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

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	• *	For cale:	ndar year 2016 or other tax year beginning _JULY	1 ,:	2016, and ending JT	JNE 30, 20	17 .	2	3016	
•	ent of the Treasury evenue Service	► Information about Form 990-T and its instructions is available at <a href="https://www.irs.gov/form990t">www.irs.gov/form990t</a> .  Open to Public Inspection for 501(c)(3).  Open to Public Inspection for 501(c)(3).								
	heck box if Idress changed	7 50.	Name of organization ( Check box if name changed and see instructions )  D Employer identification number							
	dress changed of under section		WESTERN MICHIGAN UNIVERSITY FO			st, see instructions)				
X 501		Print	Number, street, and room or suite no If a P O box,				38-213	38856		
408	· <u></u>	or Type	1903 W MICHIGAN AVE, SEIBERT A						ness activity codes	
408		туре	City or town, state or province, country, and ZIP or				(See ii	nstructioi	ns)	
529			KALAMAZOO, MI 49008-5207	•	•		  525990	)		
	value of all assets	F Gr	oup exemption number (See instructions.	<u>)</u> ▶				<del>-</del>	<del></del>	
	161,479,162	<u> </u>	neck organization type 🕨 🗵 501(c) corp		on 501(c)	trust [	401(a)	trust	Other trust	
			n's primary unrelated business activity	PAS	S THROUGH FRO	OM PARTNE	RSHIP :	INTER	ESTS	
I Dur	ing the tax year,	was the	e corporation a subsidiary in an affiliated grou	up or a	a parent-subsidiary	controlled g	roup? .	. ▶ [	☐ Yes 🗓 No	
If "`	Yes," enter the	name a	and identifying number of the parent corp	oratio	n ▶	_	•			
			PATTI VAN WALBECK			none numbe	r ▶ (20	69)38	7-2365	
Part	Unrelate	d Trad	e or Business Income		(A) Income	(B) E	penses		(C) Net	
1a	Gross receipts	or sale	es					-		
b	Less returns and a	allowance	es c Balance ▶	1c	0					
2	Cost of goods	sold (S	Schedule A, line 7)	2	0					
3	Gross profit. S	ubtract	t line 2 from line 1c	3	0		1.		0	
4a	Capital gain no	et incon	ne (attach Schedule D)	4a					0	
b	Net gain (loss)	(Form 4	4797, Part II, line 17) (attach Form 4797)	4b					0	
С	Capital loss de	eduction	n for trusts	4c					0	
5	Income (loss) fro	m partn	erships and S corporations (attach statement)	5	148,083				148,083	
6	Rent income (		•	6_					0	
7	Unrelated deb	t-financ	ced income (Schedule E)	7_					0	
8	Interest, annuities,	royalties,	and rents from controlled organizations (Schedule F)	8					0	
9	Investment incom	e of a sec	ction 501(c)(7), (9), or (17) organization (Schedule G)	9					0	
10	Exploited exer	npt act	ivity income (Schedule I)	10					0	
11	Advertising inc	come (S	Schedule J)	11					0	
12	•		ructions; attach schedule)	12					0	
13	Total. Combin			13	148,083	<del></del> _	0		148,083	
Part			Taken Elsewhere (See instructions for be directly connected with the unrelated to the connected with the connected with the unrelated to the connected with the c			tions.) (Exc	ept for o	contrib	utions,	
14			cers, directors, and trustees (Schedule K)				. 1	4		
15	Salaries and w						<b>⊢</b> −	5		
16	Repairs and m	•	ance		ENED ·	l	. 1	6		
17	Bad debts .						. 1	7		
18	Interest (attacl	h sched	lule)	را ا			. 1	8		
19	Taxes and lice	nses	fule)	IAY( )	2018 185 34) 2018		. 1	9		
20	Charitable cor	ntributio	ons (See instructions for limitation rules)		641		. 2	0	14,808	
21	Depreciation (	attach f	Form 4562)		写入   [.21]					
22	Less deprecia	tion cla	imed on Schedule A and elsewhere on re	turn	22a		22	2b	0	
23	Depletion .						. 2	3		
24			rred compensation plans				. 2	4		
25	Employee ben	efit pro	grams				. 2	5		
26	•		nses (Schedule I)				. 2	6		
27	Excess reader	ship co	osts (Schedule J)				2	7		
28		•	ach schedule)				_	8		
29			dd lines 14 through 28					9	14,808	
30			xable income before net operating loss de		on. Subtract line 2	29 from line			133,275	
31			eduction (limited to the amount on line 30)				· —	1	133,275	
32			exable income before specific deduction.			ine 30 .		2	0	
33			Generally \$1,000, but see line 33 instruction					3	1,000	
34			taxable income. Subtract line 33 from III				1			
	enter the smal			•	· · · · · ·	· · ·	· 3	4	<u> </u>	
For Pag	perwork Reduct	ion Act	Notice, see instructions.					F	orm 990-T (2016)	

_				4
Ρ	а	a	e	

Part I		x Computation							
		rations Taxable as Corporations is (sections 1561 and 1563) check		•	on. Controlled gro	oup			
	•	our share of the \$50,000, \$25,000,	<del></del> -		rets (in that order)				
	(1) \$	(2) \$	(3) \$						
b		ganızatıon's share of: (1) Addıtiona			\$				
	• •	tional 3% tax (not more than \$100,			\$				
						•	35c		ļ
36		Taxable at Trust Rates. Sec		-		on			
		ount on line 34 from: Tax rate so	<del></del>				36		<u> </u>
37	-	ax. See instructions					37		
38							38	0	1
39		Non-Compliant Facility Income.					39 40		
40		add lines 37, 38 and 39 to line 35c out and Payments	or 36, whichever applies	· · · · · ·	<u></u>	_	40	0	J
		tax credit (corporations attach Form	1118 trusts attach Form 1116	6)	41a				1
41a b	_	redits (see instructions)		´ -	41b				
C		business credit. Attach Form 3800		F	41c				
d		or prior year minimum tax (attach F			41d				
e		redits. Add lines 41a through 41d		_			41e	0	
42		at line 41e from line 40					42	0	1
43		tes Check if from: Form 4255 Form		m 8866 🔲 C	ther (attach schedule)		43		
44		x. Add lines 42 and 43					44	0	· · · · ·
45a	Paymer	nts: A 2015 overpayment credited t	o 2016		45a				
b				. [	45b				
С	Tax dep	oosited with Form 8868		[	<b>45c</b> 10,000				1
d	Foreign	organizations: Tax paid or withhele	d at source (see instruction	ns) .	45d				1
е	Backup	withholding (see instructions)		, .	45e				
f		or small employer health insurance		941)	45f				
g			m 2439						
	Form			•	<b>45g</b> 0		10		
46	•	ayments. Add lines 45a through 4	-				46	10,000	<del> </del>
47		ed tax penalty (see instructions). C				·⊔	47 48		<u> </u>
48		e. If line 46 is less than the total of syment. If line 46 is larger than the				<b>&gt;</b>	49	10 000	
49 50		e amount of line 49 you want Credited		10,00			50	10,000	†
50 Part		atements Regarding Certain					30		L
		time during the 2016 calendar year					her autho	rity Yes	No
51	overa	financial account (bank, securities,	or other) in a foreign cour	ntry? If YE	S. the organizatio	n may	have to	file	
	FinCEN	Form 114, Report of Foreign Ban	k and Financial Accounts.	If YES, en	ter the name of the	ne for	eign cou	ntry	
	here ▶			VARIO			_	х	
52	During th	he tax year, did the organization receiv	e a distribution from, or was it	t the grantor	of, or transferor to,	a fore	ign trust?		х
	-	see instructions for other forms the							
53		ne amount of tax-exempt interest re							
		penalties of perjury, I declare that I have exami prect, and complete Declaration of preparer (ot	ned this return, including accompany	ing schedules	and statements, and to	the bes	t of my know	vledge and be	lief, it is
Sign	<b>.</b>	Orrect, and complete Declaration of preparer (of				ricage		S discuss this	
Here		Patti lan Walveck			TREASURER			eparer shown tions)?	
	Signat	ure of officer	Date Titl				<u> </u>		
Paid		Print/Type preparer's name	Preparer's signature		Date		eck   if	PTIN	
Prep	arer					_	-employed		
Use		Firm's name ▶	<del> </del>		<del></del>		n's EIN ►		
		Firm's address ►				Pho	ne no		

Sche	dule A—Cost of Good	s Sold. Er	nter method of i	nventory :	valuation ▶				
1	Inventory at beginning of	year	1	6	Inventory a	at end of year	6		
2	Purchases		2	7	Cost of	st of goods sold. Subtract			
3	Cost of labor	[	3		line 6 from	line 5. Enter here and	4		
4a	Additional section 263A	A costs			in Part I, lir	те 2	7		
	(attach schedule)		4a	8	Do the rul	les of section 263A (wit	th respect to Yes No		
b	Other costs (attach sche	dule)	4b			roduced or acquired for			
5	Total. Add lines 1 throug	· -	5 (		to the orga	anization?			
Sche	dule C—Rent Income		al Property and	d Person	al Property	Leased With Real Pro	perty)		
	instructions)	•	•				•		
1. Desc	ription of property								
(1)									
(2)				_					
(3)									
(4)									
<u> </u>		2. Rent receiv	ved or accrued						
	om personal property (if the perce personal property is more than 10 more than 50%)		(b) From real a percentage of rent 50% or if the rent	for personal	property exceeds		connected with the income 1 2(b) (attach schedule)		
(1)	<del></del>		<del></del>						
(2)									
(3)					-				
(4)					·				
Total			Total						
(c) Tot	al income. Add totals of colu		nd 2(b) Enter			(b) Total deductions. Enter here and on page	1,		
	nd on page 1, Part I, line 6, co		<u> </u>			Part I, line 6, column (B)	· <b>&gt;</b>		
<u>Sche</u>	dule E—Unrelated De	bt-Financ	ed Income (see	instructio	ns)	1 0 Dad at 1			
	1. Description of debt	-financed pro	perty		income from or to debt-financed	debt-financ	nected with or allocable to ced property		
			•	property		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)		
(1)				<del></del>		(4.1.2.1.2.1.2)	(attach bonouse)		
(2)	<del></del>			<del> </del>			<del> </del>		
(3)	<del></del>			+			<del> </del>		
(4)		· · · · · · · · · · · · · · · · · · ·	-	<del> </del>	<del></del>				
<u>C-7</u>	4. Amount of average	5. Avera	ge adjusted basis	+	Column		9. Alleaghle deductions		
	acquisition debt on or llocable to debt-financed roperty (attach schedule)	debt-fir	r allocable to nanced property ich schedule)	4	Column divided column 5	7. Gross income reportable (column 2 × column 6)	8. Allocable deductions (column 6 × total of columns 3(a) and 3(b))		
(1)					%	<u> </u>			
(2)					%				
(3)					%				
(4)					%				
						Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B)		
Totals					. •	L	<del> </del>		
<u>Total o</u>	dividends-received deduction	ons included	I in column 8 .	<u> </u>		<u>_</u>			
							Form <b>990-T</b> (2016)		

Schedule F—Interest, Ann	uities, Royalties,				anizations (se	e instruc	tions)		
	Exempt Controlled Organizations								
J. Name of controlled 2. Employer identification number		3. Net unrelated income (loss) (see instructions)		4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income		conne	eductions directly ected with income in column 5	
(1)									
(2)									
(3)									
(4)									
Nonexempt Controlled Organi	izations				-				
					10. Part of colum	nn 9 that is	11. D	eductions directly	
7. Taxable Income	8. Net unrelated in (loss) (see instruct			ital of specified yments made	included in the organization's gro	controlling	connec	cted with income in column 10	
(1)									
(2)									
(3)							T		
(4)									
,					Add columns 5 Enter here and c Part I, line 8, co	on page 1,	Enter h	columns 6 and 11 here and on page 1, line 8, column (B)	
Totals	<u> </u>	<u> </u>		<u></u>	<u> </u>				
Schedule G-Investment	Income of a Sect	ion 501(c			zation (see inst	ructions)			
1. Description of income	2. Amount o	of income  3. Deductions directly connected (attach schedule)			4. Set-aside (attach schedi		5. Total deductions and set-asides (col. 3 plus col. 4)		
(1)						_			
(2)		<u></u>							
(3)									
(4)									
	Enter here and					7.00		re and on page 1,	
	Part I, line 9, o	column (A)					Part I, III	ne 9, column (B)	
Totals	. ▶		Arribe to	A ST ST ST	in a same	4 7 (42)			
Schedule I—Exploited Ex	empt Activity Inc	ome, Oth	ner Than	Advertising In	come (see inst	ructions)			
Description of exploited active	2. Gross unrelated business inco from trade of business	ome conn proc	expenses lirectly ected with duction of irelated ess 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. Expe attributa colun	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)							·		
(2)									
(2) (3)									
(4)									
	Enter here and page 1, Part line 10, col (	il page	here and on e 1, Part I, I0, col (B)					Enter here and on page 1, Part II, line 26	
Totals Schedule J—Advertising	Income (see instru	otions)					7 0 7 4 66	l	
	Periodicals Repo		Concoli	datad Racia					
Part I Income From I	Periodicais Repoi	teu on a	Conson		<del>_</del>			<u> </u>	
1. Name of penodical	2. Gross advertising income		. Direct tising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Read	ership	7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)									
(2)				LANGE BELL				1:54	
(3)									
(4)									
Totals (carry to Part II, line (5))	<b>•</b>			<u> </u>			F	orm <b>990-T</b> (2016)	

2 through 7 on a line-		on a Separat	te Basis (For ea	ach periodical li	sted in Part II	, fill in columns
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	<b>•</b>					
Totals, Part II (lines 1-5)	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
Schedule K—Compensation of	Officers, Direc	tors, and Tru	stees (see instru	uctions)		
1. Name			2. Title	3. Percent of time devoted to business		ion attributable to
(1)				%	,	
(2)		-		%		
(3)				%		
(4)			, , , , , , , , , , , , , , , , , , , ,	%	· .	
Total. Enter here and on page 1, Part II, I	ine 14				·	

Form **990-T** (2016)

#### **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No 1545-0172

2016 Attachment

Department of the Treasury Internal Revenue Service (99)

Sequence No 179

Business or activity to which this form relates Name(s) shown on return Identifying number WESTERN MICHIGAN UNIVERSITY FOUNDATION PARTNERSHIP INVESTMENTS 38-2138856 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) . . . 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation, Subtract line 3 from line 2 If zero or less, enter -0- . . . 4 Dollar limitation for tax year. Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property Enter the amount from line 29 . 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 . . . 9 10 Carryover of disallowed deduction from line 13 of your 2015 Form 4562 . . . 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election . . . 15 16 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Don't include listed property.) (See instructions) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2016 . . . 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2016 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (a) Depreciation deduction penod only-see instructions) service 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property 25 yrs. S/L g 25-year property h Residential rental 27.5 yrs. MM S/L property 27.5 yrs. MM S/L i Nonresidential real 39 yrs. MM S/L MM S/L Section C—Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs **b** 12-year S/L c 40-year MM 40 yrs. S/L Part IV Summary (See instructions ) 21 Listed property. Enter amount from line 28 . . . . . 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs

23

Form **4562** (2016)

Pai		I Propert						vehic	eles, ce	rtain a	ircraft,	certair	comp	outers,	and p	operty
		For any ve	•		-		-	rd mile	eage rat	e or de	ducting	lease	expens	e. com	olete or	า <b>lv</b> 24a
		olumns (a)												_	_	,
		—Depreci						See th	e instru							
24a	Do you have ev	vidence to su		siness/inves	tment us	e claime		] Yes [	No_	24b I	"Yes," i	s the evi	idence v	vritten?	☐ Yes	□ No
	(a) e of property (list rehicles first)	(b) Date placed in service	Business/ investment us percentage	se Costoro	d) ther basis	(busin	(e) for depre ness/inves use only)	stment	(f) Recover period		(g) ethod/ nvention		(h) preciation eduction	ı Ek	(i) ected sec cost	
25	Special dep	reciation a			ed listed				service	during	g	<del>                                     </del>		-		
	the tax year										25					
26	Property use	ed more th	an 50% in	a qualified	d busine	ess use	<b>:</b>									
				6		<del>- </del> -				_	_	ļ				
				6						_		ļ				
27	Property use	od 50% or		6	icinecc											
	Property use	<u>eu 50% ()</u>		6	15111655	use 				S/L-		Ι —				
			9					-		S/L-		<del> </del>				
			<del></del>	6						S/L-						
28	Add amount	ts in colum	n (h), lines	25 throug	h 27. E	nter he	re and	on line	21, pag		28					
29	Add amount	ts in colum	n (i), line 2	_					<u> </u>			. ,		29		
^	plete this sect	ion for vobi	oloo usad b						se of Ve		or" or r	alatad n	omen l	f vou na	sudad u	ممامنطم
	ur employees,															enicies
	- Pioyees		Tino quoo				· .		<del></del>		<del>i -</del>		1		<u> </u>	
30							(e) (f) Vehicle 5 Vehicle 6									
31																
32 Total other personal (noncommuting) miles driven																
33	Total miles lines 30 thro	ugh 32 .														
34	Was the ve			personal	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35	Was the veh															
36	Is another vel	hicle availab	le for perso	nal use?							<u> </u>					
	<del></del>	Section	n C—Que	stions for												
	wer these que						to com	npletin	g Section	n B for	vehicle	s used	by emp	oloyees	who ar	en't
	e than 5% ow						11					47	47	- 1	Vaa	No.
37	your employ	yees?				-								• .	Yes	No
38	Do you mai employees?															
39													•			
40	Do you provuse of the v							tain in	formatio 	n from 	your e	nployee	es abou	it the		ı
41	Do you mee	•		-	-								•			
	Note: If you		o 37, 38, 3	39, 40, or 4	41 is "Y	es," do	n't com	plete	Section	B for the	ne cove	red veh	icles.		<u></u>	
Pa	rt VI Amoi	rtization							<del></del>			(-)	— т			
		(a) on of costs		(b) Date amortiz begins	ation	Amo	(c) rtizable ai	mount		(d) Code sect	ion	(e) Amortiza period percent	ation or	Amortiza	(f) tion for th	ıs year
42	Amortization	n of costs t	hat begins			tax ye	ear (see	instru	ctions)							
INT	ANGIBLE DR	ILLING C	COSTS	1/1/20	17			93,2	49	59(e		60	MOS			9,325
42	Amortizatioi	n of costs t	hat bogon	hefore	ur 2016	tay ya	25						42			
	Total. Add		-	_					port				43			9,325

## Form **4626**

Department of the Treasury Internal Revenue Service

### **Alternative Minimum Tax—Corporations**

► Attach to the corporation's tax return.

▶ Information about Form 4626 and its separate instructions is at www.irs.gov/form4626.

OMB No 1545-0123

2016

Employer identification number

38-2138856 WESTERN MICHIGAN UNIVERSITY FOUNDATION Note: See the instructions to find out if the corporation is a small corporation exempt from the alternative minimum tax (AMT) under section 55(e). 1 133,275 2 Adjustments and preferences: Depreciation of post-1986 property 2a 567 Amortization of certified pollution control facilities. . . . . . . . 2b Amortization of mining exploration and development costs . . . . 2c Amortization of circulation expenditures (personal holding companies only) . . . . . 2d Adjusted gain or loss 2e (59)2f f Long-term contracts . . . . . Merchant marine capital construction funds. . Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only) . 2h 2i Passive activities (closely held corporations and personal service corporations only) . . . 2j Loss limitations . . 2k . . . . . . . . . . 21 Depletion 1 240 Tax-exempt interest income from specified private activity bonds . . . . . 2m Intangible drilling costs 2n Other adjustments and preferences 20 6,816 Pre-adjustment alternative minimum taxable income (AMTI) Combine lines 1 through 2o. 140,839 Adjusted current earnings (ACE) adjustment: ACE from line 10 of the ACE worksheet in the instructions . . . . . Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a 4b (140,839 Multiply line 4b by 75% (0 75). Enter the result as a positive amount. . . 4c 105,629 Enter the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments. See instructions. Note: You must enter an amount on line 4d (even if line 4b is positive). e ACE adjustment. • If line 4b is zero or more, enter the amount from line 4c 4e If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount 5 Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT 5 140,839 6 126,755 Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a residual 7 7 14,084 Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c): 8 Subtract \$150,000 from line 7 (if completing this line for a member of a controlled group, see instructions). If zero or less, enter -0- . . . . . . . . . Exemption. Subtract line 8b from \$40,000 (if completing this line for a member of a controlled group, 8c 40,000 9 Subtract line 8c from line 7. If zero or less, enter -0- . . . . . . 9 0 10 10 0 Alternative minimum tax foreign tax credit (AMTFTC). See instructions 11 11 12 12 0 Regular tax liability before applying all credits except the foreign tax credit . 13 13 14 Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0-. Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return For Paperwork Reduction Act Notice, see separate instructions. Form **4626** (2016)

#### WESTERN MICHIGAN UNIVERSITY FOUNDATION

38-2138856

Year Ended 6/30/2017

#### STMT 1 - FORM 990-T PART I, LINE 5 - INCOME FROM PARTNERSHIPS AND S CORPORATIONS

	Net Unrelated Business Income
Aether Real Assets I, LP 1515 Wynkoop Street, Suite 310 Denver, CO 80202 FEIN 26-4196882	(55,004)
Aether Real Assets II, LP 1900 Sixteenth Street, Suite 825 Denver, CO 80202 FEIN 45-3359493	232,709
Amberbrook VII, LP 122 East 42nd Street, 37th Floor New York, NY 10017 FEIN 47-5318417	(4,362)
Commonfund Capital Private Equity Partners IV, LP 15 Old Danbury Road P.O. Box 812 Wilton, CT 06897-0812 FEIN 06-1563330	(637)
Commonfund Capital Venture Partners, VI, L.P. 15 Old Danbury Road P.O. Box 812 Wilton, CT 06897-0812 FEIN 06-1605325	(678)
Commonfund Capital International Partners V, L.P. 15 Old Danbury Road P.O. Box 812 Wilton, CT 06897-0812 FEIN 16-1720038	(9)
Commonfund Capital Venture Partners VII, LP 15 Old Danbury Road P.O. Box 812 Wilton, CT 06897-0812 FEIN 16-1720044	6,284

#### WESTERN MICHIGAN UNIVERSITY FOUNDATION

38-2138856

Year Ended 6/30/2017

#### STMT 1 - FORM 990-T PART I, LINE 5 - INCOME FROM PARTNERSHIPS AND S CORPORATIONS

	Net Unrelated Business Income
Commonfund Capital Private Equity Ptnrs VI, LP 15 Old Danbury Road P.O. Box 812 Wilton, CT 06897-0812 FEIN 16-1720029	(4,717)
Commonfund Capital Natural Resources Partners VII, LP 15 Old Danbury Road P.O. Box 812 Wilton, CT 06897-0812 FEIN 51-0605779	(7,585)
Commonfund Capital Natural Resources VIII 15 Old Danbury Road P.O. Box 812 Wilton, CT 06897-0812 FEIN 26-3180228	26,351
Harvest MLP Income Fund II LLC 100 West Lancaster Ave, 2nd Floor Wayne, PA 19087 FEIN 45-3134479	78
Homestead Capital USA Farmland Fund I, LP 101 Mission Street, Suite 505 San Francisco, CA 94105 FEIN 90-1022354	9,885
Homestead Capital USA Farmland Fund I, LP 101 Mission Street, Suite 505 San Francisco, CA 94105 FEIN 90-1022354	(2)
Q-BLK Real Assets II LP Natural Resources Portfolio 601 Union Street, 56th Floor Seattle, WA 98101 FEIN 20-4552399	19,007

#### WESTERN MICHIGAN UNIVERSITY FOUNDATION

#### 38-2138856

Year Ended 6/30/2017

#### STMT 1 - FORM 990-T PART I, LINE 5 - INCOME FROM PARTNERSHIPS AND S CORPORATIONS

	Net Unrelated
	Business Income
Resource Land Fund V, LP	(88,714)
1530 16th Street, Suite 300	
Denver, CO 80202	
FEIN 47-4875503	
Siguler Guff Distressed Opportunities Fund	125
III, LP	
825 Third Avenue, 10th Floor	
New York, NY 10022	
FEIN 26-1412407	
Siguler Guff Distressed Opportunities Fund	317
IV, LP	
825 Third Avenue, 10th Floor	
New York, NY 10022	
FEIN 27-2203321	
The Blackstone Group L.P.	127
345 Park Avenue	
New York, NY 10154	
FEIN 20-8875684	
Truebridge-Kauffman Fellows Endowment Fund II, LP	(667)
1350 Environ Way	
Chapel Hill, NC 27517	
FEIN 32-0300512	
WCP Real Estate Fund IV, LP	15,575
40 Danbury Rd.	
Wilton, CT 06897	
FEIN 46-2682326	
Total Net Unrelated Business Income (Loss)	148,083

Western Michigan University Foundation 38-2138856 Year Ended 6/30/2017

#### STMT 2 - PART II, LINE 20 - CHARITABLE CONTRIBUTIONS DEDUCTIONS

	Regular Tax
Contribution carryover from:	
Y/E 6/30/12	22,445,351
Y/E 6/30/13	50,999,124
Y/E 6/30/14	54,563,113
Y/E 6/30/15	34,740,720
Y/E 6/30/16	54,029,019
Carryforward to 6/30/17	216,777,327
carryiorward to 6/30/17	210,777,327
Contributions for Y/E 6/30/17	47,371,573
Less deducted for Y/E 6/30/17	(14,808)
Less expired 6/30/12 carryover	(22,430,543)
Balance to carryforward to 6/30/18	241,703,549

#### WESTERN MICHIGAN UNIVERSITY FOUNDATION FEJN 38-2138856 YEAR ENDED JUNE 30, 2017

STMT 3 - NET OPERATING LOSS SCHEDULE	REGULAR TAX	ALTERNATIVE MINIMUM TAX
LOSS CARRIED FORWARD FROM 2013	197,537	176,308
LOSS CARRIED FORWARD FROM 2014	195,411	169,585
LOSS CARRIED FORWARD FROM 2015	429,517	411,689
TOTAL CARRIED FORWARD TO 2016	822,465	757,582
USED IN 2016	(133,275)	(126,755)
AVAILABLE TO CARRY TO 2017	689,190	630,827