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	Form <b>990-T</b>	Exempt Organiza	tion B	usir	ness Incom	e Ta	x Return <sub>//</sub>	202	OMB No 1545-0687
	Form <b>330-1</b>	For calendar year 2017 or other tax year be	•		section 6033	` ''	6/30 ,	2018	2017
		Go to www.irs.gov/Form9				-			
De Int	partment of the Treasury ernal Revenue Service	Do not enter SSN numbers on this						(3).	Open to Public Inspection for 501(c)(3) Organizations Only
Ā	Check box if address change	d - WAKE BODECH III			changed and see instru	uctions			mployer identification number mployees' trust, see structions )
В	Exempt under section [X] 501( C )	or 1834 WAKE FOREST U			OX 7201			<b>,</b>	56-0532138
	X 501( c )()3_) 408(e)	T WINCTON_CAIEM						FU	nrelated business activity
	408A 530	\**/							odes (See instructions )
<u></u>	529(a)  Book value of all assets at	F Group exemption number (Se	0.1051110110	200 \ 0	<del></del>				721110 525990
C	end of year 1,919,040,249	C Charles and a state to the state of the st			) corporation	5016	c) trust	401(a)	trust Other trust
H	Describe the organiz	zation's primary unrelated business a	ctivity		y corporation		<u></u>	J+01(u)	
<u> </u>	<u>Unrelated Po</u>	<u>rtion-Hotel &amp; Conferenc</u>	<u>e Cent</u>						
1		was the corporation a subsidiary in a me and identifying number of the pa				Subsidia	ary controlled	group	Yes X No
J	The books are in care			oralic	on -	Te	lephone numi	ber► 33	6-758-5233
P	art I Unrelated	Trade or Business Income	<u>′</u>		(A) Income		(B) Exper		(C) Net
_	1 a Gross receipts or	<del></del>			, , , , , , , , , , , , , , , , , , , ,		( , , - , + - ,		(2,732
	<b>b</b> Less returns and allowa		lance ►	1 c	5,440,	366.			
	2 Cost of goods sold		[	2	2,211,	309.			
	•	ract line 2 from line 1c		3	3,229,	057.			3,229,057.
		ncome (attach Schedule D)	L	4a					
		1797, Part II, line 17) (attach Form 4797)		4b					
	c Capital loss deduct  5 Income (loss) from	n partnerships and S corporations	-	4 c					
	(attach statement)		St 1	5	122,	436.			122,436.
	6 Rent income (Scho	•	-	6					
		anced income (Schedule E)		7					
		alties, and rents from controlled organizations (s i section 501(c)(7), (9), or (17) organization (So	· ' '	8 9					
		activity income (Schedule I)	liedule d) [	10					
	1 Advertising income	• • •	}-	11					
	-	e instructions, attach schedule)	F						_
	•	See Stateme	nt 2	12	1,749,	906.			1,749,906.
1	3 Total. Combine lin			13	5,101,			0.	5,101,399.
P		ns Not Taken Elsewhere (See			s for limitation	ns on			ept for
		ons, deductions must be direct officers, directors, and trustees (Sche		ecte	ed with the un	relate	d business		e.)
-	4 Compensation of of 5 Salaries and wage	•	dule N)					15	1 262 644
	6 Repairs and maint							16	1,262,644. 266,128.
Þ	7 Bad debts							17	6,012.
7	8 Interest (attach sci	hedule)			See S	tate	nent 3	18	212,926.
5 1	A Taxes and license		COF	- 10				19	187,103.
2	0 Charitable contribι	utions (See instructions for implation	ECE	V	ED See S	State	ment 8	20	
2	i Depreciation (attac	(11 FORM 4562)			S 21	1	556,563	3.	
2	2 Less depreciation	claimed on Schedule A and sewing	∆eYon2re@	irin) (1	19 Q 22a	1		22b	556,563.
	3 Depletion				19 OSO 21 22a			23	
		eterred compensation plant	DEA					. 24	
	5 Employee benefit		INCI					25	645,459.
2		penses (Schedule I) costs (Schedule J)						26 27	
2	•	•			:	See S	tatement		2,278,905.
2		Add lines 14 through 28						29	5,415,740.
3		s taxable income before net operating		ductio	on. Subtract line	29 from	line 13	30	-314,341.
3		deduction (limited to the amount on					ent 5	31	
		s taxable income before specific dedi				ne 30		32	-314,341.
3 3	*	(Generally \$1,000, but see line 33 in kable income Subtract line 33 from line 32 If				e smaller	of zero or line 22	$\begin{array}{c c} 33 \\ 34 \\ \end{array}$	-314,341.
_		duction Act Notice, see instructions		SUICE I		05L 10/04			Form <b>990-T</b> (2017)

			-0532138	Page 2
Pai	rt III	Tax Computation		
35	Orga	nizations Taxable as Corporations. See instructions for tax computation		
	Contr	rolled group members (sections 1561 and 1563) check here ► ☐ See instructions and		
á	<b>E</b> nter	your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)		
	(1)  \$			
ŀ		r organization's share of (1) Additional 5% tax (not more than \$11,750)		
•		dditional 3% tax (not more than \$100,000)		
		ne tax on the amount on line 34	35 c	0
		s Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount	330	0.
30			36	
27			36	
37	-	y tax. See instructions	37	
38		native minimum tax	38	
		on Non-Compliant Facility Income. See instructions	39	
40	Total	Add lines 37, 38 and 39 to line 35c or 36, whichever applies	40	0.
Par	<b>ቲ IV</b>	Tax and Payments		
41 a	Foreig	gn tax credit (corporations attach Form 1118, trusts attach Form 1116) 41a		
t	Other	credits (see instructions)	İ	•
		ral business credit Attach Form 3800 (see instructions)  41 c		
		t for prior year minimum tax (attach Form 8801 or 8827).		
		credits. Add lines 41a through 41d	41 e	0
		act line 41e from line 40	42	0.
		taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866	42	<u> </u>
43		taxes check in form 4233	43	
44	_	tax. Add lines 42 and 43		
		δn a · ·	44	0.
	-	nents A 2016 overpayment credited to 2017  estimated tax payments  45a 73,780.		
		115,000.		
		leposited with Form 8868		
		gn organizations Tax paid or withheld at source (see instructions)  up withholding (see instructions)  Stmt 9 500 45e 45e 459	ŀ	
		1 105.		
		t for small employer health insurance premiums (Attach Form 8941)  45f		
Ġ	_	credits and payments Form 2439		
	∐F	orm 4136 Other Total ► 45g	-1	
46	Total	payments. Add lines 45a through 45g	46	189,239.
47	Estim	nated tax penalty (see instructions). Check if Form 2220 is attached. ▶ 🗍	47	
48	Tax d	lue. If line 46 is less than the total of lines 44 and 47, enter amount owed	48	
49	Over	payment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	49	189,239.
		the amount of line 49 you want Credited to 2018 estimated tax 189, 239. Refunded	50	0.
Par		Statements Regarding Certain Activities and Other Information (see instructions)	<u> </u>	<u> </u>
				Vac No
21	-	y time during the 2017 calendar year, did the organization have an interest in or a signature or other authority ovi		Yes No
		cial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN	·	<del>                                      </del>
	Rep	ort of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here $\sim$ See $\sim$	Stmt -7	
52	Durin	g the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a	a foreign trust?	<u> </u>
		S, see instructions for other forms the organization may have to file		1 1 1
_53	Enter	the amount of a permit interest received or accrued during the tax year > \$ 0.	(	
C:	n	Under penalties of bedury, declare that I have examined this return, including accompanying schedules and statements, and to the best o belief, it is true, or read, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any		
Sig:	n	5-9-19 N TVID (070 (7)	May the IRS discuss	this return with
ner	C	Signature of officer Date Title	the preparer shown instructions)?	Yes No
				.53
Paid	d	Print/Type preparer's name Preparer's signature Date Check 🗍 if	PTIN	
Pre		Self-Prepared self employed		
par		Firm's name Firm's EIN		
Use	•	Firm's address		
Onl		Phone no	r	
BAA		TEEA0202L 03/26/18	Form	990-T (2017)
		1EEA0202L 03/20/16	1 01111	-JU-1 (2017)

	EST ONIAEVS						56	1-053	32138		age s
Schedule A — Cost of Good	<b>ds Sold.</b> Enter r	method of inv	entory valua	tion	► Co	ost					
1 Inventory at beginning of year	ar 1		35,389.	6	Invento	ory at	end of year	6		39,3	316.
2 Purchases	2	:  9	35,530.	7			ls sold. Subtract				
3 Cost of labor	3	1,2	279,706.	]			ne 5 Enter here , line 2	7	•		
4 a Additional section 263A costs (attach	r schedule)		_	]	anu m	raiti,	, iiile Z	$\Box$	۷, ۷	11,3 Yes	_
	_ 4	a		8	Do tho	ruloc	of cootion 262A (ww	th room	and to	res	No
<b>b</b> Other costs (attach sch)	_4	b		] <b>°</b>			of section 263A (wi luced or acquired fo				
5 Total. Add lines 1 through 4b	5	2,2	250,625.		to the				-, ,,		X
Schedule C - Rent Income	(From Real P	roperty and	d Persona	al Pr	operty	Leas	sed With Real P	ropei	rty) (see ir	struct	ions)
1 Description of property			_					_	_		
(1)		<del></del>									
(2)											
(3)									-		
(4)											
	2 Rent received of	or accrued					3(a) Dadustian		-Al	1 t · · · · ·	
(a) From personal prope (if the percentage of rent for property is more than 10% more than 50%)	erty personal but not	(if the perce property ex	eal and pers entage of re ceeds 50% I on profit or	nt for or if t	person he rent	al	3(a) Deduction the income ir (att	n colur	onnec nns 2(a) ar chedule)	tea wi nd 2(b)	រោ )
(1)		50300	on pront of		1110)				_		
(2)											
(3)							-				
(4)											
Total	Tot	tal									
(c) Total income. Add totals of columere and on page 1, Part I, line 6,	column (A)	<b>&gt;</b>					(b) Total deductions here and on page 1, Pai I, line 6, column (B)	Enter rt -			
Schedule E — Unrelated De	bt-Financed In	ncome (see	instructions	i)							
1 Description of debt-	financed property	,	2 Gross in or allocab			<b>3</b> De	ductions directly co debt-final			illocab	le to
			financed	prop	erty		<b>(a)</b> Straight line eciation (attach sch		<b>b)</b> Other de (attach scl		
(1)		-									
(2)									,		
(3)											
(4)											
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjus or allocable to de property (attach	ebt-financed	divid	umn led by ımn 5	,		7 Gross income ortable (column 2 x column 6)		Allocable d (column 6 x lumns 3(a)	total	of
(1)					%						
(2)					%						
(3)					%						
(4)			<u> </u>		%						
						Enter	here and on page I, line 7, column (A	1, Ente	er here and	on pa	age 1
T-4-1-						""	., and 7, column (A	'   ' a''	. , mic /, (	III	رد) .
Totals		l C			•			$\perp$			
Total dividends-received deductio	ins included in co							<u> </u>	Fau. 1	00 <del>-</del>	<del>/2017</del>
BAA		TE	EA0203L 10/0	4/17					Form 9	750-I (	(/ 105,

Schedule F — Interest, A	T	ies, Royalli			ntrolled O			Orga	<u> </u>	(see in	Struction	<u> </u>	
1 Name of controlled organization	ıde	Employer entification number	ır	come	related (loss) uctions)	•	4 Total of spec payments ma				in c	eductions directly connected with come in column 5	
(1)								_				<del></del>	
(2)						Τ							
(3)													
(4)													
Nonexempt Controlled Organiz	zations										•		
7 Taxable Income	l in	let unrelated come (loss) e instructions)			of specifie nts made		10 Part of included included organization	n the d	controlling		connecte	ctions directly d with income olumn 10	
(1)													
(2)													
(3)													
(4)				_									
Totals							Add columns here and on p 8, co		, Part I, line	Add	e and on p	s 6 and 11 Enter page 1, Part I, line lumn (B)	
Schedule G - Investme	nt Inco	me of a Se	ction	501(	c)(7), (9	), o	or (17) Orga	nizati	on (see ins	tructio	ns)		
1 Description of income		2 Amount o			3 dire	Dec	ductions connected schedule)	4 Set-asides 5 Total (attach schedule) set-a			5 Tota set-a	otal deductions and t-asides (column 3 plus column 4)	
(1)	_				<u> </u>						-		
(2)			_										
(3)							_					<del></del>	
(4)													
Totals	•	Enter here and Part I, line 9,	d on pa colum	age 1, in (A)			,					ere and on page 1 ine 9, column (B)	
		A A main side a los		- 04	-   <b>T</b>	A					<u> </u>		
Schedule I — Exploited I	zemp		$\overline{}$									т	
1 Description of exploited a	activity	unrelated co business income from		conne pro of u	connected with production of unrelated business income		Net income (loss) m unrelated trade business (column ninus column 3) a gain, compute umns 5 through 7	5 Gross income from activity that is not unrelated business income		attributable to		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)		<del>-</del> -				H						· · ·	
(2)						$\vdash$						-	
(3)		_					•						
(4)			$\neg \uparrow$										
		Enter here on page Part I, line column (a	1,	on p Part I	here and page 1, I, line 10, mn (B)					I		Enter here and on page 1, Part II, line 26	
Totals	<u> </u>											<u></u>	
Schedule J – Advertisin				_			<del></del>						
Part I Income From Pe	rioaic					_							
1 Name of periodical	l	2 Gross advertisin income		adve	Direct ertising osts	(lo	Advertising gain or oss) (col 2 minus col 3) If a gain, compute cols 5 through 7		Circulation income 6 Readership costs			7 Excess readership costs (col 6 minus col 5, but not more than col 4)	
(1)							•						
(2)						1						1	
(3)	-	+				-						4	
(4)		+	$\dashv$			<del> </del>						ļ	
Totals (carry to Part II, line (5)	)'	•											
BAA			<del></del>	т	E 40204 I	10/04	1/17					orm 990 T (2017)	

Part II	Income From Periodicals Reported on a Separate Basis (For each periodicals	odical listed in Part II, f	ill 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 (col 6 minus col 5, but not more than col 4)
(1)				-		
(2)		_				
(3)						
(4)						
Totals from Part I	•					
	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	•				_	
Schedule K — Compensation	of Officers, Dire	ctors, and Tru	istees (see instru	uctions)		

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		%	
		%	
		%	
		%	
Total. Enter here and on page 1, Part II, line 14		<b></b>	

BAA

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Form **990-T** (2017)

### Form **4562**

# **Depreciation and Amortization** (Including Information on Listed Property)

► Attach to your tax return.

► Go to www irs.gov/Form4562 for instructions and the latest information.

OMB No 1545 0172

2017

Attachment Sequence No 179

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

WAKE FOREST UNIVERSITY

Identifying number 56-0532138

Business or activity to which this form rela	ates						
Form 990-T							
		Property Under Sec , complete Part V before		Part I			
1 Maximum amount (see in	structions)	-				T	1
2 Total cost of section 179	property placed in	service (see instruction	s)				2
3 Threshold cost of section	179 property before	re reduction in limitation	(see instruction	ns).			3
4 Reduction in limitation S							4
5 Dollar limitation for tax ye separately, see instruction	ear Subtract line 4 ns.	from line 1 If zero or l	ess, enter -0- If	married	filing		5
(a	) Description of property		(b) Cost (busines	s use only)	(c) Elected co	st	
7 Listed property Enter the				7		_,	
8 Total elected cost of sect			(c), lines 6 and	7			8
9 Tentative deduction Ente			9				
<ul><li>10 Carryover of disallowed d</li><li>11 Business income limitation</li></ul>		•			- F (	10	
<ul><li>11 Business income limitation</li><li>12 Section 179 expense ded</li></ul>					e 5 (see instrs)	11	<del></del>
13 Carryover of disallowed d		·		▶ 13			
Note: Don't use Part II or Part				,			
Part II Special Deprec	iation Allowan	ce and Other Depr	eciation (Don'	tunclude	listed property )	(See	instructions )
							This is decirons )
14 Special depreciation allow tax year (see instructions		property (other than its	ted property) pia	icea in se	ervice during the	12	<u>.</u>
15 Property subject to section	•	n				15	
16 Other depreciation (include		•				16	
		clude listed property ) (S	See instructions	)		`	
	<u> </u>	Section		,			
17 MACRS deductions for as	sets placed in sen	vice in tax years beginn	ing before 2017			17	529,759.
18 If you are electing to group asset accounts, check he	any assets placed in	•	•	ore genera	al ►□		323,133.
	<del></del>	in Service During 2017	Tax Year Using	the Gene	eral Depreciation	n Svs	tem
(a) Classification of property	(b) Month and year placed in service	(C) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Conven	(f)		(g) Depreciation deduction
19 a 3-year property							
<b>b</b> 5-year property		14,822.	5	HY	S/L		850.
c 7-year property	•	217,494	7	HY	S/L		8,917.
d 10-year property							
e 15-year property				İ			
f 20-year property				ļ			
g 25-year property			25 yrs		S/I	,	
h Residential rental			27.5 yrs	MM			
property			27.5 yrs	MM	S/I		
i Nonresidential real	Various	1,303,350.	39 yrs	MM			9,59
property			-	MM			
	- Assets Placed in	Service During 2017 T	ax Year Using tl	ne Altern			/stem
20 a Class life		-			S/I		
<b>b</b> 12-year	7		12 yrs		S/I		
c 40-year			40 yrs	MM			
Part IV Summary (See 1	nstructions )	<u>, ,</u>	1 1 1 - 1 - 1				
21 Listed property Enter am		<del>-</del>				21	7,446.
22 Total Add amounts from line 12 the appropriate lines of your retu	. lines 14 through 17. li	nes 19 and 20 in column (g), a	and line 21 Enter her	re and on		22	556,558.
23 For assets shown above a the portion of the basis at	and placed in servi	ice during the current ye	ar, enter	23			

	n <b>4562</b> (2017)	WAKE FORE												<u>53213</u>		_Page <b>2</b>
Pai	entertair	Property (Incomment, recreation any vehicle for w	n, or amuser	ment )									•	-	ed for	
	columns	(a) through (c)	of Section A	, all of Se	ection B,	and Se	ection C	ıf ağ	plica	able						
		n A – Deprecia	_			ution: 3		instr							┽—	
24 a	Do you have eviden					<u> </u>	Yes	_Ц	No	L	<del></del>	e evidenci	e written <sup>y</sup>		Yes	∐No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(C) Business/ investment use percentage	(c Cos other	tor	(busin	(e) for deprectess/investuse only)			(f) Recovery period	Me	(g) ethod/ vention		(h) reciation duction		
25	Special deprec	I iation allowance		l listed pro	operty pl		• • •	duri	ina ti	he tax v	 ear and	$\Box$			+	
	used more than	า 50% ın a qual	ified busines:	s use (see	instruct							25				
	Property used	6/24/13	57.40		2,200.	т—	22.2	00	_		IC/T	НҮ		1,848		
_	aylyn Hond	7/02/13	57.40		5,157.	_	32,2 5,1		$\vdash$	<u>5.0</u> 5.0	S/L S/L	HY		<u>1,040</u> 592		
_	ay-2016 Ho	1/20/16	57.40		,044.	<del>                                     </del>	6,0		┢	5.0	S/L	HY		694		
27						<u> </u>										
						<del> </del>			_		<del> </del>			_		
20	Add amounts is	a column (b) lu	OS 2E through	h 07 Ent	or hore a	200 00 1	21		<u>_</u>			28			-	
	Add amounts in Add amounts in		_					page	3 1					7.446. <b>29</b>	-	
	Add dirioditis ii	COIGITITY (1), IIII	C ZO LINCI II	Section 1				e of `	Vehi	cles						
Comp to yo	plete this section our employees, f	for vehicles used irst answer the	f by a sole pro questions in	prietor, pa Section C	artner, or to see i	other 'm If you m	nore than neet an	1 5% exce	own	er,' or re n to com	lated pe ipleting	rson If y this sec	ou prov	ided veh those v	icles ehicles	
30 Total business/investment miles driven  (a) (b) (c) (d) (e) Vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 5												(f) Vehicle 6				
during the year (don't include commuting miles)												_				
31 Total commuting miles driven during the year																
	Total other pers miles driven	•	•													
33	Total miles driv lines 30 through		ear Add											<del></del>		T
24	Was the vehicle	a available for s	orconal usa	Yes	No	Yes	No	Ye	es	No	Yes	No	Yes_	No	Yes	No_
34	Was the vehicle during off-duty	hours?							_				_	_		
35	Was the vehicle than 5% owner	e used primarily or related pers	by a more										_			
36	Is another vehice personal use?	cle available for	r											}		
Ansv	ver these question		C - Question	-	-						-			who are	n't more	e than
	owners or related															
37	Do you maintain by your employ	n a written polic ees?	cy statement	that prohi	bits all p	ersona	l use of	vehi	cles,	, ıncludı	ng comi	muting,			Yes	No
38	Do you maintain employees? Se	n a written polic e the instruction	cy statement ns for vehicle	that prohi s used by	bits pers	sonal us ate offic	se of vel ers, dire	hicle: ector:	s, ex s, or	cept co	mmutin more ov	g, by yo vners	ur			
39	Do you treat all	use of vehicles	by employed	es as pers	sonal use	e <sup>7</sup>										
40	Do you provide no vehicles, and re				s, obtain	ınforma	tion fron	ı you	r em	ployees	about th	e use of	the			
41	Do you meet th Note: If your ar															
Par	t VI Amorti	zation														
	Des	(a) cription of costs		Date ar	<b>(b)</b> mortization egins		(C) Amortizal amoun			Cc	d) ode tion	Amo pe	(e) ortization riod or	1	<b>(f)</b> Amortizati for this ye	
42	Amortization of	costs that begi	ins durina voi	<u> </u> ur 2017 ta	x year (	see inst	tructions	5)				per	centage_	<u> </u>	_	
<u> </u>					, (	T		<del></del>	Т							
_									工							
43	Amortization o	f costs that beg	an before yo	ur 2017 ta	ax year								43			
_44_	Total. Add am	ounts in column	(f) See the	instructio		here to							44	<u> </u>	rm AEC	2 (2017

	rt V Listed	Property (				<del></del>								<u>53213</u>		Page 2
ra		Property (Incoment, recreation	clude automo on, or amuse	biles, cer ment )	tain othe	r vehicl	es, cert	aın a	urcra	aft, certa	ın comp	outers,	and pro	perty us	ed for	
	Note: For	any vehicle for w	hich you are u	sing the sta	andard mil	leage rat	e or ded	ucting	j leas	se expens	е, сотр	lete <b>onl</b> y	y 24a, 24i	b,		
		: <i>(a) through (c)</i> n A — Depreciat												4		
						ution: 3		insti							<del></del>	
	a Do you have eviden		, ,				Yes	Ш	No	<u> </u>			ce written?		Yes	∐ No
	(a) Type of property	(b) Date placed	(c) Business/		d) stor	Basis	(e) for deprect	ation	۱,	<b>(f)</b> Recovery		( <b>g)</b> ethod/		(h) reciation	8	(i) Elected
	(list vehicles first)	in service	investment use percentage	other	basis	(busin	ess/invest use only)			period		vention		duction	sec	ction 179
25	Special deprec	lation allowance		l listed or	operty pl			dur	na t	ho tay w	227 224	-	-		+	cost
23	used more than	n 50% in a quali	ified busines	s use (see	e instruct	aceu III tions)	SCIVICE	uun	ny u	ne lax ye	ar ariu	25	1			
26						<u> </u>								_		
Gra	aylyn Honda	09/15/58	57.40	34	1,364.		34,3	64.		5.0	S/L	HY		3,945		
Gra	aylyn EZGO	12/20/17	57.40	6,	400.		6,40			5.0	S/L	HY		367		
															1	
27	Property used 5	0% or less in a	qualified bu	siness us	е											
														_		
													<u> </u>			
						<u> </u>					<u> </u>	_			_	
28	Add amounts in	ı column (h), lın	es 25 throug	h 27 Ent	er here a	ind on I	ine 21,	page	: 1			28				
_29	Add amounts in	column (i), line	e 26 Enter h											29		
					B – Info											
Com	plete this section our employees, fi	for vehicles used	by a sole pro	prietor, pa	ertner, or	other 'm	ore than	15%	owne	er,' or rel	ated per	son If	you prov	ided veh	cles	
				1	10 300 1	you iii	eet an t	T			pieting	1115 56	1	uiose v	enicies	
30	Total business/	investment mile	es driven		a) icle 1	(l	o) cle 2	Ι,	(c	) de 3	<b>(d</b> Vehic			e) cle 5	\/ab	f) icle 6
	during the year			- Veii	icie i	Veill		<b></b> `	enic	,ie 3	venic	<i>1</i> E 4	Veni	cie 5	ven	icie 6
commuting miles)  31 Total commuting miles driven during the year																
	Total other pers	•	•					-							-	
32	miles driven	sonai (nonconin	nuting)										}			
33	Total miles driv	en during the ye	ear Add										<del> </del>			
	lines 30 through	າ 32														
				Yes	No	Yes	No	Ye	s	No	Yes	No	Yes	No	Yes	No
34	Was the vehicle during off-duty	e available for p	ersonal use													
25			by a more						-+							-
33	Was the vehicle than 5% owner	or related person														
36	Is another vehic	cle available for											<u> </u>			
	personal use?															
			C — Question													
Ansv	wer these question were the commers or related to the commers or related to the commers or related to the commers of the commercial of the commers of the commers of the commercial of	ons to determine Loersons (see i	e if you meet nstructions)	an excep	otion to c	ompleti	ng Sect	tion (	3 for	vehicles	s used l	by emp	loyees	who <b>are</b> i	n't more	e than
					_											
37	Do you maintair	a written polic	y statement	that prohi	bits all p	ersonal	use of	vehi	cles,	ıncludın	g comn	nuting,			Yes	No
20	by your employe		_4_4													
38	Do you maintain employees? Se	i a written polic e the instruction	ly statement as for vehicle	tnat proni s used by	bits pers corpora	onai us te office	e of ver ers. dire	ncles	s, ex s. or	cept con	nmuting nore ow	), by yo ners	our			
20	_						,, o, u., o		, .					ŀ		<del> </del>
	Do you treat all Do you provide n			•			ion from		omi	nlovens a	bout the	s uco of	f the			
70	vehicles, and re	tain the informa	ation received	17 17	s, obtain	iiiioiiiiat	1011 110111	you	CITIF	pioyees a	ibout tile	use or	i tile			
41	Do you meet the	e requirements	concerning o	ualified a	utomobil	e demo	nstratio	n us	e? (9	See instr	ructions	: )				
	Note: If your an	swer to 37, 38,	39, 40, or 4	l is 'Yes,'	don't co	mplete	Section	B fo	r the	covered	d vehicl	es		-		<u> </u>
Par	t VI Amorti	zation									···					
		(a)			(b)		(c)			(d	)	Τ	(e)		(f)	
	Desc	cription of costs		T .	mortization egins		Amortizab amount			Coo			ortization		mortizati	
					- g <b>.</b>		CANODIN			3501	<b>.</b>	, .	eriod or rcentage	'	or this ye	<b>-</b> 1
42	Amortization of	costs that begin	ns during you	ır 2017 ta	x year (s	see insti	ructions	)		_		_				
43	Amortization of	costs that bega	an before yo	ur 2017 ta	x year								43			
44	Total. Add amo	ounts in column	(f) See the	instructio	ns for wh	nere to	report						44			

### Form **4626**

Department of the Treasury Internal Revenue Service

### **Alternative Minimum Tax - Corporations**

► Attach to the corporation's tax return.
► Go to www.irs.gov/Form4626 for instructions and the latest information.

OMB No 1545 0123

2017

Employer identification number

WA	KE FOREST UNIVERSITY 56	-0532	138_
	<b>Note</b> : See the instructions to find out if the corporation is a small corporation exempt from the alternative minimum tax (AMT) under section 55(e)		
1	Taxable income or (loss) before net operating loss deduction	1	-314,341.
2	Adjustments and preferences:		311/3111
а	Depreciation of post-1986 property	2 a	23,255.
	Amortization of certified pollution control facilities	2 b	25,255.
	Amortization of mining exploration and development costs	2 c	
	Amortization of circulation expenditures (personal holding companies only)	<del></del>	
		2 d	15 011
	Adjusted gain or loss	2 e	-15,211.
	Long-term contracts	2f	
_	Merchant marine capital construction funds	2 g	_
	Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)	2h	<u></u>
	Tax shelter farm activities (personal service corporations only)	2i	
j	Passive activities (closely held corporations and personal service corporations only).	2j	
k	Loss limitations	2 k	
	Depletion	21	
n	Tax-exempt interest income from specified private activity bonds	2 m	
n	Intangible drilling costs	2n	
0	Other adjustments and preferences	20	236,424.
3	Pre-adjustment alternative minimum taxable income (AMTI) Combine lines 1 through 20	3	-69,873.
4	Adjusted current earnings (ACE) adjustment:		
а	ACE from line 10 of the ACE worksheet in the instructions  4a -69,873	<u>.</u>	
b	Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a negative amount. See instructions.		
С	Multiply line 4b by 75% (0 75) Enter the result as a positive amount 4 c	7 [	
d	Enter the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments. See instructions. Note: You must enter an amount on line 4d		
	(even if line 4b is positive) 4d 0	-	
е	ACE adjustment		
	If line 4b is zero or more, enter the amount from line 4c	_4 e	0.
	• If line 4b is less than zero, enter the <b>smaller</b> of line 4c or line 4d as a negative amount		
5	Combine lines 3 and 4e If zero or less, stop here, the corporation does not owe any AMT	5	-69 <u>,</u> 873.
6	Alternative tax net operating loss deduction See instructions See Statement 6	6	0.
7	Alternative minimum taxable income. Subtract line 6 from line 5 If the corporation held a residual interest in a REMIC, see instructions	7	-69,873.
8	Exemption phase-out (If line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c)		<u> </u>
а	Subtract \$150,000 from line 7. If completing this line for a member of a controlled group, see instructions. If zero or less, enter -0-		
b	Multiply line 8a by 25% (0 25) 8b	7	
	Exemption Subtract line 8b from \$40,000 If completing this line for a member of a controlled	<b>-</b>	
	group, see instructions) If zero or less, enter -0-	8 c	
	Subtract line 8c from line 7 If zero or less, enter -0-	9	<u> </u>
	Multiply line 9 by 20% (0 20).	10	
11	Alternative minimum tax foreign tax credit (AMTFTC) See instructions	11	
12	Tentative minimum tax Subtract line 11 from line 10	12	
13	Regular tax liability before applying all credits except the foreign tax credit	13	
14	Alternative minimum tax. Subtract line 13 from line 12 If zero or less, enter -0- Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	14	
BAA	For Paperwork Reduction Act Notice, see separate instructions.		Form <b>4626</b> (2017)

56-0532138 WAKE FOREST UNIVERSITY Adjusted Current Earnings (ACE) Worksheet ▶ See ACE Worksheet Instructions (which begin on page 9) CPCA1402L 02/06/18 Pre-adjustment AMTI Enter the amount from line 3 of Form 4626 1 1 -69,8732 ACE depreciation adjustment a AMT depreciation 2a 533,308 **b** ACE depreciation (1) Post-1993 property 2b(1) 533,308 (2) Post-1989, pre-1994 property 2b(2) (3) Pre-1990 MACRS property 2b(3) (4) Pre-1990 original ACRS property 2b(4) (5) Property described in sections 168(f)(1) through (4) 2b(5) (6) Other property 2b(6) (7) Total ACE depreciation Add lines 2b(1) through 2b(6) 2b(7) 533,308 c ACE depreciation adjustment Subtract line 2b(7) from line 2a 2c 0\_\_ 3 Inclusion in ACE of items included in earnings and profits (E&P) a Tax-exempt interest income За Death benefits from life insurance contracts b 3b c All other distributions from life insurance contracts (including surrenders) 3с d Inside buildup of undistributed income in life insurance contracts 3d Other items (see Regulations sections 1 56(g) - 1(c)(6)(iii) through (ix) for a partial list) Зе

1	Total increase to ACE from inclusion in ACE of items included in E&P Add line	es sa tr	rougn 3e	31	1 0.
4	Disallowance of items not deductible from E&P				
а	Certain dividends received	4a			
b	Dividends paid on certain preferred stock of public utilities that are deductible under section 247 (as affected by P L 113-295, Div A, section 221(a)(41)(A), Dec 19, 2014, 128 Stat 4043)	4b			
С	Dividends paid to an ESOP that are deductible under section 404(k)	4c			
d	Nonpatronage dividends that are paid and deductible under section 1382(c)	4d		,	}
е	Other items (see Regulations sections 1 56(g) - 1(d)(3)(i) and (ii) for a partial list)	4e			
f	Total increase to ACE because of disallowance of items not deductible from E&	P Add	lines 4a through 4e	4f	1 0.
5	Other adjustments based on rules for figuring E&P				
а	Intangible drilling costs	5a			
b	Circulation expenditures	5b			
С	Organizational expenditures	5c			
d	LIFO inventory adjustments	5d			
е	Installment sales	5e			
f	Total other E&P adjustments Combine lines 5a through 5e			5f	1 0.
6	Disallowance of loss on exchange of debt pools			6	
7	Acquisition expenses of life insurance companies for qualified foreign contracts			7	
8	Depletion			8	
9	Basis adjustments in determining gain or loss from sale or exchange of pre-199	94 prop	erty	9	

10

-69,873.

Adjusted current earnings Combine lines 1, 2c, 3f, 4f, and 5f through 9 Enter the result here and on line 4a of Form 4626

10

Department of the Treasury Internal Revenue Service

**General Business Credit** 

► Go to www.irs.gov/Form3800 for instructions and the latest information.

► You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

OMB No 1545-0895

Name(s) shown on return

(99)

Attachment Sequence No 22

WAK	E FOREST UNIVERSITY	56-0532138	
Part	Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax ( (See Instructions and complete Part(s) III before Parts I and II)	ТМТ)	
1	General business credit from line 2 of all Parts III with box A checked	1	
2	Passive activity credits from line 2 of all Parts III with box B checked 2		
3	Enter the applicable passive activity credits allowed for 2017 See instructions	3	
4	Carryforward of general business credit to 2017 Enter the amount from line 2 of Part III with box C checked See instructions for statement to attach	4	2,295.
5	Carryback of general business credit from 2018 Enter the amount from line 2 of Part III with box D checked See instructions	5	
6	Add lines 1, 3, 4, and 5	6	2,295.
Part 7		<del></del>	
,	Pegular tax before credits  Individuals Enter the sum of the amounts from Form 1040, lines 44 and 46, or the sum of the amounts from Form 1040NR, lines 42 and 44		
	Corporations Enter the amount from Form 1120, Schedule J, Part I, line 2, or the applicable line of your return	7	0.
	• Estates and trusts Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, or the amount from the applicable line of your return		
8	Alternative minimum tax		
	●Individuals Enter the amount from Form 6251, line 35		
	◆Corporations Enter the amount from Form 4626, line 14	8	
	•Estates and trusts Enter the amount from Schedule I (Form 1041), line 56		
		1	
9	Add lines 7 and 8	9	0.
10 a	Foreign tax credit 10a		
b	Certain allowable credits (see instructions)		
С	Add lines 10a and 10b	10 c	
11	Net income tax. Subtract line 10c from line 9 If zero, skip lines 12 through 15 and enter -0- on line 16	11	0.
12	Net regular tax. Subtract line 10c from line 7 If zero or less, enter -0-	0.	
13 14	Enter 25% (0 25) of the excess, if any, of line 12 over \$25,000 (see instructions)  Tentative minimum tax		
1-	•Individuals Enter the amount from Form 6251, line 33		
	Opening the set of the	1 1	
	• Estates and trusts Enter the amount from Schedule I (Form 1041), line 54		
15	Enter the greater of line 13 or line 14	15	
16	Subtract line 15 from line 11 If zero or less, enter -0-	16	0.
17	Enter the smaller of line 6 or line 16	17	0.
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or reorganization		

Form **3800** (2017)

37

38

37

38

Enter the smaller of line 29 or line 36

Credit allowed for the current year. Add lines 28 and 37

Individuals Form 1040, line 54, or Form 1040NR, line 51
Corporations Form 1120, Schedule J, Part I, line 5c
Estates and trusts Form 1041, Schedule G, line 2b

instructions) as indicated below or on the applicable line of your return

Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see

Name	(s)	shown on return		Identifying number	
TaJ Z\ E	(F	FOREST UNIVERSITY		56-0532138	
Pa			(500.11		
		ete a separate Part III for each box checked below (see instructions)	(300 11	istructions)	
A	Ë	General Business Credit From a Non-Passive Activity  E Reserve	ad		
	$\vdash$				
В	싵	General Business Credit From a Passive Activity  F  Reserve	ed		
С	X	General Business Credit Carryforwards G Eligible	Small E	Business Credit Carryfoi	wards
D	Г	General Business Credit Carrybacks H Reserve	ed		
1	lf y am	ou are filing more than one Part III with box A or B checked, complete and attach f ounts from all Parts III with box A or B checked Check here if this is the consolidal	irst an a ted Part	idditional Part III combi III	ning -
		(a) Description of credit		(b)	(c)
Note for e	e: (	On any line where the credit is from more than one source, a separate Part III is neith pass-through entity	eded	If claiming the credit from a pass-through entity, enter the EIN	Enter the appropriate amount
1:	a	Investment (Form 3468, Part II only) (attach Form 3468)	1 a		
	b	Reserved	1 b		
	С	Increasing research activities (Form 6765)	1 c		2,273.
	d	Low-income housing (Form 8586, Part I only)	1 d		
	е	Disabled access (Form 8826) (see instructions for limitation)	1 e		<u> </u>
1	F	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1 f		
	g	Indian employment (Form 8845)	1 g		
	h	Orphan drug (Form 8820)	1 h		
i		New markets (Form 8874)	1 i		
		Small employer pension plan startup costs (Form 8881) (see instructions for			<del></del> :
		limitation)	1 j		
1	K	Employer-provided child care facilities and services (Form 8882) (see instructions for limitation)	1 k		<u>-</u> .
1		Biodiesel and renewable diesel fuels (attach Form 8864).	11		
	m	Low sulfur diesel fuel production (Form 8896)	1 m		
1	n	Distilled spirits (Form 8906)	1 n		
•	)	Nonconventional source fuel (carryforward only)	1 o		
1	p	Energy efficient home (Form 8908)	1 p		
	9	Energy efficient appliance (carryforward only)	1 q		
1	r	Alternative motor vehicle (Form 8910)	1 r		2.
:	S	Alternative fuel vehicle refueling property (Form 8911)	1 s		20.
1	t	Enhanced oil recovery credit (Form 8830)	1 t		
	ı	Mine rescue team training (Form 8923)	1 u		
,	,	Agricultural chemicals security (carryforward only)	1 v		
,	N	Employer differential wage payments (Form 8932)	1 w		
2	ĸ	Carbon dioxide sequestration (Form 8933)	1 x		
2	/	Qualified plug-in electric drive motor vehicle (Form 8936)	1 y		_
:	Z	Qualified plug-in electric vehicle (carryforward only)	1 z		
i	aa	Employee retention (Form 5884-A)	1 aa		
ı	b	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1 bb		
:	zz	Other Oil and gas production from marginal wells (Form 8904) and certain other credits (see instrs)	1 zz		
2		Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		2,295.
3		Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4:		Investment (Form 3468, Part III) (attach Form 3468)	4 a		
	2	Work opportunity (Form 5884)	4 b		
		Biofuel producer (Form 6478)	4 c		<del></del>
		Low-income housing (Form 8586, Part II)	4 d		
	•	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4 e		
1		Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		
	9	Qualified railroad track maintenance (Form 8900)	4 g		
		Small employer health insurance premiums (Form 8941)	4 h		
i		Increasing research activities (Form 6765)	4 i		
j		Reserved	<b>4</b> j	1	
	z	Other	4 z		
5		Add lines 4a through 4z and enter here and on the applicable line of Part II	5		
6		Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		2,295.

## Form **8827**

### **Credit for Prior Year Minimum Tax — Corporations**

OMB No 1545 0123

Employer identification number

Department of the Treasury Internal Revenue Service ► Attach to the corporation's tax return.
► Go to www.irs.gov/Form8827 for the latest information.

2017

WAKE FOREST UNIVERSITY	56-0532138	
1 Alternative minimum tax (AMT) for 2016 Enter the amount from line 14 of the 2016 Form 4626	1	76,235.
2 Minimum tax credit carryforward from 2016 Enter the amount from line 9 of the 2016 Form 8827	2	145,346.
3 Enter any 2016 unallowed qualified electric vehicle credit (see instructions)	3	
4 Add lines 1, 2, and 3	4	221,581.
5 Enter the corporation's 2017 regular income tax liability minus allowable tax credits (see instructions)	5	
6 Is the corporation a 'small corporation' exempt from the AMT for 2017 (see instructions)?		
• Yes. Enter 25% of the excess of line 5 over \$25,000 If line 5 is \$25,000 or less, enter -0-		
<ul> <li>No. Complete Form 4626 for 2017 and enter the tentative minimum tax from line 12</li> </ul>	6	
7a Subtract line 6 from line 5 If zero or less, enter -0-	7 a	0.
<b>b</b> For a corporation electing to accelerate the minimum tax credit, enter the bonus depreciation amount attributable to the minimum tax credit (see instructions)	7 b	0.
c Add lines 7a and 7b	7 c	
8 a Enter the smaller of line 4 or line 7c. If the corporation had a post-1986 ownership change or has pre-acquisition excess credits, see instructions	8 a	
<b>b Current year minimum tax credit.</b> Enter the smaller of line 4 or line 7a here and on Form 1120, Schedu Part I, line 5d (or the applicable line of your return). If the corporation had a post-1986 ownership chan has pre-acquisition excess credits, see instructions. If you made an entry on line 7b, go to line 8c. Otherwise, skip line 8c.	ale J, ge or	0.
c Subtract line 8b from line 8a. This is the refundable amount for a corporation electing to accelerate the minimum tax credit. Include this amount on Form 1120, Schedule J, Part II, line 19c (or the applicable line of your return).	8 c	
9 Minimum tax credit carryforward to 2018. Subtract line 8a from line 4 Keep a record of this amount to forward and use in future years	carry 9	221,581.
BAA		Form <b>8827</b> (2017)

2	n	1	7
Z	U	1	

### **Federal Statements**

Page 1

#### **WAKE FOREST UNIVERSITY**

56-0532138

Statement 1
Form 990-T, Part I, Line 5
Income (Loss) from Partnerships and S Corporations

Name	Gross <u>Income</u> Ded	uctions	Income (Loss)
Baupost Value Partners, LP IV Colony Investors VIII, LP Verger Capital Fund, LLC Just Hispanics, LLC JZ International, LLC Medical Quality Enhancement Corp.	\$ 483,974. \$ -271309,9651,55849,224520.	0. \$ 0. 0. 0. 0. Total \$	483,974. -271. -309,965. -1,558. -49,224. -520. 122,436.

#### Statement 2 Form 990-T, Part I, Line 12 Other Income

Advertising	\$	29,525.
Indoor Tennis Club		186,817.
Rental Revenue/Conference Services		1,184,297.
Taxable Parking Benefits		36,478.
Winston Salem Tennis Open		312,789.
	Total 🕏	1,749,906.

#### Statement 3 Form 990-T, Part II, Line 18 Interest Expense

Interest Expense		\$ 212,926.
	Total	\$ 212,926.

#### Statement 4 Form 990-T, Part II, Line 28 Other Deductions

Accounting, Legal, Admin Bank Fees & Charges Contract Service Housekeeping Insurance Marketing & Advertising Membership dues & training Miscellaneous Postage & Shipping Printing & Copying Professional Services Rents Security Supplies Technology Telephone Travel Uniforms	\$	85,417. 98,198. 209,167. 34,276. 29,367. 72,633. 554,433. 3,273. 35,469. 70,667. 37,011. 406,882. 142,737. 7,031. 118,940. 21,846. 28,587.
--	----	--

Statement 4 (continued) Form 990-T, Part II, Line 28 Other Deductions Utilities  Statement 5 Form 990-T, Part II, Line 31 Net Operating Loss Deduction	Loss Previously	Total \$	322,188. 2,278,905.
Form 990-T, Part II, Line 28 Other Deductions  Utilities  Statement 5 Form 990-T, Part II, Line 31 Net Operating Loss Deduction	Previously		322,188. 2,278,905.
Statement 5 Form 990-T, Part II, Line 31 Net Operating Loss Deduction	Previously		322,188. 2,278,905.
Form 990-T, Part II, Line 31 Net Operating Loss Deduction	Previously	I	
Loss Year Original Loss Loss	Used		ss lable
6/30/10 \$ 4,452,984. \$ 6/30/11 3,312,775. 6/30/12 1,327,892. 6/30/13 2,251,755. 6/30/14 1,567,949.  Net Operating Loss Available Taxable Income Net Operating Loss Deduction (Limited to Taxab	3,656,726. 0. 0. 0.	\$	796,258. 3,312,775. 1,327,892. 2,251,755. 1,567,949. 9,256,629314,341. 0.
Net Operating Loss Carried Forward to 2018  Statement 6 Form 4626, Line 6 Alternative Tax Net Operating Loss Deduction	/30/10 230,141. 1,605,877. 1,805,561.	\$ \$ 4,076,219.	9,570,970.
		\$ 3,641,579.	
Available for Carryover to 2017  Carryover Generated From Year End 6  Available for Carryover to 2017	/30/11	\$ 2,950,520.	
_	/30/12 \$	277.167.	
Carryover Generated From Year End 6/ Available for Carryover to 2017	′30/13 \$	958,847.	

\$4,648,174.

\$ 69,873.

\$4,718,047.

Disallowed ATNOL Deduction Due to Limitation

Total Alternative Tax Net Operating Loss Deduction

Carryover Generated From Year End 6/30/2018

Alternative Tax Net Operating Losses Carried Forward to 2018

#### 2017

### Federal Supplemental Information

Page 1

#### **WAKE FOREST UNIVERSITY**

56-0532138

Wake Forest University 2017 year ended 6/30/2018

Attachment to Form 990-T

STATEMENT 7
PART V, LINE 1: INTEREST IN OR AUTHORITY OVER A FOREIGN ACCOUNT NAME OF COUNTRY:

United Kingdom, France, Spain, Austria, Italy, Nicaragua, China, Chile.

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#### **Federal Worksheets**

Page 3

#### **WAKE FOREST UNIVERSITY**

56-0532138

#### STATEMENT 8

#### **Computation of Contribution Carryover to 2018**

1. Total Contributions \$ 4,702,235.
2. Contributions Allowed in 2017 0.
3. 2012 Expired Contributions 716,365.
4. Adjustments per Section 170(d)(2)(B) 0.
5. Carryover to 2018 (Line 1 less 2, 3, 4) 3,985,870.

Year	Contri- bution	Amount Deducted in 2017	Tentative Carryover	Amt Converted to NOL per Sec 172(b)(2)	Carryover to 2018
2012 \$ 2013 2014 2015 2016 2017 Totals \$	716,365. 682,281. 698,885. 683,586. 863,254. 1,057,864. 4,702,235.	\$ 0. 0. 0. 0. 0. 0. 5	\$ 716,365. 682,281. 698,885. 683,586. 863,254. 1,057,864. \$ 4,702,235.	0. 0. 0. 0.	\$ Expired 682,281. 698,885. 683,586. 863,254. 1,057,864. \$ 3,985,870.