Form <b>990-T</b>	E	Exempt Orgai		sine	ss Income T	ax Retyrr	ı	OMB No 1545-0047	——
		•	nd proxy tax und			J00/4	ĺ	2040	
	For ca	lendar year 2019 or other tax yea			and ending JUN		_	2019	
Department of the Treasury Internal Revenue Service	<b>•</b>	► Go to www - Do not enter SSN numbe	•		ons and the latest inform de public if your organiz		. 5	Open to Public Inspections (0) (c)(3) Organizations (	on for Only
A Check box if address changed		Name of organization (	Check box if name of	hanged	and see instructions.)		Emplo	yer identification numbe byees' trust-see ctions)	ər
B Exempt under section	Print	BELOIT COLLEGE						39-0808497	
X 501(c )(3 )	Or Tyron	Number, street, and room	or suite no If a P O. bo	x, see II	nstructions.			ted business activity co istructions)	ode
408(e) 220(e)	Туре	700 COLLEGE ST.			<del></del>		] `		
408A 530(a) 529(a)		City or town, state or prov BELOIT, WI 53511		r foreig	n postal code		53200	0	
C Book value of all assets at end of year	•	F Group exemption numb	per (See instructions )	<b>&gt;</b>					
197,195,	962.	<b>G</b> Check organization type	e ► X 501(c) cor	poration	1 501(c) trust	401(a	) trust	Other tru	ıst (
H Enter the number of the	organiza	ition's unrelated trades or b	usinesses.	2	Describe	the only (or first) u	nrelated		
trade or business here	ALTI	ERNATIVE INVESTMEN	TS		If only one	, complete Parts I-V	If more	than one,	
describe the first in the b	lank spa	ice at the end of the previou	ıs sentence, complete Pa	irts I an	d II, complete a Schedule	e M for each addition	nal trade	or	
business, then complete	Parts III	-V.							
I During the tax year, was	the corp	ooration a subsidiary in an a	affiliated group or a parei	nt-subs	idiary controlled group?	<b>&gt;</b>	Ye:	s X No	
If "Yes," enter the name a	ınd iden	tifying number of the paren	t corporation 🕨						
J The books are in care of					Teleph	ione number 🕨 6	08-363		
Part - Unrelated	d Trac	de or Business Inc	ome		(A) Income	(B) Expense	s	(C) Net	
1a Gross receipts or sale	es					5.	- 1		
<b>b</b> Less returns and allow	wances		c Balance	1c		',		/	
2 Cost of goods sold (S	Schedule	A, line 7)		2					
3 Gross profit Subtract	line 2 fi	rom line 1c		3					
4a Capital gain net incom	ne (attac	h Schedule D)		4a	35,775.			35,7	75.
, ,	•	art II, line 17) (attach Form	4797)	4b	-2,636.			-2,6	36.
c Capital loss deduction		* * * * * * * * * * * * * * * * * * * *	, , ,	4c					
•		ship or an S corporation (at	tach statement)	5	-6,491	STMT 2		-6,4	91.
6 Rent income (Schedu	•	sinp or all o corporation (at	and of the control of	6					
7 Unrelated debt-finance		ne (Schedule F)		7			t		
		nd rents from a controlled o	organization (Schedule F)	8	<del></del>				
· ·		on 501(c)(7), (9), or (17) or	_				1		
			yanızanon (Schedule d)	10			<del></del>		
10 Exploited exempt activ	-			#1		-	<del></del>		
11 Advertising income (S 12 Other income (See ins		•	,	12					
		•		13	26,648.			26,6	4.8
		ot Taken Elsewher	e (See instructions for		<del></del>				<u></u>
(Deductions	must b	be directly connected wi	th the unrefated busin	ess in	come )				
<del></del>							T 44 T		—
•	icers, di	rectors, and trustees (Sche	dule K.)				14		
15 Salaries and wages			1				15		
16 Repairs and mainten	nance	•					16		
17 Bad debts							17	<del></del>	
18 Interest (attach sche	idule) (s	ee instructions) 🔑					18		
19 Taxes and licenses	_	; = 0.00			احما		19		
20 Depreciation (attach		,			20		┩┃		
21 Less depreciation cla	aimed oi	n Schedule A and elsewher			<u> 21a </u>		21b	<del></del>	
22 Depletion			RECE	IVE	ט ן		22		
23 Contributions to defe		mpensation plans	1		ာတ္တု		23		
24 Employee benefit pro	-		MAR 1	<b>7</b> 120	21 RS-0SC		24		
25 Excess exempt experience.					- 18t		25		
26 Excess readershup co			L		<del></del>		26		
27 Other deductions (at			OGDE	.N, I	JI ]		27		
28 Total deductions A	dd lines	14 through 27	<u> </u>				48		0.
29 Unrelated business t	axable ı	ncome before net operating	loss deduction Subtrac	t line 2	3 from line 13		29	26,6	48.
30 Deduction for net op	erating	loss arısıng ın tax years beç	ginning on or after Janua	ry 1, 20	)18		j		
(see instructions)						1	10		0.
31 Unrelated business t	ax <u>able</u> i	ncome Subtract line 30 fro	m line 29				31	26,6	
923701 01 27-20 LHA <b>Fo</b>	or Paper	work Reduction Act Notice	, see instructions			<del></del>		Form <b>990-T</b> (2	2019)

59 E	nter	the amount of tax-exempt interest received or ac	crued during the tax year	\$					<u> </u>
Sign		Under penalties of perjury. I declare that I have examined correct, and complete. Declaration of preparer (other than	this return including accompanying so taxpayer) is based on all information of	chedules and of which prep	d statements and to the parer has any knowledg	best of my know	wledge	and belief, it is true,	
Here		Signature of officer			FINANCE & P	LANNING	the pr	the IRS discuss this retuing reparer shown below (selections)? X Yes	
		Print/Type preparer's name	Preparer's signature		Date	Check	ıf	PTIN	
Paid Prepa	arar	REBEKUH ELEY	Rebatuh Eley	ļ	02/17/21	self- employe	ed	P01247672	
Use (		le . b DOM DO IID				Firm's EIN	<u> </u>	42-0714325	

30 S. WACKER DR. STE 3300

Firm's address > CHICAGO, IL 60606

Form 990-T (2019)

(312) 384-6000

Phone no

Schedule A - Cost of Good	s Sold. Enter	method of inver	ntory v	raluation N/A		<del></del>		<del>-</del>	
1 Inventory at beginning of year	1		$\overline{}$	Inventory at end of yea	ır		6		
2 Purchases	2		7	Cost of goods sold. St	ubtract l	line 6			
3 Cost of labor	3			from line 5. Enter here	and in I	Part I,		ĺ	
4a Additional section 263A costs				line 2			7	<u></u>	
(attach schedule)	4a		8	Do the rules of section	263A (1	with respect to		Yes	No
<ul><li>Other costs (attach schedule)</li></ul>	4b		╛	property produced or a	cquired	l for resale) apply to			]
5 Total Add lines 1 through 4b	5			the organization?					<u>L</u>
Schedule C - Rent Income (see instructions)	(From Real	Property and	i Per	sonal Property L	ease	d With Real Prop	erty	<b>)</b>	
1 Description of property									
(1)				-					
(2)									
(3)			•						
(4)									
	2 Rent receiv	ed or accrued				24.12.1.1			
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	than	of rent for	personal	conal property (if the percentage property exceeds 50% or if ed on profit or income)	ge	3(a) Deductions directly columns 2(a) a	connect nd 2(b) (	cted with the income in attach schedule)	ı
(1)									
(2)									
(3)				<del>-</del>					
(4)									
Total	0.	Total			0.	<u> </u>			
(c) Total income Add totals of columns here and on page 1, Part I, line 6, column	1 (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	ot-Financed	Income (see	ınstru	ctions)					
			1 2	Gross income from		3 Deductions directly con to debt-finance			
1 Description of debt-fit	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	s
(1)			1						
(2)			7					<u></u>	
(3)									
(4)									
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property n schedule)	-	Golumn 4 divided by column 5		7 Gross income reportable (column 2 x column 6)		8 Allocable deducti (column 6 x total of co 3(a) and 3(b))	
(1)			1	%		· _ · _ · _ · _ · _ · _ · _ · _ · _ · _			
(2)				%					
(3)			7	%					
(4)				%					
						nter here and on page 1 Part I line 7, column (A)		Enter here and on page Part I, line 7 column (	
Totals				<b>•</b>		C			٥.
Total dividends-received deductions in	ncluded in column	18					-		0.

Schedule F - Interest, A	nnuitie	s, Royalt	ies, an					ations	s (see ins	struction	ns)
				Exempt	Controlled O	rganizati	ions				
1 Name of controlled organizate	on	2. Emp identific numl	ation	3 Net uni (loss) (see	related income e instructions)	<b>4</b> To	tal of specified ments made	includ	rt of column 4 led in the cont ation's gross	rolling	6 Deductions directly connected with income in column 5
(1)											<del></del> -
(2)				<del> </del>				-		-+	
(3)				<del> </del>		·		<del>                                      </del>			
				<del> </del>		<del> </del>	<del></del>	<del>                                     </del>		<del></del>	
(4)		L.—		<u> </u>			<del></del> -	<u> </u>		——l	<del></del>
Nonexempt Controlled Organiz											
7. Taxable Income		nrelated incom- ee instructions		9 Total	of specified payr made	nents	10. Part of column the controllingross	mn 9 tha ing organ s income	nization's	11 De with	eductions directly connected h income in column 10
(1)				<del>                                     </del>							
(1)				<del>                                     </del>							<del></del>
(2)											
(3)				<del></del>							
(4)				L							
							Add colun Enter here and line 8, c		1 Partl,		dd columns 6 and 11 nere and on page 1, Part I line 8, column (B)
Totals						_			0.		0.
Schedule G - Investmer		ne of a S	ection	501(c)(7	7), (9), or (	17) Org	ganization			-	
							3 Deduction	ns	<del></del>		5. Total deductions
	iption of inco	ne 			2. Amount of	income	directly conne (attach sched	cted	4 Set- (attach s	asides schedule)	and set-asides (col 3 plus col 4)
(1)									ļ		<del>_</del>
(2)					<u> </u>						
(3)	_								l		
(4)						_					
					Enter here and Part I, line 9, co						Enter here and on page 1, Part I, line 9, column (B)
Totals				•		0.	4 " " " " " " " " " " " " " " " " " " "		•		0.
Schedule I - Exploited I	-	Activity	Incom	e, Other	Than Adv	ertisir	ng Income				
<del></del>	<del></del> ′				A Net man	na (tana)			I		
Description of exploited activity	2 G unrelated incom trade or t	business e from	directly of with pro of un	penses connected oduction related s income	4 Net incomfrom unrelated business (cominus colum gain compute through	I trade or Ilumn 2 n 3) If a e cols 5	5 Gross inco from activity t is not unrelat business inco	that ted	6. Exp attribut colui	able to	7 Excess exempt expenses (column 6 minus column 5 but not more than column 4)
(1)											
(2)			-		<u> </u>					-	T
(3)											<del> </del>
							<del> </del>				<del> </del>
(4)	Enter her page 1 line 10	Part I,	page	re and on 1 Part I, col (B)	,	,,,,,	• 1 /	-	<u> </u>		Enter here and on page 1 Part II line 25
Totals -		0.[		0.	[	2					0.
Schedule J - Advertisin	g Incon	ne (see ir	struction	ns)							
Part I Income From F	Periodic	als Repo	rted o	n a Con	solidated	Basis					
1. Name of periodical		2 Gross advertising income		3 Direct ertising costs	or (loss) (c				6 Read		7. Excess readership costs (column 6 minus column 5 but not more than column 4)
(1)											
(2)					$\neg$				l —		1
(3)			<del></del>		_				<del>                                     </del>		<b>]</b>
(4)	<del></del>		+		$\dashv$				<del> </del>		i
(")			+-				+		<b></b>		<del></del>
Totals (carry to Part II, line (5))	<b>•</b>		0.	(	o.						0.

Form 990-T (2019) BELOIT COLLEGE	<b>E</b>						39 -	0808497	Page :
Part II Income From Perio columns 2 through 7 on a	·		Separ	ate Basis (For eac	h perio	dical listed	I in Pa	rt II, fill in	
Name of periodical	2 Gross advertising income	<b>3</b> D advertisii	rect ng costs	4 Advertising gain σ (loss) (col 2 minus col 3) If a gain compute cols 5 through 7		rculation come	6	Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)			_						
(2)									
(3)									
(4)		,							
Totals from Part I	0.		0.						0.
	Enter here and on page 1, Part I, line 11, col (A)	Enter her page 1 line 11,							Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5)	0.		0.						0.
Schedule K - Compensation	n of Officers, D	Directo	rs, and	Trustees (see ins	structio	ns)		•	
1 Name				2 Title		3 Percen time devote busines	ed to		pensation attributable related business
(1)				-			%		
(2)							%		
(3)							%		
(4)							%		
Total Enter here and on page 1, Part II, I	ine 14				·		•	·	0.
				<del>_</del> :					

Form 990-T (2019)

0.

FORM 990-T	CONTRIBUTIONS	STATEMENT 5	
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT	
50% CASH ONLY	N/A	77.	
TOTAL TO FORM 990-T, PAGE 2, I	LINE 34	77.	

# SCHEDULE M (Form 990-T)

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

OMB No 1545-0047

ENTITY

Employer identification number

39-0808497

OMB NG 1545-0047

2019

Department of the Treasury Internal Revenue Service

Name of the organization

BELOIT COLLEGE

For calendar year 2019 or other tax year beginning JUL 1, 2019 and ending JUN 30, 2020

► 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

	Inrelated Business Activity Code (see instructions) 532000 CONFERENCES &	RENTA	AL INCOME			
Pai	Socied the difference that or Education		(A) Income	(B) Expense	s	(C) Net
	Gross receipts or sales					
b	Less returns and allowances c Balance	1c				
2	Cost of goods sold (Schedule A, line 7)	2				
3	Gross profit Subtract line 2 from line 1c	3				
4 a	Capital gain net income (attach Schedule D)	4a		,		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		, , ,		
С	Capital loss deduction for trusts	4c		, ,		
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5				
6	Rent income (Schedule C)	6				
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled				7	• • • • • • • • • • • • • • • • • • • •
_	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)					
•	organization (Schedule G)	9			1	
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule) STMT 7	12	3,505.			3,505.
13	Total. Combine lines 3 through 12	13	3,505.			3,505.
	Deductions Not Taken Elsewhere (See instruct directly connected with the unrelated business in			ductions ) (Dec	<del>  </del>	must be
14	Compensation of officers, directors, and trustees (Schedule K)				14	
15	Salaries and wages				15	
16	Repairs and maintenance				16	<del> </del>
17	Bad debts				17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses		امما	4 013	19	
20	Depreciation (attach Form 4562)		20	4,013.	-	4 013
21	Less depreciation claimed on Schedule A and elsewhere on return		21a		21b	4,013.
22	Depletion				22	
23	Contributions to deferred compensation plans				23	
24	Employee benefit programs				24	<del></del>
25	Excess exempt expenses (Schedule I)				25	
26	Excess readership costs (Schedule J)		CDD CM3 MOVEN	ım 0	26	0.102
27	Other deductions (attach schedule)		SEE STATEMEN	A.T. Q	27	8,193.
28	Total deductions. Add lines 14 through 27			10	28	12,206.
29	Unrelated business taxable income before net operating loss deduced business taxable income			e 13	29	-8,701.
30	Deduction for net operating loss arising in tax years beginning on o	r after .	January 1, 2018 (see		1 1	

31 Unrelated business taxable income Subtract line 30 from line 29

STMT 9

instructions)

BELOIT COLL	EGE				39-0808497
FORM 990-T	(M)	OTHER	INCOM	3	STATEMENT 7
DESCRIPTION					AMOUNT
CONFERENCE	REVENUES				3,505.
TOTAL TO SCI	HEDULE M, PART I,	LINE 12			3,505.
FORM 990-T	(M)	OTHER	DEDUC'	TIONS	STATEMENT 8
DESCRIPTION					AMOUNT
DIRECT CONFI	ERENCE EXPENSES CES				3,570. 4,623.
TOTAL TO SC	HEDULE M, PART II	, LINE 27			8,193.
SCHEDULE M	NET	OPERATING	LOSS	DEDUCTION	STATEMENT 9
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOU APPLI	SLY	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19	203.			203.	203.
NOL CARRYOV	ER AVAILABLE THIS	YEAR		203.	203.

### **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				Emplo	oyer identıfıcati	on number
BELOIT COLLEGE				39 -	0808497	
Did the corporation dispose of any investmen	t(s) in a qualified opportur	nity fund during the tax y	ear?	L	► Yes	X No
If "Yes," attach Form 8949 and see its instruc	tions for additional require	ements for reporting you	r gain or loss			
Part I Short-Term Capital Gair	ns and Losses (See	instructions)				
See instructions for how to figure the amounts to enter on the lines below	(4)	(a)	(0) 64		(h) a	> 0.1.
This form may be easier to complete if you	(d) Proceeds	(e) Cost (or other basis)	(g) Adjustments to gail or loss from Form(s) 894	9	(ii) Gain or (lo column (e) from	column (d) and
round off cents to whole dollars	(sales price)	(or other basis)	Part I line 2, column (g	) 	combine the result	t 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 <b>Box A</b> checked						
Totals for all transactions reported on					1	
Form(s) 8949 with <b>Box B</b> checked						<del></del>
3 Totals for all transactions reported on						
Form(s) 8949 with <b>Box C</b> checked						1,456.
4 Short-term capital gain from installment sales t	rom Form 6252, line 26 or 37	7		4		
5 Short-term capital gain or (loss) from like-kind	exchanges from Form 8824			5		
6 Unused capital loss carryover (attach computat	ion)			6	(	)
7 Net short-term capital gain or (loss) Combine				7		1,456.
Part II Long-Term Capital Gain	s and Losses (See	nstructions)	<del></del>			
See instructions for how to figure the amounts to enter on the lines below	(d)	(e) Cost	(g) Adjustments to gain	n	(h) Gain or (lo	ss) Subtract
This form may be easier to complete if you round off cents to whole dollars.	Proceeds (sales price)	Cost (or other basis)	or loss from Form(s) 894 Part II line 2, column (g		column (e) from o combine the result	column (d) and
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 <b>Box E</b> checked				_		
10 Totals for all transactions reported on			1	1	}	
Form(s) 8949 with <b>Box F</b> checked			<u> </u>			34,319.
11 Enter gain from Form 4797, line 7 or 9				11	ļ	
12 Long-term capital gain from installment sales t	rom Form 6252, line 26 or 3	7		12		
13 Long-term capital gain or (loss) from like-kind	exchanges from Form 8824			13		
14 Capital gain distributions				14	ļ	
15 Net long-term capital gain or (loss) Combine		<u>n h</u>		15		34,319.
Part III   Summary of Parts I and	<u> </u>					
16 Enter excess of net short-term capital gain (line	e 7) over net long-term capita	ıl loss (line 15)		16	<u></u>	1,456.
17 Net capital gain Enter excess of net long-term			e 7)	17		34,319.
18 Add lines 16 and 17 Enter here and on Form 1	120, page 1, line 8, or the pro	oper line on other returns		18		35,775.

Note: If losses exceed gains, see Capital Losses in the instructions

LHA

Department of the Treasury 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.

BELOIT COLLEGE						39-08	308497
Before you check Box A, B, or C belo statement will have the same informa broker and may even tell you which b	ation as Form 109	you received any 99-B Either will s	Form(s) 1099-B o show whether you	or substitute statem ir basis (usually you	ent(s) from y r cost) was r	your broker A su eported to the IR	bstitute S by your
Part I Short-Term. Transacti	ions involving capit	al assets you held	1 year or less are ge	nerally short term (see	instructions)	For long term	
transactions, see page 2  Note: You may aggregate all							uistments or
codes are required Enter the	totals directly on S	Schedule D, line 1a	, you aren't required	to report these trans	actions on For	rm 8949 (see instru	ctions)
You must check Box A, B, or C below ( If you have more short term transactions than will	Check only one bo	<ul> <li>If more than one be e or more of the boxes</li> </ul>	ox applies for your shore complete as many for	t-term transactions, comp ms with the same box che	ilete a separate i cked as you nee	Form 8949 page 1 for od	each applicable box
(A) Short term transactions rep							
(B) Short term transactions rep						·	
(C) Short-term transactions no	•	•	-	•			
1 (a)	(b)	(c)	(d)	(e)	Adjustment,	if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds	Cost or other		enter an amount g), enter a code in	Gain or (loss).
(Example 100 sh XYZ Co)	(Mo , day, yr )	disposed of	(sales price)	basis See the	column (f)	See instructions	Subtract column (e) from column (d) &
		(Mo , day, yr )		see Column (e) in	(f)	(g)	combine the result
				the instructions	Code(s)	Amount of adjustment	with column (g)
ABBOTT CAPITAL PRIVATE						•	
EQUITY FUND VI, L							1,456.
· · · · · · · · · · · · · · · · · · ·							
	1						
						•	
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		1=11					
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2 Totals. Add the amounts in colur	nns (d), (e), (g), a	nd (h) (subtract					
negative amounts) Enter each to	tal here and inclu	ıde on your					
Schedule D, line 1b (If Box A abo	ove is checked),	line 2 (ıf Box B					
above is checked), or line 3 (if B					<u></u>		1,456.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2019)				Attachn	nent Sequen	ce No 12A	Page 2
Name(s) shown on return Name an	d SSN or taxpaye	er identification n	o not required if			Social secur	ity number or ntification no.
BELOIT COLLEGE						39-08	308497
Before you check Box D, E, or F bel statement will have the same inform broker and may even tell you which	ation as Form 109 box to check	99-B Either will s	show whether you	ır basıs (usually you	r cost) was r	eported to the IR	S by your
Part II Long-Term. Transact see page 1 Note: You may aggregate a							
codes are required Enter th You must check Box D, E, or F below. If you have more long-term transactions than will	e totals directly on S Check only one bo	Schedule D, line 8a  X If more than one b	, you aren't required ox applies for your long	to report these trans term transactions, compl	actions on For ete a separate Fe	m 8949 (see instru orm 8949 page 2 for e	ctions)
(D) Long-term transactions re	ported on Form(s	) 1099-B showing	g basis was repor	ted to the IRS (see	•		
(F) Long-term transactions no	•	•	•	sported to the ins			
1 (a)	(b)	(c)	(d)	(e)	Adjustment,	if any, to gain or	(h)
Description of property (Example 100 sh XYZ Co)	Date acquired (Mo , day, yr )	Date sold or disposed of (Mo , day, yr )	Proceeds (sales price)	Cost or other basis See the Note below and	in column (column (f)	enter an amount  (a), enter a code in  See instructions  (g)	Gain or (loss). Subtract column (e) from column (d) & combine the result
				see Column (e) In the instructions	Code(s)	Amount of adjustment	with column (g)
ABBOTT CAPITAL PRIVATE							
EQUITY FUND VI, L							34,319.
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2 Totals. Add the amounts in colu							
negative amounts) Enter each to		-					
Schedule D, line 8b (if Box D ab above is checked), or line 10 (if l		-					34,319.
above is discovery, or little 10 (ii	20X : 420VC 13 CI	.55,000		1	L		

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

INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 2
	NET INCOME OR (LOSS)
QUITY FUND VI, L.P ORDINARY	
	4,150
QUITY FUND VI, L.P NET RENTAL	4.5
ייין אין אין אין אין אין אין אין אין אין	45
QUITE FOND VI, L.F OTREK NET	-58
OUITY FUND VI, L.P INTEREST	
<b>2</b> 000000000000000000000000000000000000	118
QUITY FUND VI, L.P DIVIDEND	
	373
QUITY FUND VI, L.P ROYALTIES	57
QUITY FUND VI, L.P OTHER INCOME	
marno ditta in oppinion	-12,517
TNERS VII-A, LP - ORDINARI	1,341
90-T, PAGE 1, LINE 5	-6,491
	QUITY FUND VI, L.P ORDINARY  QUITY FUND VI, L.P NET RENTAL  QUITY FUND VI, L.P OTHER NET  QUITY FUND VI, L.P INTEREST  QUITY FUND VI, L.P DIVIDEND  QUITY FUND VI, L.P ROYALTIES  QUITY FUND VI, L.P OTHER INCOME  TNERS VII-A, LP - ORDINARY

FORM 990-T	OTHER CREDITS AND PA	MENTS	STATEMENT	3
DESCRIPTION			AMOUNT	
FORM 8827, LINE 5C				108.
TOTAL INCLUDED ON FORM	M 990-T, PAGE 2, PART V,	LINE 51G		108.
FORM 990-T	NET OPERATING LOSS DI	EDUCTION	STATEMENT	4
	LOSS PREVIOUSLY	LOSS	AVAILABLE	