,Form <b>990-T</b>	Exempt (	Organization Bu				ОМВ	No 1545-0687
	Car polondar von 2018 av a	(and proxy tax ur			190 <del>0</del> n 30, 201	9 9	2018
		o to www.irs.gov/Form990T for				_   _	-0 10
Department of the Treasury Internal Revenue Service		N numbers on this form as it m				Open to 501(c)(3)	Public Inspection Organizations On
A Check box if	Name of organi	zation ( Check box if nam	e changed a	nd see instructions.)		(Employees' to	ntification number trust, see
address changed						instructions)	
B Exempt under section	Print HOPE CO			<del></del>			381271
X 501(c 1/3. )		and room or suite no. If a P.O.	box, see inst	ructions.		(See instruction	iness activity code
408(e) 220(e)	141 6.	12TH STREET					
408A530(a)	HOLLAND	ate or province, country, and ZIF , MI 49423	P or foreign p	postal code		523000	
529(a)  Book value of all assets	E Croup ayama	tion number (Con instructions )	<b></b>	· - · · - · ·		323000	
at end of year 496 373 57	5 - G Check organi	zation type   X 501(c) o	corporation	501(c) trust	401(a)	trust	Other trus
H Enter the number of the o	rganization's unrelated t	rades or businesses.	3		the only (or first) uni		
		S IN PARTNERSH	IPS		complete Parts I-V.		one,
		he previous sentence, complete					
business, then complete F							
		ary in an affiliated group or a pa	arent-subsidi	ary controlled group?	▶ [	Yes [	X No
		the parent corporation.			<del> </del>	64.61.00	
J The books are in care of					one number 🕨 (		
Part I Unrelated	Trade or Busine	ess income		(A) Income	(B) Expenses		(C) Net
1a Gross receipts or sales							
b Less returns and allow		c Balance	1c		×	<del></del>	/
2 Cost of goods sold (So	•		2			<del></del>	
3 Gross profit. Subtract			3	4,646.			4,64
4 a Capital gain net incom b Net gain (loss) (Form	•	tach Form 4707\	4a 4b	-44,751.		<del>/                                     </del>	-44,75
		tach Form 4797)	4c	44,751.			11//5.
•		oration (attach statement)	5	-999,118.	ŞЯ́МТ 2	_	999,11
6 Rent income (Schedul		oration (attach statement)	6				
7 Unrelated debt-finance			7				
	•	ontrolled organization (Schedule	F) <b>8</b>				
9 Investment income of	a section 501(c)(7), (9),	or (17) organization (Schedule	G) 9				
10 Exploited exempt activ	ty income (Schedule I)		10				
11 Advertising income (S	chedule J)		11				
12 Other income (See ins	ructions, attach schedu	e)	12				
13 Total. Combine lines	3 through 12		13	<u>1,039,223.</u>		<u>-1,</u>	039,22
Part II Deduction	ns Not Taken Els	ewhere (See instructions ons must be directly connec	s for limitati	ons on deductions.)	Incomo \		
			teo with the	e differated business	income.)		
	cers, directors, and trust	ees (Schedule K)	DECE	VED		14	
15 Salaries and wages			RECE	VED		15	
16 Repairs and maintena	nce	Agl		က္က		16	
17 Bad debts	lule) (eee instructions)	, B650	JUN 15	2020 000		18	
•	lule) (see instructions)			S		19	
	ns (See instructions for	limitation rules)	GDEN			20	
21 Depreciation (attach l	•	inditation rules)	ODLI	V, U1 21			
	med on Schedule A and	elsewhere on return		22a		22b	
23 Depletion				(===1		23	
	rred compensation plans	<b>;</b>				24	
25 Employee benefit pro	/					25	
26 Excess exempt exper	,					26	
27 Excess readership çø	/					27	
28 Other deductions (att				SEE STAT		28	10,000
29 Total deductions. Ac	d lines 14 through 28				20	29	10,000
	xable income before net	operating loss deduction. Subt			30		049,22
				0 (acc instructions)	<i>A</i> U	31	
	rating loss arising in tax	years beginning on or after Jar	nuary 1, 2011	o (see msuuchons)			0.46 - 5.5
31 Deduction for net ope	rating loss arising in tax exable income. Subtract		nuary 1, 2011	o (see mstructions)		32 -1,	049,223 m <b>990-T</b> (20

Form 990-T (	2018) HOPE COLLEGE	38-138	31 <u>271</u>	Page <b>2</b>
Part I	Total Unrelated Business Taxable Income	_		
,33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instruction	ons)	33	0.
,	Amounts paid for disallowed fringes		34	
	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	STMT 4	35	0.
	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of			
	lines 33 and 34	_	36	
	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	12 39	H 35	1,000.
	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,	€ 30	/ <del>                                     </del>	
	enter the smaller of zero or line 36		38	0.
	Tax Computation		I.	
<del></del>	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	<b>&gt;</b>	39	0.
	Trusts Taxable at Trust Rates   See instructions for tax computation. Income tax on the amount on line 38	-	1 1	
40			40	
44	Tax rate schedule or Schedule D (Form 1041)		41	
	Proxy tax, See instructions		42	<del> </del>
	Alternative minimum tax (trusts only)			
	Tax on Noncompliant Facility Income. See instructions		43	0.
	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies  Tax and Payments		1 99 1	<u> </u>
Part V			<del>                                     </del>	
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)		-	
	Other credits (see instructions)		-	
-	General business credit. Attach Form 3800		<b>⊢ ,</b>	
	Credit for prior year minimum tax (attach Form 8801 or 8827)		<b>-  .</b> ∄	
	Total credits. Add lines 45a through 45d		45'e	
	Subtract line 45e from line 44	<b></b>	46	0.
		Other (attach schedule)	47	
	Total tax Add lines 46 and 47 (see instructions)		48	0.
	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2		49	0.
	Payments: A 2017 overpayment credited to 2018	<del> </del>	-	
	2018 estimated tax payments 50b		-  '	
	Tax deposited with Form 8868		-	
d	Foreign organizations: Tax paid or withheld at source (see instructions) 50d		-	
	Backup withholding (see instructions) 50e		-	
f	Credit for small employer health insurance premiums (attach Form 8941)		-	
9	Other credits, adjustments, and payments: Form 2439		1 1	
	Form 4136 Other Total ▶ 50g		-  ,	
	Total payments. Add lines 50a through 50g		\$1	
	Estimated tax penalty (see instructions). Check if Form 2220 is attached 🕨 📖		<u> </u>	
	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	<b>•</b>	53	
	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid		54	
	Enter the amount of line 54 you want: Credited to 2019 estimated tax	Refunded	55	
Part V	Statements Regarding Certain Activities and Other Information (see	instructions)		
	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other a			Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign co	untry		
	here <b>&gt;</b>			_ <u>X</u>
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to	o, a foreign trust?		X
	If "Yes," see instructions for other forms the organization may have to file.			
58	Enter the amount of tax-exempt interest received or accrued during the tax year 🕨 \$			
0:	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any known of preparer to the correct of the cor	d to the best of my knowl owledge	edge and bellef, it is	true,
Sign	l		May the IRS discuss	this return with
Here	Signature of officer Date VICE PRESIDI		he preparer shown	
	Signature of officer Date Title	<u></u>	nstructions)? X	Yes No
	Print/Type preparer's name Preparer's signature Date	Check	if PTIN	
Paid	VICKI L. VICKI L.	self- employed		
Prepa	rer VANDENBERG, CPA VANDENBERG, CPA 05/14/		P0010	
Use O	niv Firm's name ► PLANTE & MORAN, PLLC	Firm's EIN	<u>38−13</u>	357951
230 0	750 TRADE CENTRE WAY, STE. 300			4566
	Firm's address ► PORTAGE, MI 49002	Phone no.	<u> 269-567-</u>	
823711 01-	09-19		Form	1 <b>990-T</b> (2018)

Schedule A - Cost of Goods	Sold. Enter	method of inven	tory va	aluation N/A					
1 Inventory at beginning of year	1		6	Inventory at end of year	r		6		0.
2 Purchases	2		7	Cost of goods sold. Su	ıbtract 1	ine 6			
3 Cost of labor	3			from line 5. Enter here	and in f	Part I,			
4 a Additional section 263A costs				line 2			7		
(attach schedule)	4a		8	Do the rules of section	263A (\	with respect to		Yes	No
b Other costs (attach schedule)	4b			property produced or a	cquired	I for resale) apply to			
5 Total Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income (	From Real	Property and	Pers	onal Property L	ease	d With Real Prop	erty)		
(see instructions)									
1. Description of property									
(1)								·	
(2)									
(3)									
(4)									
		ed or accrued				3(a) Deductions directly	connect	ad with the Income in	
(a) From personal property (if the perconnection personal property is more 10% but not more than 50%)	centage of than	(b) From real a of rent for p the rer	nd perso personal p nt is base	nal property (if the percentagoroperty exceeds 50% or if d on profit or income)	ge	columns 2(a) ar	nd 2(b) (a	ttach schedule)	· · · · · · · · · · · · · · · · · · ·
(1)	<u> </u>								
(2)									
(3)									
(4)									
Total	0.	Total			0.	<b>.</b>			
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	(A)	<b>•</b>		<u> </u>	0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<b>&gt;</b>		0.
Schedule E - Unrelated Deb	t-Financed	Income (see	ınstruc	ctions)					
			2	. Gross income from		<ol><li>Deductions directly control to debt-finance</li></ol>			
1. Description of debt-fir	anced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	s
						(attach schedule)	ĺ	(attach schedule)	
(1)							+		
(2)	-	•					1		
(3)									
(4)									
4. Amount of average acquisition debt on or allocable to debt-innanced property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property n schedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	(c	8. Allocable deducti column 6 x total of col 3(a) and 3(b))	
(1)				%					
(2)				%					
(3)				%					
(4)				%					
						nter here and on page 1, Part I, line 7, column (A)		nter here and on page Part I, line 7, column (	
Totals				▶		0			0.
Total dividends-received deductions in	<u>icluded in colu</u> mn	18					•		0.
								Form 990-T	(2018)

(2)				
(3)				
(4)				
Nonexempt Controlled Orga	anizations			_
7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)			<u> </u>	
			Add columns 5 and 10 Enter here and on page 1, Part I,	Add columns 6 and 11 Enter here and on page 1, Part I,

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

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

line 8, column (A)

0.

line 8, column (B)

0.

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

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

Schedule J - Advertising Income (see instructions)

# Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
2)						
3)			į			-
4)						
otals (carry to Part II, line (5))	0.	0.				c
, (1)						Farm 990-T (20

Form **990-T** (2018)

Form 990-T (2018) HOPE COLLEGE

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

1. Name of periodical	2. Gross advertising Income .	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	▶ 0.	0.		٠. ٠.	t 4 6 4 4	0
<u>-</u>	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)		-		Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	▶ 0.	٥.	· ` `			0

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		<b>\</b>	0.

Form 990-T (2018)

HOPE COLLEGE

#### FOOTNOTES

STATEMENT 1

IN FISCAL YEAR 6/30/18, THE UNIVERSITY REPORTED AN ADDITION TO ITS UNRELATED BUSINESS INCOME, PURSUANT TO IRC SEC. 512(A)(7), OF \$9,838. ON DECEMBER 20, 2019, SEC. 512(A)(7) WAS REPEALED RETROACTIVELY TO ITS ORIGINAL EFFECTIVE DATE. AS A RESULT, THE \$9,838 ADDITION TOUBLIS NOW INCORRECT. AS THEONLY IMPACT ON THE 6/30/18 AND 6/30/19 FORMS 990-T IS TO ADJUST THE AMOUNT OF THE NET OPERATING LOSS CARRYOVER, THIS CARRYOVER HAS BEEN ADJUSTED ON THIS 6/30/19 TAX RETURN, FROM \$3,758,466 TO \$3,768,304. THE CARRYOVER NOW CONSISTS OF THE FOLLOWING:

6/30/02: \$26,361 6/30/03: \$249,245 6/30/04: \$256,246 6/30/05: \$153,455 6/30/06: \$262,533 6/30/07: \$157,348 6/30/08: \$270,665 6/30/09: \$511,987 6/30/10: \$141,691 6/30/11: \$31,171 6/30/12: \$130,334 6/30/13: \$28,622 6/30/15: \$238,783 6/30/16: \$267,567 6/30/17: \$237,384 6/30/18: \$804,912

ORM 990-T INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 2
DESCRIPTION	NET INCOME OR (LOSS)
PINEBRIDGE PRIVATE EQUITY PORTFOLIO IV SECONDARY, L.P	7
ORDIC CAPITAL IX BETA, L.P ORDINARY BUSINESS INCOME LOSS)	-7,151
ROW HOLDINGS SELF STORAGE FUND, L.P ORDINARY BUSINESS NCOME (LOSS)	-42,913
VISTA EQUITY PARTNERS FUND VI, L.P ORDINARY BUSINESS ENCOME (LOSS) PIFF REAL ESTATE PARTNERS II - ORDINARY BUSINESS INCOME	-10,479
LOSS) PIFF REALTY & RESOURCES III - ORDINARY BUSINESS INCOME	-221
LOSS) PIGER GLOBAL PIP X PARTNERS, L.P ORDINARY BUSINESS	-876
NCOME (LOSS) ENHAM COMMODITY PARTNERS FUND V, L.P ORDINARY BUSINESS	-244
CNOME (LOSS) CLEXPOINT FUND II, L.P ORDINARY BUSINESS INCOME (LOSS)	-66,592 36,675
CAYNE ANDERSON ENERGY FUND VII, L.P ORDINARY BUSINESS COME (LOSS) CANYE ANDERSON ENERGY FUND VIII, L.P ORDINARY BUSINESS	-708,760
INCOME (LOSS) VISTA FOUNDATION FUND III, L.P ORDINARY BUSINESS INCOME	-169,192
LOSS) PLEXPOINT FUND III, L.P ORDINARY BUSINESS INCOME (LOSS) PLEXPOINT SPECIAL ASSETS FUND, L.P ORDINARY BUSINESS	-28,512 -733
CHEAPOINT SPECIAL ASSETS FOND, D.F ORDINART BOSINESS CLEXPOINT FUND III AIV (CAYMAN), L.P ORDINARY BUSINESS	1,067
NCOME (LOSS) PLEXPOINT SPECIAL ASSETS FUND AIV (CAYMAN), L.P	-1,455
ORDINARY BUSINESS INCOME EURO CHOICE SECONDARY, L.P ORDINARY BUSINESS INCOME	-1,295 -81
LOSS) BRIDGE STREET CAPITAL FUND I, LP - ORDINARY BUSINESS ENCOME (LOSS)	1,637
COTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5	-999,118
FORM 990-T OTHER DEDUCTIONS	STATEMENT 3
DESCRIPTION	AMOUNT
TAX PREPARATION FEE	10,000
TOTAL TO FORM 990-T, PAGE 1, LINE 28	10,000

HOPE` COLLEGE 38-1381271

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 4
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/02	66,608.	40,247.	26,361.	26,361.
06/30/03	249,245.	0.	249,245.	249,245.
06/30/04	256,246.	0.	256,246.	256,246.
06/30/05	153,455.	0.	153,455.	153,455.
06/30/06	262,533.	0.	262,533.	262,533.
06/30/07	157,348.	0.	157,348.	157,348.
06/30/08	270,665.	0.	270,665.	270,665.
06/30/09	511,987.	0.	511,987.	511,987.
06/30/10	141,691.	0.	141,691.	141,691.
06/30/11	31,171.	0.	31,171.	31,171.
06/30/12	130,334.	0.	130,334.	130,334.
06/30/13	28,622.	0.	28,622.	28,622.
06/30/15	238,783.	0.	238,783.	238,783.
06/30/16	267,567.	0.	267,567.	267,567.
06/30/17	237,384.	0.	237,384.	237,384.
06/30/18	804,912.	0.	804,912.	804,912.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	3,768,304.	3,768,304.

### SCHEDULE M (Form 990-T)

# Unrelated Business Taxable Income for Unrelated Trade or Business

For calendar year 2018 or other tax year beginning JUL 1, 2018 and ending JUN 30, 2019

2018

OMB No 1545-0687

ENTITY

Department of the Treasury Internal Revenue Service (99) ▶ 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 HOPE COLLEGE			38-13		
ι	Unrelated business activity code (see instructions)   72111					
	escribe the unrelated trade or business   CONFERENCE	E C	ENTER AND CAT	ERING		· · · · · · · · · · · · · · · · · · ·
Pai	TI Unrelated Trade or Business Income	(A) Income	(B) Expense	es	(C) Net	
1 a	Gross receipts or sales				-	-
b	Less returns and allowances c Balance ▶	1c				
2	Cost of goods sold (Schedule A, line 7)	2		<del>-</del>		
3	Gross profit, Subtract line 2 from line 1c	3_		<del> </del>		
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	2,593,626.	2,769,9	85.	-176,359
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				
0	Exploited exempt activity income (Schedule I)	10				
1	Advertising income (Schedule J)	11		<del>-</del>		
2	Other income (See instructions, attach schedule)	12	2,593,626.	2,769,9	25	-176,359
13	Total. Combine lines 3 through 12	•				
Pai	Deductions Not Taken Elsewhere (See instruct deductions must be directly connected with the u				cept f	or contributions,
14				·	14	<del>                                     </del>
14 15	Compensation of officers, directors, and trustees (Schedule K)				15	<del></del>
16	Salaries and wages Repairs and maintenance				16	
17	Bad debts				17	<del></del>
8	Interest (attach schedule) (see instructions)				18	
9	Taxes and licenses				19	
.O					20	·
:0 !1	Charitable contributions (See instructions for limitation rules)  Depreciation (attach Form 4562)		21 [		20	
2	Less depreciation claimed on Schedule A and elsewhere on return		22a		22b	
3	•		[ ZZd ]		23	
4	Depletion  Contributions to deferred compensation plans				24	
5	·				25	
6	Employee benefit programs  Excess exempt expenses (Schedule I)				26	
7	Excess readership costs (Schedule J)				27	
, 8	Other deductions (attach schedule)				28	
9	Total deductions. Add lines 14 through 28				29	0
9 0	Unrelated business taxable income before net operating loss deductions.	ction 9	Subtract line 29 from line	13	30	-176,359
1	Deduction for net operating loss arising in tax years beginning on o				Ju	2,0,333
•	instructions)	, unto	January 1, 2010 (000		31	
	11.01.001.01.01					

LHA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 31 from line 30

Schedule M (Form 990-T) 2018

Form 990-T (2018) HOPE COLL				38-138	1271	ļ	Page 3	
Schedule A - Cost of Goods	Sold. Enter	method of inven	tory valuation		30 230			
1 Inventory at beginning of year	1	1,101,100 01 11,101	6 Inventory at end of year	ır		6		
2 Purchases	2		7 Cost of goods sold. Subtract line 6					
3 Cost of labor	3		from line 5. Enter here					
4 a Additional section 263A costs			line 2	۵. ۲۰۱,	7			
(attach schedule)	4a		8 Do the rules of section	vith respect to	<u> </u>	Yes	No	
<b>b</b> Other costs (attach schedule)	4b	-	property produced or a		•			
5 Total. Add lines 1 through 4b	5		the organization?	.oquii ou	tor result/ apply to			
Schedule C - Rent Income		Property and		ease	With Real Prop	ertv)	<b>!</b>	<u></u>
(see instructions)	(1.10111110011							
Description of property	······································						,	
(1) HAWORTH CONFEREN	CE AND I	EARNING	CENTER					
(2)	CH MID I	EIHUIIIO	CENTER					
(3)								
(4)								
	2. Rent receiv	ed or accrued			0(-10-4			
rent for personal property is more than			nd personal property (if the percental personal property exceeds 50% or if it is based on profit or income)	ge	3(a) Deductions directly connected with the Income in columns 2(a) and 2(b) (attach schedule)  SEE STATEMENT 6			ı
(1) 0.			2,593,626.			2,76	9,9	85.
(2)			····					
(3)								
(4)								
Total	0.	Total	2,593,6	26.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		ter	2,593,6	26.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (8)	<b>▶</b> 2,76	9,9	85.
Schedule E - Unrelated Deb		Income (see						
			2. Gross income from		Deductions directly con to debt-finance		ole	
1. Description of debt-fit	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)		
		<del></del> -				-		
(1)				1		<del></del>		
(2)		<del></del>						
(3)	<u>·</u>							
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		6. Column 4 divided by column 5		7. Gross Income reportable (column 2 x column 6)	(column 6 x to	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))		
	(attac	h schedule)		ļ		<u> </u>		
(1)	ļ		- %	<del> </del>		+		
_(2)	ļ		%	<del> </del>		<del></del>		
_(3)	ļ -	······································	<u>%</u>	-	<del></del>	<del></del>		
(4)	l			<del> </del>		+		
					nter here and on page 1, Part I, Ilne 7, column (A)	Enter here an Part I, Ilne 7,		
Totala			<b>•</b>	1		1		

Form 990-T (2018)

Total dividends-received deductions included in column 8

FORM 990-T (M)	DEDUCTIONS	CONNECTED	WITH RENTAL	INCOME	STATEMENT 6
DESCRIPTION			ACTIVITY NUMBER	AMOUNT	TOTAL
SALARIES & WAGES REPAIRS & MAINTE TAXES & LICENSES DEPRECIATION EMPLOYEE BENEFIT OTHER DEDUCTIONS	ENANCE S	- SUBTOTA	 L - 2	377,620. 19,240. 95,587. 257,769. 116,738. 1,903,031.	2,769,985.
TOTAL TO FORM 99	00-т, schedui	LE C, COLUI	MN 3		2,769,985.

#### **SCHEDULE M** (Form 990-T)

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

OMB No 1545-0687

ENTITY

2018

For calendar year 2018 or other tax year beginning  $\,$  JUL  $\,$  1 ,  $\,$  2018  $\,$  , and ending  $\,$  JUN  $\,$  30 ,  $\,$  2019 ► Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury Internal Revenue Service (99)

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

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

Employer identification number Name of the organization 38-1381271 HOPE COLLEGE 713940 Unrelated business activity code (see instructions) ▶ INDOOR TENNIS CENTER Describe the unrelated trade or business Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 614,099. 1a Gross receipts or sales 614,099. **b** Less returns and allowances c Balance 17,324. Cost of goods sold (Schedule A, line 7) 2 596,775. 596,775. Gross profit Subtract line 2 from line 1c 3 4a 4 a Capital gain net income (attach Schedule D) 4b b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach 5 statement) Rent income (Schedule C) 6 Unrelated debt-financed income (Schedule E) 7 7 Interest, annuities, royalties, and rents from a controlled 8 organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) 10 10 Advertising income (Schedule J) 11 11 Other income (See instructions, attach schedule) 12 596,775. 596,775. 13 13 Total, Combine lines 3 through 12

Part II 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)	14	
15	Salaries and wages	15	411,942.
16	Repairs and maintenance	16	2,648.
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	
20	Charitable contributions (See instructions for limitation rules)	20	
21	Depreciation (attach Form 4562) 21 303,156.		
22	Less depreciation claimed on Schedule A and elsewhere on return 22a 257,769.	22b	45,387.
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	132,034.
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule) SEE STATEMENT 5	28	109,417.
29	Total deductions. Add lines 14 through 28	29	701,428.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-104,653.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see	•	
- •	instructions)	31	
32	Unrelated business taxable income. Subtract line 31 from line 30	32	-104,653.
<del></del>		- 1 1-	L. M. (F 000 T) 0040

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

Ρ	ao	e	3

HOPE COLL	EGE				38-138	1271	<u> </u>	
Schedule A - Cost of Goods	Sold. Enter	method of invent	ory valuation RET	'AIL				
1 Inventory at beginning of year	1	26,558.	6 Inventory at end of year	ar		6	25,638.	
2 Purchases	2	16,404.	7 Cost of goods sold. S	ubtract I	ine 6			
3 Cost of labor	3		from line 5. Enter here	and in F	Part I,			
4a Additional section 263A costs			line 2			7	17,324.	
(attach schedule)	4a		8 Do the rules of section	263A (\	vith respect to		Yes No	
b Other costs (attach schedule)	4b		property produced or a	acquired	for resale) apply to			
5 Total. Add lines 1 through 4b	5	42,962.	the organization?				X	
Schedule C - Rent Income (	From Real	Property and	Personal Property L	ease.	d With Real Prop	erty)		
(see instructions)								
Description of property								
(1)							· · · · · ·	
(2)				-				
(3)				_				
(4)								
	2. Rent receiv	ed or accrued						
(a) From personal property (if the perc rent for personal property is more 10% but not more than 50%)	centage of than	of rent for pe	nd personal property (if the percenta ersonal property exceeds 50% or if it is based on profit or income)	ige	<b>3(a)</b> Deductions directly columns 2(a) ai	connecte nd 2(b) (at	d with the Income in tach schedule)	
(1)								
(2)								
(3)								
(4)								
Total	0.	Total		0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	(A)	<b>•</b>		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<u> </u>	0.	
Schedule E - Unrelated Deb	t-Financed	Income (see	nstructions)	,				
			2. Gross income from		<ol><li>Deductions directly con to debt-finant</li></ol>			
1. Description of debt-fin	and areasets		or allocable to debt-	(a)	(b) Other deductions			
1. Description of debt-in	anceo property		financed property	'	(attach schedule)		` (attach schedule)	
				ļ				
(1)				-		-		
(2)				-				
(3)				<del> </del>		-		
(4)	<del> </del>			ļ.,		<del>   </del>		
<ol> <li>Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)</li> </ol>	of or a debt-fina	adjusted basis illocable to nced property n schedule)	6. Column 4 divided by column 5		7. Gross Income reportable (column 2 x column 6)	(c	Altocable deductions olumn 6 x total of columns 3(a) and 3(b))	
(1)			%					
(2)			%					
(3)			%			ļ	<u> </u>	
(4)			%			<u> </u>		
					nter here and on page 1, Part I, line 7, column (A)		nter here and on page 1, Part I, line 7, column (B)	
Totals			•		0	•	0.	
Total dividends-received deductions in	icluded in columi	18				•	0.	
							Form 990-T (2018)	

FORM 990-T (M)	OTHER DEDUCTIONS	STATEMENT 5
DESCRIPTION		AMOUNT
TRAVEL		1,347.
HOSPITALITY		521.
SUPPLIES		14,137.
PHOTOCOPIER		218.
TELEPHONE		811.
UTILITIES		42,703.
WATER SERVICE		4,218.
SEWER SERVICE		3,812.
EQUIPMENT		1,716.
BANK CARD CHARGES		14,803.
OUTSIDE SERVICES		1,209.
REFUSE REMOVAL		4,827.
INSURANCE PROPERTY		1,106.
FOOD SERVICE		2,454.
PROGRAM COSTS		11,216.
DUES & MEMBERSHIPS		1,608.
SPACE RENTAL		2,711.
TOTAL TO SCHEDULE M, PART	r II, LINE 28	109,417.

49819\_\_1

#### 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, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

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

OMB No 1545-0123

Name

Employer identification number

HOPE COLLEGE

38-1381271

│ Part Ⅰ │ Short-Term Capital G	ains and Losses (See	instructions)			
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gair or loss from Form(s) 894	า 9	(ħ) 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)	i 	combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked		193.			-193.
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked					
4 Short-term capital gain from installment sa	es from Form 6252, line 26 or 3	7		4	
5 Short-term capital gain or (loss) from like-k	and exchanges from Form 8824			5	
6 Unused capital loss carryover (attach comp	utation)			6	1
7 Net short-term capital gain or (loss). Comb				7	-193.
Part II Long-Term Capital G	ains and Losses (See	instructions)			
See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gair or loss from Form(s) 894 Part II, line 2, column (g	) 9,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
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 transaction on Form 8949, leave this line blank and go line 8b.	s S				
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on		4 400			4 000
Form(s) 8949 with Box E checked	5,978.	1,139.			4,839.
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked					
11 Enter gain from Form 4797, line 7 or 9				11	
12 Long-term capital gain from installment sa		7		12	
13 Long-term capital gain or (loss) from like-k	and exchanges from Form 8824			13	
14 Capital gain distributions				14	4 020
15 Net long-term capital gain or (loss) Comb		n h		15	4,839.
Part III   Summary of Parts I a	nd II				<del></del>
16 Enter excess of net short-term capital gain	• • •			16	1 (16
17 Net capital gain. Enter excess of net long-te			<b>'</b> )	17	4,646.
18 Add lines 16 and 17. Enter here and on For	· -	oper line on other returns.		18	4,646.
Note: If losses exceed gains, see Capital lo	sses in the instructions.				
JWA For Paperwork Reduction Act Notice	e, see the Instructions for Form	1120.			Schedule D (Form 1120) 2018

82 105 1 01-03-19

Department of the Treasure Internal Revenue Service

# 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

Social security number or taxpayer identification no.

38-1381271

HOPE COLLEGE						38-1	381271
Before you check Box A, B, or C bell statement will have the same informa broker and may even tell you which b	ation as Form 10:	you received any 99-B Either will s	r Form(s) 1099-B show whether you	or substitute statem ir basis (usually you	nent(s) from r cost) was i	your broker. A su reported to the IF	bstitute S by your
Part I Short-Term. Transact	ions involving capit	al assets you held	1 year or less are ge	enerally short-term (see	instructions)	. For long-term	
transactions, see page 2 Note You may aggregate al codes are required Enter the	short term transace totals directly on t	tions reported on f Schedule D, line 1a	Form(s) 1099 B show	ving basis was reported to report these trans	ed to the IRS a	and for which no ac	ljustments or ctions)
You must check Box A, B, or C below. If you have more short-term transactions than will	Check only one bo	x. If more than one b	ox applies for your sho	rt-term transactions, comp	lete a separate	Form 8949, page 1, for	
(A) Short-term transactions re	,	•	•	•	Note abov	ve)	
(B) Short-term transactions rep	•	•	•	eported to the IRS			
(C) Short-term transactions no	1			<del></del>	Adiustmant	if any to gain as	
1 (a)	(b)	(c) Date sold or	(d) Proceeds	(e) Cost or other	loss. If you	, if any, to gain or u enter an amount	(h) Gain or (loss).
Description of property (Example 100 sh. XYZ Co.)	Date acquired (Mo , day, yr.)	disposed of	(sales price)	basis. See the	in column (	g), enter a code in See instructions.	Subtract column (e)
(Example 100 on X12 oo.)	(10.0 ; day; ),	(Mo , day, yr.)		Note below and	(f)	(g)	from column (d) &
				see Column (e) In the instructions	Code(s)	Amount of adjustment	combine the result with column (g)
FLEXPOINT FUND II,				100			100
L.P.				193.	<b>}</b>		<193.
				<u> </u>	-		
· · · · · · · · · · · · · · · · · · ·				<del> </del>			
<del></del>			-		<u> </u>		
				ļ			
				<del> </del>	<del>                                     </del>		
			· · · ·	· · · · · · · · · · · · · · · · · · ·		•	
				<u> </u>			
	<del> </del>			<del>                                     </del>	-		
	_						
2 Totals. Add the amounts in colur							
negative amounts) Enter each to		-					
Schedule D, line 1b (if Box A above is checked), or line 3 (if B	-	_		193.			<193.

adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment, 823011 11-28-18 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2018)

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

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

Social security number or taxpayer identification no.

38-1381271

TODE.	COLLEGE
HOPE.	ししししょしゃんきゃん

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

(F) Long-term transactions not	reported to you	on Form 1099 E	3	·			<del>,</del>
1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo , day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see Column (e) in the instructions	loss. If y in column	nt, if any, to gain or ou enter an amount (g), enter a code in ). See instructions.  (g)  Amount of	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
mrann arann				the histractions		adjustment	With Column (g)
TIGER GLOBAL							<u> </u>
INVESTMENT			2 017				2 017
PARTNERS X, L.P.			3,917.	<del></del>			3,917.
TIGER GLOBAL PIP X				1 1 2 2			1 1 2 0
PARTNERS, L.P.				1,139.	<u> </u>		<1,139.
FLEXPOINT FUND II,		ļ <u> </u>	2 2 5 4		ļ		0.061
L.P			2,061.	{			2,061.
						-	
							<u> </u>
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	<u> </u>	<del></del>				-	<del>                                     </del>
	<u> </u>	L		<del> </del>	<del> </del>		
2 Totals. Add the amounts in colur negative amounts) Enter each to	tal here and incl	ude on your				1	
Schedule D, line 8b (If Box D abo	ove is checked),	line 9 (if Box E	1				
above is checked), or line 10 (if E	Box F above is cl	hecked)	5,978.	1,139.			4,839.

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.

823012 11-28-18

Form 8949 (2018)