000 -	For most One entertion Booting	, Indome Tay D	. 4	OMB No 1545-0047
Form 990-T	Exempt Organization Busir (and proxy tax under	section 6033(e))		2019
Department of the Treasury Internal Revenue Service	For calendar year 2019 or other tax year beginning Go to www irs gov/Form990T for instr Do not enter SSN numbers on this form as it may be			Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if address changed		ged and see instructions)	D Employer iden	tification number
B Exempt under section	DODEDTS FAMILY FOR	INITA TONI	(Employees' trus	st, see instructions)
X 501(C)(V3).	Print THE ROBERTS FAMILY FOUNT		74-22	69660
408A 530(a)	Type 1811 S. SHERIDAN AVENU			ness activity code
529(a)	City or town, state or province, country, and ZIP or foreign		(See instruction	
C Book value of all assets	SHERIDAN	WY 82801	53112	0
at end of year	F Group exemption number (See instructions)		404/->	Other taust
	G Check organization type ► X 501(c) corpororganization's unrelated trades or businesses ►	oration 501(c) trust 4 Describe the only (or f	401(a) trust	Other trust
	VE INVESTMENTS	d Describe the only (or i	iist) umelateu traut	If only one, complete
	one, describe the first in the blank space at the end of t	ne previous sentence, comple	te Parts I and II, co	
	ditional trade or business, then complete Parts III-V			
	the corporation a subsidiary in an affiliated group or a	parent-subsidiary controlled gi	roup?	▶ ☐ Yes ☒ No
If "Yes," enter the name	and identifying number of the parent corporation			
J The books are in care of	DONALD B ROBERTS	Tele	ephone number >	307-672-0785
	Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sale				
b Less returns and allow	rances c Balance	1c		
2 Cost of goods sold (S	chedule A, line 7)	2	ļ	
3 Gross profit Subtract		3		
4a Capital gain net incom	·	4a		
 b Net gain (loss) (Form 479 c Capital loss deduction 	7, Part II, line 17) (attach Form 4797)	4b 4c	REC	EIVED.
•	thership and S corporation (attach	40	<u> </u>	
statement)	(Cital)	5	S NOV	2 3 2020
6 Rent income (Schedu	e C)	6		- L
7 Unrelated debt-financ	ed income (Schedule E)	7	OGE	EN UT
•	es, and rents from controlled organization (Schedule F)	8		
	ection 501(c)(7), (9), or (17) organization (Schedule G)	A		
10 Exploited exempt activate11 Advertising income (S	oty income (Schedule I)	10		
,	tructions, attach schedule) SEE STMT 1	12 20,495		20,495
13 Total Combine lines		13 20,495		20,495
Part II Deduction	ns Not Taken Elsewhere (See instructions			
	with the unrelated business (ncome)			
	ers, directors, and trustees (Schedule K)		_	14
15 Salaries and wages16 Repairs and maintena	nce		_	16
17 Bad debts			<u> </u>	17
18 Interest (attach sched	ıle) (see instructions)			18
19 Taxes and licenses		,		19
20 Depreciation (attach F	<i>,</i>	20		
	ned on Schedule A and elsewhere on return	21a		1b C
22 Depletion			 	22
23 Contributions to defer24 Employee benefit prog	d compensation plans		1	23
25 Excess exempt expen			1	25
26 Excess readership co				26
27 Other deductions (atta		SEE STATEN		763
28 Total deductions Ad				763
	able income before net operating loss deduction. Subt		<u> </u>	19,732
	ating loss arising in tax years beginning on or after Jan	uary 1, 2018 (see		
instructions)	roble income. Subtract line 20 from her 20		<u></u>	30 31 19,732
	table income Subtract line 30 from line 29			
Torraporwork Neuu			(~ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \) (2013)

	1990-T (2019) THE ROBERTS FAMILY FOUNDATION	74-2269660	Page 2
P	art III Total Unrelated Business Taxable income		
32 /	Total of unrelated business taxable income computed from all unrelated trades or bu	isinesses (see	
	instructions) *	1 }	41,612
33	Amounts paid for disallowed fringes		33
34	Charitable contributions (see instructions for limitation rules)		34
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction	ons. Subtract line	
	34 from the sum of lines 32 and 33	5	35 41,612
36	Deductions for net operating loss arising in tax years beginning before January 1, 20	18 (see	
	instructions)		36
37	Total of unrelated business taxable income before specific deduction. Subtract line 3	6 from line 35	41,612
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	:	1,000
39	Unrelated business taxable income. Subtract line 38 from line 37 If line 38 is great	ter than line 37.	
	enter the smaller of zero or line 37	111 :	40,612
Pa	rt 🖟 \\Tax Computation		
40	Organizations Taxable as Corporations, Multiply line 39 by 21% (0.21)	▶ 11 4	8,529
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on	· · · · · · · · · · · · · · · · · · ·	
	the amount on line 39 from: Tax rate schedule or Schedule D (Form	n 1041) 📗 🔼	4h
42	Proxy tax. See instructions		42
43	Alternative minimum tax (trusts only)	4	43
44	Tax on Noncompliant Facility Income. See instructions	4	44
45	Total Add lines 42, 43, and 44 to line 40 or 41, whichever applies	7	8,529
<u>Pa</u>	rt X \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
46a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	46a	1
þ	Other credits (see instructions)	46b	
C	General business credit. Attach Form 3800 (see instructions)	46c	Į.
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	46d	1
e	Total credits. Add lines 46a through 46d	4	6e
47	Subtract line 46e from line 45		8,529
48	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (att	sch)	8
49	Total tax. Add lines 47 and 48 (see instructions)	\mathcal{H}	8,529
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k) line	3 1	0
51a	Payments A 2018 overpayment credited to 2019	51a	
b	2019 estimated tax payments	51b 2,680	
С	Tax deposited with Form 8868	51c	Į.
d	Foreign organizations Tax paid or withheld at source (see instructions)	51d	j
е	Backup withholding (see instructions)	51e	
f	Credit for small employer health insurance premiums (attach Form 8941)	5/1 f	
g	Other credits, adjustments, and payments: Form 2439		
	Form 4136 Other Total	51g	
52	Total payments. Add lines 51a through 51g	5	2,680
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	X ≤ 5	3 36
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	19 5	5,885
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount of	overpaid > 5	5
56	Enter the amount of line 55 you want. Credited to 2020 estimated tax ▶	Refunded ▶ 5	6
Pa	rt VI Statements Regarding Certain Activities and Other Inform	mation (see instructions)	
57	At any time during the 2019 calendar year, did the organization have an interest in or	a signature or other authority	Yes No
	over a financial account (bank, secunties, 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 there ▶	e name of the foreign country	X
58	During the tax year, did the organization receive a distribution from, or was it the grant	tor of or transferor to a foreign trust?	
50	If "YES," see instructions for other forms the organization may have to file,	tor or, or transferor to, a rolonger troot	
59	Enter the amount of tax-exempt interest received or accrued during the tax year		
Sigi	Under penattes of perury, inteclais that I have examined this return, including accompanying schedules and statem true, confect, and properly Declaration of preparer (other than taxpayer) is based on all information of which prepare	ients, and to the best of my knowledge and belief, it is er has any knowledge	May the IRS discuss this return with the preparer shown below
Her	_		(see instructions)?
1			Yes No
	Signature of officer Date Title	Date Ch	eck if PTIN
Paid	A	7.71	f-employed P00633076
Prep	ABIGIA I CON, CIA	Firm's EIN	00 0056055
•		FRIESCH	<u> </u>
Use		Phone no	307-672-0785
	Firm's address SHERIDAN, WY 82801	[Fridita to	Form 990-T (2019)
D	10/28 INT 51 FT	rp 116 TOT	6,052
DAA	10/50 141 21		-,

Form 990-T (2019) THE R					74-2	2269660	· · · · · · · · · · · · · · · · · · ·	P.	age 3
Schedule A – Cost of Go		metnoa			<u> </u>				
1 Inventory at beginning of you			6	Inventory at end of	•	-	6		
2 Purchases	2		7	Cost of goods so		1			
3 Cost of labor	3			line 6 from line 5	Enter her	e and			
4a Additional sec 263A costs				ın Part I, line 2		Ĺ	7		
(attach schedule)	4a		8	Do the rules of sec	tion 263	A (with respect to		Yes	No
b Other costs (attach schedule)	4b			property produced	or acqui	red for resale) apply			
5 Total Add lines 1 through	4b 5			to the organization	?				
Schedule C – Rent Incom	ne (From Real P	operty	and Pers	onal Property L	eased	With Real Prope	rty)		
(see instructions)							· · · · · · · · · · · · · · · · · · ·		
Description of property									
1) N/A									
2)			·				· · · · · · · · · · · · · · · · · · ·		
3)									
4)									
	2 Rent receive	d or accrued							
(a) From personal property (if the p	ercentage of rent	(1	b) From real an	d personal property (if the		3(a) Deductions directly connected with t		eincome	
for personal property is more that	an 10% but not	perc	percentage of rent for personal property exceeds			in columns 2(a) and 2(b) (allach schedule			
more than 50%)		50%	6 or if the rent i	s based on profit or income)				
1)									
2)									
3)	_								
4)									
Total		Total				(b) Total deductions			
c) Total income. Add totals of c nere and on page 1, Part I, line 6		Enter				Enter here and on pag Part I, line 6, column (8			
Schedule E – Unrelated D		come (s	see instruc	tions)		T dit if into of column (s	-, -		
John Garage Committee L	obt i inanoca ii	1001110 /	occ motrac	110110)	Υ	3 Deductions directly co	nnected with or allocable	e to	
		ļ		s income from or			ced property	c 10	
1 Description of debt-fit	nanced property	1	allocable	to debt-financed	(2)	Straight line depreciation	(b) Other de	ductions	
		İ		property	'''	(attach schedule)	(attach sch		
1) N/A					 	<u> </u>			
2)	· · · · · · · · · · · · · · · · · · ·								
3)			-		 				
					+				
4) 4 Amount of average	5 Average adjusted ba	ISIS			+-				
acquisition debt on or	of or allocable to			6 Column 4 divided	7 (Gross income reportable	8 Allocable d (column 6 x tota		19
allocable to debt-financed property (attach schedule)	debt-financed proper (attach schedule)	ly		y column 5		column 2 x column 6)	3(a) and		
	(attach schedule)			· · · · · · · · · · · · · · · · · · ·		·			
1)					/d				
2)					/6		 		
3)					<u>/</u>				
4)					/ <u></u>				
						here and on page 1,	Enter here and		
					Part	I, line 7, column (A)	Part I, line 7,	Joiumn ((0)
Intale				•	ŀ		1		

Total dividends-received deductions included in column 8

Schedule F - Interest, Ann	uities, Royali	ies, and Ken		pt Controlled				(see mstruc	110(115)	
Name of controlled organization	ıde	2 Employer ntification number	ŀ	nrelated income ee instructions)		tal of spec	ide	5 Part of column included in the co	ontrolling	6 Deductions directly connected with income in column 5
(1) N/A										
(2)										
(3)										
(4)										
Nonexempt Controlled Organiz	ations		- 1							
7 Taxable Income		Net unrelated income oss) (see instructions)	L	9 Total of specific payments mad		ınci	uded in th	umn 9 that is e controlling gross income		Deductions directly nected with income in column 10
(1)										
(2)										
(3)										
(4)		- 				<u> </u>				
						Ente		5 5 and 10 5 on page 1 column (A)	Ente	d columns 6 and 11 er here and on page 1 t I, line 8 column (B)
Totals						<u> </u>				
Schedule G - Investment I	ncome of a S	ection 501(c	<u>)(7), (9)</u>	<u>), or (17) O</u>	rganiz	ation	(see in	structions)		
1 Description of income	•	2 Amount of it	ncome	directly	ductions connected schedule)			Set-asides ach schedule)		5 Total deductions and set-asides (col. 3 plus col. 4)
(1) N/A										
(2)										
(3)										_
(4)										
Totals	•	Enter here and o Part I, line 9, col	n page 1, lumn (A)						En Pa	ter here and on page 1, irt I, line 9, column (B)
Schedule - Exploited Exe		ncome Othe	er Than	Advertisi	na Inc	ome (See ins	structions)		
Concade 1 Exploited Exc		meome, our	er mar	Havertisi	iig iiic	onic (366 1113	structions)		
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expen directly connected production unrelate business in	y I with on of ed	4 Net income (I from unrelated t or business (cot 2 minus column If a gain comp cols 5 through	rade umn i 3) ute	from ac	ss income clivity that unrelated ss income	6 Exp attributi colur	able to	7 Excess exempt expenses (column 6 minus column 5 but not more than column 4)
(1) N/A										
(2)										
(3)										
(4)										
Totals	Enter here and or page 1 Part I, line 10, col (A)	n Enter here a page 1 Page 1 Page 10, col	art I							Enter here and on page 1, Part II line 25
Schedule J - Advertising Ir	come (see ins	structions)			 -					<u> </u>
Part I Income From F			Consc	olidated Ba	sis					
1 Name of periodical	2 Gross advertising income	3 Direct advertising	ct	4 Advertising gain or (loss) (o 2 minus col 3) a gain, compu cols 5 through	g col lf te		culation ome	6 Read cos		7 Excess readership costs (column 6 minus column 5 but not more than column 4)
(1) N/A] ,
(2)		_								_
(3)					L					_
(4)										
Totals (carry to Part II, line (5))										- 000 T

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

Form 990-T (2019)

▶

(4)

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

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an **Unrelated Trade or Business**

For calendar year 2019 or other tax year beginning

, and ending

2019

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

THE ROBERTS FAMILY FOUNDATION

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

Open to Public Inspection for

Name of the organization

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3) Employer identification number

501(c)(3) Organizations Only

74-2269660

	related Business Activity Code (see instructions) ▶ <u>531120</u> escribe the unrelated trade or business ▶ INVES PART - STRA	ΓEGI	ES		
Pa	art I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances c Balance	1c			
2	Cost of goods sold (Schedule A, line 7)	2			
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			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from partnership and S corporation (attach statement)	5			
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11			<u> </u>
12	Other income (See instructions, attach schedule) SEE STMT 1	12	1,821		1,821
13	Total Combine lines 3 through 12	13	1,821		1,821

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (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	Depreciation (attach Form 4562)	20		
21	Less depreciation claimed on Schedule A and elsewhere on return	21a	21b	0
22	Depletion		22	
23	Contributions to deferred compensation plans		23	
24	Employee benefit programs		24	
25	Excess exempt expenses (Schedule I)		25	
26	Excess readership costs (Schedule J)		26	
27	Other deductions (attach schedule)		27	
28	Total deductions. Add lines 14 through 27		28	
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from li	ne 13	29	1,821
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see			
	instructions)		30	1,821
31	Unrelated business taxable income Subtract line 30 from line 29		 31	0

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an **Unrelated Trade or Business**

For calendar year 2019 or other tax year beginning

, and ending

33,840

2019

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection for

Employer identification number

74-2269660

Name of the organization

THE ROBERTS FAMILY FOUNDATION

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

501(c)(3) Organizations Only

33,840

531120 Unrelated Business Activity Code (see instructions) ▶ Describe the unrelated trade or business ► INVEST PART - SPECIAL Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales c Balance Less returns and allowances 1c 2 2 Cost of goods sold (Schedule A, line 7) 3 Gross profit Subtract line 2 from line 1c 3 Capital gain net income (attach Schedule D) 4a 4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b Capital loss deduction for trusts 4c Income (loss) from partnership and S corporation (attach 5 statement) 6 Rent income (Schedule C) 6 7 Unrelated debt-financed income (Schedule E) 7 8 Interest, annuities, royalties, and rents from a controlled 8 organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) 9 organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 10 · Advertising income (Schedule J) 11 Other income (See instructions, attach schedule) SEE STMT 2 33,840 33,840 12 12

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

13

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)	E STATEMENT 3	18	9,425
19	Taxes and licenses		19	
20	Depreciation (attach Form 4562)	20		
21	Less depreciation claimed on Schedule A and elsewhere on return	21a	21b	0
22	Depletion		22	
23	Contributions to deferred compensation plans		23	
24	Employee benefit programs		24	
25	Excess exempt expenses (Schedule I)		25	
26	Excess readership costs (Schedule J)		26	
27	Other deductions (attach schedule) SEE	STATEMENT 4	27	2,535
28	Total deductions Add lines 14 through 27		28	11,960
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from	n line 13	29	21,880
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see	ee		
	instructions)		30	
31	Unrelated business taxable income Subtract line 30 from line 29		31	21,880

For Paperwork Reduction Act Notice, see instructions

Total Combine lines 3 through 12

Schedule M (Form 990-T) 2019

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an **Unrelated Trade or Business**

For calendar year 2019 or other tax year beginning

, and ending

0

2019

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

THE ROBERTS FAMILY FOUNDATION

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

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

Name of the organization

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Employer identification number

74-2269660

531120 Unrelated Business Activity Code (see instructions) ▶ INVEST PART - TACTICAL Describe the unrelated trade or business ▶ (A) Income (B) Expenses (C) Net Part I **Unrelated Trade or Business Income** Gross receipts or sales c Balance b Less returns and allowances 1c 2 Cost of goods sold (Schedule A, line 7) 2 3 3 Gross profit Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) 4a 4b b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) Capital loss deduction for trusts 4c С Income (loss) from partnership and S corporation (attach 5 5 statement) 6 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled 8 organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) 9 organization (Schedule G) 10 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 11 12 Other income (See instructions, attach schedule) 12

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

13

14	Compensation of officers, directors, and trustees (Schedule K)			14	<u> </u>
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	Depreciation (attach Form 4562)	20			
21	Less depreciation claimed on Schedule A and elsewhere on return	21a		21b	0
22	Depletion		·	22	
23	Contributions to deferred compensation plans			23	
24	Employee benefit programs			24	
25	Excess exempt expenses (Schedule I)			25	
26	Excess readership costs (Schedule J)			26	
27	Other deductions (attach schedule)			27	
28	·				
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13				
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see				
	instructions)			30	
31	Unrelated business taxable income Subtract line 30 from line 29			31	0

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2019

13

Total Combine lines 3 through 12

74-2269660

Federal Statements

Statement 1 - Form 990-T, Part I, Line 12 - Other Income

		Description	 Amount
INVESTMENT PA	ARTNERS,	LLC	\$ 20,495
TOTAL			\$ 20,495

Statement 2 - Form 990-T, Part II, Line 28 - Other Deductions

Description	Amount	_
OTHER DEDUCTIONS	\$76	3
TOTAL	\$ 76	3

74-2269660

Federal Statements

INVES PART - STRATEGIES Statement 1 - Form 990-T, Schedule M, Line 12 - Other Income

Description	on	Amount
INVESTMENT PARTNERS, LLC	 \$	840
INVESTMENT PARTNERS, LLC		1,006
INVESTMENT PARTNERS, LLC		-25
TOTAL	\$	1,821

• •	
74-226966	0

Federal Statements

INVEST PART - SPECIAL

Statement 2 - Form 990-T, Schedule M, Line 12 - Other Income

Description	Amount		
INVESTMENT PARTNERS, LLC	\$ 2,038		
INVESTMENT PARTNERS, LLC	2,525		
INVESTMENT PARTNERS, LLC	29,277		
TOTAL	\$ 33,840		

INVEST PART - SPECIAL

Statement 3 - Form 990-T, Schedule M, Line 18 - Deductible Interest

Description	Amoun	Amount	
INVESTMENT	\$9,	425	
TOTAL	\$ 9,	425	

INVEST PART - SPECIAL

Statement 4 - Form 990-T, Schedule M, Line 28 - Other Deductions

Description	Amou	Amount	
OTHER	\$ 2	2,535	
TOTAL	\$ 2	2,535	

Form **8949**

Sales and Other Dispositions of Capital Assets

▶ Go to www irs gov/Form8949 for instructions and the latest information

OMB No 1545-0074 2019

tachment

Department of the Treasury Internal Revenue Service Name(s) shown on return ► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D

Social security number or taxpayer identification number

THE	ROBERTS	FAMILY	FOUNDATION
	TODDING	T 7 7 7 7 7	T O O IN DEAT TO IN

74-2269660

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)

(B) Short-term to	ransactions rep	orted on Form(s	_	sis was reported to the lists wasn't reported to the	he IRS		
(a) Description of property (Example 100 sh XYZ Co)	(b) (c) Date acquired Date sold or	1 1	(d) Proceeds	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss If you enter an amount in column (g) enter a code in column (I) See the separate instructions		(h) Gain or (loss) Subtract column (e)
	(Mo day, yr)	disposed of (solos orico)			(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
ALTERNATIVE	01/01/19	12/31/19		572			
							
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Totals Add the amounts in negative amounts) Enter ea Schedule D, line 1b (if Box above is checked), or line 3	ach total here and incl A above is checked	ude on your), line 2 (if Box B		572			

Note If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment