

4	DOO T	Exempt Organization Business Income Tax Return	'n	OMB No 1545-06	187				
Form	990-T	(and proxy tax under section 6033(e))		00.					
^		For calendar year 2018 or other tax year beginning, 2018, and ending, 20		2018	j				
Danade	nent of the Treasury	► Go to www.irs.gov/Form990T for instructions and the latest information.		-					
•	Revenue Service	Do not enter SSN numbers on this form as it may be made public if your organization is a 50	01(c)(3).	Open to Public Inspect 501(c)(3) Organization	tion for				
A D	Check box if address changed	Name of organization (loyer identification nu	_				
	npt under section	MADISON COMMUNITY FOUNDATION		loyees' trust, see instruc					
_	01(c 1203)	Number street and room or suite no. If a P.O. hox see instructions	1	39-6038248					
40		Type 111 N FAIRCHILD ST STE 260	111 N FAIRCHILD ST STE 260 E Unrelated business a						
	_	City or town, state or province, country, and ZIP or foreign postal code	(See i	instructions)					
52	• • •	MADISON, WI 53703-2830		900099					
C Book	yalue of all assets	F Group exemption number (See instructions.) ▶							
u	191,879,640	G Check organization type ► ☐ 501(c) corporation ☑ 501(c) trust [401(a)	trust Other	trust				
H En			e the on	nly (or first) unrelat	ted				
tra	ade or business	here ►INVESTING IN LIMITED PARTNERSHIPS . If only one, complete Parts I-V.	If more t	than one, describi	e the				
firs	st in the blank	space at the end of the previous sentence, complete Parts I and II, complete a	Schedule	M for each add	itional				
tra	ade or business,	, then complete Parts III-V.							
I Du	iring the tax year	, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled	group? .	. ▶ ☐ Yes 🗸	No				
If '	"Yes," enter the	name and identifying number of the parent corporation. ▶							
		care of ► CARMEN JESCHKE Telephone numb	er ▶	608-232-1763	ţ				
Part	Unrelate	d Trade or Business Income (A) Income (B) E	xpenses	(C) Net					
1a	Gross receipts	s or sales			1				
b	Less returns and	allowances c Balance ▶ 1c							
2	Cost of goods	sold (Schedule A, line 7)							
3	Gross profit. S	Subtract line 2 from line 1c							
4a	Capital gain no	et income (attach Schedule D) 4a 221,472		221,472	4				
b	Net gain (loss)	(Form 4797, Part II, line 17) (attach Form 4797) 4b							
С	Capital loss de	eduction for trusts							
5	Income (loss) fro	om a partnership or an S corporation (attach statement) 5 (180,198)		(180,198)					
6	Rent income (Schedule C)							
7	Unrelated deb	t-financed income (Schedule E)							
8	Interest, annuities,	royalties, and rents from a controlled organization (Schedule F) 8							
9	Investment incom	e of a section 501(c)(7), (9), or (17) organization (Schedule G)							
10	Exploited exer	mpt activity income (Schedule I) 10							
11	Advertising inc	come (Schedule J)							
12	Other income (See instructions; attach schedule) 12							
13		ne lines 3 through 12		41,274					
Part	Deduction	ns Not Taken Elsewhere (See instructions for limitations on deductions.) (Exc	ept for o	contributions,					
		s must be directly connected with the unrelated business income.)		 _					
14	•	of officers, directors, and trustees (Schedule K)	. 1	14					
15		rages RECEIVED	· —	15	<u> </u>				
16		naintenance		16	<u> </u>				
17		h schedule) (see instructions)	. 1	17	<u> </u>				
18		h schedule) (see instructions)	—	16,099	<u> </u>				
19		alses		19 388	<u> </u>				
20	Charitable cor	ntributions (See instructions for limitation (ules) OGDEN. UT	. 2	20 0					
21	Depreciation (attach Form 4302)							
22		tion claimed on Schedule A and elsewhere on return 22a		2b 147					
23				23					
24		to deferred compensation plans		24	<u> </u>				
25		efit programs		25					
26	P	ot expenses (Schedule I)		26					
27		ship costs (Schedule J)		27					
28		ons (attach schedule)		28 50,878					
29		ons. Add lines 14 through 28		29 67,512					
30		ness taxable income before net operating loss deduction. Subtract line 29 from line		30 (26,238)					
31		et operating loss arising in tax years beginning on or after January 1, 2018 (see instruction		31					
32	Unrelated bus	iness taxable income. Subtract line 31 from line 30	. 3	32 (26,238)					

Cat No 11291J

For Paperwork Reduction Act Notice, see instructions.

Part I	II To	tal Unrelated Business Taxable	Income				
33		unrelated business taxable income of					
	ınstruct	ons)			•	33	(26,238)
34	Amount	s paid for disallowed fringes				34	17,062
35	Deducti	on for net operating loss arising in	n tax years beginning before J	anuary 1, 201	8 (see		
		ons)				35	0
36	Total of	unrelated business taxable income be	efore specific deduction. Subtract	t line 35 from th	ie sum		
	of lines	33 and 34				36	(9,176)
37	Specific	deduction (Generally \$1,000, but see	line 37 instructions for exception	s)		37	1,000
38		<mark>ed business taxable income.</mark> Subtra					
	enter th	e smaller of zero or line 36	· · · · · · · · · · · · · · · · · · ·		•	38	0
Part	V Ta	x Computation					
39	Organiz	ations Taxable as Corporations. Mu	ultiply line 38 by 21% (0.21)	•	. ▶	39	
40		Taxable at Trust Rates. See			ax on		
	the amo	ount on line 38 from: 🔲 Tax rate sche	dule or 🔲 Schedule D (Form 104	11)	>	40	0
41	Proxy t	ax. See instructions			. ▶	41	
42		ive minimum tax (trusts only)				42	23,957
43		Noncompliant Facility Income. See				43	
44		dd lines 41, 42, and 43 to line 39 or 4	0, whichever applies	<u> </u>		44	23,957
Part		x and Payments		, , , , , , , , , , , , , , , , , , ,		11	
45a		tax credit (corporations attach Form 111		45a		4	
b		,		45b			
C		business credit Attach Form 3800 (s	· ·		379	-	
d		or prior year minimum tax (attach Forn		45d	<u> </u>	450	270
e 40		redits. Add lines 45a through 45d .				45e	379
46 47		t line 45e from line 44				47	23,578
47 48		x. Add lines 46 and 47 (see instruction				48	23,578
49	2019 no	et 965 tax liability paid from Form 965-	A or Form 965-B. Part II. column	(k) line 2		49	23,376
50a		its: A 2017 overpayment credited to 2		50a	. i		
b		timated tax payments		50b		- 	
c		posited with Form 8868		50c		∃	
d	•	organizations: Tax paid or withheld at		50d			
е	-	withholding (see instructions)		50e		7	
f	-	or small employer health insurance pro		50f]	
g	Other c	redits, adjustments, and payments: [☐ Form 2439				
	☐ Form			50g			
51		ayments. Add lines 50a through 50g				51	0
52		ed tax penalty (see instructions) Chec			▶ □	52	
53		e. If line 51 is less than the total of line			>	53	23,578
54		yment. If line 51 is larger than the tota		1	. •	54	
55		amount of line 54 you want Credited to 2			ded ►	55	
Part		atements Regarding Certain Ac					yty Yes No
56		ime during the 2018 calendar year, di					''y
		inancial account (bank, securities, or Form 114, Report of Foreign Bank ar					
	here ►	Form 114, Report of Foreign Bank a	id i manciai Accounts. Il Tes, e	inter the name (or the it	oreign coun	.,
57		ne tax year, did the organization receive a	distribution from or was it the granto	r of or transfero	to a fo	reion trust?	···· -
31	-	' see instructions for other forms the c		, or transieror	ιο, α ιο	roigh trust.	
58		e amount of tax-exempt interest rece	•	ar▶ \$			
	Under	penalties of perjury. I declare that I have examined	this return, including accompanying schedules	and statements, an	d to the b	est of my know	ledge and belief, it is
Sign	true, co	orrect, and complete Declaration of preparer (other the		ch preparer has any l	knowledge	May the IRS	discuss this return
Here		Jarner Joseph	11/14/19 VP, Finance	and Operations		with the pre	parer shown below
		re of officer	Date Title			(See instructi	ons)? Tes No
Paid		Print/Type preparer's name	Preparer's signature	Date	c	heck I if	PTIN
Prep	arer					elf-employed	<u> </u>
•		Firm's name ▶			F	rm's EIN ▶	
Use	Olliy	Firm's address ▶	 _		P	hone no	

Form	1990-T	(201	R١
ı Qıırı	1 230-1	1201	Ο,

Page 3

Sche	dule A-Cost of Goods	s Sold. Er	nter meth	nod of ir	vent	ory va	luation ►				9		
1	Inventory at beginning of	year	1	-		6	Inventory a	at end of year	6				
2	Purchases	[2			7	Cost of	goods sold. Subtract					
3	Cost of labor	[3				line 6 from	n line 5 Enter here and					
4a	Additional section 263A	costs					ın Part I, İıı	ne 2	7				
	(attach schedule)		4a			8	Do the ru	les of section 263A (w	th respect to	Yes	No		
b	Other costs (attach sched	· -	4b				property p	produced or acquired for	resale) apply				
5	Total. Add lines 1 throug		5		<u> </u>		to the orga	anization?					
	dule C—Rent Income (instructions)	From Re	al Prope	erty and	Pers	sonal	Property	Leased With Real Pr	operty)				
	ription of property							 _					
(1)	The state of the property							_					
(2)	 			-		_							
(3)	·····					_							
(4)				-									
<u>\(\frac{1}{2}\)</u>	· .	2. Rent receiv	ed or accrue	ed									
				ige of rent f	or pers	onal pro	perty (if the perty exceeds ifit or income)	3(a) Deductions directly connected with the incomin columns 2(a) and 2(b) (attach schedule)					
(1)	·												
(2)													
(3)	 												
(4) Tabal			T-4-1	.									
Total			Total					(b) Total deductions.					
	al income. Add totals of colund on page 1, Part I, line 6, co							Enter here and on page	Enter here and on page 1, Part I, line 6, column (B) ▶				
	dule E—Unrelated Deb			ne (see	instru	ctions	1	Part I, line 6, column (B					
		· · · · · · · · · · · · · · · · · · ·	<u></u>	110 (300		-	-	3. Deductions directly co	nnected with or allo	ocable to	0		
	1. Description of debt-	financed prop	perty				ome from or debt-financed	debt-finar					
						property		(a) Straight line depreciation (attach schedule)	(b) Other de (attach sc		S		
(1)		•											
(2)													
(3)													
(4)													
	4. Amount of average acquisition debt on or llocable to debt-financed roperty (attach schedule)	of or debt-fin	je adjusted b allocable to anced prope ch schedule)	erty		4 div	olumn rided umn 5	7. Gross income reportable (column 2 × column 6)	8. Allocable of (column 6 × tota 3(a) and	al of colu			
(1)							%						
(2)							%						
(3)							%				_		
(4)							%						
								Enter here and on page 1, Part I, line 7, column (A)	Enter here and Part I, line 7, o				
Totals							. •						
Total d	lividends-received deduction	ns included	ın column	8					·				

Schedule F-Interest, Annu	unies, noyanies,	Exempt	Controlled	Organizations	janizations (se	e instruc	ctions)	
Name of controlled organization	2. Employer identification number	1	ated income instructions)	4. Total of specified payments made	5. Part of column included in the organization's gr	controlling	conn	eductions directly ected with income in column 5
(1)			-				-	
(2)								
(3)					_ L			
(4)								
Nonexempt Controlled Organiz	ations	-						
7. Taxable Income 8. Net unrelated income (loss) (see instruct				otal of specified yments made	included in the	Part of column 9 that is included in the controlling organization's gross income.		Deductions directly cted with income in column 10
(1)								
(2)								
(3)								
(4)				<u> </u>				
Totals	· · · · · · · ·		-)/7) (0)		Add columns s Enter here and o Part i, line 8, co	on page 1, olumn (A)	Enter h Part I,	columns 6 and 11 nere and on page 1, line 8, column (B)
Schedule G-Investment I	ncome of a Sect	JI UC NOI		Deductions	r'			otal deductions
1. Description of income	2. Amount o	f income	dire	directly connected (attach schedule)		4. Set-asides (attach schedule)		et-asides (col. 3 plus col. 4)
(1)			1				-	·
(2)								
(3)								
(4)								
Totals Schedule I—Exploited Exe	Enter here and Part I, line 9, c	column (A).		Advertising Ir	ICOMe (see inst	tructions	Part I, Iı	re and on page 1, ne 9, column (B)
Description of exploited activit	2. Gross unrelated	3. Expenses directly connected with		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		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)								
(2)								
(3)								
(4)	i i				· -			
Totals .	Enter here and page 1, Part line 10, col (I, page	nere and on e 1, Part I, 0, col (B)			<u> </u>		Enter here and on page 1, Part II, line 26
Schedule J-Advertising I	ncome (see instru	ctions)		L				·
	eriodicals Repor		Consoli	dated Basis				
	T			4. Advertising		T		7. Excess readership
1. Name of periodical	2. Gross advertising income	I	. Direct tising costs	gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income		dership ists	costs (column 6 minus column 5, but not more than column 4)
(1)								
(2)]]
(3)			***************************************		······································			
(4)		<u> </u>					_	
Totals (carry to Part II, line (5))	. ▶							

Part II Income From Period 2 through 7 on a line-		l on a Separat	e Basis (For ea	ach periodical I	isted 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	•					
	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-Compensation of	Officers, Direc	tors, and Trus	stees (see instru	uctions)		•
1. Name	2	2. Title	3. Percent of time devoted to business	_ I 4. Compensa	tion attributable to ed business	
(1)				9	6	
(2)			.	9	6	
(3)			-	9	6	
(4)	_			9	6	
Total. Enter here and on page 1, Part II, II	ne 14)	>	

Form **990-T** (2018)



MADISON COMMUNITY FOUNDATION 39-6038248 Attachments to Form 990-T 2018

TOTAL 181,885 (2,898) 1,165	2,185	2 486 (900)	859 7,233 (112) 608	2,853 5,092	697	(402,507) (180,198)	16,099 31,732 16,099	2,916 47,962 50,878	
(6)2(3)						(5,569)	I	l	
SS Real Estate Opportunity 2014 (1 131)						(1,131)			
SS Real Estate Opportunity 0 2011 (262)	216 216	φ				800	a	19	
SS Global Private Equity C Partners II 2 757 437	1066 737	934	(2) (52) 289	951	5 (9)	(186) 7,031	2 412	288	,
SS Global Private Equity Pariners 1853 (10)			(2) 13 (60) 317	1 259 499	96 (9)	(325) 7,043	1.454	3,363	
Private Equity Partners VIII (1,943)	270	7 7		370 3	82	(300) (1,230)	448	1 395	
Privata Equity Partners VII F 1,387 (2,933)	1662 164	17 877		(23) 198 33	97	1,482	98	2 437	
International Pariners VII 162	o					171	155		
International International Partners VII Partners VII 162	સ સ્ટ	37				228	F		
Venture I							721		2017 (191 173) (191,173)
Venture Pariners XI f	5 2	11		ε		(62)	855		2016 (163,043) (163 043)
Venture Partners X (1 381)	2					(1,360)	<i>L</i> 9	741	2015 (65 402) (65 402)
Venture Parmers IX (479)						(479)		82	2014 50 605 (50,605)
Venture Partners VIII						(12)			2013 (86 105) (86 105)
	3 453	9,052 186 (15)	323	305	(1 931)	(247 974) (109,947)	4 623	2 907 32 554	2012 (87,090) (87,090)
Natural Natural Resources X 43,588 125 333 6 5 36 125 333	5,297	551 (885)		75 (24)	(615) 705 (691)	(134 837) (86,640)	4 261	5 545	(5 705)
Natural Resources VIII R 1 993	ጀግ	459	6'88	3359	424 (567)	(10,958) 1,879	£	481	2010 (47 230) 14,290 (32 940)
Natural Resources VII 15,721	1,062	2,068 (499)		834	(1 130)	(7 927) 7,435	874	863	2009 (36,315) 36,315
iness income (loss)	Outer net remainment (1955) Interest income Ordinary dividends	Royalties Other portfolio income (loss) nvoluritary conversions	Sec. 1256 contracts and straddles Mining exploration costs recapture Cancellation of debt Net Sec. 987 gamfoss Oualfred small business stock	Section 475(f) incomel(loss) Fotegin currency gain/loss Net Sec 751 ordinary gain Other income	Ordinary business income (1658) from PTPs Deferred foreign income Sec 965(a) Subpart Fincome Deductions - Royalty income	Section 59(e)(2) expenditures Form 990-T, Part I, line 5	nvestment inlerest expense nvestment income Form 990-T, Part II, line 18	Deductions - portfolio (other) Other deductions Form 990-T, Part II, line 28	Ordinary Tax Net Operating Loss Corryover NOL applied
_, ,						., _			Ordinary Tax 2014 NOL applied
. 2 - [년	က တို	7 118	5547	####	F F F 2	ű.	1 5	13L 13W	8

2017 (17,552)

2015

2014

AMT Net Operating Income (Loss)

General Business Credit Carryforward Investment Credit (From 3468)

.01

SCHEDULE D (Form 1041)

Department of the Treasury

Internal Revenue Service

Name of estate or trust

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b. 2. 3. 8b. 9 and 10.

▶ Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No 1545-0092

2018

Employer identification number MADISON COMMUNITY FOUNDATION 39-6038248 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses—Generally Assets Held One Year or Less (see instructions) (h) Gain or (loss) See instructions for how to figure the amounts to enter on the Adjustments Subtract column (e) (d) lines below. Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part I, combine the result with whole dollars line 2, column (a) column (a) 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 Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 4 5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . 5 29,593 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2017 Capital Loss 6 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on the back 29,593 Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the (h) Gain or (loss) Adjustments Subtract column (e) lines below. Proceeds to gain or loss from from column (d) and Cost This form may be easier to complete if you round off cents to (or other basis) Form(s) 8949 Part II combine the result with (sales price) whole dollars. line 2, column (a) column (a) 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 Totals for all transactions reported on Form(s) 8949 with 10 Totals for all transactions reported on Form(s) 8949 with 11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 11 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . 12 12 104,931 13 13 14 14 86,948 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2017 Capital Loss 15 15 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on 16 191.879

Part		4	(1) Beneficiaries'	(2) Estate's	(3) Total
	Caution: Read the instructions before completing this par	ι,	(see instr.)	or trust's	
17	Net short-term gain or (loss)	17		29,593	29,593
18	Net long-term gain or (loss):				
а	Total for year	18a		191,879	191,879
b	Unrecaptured section 1250 gain (see line 18 of the worksheet.)	18b		3	3
С	28% rate gain	18c			
19	Total net gain or (loss). Combine lines 17 and 18a ▶	19		221,472	221,472

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 18a and 19, column (2), are net gains, go to Part V, and don't complete Part IV If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 38), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.

Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if

- Either line 18b, col (2) or line 18c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero

Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 38, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col. (2) or line. 18c, col. (2) is more than zero.

21	Enter taxable income from Form 1041, line 22 (or Form 990-T, li	ine 38) .	. 21				
22	Enter the smaller of line 18a or 19 in column (2)						
	but not less than zero			ŀ			
23	Enter the estate's or trust's qualified dividends from						
	Form 1041, line 2b(2) (or enter the qualified dividends						
	included in income in Part I of Form 990-T) 23					1	
24	Add lines 22 and 23			1			
25	If the estate or trust is filing Form 4952, enter the						
	amount from line 4g; otherwise, enter -0 ▶ 25						
26	Subtract line 25 from line 24. If zero or less, enter -0		. 26				
27	Subtract line 26 from line 21. If zero or less, enter -0		. 27				
28	Enter the smaller of the amount on line 21 or \$2,600		. 28				
29	Enter the smaller of the amount on line 27 or line 28		. 29				
30	Subtract line 29 from line 28. If zero or less, enter -0 This amo	unt is ta	xed at 0%	5	•	30	
31	Enter the smaller of line 21 or line 26		. 31		<u></u>		
32	Subtract line 30 from line 26		. 32				
33	Enter the smaller of line 21 or \$12,700		. 33				
34	Add lines 27 and 30		. 34				
35	Subtract line 34 from line 33. If zero or less, enter -0		. 35				
36	Enter the smaller of line 32 or line 35						
37	Multiply line 36 by 15% (0.15)			· · · · ·	. •	37	
38	Enter the amount from line 31		. 38				
39	Add lines 30 and 36						
40	Subtract line 39 from line 38. If zero or less, enter -0		. 40				
41	Multiply line 40 by 20% (0.20)			· · · · ·	•	41	
42	Figure the tax on the amount on line 27 Use the 2018 Tax Rate Schedu	ule for Est	ates				
	and Trusts (see the Schedule G instructions in the instructions for Form			:			
43	Add lines 37, 41, and 42		. 43				
44	Figure the tax on the amount on line 21. Use the 2018 Tax Rate Schedu						
	and Trusts (see the Schedule G instructions in the instructions for Form			. [
45	Tax on all taxable income. Enter the smaller of line 43 or line	44 here	and on Fo	orm 1041, Sche	dule		
	G. line 1a (or Form 990-T. line 40)					45	

SCHEDULE I (Form 1041)

Alternative Minimum Tax—Estates and Trusts

OMB No 1545-0092

2018

Department of the Treasury Internal Revenue Service Name of estate or trust ➤ Attach to Form 1041.

► Go to www.irs.gov/Form1041 for instructions and the latest information.

Employer identification number

MADIS	ON COMMUNITY FOUNDATION	39-	6038248	
Part	Estate's or Trust's Share of Alternative Minimum Taxable Income			
1	Adjusted total income or (loss) (from Form 1041, line 17)	1	(9,176)	
2	Interest	2		
3	Taxes	3	388	
4	Reserved for future use	4		\neg
5	Refund of taxes	5 (
6	Depletion (difference between regular tax and AMT)	6	1,519	<u> </u>
7	Net operating loss deduction. Enter as a positive amount	7	0	_
8	Interest from specified private activity bonds exempt from the regular tax	8		_
9	Qualified small business stock (see instructions)	9		_
10	Exercise of incentive stock options (excess of AMT income over regular tax income)	10		—
11	Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	11	-	
12	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	12		
13	Disposition of property (difference between AMT and regular tax gain or loss)	13	(723)	—
14	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	14	69	—
15	Passive activities (difference between AMT and regular tax income or loss)	15	69	—
16	Loss limitations (difference between AMT and regular tax income or loss)	16		—
17	Circulation costs (difference between regular tax and AMT)	17	-	
18	Long-term contracts (difference between AMT and regular tax income)	18		—
	Mining costs (difference between regular tax and AMT)	19		—
19		20		—
20	Research and experimental costs (difference between regular tax and AMT)	\rightarrow		_
21	Income from certain installment sales before January 1, 1987	21 (
22	Intangible drilling costs preference		291,847	—
23	Other adjustments, including income-based related adjustments	23	(130,384)	_
24	Alternative tax net operating loss deduction (See the instructions for the limitation that applies.)	24 (17,552	'
25	Adjusted alternative minimum taxable income. Combine lines 1 through 24	25	135,988	—
00	Note: Complete Part II below before going to line 26.	}		
26	Income distribution deduction from Part II, line 44	-		
27	Estate tax deduction (from Form 1041, line 19)			
28	Add lines 26 and 27	28		—
29	Estate's or trust's share of alternative minimum taxable income. Subtract line 28 from line 25	29	135,988	
	If line 29 is.			
	• \$24,600 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c. The estate or			
	trust isn't liable for the alternative minimum tax.			
	• Over \$24,600, but less than \$180,300, go to line 45.			
Dowl	• \$180,300 or more, enter the amount from line 29 on line 51 and go to line 52.			
Part		1 00 1		
30	Adjusted alternative minimum taxable income (see instructions)	30		
31	Adjusted tax-exempt interest (other than amounts included on line 8)	31		
32	Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0	32		
33	Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable	_		
	purposes (from Form 1041, Schedule A, line 4)	33		
34	Capital gains paid or permanently set aside for charitable purposes from gross income (see	_		
	instructions)	34		_
35	Capital gains computed on a minimum tax basis included on line 25	35 ()
36	Capital losses computed on a minimum tax basis included on line 25. Enter as a positive amount	36		
37	Distributable net alternative minimum taxable income (DNAMTI). Combine lines 30 through 36.			
	If zero or less, enter -0	37		
38	Income required to be distributed currently (from Form 1041, Schedule B, line 9)	38		
39	Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)	39		
40	Total distributions. Add lines 38 and 39	40		
41	Tax-exempt income included on line 40 (other than amounts included on line 8)	41		
42	Tentative income distribution deduction on a minimum tax basis. Subtract line 41 from line 40	42		

Part	II Income Distribution Deduction on a Minimum Tax Basis (continued)				
43	Tentative income distribution deduction on a minimum tax basis. Subtract line 31 from	line 37.	42		
44	If zero or less, enter -0	 lıne 43	43		
~~	Enter here and on line 26		44		
Part	III Alternative Minimum Tax				L
45	Exemption amount		45	\$24,600	00
46	Enter the amount from line 29	,988		·	
47	Phase-out of exemption amount	00]		
48	Subtract line 47 from line 46. If zero or less, enter -0	,088			
49	Multiply line 48 by 25% (0.25)		49	13,522	
50	Subtract line 49 from line 45. If zero or less, enter -0		50	11,078	
51	Subtract line 50 from line 46		51	124,910	ļ
52	Go to Part IV of Schedule I to figure line 52 if the estate or trust has qualified dividends again on lines 18a and 19 of column (2) of Schedule D (Form 1041) (as refigured for the necessary). Otherwise, if line 51 is— • \$191,100 or less, multiply line 51 by 26% (0.26).				
	• Over \$191,100, multiply line 51 by 28% (0.28) and subtract \$3,822 from the result		52	23,957	
53	Alternative minimum foreign tax credit (see instructions)		53	0	
54	Tentative minimum tax. Subtract line 53 from line 52		54	23,957	
55	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedule G,	line 2a)	55		
56	Alternative minimum tax. Subtract line 55 from line 54. If zero or less, enter -0 Enter h				
_	on Form 1041, Schedule G, line 1c		56	23,957	
Part	· · · · · · · · · · · · · · · · · · ·		1 1		ı
57	Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D Tax Wo or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the inst before completing this part. Enter the amount from line 51		57	124,910	
58	Enter the amount from Schedule D (Form 1041), line 26, line 13 of the Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as	,646		72-4,5 10	
59	Enter the amount from Schedule D (Form 1041), line 18b, column (2) (as refigured for the AMT, if necessary). If you didn't complete Schedule D for the regular tax or the AMT, enter -0	3			
60	If you didn't complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 58. Otherwise, add lines 58 and 59 and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary) 60	,649			
61	Enter the smaller of line 57 or line 60		61	124,910	
62	Subtract line 61 from line 57		62	0	
63	If line 62 is \$191,100 or less, multiply line 62 by 26% (0.26). Otherwise, multiply line 62 (0.28) and subtract \$3,822 from the result		63	0	
64	Maximum amount subject to the 0% rate				
65	Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 22, if zero or less, enter -0	0			
66		2600	4]		
67		,910	-		
68 60		,600	- I		[
<u>69</u>	Subtract line 68 from line 67	,310			<u></u>

Part	V Line 52 Computation Using Maximum Capital Gains Rates	(con	tinued)				
70	Maximum amount subject to rates below 20%	70	\$12,700	00			
71	Enter the amount from line 66	71	2,600				
72	Enter the amount from line 27 of Schedule D (Form 1041), line 18 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 22, if zero or less, enter -0	72	0				
73	Add line 71 and line 72	73	2,600				
74	Subtract line 73 from line 70. If zero or less, enter -0	74	10,100				
75	Enter the smaller of line 69 or 74	75	10,100				
76	Multiply line 75 by 15% (0.15)			•	76	1,515	
77	Add lines 68 and 75	77	12,700				
	If lines 77 and 57 are the same, skip lines 78 through 82 and go to line 83.		wise, go to line	78.			
78	Subtract line 77 from line 67	78	112,210				
79	Multiply line 78 by 20% (0.20)			▶	79	22,442	
	If line 59 is zero or blank, skip lines 80 through 82 and go to line 83. O		vise, go to line (30.			
80	Add lines 62, 77, and 78	80	124,910				
81	Subtract line 80 from line 57		0				
82	Multiply line 81 by 25% (0.25)			▶	82	0	
83	Add lines 63, 76, 79, and 82			. [83	23,957	
84	If line 57 is \$191,100 or less, multiply line 57 by 26% (0.26). Otherwise,	multi	ply line 57 by 2	8%			
	(0.28) and subtract \$3,822 from the result			_	84	32,477	
85	Enter the smaller of line 83 or line 84 here and on line 52			.	85	23,957	

Schedule I (Form 1041) (2018)

General Business Credit

▶ Go to www.irs.gov/Form3800 for instructions and the latest information.

OMB No. 1545-0895 Attachment Sequence No 22

Identifying number

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

MADISON COMMUNITY FOUNDATION 39-6038248 Part I Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT) (See instructions and complete Part(s) III before Parts I and II.) General business credit from line 2 of all Parts III with box A checked. 2 Passive activity credits from line 2 of all Parts III with box B checked 2 3 Enter the applicable passive activity credits allowed for 2018, See instructions 3 Carryforward of general business credit to 2018. Enter the amount from line 2 of Part III with 4 5 Carryback of general business credit from 2019. Enter the amount from line 2 of Part III with 5 e Add lines 1, 3, 4, and 5 o Allowable Credit Regular tax before credits. • Individuals, Enter the sum of the amounts from Form 1040, line 11a, and Schedule 2 (Form 1040), line 46, or the sum of the amounts from Form 1040NR, lines 42 and 44 • Corporations. Enter the amount from Form 1120, Schedule J. Part I, line 2; or the 7 • Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G. lines 1a and 1b; or the amount from the applicable line of your return Alternative minimum tax: Individuals. Enter the amount from Form 6251, line 11 8 23,957 • Estates and trusts. Enter the amount from Schedule I (Form 1041), line 56. 9 23,957 10a Foreign tax credit 10a Certain allowable credits (see instructions) . . 10b Add lines 10a and 10b 10c 11 Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16 11 23,957 12 Net regular tax. Subtract line 10c from line 7 If zero or less, enter -0-13 Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See 13 14 Tentative minimum tax. • Individuals. Enter the amount from Form 6251, line 9 . 14 23 957 • Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54 15 Enter the greater of line 13 or line 14 15 23,957 16 Subtract line 15 from line 11. If zero or less, enter -0-16 17 17 C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or reorganization.

Note: If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter -0- on line 26.	rait			
19 Enter the greater of line 13 or line 18	lote:	If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and e	nter -(0- on line 26.
20 Subtract line 19 from line 11. If zero or less, enter -0	18	Multiply line 14 by 75% (0.75). See instructions	18	5,989
21 Subtract line 17 from line 20. If zero or less, enter -0-	19	Enter the greater of line 13 or line 18	19	5,989
22 Combine the amounts from line 3 of all Parts III with box A, C, or D checked	20	Subtract line 19 from line 11. If zero or less, enter -0	20	17,968
Passive activity credit from line 3 of all Parts III with box B checked 23 0 Enter the applicable passive activity credit allowed for 2018. See instructions	21	Subtract line 17 from line 20. If zero or less, enter -0	21	17,968
24 Enter the applicable passive activity credit allowed for 2018. See instructions	22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	0
25 Add lines 22 and 24	23	Passive activity credit from line 3 of all Parts III with box B checked 23 0		
Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	24	Enter the applicable passive activity credit allowed for 2018. See instructions	24	0
line 21 or line 25	25	Add lines 22 and 24	25	0
Add lines 17 and 26	26		26	0
Subtract line 28 from line 27. If zero or less, enter -0- Enter the general business credit from line 5 of all Parts III with box A checked	27	Subtract line 13 from line 11. If zero or less, enter -0	27	23,957
20 Enter the general business credit from line 5 of all Parts III with box A checked	28	Add lines 17 and 26	28	O
Passive activity credits from line 5 of all Parts III with box B checked 32 0 32 Passive activity credits from line 5 of all Parts III with box B checked 32 0 33 Enter the applicable passive activity credits allowed for 2018. See instructions	29	Subtract line 28 from line 27. If zero or less, enter -0	29	23,957
Passive activity credits from line 5 of all Parts III with box B checked 32 0 33 Enter the applicable passive activity credits allowed for 2018. See instructions	30	Enter the general business credit from line 5 of all Parts III with box A checked	30	0
23 Enter the applicable passive activity credits allowed for 2018. See instructions	31	Reserved	31	
Carryforward of business credit to 2018. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach	32	Passive activity credits from line 5 of all Parts III with box B checked 32 0		
checked and line 6 of Part III with box G checked. See instructions for statement to attach	33	Enter the applicable passive activity credits allowed for 2018. See instructions	33	0
checked. See instructions	34		34	379
37 Enter the smaller of line 29 or line 36	35		35	0
Credit allowed for the current year. Add lines 28 and 37. Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return. Individuals. Schedule 3 (Form 1040), line 54, or Form 1040NR, line 51 . Corporations. Form 1120, Schedule J, Part I, line 5c	36	Add lines 30, 33, 34, and 35	36	379
Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return. • Individuals. Schedule 3 (Form 1040), line 54, or Form 1040NR, line 51	37	Enter the smaller of line 29 or line 36	37	379
■ Estates and trusts Form 1041, Schedule G, line 20 ,	38	Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return. • Individuals. Schedule 3 (Form 1040), line 54, or Form 1040NR, line 51)	38	379

Name(s) shown on return						Identifying number			
MA	DISO	N COMMUNITY FOUNDATION				39-6038248			
	art III		ınst	ructions)					
		te a separate Part III for each box checked below. See instructions.							
		General Business Credit From a Non-Passive Activity E Reserved							
		General Business Credit From a Passive Activity F Reserved							
		General Business Credit Carryforwards General Business Credit Carryforwards General Business Credit Carryforwards							
		General Business Credit Carrybacks H Reserved	Dasiii	COO CIOGIL	ourry ro	***			
		•		aldstonet De	ممالا اسم		f		
•	II you	u are filing more than one Part III with box A or B checked, complete and attach firs arts III with box A or B checked. Check here if this is the consolidated Part III	i an a	luullional Pa	art III CO	mbining amounts	▶ □		
	alli			(b)					
If claiming t					e credit	(c) Enter the appropriate			
	Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.				-through amount		iate		
_				entity, enter	tne EIN		1		
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a				1		
	b	Reserved	1b				-		
	C	Increasing research activities (Form 6765)	1c			<u>-</u>	 		
	d	Low-income housing (Form 8586, Part I only)	1d				<u> </u>		
	е	Disabled access (Form 8826) (see instructions for limitation)	1e						
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f				ļ		
	g	Indian employment (Form 8845)	1g						
	h	Orphan drug (Form 8820)	1h						
	i	New markets (Form 8874)	1i						
	j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j						
	k	Employer-provided child care facilities and services (Form 8882) (see							
		instructions for limitation)	1k		ļ				
	ı	Biodiesel and renewable diesel fuels (attach Form 8864)	11						
	m	Low sulfur diesel fuel production (Form 8896)	1m						
	n	Distilled spirits (Form 8906)	1n						
	0	Nonconventional source fuel (carryforward only)	10						
	р	Energy efficient home (Form 8908)	1p				t		
	q	Energy efficient appliance (carryforward only)	1q			· · · · · · · · · · · · · · · · · · ·			
	r	Alternative motor vehicle (Form 8910)	1r				 		
	s	Alternative fuel vehicle refueling property (Form 8911)	1s			.	+		
	t	Enhanced oil recovery credit (Form 8830)	1t			<u> </u>	1		
		Mine rescue team training (Form 8923)	1u	<u> </u>					
	u	Agricultural chemicals security (carryforward only)	10				1		
	٧	The state of the s	1w				1		
	W	Employer differential wage payments (Form 8932)					 		
	X	Carbon oxide sequestration (Form 8933)	1x				-		
	У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y				1		
	Z	Qualified plug-in electric vehicle (carryforward only)	1z						
	aa	Employee retention (Form 5884-A)	1aa		-		<u> </u>		
	bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb			·			
	ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain	١. ا						
		other credits (see instructions)	1zz						
	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2						
	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3				ļ		
•	4a	Investment (Form 3468, Part III) (attach Form 3468)	4a			379	9		
	b	Work opportunity (Form 5884)	4b			<u> </u>	_		
	C	Biofuel producer (Form 6478)	4c				<u> </u>		
	d	Low-income housing (Form 8586, Part II)	4d				<u> </u>		
	е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e						
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f						
	g	Qualified railroad track maintenance (Form 8900)	4g						
	h	Small employer health insurance premiums (Form 8941)	4h						
	i	Increasing research activities (Form 6765)	4i				1		
	j	Employer credit for paid family and medical leave (Form 8994)	4j						
	z	Other	4z	_		····	1 -		
4	5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5			379			
	6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II .	6			379			
		. , .,				373	- 1		