Form 990-T 1	E	Exempt Organization Bu	sine	ess Inc	ome T	ax Re	turr	۱	OMB No 1545-0687	
		(and proxy tax und	der so	ection 603	33(e))	1909		ı	2018	
	For ca	alendar year 2018 or other tax year beginning OCT 1				P 30,	201	.9	ZU 10	
Department of the Treasury Internal Revenue Service		Go to www irs gov/Form990T for i Do not enter SSN numbers on this form as it ma)1(c)(3)	.	Open to Public Inspection for 501(c)(3) Organizations Only	
A Check box if		Name of organization (· · (<u>•)(•)</u>	D Emplo (Empl	oyer identification number loyees' trust, see	•
address changed B Exempt under section	Print	AMERICAN COUNCIL ON E	אַטנזכ	TON					ctions) 3-0196573	
X 501(c)(3) ³ >	or Type	Number, street, and room or suite no. If a P.O box, see instructions.							ated business activity code instructions)	•
408(e) 220(e)	Type	ONE DUPONT CIRCLE, NW								
408A530(a) 529(a)		City or town, state or province, country, and ZIP WASHINGTON, DC 20036			3			541	800	1
CO C Book value of all assets	-	F Group exemption number (See instructions.)								4
<u>86,524,9</u>				n 50	01(c) trust		401(a		Other trust	
L-1.3		ation's unrelated trades or businesses.	_3		-	the only (or	-			
		EE STATEMENT 1 ace at the end of the previous sentence, complete F	larta I a		. If only one, o	•				
			ansia	по п, сотпрва	e a Scriedule	IVI IOI BACII	auuilioi	iai ii aut	3 OI	
		poration a subsidiary in an affiliated group or a pare	nt-sub	sidiary control	lled group?		▶ [Ye	s X No	•
If "Yes," enter the name a		ntifying number of the parent corporation.								
THE COOKS ATO IT CATE OF					Telepho	ne number	▶ 2	02-	939-9330	
Part I Unrelated	d Tra	de or Business Income		(A) In	come	(B) E	xpense	3	(C) Net	
1a Gross receipts or sale		121,403.	1.	101	400					
b Less returns and allow		c Balance	1c		.,403.					
2 Cost of goods sold (S		• •	2		,717. ,686.				55,686.	
3 Gross profit. Subtract			3 4a	33	,000.				33,000.	
4 a Capital gain net incon b Net gain (loss) (Form	•	Part II, line 17) (attach Form 4797)	4a 4b				DE	CE	VED	•
c Capital loss deduction			4c			1 -				
•		ship or an S corporation (attach statement)	5			3				
6 Rent income (Schedu	le C)		8			33	MA	Y 0	\$ 2020 13	
7 Unrelated debt-finance	ed inco	me (Schedule E)	7			$ $ $^{\cup}$ L				
8 Interest, annuities, ro	yaltıes,	and rents from a controlled organization (Schedule F)	8				OG	DE	<u> </u>	
9 Investment income of	a secti	on 501(c)(7), (9), or (17) organization (Schedule G) 9	ļ		<u> </u>				
10 Exploited exempt acti	vity inco	ome (Schedule I)	10							
11 Advertising income (S		•	11							
12 Other income (See in:		·	12						FF C0C	
13 Total. Combine lines			13		6,686.				55,686.	
		ot Taken Elsewhere (See instructions to utions, deductions must be directly connected to the connected to the connected to the connected to the connected to the connected to the connected to the connected to the connected to the connected to the connected to the connected to				income)				
<u>`</u>		irectors, and trustees (Schedule K)				<u> </u>		14		
15 Salaries and wages	10013, 0	models, and addition (contidue ty)						15		•
16 Repairs and mainten	ance							18		
17 Bad debts								17		
18 Interest (attach sche	dule) (s	see instructions)						18		
19 Taxes and licenses							_	19	250.	
		e instructions for limitation rules) STATEMI	ENT	5 SEE	STATI	EMENT	3	20	_ 0 •	
21 Depreciation (attach		•			21			 		
•	aimed o	n Schedule A and elsewhere on return			22a			22b		
23 Depletion								23		
24 Contributions to defe		•						25		
25 Employee benefit pro 26 Excess exempt expe	•							28		
27 Excess readership of	•	· ·						27		
28 Other deductions (at		•		SEE	STATI	EMENT	4	28	421,942.	
29 Total deductions. A		•					28	29	422,192.	
		income before net operating loss deduction. Subtra	ct line :	9 from line 10	3		* *	30	-366,506.	
		loss arising in tax years beginning on or after Janu					7)	3)		
		ncome Subtract line 31 from line 30					3	32	-366,506.	•
		rwork Reduction Act Notice, see instructions.					,	(Form 990-T (2018)	
	_		1	_			_		- 064 64	_
08580420 137216	06	4-20399100 2018.05070	AM.	ERICAN	COUNC	IL ON	EDI	JCAI	TI 064-21H2	1
								/	~ 12	2
								(フ!	

Part I	II Total Unrelated Business Taxable Income	70373	
		33 5	0,373.
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		0,3/3.
34	Amounts paid for disallowed fringes	34	0 272
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) STMT 6	35 5	<u>0,373.</u>
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of		
	lines 33 and 34	36	1 000
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	<u>1,000.</u>
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,	1 1 1	_
	enter the smaller of zero or line 36	38	0.
Part I	V 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 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	<u> </u>
Part \	/ Tax and Payments		
45 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)		
b	Other credits (see instructions) 45b] []	
c	General business credit. Attach Form 3800]]]	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	_ ∦ L	
	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]	
	Backup withholding (see instructions) 50e]	
	Credit for small employer health insurance premiums (attach Form 8941)]	
g		1 k	
·	☐ Form 4136 ☐ Other ☐ Total ▶ 50g /	H I	
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 \	Statements Regarding Certain Activities and Other Information (see instructions)	j	
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority	1	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 🕨 \$		
٥.	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my kno correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	wledge and belief, it is	true,
Sign	CHIEF FINANCIAL	lay the IRS discuss this	s return with
Here	7000/1058 4/2/20 OFFICER th	ie preparer shown belo	w (see
	Signature of officer / Date / Title in	structions)? X Ye	s No
	This type property of the control of	if PTIN	
Paid	self- employed		500
Prepa	MICHAELA CROMAR MICHAELA CROMAR 04/20/20	P00895	
Use C	DNIV FIRM'S NAME ► CLIFTONLARSONALLEN LLP FIRM'S EIN ►	41-074	0/49
	901 N. GLEBE ROAD, SUITE 200	71 227 0	E 0 0
		571-227-9	
823711 01	-09-19	Form 9	90-T (2018)

2

Schedule A - Cost of Good	s Sold. Enter	method of invent	ory v	aluation > COS	Т				
1 Inventory at beginning of year	1	30,024.	8	Inventory at end of year	ır		8	28,	083.
2 Purchases	2	63,776.	7	Cost of goods sold. Su	ubtract li	пе 6			
3 Cost of labor	3			from line 5 Enter here	and in F	Part I,			
4a Additional section 263A costs	<u> </u>			line 2			7	65,	<u>717.</u>
(attach schedule)	4a		8	Do the rules of section	263A (v	vith respect to		Ye	s No
b Other costs (attach schedule)	4b			property produced or a	acquired	for resale) apply to		1	
5 Total. Add lines 1 through 4b	5-	93,800.		the organization?					X
Schedule C - Rent Income (see instructions)	(From Real	Property and	Per	sonal Property	Lease	ed With Real Pro	per	ty) 	
1 Description of property						· 			
(1)									
(2)								 ·	
(3)									
(4)						T			
		ed or accrued				3(a) Deductions directl	v conr	ected with the incon	ne 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 pe	rsonal	onal property (if the percenta property exceeds 50% or if ed on profit or income)	age) (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	., .,	ter >			0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	•		0.
Schedule E - Unrelated Del		Income (see (nstru	ctions)					
				- Gross income from		Deductions directly conto debt-finanto			
1. Description of debt-fit	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduct (attach schedu	
(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 i schedule)	6	Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)		8. Allocable ded (column 6 x total of 3(a) and 3(b	columns
(1)				%				•	
(2)				%			\perp		
(3)				%					
(4)	·			%					
						nter here and on page 1, lart I, line 7, column (A)		Enter here and on p Part I, line 7, colun	
Totals				•		0			0.
Total dividends-received deductions in	icluded in column	18		· .			-	-	0.

schedule F - Interest,					Controlled O							
1. Name of controlled organiza	ation	2. Em identifi num	cation	3. Net unr (loss) (see	elated income instructions) 4. Tota paym		al of specified nents made	5 Part of column 4 that is included in the controlling organization's gross income		olling	g connected with income	
1)												
2)												
(3)												
(4)	· ·											
lonexempt Controlled Organ	ızatıons											
7 Taxable Income		nrelated inconsee instructions		9 Total	of specified pay made	ments	10 Part of colu in the controll gross	mn 9 tha ing orgai s income	nization's		ductions directly connecte i income in column 10	
(1)												
(2)		•										
(3)												
(4)					_				-			
()	1.			•			Add colur Enter here and line 8, 4		e 1, Part I,	Enter h	Id columns 6 and 11 tere and on page 1, Part I, line 8, column (B)	
otals			_			▶			0.		0	
Schedule G - Investme	ent Inco	me of a	Sectio	n 501(c)(7), (9), or	(17) Or	ganizatior	1				
· · · · · · · · · · · · · · · · · · ·	tructions)	·ma		-	2 Amount of	IDCOMA	3. Deduction		4 Set-	sides	5 Total deductions and set-asides	
·	- Inplication of inco				Z /undant of		(attach sched		(attach s	chedule)	(col 3 plus col 4)	
(1)												
(2)												
(3)												
(4)							_					
					Enter here and Part I, line 9, co						Enter here and on page Part I, line 9, column (B	
otals .				•		0.					0	
Schedule I - Exploited	-	Activity	/ Incon	ne, Othe	r Than Ad	lvertisi	ng Income	•				
1 Description of exploited activity	2. G unrelated incom	Gross business e from business	directly with p of ui	xpenses connected roduction nrelated ss income	4. Net inconfrom unrelated business (cominus colum gain, comput through	trade or blumn 2 n 3) If a e cols 5	5 Gross inco from activity is not unrela- business inco	that ted	β Exp attribute colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)												
(2)	1											
(3)	1				 						<u> </u>	
(4)					 					-		
			page	ere and on 1, Part I, 0, col (B)		I					Enter here and on page 1, Part II, line 26	
otals ► Schedule J - Advertis	ing Inco	0. me (see i	nstructio		ı		•					
Part I Income From					solidated	Basis						
1. Name of periodical		2. Gross advertising income	ad	3 Direct vertising costs	4. Advert or (loss) (co col 3) If a go cols 5 th		5. Circula:		6 Reade		7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)	-			· · · · ·	-		1					
(2)					_				_			
(3)			-		\dashv		· · · ·					
(4)					\dashv			•				
(7)	+		+				+		-			
otals (carry to Part II, line (5))	•		0.	0							0 Form 990-T (201	

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	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 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.
0 - le le - le - 1/	-4:	£ O#:	Dina - 1	d Tarraha an /	-4		

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)

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

For calendar year 2018 or other tax year beginning OCT 1, 2018, and ending SEP 30, 2019

► 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) OMB No 1545-0687

ENTITY

501(c)(3) Organizations Only

50,373.

Department of the Treasury Internal Revenue Service (99) Name of the organization

AMERICAN COUNCIL ON EDUCATION

Unrelated business activity code (see instructions) > 523000

Employer identification number 53-0196573

Describe the unrelated trade or business | INVESTMENT INCOME Part I Unrelated Trade or Business Income (C) Net (A) Income (B) Expenses 1a Gross receipts or sales c Balance ▶ **b** Less returns and allowances 1c Cost of goods sold (Schedule A, line 7) 3 Gross profit Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D) 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b <u>4c</u> Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach 50,37<u>3.</u> 50,373 statement) 5 6 6 Rent income (Schedule C) Unrelated debt-financed income (Schedule E) 7 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) R Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) Advertising income (Schedule J) 11 11 12 Other income (See instructions, attach schedule) 12

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

13

50,373.

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	
20	Charitable contributions (See instructions for limitation rules)	20	
21	Depreciation (attach Form 4562)		
22	Less depreciation claimed on Schedule A and elsewhere on return	22b	
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule)	28	
29	Total deductions. Add lines 14 through 28	29	0.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	<u>50,373.</u>
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	31	
32	Unrelated business taxable income Subtract line 31 from line 30	32	<u>50,373.</u>

LHA For Paperwork Reduction Act Notice, see instructions.

Total. Combine lines 3 through 12

Schedule M (Form 990-T) 2018

SCHEBULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

Unrelated Trade or Business

For calendar year 2018 or other tax year beginning OCT 1, 2018 and ending SEP 30, 2019

▶ 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)

2018

OMB No 1545-0687

ENTITY

2

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service (99) Name of the organization

AMERICAN COUNCIL ON EDUCATION

Unrelated business activity code (see instructions) > 541800

Employer identification number 53-0196573

INCOME Describe the unrelated trade or business ► ADVERTISING Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales b Less returns and allowances c Balance 10 Cost of goods sold (Schedule A, line 7) 3 Gross profit Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D) 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b c Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) 6 6 Rent income (Schedule C) Unrelated debt-financed income (Schedule E) 7 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 10 9,208. -4.0835,125 Advertising income (Schedule J) 11 Other income (See instructions, attach schedule) 12 13 5,125 9,208 083. Total. Combine lines 3 through 12

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
	• • • • • • • • • • • • • • • • • • • •		
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	
20	Charitable contributions (See instructions for limitation rules)	20	
21	Depreciation (attach Form 4562)	╛	
22	Less depreciation claimed on Schedule A and elsewhere on return	22b	
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule)	28	
29	Total deductions. Add lines 14 through 28	29	0,
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	<u>-4,083.</u>
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	31	
32	Unrelated business taxable income. Subtract line 31 from line 30	32	-4,083.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY

STATEMENT

ADVERTISING, PRINTING & PUBLICATION SERVICES, AND INVESTMENT INCOME

TO FORM 990-T, PAGE 1

FOOTNOTES

STATEMENT

2

1

AMERICAN COUNCIL ON EDUCATION RECEIVED K-1 INVESTMENT INCOME OF \$50,373 - A 5.0% PARTNER PERCENTAGE OF PROFIT FROM HEARTLAND MANATEE RIVERFRONT LIMITED PARTNERSHIP

FORM 990-T	CONTRIBUTIONS	STATEMENT 3	
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT	
CHARITABLE ORGANIZATIONS	N/A	97,990.	
TOTAL TO FORM 990-T, PAGE 1, 1	LINE 20	97,990	
	OTAND DEPLICATIONS		
FORM 990-T	OTHER DEDUCTIONS	STATEMENT 4	
DESCRIPTION	OTHER DEDUCTIONS	STATEMENT 4	
	OTHER DEDUCTIONS		

FORM 990-T	CONTRIBU	UTIONS SUMMARY		STATEMENT	5
QUALIFIED C	CONTRIBUTIONS SUBJECT TO	O 100% LIMIT			
CARRYOVER C FOR TAX Y FOR TAX Y FOR TAX Y	TEAR 2014 TEAR 2015	ONTRIBUTIONS 35,000	•		
FOR TAX Y	YEAR 2017	83,461			
TOTAL CARRY	OVER ENT YEAR 10% CONTRIBUTION	ONS	118,461 97,990		
	RIBUTIONS AVAILABLE COME LIMITATION AS ADJUS	STED	216,451 0		
EXCESS 1008	CONTRIBUTIONS CONTRIBUTIONS CONTRIBUTIONS		216,451 0 216,451		
ALLOWABLE C	CONTRIBUTIONS DEDUCTION				0
TOTAL CONTE	RIBUTION DEDUCTION				0

FORM 990-T	NET	OPERATING LOSS D	EDUCTION	STATEMENT 6
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
09/30/10	29,858.	0.	29,858.	29,858.
09/30/11	59,273.	0.	59,273.	59,273.
09/30/12	199,910.	0.	199,910.	199,910.
09/30/13	361,428.	0.	361,428.	361,428.
09/30/13	437,039.	0.	437,039.	437,039.
09/30/14	141,220.	0.	141,220.	141,220.
09/30/15	413,884.	0.	413,884.	413,884.
09/30/16	456,733.	0.	456,733.	456,733.
09/30/17	398,835.	0.	398,835.	398,835.
09/30/18	184,204.	0.	.184,204.	184,204.
NOL CARRYO	VER AVAILABLE THIS	YEAR	2,682,384.	2,682,384.