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Form **990-T****Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

OMB No 1545-0087

Department of the Treasury  
Internal Revenue ServiceFor calendar year 2018 or other tax year beginning 05/01, 2018, and ending 04/30, 2019▶ Go to [www.irs.gov/Form990T](http://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)

**2018**Open to Public Inspection for  
501(c)(3) Organizations Only

<input type="checkbox"/> Check box if address changed		Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions ) <b>THE NELSON GALLERY FOUNDATION</b>		D Employer identification number (Employees' trust see instructions) <b>44-6012977</b>	
<b>B Exempt under section</b> <input checked="" type="checkbox"/> 501(c) (3) ( ) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)		Print or Type Number, street, and room or suite no. If a P O box, see instructions <b>4525 OAK STREET</b> City or town, state or province, country, and ZIP or foreign postal code <b>KANSAS CITY, MO 64111</b>		E Unrelated business activity code (See instructions) <b>900099</b>	
C Book value of all assets at end of year <b>616,443,871.</b>		F Group exemption number (See instructions) ▶		G Check organization type ▶ <input type="checkbox"/> 501(c) corporation <input checked="" type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust	

H Enter the number of the organization's unrelated trades or businesses ▶ 3 Describe the only (or first) unrelated trade or business here ▶ PASS-THROUGH INVESTMENTS If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During 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 ▶

J The books are in care of ▶ TAMMY J. BLUHM Telephone number ▶ 816-751-0417

Part I Unrelated Trade or Business Income				(A) Income	(B) Expenses	(C) Net
1a	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		
4a	Capital gain net income (attach Schedule D) . . . . .			4a		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) . . . . .			4b	364,164.	364,164.
c	Capital loss deduction for trusts . . . . .			4c		
5	Income (loss) from a partnership or an S corporation (attach statement) . . . . .			5	-317,121.	ATCH 1 -317,121.
6	Rent income (Schedule C) . . . . .			6		
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		
10	Exploited exempt activity income (Schedule I) . . . . .			10		
11	Advertising income (Schedule J) . . . . .			11		
12	Other income (See instructions, attach schedule) . . . . .			12		
13	Total Combine lines 3 through 12 . . . . .			13	47,043.	47,043.

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions ) (Except for contributions, 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) . . . . .		18	
19	Taxes and licenses . . . . .		19	8,804.
20	Charitable contributions (See instructions for limitation rules) . . . . .		20	342.
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 . . . . .		25	
26	Excess exempt expenses (Schedule I) . . . . .		26	
27	Excess readership costs (Schedule J) . . . . .		27	
28	Other deductions (attach schedule) . . . . .	ATCH. 3.	28	24,982.
29	Total deductions Add lines 14 through 28 . . . . .		29	34,128.
30	Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13 . . . . .		30	12,915.
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	12,915.

For Paperwork Reduction Act Notice, see instructions

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**Part III Total Unrelated Business Taxable Income**

33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions).	33	158,188.
34	Amounts paid for disallowed fringes	34	2,581.
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions).	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34.	36	160,769.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36.	38	159,769.

**Part IV Tax Computation**

39	Organizations 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 amount on line 38 from <input type="checkbox"/> Tax rate schedule or <input checked="" type="checkbox"/> Schedule D (Form 1041).	40	55,408.
41	Proxy tax. See instructions.	41	
42	Alternative minimum tax (trusts only).	42	
43	Tax on Noncompliant Facility Income. See instructions.	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies.	44	55,408.

**Part V Tax and Payments**

45a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116).	45a	
b	Other credits (see instructions).	45b	
c	General business credit. Attach Form 3800 (see instructions).	45c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827).	45d	
e	Total credits. Add lines 45a through 45d.	45e	
46	Subtract line 45e from line 44.	46	55,408.
47	Other taxes. Check if from <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8868 <input type="checkbox"/> Other (attach schedule).	47	
48	Total tax. Add lines 46 and 47 (see instructions).	48	55,408.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2.	49	
50a	Payments. A 2017 overpayment credited to 2018.	50a	28,832.
b	2018 estimated tax payments.	50b	44,764.
c	Tax deposited with Form 8868.	50c	18,000.
d	Foreign organizations. Tax paid or withheld at source (see instructions).	50d	
e	Backup withholding (see instructions).	50e	
f	Credit for small employer health insurance premiums (attach Form 8941).	50f	
g	Other credits, adjustments, and payments <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other. Total	50g	
51	Total payments. Add lines 50a through 50g.	51	91,596.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached.	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed.	53	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid.	54	36,188.
55	Enter the amount of line 54 you want. Credited to 2019 estimated tax <input checked="" type="checkbox"/> 36,188. Refunded <input type="checkbox"/>	55	

**Part VI Statements Regarding Certain Activities and Other Information (see instructions)**

56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here.	Yes	No
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
58	Enter the amount of tax-exempt interest received or accrued during the tax year.		

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	Signature of officer	Date	Title
Paid Preparer Use Only	Preparer's name	Preparer's signature	Date
	Firm's name		
	Firm's address		
	Check <input type="checkbox"/> if self-employed	PTIN	

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation ►

1	Inventory at beginning of year . . . . .	1		6	Inventory at end of year . . . . .	6	
2	Purchases . . . . .	2		7	Cost of goods sold Subtract line 6 from line 5 Enter here and in Part I, line 2 . . . . .	7	
3	Cost of labor . . . . .	3		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? . . . . .	Yes	No
4a	Additional section 263A costs (attach schedule) . . . . .	4a					
b	Other costs (attach schedule) . . . . .	4b					X
5	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 for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	
(c) Total income Add totals of columns 2(a) and 2(b) Enter here and on page 1, Part I, line 6, column (A) . . . . . ►		(b) Total deductions Enter here and on page 1, Part I, line 6, column (B) ►

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

1 Description of debt-financed property		2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals . . . . . ►			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Total dividends-received deductions included in column 8 . . . . . ►				

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**Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1 Name of controlled organization	2 Employer identification number	Exempt Controlled Organizations			
		3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5 Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

**Nonexempt Controlled Organizations**

7 Taxable income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)
<b>Totals</b> .....				

**Schedule G—Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)
<b>Totals</b> .....				

**Schedule I—Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 26
<b>Totals</b> .....						

**Schedule J—Advertising Income** (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

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)						
<b>Totals (carry to Part II, line (5))</b> .....						

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**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 line-by-line basis)

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)						
<b>Totals from Part I</b> . . . . . ▶						
	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
<b>Totals, Part II (lines 1-5)</b> . . . . . ▶						

**Schedule K - Compensation of Officers, Directors, and Trustees** (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2) ATCH 4		%	
(3)		%	
(4)		%	
<b>Total</b> Enter here and on page 1, Part II, line 14 . . . . . ▶			

Form 990-T (2018)

**SCHEDULE M  
(Form 990-T)**

**Unrelated Business Taxable Income for  
Unrelated Trade or Business**

OMB No 1545-0687

**2018**

For calendar year 2018 or other tax year beginning 05/01, 2018, and ending 04/30, 20 19

Department of the Treasury  
Internal Revenue Service

► Go to [www.irs.gov/Form990T](http://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

Name of organization

Employer identification number

THE NELSON GALLERY FOUNDATION

44-6012977

Unrelated business activity code (see instructions) ► 900099

Describe the unrelated trade or business ► SPECIAL EVENTS

<b>Part I Unrelated Trade or Business Income</b>		(A) Income	(B) Expenses	(C) Net
<b>1 a</b> Gross receipts or sales				
<b>b</b> Less returns and allowances	<b>c Balance</b> ► <b>1 c</b>			
<b>2</b> Cost of goods sold (Schedule A, line 7)	<b>2</b>			
<b>3</b> Gross profit Subtract line 2 from line 1c	<b>3</b>			
<b>4 a</b> Capital gain net income (attach Schedule D)	<b>4 a</b>			
<b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4 b</b>			
<b>c</b> Capital loss deduction for trusts	<b>4 c</b>			
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement)	<b>5</b>			
<b>6</b> Rent income (Schedule C)	<b>6</b>			
<b>7</b> Unrelated debt-financed income (Schedule E)	<b>7</b>			
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	<b>8</b>			
<b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>			
<b>10</b> Exploited exempt activity income (Schedule I)	<b>10</b>			
<b>11</b> Advertising income (Schedule J)	<b>11</b>			
<b>12</b> Other income (See instructions, attach schedule) <u>ATCH. 5</u>	<b>12</b>	166,980.		166,980.
<b>13</b> <b>Total</b> Combine lines 3 through 12	<b>13</b>	166,980.		166,980.

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions ) (Except for contributions, deductions must be directly connected with the unrelated business income )

<b>14</b> Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>	
<b>15</b> Salaries and wages	<b>15</b>	
<b>16</b> Repairs and maintenance	<b>16</b>	
<b>17</b> Bad debts	<b>17</b>	
<b>18</b> Interest (attach schedule) (see instructions)	<b>18</b>	
<b>19</b> Taxes and licenses	<b>19</b>	
<b>20</b> Charitable contributions (See instructions for limitation rules)	<b>20</b>	
<b>21</b> Depreciation (attach Form 4562)	<b>21</b>	
<b>22</b> Less depreciation claimed on Schedule A and elsewhere on return	<b>22 a</b>	<b>22 b</b>
<b>23</b> Depletion	<b>23</b>	
<b>24</b> Contributions to deferred compensation plans	<b>24</b>	
<b>25</b> Employee benefit programs	<b>25</b>	
<b>26</b> Excess exempt expenses (Schedule I)	<b>26</b>	
<b>27</b> Excess readership costs (Schedule J)	<b>27</b>	
<b>28</b> Other deductions (attach schedule) <u>ATCH. 6</u>	<b>28</b>	21,707.
<b>29</b> <b>Total deductions</b> Add lines 14 through 28	<b>29</b>	21,707.
<b>30</b> Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13	<b>30</b>	145,273.
<b>31</b> Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	<b>31</b>	-
<b>32</b> Unrelated business taxable income Subtract line 31 from line 30	<b>32</b>	145,273.

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2018

**SCHEDULE M  
(Form 990-T)**

**Unrelated Business Taxable Income for  
Unrelated Trade or Business**

OMB No 1545-0687

**2018**

For calendar year 2018 or other tax year beginning 05/01, 2018, and ending 04/30, 20 19

Department of the Treasury  
Internal Revenue Service

► Go to [www.irs.gov/Form990T](http://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

Name of organization

Employer identification number

THE NELSON GALLERY FOUNDATION

44-6012977

Unrelated business activity code (see instructions) ► 900099

Describe the unrelated trade or business ► MERCURY FUND II LP INVESTMENT

<b>Part I Unrelated Trade or Business Income</b>		(A) Income	(B) Expenses	(C) Net
<b>1 a</b> Gross receipts or sales				
<b>b</b> Less returns and allowances	<b>c Balance</b> ►	<b>1 c</b>		
<b>2</b> Cost of goods sold (Schedule A, line 7)		<b>2</b>		
<b>3</b> Gross profit Subtract line 2 from line 1c		<b>3</b>		
<b>4 a</b> Capital gain net income (attach Schedule D)		<b>4 a</b> 12,312.		12,312.
<b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		<b>4 b</b>		
<b>c</b> Capital loss deduction for trusts		<b>4 c</b>		
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement)	ATCH. 7	<b>5</b> -151,482.		-151,482.
<b>6</b> Rent income (Schedule C)		<b>6</b>		
<b>7</b> Unrelated debt-financed income (Schedule E)		<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Schedule F)		<b>8</b>		
<b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		<b>9</b>		
<b>10</b> Exploited exempt activity income (Schedule I)		<b>10</b>		
<b>11</b> Advertising income (Schedule J)		<b>11</b>		
<b>12</b> Other income (See instructions, attach schedule)		<b>12</b>		
<b>13</b> Total Combine lines 3 through 12		<b>13</b> -139,170.		-139,170.

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions ) (Except for contributions, deductions must be directly connected with the unrelated business income )

<b>14</b> Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>	
<b>15</b> Salaries and wages	<b>15</b>	
<b>16</b> Repairs and maintenance	<b>16</b>	
<b>17</b> Bad debts	<b>17</b>	
<b>18</b> Interest (attach schedule) (see instructions)	<b>18</b>	
<b>19</b> Taxes and licenses	<b>19</b>	
<b>20</b> Charitable contributions (See instructions for limitation rules)	<b>20</b>	
<b>21</b> Depreciation (attach Form 4562)	<b>21</b>	
<b>22</b> Less depreciation claimed on Schedule A and elsewhere on return	<b>22 a</b>	<b>22 b</b>
<b>23</b> Depletion	<b>23</b>	
<b>24</b> Contributions to deferred compensation plans	<b>24</b>	
<b>25</b> Employee benefit programs	<b>25</b>	
<b>26</b> Excess exempt expenses (Schedule I)	<b>26</b>	
<b>27</b> Excess readership costs (Schedule J)	<b>27</b>	
<b>28</b> Other deductions (attach schedule)	<b>28</b>	
<b>29</b> Total deductions Add lines 14 through 28	<b>29</b>	
<b>30</b> Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13	<b>30</b>	-139,170.
<b>31</b> Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	<b>31</b>	-
<b>32</b> Unrelated business taxable income Subtract line 31 from line 30	<b>32</b>	-139,170.

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2018

JSA

8X2745 1 000

ATTACHMENT 1

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

PTP PASSIVE ACTIVITY LOSSES ALLOWED -317,121.

INCOME (LOSS) FROM PARTNERSHIPS -317,121.



FORM 990T - PART II - LINE 20 - CHARITABLE CONTRIBUTIONS

CHARITABLE CONTRIBUTION (TOTAL TO 30% AND 50% ORGANIZATIONS)	342.
LESS: CHARITABLE CONTRIBUTION (TO PORTION OF 50% ORGANIZATIOINS)	0.
NET CHARITABLE CONTRIBUTION	<u>342.</u>
UNRELATED TRADE OR BUSINESS INCOME	47,043.
LESS: DEDUCTIONS WITHOUT CHARITABLE CONTRIBUTIONS	<u>33,786.</u>
NET INCOME BEFORE CHARITABLE CONTRIBUTIONS	13,257.
CHARITABLE CONTRIBUTION LIMITATION (30%)	<u>3,977.</u>
CHARITABLE CONTRIBUTION LIMITATION (50%)	<u>6,629.</u>
CHARITABLE CONTRIBUTION LIMITATION (IF PORTION APPLIES)	<u>3,977.</u>
<u>CHARITABLE CONTRIBUTION DEDUCTION</u>	<u>342.</u>

ATTACHMENT 3

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

TAX PREPARATION FEES  
INVESTMENT FEES

2,267.  
22,715.

PART II - LINE 28 - OTHER DEDUCTIONS

24,982.

ATTACHMENT 4SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
SHIRLEY BUSH HELZBERG 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
MARY ATTERBURY 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
G. KENNETH BAUM 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
ROBERT BERNSTEIN 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
BILL GAUTREAUX 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
RICHARD C. GREEN, JR. 4525 OAK STREET KANSAS CITY, MO 64111	BOARD CHAIR	0	0.
DON HALL, JR. 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
NEIL D. KARBANK 4525 OAK STREET KANSAS CITY, MO 64111	SECRETARY	0	0.
SANDRA A.J. LAWRENCE 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
BILL LYONS 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.

ATTACHMENT 4 (CONT'D)SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
GREG MADAY 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
SUSAN MCGREEVY 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
KENT SUNDERLAND 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
MAURICE WATSON 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
GRANT BURCHAM 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
EVELYN CRAFT BELGER 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
JULIAN ZUGAZAGOITIA 4525 OAK STREET KANSAS CITY, MO 64111	DIRECTOR/CEO	0	0.
KAREN CHRISTIANSEN 4525 OAK STREET KANSAS CITY, MO 64111	CHIEF OPERATING OFFICER	0	0.
WILLIAM B. TAYLOR 4525 OAK STREET KANSAS CITY, MO 64111	TREASURER	0	0.
RAMON MURGUIA 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.

ATTACHMENT 4 (CONT'D)SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
THOMAS M. BLOCH 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
SARA MORGAN 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
MARK O'CONNELL 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
CHARLES SOSLAND 4525 OAK STREET KANSAS CITY, MO 64111	TRUSTEE	0	0.
TOTAL COMPENSATION			<u>0.</u>

THE NELSON GALLERY FOUNDATION

ATTACHMENT 5

SCHEDULE M - LINE 12 - OTHER INCOME

SPECIAL EVENT INCOME

166,980.

LINE 12 - OTHER INCOME

166,980.

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SCHEDULE M - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

SPECIAL EVENT EXPENSES

21,707.

PART II - LINE 28 - OTHER DEDUCTIONS

21,707.

MERCURY FUND II LP

SCHEDULE M LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

MERCURY FUND II -151,482.

INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS -151,482.



**SCHEDULE I**  
**(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**Alternative Minimum Tax - Estates and Trusts**

▶ Attach to Form 1041

▶ Go to [www.irs.gov/Form1041](http://www.irs.gov/Form1041) for instructions and the latest information

OMB No 1545-0092

**2018**

Name of estate or trust <b>THE NELSON GALLERY FOUNDATION</b>	Employer identification number <b>44-6012977</b>
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**Part I Estate's or Trust's Share of Alternative Minimum Taxable Income**

1	Adjusted total income or (loss) (from Form 1041, line 17)	1	159,769.
2	Interest	2	
3	Taxes	3	
4	Reserved for future use	4	
5	Refund of taxes	5	( )
6	Depletion (difference between regular tax and AMT)	6	
7	Net operating loss deduction Enter as a positive amount	7	
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	-20,619.
14	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	14	
15	Passive activities (difference between AMT and regular tax income or loss) . . . ATCH. 2	15	69,246.
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	
19	Mining costs (difference between regular tax and AMT)	19	
20	Research and experimental costs (difference between regular tax and AMT)	20	
21	Income from certain installment sales before January 1, 1987	21	( )
22	Intangible drilling costs preference	22	
23	Other adjustments, including income-based related adjustments	23	
24	Alternative tax net operating loss deduction (See the instructions for the limitation that applies)	24	( )
25	Adjusted alternative minimum taxable income Combine lines 1 through 24	25	208,396.
Note: Complete Part II below before going to line 26			
26	Income distribution deduction from Part II, line 44	26	
27	Estate tax deduction (from Form 1041, line 19)	27	
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	208,396.

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
- \$180,300 or more, enter the amount from line 29 on line 51 and go to line 52

**Part II Income Distribution Deduction on a Minimum Tax Basis**

30	Adjusted alternative minimum taxable income (see instructions)	30	48,627.
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	20,619.
37	Distributable net alternative minimum taxable income (DNAMTI) Combine lines 30 through 36. If zero or less, enter -0-	37	69,246.
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	

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Schedule I (Form 1041) (2018)

**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. If zero or less, enter -0- . . . . .	43	69,246.
44	Income distribution deduction on a minimum tax basis. Enter the smaller of line 42 or line 43. Enter here and on line 26. . . . .	44	

**Part III Alternative Minimum Tax**

45	Exemption amount . . . . .	45	\$24,600 00
46	Enter the amount from line 29 . . . . .	46	
47	Phase-out of exemption amount . . . . .	47	\$81,900 00
48	Subtract line 47 from line 46. If zero or less, enter -0- . . . . .	48	
49	Multiply line 48 by 25% (0.25) . . . . .	49	
50	Subtract line 49 from line 45. If zero or less, enter -0- . . . . .	50	
51	Subtract line 50 from line 46. . . . .	51	208,396.
52	Go to Part IV of Schedule I to figure line 52 if the estate or trust has qualified dividends or has a gain on lines 18a and 19 of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if 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	54,529.
53	Alternative minimum foreign tax credit (see instructions). . . . .	53	
54	Tentative minimum tax. Subtract line 53 from line 52. . . . .	54	54,529.
55	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedule G, line 2a) . . . . .	55	55,408.
56	Alternative minimum tax. Subtract line 55 from line 54. If zero or less, enter -0-. Enter here and on Form 1041, Schedule G, line 1c . . . . .	56	-0-

**Part IV Line 52 Computation Using Maximum Capital Gains Rates**

Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D Tax Worksheet, or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the instructions before completing this part.

57	Enter the amount from line 51 . . . . .	57	
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 refigured for the AMT, if necessary) . . . . .	58	
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- . . . . .	59	
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	
61	Enter the smaller of line 57 or line 60. . . . .	61	
62	Subtract line 61 from line 57. . . . .	62	
63	If line 62 is \$191,100 or less, multiply line 62 by 26% (0.26). Otherwise, multiply line 62 by 28% (0.28) and subtract \$3,822 from the result . . . . .	63	
64	Maximum amount subject to the 0% rate . . . . .	64	\$2,600 00
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- . . . . .	65	
66	Subtract line 65 from line 64. If zero or less, enter -0- . . . . .	66	
67	Enter the smaller of line 57 or line 58. . . . .	67	
68	Enter the smaller of line 66 or line 67. This amount is taxed at 0% . . . . .	68	
69	Subtract line 68 from line 67. . . . .	69	

Schedule I (Form 1041) (2018)

**Part IV Line 52 Computation Using Maximum Capital Gains Rates** (continued)

70	Maximum amount subject to rates below 20% . . . . .	70	\$12,700 00	
71	Enter the amount from line 66 . . . . .	71		
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		
73	Add line 71 and line 72 . . . . .	73		
74	Subtract line 73 from line 70. If zero or less, enter -0- . . . . .	74		
75	Enter the smaller of line 69 or 74 . . . . .	75		
76	Multiply line 75 by 15% (0.15) . . . . . ▶	76		
77	Add lines 68 and 75 . . . . .	77		
If lines 77 and 57 are the same, skip lines 78 through 82 and go to line 83. Otherwise, go to line 78.				
78	Subtract line 77 from line 67 . . . . .	78		
79	Multiply line 78 by 20% (0.20) . . . . . ▶	79		
If line 59 is zero or blank, skip lines 80 through 82 and go to line 83. Otherwise, go to line 80.				
80	Add lines 62, 77, and 78 . . . . .	80		
81	Subtract line 80 from line 57 . . . . .	81		
82	Multiply line 81 by 25% (0.25) . . . . . ▶	82		
83	Add lines 63, 76, 79, and 82 . . . . .	83		
84	If line 57 is \$191,100 or less, multiply line 57 by 26% (0.26). Otherwise, multiply line 57 by 28% (0.28) and subtract \$3,822 from the result . . . . .	84		
85	Enter the smaller of line 83 or line 84 here and on line 52 . . . . .	85		

Schedule I (Form 1041) (2018)

**SCHEDULE D  
(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**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](http://www.irs.gov/F1041) for instructions and the latest information

OMB No 1545-0092

**2018**

Name of estate or trust

THE NELSON GALLERY FOUNDATION

Employer identification number

44-6012977

**Note:** Form 5227 filers need to complete **only** Parts I and II

**Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less** (see instructions)

See instructions for how to figure the amounts to enter on the lines below

This form may be easier to complete if you round off cents to whole dollars

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> 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.				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked.				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked.				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked.				
<b>4</b> Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824.				<b>4</b>
<b>5</b> Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts.				<b>5</b>
<b>6</b> Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2017 Capital Loss Carryover Worksheet.				<b>6</b> ( )
<b>7</b> <b>Net short-term capital gain or (loss).</b> Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on the back.				<b>7</b>

**Part II 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 lines below

This form may be easier to complete if you round off cents to whole dollars

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> 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.				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked.				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked.				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked.				
<b>11</b> Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824.				<b>11</b>
<b>12</b> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts.				<b>12</b>
<b>13</b> Capital gain distributions.				<b>13</b>
<b>14</b> Gain from Form 4797, Part I.				<b>14</b> 12,312.
<b>15</b> Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2017 Capital Loss Carryover Worksheet.				<b>15</b> ( )
<b>16</b> <b>Net long-term capital gain or (loss).</b> Combine lines 8a through 15 in column (h). Enter here and on line 18a, column (3) on the back.				<b>16</b> 12,312.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041

Schedule D (Form 1041) 2018

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<b>Part III Summary of Parts I and II</b>		(1) Beneficiaries' (see instr )	(2) Estate's or trust's	(3) Total
<b>Caution: Read the instructions before completing this part</b>				
<b>17</b>	<b>Net short-term gain or (loss).</b> . . . . .	<b>17</b>		
<b>18</b>	<b>Net long-term gain or (loss):</b>			
a	Total for year . . . . .	<b>18a</b>	12,312.	12,312.
b	Unrecaptured section 1250 gain (see line 18 of the worksheet) . . . . .	<b>18b</b>		
c	28% rate gain . . . . .	<b>18c</b>		
<b>19</b>	<b>Total net gain or (loss).</b> Combine lines 17 and 18a. . . . . ▶	<b>19</b>	12,312.	12,312.

**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.

<b>Part IV Capital Loss Limitation</b>	
<b>20</b>	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: a The loss on line 19, column (3) or b \$3,000 . . . . . <b>20</b> ( )

**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.

<b>21</b>	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 38). . . . .	<b>21</b>	159,769.	
<b>22</b>	Enter the smaller of line 18a or 19 in column (2) but not less than zero. . . . .	<b>22</b>	12,312.	
<b>23</b>	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) . . . . .	<b>23</b>		
<b>24</b>	Add lines 22 and 23 . . . . .	<b>24</b>	12,312.	
<b>25</b>	If the estate or trust is filing Form 4952, enter the amount from line 4g, otherwise, enter -0- . . . ▶	<b>25</b>		
<b>26</b>	Subtract line 25 from line 24. If zero or less, enter -0- . . . . .	<b>26</b>	12,312.	
<b>27</b>	Subtract line 26 from line 21. If zero or less, enter -0- . . . . .	<b>27</b>	147,457.	
<b>28</b>	Enter the smaller of the amount on line 21 or \$2,600 . . . . .	<b>28</b>	2,600.	
<b>29</b>	Enter the smaller of the amount on line 27 or line 28 . . . . .	<b>29</b>	2,600.	
<b>30</b>	Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0% . . . . . ▶	<b>30</b>		
<b>31</b>	Enter the smaller of line 21 or line 26 . . . . .	<b>31</b>	12,312.	
<b>32</b>	Subtract line 30 from line 26. . . . .	<b>32</b>	12,312.	
<b>33</b>	Enter the smaller of line 21 or \$12,700. . . . .	<b>33</b>	12,700.	
<b>34</b>	Add lines 27 and 30 . . . . .	<b>34</b>	147,457.	
<b>35</b>	Subtract line 34 from line 33. If zero or less, enter -0- . . . . .	<b>35</b>		
<b>36</b>	Enter the smaller of line 32 or line 35. . . . .	<b>36</b>		
<b>37</b>	Multiply line 36 by 15% (0.15) . . . . . ▶	<b>37</b>		
<b>38</b>	Enter the amount from line 31 . . . . .	<b>38</b>	12,312.	
<b>39</b>	Add lines 30 and 36 . . . . .	<b>39</b>		
<b>40</b>	Subtract line 39 from line 38. If zero or less, enter -0- . . . . .	<b>40</b>	12,312.	
<b>41</b>	Multiply line 40 by 20% (0.20) . . . . . ▶	<b>41</b>		2,462.
<b>42</b>	Figure the tax on the amount on line 27. Use the 2018 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .	<b>42</b>	52,946.	
<b>43</b>	Add lines 37, 41, and 42 . . . . .	<b>43</b>	55,408.	
<b>44</b>	Figure the tax on the amount on line 21. Use the 2018 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .	<b>44</b>	57,501.	
<b>45</b>	<b>Tax on all taxable income.</b> Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 40) . . . . . ▶	<b>45</b>		55,408.

Schedule D (Form 1041) 2018