•	000 T	Ex	empt Orga					x Return		OMB N	lo 1545 068	17
F	orm 990-T		~			section 603			-	2	018	
			ar 2018 or other tax			, 2018, and e		,		_	UIO	
Depar	tment of the Treasury		o to www.irs.go						l	Open to Pul	olic Inspecti	on for
Interna	al Revenue Service	► Do not	enter SSN number					ation is a 501(c)(3).		501(c)(3) O	rganizations	Only
A	Check box if address changed					hanged and see instr	ructions )		E	<b>mployer iden</b> Imployees' tri structions )	ust, see	mber
(T)	xempt under section		The Cockr	ell Founda alo Speedy	1017	ີ. ⊭11∩∩					6002	
×	10011 C /	7 or			way 1	#1100			$\overline{}$	74-607 Inrelated bus		ty code
-	408(e) 220( 408A 5300	(e)   ··								See instruction		•
-	529(a)	.a)							,	525990		1 1
C Bo	ook value of all assets	F Group	p exemption num	ber (See instruct	ions )•	•			. ,	32032		$\neg$
at	end of year 136, 570, 319	G Chec	k organization t	ype 🕨 🗓	501(c	) corporation	501(	(c) trust 4	01(a)	trust	Other	trust
HE	Inter the number of t		n's unrelated trad	es or businesses		<u> </u>	De	scribe the only (or	r first)	unrelated		
t	rade or business he	ere • Invest	tment in pa	artnership	S					ne, compl		
	f more than one, de				of the	previous sente	nce, cor	nplete Parts I an	id II, d	complete	a Schedu	le M
	or each additional to				ted or	oup or a parent-	eubeidis	any controlled are	un?	▶ □ \	res XI	No.
	f 'Yes,' enter the na	•		•	_		Substate	ary controlled gre	up	⊔'	(C3 K)	10
	he books are in care		rie Reinha		poratio		Τe	elephone number	· <b>&gt;</b> 71	13-209-	-7560	
Par			Business Inc			(A) Incom		(B) Expense		1	C) Net	
	Gross receipts or	<del>-</del>							-			
	Less returns and allow			c Balance►	1 c							[
2	Cost of goods sold	(Schedule A	, line 7)		2							
3	Gross profit Subti	ract line 2 fron	n line 1c	1.1	3							
	Capital gain net in	=	· ·	_	4a		217.				<u>58,2</u>	
	Net gain (loss) (Form 4			97)	4b	68,	932.			ļ	68,9	<u>32.</u>
	: Capital loss deduc Income (loss) from			nn.	4c							
3	(attach statement		an 3 corporation	"' St 1	5	-164,	558.				-164,5	58.
6	Rent income (Sch	edule C)			6			<u> </u>				
7	Unrelated debt-fin	anced income	(Schedule E)		7					ļ	_	
8	Interest, annuities, roya	•	•							ļ		
9	Investment income of a			zation (Schedule G)	9		-			ļ		
10	Exploited exempt	,	,		10		-			<b>.</b>		
11	Advertising income (See	` '	•	<b>-</b> )	11							
12	Other income (Sei	e mstructions,	attach scheduk	=)	12							
13	Total. Combine lin	es 3 through	12		13	-37	409.		0.	<del>                                     </del>	-37,4	<u>n 9</u>
Par	t II Deductio	ns Not Take	en Elsewher	e (See ınstru	ctions	s for limitatio	ns on	deductions.)	Exc	ept for	317.3	<u>05.</u>
	contributi	ons, deduct	tions must be	directly con	necte	d with the un	nrelate	d business in	com	e.)		
14	Compensation of	officers, direct	ors, and trustee	s (Schedule K)	FI	IED 1			14	ļ		
15	•			F KE	لنطال	200 18			15			
16	Repairs and maint	tenance		1.	. 🕰	2019 121	ì		16	<u> </u>		
17	Bad debts	h		NO/	يبيرا	()	1		17 18	<u> </u>	_	
18 19	Interest (attach so		instructions)	1::1	V.		1		19	<del> </del>		
20	Taxes and license Charitable contribi		structions for lir		ME	سييليلا			20	<del>                                     </del>		
21	Depreciation (atta			طالقات ا	يبيينا	21	I			1		
22	Less depreciation			elsewhere on re	turn	22	a		22b	1		
23	Depletion						1	·	23			
24	Contributions to de	eferred compe	ensation plans						24			
25	Employee benefit								25	<u></u>		
26	Excess exempt ex	penses (Sche	dule I)						26			
27	Excess readership						500 5	Statement ?	27	ļ		
28	Other deductions	•					see S	Statement 2		<b></b>		00.
29 30	Total deductions. Unrelated busines	Add lines 14 t	(Πrougn 28 ome before net 4	neratino loss d	eductio	on Subtract line	29 from	n line 13	29 30	<u> </u>		00.
30 31	Deduction Fer net opera	s taxable ilico Itina loss arisino i	in tax years beginning	ig on or after Januar	ry 1. 201	8 (see instructions)			31	<del>                                     </del>	<u>-31,9</u>	109.
	Unrelated busines					_ (000 200,00.0)			32		-37,9	09.
_	For Paperwork Re					TEEA02	201L 1/31/	19		Forn	n <b>990-T</b> (2	



Form		-6076993	Page 2
Par	t III Total Unrelated Business Taxable Income		
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	-37,909.
34	Amounts paid for disallowed fringes	34	<u> </u>
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see	-	
	instructions) See Statement 3	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34.	36	-37,909.
	of lines 33 and 34		-31,909.
	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)  Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,	37	
30	enter the smaller of zero or line 36	38	-37,909.
Par	t IV Tax Computation		0.7505.
	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21).	39	0.
	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount		<u>.                                </u>
	on line 38 from Tax rate schedule or Schedule D (Form 1041)	40	
41	Proxy tax. See instructions	41	
	Alternative minimum tax (trusts only)	42	
	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	0.
Par	to the second se	<del>  ••</del>	
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a	<del></del>	
	Other credits (see instructions)  45a  45b	1	
	General business credit Attach Form 3800 (see instructions)  45c	1	
	Credit for prior year minimum tax (attach Form 8801 or 8827)  45d	1	
	Total credits. Add lines 45a through 45d	45e	0.
-	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	
50 a	Payments A 2017 overpayment credited to 2018   50a	<del></del>	
	2018 estimated tax payments 50b	1	
	Tax deposited with Form 8868 50 c	1	
d	Foreign organizations Tax paid or withheld at source (see instructions) 50 d	1	
е	Backup withholding (see instructions) 50e	1	
f	Credit for small employer health insurance premiums (attach Form 8941)  50 f	]	
g	Other credits, adjustments, and payments Form 2439	]	
	□ Form 4136 □ Other □ Total ► <b>50 g</b>	1	
51	Total payments. Add lines 50a through 50g	<b>]</b> 51	0.
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 ► Refunded ►	55	<u>.</u>
$\overline{}$	t VI Statements Regarding Certain Activities and Other Information (see instructions)	<del>}</del>	
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority ov	er a	Yes No
	financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization may have to file FinCEN		
	Report of Foreign Bank and Financial Accounts If 'Yes,' enter the name of the foreign country here	<b></b>	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	
	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 > \$		
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of belief, (is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any	of my knowledge ar	nd
Sign		May the IRS discu	ss this return with
Here	Superflured of officer    1   14   30/9   Vice President   Title	the preparer show instructions)?	I
			Yes No
Paic	Print/Type preparer's name Preparer's signature Relay M. L. Date Check If	PTIN	
Pre-		P01386	215
pare	le bron i erri i ai	76-02698	60
Üse	Firm's address ► 2900 Weslayan, Suite 200		
Only	Houston, TX 77027-5132 Phone no	(713) 4	39-5739
DAA	TECADOON OVOAUD	Fore	200 T (2019)

Form **990-T** (2018)

BAA

1 01111 220-1 (2010) THE COC	rieti ioni	luation					0070773		uge 0
Schedule A — Cost of Goo	<b>ds Sold.</b> Ent	er method of inve	entory valuation						
1 Inventory at beginning of ye	ar	1	6 Inv	entory	y at e	end of year	6		
2 Purchases		2				s sold. Subtract			
3 Cost of labor		3				ne 5 Enter here line 2	7		
4 a Additional section 263A costs (attac	h schedule)		a	u III i	art i,	mic Z		Yes	No
_		4 a	8 Do	the r	ر عمار	of section 263A (w	ith respect to	103	110
<b>b</b> Other costs (attach sch)		4 b				luced or acquired f		ıy	اــــا،
5 Total. Add lines 1 through 4	b	5				zation?			X
Schedule C - Rent Income	(From Rea	l Property and	Personal Prop	erty L	eas	ed With Real P	roperty) (se	e instruct	lions)
1 Description of property									
(1)									
(2)									
(3)									
(4)									
	2 Rent receiv	ed or accrued				3(a) Dodustio	ne directly cor	nacted w	ıth
(a) From personal prop (if the percentage of rent for property is more than 10% more than 50%)	r personal	(if the perce	eal and personal pro entage of rent for pe ceeds 50% or if the on profit or income	rsonal rent is		the income i	ns directly cor n columns 2(a tach schedule	<ul> <li>and 2(b)</li> </ul>	
(1)								-	
(2)									
(3)									
(4)									
Total		Total				45.7.1.1.1	-		
(c) Total income. Add totals of co here and on page 1, Part I, line 6		d 2(b) Enter				(b) Total deductions here and on page 1, Pa I, line 6, column (B)	Enter art		
Schedule E — Unrelated Do	ebt-Finance	d Income (see	instructions)						
1 Description of debt	t-financed prop	ertv	2 Gross income from or allocable to det		<b>3</b> De	eductions directly c debt-fina	onnected with inced property		ble to
1 Description of descri	· maneca prop	io.	financed property	v I	depr	(a) Straight line eciation (attach sc	(b) Othe h) (attacl	er deduction of schedule	
(1)									
(2)									
(3)									
(4)									
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	or allocable	djusted basis of to debt-financed tach schedule)	6 Column 4 divided by column 5			7 Gross income ortable (column 2 ) column 6)	(columr	le deduct n 6 x total 3(a) and 3	of
(1)				90					
(2)				ક					
(3)				ક					
(4)				8					
				E	Enter Part	here and on page 1, line 7, column (A	1, Enter here A) Part I, line	and on p 7, colum	age 1, in (B)
Totals				▶					
Total dividends-received deducti	ons included ii	n column 8		_			<b>&gt;</b>		

TEEA0203L 01/30/19

Schedule F — Interest, A	nnuiu	es, Royalli			trolled Or			orgai	IIZALIOIIS (	see in	Structions	<u> </u>	
organization ide		2 Employer identification number		Net uni ncome ee instri		1	4 Total of speci payments ma				in co		
(1)													
(2)						T		-					
(3)						╁╴				_			
(4)		_				T		-					
Nonexempt Controlled Organiz	ations											· · ·	
<del></del>		et unrelated	_ a	Total o	f specified	٦	10 Part of	colum	n 9 that is	T	11 Deduc	tions directly	
7 Taxable Income	ind	come (loss) instructions)			nts made	,	included in organization	n the d	controlling		11 Deductions directly connected with income in column 10		
(1)	_												
(2)				-									
(3)		-				一							
(4)		<del></del>				寸						-	
Totals			·				Add columns here and on p 8, co		, Part I, line		and on p	6 and 11 Enter age 1, Part I, line umn (B)	
Schedule G - Investmen	<b>4 lmos</b>	ma of a Ca	otio.	- E01/	0(7) (0	ᆜ	× (17) Orași	ninoti	00 /000 /00	<u> </u>			
1 Description of income		2 Amount		<u></u>	3 direc	De	ductions connected		4 Set-asides ttach schedu	<del></del>	5 Total set-as	deductions and sides (column 3	
					(atta	cn	schedule)				pit	is column 4)	
(1)									···				
(2)													
(3)													
(4)								L			<u> </u>	<del></del>	
Totals	<b>•</b>	Enter here ar Part I, line 9,	colur	nn (A)					.* 1			re and on page 1, ne 9, column (B)	
Schedule I – Exploited E	yemn	t Activity I	CON	ie. Otl	her Thai	n A	Advertising	incor	ne (see inst	ruction	s)		
1 Description of exploited a		2 Gross unrelate busines income fr trade o busines	s ed s om r	3 Exper conne pro of u	ises directly ected with duction nrelated ess income	4 I fro or 2 n	Net income (loss) m unrelated trade business (column ninus column 3) a gain, compute umns 5 through 7	5 Gros activ	s income from ity that is not ated business income	6 Ex	penses Itable to Imn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
								ļ. <u></u>					
(1)													
(2)								<u> </u>			_		
(3)													
(4)		Enter here on page Part I, line column (	1, e 10,	on p	here and page 1, I, line 10, mn (B)			,	•		•	Enter here and on page 1, Part II, line 26	
Totals		<u> </u>										<u> </u>	
Schedule J - Advertising	g Inco	me (see inst	ructio	ns)									
Part I Income From Per	riodic	als Reporte	ed or	ı a Co	nsolida	tec	d Basis						
1 Name of periodical		2 Gross advertisi income	ng	adve	Direct ertising osts	(4	Advertising gain or oss) (col 2 minus col 3) If a gain, compute cols 5 through 7		rculation ncome		idership osts	7 Excess readership costs (col 6 minus col 5, but not more than col 4)	
(1)						Γ							
(2)						]						· '	
(3)						]						Į,	
(4)						L	<u> </u>						
Totals (carry to Part II, line (5))		•											
PAA				<u> </u>	E 40204	10/3	1/10		<u>.l.</u>			orm <b>990</b> -T (2018)	

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	ustees (see instri	uctions)		•
1 Name			2 Title	3 Percent of time devoted to business	to unrela	ation attributable ated business
			•	9	5	
				9	5	
<del></del>				ę	5	
				9	is i	
Total. Enter here and on page 1, Part II	, line 14	•	·	• • • • • • • • • • • • • • • • • • • •	<b>&gt;</b>	
BAA		TEEA0204 L	12/31/18		F	orm 990-T (2018)

#### **SCHEDULE D**

Department of the Treasury Internal Revenue Service

Name The Cockrell Foundation

(Form 1120)

**Capital Gains and Losses** 

OMB No 1545 0123

Employer identification number

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

► Go to www.irs.gov/Form1120 for instructions and the latest information.

2018

74-6076993 Part I Short-Term Capital Gains and Losses (See instructions) (h) Gain or (loss) See instructions for how to figure the amounts to (g) Adjustments (d) (e) Cost to gain or loss from Form(s) 8949, Part I, enter on the lines below. Subtract column (e) from Proceeds column (d) and combine the This form may be easier to complete if you round off cents to whole dollars (sales price) (or other basis) line 2, column (g) result with column (g) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjust-ments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 with Box A checked Totals for all transactions reported on Form(s) 8949 with Box B checked Totals for all transactions reported on Form(s) 8949 with Box C checked 3,638. 3,638. 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37 5 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 6 6 Unused capital loss carryover (attach computation) Net short-term capital gain or (loss) Combine lines 1a through 6 in column h 7 3,638. Long-Term Capital Gains and Losses (See instructions) See instructions for how to figure the amounts to (q) Adjustments (h) Gain or (loss) (d) (e) Cost to gain or loss from Form(s) 8949, Part II, line 2, column (g) enter on the lines below. Subtract column (e) from Proceeds (sales price) column (d) and combine the This form may be easier to complete if you round (or other basis) result with column (g) off cents to whole dollars 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjust-

	ments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b			•		
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked	4,645.				4,645.
11	Enter gain from Form 4797, line 7 or 9				11	49,934.
12	Long-term capital gain from installment sales from For	ļ	12			
13	Long-term capital gain or (loss) from like-kind exchange		13			
14	Capital gain distributions (see instructions)			:	14	
			15	54,579.		
Pai	rt III Summary of Parts I and II			<del> </del>		
16	Enter excess of net short-term capital gain (line 7) over		16	3,638.		
17	Net capital gain Enter excess of net long-term capital	tal loss (line 7)	17	54,579.		
18	Add lines 16 and 17 Enter here and on Form 1120, page 2015.	er returns.	18	58,217.		

# Form **8949**

Sales and Other Dispositions of Capital Assets

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

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D

2018

OMB No 1545 0074

Attachment Sequence No 12A

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

SSN or taxpayer identification number

74-6076993

The Cockrell Foundation 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 Part I

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a, you aren't required to report these transactions on Form 8949 (see instructions)

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

þ١١	ete as many forms with the same box checked as you need
	(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above
Γ	(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
X	(C) Short-term transactions not reported to you on Form 1099-B

instructions). For long-term transactions, see page 2.

1 (a)  Description of property (Example 100 shares XYZ Co )	(b) Date acquired (Mo , day, yr )	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis See the <b>Note</b> below	If you enter ar	of any, to gain or loss on amount in column (g) code in column (f) parate instructions	(h) Gain or (loss) Subtract column (e)
		(Mo , day, yr )	(see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
From Sch K-1 (For	n 1065) - AG	Energy Par	tners II LE 3,638.	0.			3,638.
			0,700,01	<u> </u>			
		<u></u>		<u>-</u>			
		_			_		
		<u> </u>					
							_
<del></del>			<u> </u>				
							-
					<u> </u>		
2 Totals. Add the amoun (subtract negative am include on your Sched checked), line 2 (if Bo	nts in columns (d), ounts) Enter each lule D, line 1b (if B ix B above is check	(e), (g), and (h) total here and lox A above is ked), or line 3 (if					
Box C above is check	ed)	<u> </u>	3 <u>,</u> 638.	0.	<u> </u>	0.	3,638.

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

(Examp	ole 100 s	shares X	ŸŽ Co)	(Mo , da		dıs	posed of	(sa	iles price)	See the Note below	See the separate instructions	parate instructions			
						(Mo	, day, yr )	(see	instructions)	and see Column (e) in the separate instructions	Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)		
From	Sch	K-1	(Form	1065)	- AC	Ene	rgy Par	tner							
									5.	0.			5.		
From	Sch	K-1	(Form	1065)	- ME	(G)	Privat	e Eq							
								ļ	4,640.	0.			4,640.		
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											1				
(su incl che	btract i lude or cked),	negativ 1 your : Iine 9	ve amour Schedule	in column nts) Enter D, <b>line 8</b> above is	each te <b>b</b> (if <b>Bo</b>	otal her x <b>D</b> abo	e and ove is		4,645.	0.		0.	4,645.		

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

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• 7	п	×
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# **Federal Statements**

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The Cockrell Foundation

74-6076993

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

Name	Gross Income	Deductions	Income (Loss)
AG Energy Partners II LP AG Realty Fund VIII, LP Black Stone Minerals LP - Common Black Stone Minerals LP - Sub Dominion Midstream Partners LP Energy Transfer LP Energy Transfer Partners LP Enlink Midstream Partners LP Enterprise Products Partners LP Magellan Midstream Partners, LP Phillips 66 Partners LP Plains All American Pipeline LP Summit Midstream Partners LP Sunoco LP WP Private Equity (E&P) XII (A) LP WP Private Equity (E&P) XII Main-1 LP WP (Ganymede) Private Equity XII LP WP Private Equity XII (FT-1) LP Weathergage Venture Capital II LP Western Gas Equity Partners LP Western Gas Partners LP	\$ 14,230. -37,035. 36,483. 34,592. -7,764. -56,974. -33,435. -24,346. -15,502. -6,140. 31,740. -14,875. -2,945. -1,343. 2,170. 6,641. 260. -2,601. -778. -7,063. -16,313.		-39,045. 36,483. 34,5927,76456,97433,43524,34615,5026,1404,06514,8752,9451,343.

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

Tax compliance fees

Total \$ 500.

### Statement 3 Form 990-T, Part III, Line 35 Net Operating Loss Deduction

Loss Year Ending	0	rıgınal Loss	Loss Previousl Used	У	 Loss Available
12/31/10 12/31/13 12/31/16 12/31/17 Net Operating Loss Taxable Income Net Operating Loss		103,071. 65,113. 255,457. 184,193.		0. 0. 0.	\$ 103,071. 65,113. 255,457. 184,193. \$ 607,834. \$ -37,909.