			Exempt Organization	n Rusiness	Inc	ome Tax Re	1912	OI	MB No 1545-0047
Form	990-T	•		ax under sect			· Carri		
		For cale	ndar year 2019 or other tax year be	ginning ,	2019, a	and ending	, 20	.	<u> </u>
	ent of the Treasury Revenue Service	•	► Go to www.irs.gov/Form9 not enter SSN numbers on this for	90T for instruction	s and	the latest informati	on.	Open 1 501(c)	to Public Inspection for (3) Organizations Only
	heck box if ddress changed		Name of organization (-	and see	instructions)			dentification number trust, see instructions)
	ot under section	Print ²	NATIONAL GEOGRAPHIC SO Number, street, and room or suite i	·	setructio	nne .		-	-0193519
	1(C) (<u>©3</u>) 8(e)	or	1145 17TH ST NW	io ii a P O box, see ii	istructio	Jiis	E Unr		usiness activity code
40		Туре	City or town, state or province, cou	intry, and ZIP or foreigi	n postal	l code	(Se	e instruc	tions)
☐ 52	9(a)		WASHINGTON, DC 20036-468	8				9	000003
C Book at end	value of all assets d of year		oup exemption number (See						
			neck organization type			501(c) trust	401(•	
	de or business		organization's unrelated trade			2 De ne, complete Parts			first) unrelated
			at the end of the previous se						
		•	omplete Parts III-V.						
I Du	ring the tax year,	was the	e corporation a subsidiary in an	affiliated group or	a pare	nt-subsidiary contro	lled group?	•	☐ Yes ☑ No
			and identifying number of the	parent corporation	on. 🕨				
			ROBERT YOUNG			Telephone n			(202) 807-7000
			e or Business Income	ı 	ı	(A) Income	(B) Expen	ses	(C) Net
1a	Gross receipts Less returns a			c Balance ►	1c	o			
ь 2			Schedule A, line 7)		2	0			
3	-		: line 2 from line 1c		3	0		$\overline{}$	0
4a	•		ne (attach Schedule D)		4a	0			0
b			4797, Part II, line 17) (attach		4b	0			0
С	Capital loss de	eductio	n for trusts		4c	0			0
5			a partnership or an S corp						
_	•				5	0			0
6	Rent income (6	0		0	0
7 8			ed income (Schedule E)		8	214,098		0	.214,098
9			ection 501(c)(7), (9), or (17) organiz	·	8	214,030		0	.214,000
10			ivity income (Schedule I)	· · · · · · · · · · · · · · · · · · ·	10	0		0	0
11		•	Schedule J)		11	0		0	0
12	Other income	(See ins	structions, attach schedule).	/	12	0			0
13			3 through 12		13	214,098		0	214,098
Part			Taken Elsewhere (See ins he unrelated business incor		tation	s on deductions.)	(Deduction	ns mus	st be directly
14		of offic	cers, directors, and trustees ((Schedule K)		***************************************		14	0
15	Salaries and w		/	REC	:EIV	ÆD - - ·		15	0
16	Repairs and m			. +				16	0
17	Bad debts .			NOV	232	2020 Š		17	0
18 19	•		ule) (see instructions)	.	• •	· · · & · ·		18	0
20			orm 4562)	OGD	FN	UT 20	· .		
21			med on Schedule A and else			21a		21b	0
22			.					22	0
23	Contributions	to defe	red compensation plans .					23	0
24			grams					24	0
25			nses (Schedule I)					25	0
26			sts (Schedule J)					26	0
27 28	/	-	ach schedule) Id lines 14 through 27				•	27	0
28 29 /			id lines 14 through 27 exable income before net ope					29	214,098
30			perating loss arising in tax	_					211,000
	instructions)					,		30	0
31	•	ness ta	xable income Subtract line	30 from Ine 29		Part I.		31	214,098
For Do			Notice see instructions		0-1	No. 44004 I			Form 990-T (2019)

8350 BROAD ST SUITE 990, MCLEAN, VA 22102

Firm's address ▶

Use Only

Phone no

(703) 286-8000

Sche	dule A—Cost of Goods Sold.	Enter	method of ir	ven	tory va	luation ▶						
1	Inventory at beginning of year	1		0	6	Inventory a	at	end of year	6			0
2	Purchases	2		0	7	Cost of g	joc	ods sold. Subtract line				
3	Cost of labor	3		0		6 from line) 5	. Enter here and in Part				
4a	Additional section 263A costs					I, line 2			7			0
	(attach schedule)	4a		0	8	Do the ru	les	s of section 263A (with	respo	ect to	Yes	No
b	Other costs (attach schedule)	4b	_	0		property p	ro	duced or acquired for re	esale)	apply		
5	Total. Add lines 1 through 4b	5		0				zation?				
	dule C—Rent Income (From Pinstructions)	eal F	Property and	Pe	rsonal	Property	Le	eased With Real Prop	erty)			
	ription of property											
(1)	p. o. proporty											
(2)								·•				
(3)								<u> </u>				
(4)												
(-)	2. Rent rec	eived o	or accrued									
(a) Fro	om personal property (if the percentage of rer personal property is more than 10% but not more than 50%)	p	(b) From real and percentage of rent to 50% or if the rent	or pe	rsonal pro	perty exceeds		3(a) Deductions directly c in columns 2(a) and 2				ie
(1)												
(2)												
(3)												
(4)												
Total		0 То	tal				0	(b) Total deductions.				
(c) Tot	al income. Add totals of columns 2(a)	and 2(b) Enter					Enter here and on page 1	,			
here ar	nd on page 1, Part I, line 6, column (A)		•				0	Part I, line 6, column (B)				0
Sche	dule E—Unrelated Debt-Finar	ced	Income (see	ınstr	uctions)						
	Description of debt-financed prints	operty				ome from or debt-financed		3. Deductions directly conn debt-finance	d prope	erty		
						perty	Ľ	(a) Straight line depreciation (attach schedule)		Other de attach sch		s
(1)				<u> </u>			L					
(2)							L					
(3)						_	L					
(4)				<u> </u>			L					
	acquisition debt on or of locable to debt-financed debt-	or alloc	ljusted basis cable to ed property chedule)		4 dr	olumn vided Iumn 5		7. Gross income reportable (column 2 × column 6)		llocable d n 6 × tota 3(a) and	of colu	
(1)						%	Т					
(2)						%						
(3)						%		_				
(4)						%						
	,							Inter here and on page 1, Part I, line 7, column (A).		here and , line 7, c		
Totals						•		0				0
	ividends-received deductions include	ed in c	olumn 8	•		•	_	<u> </u>				0

Schedule F-Interest, Ann	oo, Hoyanics,			Organizations		J	,	
Name of controlled organization	2. Employer identification number		lated income instructions)	4. Total of specified payments made	ed included in the controlling cor		conne	eductions directly ected with income in column 5
(1) NGSP INC	16-1750687	1						
(2)								
(3)				-	-		1	
(4)								
Nonexempt Controlled Organiz	ations	•						
7. Taxable Income	8. Net unrelated in (loss) (see instruc			otal of specified yments made	10. Part of column included in the organization's gro	controlling	connec	eductions directly cted with income in column 10
(1) 48,100,816		214,098		214,09	8	214,098	1	
1.7		214,090		214,03		214,030		
(2)					-		 	
(3)					- 		 	·
(4)					Add columns 5	on page 1,		columns 6 and 11 nere and on page 1,
Totals				•	Part I, line 8, co	olumn (A) 214,098		line 8, column (B)
Schedule G-Investment I	ncome of a Sec	tion 501	c)(7), (9),	or (17) Organi	zation (see inst			
1. Description of income	2. Amount o		3. dire	Deductions ctly connected ach schedule)	4. Set-aside	s	5. To and s	otal deductions et-asides (col. 3 plus col. 4)
(1)			 					·
(2)			<u> </u>					
(3)								-
(4)								-
	Enter here and Part I, line 9,		,					re and on page 1, ne 9, column (B)
Totals .	>		0					0
Schedule I—Exploited Exe	empt Activity Inc	ome, Ot	her Than	Advertising In	come (see inst	ructions)	1
Description of exploited activity	2. Gross unrelated ty business inco from trade business	ome coni	Expenses directly nected with duction of nrelated ness 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	attribu	enses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)								
(2)								
(3)								
(4)			-					
	Enter here and page 1, Par line 10, col (t I, Y pag (A) line	here and on le 1, Part I, 10, col (B)			,		Enter here and on page 1, Part II, line 25
Schedule J—Advertising I	ncome (see instru	ctions)	0	1				
Part I Income From P			Consoli	dated Rasis	<u>-</u>			
Part Income From P	eriodicais riepo		00113011	4. Advertising		Γ		7. Excess readership
1. Name of periodical	2. Gross advertising income		3. Direct rtising costs	gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	1	dership sts	costs (column 5, but not more than column 4)
(1)								
(2)								
(3)								
(4)								
Totals (carry to Part II, line (5))	•	0	0	0	<u></u>			0 Form 990-T (2019)

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.) 4. Advertising 7. Excess readership 2. Gross gain or (loss) (col costs (column 6 3. Direct 5. Circulation 6. Readership 2 minus col 3) If minus column 5, but not more than 1. Name of periodical advertising ıncome advertising costs ıncome a gain, compute column 4) cols 5 through 7 (1) (2) (3) (4) 0 0 0 Totals from Part I Enter here and on Enter here and Enter here and on page 1, Part I, line 11, col (A) page 1, Part I, on page 1, line 11, col (B) Part II, line 26 0 Totals, Part II (lines 1-5) Schedule K-Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of time devoted to business 4. Compensation attributable to 1. Name 2. Title unrelated business (1) % % (2) % (3) % (4) 0 Total. Enter here and on page 1, Part II, line 14

Form 990-T (2019)

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

2019

Department of the Treasury

For calendar year 2019 or other tax year beginning_______, 2019, and ending ______, 20

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

Open to Public Inspection for 501(c)(3) Organizations Only ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service Employer identification number Name of the organization NATIONAL GEOGRAPHIC SOCIETY 53-0193519 Unrelated Business Activity Code (see instructions) ▶ Describe the unrelated trade or business ► ALTERNATIVE DEBT-FINANCED INVESTMENTS (B) Expenses (C) Net Part I Unrelated Trade or Business Income (A) Income 0 Gross receipts or sales 0 0 b Less returns and allowances c Balance ▶ 1c 2 Cost of goods sold (Schedule A, line 7) . 2 0 0 n 3 3 Gross profit. Subtract line 2 from line 1c. 4a Capital gain net income (attach Schedule D) - 242,618 242,618 4a (35,248)(35,248)Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b С 4c 0 5 Income (loss) from a partnership or an S corporation (attach 169,315 5 169,315 6 6 0 0 0 0 0 Unrelated debt-financed income (Schedule E) 7 8 Interest, annuities, royalties, and rents from a controlled 0 8 0 O Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 0 0 0 0 0 0 Exploited exempt activity income (Schedule I) 10 10 11 0 0 0 11 Advertising income (Schedule J) Other income (See instructions, attach schedule) . 12 0 12 376,685 376,685 13 13 **Total.** Combine lines 3 through 12 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.) Compensation of officers, directors, and trustees (Schedule K) . 14 14 0 15 15 Salaries and wages 16 Repairs and maintenance 16 0 17 0 17 Bad debts 18 0 18 19 19 Taxes and licenses 20 0 21 Less depreciation claimed on Schedule A and elsewhere on return . . . 21a 0 22 22 0 23 Contributions to deferred compensation plans 0 24 24 Employee benefit programs 0 25 25 Excess exempt expenses (Schedule I) 26 Excess readership costs (Schedule J) 26 0 27 8.682 27 Other deductions (attach schedule) 28 8,682 28 **Total deductions.** Add lines 14 through 27 29 368,003 29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see 30 0 30 368,003 Unrelated business taxable income. Subtract line 30 from line 29

For Paperwork Reduction Act Notice, see instructions.

Cat No. 71329Y

Schedule M (Form 990-T) 2019

Form 990T Part I, Line 5

•

Income (loss) from Partnership and S Corporations

Name of Partnership	EIN	UBI
INVESTMENT ACTIVITY		
(1) DAVIDSON KEMPNER INSTITUTIONAL	13-3597020	3,200
(2) FARALLON CAPITAL PARTNERS LP	94-3106322	-22,932
(3) HIGHFIELDS CAPITAL II LP	04-3419488	-128
(4) HUDSON REALTY CAPITAL FUND IV	20-4900804	-5,538
(5) KHP STRATEGIC 7 LP	83-2006934	-3,770
(6) KING STREET CAPITAL LP	13-3812174	7,229
(7) MARATHON SPECIAL OPPORTUNITY FUND LP	13-4201680	-2,116
(8) PRAEDIUM FUND VII	20-8737493	-6,572
(9) RRG GLOBAL PARTNERS FUND LP	82-4675165	155,933
(10) SILVERPEAK LEGACY PENSION	13-4168515	2,076
(11) STRATEGIC HEDGE FUND ONSHORE TRUST	36-7045716	1,241
(12) STRATEGIC PRIVATE EQUITY FUND II	83-0422154	40,692
	Total	169,315

Főrm	gant	Part I	1.1	ine 27	
	2301	ıaııı		.1110 27	

Other Deductions

Description		Amount
INVESTMENT ACTIVITY		
(1) KHP STRATEGIC 7 LP 832006934		1
(2) KING STREET CAPITAL LP 133812174		255
(3) STRATEGIC HEDGE FUND ONSHORE TRUST 367045716		43
(4) STRATEGIC PRIVATE EQUITY FUND II 830422154		8,383
	Total	8,682

Form 990T Part III, Line 36

Deduction for net operating loss arising 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
2000	1,951,681		417,137	582,101	952,443	2020
2001	3,455,515				3,455,515	2021
2002	5,354,017				5,354,017	2022
2003	1,678,834				1,678,834	2023
2006	581,698				581,698	2026
2008	3,211,252				3,211,252	2028
2009	2,272,385				2,272,385	2029
2010	1,983,194				1,983,194	2030
2011	1,821,071				1,821,071	2031
2012	625,877				625,877	2032
2015	204,532				204,532	2035
2016	75,072				75,072	2036
Totals	23,215,128	0	417,137	, 582,101	22,215,890	

Form 990T Part V, Line 51g(iii)	Other Credits and Payments		

Description	Amount
CREDIT FOR PRIOR YEAR MINIMUM TAX	43,480
Totals	43,480

SCHEDULE D (Form 1120)

Capital Gains and Losses

OMB No 1545-0123

Department of the Treasury Internal Revenue Service

► 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.

Employer identification number

NAT	NATIONAL GEOGRAPHIC SOCIETY 53-019351						
Did t	he corporation dispose of any investment(s) in a qua	lified opportunity f	und during the tax	k year?			▶ ☐ Yes ☑ No
If "Ye	es," attach Form 8949 and see its instructions for add	ditional requiremen	nts for reporting ye	our gain	or loss	3	
Pa	t I Short-Term Capital Gains 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) Adjus or loss fro 8949, Pa column (g	om Form rt I, line 2	(s)	(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						0
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked						0
2	Totals for all transactions reported on Form(s) 8949 with Box B checked						0
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	(5)	0			0	(5)
4 5	Short-term capital gain from installment sales from Ford Short-term capital gain or (loss) from like-kind exchange					4 5	
6	Unused capital loss carryover (attach computation) .					6	(0)
	Net short-term capital gain or (loss) Combine lines 1a					7	(5)
Par		see instructions.)	1			141.4
	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	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjus or loss fre 8949, Pa	om Form rt II, line	(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine
8a	whole dollars 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		,	column (9/		the result with column (g)
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked						0
9	Totals for all transactions reported on Form(s) 8949 with Box E checked						0
10	Totals for all transactions reported on Form(s) 8949 with Box F checked	242,623	0			0	242,623
- 11	Enter gain from Form 4797, line 7 or 9	2				11	·
12	Long-term capital gain from installment sales from Form	n 6252, line 26 or 3	7			12	
13	Long-term capital gain or (loss) from like-kind exchange	es from Form 8824			•	13	
14	Capital gain distributions (see instructions)		•		•	14	
15 Par	Net long-term capital gain or (loss) Combine lines 8a th	nrough 14 in columi	n h			15	242,623
16	Enter excess of net short-term capital gain (line 7) over	net long-term capit	tal loss (line 15)			16	0
17	Net capital gain. Enter excess of net long-term capital g			al loss (li	ine 7)	17	242,618
18	Add lines 16 and 17. Enter here and on Form 1120, page	ge 1, line 8, or the p	roper line on other	returns		18	242,618
	Note: If losses exceed gains, see Capital Losses in t	he instructions.					

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.

Sequence No 12A

OMB No 1545-0074

Name(s) shown on return NATIONAL GEOGRAPHIC SOCIETY Social security number or taxpayer identification number 53-0193519

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 box to check.

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	9-B showing bas	•		•))
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) (d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, r If you enter an enter a c See the sep	Gain or (loss). Subtract column (e)	
(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)
SHORT-TERM GAIN/LOSS FROM INVESTMENTS			(5)				(5)
SHORT-TERM ORDINARY GAIN/LOSS FROM INVESTMENTS			0				0
			_				
		-					
	,						
2 Totals. Add the amounts in column negative amounts) Enter each total Schedule D, line 1b (if Box A above should be belief) or line 2 (if Box A)	al here and inc e is checked), lir	lude on your le 2 (if Box B	(5)	0		0	(5)

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 (q) to correct the basis. See Column (q) in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side NATIONAL GEOGRAPHIC SOCIETY

Social security number or taxpayer identification number 53-0193519

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
✓ (F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed of (Mo , day, yr)	(d) Proceeds (sales proe) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions			(h) Gain or (loss). Subtract column (e) from column (d) and combine the result
				instructions	instructions	adjustment	with column (g)
LONG-TERM GAIN/LOSS FROM INVESTMENTS			242,623				242,623
LONG-TERM ORDINARY GAIN/LOSS FROM INVESTMENTS			0				0

2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶		242,623	0		0	242,623	

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 (2019)

Form **8827**

Department of the Treasury

Internal Revenue Service

Credit for Prior Year Minimum Tax—Corporations

► Attach to the corporation's tax return.

► Go to www.irs.gov/Form8827 for the latest information.

OMB No 1545-0123

2019

Name Employer identification number NATIONAL GEOGRAPHIC SOCIETY 53-0193519 Minimum tax credit carryforward from 2018 Enter the amount from line 9 of the 2018 Form 8827. 1 43480 2 Enter the corporation's 2019 regular income tax liability minus allowable tax credits (see instructions) 2 0 3 Enter the refundable minimum tax credit (see instructions). 3 43480 4 Add lines 2 and 3 4 43480 5a Enter the smaller of line 1 or line 4. If the corporation had a post-1986 ownership change or has 43480 Current year minimum tax credit. Enter the smaller of line 1 or line 2 here and on Form 1120, Schedule J. Part I. line 5d (or the applicable line of your return). If the corporation had a post-1986 ownership change or has pre-acquisition excess credits, see instructions. If you made an entry on line 3, go to line 5c. Otherwise, skip line 5c 5b Subtract line 5b from line 5a. This is the current year refundable minimum tax credit. Include this amount on Form 1120, Schedule J, Part III, line 20c (or the applicable line of your return) 5c 43480 Minimum tax credit carryforward to 2020. Subtract line 5a from line 1. Keep a record of this amount to carry forward and use in future years . 0

Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

Corporations use Form 8827 to figure the minimum tax credit, if any, for AMT incurred in prior tax years, the refundable AMT credit amount, and to figure any minimum tax credit carryforward.

Who Should File

Form 8827 should be filed by corporations that had a minimum tax credit carryover from 2018 to 2019

Line 2

Enter the corporation's 2019 regular income tax liability, as defined in section 26(b), minus any credits allowed under Chapter 1, Subchapter A, Part IV, subparts B, D, E, and F of the Internal Revenue Code (for example, if filing Form 1120, subtract any credits on Schedule J, Part I, lines 5a through 5c, from the amount on Schedule J, Part I, line 2).

Line 3

The minimum tax credit limitation is increased by the AMT refundable credit amount. The portion of the credit treated as refundable is 50% of the excess of minimum tax credits available over the 2019 regular tax liability. Complete the Worksheet for Calculating the Refundable Minimum Tax Credit Amount, later in the instructions. Enter the amount from line 4 of the worksheet on Form 8827, line 3.

Note: A corporation with a short tax year (less than 12 months) must prorate the refundable credit based on the number of days in their tax year. See section 53(e)(4).

For Paperwork Reduction Act Notice, see instructions.

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Form **8827** (2019)