000 T "	EXTENDED TO NOV			av Datum		OMB No 15	545-0687
Form 990-T	Exempt Organization Bus			ax Returr	¹ -	ONIB NO 13	143-0007
						20 °	18
*	For calendar year 2018 or other tax year beginning Go to www irs gov/Form990T for in		, and ending	tion	-	20	10
Department of the Treasury Internal Revenue Service	Do not enter SSN numbers on this form as it may				[Open to Public 501(c)(3) Organ	Inspection for izations Only
A Check box if address changed	Name of organization (changed and	d see instructions.)		(Emple	yer identification oyees' trust, se ctions)	
B Exempt under section	Print FORMERLY BAPTIST HEALI	NG HC	SPITAL TRU	JST	5	2-2362	2225
X 501(c)(3)	or Number, street, and room or suite no. If a P.O. bo	x, see instri	uctions.			ited business a istructions)	activity code
408(e) 220(e)	Type 2928 SIDCO DRIVE				,	,	
408A530(a)	City or town, state or province, country, and ZIP of	or foreign po	ostal code				
529(a)	NASHVILLE, TN 37204				523	<u>920</u>	
C Book value of all assets at end of year	F Group exemption number (See instructions.)	<u> </u>					
104,346,1	16. G Check organization type ► X 501(c) cor	poration	501(c) trust	401(a	trust	0	ther trust_
	organization's unrelated trades or businesses.	1		ne only (or first) ur			
	► INVESTMENTS			omplete Parts I-V.			
	lank space at the end of the previous sentence, complete Pa	arts I and II	, complete a Schedule	M for each addition	nal trade	or	
business, then complete				<u> </u>	T.,	- T	
	the corporation a subsidiary in an affiliated group or a pare	nt-subsidiai	ry controlled group?	▶ l	Ye:	s X N	0
	and identifying number of the parent corporation.		Talaaha	na number 🕨 6	1 =	201 20	202
	► KRISTEN KEELY-DINGER d Trade or Business Income		(A) Income	ne number 🕨 6 (B) Expense:			Net
<u> </u>		$\overline{}$	(A) moone	(b) Expense.	•		1
1a Gross receipts or sale		10					
b Less returns and allo2 Cost of goods sold (5		1c 2					
2 Cost of goods sold (S 3 Gross profit. Subtract	V V 1	3					
•	ne (attach Schedule D)	4a	156,919.	*		156	5,919.
	4797, Part II, line 17) (attach Form 4797)	4b					, , , , , , ,
c Capital loss deduction		4c					
•	partnership or an S corporation (attach statement)	5	-165,089.	STMT 1	.1	-165	5,089.
6 Rent income (Schedu		6	·				
	ed income (Schedule E)	7					
38 Interest, annuities, ro	yalties, and rents from a controlled organization (Schedule F)	8					
>9 Investment income o	f a section 501(c)(7), (9), or (17) organization (Schedule G)	9					
₹10 Exploited exempt acti	vity income (Schedule I)	10				<u></u>	
31 Advertising income (Schedule J)	11					
•	structions; attach schedule)	12					
13 Total. Combine lines		13	-8,170.	-			<u>3,170.</u>
	Ins Not Taken Elsewhere (See instructions for contributions, deductions must be directly connected			income)			
					1 1	 	
	icers, directors, and trustees (Schedule K)	RECE	VED.		14		
15 Salaries and wages	1 1	Sh	10		15 16		
16 Repairs and mainter17 Bad debts	nance S	งกง ซี 6	2019 181		17		
	dule) (see instructions)		2013		18		
19 Taxes and licenses	odio) (see instructions)	יחרפ	£		19		
	ons (See instructions for limitation rules)	JUEN	401		20		
21 Depreciation (attach	·		21				
·	aimed on Schedule A and elsewhere on return		22a		22b		
23 Depletion			(====		23		
•	erred compensation plans				24		J
25 Employee benefit pr					25		
26 Excess exempt expe	-		ı		26		
27 Excess readership of					27_		
28 Other deductions (a	tach schedule)	•			28		
29 Total deductions. A	dd lines 14 through 28				29		0.
	axable income before net operating loss deduction. Subtra			-	30	8	3,170.
31 Deduction for net of	erating loss arising in tax years beginning on or after Janua	ary 1, 2018	(see instructions)	•	31		
	axable income. Subtract line 31 from line 30	_			32		<u>3,170.</u>
823701 01-09-19 LHA F	or Paperwork Reduction Act Notice, see instructions.			an-12		Form 99	10-T (2018)

•	THE HEALING TRUST		
Form 990-1		62225	Page 2
Part I		<u> </u>	
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	8,170.
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) STMT 12	35	0.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of	100	
30	lines 33 and 34	36	-8,170.
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,	37	1,000.
30	enter the smaller of zero or line 36	38	-8,170.
Part I			
	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	0.
39		33	
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	
44		40	
41	Proxy tax See instructions Although a great to (to the set)	41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income See instructions	43	
HOOM N	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	0.
Part \			
	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	-	
đ	Credit for prior year minimum tax (attach Form 8801 or 8827)	┥ │	
е	Total credits. Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	0.
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	47	
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	0.
50 a	Payments: A 2017 overpayment credited to 2018	_	
b	2018 estimated tax payments 50b	_	
C	Tax deposited with Form 8868	_	
d	Foreign organizations: Tax paid or withheld at source (see instructions) 50d	_	
е	Backup withholding (see instructions) 50e	_	
f	Credit for small employer health insurance premiums (attach Form 8941) 50f		
g	Other credits, adjustments, and payments: Form 2439		
	☐ Form 4136 ☐ Other ☐ Total ► 50g	_	
51	Total payments Add lines 50a through 50g	51	
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	
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax	55	
Part \	/I 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	-	Yes No
	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 >		x
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		_ x
•	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 > \$		
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my kni	owledge and bel	ef, it is true,
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge		
Here		•	uss this return with
	THE TANK OF THE PARTY OF THE PA	nstructions)?	Yes No
		if PTIN	140
_			
Paid	CANTOR A L LONG CANTOR A L LONG 11/06/10	1	- A70 A2
Prepa	I Compare the Comp		547043 0713350
Use C	Priv Firm's name ► KRAFTCPAS PLLC Firm's EIN ►	<u>- 02-(</u>	<u> </u>

Use Only 823711 01-09-19

21148-21

Phone no. 615-242-7351

555 GREAT CIRCLE ROAD

Firm's address ► NASHVILLE, TN 37228

Form 990-T (2018) FORMERLY BAPTIST HEALING HOSPITAL TRUST 52-2362225

Schedule A - Cost of Goods	Sold. Enter	method of inver	itory valuation N/I	<u> </u>	· · ·			
1 Inventory at beginning of year	1		6 Inventory at end of ye			6		
2 Purchases	2		7 Cost of goods sold S	Subtract I	ine 6			
3 Cost of labor	3		from line 5. Enter here			ì		
4a 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	d Personal Property	Lease	ed With Real Pro	pert	y) 	
Description of property								
(1)		•						
(2)		•						
(3)								
(4)								
	2. Rent receive	ed or accrued						
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	than	of rent for p	and personal property (if the percen personal property exceeds 50% or i at is based on profit or income)	tage If	3(a) Deductions directi columns 2(a) a		cted with the income attach schedule)	in
(1)								
(2)								
(3)								
(4)								
Total	0.	Total		0.				
(c) Total income Add totals of columns 2 here and on page 1, Part I, line 6, column		ter >		0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	•		0.
Schedule E - Unrelated Deb	t-Financed	Income (see	instructions)					
			2. Gross income from		3 Deductions directly co to debt-finan			
1 Description of debt-fin	anced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	ns
(1)	•							
(2)								
(3)		,						
(4)								
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis illocable to nced property ischedule)	6 Column 4 divided by column 5		7. Gross income reportable (column 2 x column 8)	,	8 Allocable deduct (column 6 x total of co 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 pag Part I, line 7, column	
Totals			•		0	•		0.
		_	•					0.
Total dividends-received deductions inc	cluded in column	18				▶		U.

Form 990-T (2018) FORMER	RLY BAPTIS	r HEAL	ING H	OSPITA	L TRI	UST	4:	<u>52-23</u>	6222	5 Page 4
Schedule F - Interest,	Annuities, Roy	aities, ai		S From Co Controlled O			zatioi	ns (see ins	struction	s)
1 Name of controlled organiza	ıden	mployer tification imber	3 Net unr	related income a instructions)	4 . Tota	al of specified nents made	ınclud	t of column 4 led in the contration's gross	rolling	6. Deductions directly connected with income in column 5
(1)			<u> </u>							
(2)						•				
(3)								•		
(4)					_	 				
Nonexempt Controlled Organ	ızatıons						•			
7. Taxable Income	8 Net unrelated inc (see instruction		9. Total	of specified payr made	nents	10 Part of colu in the controll gross		nization's		ductions directly connected income in column 10
/1\					'					
(1)										
(2)										
(3)	 									
_(4)						Add colur Enter here and tine 8,		e 1, Part I,	Enter h	d columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
Totals					>			0.		0.
Schedule G - Investme	ent Income of	a Section	501(c)(7), (9), or	(17) Or	ganizatior	1			
(see inst	tructions)									
√ 1 Des	cription of income			2 Amount of	ıncome	3 Deduction directly connection (attach scheduler)	ected	4 Set- (attach s	asides schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1)			-		[
(2)										
(3)										
(4)										
				Enter here and o Part I, line 9, co						Enter here and on page 1, Part I, line 9, column (B)
Totals			•		0.					0.
Schedule I - Exploited (see instr		ty Incom	e, Othe	r Than Ad	vertisi	ng Income)			•
		3 5	penses	4. Net incom						7. Excess exempt
1 Description of exploited activity	2 Gross unrelated business income from trade or business	directly with pr of un	connected oduction related ss income	from unrelated business (co minus colum gain, compute through	lumn 2 n 3) If a e cols 5	5 Gross income from activity is not unrelated business income.	that ted	6 Exp attribut colur	able to	expenses (column 6 minus column 5, but not more than column 4)
(1)			-							
(2)										
(3)										<u> </u>
(4)						·				
<u> </u>	Enter here and on page 1, Part I, line 10, col (A)	page	ere and on 1, Part I, , col (B)				7			Enter here and on page 1, Part II, line 26
Totals	0		0.							0.
Schedule J - Advertis										
Part I Income From	Periodicals Re	ported o	n a Con	solidated	Basis					
1 Name of periodical	2 Gross advertisin income	. i	3 Direct ertising costs	or (loss) (co		5 Circula income		6 Read		7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)										
(2)				_						
(3)										
(4)										
Totals (carry to Part II, line (5))	>	0.	0).						0.
										Form 990-T (2019)

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	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)			<u> </u>		,		
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

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

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		>	0.

Form 990-T (2018)

FORM 990-T		STATEMENT 11
DESCRIPTION	,	NET INCOME OR (LOSS)
LP - ORDINARY BUS	REAL ESTATE OPPORTUNITY FUND 2014,	-2,688.
LP - NET RENTAL R	S REAL ESTATE OPPORTUNITY FUND 2014,	391.
LP - OTHER INCOME	RE OP FUND C/O THE TOWNSEND GROUP -	-3.
ORDINARY BUSINESS	RE OP FUND C/O THE TOWNSEND GROUP -	-262.
	RE OP FUND C/O THE TOWNSEND GROUP -	-2,227.
	RE OP FUND C/O THE TOWNSEND GROUP -	841.
	RE OP FUND C/O THE TOWNSEND GROUP -	216.
OTHER PORTFOLIO I CF STRATEGIC SOLUTIONS OTHER INCOME (LOS	RE OP FUND C/O THE TOWNSEND GROUP -	6. -204.
•	OLUTIONS GLOBAL PRIVATE EQUITY FUND	3,859.
	DLUTIONS GLOBAL PRIVATE EQUITY FUND	-8.
	OLUTIONS GLOBAL PRIVATE EQUITY FUND	613.
CF CAPITAL STRATEGIC SO	DLUTIONS GLOBAL PRIVATE EQUITY FUND	1,492.
II, L DIVIDEND	DLUTIONS GLOBAL PRIVATE EQUITY FUND	1,033.
II, L ROYALTIES	OLUTIONS GLOBAL PRIVATE EQUITY FUND	8.
II, L OTHER POR	OLUTIONS GLOBAL PRIVATE EQUITY FUND	1,307.
II, L OTHER INC	OLUTIONS GLOBAL PRIVATE EQUITY FUND	-12,151.
LP - ORDINARY B	OLUTIONS GLOBAL PRIVATE EQUITY FUND, OLUTIONS GLOBAL PRIVATE EQUITY FUND,	1,853.
LP - NET RENTAL	DLUTIONS GLOBAL PRIVATE EQUITY FUND,	-10.
LP - OTHER NET	OLUTIONS GLOBAL PRIVATE EQUITY FUND,	844.
LP - INTEREST I	OLUTIONS GLOBAL PRIVATE EQUITY FUND,	929.
LP - DIVIDEND I	OLUTIONS GLOBAL PRIVATE EQUITY FUND,	431.
LP - ROYALTIES		74.

THE REALING TRUST FORMERLY BAPTIST REALI	52-2362225
CF CAPITAL STRATEGIC SOLUTIONS GLOBAL PRIVATE EQUITY FUND,	
LP - OTHER INCO	-11,978.
COMMONFUND GLOBAL DISTRESSED INVESTORS, LLC - ORDINARY	-11,970.
BUSINESS INCOME (LOSS CF CAPITAL VENTURE PARTNERS X, LP - ORDINARY BUSINESS INCOME (LOSS) CF CAPITAL VENTURE PARTNERS X, LP - INTEREST INCOME CF CAPITAL VENTURE PARTNERS X, LP - OTHER INCOME (LOSS) CF CAPITAL VENTURE PARTNERS IX, L.P ORDINARY BUSINESS	-1.
BUSINESS INCOME (LOSS CF CAPITAL VENTURE PARTNERS X, LP - ORDINARY BUSINESS INCOME (LOSS) CF CAPITAL VENTURE PARTNERS X, LP - INTEREST INCOME CF CAPITAL VENTURE PARTNERS X, LP - OTHER INCOME (LOSS) CF CAPITAL VENTURE PARTNERS IX, L.P ORDINARY BUSINESS INCOME (LOSS) CF CAPITAL VENTURE PARTNERS IX, L.P OTHER INCOME (LOSS) CF CAPITAL SECONDARY PARTNERS 2015, L.P ORDINARY BUSINESS INCOME (LOSS) CF CAPITAL SECONDARY PARTNERS 2015, L.P NET RENTAL REAL ESTATE INCOME CF CAPITAL SECONDARY PARTNERS 2015, L.P OTHER NET RENTAL INCOME (LOSS) CF CAPITAL SECONDARY PARTNERS 2015, L.P INTEREST INCOME	-1.
THOOME /IOCC/	-2,416.
THOOME (LOSS)	37.
CF CAPITAL VENIURE PARTNERS A, DF - INTEREST INCOME CF CAPITAL VENIURE DADWINDS V ID OMUED INCOME /LOCCY	-1,428.
OF CAPITAL VENTURE PARTNERS A, LP - OTHER INCOME (LUSS)	-1,420.
THEOME (1966)	-1,197.
INCOME (LUSS)	-1,19/.
CF CAPITAL VENTURE PARTNERS IX, L.P OTHER INCOME (LUSS)	-585.
CF CAPITAL SECONDARY PARTNERS 2015, L.P ORDINARY	215
BUSINESS INCOME (LUSS)	315.
CF CAPITAL SECONDARY PARTNERS 2015, L.P NET RENTAL REAL	10
ESTATE INCOME	-12.
CF CAPITAL SECONDARY PARTNERS 2015, L.P OTHER NET	
RENTAL INCOME (LOSS)	896.
CF CAPITAL SECONDARY PARTNERS 2015, L.P INTEREST INCOME	1,086.
CF CAPITAL SECONDARY PARTNERS 2015, L.P DIVIDEND INCOME	480.
CF CAPITAL SECONDARY PARTNERS 2015, L.P ROYALTIES	9.
CF CAPITAL SECONDARY PARTNERS 2015, L.P NET RENTAL REAL ESTATE INCOME CF CAPITAL SECONDARY PARTNERS 2015, L.P OTHER NET RENTAL INCOME (LOSS) CF CAPITAL SECONDARY PARTNERS 2015, L.P INTEREST INCOME CF CAPITAL SECONDARY PARTNERS 2015, L.P DIVIDEND INCOME CF CAPITAL SECONDARY PARTNERS 2015, L.P ROYALTIES CF CAPITAL SECONDARY PARTNERS 2015, L.P OTHER PORTFOLIO INCOME (LOSS)	
INCOME (LOSS)	1,0841,6939,716. 1,348. 291. 61. 37.
CF CAPITAL SECONDARY PARTNERS 2015, L.P OTHER INCOME	
(LOSS)	-1,693.
CF CAPITAL PRIVATE EQUITY PARTNERS VIII, L.P ORDINARY	
BUSINESS INCOME (LO	-9,716.
CF CAPITAL PRIVATE EQUITY PARTNERS VIII, L.P INTEREST	
INCOME	1,348.
CF CAPITAL PRIVATE EQUITY PARTNERS VIII, L.P DIVIDEND	
INCOME	291.
CF CAPITAL PRIVATE EQUITY PARTNERS VIII, L.P ROYALTIES	61.
CF CAPITAL PRIVATE EQUITY PARTNERS VIII, L.P OTHER	
PORTFOLIO INCOME (LOSS	37.
CF CAPITAL PRIVATE EQUITY PARTNERS VIII, L.P OTHER	
INCOME (LOSS)	-8,131.
CF CAPITAL STRATEGIC SOLUTIONS GLOBAL PRIVATE EQUITY FUND	
II, L ORDINARY	5,696.
CF CAPITAL STRATEGIC SOLUTIONS GLOBAL PRIVATE EQUITY FUND	
II, L NET RENTA	5.
CF CAPITAL STRATEGIC SOLUTIONS GLOBAL PRIVATE EQUITY FUND	
II, L OTHER NET	-12.
CF CAPITAL STRATEGIC SOLUTIONS GLOBAL PRIVATE EQUITY FUND	
II, L INTEREST	207.
CF CAPITAL STRATEGIC SOLUTIONS GLOBAL PRIVATE EQUITY FUND	
II, L DIVIDEND	8.
CF CAPITAL STRATEGIC SOLUTIONS GLOBAL PRIVATE EQUITY FUND	
II, L ROYALTIES	1,387.
CF CAPITAL STRATEGIC SOLUTIONS GLOBAL PRIVATE EQUITY FUND	_,,
II, L OTHER INC	-19,379.
CF CAPITAL NATURAL RESOURCES PARTNERS X, L.P ORDINARY	10,0.5.
BUSINESS INCOME (LO	36,865.
CF CAPITAL NATURAL RESOURCES PARTNERS X, L.P NET RENTAL	30,0031
REAL ESTATE INCOM	11.
CF CAPITAL NATURAL RESOURCES PARTNERS X, L.P OTHER NET	±±•
RENTAL INCOME (LOS	-1.
THEOTH / HOD	. •

THE HEAL	ING TRUST FORMERLY	BAPTIST HEALI		52-2362225
CF CAPITAL	NATURAL RESOURCES	PARTNERS X, L.P.	INTEREST	
INCOME				1,016.
CF CAPITAL	NATURAL RESOURCES	PARTNERS X, L.P.	- DIVIDEND	
INCOME				125.
	NATURAL RESOURCES			2,662.
	NATURAL RESOURCES	PARTNERS X, L.P.	OTHER	
	INCOME (LOSS			55.
	NATURAL RESOURCES	PARTNERS X, L.P.	OTHER	
INCOME (LOS	•			-86,328.
	NATURAL RESOURCES	S PARTNERS IX LP -	- ORDINARY	
	NCOME (LOSS			30,512.
	NATURAL RESOURCES	S PARTNERS IX LP -	- NET RENTAL	
REAL ESTATE				4.
	NATURAL RESOURCES	S PARTNERS IX LP -	- OTHER NET	
RENTAL INCO	•			-81.
	NATURAL RESOURCES	S PARTNERS IX LP -	- INTEREST	
INCOME				3,708.
	NATURAL RESOURCES			386.
-	NATURAL RESOURCES	S PARTNERS IX LP	- OTHER INCOME	
(LOSS)				-107,056.
	CAPITAL INTERNATI	ONAL PARTNERS - (ORDINARY	
	NCOME (LOSS)			810.
	CAPITAL INTERNATI	ONAL PARTNERS - :	INTEREST	
INCOME				46.
	CAPITAL INTERNATI	ONAL PARTNERS - (OTHER INCOME	
(LOSS)				-776.
	VENTURE PARTNERS	XII, L.P OTHER	RINCOME	
(LOSS)				-721.
TOTAL INCLU	JDED ON FORM 990-1	r, PAGE 1, LINE 5		-165,089.
FORM 990-T	NE'	OPERATING LOSS I	DEDUCTION	STATEMENT 12
		LOSS		
		PREVIOUSLY	LOSS	AVAILABLE
TAX YEAR	LOSS SUSTAINED	APPLIED	REMAINING	THIS YEAR
	HODD DODIATIVED	AL FULED	MEMATINING	THITO LEWY
TAN IDAK				
 _	39 219	n	39 219	39 219
12/31/12	39,219. 73,684	0.	39,219. 73,684.	39,219. 73,684.
12/31/12 12/31/13 12/31/14	39,219. 73,684. 44,023.	0. 0. 0.	39,219. 73,684. 44,023.	39,219. 73,684. 44,023.

0.

0.

122,109.

167,198.

446,233.

21148-21

122,109.

167,198.

446,233.

122,109.

167,198.

NOL CARRYOVER AVAILABLE THIS YEAR

12/31/15

12/31/16

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

► Go to www irs gov/Form1120 for instructions and the latest information

OMB No 1545-0123

Name

THE HEALING TRUST

Employer identification number

FORMERLY BAPTIST H				<u> 52-</u>	2362225
Part I Short-Term Capital Ga	ins and Losses (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 gai or loss from Form(s) 894 Part I, line 2, column (g	n 9,)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on Form(s) 8949 with Box C checked					3,333.
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 3	7	•	4	
5 Short-term capital gain or (loss) from like-kin	•			5	
6 Unused capital loss carryover (attach comput	ation)			6	(
7 Net short-term capital gain or (loss). Combin	•	ıh		7	3,333.
Part II Long-Term Capital Gai					
See instructions for how to figure the amounts to enter on the lines below	(d) Proceeds	(e) Cost	(g) Adjustments to ga	n	(h) Gain or (loss) Subtract
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	or loss from Form(s) 894 Part II, line 2, column (g	9,))	column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on					
Form(s) 8949 with Box E checked					:
10 Totals for all transactions reported on					1
Form(s) 8949 with Box F checked					104,849.
11 Enter gain from Form 4797, line 7 or 9				11	48,737.
12 Long-term capital gain from installment sales	from Form 6252, line 26 or 3	7		12	
13 Long-term capital gain or (loss) from like-kin	d exchanges from Form 8824			13	
14 Capital gain distributions				14	
15 Net long-term capital gain or (loss). Combine	e lines 8a through 14 in colum	n h		15	153,586.
Part III Summary of Parts I an	d II				
16 Enter excess of net short-term capital gain (lii	ne 7) over net long-term capita	Il loss (line 15)		16	3,333.
17 Net capital gain. Enter excess of net long-tern			e 7)	17	153,586.
18 Add lines 16 and 17. Enter here and on Form				18	156,919.
Note: If losses exceed gains, see Capital loss			·		

JWA For Paperwork Reduction Act Notice, see the Instructions for Form 1120 Schedule D (Form 1120) 2018

21148-21

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 HEALING TRUST

FORMERLY BAPTIST HEALING HOSPITAL TRUST

Social security number or taxpayer identification no.

52-2362225 Before 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 b						 	
Part I Short-Term. Transaction	ons involving capit	tal assets you held	1 year or less are of	generally short-term (s	ee instructi	ons) For long-term	
transactions, see page 2 Note: You may aggregate all codes are required Enter the	totals directly on	Schedule D, line 1	a, you aren't requir	ed to report these tran	nsactions of	n Form 8949 (see ins	structions)
You must check Box A, B, or C below. Of you have more short-term transactions than will	Check only one be	OX. If more than one b	oox applies for your sho	ort-term transactions, com	plete a separ	ate Form 8949, page 1, t	for each applicable box
(A) Short-term transactions trans	-						
(B) Short-term transactions rep	•	•	•	•		,	
X (C) Short-term transactions no	•	•	•	oported to the me			
1 (a)	(b)	(c)	(d)	(e)	Adjustmen	nt, if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds	Cost or other	loss If y	ou enter an amount	Gain or (loss).
(Example: 100 sh XYZ Co)	(Mo , day, yr)	disposed of	(sales price)	basis. See the	in column column (f	(g), enter a code in . See instructions	Subtract column (e)
` '		(Mo , day, yr)		Note below and see Column (e) in	(f)	(g)	from column (d) & combine the result
				the instructions	Code(s)	Amount of adjustment	with column (g)
CF STRATEGIC						adjustment	1,01
SOLUTIONS RE OP	·						
FUND C/O TH							557.
CF CAPITAL							
STRATEGIC	_						
SOLUTIONS GLOBAL							
PR							<199.
CF CAPITAL							1233,0
STRATEGIC							
SOLUTIONS GLOBAL							
PR							40.
CF CAPITAL VENTURE							
PARTNERS X, LP							563.
CF CAPITAL							
SECONDARY PARTNERS	• • •						
2015, L.P.							172.
CF CAPITAL PRIVATE							
EQUITY PARTNERS							
VIII,							554.
CF CAPITAL NATURAL							
RESOURCES PARTNERS							
Х,							1,555.
CF CAPITAL NATURAL							
RESOURCES PARTNERS							
IX							91.
			_				
2 Totals. Add the amounts in colun	nns (d), (e), (g), a	and (h) (subtract					
negative amounts) Enter each to	1 // 1 // 13//	, , ,					
Schedule D, line 1b (If Box A abo							1
above is checked), or line 3 (if Bo	ox C above is ch	necked)					3,333.

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

823011 11-28-18 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2018)

Attachment Sequence No 12A

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on page 1

THE HEALING TRUST

FORMERLY BAPTIST HEALING HOSPITAL TRUST

Social security number or taxpayer identification no.

52-2362225

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

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

1 (a) Description of property (Example 100 sh XYZ Co)	(b) (c) Date acquired Date sold or (Mo , day, yr) disposed of		(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and	loss If you in column column (f)	nt, if any, to gain or ou enter an amount (g), enter a code in . See instructions	(h) Gain or (loss). Subtract column (e) from column (d) &
		(Mo , day, yr)		see Column (e) in the instructions	(f) Code(s)	(g) Amount of adjustment	combine the result with column (g)
CF STRATEGIC							
SOULUTIONS REAL							
ESTATE OPPO							<2,161.
CF STRATEGIC							
SOLUTIONS RE OP							
FUND C/O TH					,	•	532.
CF CAPITAL							
STRATEGIC							
SOLUTIONS GLOBAL	,						
PR							34,275.
CF CAPITAL							•
STRATEGIC							
SOLUTIONS GLOBAL							
PR							18,389.
CF CAPITAL VENTURE			-				, , , , , , , , , , , , , , , , , , , ,
PARTNERS X, LP							17,846.
CF CAPITAL PRIVATE							
EQUITY PARTNERS							
VIII,							32,460.
CF CAPITAL							
STRATEGIC				1			
SOLUTIONS GLOBAL							
PR							<125.
CF CAPITAL NATURAL		1					1== 1
RESOURCES PARTNERS							
X,							5,542.
CF CAPITAL NATURAL							75121
RESOURCES PARTNERS							
IX							<1,909.
			_				12/3030
			 			-	
			<u> </u>				
	_						-
2 Totals. Add the amounts in colum	nns (d) (e) (a) a	nd (h) (subtract	···· -	 			
negative amounts) Enter each to							
Schedule D, line 8b (If Box D abo		,					
· ·	ox F above is ch	` .					104,849.

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

Form 8949 (2018)

21148-21