	-		Exter	nded to Nove	-mhe	r 15, 2019	7000000	, , ,	
Form	990-T	- ~	Exempt Örgai	nization Bus	sine	ss Income T	ax Return	L	OMB No 1545-0687
				nd proxy tax und					0040
		For ca	lendar year 2018 or other tax yea			, and ending			2018
	rtment of the Treasury		► Go to www Do not enter SSN number	•		ons and the latest information		2	pen to Public Inspection for
A	Check box if		Name of organization (ation is a so ito)(o)	D Employ	01(c)(3) Organizations Only yer identification number
^ _	address changed		The Jacob ar					(Emplo	oyees' trust, see tions)
B E	xempt under section	Print	Foundation,					52	2-6038382
X]501(c \$3)	or Type	Number, street, and room						ted business activity code structions)
	408(e) 220(e)	турс	One South St		•				
<u>_</u>	408A530(a)		City or town, state or prov			n postal code		9000	0.00
 C_Bo	529(a)	-	Baltimore, I		<u> </u>			9000	000
at		44.	G Check organization type		ooratio	501(c) trust	401(a)	trust	Other trust
H Er			tion's unrelated trades or b		1		the only (or first) un		
tra	ide or business here 🕨	<u> </u>	ee Statement	14			complete Parts I-V		than one,
de	scribe the first in the bl	ank spa	ce at the end of the previou	s sentence, complete Pa	rts I an	d II, complete a Schedule	M for each additiona	al trade o	or
	siness, then complete								[TT]
	• • •		oration a subsidiary in an a		nt-subs	idiary controlled group?	▶ ∟	Yes	X No
			ifying number of the parent Jennifer L Bo			Telenho	one number \blacktriangleright 4	10-3	347-7205
			le or Business Inc			(A) Income	(B) Expenses		(C) Net
1 a	Gross receipts or sale	s							ii
b	Less returns and allow	vances		c Balance	1c				
2	Cost of goods sold (S	chedule	A, line 7)		2		<u>. </u>		
3	Gross profit Subtract				3_				
	Capital gain net incom	•	•	4707)	4a				
	Capital loss deduction		art II, line 17) (attach Form	4797)	4b 4c				
Ķ	•		ship or an S corporation (at	tach statement)	5				-
~J&N~6~7~2020	Rent income (Schedul		imp or an o corporation (at	acii siatement)	6		<u></u>		
3	Unrelated debt-finance	•	ne (Schedule E)		7				
₹8€	Interest, annuities, roy	alties, a	nd rents from a controlled o	rganization (Schedule F)	8				-
3	Investment income of	a sectio	on 501(c)(7), (9), or (17) or	ganızatıon (Schedule G)	9				
10	Exploited exempt activ	-			10				
夏	Advertising income (S		•	1E	11	174 001	[174 001
12 13	Other income (See ins		,	atement 15	12 13	174,001. 174,001.	-		174,001. 174,001.
	rt III Deduction	ns No	ot Taken Elsewhere	See instructions fo					1/4,001.
4.5			itions, deductions must				income)		
14	Compensation of offi	cers, dı	ectors, and trustees (Sche	dule K)				14	
15	Salaries and wages							15	
16	Repairs and mainten	ance			- T was	$\overline{}$		16	
17	Bad debts			RECEI	<u>VE</u>			17	
18	Interest (attach sche	dule) (se	ee instructions)			181		18	
19	Taxes and licenses	no (Cor	instructions for limitation	8 NOV 18	2019	<u> </u>		19 20	
20 21			2001					- 20	
22	Less depreciation cla	imed or	62) Schedule A and elsewhere	on return OGDE	V<u>, U</u>	22a		22b	
23	Depletion					(===)		23	
24	Contributions to defe	rred cor	mpensation plans					24	
25	Employee benefit pro		•					25	
26	Excess exempt exper	ises (Sc	hedule I)					26	
27	Excess readership co							27	
28	Other deductions (att							28	
29	Total deductions. Ad			lang dadysation Cultivity	lina Oʻ) from line 19		29	174,001.
30 31			acome before net operating oss arising in tax years beg					30 31	1/4,001.
31 32			oss ansing in tax years beg scome. Subtract line 31 from		y 1, ∠U	io (see instructions)		32	174,001.
			work Reduction Act Notice						Form 990-T (2018)
					_				

form 990-T (2018) Foundation. Inc

Part II	Total Unrelated Business Taxable Income			000	70302	-		
	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	e instruction	ons)		33	174	, 00	<u>) 1 •</u>
34	Amounts paid for disallowed fringes				34			
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instru	ctions)	Stmt	16	35	174	, 00	<u>)1.</u>
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the su	ım of						
	lines 33 and 34				36			
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)				37	1	,00)0.
38	Unrelated business taxable income Subtract line 37 from line 36. If line 37 is greater than line 3	36,						
	enter the smaller of zero or line 36				38			0.
Part I	/ Tax Computation							
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 of	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			
	Tax on Noncompliant Facility Income See Instructions				43			
	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies				44			0.
Part V					-			
45 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a						
	Other credits (see instructions)	45b			1			
	General business credit. Attach Form 3800	45c			1			
-	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d	-		1			
	Total credits Add lines 45a through 45d	400			45e			
-	Subtract line 45e from line 44				46			0.
	Other taxes Check if from. Form 4255 Form 8611 Form 8697 Form 886	se 🗀 (Other (attach sc	hadula\	47			
	Total tax Add lines 46 and 47 (see instructions)		Ottion (attach sc	iledulej	48			0.
	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2				49			0.
	Payments: A 2017 overpayment credited to 2018	50a			13			<u> </u>
	2018 estimated tax payments	50b			1			
	Tax deposited with Form 8868	50c			1 1			
		50d			1			
	Foreign organizations: Tax paid or withheld at source (see instructions)				1.			
	Backup withholding (see instructions)	50e			1 1			
	Credit for small employer health insurance premiums (attach Form 8941) Other credits, adjustments, and payments: Form 2439	50f			1: 1			
g		-0-			ľ			
F.4		50g			+			
	Total payments. Add lines 50a through 50g				51			
	Estimated tax penalty (see instructions) Check if Form 2220 is attached				52			
	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed				53			
	Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	1	D - 6 4 - 4		54			
Part V	Enter the amount of line 54 you want: Credited to 2019 estimated tax Statements Regarding Certain Activities and Other Information	<u>.</u>	Refunded		55			
	<u> </u>		nstructions)					
	At any time during the 2018 calendar year, did the organization have an interest in or a signature of						Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization	-						
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the fi	oreign cor	unu y			ļ-	-+	Х
	here >						-+	$\frac{\Lambda}{X}$
	Ouring the tax year, did the organization receive a distribution from, or was it the grantor of, or tra	insteror to	, a toreign tru	sty		- F		
	If "Yes," see instructions for other forms the organization may have to file.						ł	
58	Enter the amount of tax-exempt interest received or accrued during the tax year \$\infty\$\$ Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and state	emente and	I to the heet of m	v knowled	dae and be	lief it is true	i_	
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer i			y Kilowiec	ige and be	ici, it is true,		
Here	1 1 1/12/19 N Mnongum	~~			-	discuss this re		th
	Standard of officer Date Title	<u>er</u>				shown below (No
			051-	_		A Tes		No
	Print/Type preparer's name Preparer's signature Date	۲ • • • • • • • • • • • • • • • • • • •	Check	l'	f PTIN			
Paid	Sandra L. Glock Andu Wise U	אנא און	self- em	proyed		02512	72	
Prepar	er - AMADOO BININGIAL GEDUICEG ING	"/20	<u>′ /</u> 1	cu. 🛌		02513		
Use O	hly Firm's name ► ATAPCO FINANCIAL SERVICES INC 1 South Street		Firm's	CIN P	<u> 52</u>	-2174	0/1	
			Dr	no 1	10. 2	17 71	1 /	
800744 51	Firm's address ► Baltimore, MD 21202		Phone	110. 4		47-71 Form 990		2010
823711 01-0	שו שו					Form 991	7-I(2	.018)

The Jacob and Hilda Blaustein

Form 990-T (2018) Foundation, Inc

Schedule A - Cost of Goods	Sold. Enter	method of inven	itory valuation	► N/A					
1 Inventory at beginning of year	1			y at end of yea			6		
2 Purchases	2		7	goods sold. Si		ine 6			
3 Cost of labor	3		1	e 5. Enter here					
4a Additional section 263A costs			line 2			· [7		
(attach schedule)	4a		8 Do the re	ules of section	263A (v	with respect to		Yes	No
b Other costs (attach schedule)	4b					for resale) apply to			
5 Total. Add lines 1 through 4b	5		7	nization?					
Schedule C - Rent Income ((see instructions)	From Real	Property and	Personal F	Property L	.ease	d With Real Prop	erty)	·	
1 Description of property									
(1)								•	
(2)		· -							
(3)									
(4)									
	2 Rent receive	ed or accrued							
(a) From personal property (if the perconent for personal property is more 10% but not more than 50%)	entage of than	` of rent for p	nd personal propert ersonal property ex It is based on profit	ceeds 50% or if	ge	3(a) Deductions directly columns 2(a) an	connected with the i	ncome in ule)	
(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	(A)	•			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 inc			3 Deductions directly conn to debt-finance		ble	
1 Description of debt-fine	anced property		or allocable financed	e to debt-	(a)	Straight line depreciation (attach schedule)	(b) Other of (attach so	leductions	;
(1)	-		_	_					
(2)									
(3)									
(4)									
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis llocable to nced property i schedule)	6 Column 4 by colu			7 Gross income reportable (column 2 x column 6)	8 Allocable (column 6 x to 3(a) al	otal of colu	
(1)				%					
(2)				%					
(3)				%					
(4)				%					
						nter here and on page 1, Part I, line 7, column (A)	Enter here and Part I, line 7,		
Totals				▶		0.	,		0.
Total dividends-received deductions and	cluded in column	8				•			0.
									

Form 990-T (2018)

Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)]՝]
(3)][
(4)						
Totals (carry to Part II, line (5))	0.	0.			<u> </u>	0.

Form 990-T (2018)

Total Enter here and on page 1, Part II, line 14

Form 990-T (2018) Foundatio:							<u>-6038</u> 38	3.2 Page 5
Part II. Income From Perio			a Separ	ate Basis (For eac	ch perio	dical listed in P	art II, fill in	
· columns 2 through 7 on a	i line-by-line basis)		_					
1 Name of periodical	2 Gross advertising income		Direct sing costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7		culation 6	Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)								
(2)		-						
(3)		·						
(4)								
Totals from Part I	0.		0.	1			•	0.
	Enter here and on page 1, Part I, line 11, col (A)	page	ere and on 1, Part I, i, col (B)					Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	0.		0.	 				. '0.
Schedule K - Compensation	n of Officers, L	Directo	ors, and	Trustees (see in:	struction	ns)	-	
1. Name				2 Title		3 Percent of time devoted to business		pensation attributable nrelated business
(1)						%		
(2)						%		
(3)				-		%		
(4)	<u> </u>					0/		

Form 990-T (2018)

Form 990-T	Description	of Organization's	Primary Unrelated	Statement 14
	_	Business Activi	ty	

Investment in partnership with UBTI

To Form 990-T, Page 1

Form 990-T	Other Income	Statement 15
Description		Amount
CommonFund Intl VI		437.
CommonFund PE V		-10,343.
CommonFund PE VII		8,170.
CommonFund Venture VI		-166.
CSFB III		-824.
CS Strategic IV		1,176.
FLAG Intl		4.
FLAG PE III		6,289.
FLAG PE IV		17,458.
FLAG Venture VI		-13.
Siguler Guff Distrd Fd IV		-74.
SPUR Ventures III		-32.
Neuberger Berman Inc Fd		133,518.
Siguler Guff Distrd III		30.
Oaktree RE Ops Fd V		25,927.
Apollo Global Mgmt LLC		-1.
Camden Partners Exelixis		-2,400.
Industry Ventures Partners VII		44.
Industry Ventures Partners VIII		1,251.
SJF Ventures IV		-4,063.
The Rise Fund		-2,387.
Total to Form 990-T, Page 1, li	ne 12	174,001.

Form 990-T	Net	Operating Loss D	eduction	Statement 16
Tax Year	Loss Sustained	Loss Previously Applied	Loss Remaining	Available This Year
12/31/09	503,757.	403,546.	100,211.	100,211.
12/31/10	116,399.	0.	116,399.	116,399.
12/31/11	256,612.	0.	256,612.	256,612.
12/31/15	315,796.	0.	315,796.	315,796.
12/31/16	100,573.	0.	100,573.	100,573.
12/31/17	90,188.	0.	90,188.	90,188.
NOL Carryo	ver Available This	Year	979,779.	979,779.