITAL PARTNERS IV, LP	36-4804829	5,744
(48) RIVERSIDE FUND V, LP	80-0789148	-204,55
(49) SILVER LAKE PARTNERS IV CAYMAN (AIV II), L P.	98-1165460	9,330
		18,982
(50) SILVER LAKE PARTNERS IV DE (AIV III), LP	47-4589432	
(51) SILVER LAKE PARTNERS IV DE (AIV III), L.P.	81-3377238	-12,786
(52) SILVER LAKE PARTNERS IV DE (AIV IV), LP	82-2375315	-7,378
(53) SILVER LAKE PARTNERS IV DE (AIV), L.P	38-3944805	73:

	Total for Part I, Line 5	3,920,662
(65) WESTBROOK REAL ESTATE FUND X, LP	37-1768594	-122,245
(64) VENTURE INVESTMENT MANAGERS, L.P.	26-3744395	-1,663
(63) VASOPREP SURGICAL LLC	45-5231861	
(62) TRANSMONTAIGNE PARTNERS LP	34-2037221	756
(61) TPG V VE-AIV 2, L.P.	27-1363255	-3,883
(60) TPG BLUEGRASS V-AIV 2, L.P.	20-4914588	70
(59) THE ENERGY & MINERALS GROUP FUND III, LP	46-3816664	-1,774,841
(58) THE ENERGY & MINERALS GROUP FUND II, LP	45-1962496	30,736
(57) THE BLACKSTONE GROUP L.P.	20-8875684	365
(58) THE BLACKSTONE GROUP (2) L.P.	20-8875684	937
(65) TC PIPELINES, LP	52-2135448	2,029
(54) STRATEGIC INVESTORS FUNDS III, LP	20-3076856	581

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Form 990T Part II, Line 18 Interest

Description	Amount
AIM ACTIVITY	
(1) BUSINESS INTEREST EXPENSE	31,744
Total for Part II, Line 18	31.744

Form 990T Part II, Line 19 Taxes and Licenses

Description		Amount
AIM ACTIVITY		
(1) STATE INCOME TAXES PAID		29,742
(2) FOREIGN TAXES PAID		3,810
	Total	33,552

Form 990T Part II, Line 20 Charitable Contributions

Year Generated	Amount Generated	Amount Used In Prior Years	Amount Used In Current Year	Amount Converted to NOL	Amount Remaining	Contribution Carryover Expires
2018	2,161			2,161	0	2023
Totals	2,161	0	0	2,161	0	

Form 990T Part II, Line 28	Other Deductions	
	Description	Amount
AIM ACTIVITY		
(1) PROFESSIONAL FEES		85,650



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

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining
2018	3,359,838	2,161			3,361,999
Totals	3,359,838	2,161	0	0	3,361,999

Form 990T Part III, Line 35

Deduction for net operating loss arising in tax years beginning before January 1, 2018

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	NOL Expires
2012	292		0		292	2032
2013	257,448		149,065		108,383	2033
2014	749				749	2034
2015	404,849			_	404,849	2035
2016	1,562,606				1,562,606	2036
2017	422,606				422,606	2037
Totals	2,648,550	0	149,065	0	2,499,485	

SCHEDULE D (Form 1120)

Name

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

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

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

OMB No. 1545-0123

Employer identification number

2018

35-1052049 **PURDUE RESEARCH FOUNDATION** Short-Term Capital Gains and Losses (See instructions.) (h) Gain or (loss) See instructions for how to figure the amounts to enter on (g) Adjustments to gain Subtract column (e) from or loss from Form(s) Cost **Proceeds** 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) column (g) the result with column (g) 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, 0 leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 0 with Box A checked Totals for all transactions reported on Form(s) 8949 with Box B checked Totals for all transactions reported on Form(s) 8949 65,804 0 0 65,804 with Box C checked 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37. Short-term capital gain or (loss) from like-kind exchanges from Form 8824 5 6 0) 6 Unused capital loss carryover (attach computation) 65,804 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h Long-Term Capital Gains and Losses (See instructions. (g) Adjustments to gain See instructions for how to figure the amounts to enter on the lines below. (h) Gain or (loss) (e) 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 (or other basis) (sales price) 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, 0 leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked 0 Totals for all transactions reported on Form(s) 8949 87,654 O 0 87.654 with **Box F** checked 11 Enter gain from Form 4797, line 7 or 9. 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37. 12 13 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 14 14 Capital gain distributions (see instructions) . . 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h 15 87,654 Summary of Parts I and II 65,804 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 16 17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) 17 87,654 18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns . 18 153,458 Note: If losses exceed gains, see Capital losses in the instructions.

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

Cat. No. 11460M

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.

► 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

2018 Attachment Sequence No. 12A

Internal Revenue Service
Name(s) shown on return

Department of the Treasury

PURDUE RESEARCH FOUNDATION

Social security number or taxpayer identification number 35-1052049

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.

Part I

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see 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 an Earm(s) 1000 B showing basis was reported to the IDC (see Note shows)

(a) Description of property	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions			Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)					(f) Code(s) from instructions	(9) Amount of adjustment	from column (d) and combine the result with column (g)	
SHORT-TERM GAIN/LOSS FROM INVESTMENTS			48,846				48,846	
SHORT-TERM ORDINARY GAIN/LOSS FROM INVESTMENTS			16,958				16,958	
			-					
						· · · · · · · · · · · · · · · · · · ·		
				-			1	
		<u> </u>						
2 Totals, Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6	al here and incl is checked), lin	lude on your le 2 (if Box B	65.804	0	:	0	65,804	

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.

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Attachment Sequence No. 12A

Page 2

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

Social security number or taxpayer identification number 35-1052049

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

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

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) In the separate instructions			(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)				(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
LONG-TERM GAIN/LOSS FROM INVESTMENTS			62,217				62,217
LONG-TERM ORDINARY GAIN/LOSS FROM INVESTMENTS			25,437				25,437
			-				
		_					
					-		
	<u> </u>						
							* -,,,

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.

87,654

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Form 8949 (2018)

87,654

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

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Supplemental Information

Return Reference - Identifier	Explanation
FORM 990-T PART III, LINE 35 - NOL ARISING IN TAX YEARS BEGINNING BEFORE JANUARY 1, 2018	NET OPERATING LOSS ARISING DURING THE TAX YEAR ENDED JUNE 30, 2018 (TAX YEAR 2017): THE NET OPERATING LOSS (NOL) GENERATING DURING THE TAX YEAR ENDED JUNE 30, 2018 AS REPORTED ON THE 2017 FORM 990-T WAS \$345,494. PURDUE RESEARCH FOUNDATION REPORTED DISALLOWED TRANSPORTATION FRINGES IN THE AMOUNT OF \$77,112 ON LINE 12 ON THE 2017 FORM 990-T. DUE TO THE RETROACTIVE REPEAL OF IRC SECTION 512(A)(7), THE AMOUNT OF NOL GENERATED IN 2017 REPORTED ON THE NOL CARRYFORWARD SCHEDULE OF THE 2018 FORM 990-T HAS BEEN ADJUSTED ACCORDINGLY. THE ADJUSTED 2017 NOL IS CALCULATED AS FOLLOWS: TAX YEAR 2017 NET OPERATING LOSS AS REPORTED ON 2017 FORM 990-T: \$345,494 LESS TRANSPORTATION FRINGES INCLUDED IN INCOME ON LINE 12 OF 2017 FORM 990-T: \$77,112 ADJUSTED NET OPERATING LOSS ARISING IN TAX YEAR 2107: \$422,606