For	տ 990-T	E		NDED TO NOVE I <b>nization Bus</b>				ax Retu		OMB No 1545-0047
,	y. <sup>rq</sup>			ind proxy tax und		ction 603	3(e))	19	IL	2019
		10.00	· · · · · · · · · · · · · · · · · · ·	v irs gov/Form990T for in	etructu		ending	ation		2013
	partment of the Treasury rnal Revenue Service			ers on this form as it may					3)	Open to Public Inspection for 501(c)(3) Organizations Only
A	Check box if address changed		Name of organization (	Check box if name of	hanged	and see instr	uctions )		D Emplo	oyer identification number loyees' trust see ctions )
_		<u> </u>		ON COUNCIL	FOR	GRADUA	7.I.E.			•
	Exempt under section 501(c)(3 03	Print	MEDICAL EDU			<del></del>				6-3698130 ated business activity code
L.£		Туре		m or suite no. If a P.O bo.						nstructions)
	• •								-	
	408A 530(a) 529(a)		CHICAGO, IL	ovince, country, and ZIP o	ir ioreig	n postal code	_		541	800
C	Book value of all assets at end of year		F Group exemption num	iber (See instructions )	<b>&gt;</b>					
	88,468,8	60.	G Check organization type	pe ► X 501(c) corp	poration	า 50	)1(c) trust	401	(a) trust	Other trust
H E	Enter the number of the o	organıza	tion's unrelated trades or	businesses. 🕨	2		Describe	the only (or first)	unrelated	
t	rade or business here 🕨	► <u>S</u>	EE STATEMENT	r 1		_	If only one,	complete Parts I-	V. If more	than one,
d	lescribe the first in the b	lank spa	ce at the end of the previo	ous sentence, complete Pa	irts I an	d II, complete	a Schedule	M for each additi	onal trade	or
b	usiness, then complete	Parts III	-V.							
	•		-	affiliated group or a parei	nt-subs	idiary controll	ed group?	<b>•</b>	Ye	s X No
Λ			tifying number of the pare						<del></del>	
4-6-			JOHN OGUNKEY					one number 🕨		
			de or Business Inc	come	Τ-	(A) Inc	ome	(B) Expen	ses	(C) Net
	a Gross receipts or sale	s		_						
י דַ	<b>b</b> Less returns and allow			c Balance	1c					
_	• (			A	2					
₹ 3 ₹ 4a	Gross profit Subtract			A	3		E 0 2			
	a Capital gain net incom		·	, ,	4a	8	,503.		_/	8,503.
			art II, line 17) (attach Fori	n 4797)	4b					
	Capital loss deduction				4c	1	0.41	O'myrm	<del></del> _	1 0 4 1
5 5 6	• •		ship or an S corporation (a	ittach statement)	5	-1	,041.	STMT	2	-1,041.
	Rent income (Schedu		(0		6			/		
7	Unrelated debt-finance		•		7		/			
8	-		nd rents from a controlled	-	8		$\overline{}$			
9			on 501(c)(7), (9), or (17) o	organization (Schedule G)						<u> </u>
10	Exploited exempt activ				10					
11	Advertising income (S		•		11					
12	Other income (See ins		•		12/		,462.			7,462.
	art Deductio	ns No	ot Taken Flsewhe	re (See instructions for						7,402.
يخ				with the unrelated busin			ductions ,			
14	Compensation of offi	icers, di	rectors, and trustees (Sch	edule K)			-OE1)/	<u> </u>	14	
15	Salaries and wages					Rt	CEIV		15	
16	Repairs and mainten	ance				14		020	16	
17	Bad debts		<i>*</i>			NC 2	N 2 3 2	2020	17	
18	Interest (attach sche	dule) (s	ee instructions)			이		<u></u>	_ 18	
19	Taxes and licenses					000	PREN	UT	19	2,000.
20	Depreciation (attach		· /				220/		~,	
21	Less depreciation cla	aimed or	n Schedule A and elsewhe	re on return			21a		21b	
22	Depletion								22	
23	Contributions to defe	- 4	mpensation plans						23	
24	Employee benefit pro	-							24	
25	Excess exempt exper								25	
26	Excess readership co								26	· <u> </u>
27	Other deductions (at					SEI	STAT	EMENT 3	27	6,623.
28	Total deductions A		•						28	8,623.
29	,			g loss deduction. Subtrac					29	-1,161.
30	Deduction for net op	erating l	oss arising in tax years be	eginning on or after Janua	ry 1, 20	118			<b>    </b>	_
	(see instructions)								30	0.
<u> 31</u>			ncome. Subtract line 30 fr			•			31	-1,161.
622	701 01-27-20 IHA FO	r Paner	work Reduction Act Notic	a caa instructions						Form <b>990-T</b> (2019)

	0-T (2019) ACCREDITATION COUNCIL FOR GRADUATE MEDICAL EDUCATION	36-3698130 Page 2
Par	Total Unrelated Business Taxable Income	
32	total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32 0.
33	Amounts paid for disallowed fringes	33
34	Charitable contributions (see instructions for limitation rules)  STMT 4  STMT 5	34 0.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction Subtract line 34 from the sum of lines 32 and 33	35
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36
37		37
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38 1,000.
	opecine deduction (deficiently \$1,000, but see line 50 mistractions for exceptions)	38 = 7000:
. 39	Unrelated business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37.	0.
Dor	Tax Computation	39 ] 0.
	······································	40 0.
40	Organizations Taxable as Corporations Multiply line 39 by 21% (0.21)	40 0.
41	Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 39 from	h. <del></del>
	Tax rate schedule or Schedule D (Form 1041)	41
42	Proxy tax See instructions	42
43	Afternative minimum tax (trusts only)	43
. 44	Tax on Noncompliant Facility Income See Instructions	44
	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45 0.
Par	Tax and Payments	12: 81
46 a	Foreign at credit (corporations attach Form 1118, trusts attach Form 1116) 46a	
b	Other credits (see instructions)	- Care
C	General business credit. Attach Form 3800	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	
е	Total credits. Add lines 46a through 46d	46e
47	Subtract line 46e from line 45	47 0.
48	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	48
49	Total tax Add lines 47 and 48 (see instructions)	49 0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50 0.
51 a	Payments. A 2018 overpayment credited to 2019 U4 Sta 19,494.	
b	2019 estimated tax payments 51b	
C	Tax deposited with Form 8868	
d	Foreign organizations. Tax paid or withheld at source (see instructions)  51d	
е	Backup withholding (see instructions)  51e	
f	Credit for small employer health insurance premiums (attach Form 8941)  51f	
a	Other credits, adjustments, and payments: Form 2439	
·	Form 4136 Other Total <b>51g</b>	4
52	Total payments. Add lines 51a through 51g	52 19,494.
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	53
54	Tax due If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55 19,494.
1 56	Enter the amount of line 55 you want: Credited to 2020 estimated tax   19,494. Refunded	56 0.
	Statements Regarding Certain Activities and Other Information (see instructions)	<del></del>
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority	Yes No
•	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file	
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country	
	here <b>&gt;</b>	X
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?	X
	If "Yes," see instructions for other forms the organization may have to file.	
59	Enter the amount of tax-exempt interest received or accrued during the tax year   \$ \$	
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowle	dge and belief, it is true,
Sign	correct, and complete Declaration of oreparer (other than taxpayer) is based on all information of which preparer has any knowledge	
Here		lay the IRS discuss this return with ne preparer shown below (see
		structions)? X Yes No
		If PTIN
	WIMPEDLY A	
Paid	11/16/20	P00546491
	DI ANTON C MODAL DITO	
Use		20-1331331
	10 S. RIVERSIDE PLAZA, 9TH FLOOR	(312) 207-1040
	Firm's address ► CHICAGO, IL 60606 Phone no (	512/ 207-1040 Form 990-T (2010)

Form 990-T (2019) MEDICAL EDUCATION

The entrology at beginning of year   1	Schedule A - Cost of Goods	s Sold. Enter	method of inver	itory v	aluation N/A					-
2 Purchases 2 1		1					6			
3 Cost of labor 4 Additional section 263A costs (attach schedule) 4 1		2		_			line 6			
Institutional section 263A costs (attach schedule)   4a	3 Cost of labor	3		1				_		
b Other costs (attach schedule) 5 Total Add lines i through 4b 7 Total Add lines i through 4b	4 a Additional section 263A costs			7				7		
b Other costs (attach schedule) 5 Total Add Inter 1 through 4b 5 Total Property and Personal Property Leased With Real Property (see instructions)  1 Description of property  11 (2) (3) (4) (4) (2) (3) (4) (4) (5) (5) (6) (7) (7) (8) (8) (8) (8) (9) (9) (9) (9) (9) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (5) (6) (6) (7) (7) (7) (8) (8) (8) (9) (9) (9) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (6) (7) (7) (7) (8) (8) (9) (9) (9) (1) (1) (1) (1) (1) (1) (1) (2) (3) (4) (4) (5) (6) (7) (7) (7) (8) (8) (9) (9) (1) (1) (1) (1) (1) (1) (1) (2) (3) (4) (4) (5) (6) (7) (7) (7) (8) (8) (9) (9) (9) (9) (9) (1) (1) (1) (1) (1) (1) (1) (2) (3) (4) (4) (5) (6) (6) (7) (7) (7) (7) (8) (8) (8) (8) (8) (8) (8) (9) (8) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9	(attach schedule)	4a		8	8 Do the rules of section 263A (with respect to				Yes	No
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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 secretary (a) From personal property (if the pers		5		1		·				
1 Description of property  (1)  (2)  (3)  (4)  2 Rent received or accrived  (a) From particular property is more than followed property is more than followed by column 5 (h) From real and personal property accessed 50% or or including a property	Schedule C - Rent Income	(From Real	Property and	Per	sonal Property L	ease	d With Real Prop	erty)		
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A	(2)									
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2. Gross income from or allocable to debt-financed property  (1)  (2)  (3)  (4)  4. Amount of average acquisition debt-financed property (attach schedule)  5 Average adjusted basis of or allocable to debt-financed property (attach schedule)  (5)  Average adjusted basis of or allocable to debt-financed property (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 eportable (column 2 x column 6)  (2)  (3)  (4)  (4)  (5)  Average adjusted basis of allocable to debt-financed property (attach schedule)  (6)  (7)  (8)  Allocable deductions (column 6)  (8)  (9)  (1)  (1)  (2)  (3)  (4)  (4)  (5)  Average adjusted basis of allocable to debt-financed property (attach schedule)  (6)  (7)  (8)  Allocable deductions (column 6)  (8)  (9)  (1)  (1)  (1)  (2)  (3)  (4)  (4)  (5)  Average adjusted basis of allocable to develop (attach schedule)  (6)  (7)  (7)  (8)  (8)  (9)  (9)  (1)  (1)  (1)  (1)  (2)  (3)  (4)  (4)  (5)  Allocable deductions (column 6)  (6)  (6)  (7)  (7)  (7)  (8)  (8)  (9)  (9)  (9)  (1)  (1)  (1)  (1)  (1	here and on page 1, Part I, line 6, column	ı (A)				0.	Enter here and on page 1,	<b>•</b>		0.
2. Gross income from 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 of a locable to debt-financed property (attach schedule)  5. Average adjusted basis of or allocable to debt-financed property (attach schedule)  7. Gross income reportable (column 2 x column 6)  7. Gross income reportable (column 2 x column 6)  (a) Allocable deductions (column 6 x total of columns 3(a) and 3(b))  (b) Other deductions (attach schedule)  4. Amount of average acquisition debt of 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)  (column 6 x total of columns 3(a) and 3(b))  (1)  (2)  (3)  (4)  (4)  (5)  6. Column 4 divided by column 5  (column 6 x total of columns 3(a) and 3(b))  (a)  (b) Other deductions (attach schedule)	Schedule E - Unrelated Deb	t-Financed	Income (see	instru	ctions)					
1 Description of debt-financed property  (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)  (1)  (2)  (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)  (attach schedule)  8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))  (1)  (2)  (3)  (4)  (4)  (6)  (7)  Financed property  (attach schedule)  (b)  Financed property  (attach schedule)  (b)  Financed property  (attach schedule)  (column 6 x total of columns 3(a) and 3(b))  (column 6 x total of columns 3(a) and 3(b))  (d)  (e)  (f)  Financed property  (attach schedule)  (column 6 x total of columns 3(a) and 3(b))  (column 6 x total of columns 3(a) and 3(b))  (d)  Financed property  (attach schedule)  (column 6 x total of columns 3(a) and 3(b))  (column 6 x total of columns 3(a) and 3(b))  (d)  Financed property  (attach schedule)  (column 6 x total of columns 3(a) and 3(b))  (d)  Financed property  (attach schedule)  (column 6 x total of columns 3(a) and 3(b))  (d)  Financed property  (attach schedule)  (column 6 x total of columns 3(a) and 3(b))  (d)  (e)  Financed property  (attach schedule)  (f)  Financed property  (attach schedule)  (column 6 x total of columns 3(a) and 3(b))  (column 6 x total of columns 3(a) and 3(b))  (d)  Financed property  (attach schedule)  (e)  Financed property  (column 6 x total of columns 3(a) and 3(b))  (column 6 x total of columns 3(a) and 3(b))				2						
(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)  (column 6 x total of columns 3(a) and 3(b))  (1)  %  (2)  %  (3)  (4)  Enter here and on page 1, Part I, line 7, column (A)  Fortil, line 7, column (B)	Description of debt-fire	nanced property				(a)				
(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)  (column 6 x total of columns 3(a) and 3(b))  (1)  %  (2)  %  (3)  (4)  Enter here and on page 1, Part I, line 7, column (A)  Fortil, line 7, column (B)	(1)					_				
(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)  (column 6 x total of columns 3(a) and 3(b))  (1)  (2)  (3)  (4)  Enter here and on page 1, Part I, line 7, column (B)  Totals										
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)  (column 6 x total of columns 3(a) and 3(b))  (1)  (2)  (3)  (4)  Enter here and on page 1, Part I, line 7, column (A)  Fat I, line 7, column (B)										
debt on or allocable to debt-financed property (attach schedule)  (1)  (2)  (3)  (4)  Enter here and on page 1, Part I, line 7, column (B)  Totals  of or allocable to debt-financed property (attach schedule)  by column 5  reportable (column 2 x column 6)  (column 6 x total of columns 3(a) and 3(b))  (column 6 x total of columns 3(a) and 3(b))  Enter here and on page 1, Part I, line 7, column (B)										
(2)	debt on or allocable to debt-financed	of or a debt-fina	allocable to inced property	6			reportable (column	(	column 6 x total of c	olumns
(2)	(1)				%					
(3)			<u>.                                      </u>							
(4)  Senter here and on page 1, Part I, line 7, column (A)  Totals  Page 1, Inter here and on page 1, Part I, line 7, column (B)  O • O •										
Enter here and on page 1, Part I, line 7, column (A)  Part I, line 7, column (A)  Totals							-			
				•					•	•
	Totals				<b>.</b>		0			0.
Telefication of the state of th		icluded in columi	1 8				<u></u>	•		0.

Form **990-T** (2019)

Form 990-T (2019) MEDICA								36-36	9813	O Pag
Schedule F - Interest, i	Annuities	, Royalti	es, and Rents	From Co	ntrolled	l Organiza	itions	(see ins	struction	s)
			Exempt	Controlled O	rganızatı	ons				
1 Name of controlled organiza	tion			related income e instructions)			include	t of column 4 ed in the cont ation's gross	rolling	6 Deductions directly connected with income in column 5
(1)			<del></del>							
(2)			<del></del>				<b> </b>			
		-					-		1	
(3)	+						<b></b> -			
(4)					L		<u>.                                    </u>		1	
Nonexempt Controlled Organi			<del>-  </del>						Ι	
7. Taxable Income		elated income e instructions)		of specified payr made	nents	10 Part of colu- in the controlli gross				ductions directly connect income in column 10
(1)										
(2)										
(3)	İ	-		-				_		
(4)				<del></del> -	-					
	L									
						Add colun Enter here and line 8, c		1, Part I,		dd columns 6 and 11 nere and on page 1, Part I, Ilne 8, column (B)
otals								0.		(
Schedule G - Investme	nt Incom	e of a S	ection 501(c)(7	'), (9), or (	17) Org	anization				
(see inst	ructions)						· · · · · · ·			
1 Desc	cription of income	е		2 Amount of	ıncome	3 Deduction directly conne (attach sched)	cted	4. Set- (attach s	asıdes schedule)	5 Total deduction and set-asides (col 3 plus col 4
(1)										
(2)										
(2)										
(4)									-	
. ,				Enter here and o Part I, line 9, co					-	Enter here and on pag Part I, line 9, column (I
Totals			•		0.					
Schedule I - Exploited (see instri	-	Activity I	ncome, Other	Than Adv		g Income	·			
Description of exploited activity	2 Gro unrelated bi income t trade or bu	usiness from	3. Expenses directly connected with production of unrelated business income	4 Net incom from unrelated business (co minus columi gain compute through	I trade or dumn 2 n 3) If a e cols 5	5 Gross inco from activity t is not unrelat business inco	that led	attribut	penses table to mn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)	ļ			1					-	<u> </u>
(2)	<u> </u>									+
		+			+					
(3)										
(4)	C-t b			<del> </del>	<u>-</u>					Fatar bara and
	Enter here page 1, F line 10, co	Parti, ol (A)	Enter here and on page 1, Part I, line 10, col (B)							Enter here and on page 1, Part II, line 25
Totals		0.	0.							
Schedule J - Advertisi					Dania		,			
Part I Income From	Periodica	is керо	rted on a Cons	solidated	Dasis					
1. Name of periodical		2 Gross advertising income	3 Direct advertising costs	4 Advert or (loss) (co col 3) If a gr cols 5 th	ain, compute	5. Circulat		6 Read		7 Excess readership costs (column 6 minus column 5, but not mor than column 4)
(1)										
(2)			<del></del>	$\dashv$						
(3)	+ -			$\dashv$		<u> </u>				
	<u> </u>					ļ				
(4)						+				
Totals (carry to Part II line (5))		Λ								,

Form **990-T** (2019)

Form 990-T (2019) MEDICAL EDUCATION

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 )	

Columns E unougi	17 011 0	Time by time 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.
		Enter here and on page 1, Part I, line 11 col (A)	Enter here and on page 1, Part I, line 11, col (B)	•			Enter here and on page 1, Part II line 26
Totals, Part II (lines 1-5)	▶	0.	0.				0.

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

1 Name	2 Title	3 Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2019)

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1
BUSINESS ACTIVITY

INVESTMENT INCOME ADVERTISING

TO FORM 990-T, PAGE 1

FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 2
DESCRIPTION	NET INCOME OR (LOSS)
GCM GROSVENOR PRIVATE EQUITY OPPORTUNITIES FUND - ORDINARY	
BUSINESS INCOME (	-5
GCM GROSVENOR PREMIER PRIVATE EQUITY PARTNERS LP DRDINARY BUSINESS INCOME	78
SEI GLOBAL PRIVATE ASSETS IV, LP - ORDINARY BUSINESS	70
INCOME (LOSS)	-5,435
SEI GLOBAL PRIVATE ASSETS IV, LP - NET RENTAL REAL ESTATE	.,
INCOME	-1,098
SEI GLOBAL PRIVATE ASSETS IV, LP - INTEREST INCOME	240
SEI GLOBAL PRIVATE ASSETS IV, LP - DIVIDEND INCOME	290
SEI GLOBAL PRIVATE ASSETS IV, LP - ROYALTIES	38
SEI GLOBAL PRIVATE ASSETS IV, LP - OTHER INCOME (LOSS) PB STRATEGIC PARTNERS FEEDER FUND IV LP - ORDINARY	1,517
BUSINESS INCOME (LOSS)	715
PB STRATEGIC PARTNERS FEEDER FUND IV LP - NET RENTAL REAL	
ESTATE INCOME	2
PB STRATEGIC PARTNERS FEEDER FUND IV LP - INTEREST INCOME	14
PB STRATEGIC PARTNERS FEEDER FUND IV LP - DIVIDEND INCOME	3
PB STRATEGIC PARTNERS FEEDER FUND IV LP - OTHER INCOME (LOSS)	2,600
	2,000
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5	-1,041
FORM 990-T OTHER DEDUCTIONS	STATEMENT 3
DESCRIPTION	AMOUNT
FROM K-1S	6,623
TOTAL TO FORM 990-T, PAGE 1, LINE 27	6,623

FORM 990-T	CONTRIBUTIONS	STATEMENT 4		
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT		
BACK TO BEDSIDE GRANTS TO 501(C)(3) ORGANIZATIONS	N/A	27,132.		
FROM K-1S	N/A	10.		
TOTAL TO FORM 990-T, PAGE 2, L	SINE 34	27,142.		

FORM 990-T	CONTR	IBUTIONS SUMMARY		STATEMENT	5
	CONTRIBUTIONS SUBJECT CONTRIBUTIONS SUBJECT				
FOR TAX FOR TAX FOR TAX FOR TAX	OF PRIOR YEARS UNUSED YEAR 2014 YEAR 2015 YEAR 2016 YEAR 2017 YEAR 2018	CONTRIBUTIONS 4,361,900 102,447 107,918 111,263 207,909			
TOTAL CARE	RYOVER RENT YEAR 10% CONTRIBU	rions	4,891,437 27,142		
	TRIBUTIONS AVAILABLE SCOME LIMITATION AS ADD	JUSTED	4,918,579 0	_	
EXCESS 100	TRIBUTIONS )% CONTRIBUTIONS ESS CONTRIBUTIONS	_	4,918,579 0 4,918,579	_	
ALLOWABLE	CONTRIBUTIONS DEDUCTION	ON		<del></del>	0
TOTAL CONT	RIBUTION DEDUCTION				0

# SCHEDULE M (Form 990-T)

## Unrelated Business Taxable Income from an Unrelated Trade or Business

Unrelated Trade or Business

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service ► 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)

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

Name of the organization

ACCREDITATION COUNCIL FOR GRADUATE MEDICAL EDUCATION

Employer identification number 36-3698130

ENTITY

Unrelated Business Activity Code (see instructions) 

511120

Describe the unrelated trade or business 
ADVERTISING

For calendar year 2019 or other tax year beginning

Pa	rt I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales				
b	Less returns and allowances c Balance	<u>1c</u>			
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17)				
	organization (Schedule G)	9			l
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11	800.		800.
12	Other income (See instructions, attach schedule)	12			
13	Total. Combine lines 3 through 12	13	800.		800.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)		14	
15	Salanes and wages		15	
16	Repairs and maintenance		16	
17	Bad debts		17	
18	Interest (attach schedule) (see instructions)		18	
19	Taxes and licenses		19	
20	Depreciation (attach Form 4562)	20		
21	Less depreciation claimed on Schedule A and elsewhere on return	21a	21b	
22	Depletion		22	
23	Contributions to deferred compensation plans	<u></u>	. 23	<u> </u>
24	Employee benefit programs		24	
25	Excess exempt expenses (Schedule I)		25	
26	Excess readership costs (Schedule J)		26	800.
27	Other deductions (attach schedule)		27	
28	Total deductions. Add lines 14 through 27		28	800.
29	Unrelated business taxable income before net operating loss deduction. Subtract line	e 28 from line 13	29	0.
30	Deduction for net operating loss arising in tax years beginning on or after January 1,	2018 (see		
	instructions)		30	0.
31	Unrelated business taxable income. Subtract line 30 from line 29		31	

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

# ACCREDITATION COUNCIL FOR GRADUATE MEDICAL EDUCATION

ENTITY 1 36-3698130

800.

Schedule J - Advertising Income (see instructions)

Totals, Part II (lines 1-5)

800

Part I Income From Periodicals Reported on a Consolidated Basis 4 Advertising gain or (loss) (col 2 minus 7 Excess readership 2 Gross 3 Direct 5 Circulation 6 Readership costs (column 6 minus advertising 1 Name of periodical advertising costs col 3) If a gain compute cols 5 through 7 ıncome costs column 5 but not more than column 4) (1) (2) (3)(4) 0. 0. 0. Totals (carry to Part II, line (5)) 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) 7 Excess readership 4 Advertising gain 2 Gross 3. Direct 5 Circulation 6 Readership or (loss) (col 2 minus costs (column 6 minus advertising 1 Name of periodical col 3) If a gain, compute cols 5 through 7 advertising costs column 5, but not more income than column 4) (1) JOURNAL 800. 0. 800. 49,591 239,162. 800. (2) (3) (4) 0. 0. 0. Totals from Part I Enter here and on Enter here and on Enter here and page 1, Part I, line 11, col (B) page 1, Part I, line 11, col (A) on page 1, Part II, line 27

0

#### SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

### **Capital Gains and Losses**

OMB No 1545-0123 **2019** 

Name

Employer identification number

ACCREDITATION COUN	CIL FOR GRADUA	ATE		ŀ	
MEDICAL EDUCATION	_			36-	3698130
Did the corporation dispose of any investme	ent(s) in a qualified opportur	nity fund during the tax ye	ear?		Yes X No
If "Yes," attach Form 8949 and see its instru	uctions for additional require	ements for reporting your	gain or loss		
Part I Short-Term Capital Ga					
See instructions for how to figure the amounts					
to enter on the lines below	(d) Proceeds	(e) Cost	(g) Adjustments to gail or loss from Form(s) 894	19,	(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars	(sales price)	(or other basis)	Part I, line 2 column (g	1)	combine the result with column (g)
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					259.
4 Short-term capital gain from installment sale	s from Form 6252, line 26 or 3	7		4	
5 Short-term capital gain or (loss) from like-kii	nd exchanges from Form 8824			5	
6 Unused capital loss carryover (attach compu				6	( )
7 Net short-term capital gain or (loss). Combin	ne lines 1a through 6 in column	ıh		7	259.
Part II Long-Term Capital Ga					
		1130 000013.7			
See instructions for how to figure the amounts to enter on the lines below	(d)		(g) Adjustments to gai	n	(h) Gain or (loss) Subtract
See instructions for how to figure the amounts		(e) Cost (or other basis)	(g) Adjustments to gai or loss from Form(s) 894 Part II, line 2, column (ç	9,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
See instructions for how to figure the amounts to enter on the lines below  This form may be easier to complete if you	(d) Proceeds (sales price)	(e) Cost	or loss from Form(s) 894	9,	column (e) from column (d) and
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.  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	(d) Proceeds (sales price)	(e) Cost	or loss from Form(s) 894	9,	column (e) from column (d) and
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.  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	(d) Proceeds (sales price)	(e) Cost	or loss from Form(s) 894	9,	column (e) from column (d) and
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.  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	(d) Proceeds (sales price)	(e) Cost	or loss from Form(s) 894	9,	column (e) from column (d) and
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.  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	(d) Proceeds (sales price)	(e) Cost	or loss from Form(s) 894	9,	column (e) from column (d) and
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.  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	(d) Proceeds (sales price)	(e) Cost	or loss from Form(s) 894	9,	column (e) from column (d) and combine the result with column (g)
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.  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	(d) Proceeds (sales price)	(e) Cost	or loss from Form(s) 894	19.	column (e) from column (d) and combine the result with column (g)
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.  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	(d) Proceeds (sales price)	(e) Cost (or other basis)	or loss from Form(s) 894	9,	column (e) from column (d) and combine the result with column (g)
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.  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  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sale	(d) Proceeds (sales price)  s from Form 6252, line 26 or 3	(e) Cost (or other basis)	or loss from Form(s) 894	19.	column (e) from column (d) and combine the result with column (g)
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.  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  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sale	(d) Proceeds (sales price)  s from Form 6252, line 26 or 3	(e) Cost (or other basis)	or loss from Form(s) 894	11	column (e) from column (d) and combine the result with column (g)
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.  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  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sale	(d) Proceeds (sales price)  s from Form 6252, line 26 or 3	(e) Cost (or other basis)	or loss from Form(s) 894	11 12	4,352.
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.  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  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sale  13 Long-term capital gain or (loss) from like-kii  14 Capital gain distributions  15 Net long-term capital gain or (loss). Combin	(d) Proceeds (sales price)  s from Form 6252, line 26 or 3 and exchanges from Form 8824 the lines 8a through 14 in column	(e) Cost (or other basis)	or loss from Form(s) 894	11 12 13	column (e) from column (d) and combine the result with column (g)
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.  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  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sale  13 Long-term capital gain or (loss) from like-king the sale and	(d) Proceeds (sales price)  s from Form 6252, line 26 or 3 and exchanges from Form 8824 the lines 8a through 14 in column	(e) Cost (or other basis)	or loss from Form(s) 894	11 12 13	4,352. 3,892.
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.  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  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sale  13 Long-term capital gain or (loss) from like-kii  14 Capital gain distributions  15 Net long-term capital gain or (loss). Combin	(d) Proceeds (sales price)  s from Form 6252, line 26 or 3 and exchanges from Form 8824 the lines 8a through 14 in colum	(e) Cost (or other basis)	or loss from Form(s) 894	11 12 13	4,352. 3,892.  8,244.
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.  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  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sale  13 Long-term capital gain or (loss) from like-king the long-term capital gain or (loss). Combin Part III Summary of Parts I and III summary of Parts II  summary of Parts II and III summary of Parts III summary of Parts III summary of Parts I	(d) Proceeds (sales price)  s from Form 6252, line 26 or 3 and exchanges from Form 8824 the lines 8a through 14 in colum d II the 7) over net long-term capital	(e) Cost (or other basis)  7  n h  al loss (line 15)	or loss from Form(s) 894 Part II, line 2, column (s	11 12 13 14	4,352. 3,892.  8,244.
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.  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  11 Enter gain from Form 4797, line 7 or 9  12 Long-term capital gain from installment sale 13 Long-term capital gain or (loss) from like-kill Capital gain distributions  15 Net long-term capital gain or (loss). Combin Part III Summary of Parts I and 16 Enter excess of net short-term capital gain (l	(d) Proceeds (sales price)  s from Form 6252, line 26 or 3 and exchanges from Form 8824 the lines 8a through 14 in colum (d II) line 7) over net long-term capital m capital gain (line 15) over net	(e) Cost (or other basis)  7  n h  al loss (line 15) t short-term capital loss (line	or loss from Form(s) 894 Part II, line 2, column (s	11 12 13 14 15	4,352. 3,892.  8,244.

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

Schedule D (Form 1120) 2019

# Department of the Treasury

**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

Name(s) shown on return

ACCREDITATION COUNCIL FOR GRADUATE MEDICAL EDUCATION

Social security number or taxpayer identification no.

36-3698130

Before you check Box A, B, or C bel statement will have the same informa broker and may even tell you which l	ation as Form 109	you received any 99-B Either will	/ Form(s) 1099-B o show whether you	or substitute statem r basis (usually you	ent(s) fron r cost) was	n your broker A su reported to the IF	bstitute S by your
Part 13 Short-Term. Transact	ions involving capit	al assets you held	1 year or less are ge	nerally short term (see	nstruction	s) For long-term	<del></del>
transactions, see page 2  Note: You may aggregate al							ljustments or
codes are required Enter the	totals directly on S	Schedule D, line 1a	ı, you aren't required	to report these trans	actions on F	orm 8949 (see instru	ctions)
You must check Box A, B, or C below if you have more short-term transactions than will							each applicable box
(A) Short-term transactions re	· -				-		
(B) Short-term transactions re	ported on Form(s	s) 1099-B showin	ig basis wasn't re	eported to the IRS			
X (C) Short-term transactions no	•		-				
1 (a)	(b)	(c)	(d)	(e)	Adjustmer	nt, if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds (sales price)	Cost or other	l ın column	ou enter an amount (g), enter a code in	Gain or (loss).
(Example 100 sh XYZ Co)	(Mo , day, yr )	disposed of	(Sales price)	basis See the Note below and	column (f	). See instructions	Subtract column (e) from column (d) &
		(Mo , day, yr )		see Column (e) in	(f)	(g) Amount of	combine the result
		•		the instructions	Code(s)	adjustment	with column (g)
SEI GLOBAL PRIVATE	··						
ASSETS IV, LP							259.
						1	
	_						
		-					
			-				
	<del> </del>						
	<del>-</del>			<u> </u>			-
2 Totals. Add the amounts in colur	mns (d) (e) (a) a	nd (h) (subtract		<u> </u>			
negative amounts) Enter each to							
Schedule D, line 1b (if Box A abo		•					
above is checked), or line 3 (if B	•	•					259.
aboro io oriodicaj, Or III e o (II b		· · · · · · · · · · · · · · · · · · ·	1	1		i	,

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

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on page 1

## ACCREDITATION COUNCIL FOR GRADUATE MEDICAL EDUCATION

Social security number or taxpayer identification no.

36-3698130

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 yo	our
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 X (F) Long-term transactions not reported to you on Form 1099-B

(F) Long-term transactions not	reported to you	on Form 1099-B					
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other	l loss. If v	nt, if any, to gain or ou enter an amount (g), enter a code in	(h) Gain or (loss).
(Example 100 sh XYZ Co)	(Mo , day, yr )	disposed of	(sales price)	basis See the	column (f	(g), enter a code in	Subtract column (e)
,		(Mo , day, yr )		Note below and	10		from column (d) &
				see Column (e) in the instructions	Code(s)	(g) Amount of adjustment	combine the result with column (g)
SEI GLOBAL PRIVATE						adjustment	(3)
ASSETS IV, LP							3,551.
PB STRATEGIC							
PARTNERS FEEDER							
FUND IV LP		·					801.
						-	
<del> </del>						-	<del> </del>
				<u> </u>			
<del></del>			· ·-···			-	
					-		
<del></del>							
			_				
					<u> </u>		
					<u> </u>		
					<u> </u>		
	L				ļ		
2 Totals. Add the amounts in colur							
negative amounts) Enter each to				1	İ		
Schedule D, line 8b (If Box D abo	•	•					
above is checked), or line 10 (if E	Box F above is ch	necked)		<u> </u>			4,352.

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

Form 8949 (2019)