)	9	3	9	3	2	7	0	O	0	8	U	7
					- 1		~ 4 -		40	45	aco.	,

омв	No	1545-0687

Exempt Organization Business Income Tax Return

	Form •	<b>550</b> .			tax under s			1901	•	2018	
			For cale	ndar year 2018 or other tax yea	r beginning 07/0	1 , 2	2018, and ending	06/30 , 20	19 .		
	Departm	ent of the Treasury		► Go to www.irs.gov/For					Ope	n to Public Inspection	on for
		Revenue Service	▶Dor	not enter SSN numbers on this	form as it may be	made	public if your organi	zation is a 501	(c)(3). 501	(c)(3) Organizations	Only
2	A D	heck box if iddress changed		Name of organization ( Ch	eck box if name cha	nged a	n್ಫ ಒee instructions )			r identification nun	
Ø,		pt under section	Print		(Employees' trust, see instructions )						
2	<b>E</b> 🗹 50	)1( C ) <u>(Q3</u> .)	or	Number, street, and room or su	ite no If a PO box,	see ins	structions	L		18-0547734	
	<b>2</b> 🗆 40	)8(e) 🔲 220(e)	Type	PO BOX 928	·-·				E Unrelated (See instr	l business activity c	ode
6,	₽ 🗆 40	)8A 🔲 530(a)	* '	City or town, state or province,	country, and ZIP or	foreign	postal code		(000 111311	dolloris /	
₽	☐ 52	9(a)	ļ	LAWRENCE, KS 66044-092	28					211110	
	C Book at en	value of all assets d of year		oup exemption number (S					<del> </del>		
Ξ		2,188,644,850		neck organization type 🕨					401(a) tru		
Z				organization's unrelated tra				_	•	or first) unrelate	
N				WORKING INTEREST							
6				at the end of the previous	sentence, com	plete	Parts I and II, co	implete a Sc	chedule M	for each addit	ionai
2020	tra			omplete Parts III-V.							<u> </u>
07	I Du			e corporation a subsidiary in				controlled gr	oup?	► □ Yes ☑	NO
				and identifying number of		oratio				(785) 832-7400	
				JAMES G CLARKE TR				one number	penses	(C) Net	
				e or Business Income	· 		(A) Income	(D) EX	201303	(0) 1461	
	1a	Gross receipts Less returns and			c Balance ►	1c	20,517				1
•	ь 2			Schedule A, line 7)		2	20,517	-		_	—;
	3	•	•	t line 2 from line 1c	. 101	3	20,517	_	······································	20,517	
'	3 4a	•		me (attach Schedule D)		4a	0		1	0	
	∦ b	, ,		4797, Part II, line 17) (attac	h Form 4797)	4b	0	<u> </u>		0	
	'• C	Capital loss de	•		-	4c	0			0	
	5	•		tnership or an S corporation (		5	0			0	
	6		•	ile C)		6	0		0	0	
	7		•	ced income (Schedule E)		7	0		0	0	
	8			and rents from a controlled organ	nization (Schedule F)	8	0		0	0	
	9			ction 501(c)(7), (9), or (17) organiz		9	0		0	0	
	10			ivity income (Schedule I)		10	0		0	0	
	11	•	-	Schedule J)		11	0		0	0	
	12	-		tructions; attach schedule)		12	0			0	
	13	Total. Combin			<u> </u>	13	20,517		0	20,517	
	Part			Taken Elsewhere (See				tions.) (Exce	pt for cor	ntributions,	
				be directly connected w			siness income.)		-		
	14	Compensation	n of offic	cers, directors, and truste	es (Schedule K)		RECE	IVED ·	14	0	
	15	Salaries and v	•				1.7	·····	15 ای	0	
	16			ance			JUL 1	: 2020 · 18	70 16	0	
3	17	Bad debts						) ZUZU . [	16 17 18	0	
7	18	-		dule) (see instructions) .					至 19	10,326	
8	19						OGDE	N, UT	20	10,326	
Received in	20			ons (See instructions for li			21	ol	20	+	
8.	21 22	Depreciation (		imed on Schedule A and				0		اه	
3	23								23	3,078	
	23 24	•		rred compensation plans					24	0,070	
<u> </u>	25			grams					. 25	0	
,	26			nses (Schedule I)					26	0	
٠,	27			osts (Schedule J)						0	
į.	28			ach schedule)					. 28	9,206	
3	29			dd lines 14 through 28					28 29	22,610	
	30	Unrelated bus	iness ta	xable income before net o	perating loss de	ductio	on Subtract line 2	9 from line 1	3 <b>30</b>	(2,093)	
	31	Deduction for r	net opera	ating loss arising in tax year	s beginning on or	after	January 1, 2018 (s	ee instruction	30 31		
	32	Unrelated bus	siness ta	axable income. Subtract li	ne 31 from line 3	30		<u> </u>	3 32	(2,093)	



	о-т (2018)			Page 2
Part I				
	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	1 1		
	instructions)	33		0
	Amounts paid for disallowed fringes	34		+
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	25		o
	Instructions)	35		<u>'</u>
36	of lines 33 and 34	36		٥
07	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37		<del> </del>
37 38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,	37		+
30	enter the smaller of zero or line 36	38		٥
Part I		100		<u> </u>
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39		0
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on			
	the amount on line 38 from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041) ▶	40		
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		0
Part '				- <del>1</del>
45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) . 45a	<b>_</b>  .		
Ь	Other credits (see instructions)	-		
C	General business credit. Attach Form 3800 (see instructions)	-		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45e		0
е 46	Subtract line 45e from line 44	46	***	0
40 47	Other taxes, Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	47		0
48	Total tax. Add lines 46 and 47 (see instructions)	48		0
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49		<u> </u>
50a	Payments: A 2017 overpayment credited to 2018			
b	2018 estimated tax payments			
С	Tax deposited with Form 8868	]		
d	Foreign organizations: Tax paid or withheld at source (see instructions) . 50d	_		
е	Backup withholding (see instructions)	4 1		
f	Credit for small employer health insurance premiums (attach Form 8941) . 7 50f	4		
g	Other credits, adjustments, and payments:  Form 2439			
	☐ Form 4136 ☐ Other ☐ 0 Total ► 0 50g 0	<del> </del>	7.00	
51	Total payments. Add lines 50a through 50g	51	7,30	<u>'</u>
52 52	Estimated tax penalty (see instructions). Check if Form 2220 is attached			0
53 54	<b>Tax due.</b> If line 51 is less than the total of lines 48, 49, and 52, enter amount owed <b>Overpayment.</b> If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	3 34	7,30	<del>-</del>
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax > 7,300 Refunded	. <del>                                    </del>		0
Part		div oo		-
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or or	other auti	nority Ye	s No
•	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization m	ay have t	to file	
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign Bank and Financial Accounts.			_
	here ▶			1
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fo	reign trust	12 .	✓
	If "Yes," see instructions for other forms the organization may have to file.			
58	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		6,153	
C:	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the b true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	est of my kr	owledge and	oelief, it is
Sign		May the	IRS discuss the preparer show	ns retum
Here			uctions)?	
	Signature of officer Date Title	<del></del>	PTIN	
Paid	MANUSED DIGUITED	heck	1	66526
Prepa	FENST & YOUNG US LIFE	elf-employe	34-6565	
lise (	Only Firm's name ► ERNST & YOUNG US LLP FI	rm's EIN ►	0 + 0000	

190 CARONDELET PLAZA, STE 1300, CLAYTON, MO 63105

Use Only

Firm's address ▶

(314) 290-1000 Form 990-T (2018)

Phone no

Form 9	90-T (2018)										P	age 3
Sche	dule A-Cost of Goods Sole	d. En	iter method of in	vent	ory va	luation >	N	'A				
1	Inventory at beginning of year		1 0		6	Inventory a	at e	end of year	6		0	
2	Purchases		2 0		7	Cost of	go	ods sold. Subtract				
3	Cost of labor		3 0			line 6 from	n li	ne 5. Enter here and				
4a	Additional section 263A cost	s 🗆				ın Part I, lır	ιе	2	7_		0	
	(attach schedule)	-   .	<b>4a</b> 0		8	Do the rul	les	of section 263A (with	h res	pect to	Yes	No
b	Other costs (attach schedule)		<b>4b</b> 0					duced or acquired for				
5	Total. Add lines 1 through 4b		<b>5</b> 0			to the orga	anı	zation?				✓
Sche	dule C-Rent Income (Fron	ı Re	al Property and	Per	sonal	Property I	Le	ased With Real Pro	pert	y)		
(see	instructions)											
1. Desc	nption of property											
(1)								·				
(2)												
(3)												
(4)								·				
	2. Rent	receiv	ed or accrued									
	om personal property (if the percentage o personal property is more than 10% but r more than 50%)		(b) From real ar percentage of rent 50% or if the rent	for pers	sonal pro	perty exceeds		3(a) Deductions directly in columns 2(a) and				е
(1)							T					
(2)												
(3)												
(4)		-								·		
Total		0	Total				0	(b) Total deductions.	-			
(c) Tot	tal income. Add totals of columns 2	(a) an	d 2(b) Enter					Enter here and on page	1.			
	nd on page 1, Part I, line 6, column (						0	Part I, line 6, column (B)				0
Sche	dule E—Unrelated Debt-Fir	anc	ed Income (see	ınstru	ictions	)						
						ome from or	ļ	3. Deductions directly con debt-finance			cable to	)
	Description of debt-finance	d prop	perty	allocable to debt-financed property		(a) Straight line depreciation (b) Other deduction			duction	<u> </u>		
				<u> </u>			<u> </u>	(attach schedule)	ļ	(attach sch	edule)	
(1)				ļ			Ļ.		L			
(2)				ļ			ļ.,		ļ			
(3)							ļ.,					
(4)				ļ			<u> </u>					
	acquisition debt on or	of or ebt-fin	e adjusted basis allocable to anced property ch schedule)		4 dr	olumn vided lumn 5		7. Gross income reportable (column 2 × column 6)		Allocable de umn 6 × total 3(a) and 3	of colu	
(1)						%						
(2)						%						
(3)				<u> </u>		%						
(4)						%						
								nter here and on page 1, Part I, line 7, column (A)		er here and t I, line 7, c		
Totals						. ▶	Ŀ	0				0
Total o	dividends-received deductions inc	luded	ın column 8					<b>&gt;</b>				0
										Form 9	90-T	(2018)

Form 990-T (2018)								Page 4
Schedule F—Interest, Annuit	ties Royalties	and Rent	s From (	Controlled Org	anizations (se	e instrui	ctions)	rage -
Scriedae 1 — Interest, Amun	des, moyantes,			Organizations	amzarono (co	0 111011 01	31.01.0)	
1. Name of controlled organization	2. Employer dentification number	3. Net unrela	ated income		5. Part of colum included in the c organization's gro	controlling	conne	eductions directly ected with income in column 5
(1)		<del> </del>			<del>-</del>			
(2)								
(3)								
(4)								
Nonexempt Controlled Organizat	tions							
7. Taxable Income	8. Net unrelated in (loss) (see instruc			otal of specified yments made	10. Part of column included in the coorganization's great transfer of the column included in the column included i	controlling	connec	eductions directly cted with income in column 10
(1)								
(2)	,		-					
(3)								
(4)								
					Add columns 5 Enter here and c Part I, line 8, co	on page 1,	Enter h	columns 6 and 11 here and on page 1, line 8, column (B)
Totals .				<u> </u>	<u> </u>		0	
Schedule G-Investment Inc	come of a Sec	tion 501(c			zation (see inst	tructions		
1. Description of income	2. Amount o	of income	direc	Deductions city connected ach schedule)	4. Set-asides (attach schedule)		and s	otal deductions et-asides (col. 3 plus col. 4)
(1)								<del> </del>
(2)								
(3)								
(4)	Enter here and Part I, line 9,							re and on page 1, ne 9, column (B).
Takala		0		-				,
Totals Schedule I—Exploited Exen	ant Activity Inc		·	Advertising In	come (see inst	ructions	2)	
Description of exploited activity	2. Gross unrelated business inco from trade business	3. E d conne prod or	ected with luction of irelated ess 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. Ex	penses Itable to Jumn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						1	<del></del> -	
(2)					· ·			
(3)								
(4)				-				
Totals	Enter here an page 1, Par line 10, col	ti, page	nere and on a 1, Part I, 0, col (B)					Enter here and on page 1, Part II, line 26
Schedule J-Advertising Inc								
Part I Income From Per	riodicals Repo	rted on a	Consoli	dated Basis				<del></del>
1. Name of penodical	2. Gross advertisinų income	<b>1</b>	Direct sising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	1	adership osts	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)			-					
(2)				] [				]
(0)				ı	·			1

Totals (carry to Part II, line (5))

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns Part II 2 through 7 on a line-by-line basis.)

1. Name of penodical	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)					ļ	
Totals from Part I	0	0				0
	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)	0	0		,		0

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		<b>•</b>	0

Form **990-T** (2018)

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

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

48-0547734

Employer identification number

OMB No 1545-0687

Department of the Treasury Internal Revenue Service Name of the organization

For calendar year 2018 or other tax year beginning 07/01, 2018, and ending 06/30, 20 19

▶ 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

THE F	(ANSAS UNIVERSITY ENDOWMENT ASSOCIATION		48-0547734			
Ur	nrelated business activity code (see instructions) ▶ 523000					
De	escribe the unrelated trade or business > INCOME FROM PART	NERSH	HP INVESTMENTS			
Par	Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net
1a	Gross receipts or sales0					
b	Less returns and allowances 0 c Balance ▶	1c	0			
2	Cost of goods sold (Schedule A, line 7)	2	0		-	<u> </u>
3	Gross profit. Subtract line 2 from line 1c	3	0			0
4a	Capital gain net income (attach Schedule D)	4a	691,799			691,799
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	2,314			2,314
С	Capital loss deduction for trusts	4c	0			0
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5	(8,269,174)			(8,269,174)
6 `	Rent income (Schedule C)	6	0	. 0		0
7	Unrelated debt-financed income (Schedule E)	7	0	0		0
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Schedule F)	8	0	0		0
9	Investment income of a section 501(c)(7), (9), or (17)					
	organization (Schedule G)	9	0	0		0
10	Exploited exempt activity income (Schedule I)	10	• 0	0		0
11	Advertising income (Schedule J)	11	0	0		0
12	Other income (See instructions; attach schedule)	12	0			0
13	Total. Combine lines 3 through 12	13	(7,575,061)	0		(7,575,061)
Part	deductions must be directly connected with the unrelate	ed bu	siness income.)			
14	Compensation of officers, directors, and trustees (Schedule K)				14	0
15	Salaries and wages				15	0
16	Repairs and maintenance				16	0
17	Bad debts				17	0
18	Interest (attach schedule) (see instructions)				18	0
19	Taxes and licenses				19	20,193
20	Charitable contributions (See instructions for limitation rules)			1	20	0
21	Depreciation (attach Form 4562)		. 21	0		
22	Less depreciation claimed on Schedule A and elsewhere on re			0	22b	0
23	Depletion				23	0
24	Contributions to deferred compensation plans				24	0

Employee benefit programs . . . .

Excess exempt expenses (Schedule I)

Excess readership costs (Schedule J)

Other deductions (attach schedule) .

Total deductions. Add lines 14 through 28

Unrelated business taxable income. Subtract line 31 from line 30

25

26

27

28

29

30 31

Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see

0

0

0

0

ō

20,193

(7,595,254)

(7,595,254)

25

26

27

28

29

30

31

32

Name of Partnership	EIN	UBI
AIM ACTIVITY		
(1) ADVENT INTERNATIONAL GPE VIII-B LP	81-1150648	-1,039
(2) ARBORETUM VENTURES III, LP	27-4709037	4,140
(3) AUDAX PRIVATE EQUITY FUND IV AIV, L P	90-0995723	-53,945
(4) AUDAX PRIVATE EQUITY FUND V-A, L P	47-4416548	-132,254
(5) BATTERY VENTURES XII AIV I, LP	82-4279847	-6,141
(6) BATTERY VENTURES XII AIV II, LP	82-4674790	-991
(7) BATTERY VENTURES XII SIDE FUND AIV I, LP	82-4314464	-6,612
(8) BATTERY VENTURES XII SIDE FUND AIV II, LP	82-4689475	-1,037
(9) BENEFIT STREET PARTNERS SPECIAL SITUATIONS FUND LP	81-2186497	-268,183
(10) BLACKSTONE REAL ESTATE PARTNERS VII TE 6 LP	90-0859487	-29,203
(11) BLACKSTONE REAL ESTATE PARTNERS VII TE 6-NQ LP	90-0861044	37,857
(12) BLACKSTONE REAL ESTATE PARTNERS VIII TE 1 LP	47-3260122	-53,169
(13) BLACKSTONE REAL ESTATE PARTNERS VIII TE 1-NQ LP	47-3716840	-20,917
(14) COMMONFUND CAPITAL INTERNATIONAL PARTNERS VI, LP	20-8306365	448
(15) COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VI, LP	16-1720029	31,545
(16) COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VII, LP	20-8306306	<u>19,751</u>
(17) COMMONFUND CAPITAL VENTURE PARTNERS VII, L P	16-1720044	-7
(18) COMMONFUND CAPITAL VENTURE PARTNERS VIII, LP	11-3814030	-44
(19) CONTRARIAN DISTRESSED REAL ESTATE DEBT FUND II, LP	27-3847484	-1,874
(20) CROSSHARBOR INSTITUTIONAL PARTNERS 2014, LP	30-0842329	6,770
(21) CROSSHARBOR INSTITUTIONAL PARTNERS 2018, LP	82-4034710	-614
(22) CROSSHARBOR INSTITUTIONAL PARTNERS II LP	27-4335021	112,919
(23) DAVIDSON KEMPNER INSTITUTIONAL PARTNERS LP	13-3597020	-4,722
(24) DENHAM COMMODITY PARTNERS FUND VI LP	45-2484628	-165,889
(25) DENHAM OIL & GAS FUND LP	47-3010122	-618,518
(26) ENCAP ENERGY CAPITAL FUND IX, LP	80-0860738	-589,420
(27) ENCAP ENERGY CAPITAL FUND VIII, LP	27-2032518	-153,584
(28) ENCAP ENERGY CAPITAL FUND X, LP	47-2732735	-1,003,710
(29) ENCAP ENERGY CAPITAL FUND XI, LP	81-4648210	-154,762
(30) ENCAP FLATROCK MIDSTREAM FUND II, LP	45-5057812	-170,494
(31) ENCAP FLATROCK MIDSTREAM FUND III, LP	46-4943834	-593,109
(32) ENCAP FLATROCK MIDSTREAM FUND IV, LP	82-2890021	-1,140,977
(33) EQM MIDSTREAM PARTNERS, LP	37-1661577	21
(34) FORTRESS CREDIT OPPORTUNITIES FUND III (B) LP	99-0365908	21
(35) FORTRESS CREDIT OPPORTUNITIES FUND IV (B) LP	61-1742367	2,055
(36) GREAT HILL EQUITY PARTNERS VI, LP	81-5105538	-95,430
(37) GREAT HILL EQUITY PARTNERS VI-A, LP	98-1462687	-1,875
(38) GSO CAPITAL SOLUTIONS FUND III LP	82-1056949	16,362
(39) GSO CSF III AIV-1 LP	82-1378398	2,703
(40) GSO CSF III AIV-5 LP	98-1360267	-1
(41) HARVEST MLP INCOME FUND LLC	27-2968896	-3,103,056
(42) HIGHFIELDS CAPITAL IV LP	11-3841276	-279
(43) J H WHITNEY VII AIV, LP	45-5548038	43,023
(44) JAYHAWKERS LLC	26-2545846	, -370
(45) KING STREET CAPITAL, LP	13-3812174	179,407
(46) LEAWOOD VC FUND I LP	81-4637405	-1,602
(47) LIGHTSPEED VENTURE PARTNERS XI, LP	98-1291114	-1
(48) MAGELLAN MIDSTREAM PARTNERS, LP	73-1599053	-139
(49) MANGROVE INVESTORS II LP	46-2271405	59,244
(50) METROPOLITAN REAL ESTATE PARTNERS INTERNATIONAL II, LP	26-0326609	5 797
(51) METROPOLITAN REAL ESTATE PARTNERS VI, LP	26-2085460	2,743
(52) ORBIMED PRIVATE INVESTMENTS V - KA, LP	47-3961868	-67,165
(53) ORBIMED ROYALTY OPPORTUNITIES II, LP	32-0457118	55,480
(54) SILVER LAKE PARTNERS V DE (AIV II), LP	82-4692064	-1,12

	Total for Part I, Line 5	-8,269,174
(63) VIVO CAPITAL FUND VIII, LP	47-1762196	-1,977
(62) TRIDENT VII, LP	98-1321105	116
(61) THOMA BRAVO SPECIAL OPPORTUNITIES FUND I AIV, LP	46-4497762	105
(60) SUSTAINABLE ASSET FUND II, LP	82-4330109	-2,765
(59) SSC V, LP	47-4811302	-210,943
(58) SSC IV, LP	30-0757153	51,218
(57) SSC - SAF I, LP	82-5380589	-36,472
(56) SILVER LAKE PARTNERS V DE AIV, LP	82-4187984	8,419
(55) SILVER LAKE PARTNERS V DE (AIV) MARQUEE, LP	82-4239145	1,302

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Form 990T Part II, Line 19 Taxes and Licenses

Description		Amount
WORKING INTEREST		
(1) PROPERTY TAX		3,129
(2) STATE INCOME TAX		7 197
	Total	10,326
AIM ACTIVITY		
(3) STATE INCOME TAX		20 193

## Form 990T Part II, Line 20 Charitable Contributions

Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Converted to NOL	Amount Remaining	Contribution Carryover Expires
2014	6,758				6,758	2019
2015	3,033				3,033	2020
2016	21,239				21,239	2021
2017	8,568				8,568	2022
2018	11,228				11,228	2023
Totals	50,826	0	0	0	50,826	

# Form 990T Part II, Line 28 Other Deductions

Description		Amount
WORKING INTEREST		
(1) CONSULTING EXPENSES		6,426
(2) PROFESSIONAL SERVICES		2,780
	Total	9,206

### Form 990T Part III, Line 35 Deduction for net operating loss ansing in tax years beginning before January 1, 2018

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	NOL Expires
2009	11,291				11,291	2029
2010	10,648	·			10,648	2030
2011	164,977				164,977	2031
2012	241,143				241,143	2032
2013	1,099,486				1,099,486	2033
2014	1,051,257				1,051,257	2034
2015	532,552				532,552	2035
2016	2,001,584				2,001,584	2036
2017	5,641,985				5,641,985	2037
Totals	10,754,923	0	0,	0	10,754,923	

<sup>\*</sup> The NOL carryforward for the 6/30/18 tax year has been adjusted to reflect the retroactive repeal of Section 512(a)(7). \$2,908 of the NOL utilized on the 6/30/18 Form 990T has been added back to the total NOL available for the tax year ending 6/30/19.

# Form **3800**

Department of the Treasury

Department of the Treasury

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

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

**General Business Credit** 

OMB No 1545-0895

2018

Attachment
Sequence No 22

Internal Revenue Service (99)
Name(s) shown on return

THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION

Identifying number 48-0547734

Part	Current Year Credit for Credits Not Allowed Against Contative Minimum Tax (TI	MT)	1
	(See instructions and complete Part(s) III before Parts I and II.)		
1	General business credit from line 2 of all Parts III with box A checked	1	0
2	Passive activity credits from line 2 of all Parts III with box B checked 2 0		
3	Enter the applicable passive activity credits allowed for 2018. See instructions	3	
4	Carryforward of general business credit to 2018. Enter the amount from line 2 of Part III with box C checked. See instructions for statement to attach	4	1,000
5	Carryback of general business credit from 2019. Enter the amount from line 2 of Part III with box D checked. See instructions	5	О
6	Add lines 1, 3, 4, and 5	6	1,000
Part			
7	Regular tax before credits:	. 3	
	• 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 applicable line of your return	7	0
	• 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		
8	Alternative minimum tax:		
	Individuals. Enter the amount from Form 6251, line 11		
	• Corporations. Enter -0	8	0
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 56		
9	Add lines 7 and 8	9	0
	1.5.1		
10a			
ь	Certain allowable credits (see instructions)		
С	Add lines 10a and 10b	10c	0
-11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	0
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 instructions		
14	Tentative minimum tax:		
	Individuals. Enter the amount from Form 6251, line 9		
	• Corporations. Enter -0		
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54		
15	Enter the greater of line 13 or line 14	15	
16	Subtract line 15 from line 11. If zero or less, enter -0	16	0
17	Enter the <b>smaller</b> of line 6 or line 16	17	. 0
	<b>C corporations:</b> See the line 17 instructions if there has been an ownership change, acquisition, or reorganization.		

Part			
Note:	If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and ei	nter -	0- on line 26.
18	Multiply line 14 by 75% (0.75). See instructions	18	0
19	Enter the greater of line 13 or line 18	19	0
20	Subtract line 19 from line 11. If zero or less, enter -0	20	0
21	Subtract line 17 from line 20. If zero or less, enter -0	21	0
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	0
23	Passive activity credit from line 3 of all Parts III with box B checked 23 0		
24	Enter the applicable passive activity credit allowed for 2018. See instructions	24	
25	Add lines 22 and 24	25	0
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0
27	Subtract line 13 from line 11 If zero or less, enter -0	27	0
28	Add lines 17 and 26	28	0
29	Subtract line 28 from line 27. If zero or less, enter -0	29	0
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	0
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked 0		
33	Enter the applicable passive activity credits allowed for 2018. See instructions	33	
34	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	34	0
35	Carryback of business credit from 2019. Enter the amount from line 5 of Part III with box D checked. See instructions	35	0
36	Add lines 30, 33, 34, and 35	36	0
37	Enter the <b>smaller</b> of line 29 or line 36	37	0
38	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  • Estates and trusts. Form 1041, Schedule G, line 2b	38	0

For	m 380	00 (2018)				F	Page 3
Na	me(s)	shown on return		Idei	ntıfyı	ng number	
		ANSAS UNIVERSITY ENDOWMENT ASSOCIATION				48-0547734	
	art I		e inst	ructions)			
Co		ete a separate Part III for each box checked below. See instructions.					
Α		General Business Credit From a Non-Passive Activity					
		General Business Credit From a Passive Activity F Reserved	_				
			Busin	ess Credit Cari	ryfoi	rwards	
D		General Business Credit Carrybacks H 🔲 Reserved					
1		ou are filing more than one Part III with box A or B checked, complete and attach fire Parts III with box A or B checked. Check here if this is the consolidated Part III.					from ▶ □
_	all r	(a) Description of credit	•	(b)	<del></del>		
<b>81</b> -		•••		If claiming the cri		(c) Enter the appropr	nate
		n any line where the credit is from more than one source, a separate Part III is needed for e rough entity.	acn	from a pass-throughtentity, enter the I		amount	
_	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a	oning, one in a			
	b	Reserved	1b				
	C	Increasing research activities (Form 6765)	1c			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>
	d	Low-income housing (Form 8586, Part I only)	1d			<del></del>	
	е	Disabled access (Form 8826) (see instructions for limitation)	1e		$\neg$		
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		$\neg$		
	g	Indian employment (Form 8845)	1g				
	h	Orphan drug (Form 8820)	1h				
	i	New markets (Form 8874)	1i				
	i	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				
	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				
	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	Mine rescue team training (Form 8923)	1u				
	v	Agricultural chemicals security (carryforward only)	1v				
	w	Employer differential wage payments (Form 8932)	1w				
	x	Carbon oxide sequestration (Form 8933)	1x				
	У	Qualified plug-in electric drive motor vehicle (Form 8936)	<b>1y</b>				
	Z	Qualified plug-in electric vehicle (carryforward only)	1z				
	aa	Employee retention (Form 5884-A)	1aa				
	bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb		$\_ \bot$		
	ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain					ŀ
		other credits (see instructions)	1zz			1,000	Ĺ
	2	Add lines 1a through 1zz and enter here and on the applicable line of Part i	2			1,000	
;	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3_				
	4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		_		
	b	Work opportunity (Form 5884)	4b				
	C	Biofuel producer (Form 6478)	4c		_		
	ď	Low-income housing (Form 8586, Part II)	4d				
	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			<u>-</u>	<u> </u>
	g	Qualified railroad track maintenance (Form 8900)	4g				
	h	Small employer health insurance premiums (Form 8941)	4h				
	i	Increasing research activities (Form 6765)	4i				L
	j	Employer credit for paid family and medical leave (Form 8994)	4j				
	z	Other	4z				
;	5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5			0	
(	6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II .	6			1,000	

\$1,000

Total Credit Carryforward

General Business Carryfor	ward Schedule - Form 3800	
Year Credit generated 2010 (FYE 6/30/11)	Credit New Hire Retention Credit (Form 5884-B)	*1,000

#### SCHEDULE D (Form 1120)

Name

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

2018

Employer identification number

THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION 48-0547734 Part I Short-Term Capital Gains and Losses (See instructions.) See instructions for how to figure the amounts to enter on (g) Adjustments to gain (h) Gain or (loss) Subtract column (e) from or loss from Form(s) Proceeds Cost 8949, Part I, line 2, column (d) and combine This form may be easier to complete if you round off cents to (or other basis) (sales price) column (g) the result with column (g) whole dollars 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, 0 0 leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 0 0 with Box A checked 2 Totals for all transactions reported on Form(s) 8949 O 0 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked 16,673 16,673 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37. 4 5 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 6 Unused capital loss carryover (attach computation) 6 0) 16,673 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h Part II Long-Term Capital Gains and Losses (See instructions. (g) Adjustments to gain See instructions for how to figure the amounts to enter on (h) Gain or (loss) (d) -(e) the lines below. or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part II, line 2, column (d) and combine This form may be easier to complete if you round off cents to (sales price) (or other basis) column (g) the result with column (a) whole dollars 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 0 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 0 Totals for all transactions reported on Form(s) 8949 0 with Box E checked Totals for all transactions reported on Form(s) 8949 57.079 57,079 with Box F checked 11 Enter gain from Form 4797, line 7 or 9. . . 11 618,047 12 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 14 Capital gain distributions (see instructions) . 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h 15 675,126 Summary of Parts I and II 16 16,673 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) 17 675,126 18 Add lines 16 and 17 Enter here and on Form 1120, page 1, line 8, or the proper line on other returns . 18 691,799

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

# KANSAS UNIVERSITY ENDOWMENT ASSOCIATION EIN: 48-0547734 STATEMENT ATTACHED TO AND MADE PART OF INCOME TAX RETURN FOR TAXABLE YEAR – ENDED JUNE 30, 2019

## Schedule D, Part I, Line 3 Col. H - Short-term gain or (loss)

Investment Name	EIN/Reference Number	Amount
AUDAX PRIVATE EQUITY FUND V-A, LP	47-4416548	-18,869
BENEFIT STREET PARTNERS SPECIAL SITUATIONS FUND LP	81-2186497	-7,896
BLACKSTONE REAL ESTATE PARTNERS VIII.TE.1 LP	47-3260122	273
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VII, LP	20-8306306	-7
GSO CAPITAL SOLUTIONS FUND III LP	82-1056949	33,360
ORBIMED ROYALTY OPPORTUNITIES II, LP	32-0457118	9,178
SILVER LAKE PARTNERS V DE (AIV) MARQUEE, LP	82-4239145	634
	Total	16,673

## Schedule D, Part II, Line 10 Col. H - Long-term gain or (loss)

Investment Name	EIN/Reference Number	Amount
BENEFIT STREET PARTNERS SPECIAL SITUATIONS FUND LP	81-2186497	23,626
BLACKSTONE REAL ESTATE PARTNERS VII.TE.6-NQ LP	90-0861044	580
BLACKSTONE REAL ESTATE PARTNERS VIII.TE.1 LP	47-3260122	125
COMMONFUND CAPITAL INTERNATIONAL PARTNERS VI, LP	20-8306365	50
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VI, LP	16-1720029	9,052
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VII, LP	20-8306306	7,074
KING STREET CAPITAL, LP	13-3812174	-37
ORBIMED ROYALTY OPPORTUNITIES II, LP	32-0457118	8,598
VIVO CAPITAL FUND VIII, LP	47-1762196	8,011
	Total	57,079

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

THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION

Social security number or taxpayer identification number

Cefore you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions	not reported	to you on F	orm 1099-B				
1 (a) Description of property	(Mo. day vr.) dispose	Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f) parate instructions.	(h) Gain or (loss). Subtract column (e)
(Example 100 sh XYZ Co)		disposed of (Mo , day, yr )	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
SHORT-TERM GAIN/LOSS FROM INVESTMENTS			16,673				16,673
SHORT-TERM ORDINARY GAIN/LOSS FROM INVESTMENTS			0				0
							•
2 Totals. Add the amounts in columns negative amounts) Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6).	al here and inc is checked), lir	lude on your ne 2 (if Box B	16,673	0		0	16,673

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

above is checked), or line 3 (if Box C above is checked) ▶

Earm	9040	(2010

Attachment Sequence No 12A

age 2

Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side. THE KANSAS UNIVERSITY ENDOWMENT ASSOCIATION.

Social security number or taxpayer identification number 48-0547734

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II

**Long-Term.** Transactions involving capital assets you held more than 1 year are Generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

<ul><li>☐ (D) Long-term transactions</li><li>☐ (E) Long-term transactions</li></ul>	•		-				)	
✓ (F) Long-term transactions	not reported	to you on Fo	rm 1099-B					
1 (a) Description of property	(b) Date acquired	Date sold or Proc	(c)	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a c	djustment, if any, to gain or loss you enter an amount in column (g), enter a code in column (f) See the separate instructions.	
(Example 100 sh XYZ Co)	(Mo , day, yr )	disposed of (Mo , day, yr )	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)	
LONG-TERM GAIN/LOSS FROM INVESTMENTS			57,079				57,079	
LONG-TERM ORDINARY GAIN/LOSS FROM INVESTMENTS			0				0	
		_				<del></del>		
88								
Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	al here and inc is checked), lir	lude on your ne 9 (if Box E	57,079	0		0	57,079	

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