`							180				
Form 990-T	E	xempt Orga	nization Bu	sines	ss Inco	me T	ax Ret	iurn	L	OMB No 1545	-0687
		a (aı	nd proxy tax und	der sed	ction 6033	(e))				004	-
•	For cale	ndar year 2017 or other tax yea	ar beginning JUL 1	, 20:	L7 , and end	ing JU	N 30,	201	<u>8</u>	201	
Department of the Treasury			.irs.gov/Form990T for						Ļ	Open to Public Ins	spection for
Internal Revenue Service	1	Do not enter SSN numbe					ation is a 501			501(c)(3) Organiza	tions Only
A Check box if address changed		Name of organization (Check box if name	changed	and see instruc	tions.)			(Emple	oyer identification oyees' trust, see	number
	l <u>.</u>	VERREDING II	NTVDD CTOV							ctions)	
B Exempt under section X 501(c)(3 03	ł F	KETTERING U			-4					8 - 24108 ated business acti	
408(e) 220(e)	Type	Number, street, and room 1700 UNIVER:			structions.					structions)	,
408A 530(a)	. ⊢	City or town, state or pro			nostal code		-				
529(a)			48504	or roreign	i postai code				900	099	
Book value of all assets		F Group exemption numb		<u> </u>							
at end of year 203, 265, 9		G Check organization type		rporation	501	(c) trust		401(a)	trust	Oth	er trust
H Describe the organization	n's primar	y unrelated business activ	vity. > INVEST	MENT	IN LIM	ITED	PARTN			 _	
I During the tax year, was	the corpo	ration a subsidiary in an a	affiliated group or a par	ent-subsi	diary controlled	group?		▶ [Ye	s X No	
If "Yes," enter the name a	and identif	ying number of the paren	t corporation. 🕨								
J The books are in care of										762-992	
		or Business Inc	ome		(A) Inco	me	(B) Ex	penses		(C) Ne	et
1a Gross receipts or sale		, .							1		
b Less returns and allow			c Balance	1c							···
2 Cost of goods sold (S		•		2							
Gross profit. Subtract 4a Capital gain net incon				3 4a		815.					
		rt II, line 17) (attach Form	14797)	4a 4b	•	241.					
c Capital loss deduction			14737)	4c							
		s and S corporations (att	ach statement)	5	-361,	905.			İ		
Rent income (Schedu		, ,	,	6							
Income (loss) from p Rent income (Schedu Unrelated debt-financ Interest, annuities, ro	ed income	e (Schedule E)		7							
	yaltıes, an	d rents from controlled o	rganizations (Sch. F)	8							
)		501(c)(7), (9), or (17) or	rganization (Schedule G	i) 9							
10 Exploited exempt acti	•	` '		10							
11 Advertising income (S		<i>'</i>	a mentenim o	11	21	074					
12 Other income (See in:			PATEMENT 2	12	-338,	874.				-338,	075
13 Total. Combine lines Part II Deductio	Not	Takan Elagushan	e (See instructions		 					-330,	9/5.
(Except for d	contribut	ions, deductions must	be directly connecte	ed with the	ne unrelated	pusiness	income)		1		
14 Compensation of off	icers, dire	ctors, and trustees (Sche	dule K)		1 _ †	1EUL			14		
15 Salaries and wages	,	,	,		26			၂၇၂	15		
16 Repairs and mainten	ance				E2-664	MAY 1	6 2019	ĮΫ	16		
17 Bad debts					Ш			RS-OSC	17		
18 Interest (attach sche	dule)				O	GDF	NIII		18		
19 Taxes and licenses								ليب.	19		
	•	nstructions for limitation	rules) STATEM	ENT	_	PEMEN	T 3		20		
21 Depreciation (attach 22 Less depreciation cla		·				21	· -				
23 Depletion	allileu oli v	Schedule A and elsewhere	e un return			2a			22b 23		
24 Contributions to defe	erred com	nensation plans							24		
25 Employee benefit pro		pondation plans							25		
26 Excess exempt exper	-	edule I)							26		
27 Excess readership co	•	•							27		
28 Other deductions (at		·							28		
29 Total deductions A	dd lines 1	4 through 28							29		0.
		ome before net operating		ct line 29				_	30	-338,	975.
	-	limited to the amount on	•			STAT	EMENT	5	31		055
		ome before specific dedu			30				32_	-338,	
		\$1,000, but see line 33 in:	·	•	ham I CC	4 m u 44 m	allas et		33_	<u>_</u>	000.
34 Unrelated business line 32	LAXADIE II	come Subtract line 33 f	rom iine 32. IT line 33 is	s greater i	nan iine 32, en	ter the sm		or 소오	34	-338.	975

723701 01-22-18 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2017) 1 2017.05050 KETTERING UNIVERSITY

lere	Thomas D Ageis Signature of officer	Date Tree	asurer	th	May the IRS discuss to the preparer shown be instructions)?	elow (see	
	Print/Type preparer's name	Preparer's signature	Date	Check self- employed	ıf PTIN		
Paid Preparer	LYNNE M. HUISMANN						
Use Only	Firm's name ► PLANTE & MOR	Firm's EIN	38-13	57951			
,	2601 CAMBR						
	Firm's address > AUBURN HIL	LS, MI 48326		Phone no. (<u>5-7100</u>	
						^^^ '	

Form **990-T** (2017)

FORM 990-T	OTHER INCOME	STATEMENT 2
DESCRIPTION		AMOUNT
SECTION 512(A)(7) PARKING INCOME	21,874.
TOTAL TO FORM 99	0-T, PAGE 1, LINE 12	21,874.
FORM 990-T	CURRENT YEAR CASH CONTRIBUTIONS	STATEMENT 3
DESCRIPTION		AMOUNT
	T ENERGY PARTNERS FUND VI, LP STREET REAL ESTATE FUND VIII LP	67. 56.
TOTAL CURRENT YE	AR CASH CONTRIBUTIONS	123.

FORM 990-T	CONTRIBUTIONS SUMMARY		STATEMENT 4
QUALIFIED	CONTRIBUTIONS SUBJECT TO 100% LIMIT		
FOR TAX	OF PRIOR YEARS UNUSED CONTRIBUTIONS YEAR 2012 YEAR 2013		
FOR TAX	YEAR 2014 YEAR 2015 6 YEAR 2016 27		
TOTAL CARE	RYOVER RENT YEAR 10% CONTRIBUTIONS	33 123	
	RIBUTIONS AVAILABLE ICOME LIMITATION AS ADJUSTED	156 0	_
EXCESS 100	CONTRIBUTIONS CONTRIBUTIONS CONTRIBUTIONS	156 0 156	-
ALLOWABLE	CONTRIBUTIONS DEDUCTION		- 0
TOTAL CONT	RIBUTION DEDUCTION		0

KETTERING UNIVERSITY

FORM 990-T	990-T NET OPERATING LOSS DEDUCTION		STATEM	ENT 5				
TAX YEAR	LOSS SUSTAINED	LOS PREVIC APPI	USLY		OSS AINING	AVAILA THIS Y		
06/30/16 06/30/17	56,902. 114,060.		0.		56,902. 114,060.			
NOL CARRYO	VER AVAILABLE THIS	YEAR			170,962.	17	0,962.	
FORM 990-T		ME (LOSS)	FROM PAI		HIPS	STATEM NET I		
WCP REAL E	STATE FUND IV, LP EET REAL ESTATE FU	ND VIII		,045.	0.		19,045.	
LP COLUMBIA C	APITAL EQUITY PART			,607. ,158.	0. 0.		-4,607. -1,158.	
	NEDCY DADWNEDC FIN	D VIT						
ARCLIGHT E	NERGY PARTNERS FUN GY CAPITAL FUND XI	-		,899. ,196.	0. 0.		18,899. 18,196.	

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

	KETTERING UNIVERSI				38-	2410852
ı	Part I Short-Term Capital Ga	ins and Losses - Ass	ets Held One Year	or Less		
to (Thi	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gail or loss from Form(s) 894 Part I, line 2, column (g	9,	(h) Gain or (loss) Subtract column (e) from column (d) and 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					
3	Totals for all transactions reported on					
_	Form(s) 8949 with Box C checked			<u> </u>		
4	Short-term capital gain from installment sales	from Form 6252, line 26 or 37	7		4	
5	Short-term capital gain or (loss) from like-kin	d exchanges from Form 8824			5	
6	Unused capital loss carryover (attach comput	ation)			6	(
	Net short-term capital gain or (loss). Combin				. 7	
	Part II Long-Term Capital Gai	ns and Losses - Ass	ets Held More Thai	n One Year		Т
to (Thi	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gail 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)
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					531.
	Enter gain from Form 4797, line 7 or 9				11	284.
	2 Long-term capital gain from installment sales	·	7		12	
	B Long-term capital gain or (loss) from like-kin	d exchanges from Form 8824			13	
	Capital gain distributions				14	045
	Net long-term capital gain or (loss). Combin		<u>n h</u>	-	15	815.
	Part III Summary of Parts I and					
	6 Enter excess of net short-term capital gain (li		' '	_	16	015
	Net capital gain. Enter excess of net long-term				17	815.
18	Add lines 16 and 17. Enter here and on Form		oper line on other returns. If	tne corporation	4-	015
	has qualified timber gain, also complete Part				18	815.
	Note: If losses exceed gains, see Capital loss	es in the instructions.				

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

Schedule D (Form 1120) 2017

JWA

Part IV Alternative Tax for Corporations with Qualified T	imber Gain. Complete Pa	rt IV only if the corporation has	<u></u>
qualified timber gain under section 1201(b). Skip this part if you are filing	g Form 1120-RIC. See instruction	ons.	
19 Enter qualified timber gain (as defined in section 1201(b)(2))	19		,,
20 Enter taxable income from Form 1120, page 1, line 30, or the applicable line			•
of your tax return	20		'
21 Enter the smallest of; (a) the amount on line 19; (b) the amount on line 20; or			
(c) the amount on Part III, line 17	21		
22 Multiply line 21 by 23.8% (0.238)	1 1	22	
23 Subtract line 17 from line 20. If zero or less, enter -0-	23		
24 Enter the tax on line 23, figured using the Tax Rate Schedule (or applicable tax rate) a	ppropriate for		
the return with which Schedule D (Form 1120) is being filed	1	24	,
25 Add lines 21 and 23	25		İ
26 Subtract line 25 from line 20. If zero or less, enter -0-	26		
27 Multiply line 26 by 35% (0.35)		27	
28 Add lines 22, 24, and 27		28	_
29 Enter the tax on line 20, figured using the Tax Rate Schedule (or applicable tax rate) a	appropriate for the		
return with which Schedule D (Form 1120) is being filed		29	
30 Enter the smaller of line 28 or line 29. Also enter this amount on Form 1120, Schedul	e J, line 2, or the		
applicable line of your tax return		30	
		Schedule D (Form	1120) 2017

721052 03-01-18

taxpayer identification no.

38-2410852

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 long term. 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

KETTERING UNIVERSITY

X (F) Long-term transactions not	reported to you	on Form 1099-B	}				
1 (a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and	l ın column	nt, if any, to gain or ou enter an amount (g), enter a code in). See instructions.	(h) Gain or (loss). Subtract column (e) from column (d) &
		(Mo , day, yr)		see Column (e) in the instructions	(f) Code(s)	(g) Amount of adjustment	combine the result with column (g)
FROM K-1 ARCLIGHT						1	
ENERGY PARTNERS							
FUND VI, LP							<2.
FROM K-1 WCP REAL							1 2
ESTATE FUND IV, LP				 	<u> </u>		533.
						<u> </u>	- 3331
							
	· · · · · · · · · · · · · · · · · · ·				-		_
				 	 		
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		<u> </u>		 	<u> </u>		
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2 Totals. Add the amounts in colu	mno (d) (o) (c) c	and (h) (ou htro-t					
negative amounts) Enter each to		-					
Schedule D, line 8b (if Box D ab							E 2 1
above is checked), or line 10 (if	Box F above is o	checked)	L	1	l	l	531.

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 (2017)

56965 1