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Form	990-T (20	018)				Page 2
Par	t III	Total Unrelated Business Taxable Income				
33	Total (of unrelated business taxable income computed from all unrelated trades or businesses (see		•		
		ions)	33			
34	Amoun	ts paid for disallowed fringes	34		10,	080.
35		idn for net operating loss arising in tax years beginning before January 1, 2018 (see				
		ons)	35		10,	080.
36		of unrelated business taxable income before specific deduction. Subtract line 35 from the sum				
		33 and 34	36			
37	Specific	deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37		1,	000.
38	•	ed business taxable income. Subtract line 37 from line 36 If line 37 is greater than line 36,				
	enter th	e smaller of zero or line 36	38			0.
Par	t IV	Tax Computation				
39	Organi	zations Taxable as Corporations. Multiply line 38 by 21% (0 21)	39			
40	Trusts	Taxable at Trust Rates. See instructions for tax computation Income tax on				
	the amo	ount on line 38 from Tax rate schedule or Schedule D (Form 1041)	40			
41	Proxy t	ax. See instructions	41			
42		tive minimum tax (trusts only)	42			
43		Noncompliant Facility Income. See instructions	43			
44	Total. A	dd lines 41, 42, and 43 to line 39 or 40, whichever applies	44			
Par	t V	Tax and Payments				
45 a	Foreign	tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a				
b	Other c	redits (see instructions)				
C	Genera	business credit Attach Form 3800 (see instructions)				
		or prior year minimum tax (attach Form 8801 or 8827)				
			45e			
		t line 45e from line 44	46			
		xes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule) .	47			
		x. Add lines 46 and 47 (see instructions)	48			0.
		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49			
		nts A 2017 overpayment credited to 2018				
		stimated tax payments · · · · · · · · · · · · · · · · · · ·				
		osited with Form 8868				
		organizations Tax paid or withheld at source (see instructions)				
		withholding (see instructions)				
		· · · · · · · · · · · · · · · · · · ·				
g		redits, adjustments, and payments Form 2439				
51		orm 4136 Other Total ▶ [50g] ayments. Add lines 50a through 50g	51			
52	•	ed tax penalty (see instructions) Check if Form 2220 is attached.	52			
		ed tax penalty (see instructions). Check it Form 2220 is attached	53			
		yment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54			
55	-	e amount of line 54 you want Credited to 2019 estimated tax	55			
Par		Statements Regarding Certain Activities and Other Information (see instructions				
		time during the 2018 calendar year, did the organization have an interest in or a signature or		authority	Yes	No
	-	financial account (bank, securities, or other) in a foreign country? If "Yes," the organization ma		- 1		Ī
	FinCEN	Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	foreign	country		
	here 🕨					Х
57	During 1	the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign	gn trust	>		Х
	_	see instructions for other forms the organization may have to file				
58		e amount of tax-exempt interest received or accrued during the tax year ▶ \$				
	l tn	nder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the billie, correct and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	est of my	knowledge a	ind beli	ef, it is
Sign	1 L	Oliver Andrew Manual Ma	y the li	RS discuss	this i	etum
Here				preparer sh		~ I
	3		instructio	ns)? X Ye	6	No
Paid		Print/Type preparer's name Preparer's signature Date Check Self-ei		PTIN	1045	. 5
Prep	arer		mployed	P012		
Use		Firm's name ► BDO USA, LLP Firm's address ► 200 OTTAWA AVE NW STE 300, GRAND RAPIDS, MI 49503 Phone	EIN F	13-538: 6-774-7	1000	
		Phone	uo or	Form 95		
ISA				i Other S. 2	- U - I	(2015)

JSA

COMMUNITY FOUNDATION OF GREATER FLINT 38-2190667 Form 990-T (2018) Page 3 Schedule A - Cost of Goods Sold. Enter method of inventory valuation > Inventory at end of year ______ Inventory at beginning of year 1 Purchases Cost of goods sold. Subtract line 2 3 Cost of labor 3 6 from line 5 Enter here and in 7 4a Additional section 263A costs No Do the rules of section 263A (with respect to (attach schedule) 4a b Other costs (attach schedule) . property produced or acquired for resale) apply to the organization? _ Total. Add lines 1 through 4b . 5 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 accrued (a) From personal property (if the percentage of rent (b) From real and personal property (if the 3(a) Deductions directly connected with the income for personal property is more than 10% but not percentage of rent for personal property exceeds in columns 2(a) and 2(b) (attach schedule) more than 50%) 50% or if the rent is based on profit or income) (1) (2) (3) (4) (b) Total deductions. (c) Total income. Add totals of columns 2(a) and 2(b) Enter Enter here and on page 1, here and on page 1, Part I, line 6, column (A) Part I, line 6, column (B) Schedule E - Unrelated Debt-Financed Income (see instructions) 3. Deductions directly connected with or allocable to 2 Gross income from or debt-financed property 1. Description of debt-financed property allocable to debt-financed (a) Straight line depreciation (b) Other deductions property (attach schedule) (attach schedule) (1) (2) (3) (4) 4. Amount of average 5. Average adjusted basis 6 Column 8 Allocable deductions acquisition debt on or of or allocable to 7 Gross income reportable 4 divided

by column 5

(column 6 x total of columns (column 2 x column 6) 3(a) and 3(b)) % % % % Enter here and on page 1, Enter here and on page 1, Part I, line 7, column (A) Part I, line 7, column (B)

Form 990-T (2018)

(1)

(2)

(3)

allocable to debt-financed

property (attach schedule)

Total dividends-received deductions included in column 8.

debt-financed property

(attach schedule)

Page 4

Schedule F-Interest, Annu	uities, Royalties				n Contro			ati	ons (see	instruction	ons)		
1. Name of controlled organization	2 Employer identification numb		3. Net	unrelat	ed income structions)	4. Total	of speci	of specified in the controllin organization's gross incor		olling	ng connected with in		
(1)													
(2)							_					<u> </u>	· · · · · · · · · · · · · · · · · · ·
(3)												\perp	
(4)					<u> </u>	<u> </u>			Ĺ <u>.</u>				
Nonexempt Controlled Organi	zations												
7. Taxable Income	8 Net unrelated in (loss) (see instruc				otal of specific		inc	lude	t of column ed in the co ation's gross	ntrolling			eductions directly cted with income in column 10
(1)											<u> </u>		
(2)													
(3)													
(4)													
Totals		tion 5	01(c)	<u></u> (7), (9), or (17) Orga	En Pa	ter h art i,	olumns 5 a ere and on line 8, colui	page 1, mn (A)	Er	nter h	columns 6 and 11 lere and on page 1, line 8, column (B)
1. Description of income	2. Amount of	income			3. Deduction directly cor (attach sch	nected				t-asides schedule)		5. Total deductions and set-asides (col 3 plus col 4)	
(1)													
(2)													
(3)								_					
(4) Totals ▶	Enter here and Part I, line 9, c	olumn (A)											er here and on page 1 rt I, line 9, column (B)
Schedule I – Exploited Exe	mpt Activity In	come,	Other	r Tha	n Adverti	sing In	come	e (s	ee instru	ctions)			
1. Description of exploited activity	2. Gross unrelated business income from trade or business	dı conne prod un	ected wr uction or related ess incor	ith of	4 Net incon from unrelat or business 2 minus col If a gain, co cols 5 thro	ed tradé (column umn 3) ompute	from	Gross income from activity that is not unrelated business income G. Expenses attributable to column 5			7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)		
(1)	 				-							+	
(2)				-+								_	
(3)	 							_				\top	
(4)				$\neg +$								\dashv	
Totals	Enter here and on page 1, Part I, line 10, col (A)	page	ere and 1, Part I 0, col (E	1, [L.			Enter here and on page 1, Part II, line 26
Schedule J- Advertising In	icome (see instr	uctions)						_					
Part I Income From Per			a Con	solic	lated Bas	is							
1 Name of penodical	2. Gross advertising income	3.	Direct sing cos		4 Advert gain or (los 2 minus co a gain, cor cols 5 thro	ising s) (col ol 3) If npute	5. Circulation 6. Readership costs			7 Excess readership costs (column 6 minus column 5, but not more than column 4)			
(1)				-				_				十	
(2)	 - 			$\neg \neg$								\dashv	
(3)	 							-				\dashv	
(4)	 			-								\dashv	
<u>, , </u>	 			-+						· .		十	
Totals (carry to Part II, line (5))		· · · · · ·	 -					_					990 T (2010)

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Page 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 i	line-by-line basi	s.)				
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 ▶						
	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)						
Schedule K - Compensatio	n of Officers, D	irectors, and Tr	ustees (see insti	ructions)		
1 Name		2. 1	Fitle	3. Percent of time devoted to business	4. Compensatio unrelated	
(1)				%		
(2)				%		
(3) `				%		
(4)				%		
Total. Enter here and on page 1. P	art II. line 14					

Form 990-T (2018)

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB	Nο	1545	5-0687

Department of the Treasury Internal Revenue Service Name of organization

For calendar year 2018 or other tax year beginning ___ ___ , 2018, and ending

► 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).

COMMUNITARY	FOUNDATION	OF	CREATER	FLINT
COMMONTII	LOUNDALTON	Or	GKEAIEK	LPTMI

Employer identification number 38-2190667

Unrelated business activity code (see instructions) ▶ 900099

Par	t 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 ▶	1c			
2	Cost of goods sold (Schedule A, line 7)	2	<u> </u>		
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			
C	Capital loss deduction for trusts	4c	<u></u>		
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Schedule C)	6_	-13,596.		-13,596
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			
2	Other income (See instructions, attach schedule)	12			
3	Total. Combine lines 3 through 12		-13,596.	<u>-</u>	-13,596

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	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	_	
19	Taxes and licenses		
20	Charitable contributions (See instructions for limitation rules)	20	
21	Depreciation (attach Form 4562)		
22	Less depreciation claimed on Schedule A and elsewhere on return 22a	22b	
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs		
26	Excess exempt expenses (Schedule I).	_	
27	Excess readership costs (Schedule J)		
28	Other deductions (attach schedule)		
29	Total deductions. Add lines 14 through 28.		
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-13,596.
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	-13,596.

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

ATTACHMENT 2

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS OR S CORPORATIONS

AETHER REAL ASSETS III, L.P. HGGC FUND II LP JUNIPER CAPITAL II, LP JUNIPER CAPITAL III, LP MONTAUK TRIGUARD FUND V LP PARK STREET CAPITAL NATURAL RESOURCE FUND IV, LP PARK STREET CAPITAL NATURAL RESOURCE FUND V, LP	-3,445. -1,394. -85,682. -43,947. -25,891. 11,235. -3,192.
INCOME (LOSS) FROM PARTNERSHIPS	<u>-152,316.</u>

ATTACHMENT 3

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

PASS-THROUGH SECTION 59(E)(2) EXPENSES OTHER PASS-THROUGH EXPENSES TAX PREPARATION FEES 280,415.

4,135.

PART II - LINE 28 - OTHER DEDUCTIONS

289,454.