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	Form 99	9-T (2G19)	THE LOIS AND RICHARD	ENGLAND FOUNDATION	N, INC., (C/O RIC	52-	-1691418 Page 2
•			Total Unrelated Business Taxal					
			f unrelated business taxable income computed				140	-52.
	32			· ·	see instructions)		32	
	33			·····	∤··•{·· · · · · · · · · · · · · · · · · ·		- 1	
	34	Charita	ble contributions (see instructions for limitation	n rules)	<i>T</i> / · · · · · · ·	سر	/ 31	0.
	35		nrelated business taxable income before pre-20					-52.
	36	Deduct	ion for net operating loss arising in tax years b	eginning before January 1, 2018 see ins	tructions)	STMT 18	5 36	0.
	37		f unrelated business taxable income before spe			<i>-</i> 1	37	-52.
	38		c deduction (Generally \$1,000, but see line 38			- /.	38	1,000.
			ted business taxable income. Subtract line 3				ノトザー	
ļ	} 39			• •	•	1	M = M	-52.
•				<u> 4</u>	. , <u></u>	······ /	1 39	-34.
	Part		Tax Computation			 		
	40		zations Taxable as Corporations. Multiply line			🕨	- 40	0.
	41	Trusts	Taxable at Trust Rates. See instructions for ta	ax computation. Income tax on the amour	nt on line 39 from:		1 1	
		Ti	ax rate schedule or 🔲 Schedule D (Form	1041)		, , >	41	
	42	Proxy t	ax. See instructions ,			>	42	
	43		tive minimum tax (trusts only)				43	
			Noncompliant Facility Income. See instruction				44	
Ш			Add lines 42, 43, and 44 to line 40 or 41, which				45	0.
			Tax and Payments	iever appries	 		1 45 1	
					T. T		737	
	46 a	Foreign	tax credit (corporations attach Form 1118; trù	ists attach Form 1116)			-	
	b	Other c	redits (see instructions) business credit. Attach Form 3800		46b		-4. 1	
	C	General	I business credit. Attach Form 3800		46c		4. 1	
	ď	Credit f	lor prìor year mìnimum tax (attach Form 8801:	or 8827)	46d		_ `	
	е	Total c	redits. Add lines 46a through 46d				46e	
	47	Subtrac	ct line 46e from line 45		4. `		47	0.
	48	Otheŕ ta	axes. Check if from: Form 4255	Form 8611 Form 8697 Form	n 8866 Other	(attach schedule)	48	
			ax. Add lines 47 and 48 (see instructions)	• •				0.
	F0	2010 0	ot 066 to link the paid from Form 065 A or Fo	em OCC D. Port II. column (b) line 2. A		,,	50	0.
	50	20 (9 (1)	et 965 tax liability paid from Form 965-A or Fo nts: A 2018 overpayment credited to 2019	mi 905-8, Part II, Column (k), line 3	A N	1 0 4 7	 +	
	51 a	Paymer	nts: A 2018 overpayment credited to 2019		9 542	1,847	-	
	b	2019 es	stimated tax payments		. 51b		-1 .1	
	C	Tax dep	oosited with Form 8868	.,	51c		-1 1	
	đ	Foreign	organizations: Tax paid or withheld at source	(see instructions)	. 51d	····	_	
	e	Backup	withholding (see instructions)		51e			
	f	Credit f	or small employer health insurance premiums	(attach Form 8941)	511		1	
				orm 2439			ا ز - [
	•			therTotal	▶ 51g		1.1	
	52		ayments. Add lines 51a through 51g				56	1,847.
	52	Cational	ad the secolar take is the tribugit of g	2000 a othered			52	1,047.
			ed tax penalty (see instructions). Check if Forn					
			e. If line 52 is less than the total of lines 49, 50		······································	······································	54	4 048
11-	`		yment. If line 52 is larger than the total of line	· · · · · · · · · · · · · · · · · · ·	<u></u>	,	55	1,847.
u,			e amount of line 55 you want. Credited to 202			funded 7	56	0.
- 1	Part	VI :	Statements Regarding Certain	Activities and Other Informa	ition (see instru	ctions)		·
	57	At any t	ame during the 2019 calendar year, did the org	janization have an interest in or a signatur	e or other authority			Yes No
		over a f	inancial account (bank, securities, or other) in	a foreign country? If "Yes," the organizate	on may have to file			
		FinCEN	Form 114, Report of Foreign Bank and Financi	al Accounts. If "Yes," enter the name of th	e foreign country			
		here	•					X
			the tax year, did the organization receive a dist	ribution from or was it the granter of or	transferor to a fore	an truet?		X
				- · · · · · · · · · · · · · · · · · · ·	transferoj to, a forei	giruustr		··· ··· 42
			see instructions for other forms the organization	•				
-	59		e amount of tax-exempt interest received or ac		d atatamanta : - d 4- 11	hant at a star		
	Sign	60	nder penalties of perjury, I declare that I have examined rrect, and complete. Declaration of prepager (other than	unis return, including accompanying schedules an taxplayer) is based on all information of which pre	o statements, and to the parer has any knowledge	e	reage and be	ouer, it is true,
	Here		70.8 1160U	1 11/26/2				discuss this return with
			Villery Tell	6. / 16/40 PRESI	DENT			shown below (see
			Signature of officer	Datê Title			instructions)	Yes No
			Print/Type preparer's name	Preparer's signature	Date	Check	if PTIN	
	Paid			F 11 C 114		self- employed	d	
	Prep		FRANK H. SMITH	Frank H. Smith	11/16/2020	. ,		0639053
	•	are,	Firm's name ► MARCUM LLP		·	Firm's EIN		1-1986323
	Use	Unity		EET NW #900				
			1			1		
			Firm's address > WASHINGTON	DC 20036		Phone no.	(301)	979-6000

THE LOIS AND RICHARD ENGLAND FOUNDATION, Form 990-T (2019) INC., C/O RICHARD ENGLAND, JR.

· 52-1691418

Page 3

Schedule A - Cost of Good	s Sold. Enter	method of inven	tory valuation N/	A	·			
1 Inventory at beginning of year			6 Inventory at end of ye			6		
2 Purchases	2		7 Cost of goods sold Subtract line 6					
3 Cost of labor	ost of labor 3							
4 a Additional section 263A costs			line 2	7				
(attach schedule)	4a		8 Do the rules of section	n 263A (v	with respect to	Yes No		
b Other costs (attach schedule)	4b		property produced or	acquired	for resale) apply to			
5 Total Add lines 1 through 4b	5		the organization?					
Schedule C - Rent Income (see instructions)	(From Real	Property and	Personal Property	Lease	d With Real Prope	rty)		
1. Description of property								
(1)								
(2)								
(3)								
(4)	-							
		ed or accrued			2(a) Dadustians directly o	connected with the income in		
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	e than	of rent for p	nd personal property (if the percent ersonal property exceeds 50% or if it is based on profit or income)	tage	columns 2(a) and	onnected with the income in 2(b) (attach schedule)		
(1)								
(2)								
(3)								
(4)								
Total	0.	Total		0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)	.		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	0.		
Schedule E - Unrelated Deb	ot-Financed	Income (see	instructions)					
			2. Gross income from		3 Deductions directly conne to debt-financed			
1 Description of debt-fir	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)		
				-				
(1)								
(2)				+				
(3)				-				
(4)	ī			+		<u> </u>		
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or a debt-fina	adjusted basis allocable to nced property n schedule)	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)			%					
					nter here and on page 1, Part I line 7, column (A)	Enter here and on page 1, Part I line 7, column (B)		
Totals			>	·	0.	0.		
Total dividends-received deductions in	ncluded in column	n <u>8</u>			>	0.		
						Form 990-T (2019)		

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Form 990-T (2019) INC., Schedule F - Interest,	C/O RICHAR	D ENGLAND,	JR.			<u> </u>	591418	Page 4	
Schedule F - Interest, A	Annuities, Roya	Ities, and Rents	From Con	trolle	d Organiza	tions (see 11	nstructions	5)	
		Exempt	Controlled Org	ganızatı	ons				
1 Name of controlled organizat	ıdent				stal of specified ments made 5 Part of column 4 that included in the controll organization's gross inc		ntrolling	offing connected with income	
(1)						-			
(2)			i i			-			
(3)									
(4)									
Nonexempt Controlled Organi	zations		• •					· · · · · · · · · · · · · · · · · · ·	
7. Taxable Income	8. Net unrelated inco (see instruction		al of specified paymi made	ents	in the controlling	nn 9 that is included ng organization's income		ductions directly connected income in column 10	
(1)							 		
(2)								-	
(3)							1		
(4)									
_(+)		I 			Enter here and	ns 5 and 10 on page 1, Part I, olumn (A)	Enter he	d columns 6 and 11 ere and on page 1, Part I, line 8, column (B)	
Totals				•		0.		0.	
Schedule G - Investme	nt Income of a	Section 501(c)(7), (9), or (1	7) Org	anization				
(see insti	ructions)								
1. Desc	ription of income		2. Amount of in	come	 Deduction directly connect (attach schedule) 	ted 4. Se	t-asides schedule)	5. Total deductions and set-asides (col 3 plus col 4)	
(1)									
(2)									
(3)									
(4)					-				
			Enter here and or Part I, line 9, colu		17.2	e e e e e e e e e e e e e e e e e e e		Enter here and on page 1, Part I, line 9, column (B)	
Totals		>		0.	The state of the s	e		9 0.	
Schedule I - Exploited (see instru	-	/ Income, Other	Than Adve	ertisin	g Income				
		3. Expenses	4. Net income	(loss)				7. Excess exempt	
1. Description of exploited activity	2. Gross unrelated business income from trade or business	directly connected with production of unrelated business income	from unrelated to business (columinus columnities) gain, compute of through 7	mn 2 3) If a cols 5	 Gross incor from activity the is not unrelated business incor 	nat attrib	xpenses utable to umn 5	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 (8)		7	and the	, , , , , ,		Enter here and on page 1, Part II, line 25	
Totals >	0.	0.		*	٠ - ١٠ - ١			1 0.	
Schedule J - Advertisir		instructions)							
Part4☐ Income From I	Periodicals Rep	orted on a Con	solidated E	Basis					
1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertis or (loss) (col col 3) If a gain cols 5 three	2 minus 1, compute	5. Circulati		dership sts	7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)			,	<u> </u>	•				
(2)			— • •)			· .	
(3)			-	,	`.			,	
(4)			一 、 · .	- 4.					
Totals (carry to Part II, line (5))	•	0. 0).					0.	
() to - art ii, iiio (0))		<u></u>						Form 990-T (2019)	

Form 990-T (2019)

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Form 990-T (2019) INC., C/C) RICHARD I	ENGLAND, .	JR				<u> 69141</u> 8	<u> </u>	Page 5
Part II Income From Perio	odicals Reporte	ed on a Separ	ate Basis (For ea	ch period	lical listed	ın Par	t 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 (toss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7	5. Circ	ulation ome		eadership costs	7 Excess reader costs (column 6 m column 5, but not reader than column 4)	inus more
(1)									
(2)		_							
(3)									
(4)					ĺ				
Totals from Part I	0.	0.	经验的	34.74	3277		10.00		0.
Totals, Part II (lines 1-5)	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 26	
Schedule K - Compensatio	n of Officers, D	irectors, and	Trustees (see in	struction	s)				
1 Name			2 Title		3 Percent time devote business	d to		ensation attributable elated business	
(1)						%			
(2)						%			
(3)						%			
(4)						%			
Total. Enter here and on page 1, Part II,	line 14	<u> </u>				>			0.

				
FORM 990-T	DECODEDMENT OF	E ODCANTAYAULONI C	PRIMARY UNRELATED	STATEMENT 13
FURM 99U-T	DESCRIPTION O	L OKCANITATION S	LUTHWUI ONUEDWIED	DIVIDUDIAT TO
		BUSINESS ACTIVIT	₽₩	
		DOSTNESS ACTIVI.	11	

PARTNERSHIP INVESTMENTS AND FRINGE BENEFITS

TO FORM 990-T, PAGE 1

FORM 990-T OTHER INCOME	STATEMENT 14
DESCRIPTION	AMOUNT
TIFF RE-UBI CPG ACTIVIST FUND-UBI FEG PRIVATE OPP. FUND -UBI	-483. 56. 375.
TOTAL TO FORM 990-T, PAGE 1, LINE 12	-52.

FORM 990-T	NET	OPERATING	LOSS	DEDUCTION	STATEMENT 15
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUS APPLI		LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	1,280.		0.	1,280.	1,280.
NOL CARRYOV	ER AVAILABLE THIS	YEAR		1,280.	1,280.

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 16
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/12	42.	42.	0.	0.
12/31/13	270.	270.	0.	0.
12/31/14	7,607.	7,607.	0.	0.
12/31/17	2,005.	0.	2,005.	2,005.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	2,005.	2,005.