	Form	990⊱T	E	Exempt Orga					L	OMB No 1545-0687
		.d			nd proxy tax u			1900 N 30, 2019		2010
	,	•1	For cal	lendar year 2018 or other tax ye				<u> </u>	2018	
		Trument of the Treasury al Revenue Service Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)								Open to Public Inspection for 501(c)(3) Organizations Only
	A	Check box if address changed		(Empl	oyer identification number oyees' trust, see ictions)					
	B Ex	empt under section	Print	THE UNIVERS	ITY OF MO	NTANA	FOUNDATION		8	1-0362989
] 501(c)(3) 7	_ or	Number, street, and room						ated business activity code
] 408(e)220(e)	Туре	950 ARTHUR AVENUE						·,
] 408A530(a)] 529(a)	O(a) City or town, state or province, country, and ZIP or foreign postal code							000
	C Boo	ok value of all assets		F Group exemption num	ber (See instructions) ▶				
		300,888,2	75.	G Check organization typ	e X 501(c)	corporation	1 501(c) trust	401(a) 1	trust	Other trust
	H EN	er the number of the (organiza	ition's unrelated trades or i	Dusinesses -	4	Describe	the only (or first) unre	elated	
				N-UNITARY PA				complete Parts I-V. If		
	des	cribe the first in the b	lank spa	ace at the end of the previo	us sentence, complet	te Parts I an	d II, complete a Schedul	e M for each additiona	l trade	e or
		iness, then complete							_	
				poration a subsidiary in an		arent-subs	idiary controlled group?	▶ ∟	Ye	s X No
		· .		tifying number of the parer						040 0500
				JAMIE STANTO				one number ► 4(16-	
				de or Business Inc	come		(A) Income	(B) Expenses		(C) Net
		Gross receipts or sale				ایرا				
		Less returns and allow			c Balance	1c				
		Cost of goods sold (S		ΙΛ -		3				
		Gross profit. Subtract		1 V 1		4a	92,528.			92,528.
		Capital gain net incom		Part II, line 17) (attach Form	a 4707)	4b	72,520.	l		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
		Capital loss deduction			14/5/)	4c			$\overline{}$	<u></u>
		•		ship or an S corporation (a	ttach statement)	5	-343,591.	STMT X		-343,591.
		Rent income (Schedu		ship of all o corporation (a	ttach satement)	6	323,3323			010,011
		Unrelated debt-finance		me (Schedule E)		7				
				and rents from a controlled	organization (Schedul	-				
				on 501(c)(7), (9), or (17) o	-					
		Exploited exempt activ			,	10				
	11	Advertising income (S	Schedule	e J)		11				
	12	Other income (See ins	struction	ns; attach schedule)		12		-		
	13	Total. Combine lines	3 throu	gh 12		13	∠ 251,063.			-251,063.
2021	Pai	t II Deductio	ns No	ot Taken Elsewhei utions, deductions mus	re (See instruction	ns for limit	ations on deductions)			
						,/		s income)	14	
	14	•	icers, aii	rectors, and trustees (Sche	edule K)	REC	CEIVED	ŀ	15	
0	15 16	Salaries and wages Repairs and mainten	2000				2 9 2020 9	-	16	
JUL	17	Bad debts	ance		B106	l MAY	29 2020 S	-	17	
	18	Interest (attach sche	dule) (sa	ee instructions)	/ ia		88		18	
SCANNED	19	Taxes and licenses	aaio, (o	oo mondonono,	İ		DENI LIT		19	
岁	20		ons (See	e instructions for limitation	rules)	UGI	DEN, UT		20	
Z	21	Depreciation (attach			,		21	Ţ		
3	22			n Schedule A and elsewher	e on return		22a		22b	
$\widetilde{\mathbf{v}}$	23	Depletion							23	
	24	Contributions to defe	erred ød	mpensation plans					24	
	25	Employee benefit pro	grams						25	
	26	Excess exempt exper						Į	26	
	27	Excess readership co							27	
	28	Other deductions (at					SEE STAT	EMENT /2	28	2,250.
	29	Total deductions A						28	29	2,250.
	30			ncome before net operating				<u> </u>	30	-253,313.
	31/			loss arising in tax years be		nuary 1, 20	118 (see instructions)	121 A	31	252 212
	<u>-82</u>			ncome Subtract line 31 fro				<u> </u>	32	-253,313. Form 990-T (2018)

Form 990-	y	81-0	362989	Page 2
Part I			<i>f</i> , _	
33/	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructio	ons)] 33	27,992.
34	Amounts paid for disallowed fringes		34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	STMT 4	35	27,992.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of			
00	lines 33 and 34		2- 14-	
		f2	$\frac{36}{37}$	1,000.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	(3)	/ / 	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,	•		•
	enter the smaller of zero or line 36		3B	0.
Part /	V Tax Computation			
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0 21)		▶ 39	0.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 fi	rom:		
	Tax rate schedule or Schedule D (Form 1041)		▶ 40	
41	Proxy tax. See instructions		▶ 41	
42	Alternative minimum tax (trusts only)		42	
	·			
43	Tax on Noncompliant Facility Income. See instructions		43	
44	Votal. Add lines 41, 42, and 43 to line 39 or 40, whichever applies		<u> </u>	0.
	f Nax and Payments			
45'a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a			
b	Other credits (see instructions)			
C	General business credit. Attach Form 3800 45c] []	
d	Credit for prior year minimum tax (attach Form 8801 or 8827) 45d		711	
е	Total credits. Add lines 45a through 45d		45e	
46	Subtract line 45e from line 44		46	0.
47		ther (attach sched)		
		tiloi (attacii scriedi	48	0.
48	Total tax Add lines 46 and 47 (see instructions)			0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2		49	<u> </u>
	Payments: A 2017 overpayment credited to 2018			
b	2018 estimated tax payments 50b		─ ┃▮	
C	Tax deposited with Form 8868			
d	Foreign organizations: Tax paid or withheld at source (see instructions) 50d			
е	Backup withholding (see instructions) 50e			
	Credit for small employer health insurance premiums (attach Form 8941) 50f			
				
9	Form 4136 Other Total > 50g		1	
E4	Total payments Add lines 50a through 50g		5,1	
51			52	
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached			
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed		53	
1 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	
Part \	/I Statements Regarding Certain Activities and Other Information (see in	structions)	•	
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other au	thority	1	Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have	to file		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign cou			
	here ▶ SEE STATEMENT 3	•		X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to,	a foreign trust?		— - x
97		a loroigh hust.		 11
	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 ▶\$	ad to the best of m	. knowledge and b	elvef ut us traus
C:	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, ar correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any kn	io to the best of my lowledge	, knowledge and D	ener, it is BUC,
Sign	1. Ou ' 50 150 150 150 150 150 150 150 150 150		May the IRS dis	cuss this return with
Here	1/1/2010 CF00			own below (see
	Signature of officer Date Title		instructions)?	X Yes No
	Print/Type preparer's name Preparer's signature Date	Check	ıf PTIN	
Deid		self- emplo	yed	
Paid	KAREN GRIES KAREN GRIES 05/06/2			078514
Prepa	CI TEMONIA DOMATIEM IID	Firm's EIN		0746749
Use C	220 SOUTH SIXTH STREET, SUITE 300	70 2.11	<u> </u>	
	Firm's address MINNEAPOLIS, MN 55402	Phone no	612-37	6-4500
000744 5		Tritone no.		orm 990-T (2018)
823711 01	-na- na		F	опп ээо- і (2018)

Schedule A - Cost of Good	s Sold. Enter	method of inver	ntory valuation	N/A	. -				
1 Inventory at beginning of year 1			6 Inventory at end of year				6		
2 Purchases	2		7 Cost of goods sold Sub			ne 6	ŀ		
3 Cost of labor	3		from line 5. Ente	er here a	and in P	art I,			
4a Additional section 263A costs			line 2				7		
(attach schedule)	4a		8 Do the rules of s					Yes	No
b Other costs (attach schedule)	4b		property produc	ed or ac	cquired	for resale) apply to			
5 Total. Add lines 1 through 4b	5		the organization						<u> </u>
Schedule C - Rent Income (see instructions)	(From Real	Property an	d Personal Prop	erty L	_ease	ed With Real Pro	perty)		
Description of property									
(1)	•••								
(2)	-		-						
(3)								•	
(4)									
	2. Rent receive	ed or accrued				3(a) Deductions directly	connector	Luuth the income	
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	e than	of rent for	and personal property (if the personal property exceeds 50 nt is based on profit or incom	0% or if	ge	columns 2(a) an			
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)	.			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>		0.
Schedule E - Unrelated Del	bt-Financed	Income (see	instructions)						
			2. Gross income from	_		Deductions directly cont to debt-finance			
1. Description of debt-fi	nanced property		or allocable to debt- financed property		(a) Straight line depreciation		(b) Other deductions		ıs
			inianoso proporty	1	(attach schedule)		(attach schedule		
(4)				+			+		
(1)		-		+	-		+		
(2)			 				1		
(3)							+		
4 Amount of average acquisition	F Average	adjusted basis	6. Column 4 divided	,		7. Gross income	8	Allocable deduct	ions
debt on or allocable to debt-financed property (attach schedule)	of or a debt-finar	llocable to need property schedule)	by column 5			reportable (column 2 x column 6)		umn 6 x total of co 3(a) and 3(b))	
(1)				%					
(2)				%					
(3)				%					
(4)				%					
						iter here and on page 1, art I, line 7, column (A)		er here and on pag t I, line 7, column (
Totals				►L		0	<u></u>		0.
Total dividends-received deductions in	icluded in column	8				•			0.
								Form 990-T	(2018)

			Exempt	Controlled O	ganızatı	ons			
1. Name of controlled organization		2. Emplo identificat numbe	ion (loss) (see	related income e instructions)		nents made inc	Part of column 4 lluded in the cont anization's gross	rolling	6 Deductions directly connected with income in column 5
(1)						·			
(2)									
(3)									
(4)				_					
Nonexempt Controlled	Organizations		-						
7. Taxable Income		inrelated income (see instructions)	(loss) 9 Total	of specified payr made	nents	10. Part of column 9 in the controlling or gross inco	rganization's	11. Dec with	ductions directly connected income in column 10
(1)									
(2)									
(3)									
(4)									
	•		•			Add columns 5 Enter here and on p line 8, colum	age 1, Part I,	Enter he	d columns 6 and 11 ere and on page 1, Part I, ine 8, column (B)
Totals					•		0.		0
Schedule G - Inve	estment Inco	me of a So	ection 501(c)(7), (9), or	(17) Or	ganization			
	1. Description of inco	ome		2 Amount of	income	3 Deductions directly connected (attach schedule)	4. Set-	asides chedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)									
(2)									
(3)									
(4)									
				Enter here and o Part I, line 9, co			-		Enter here and on page Part I, line 9, column (B)
Totals					0.				0
		A adjustes I				<u> </u>			
-	-	Activity	ncome, Othe	r Than Ad	vertisi	ng Income			<u> </u>
-	2. 0 unrelated incom	Gross business business business	3. Expenses directly connected with production of unrelated business income	4. Net incomfrom unrelated business (communication gain, compute through	e (loss) trade or lumn 2 n 3) If a	5. Gross income from activity that is not unrelated business income	6. Exp	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(See	2. 0 unrelated incom	Gross business te from	3. Expenses directly connected with production of unrelated	4. Net incomfrom unrelated business (cominus columingain, computer	e (loss) trade or lumn 2 n 3) If a	5. Gross income from activity that is not unrelated	attribut	able to	expenses (column 6 minus column 5, but not more than
1. Description of exploited activity (1)	2. 0 unrelated incom	Gross business te from	3. Expenses directly connected with production of unrelated	4. Net incomfrom unrelated business (cominus columingain, computer	e (loss) trade or lumn 2 n 3) If a	5. Gross income from activity that is not unrelated	attribut	able to	expenses (column 6 minus column 5, but not more than
1. Description of exploited activity (1) (2)	2. 0 unrelated incom	Gross business te from	3. Expenses directly connected with production of unrelated	4. Net incomfrom unrelated business (cominus columingain, computer	e (loss) trade or lumn 2 n 3) If a	5. Gross income from activity that is not unrelated	attribut	able to	expenses (column 6 minus column 5, but not more than
1. Description of exploited activity (1) (2) (3)	2. 0 unrelated incom	Gross business te from	3. Expenses directly connected with production of unrelated	4. Net incomfrom unrelated business (cominus columingain, computer	e (loss) trade or lumn 2 n 3) If a	5. Gross income from activity that is not unrelated	attribut	able to	expenses (column 6 minus column 5, but not more than
1. Description of exploited activity (1) (2) (3) (4)	e instructions) 2. currelated income trade or	business bus	3. Expenses directly connected with production of unrelated business income Enter here and on page 1, Part I, line 10, col (B)	4. Net incomfrom unrelated business (cominus columingain, computer	e (loss) trade or lumn 2 n 3) If a	5. Gross income from activity that is not unrelated	attribut	able to	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26
1. Description of exploited activity (1) (2) (3) (4)	Enter he page 1 line 10,	re and on , Part I, col (A)	3. Expenses directly connected with production of unrelated business income Enter here and on page 1, Part I, line 10, col (B)	4. Net incomfrom unrelated business (cominus columingain, computer	e (loss) trade or lumn 2 n 3) If a	5. Gross income from activity that is not unrelated business income	attribut	able to	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1,
1. Description of exploited activity (1) (2) (3) (4) Totals Schedule J - Adventage of the second content of	Enter he page 1 line 10,	re and on , Part I, col (A) 0 .	3. Expenses directly connected with production of unrelated business income Enter here and on page 1, Part I, line 10, col (B)	4. Net incomfrom unrelated business (cominus columingain, compute through	e (loss) trade or lumn 2 13) If a locols 5 7	5. Gross income from activity that is not unrelated business income	attribut	able to	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26
1. Description of exploited activity (1) (2) (3) (4) Totals Schedule J - Adventage of the second content of	Enter he page 1 line 10,	re and on , Part I, col (A) 0 .	3. Expenses directly connected with production of unrelated business income Enter here and on page 1, Part I, line 10, col (B) 0 .	4. Net incomfrom unrelated business (cominus columingain, compute through	e (loss) trade or umn 2 13) If a cols 5 7	5. Gross income from activity that is not unrelated business income	attribut	able to nn 5	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26
1. Description of exploited activity (1) (2) (3) (4) Totals Schedule J - Advernment I_ Income F	Enter he page 1 line 10,	re and on Part I, col (A) O • The (see ins advertising advertising advertising business)	3. Expenses directly connected with production of unrelated business income Enter here and on page 1, Part I, line 10, col (B) 0. tructions) ted on a Con	4. Net incomfrom unrelated business (cominus cofurmingain, compute through	e (loss) trade or umn 2 13) If a cols 5 7	5. Gross income from activity that is not unrelated business income	attribut colur	able to nn 5	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26 7. Excess readership costs (column 6 minus column 5, but not more
1. Description of exploited activity (1) (2) (3) (4) Totals Schedule J - Advergance F 1 Name of perio	Enter he page 1 line 10,	re and on Part I, col (A) O • The (see ins advertising advertising advertising business)	3. Expenses directly connected with production of unrelated business income Enter here and on page 1, Part I, line 10, col (B) 0. tructions) ted on a Con	4. Net incomfrom unrelated business (cominus cofurmingain, compute through	e (loss) trade or umn 2 13) If a cols 5 7	5. Gross income from activity that is not unrelated business income	attribut colur	able to nn 5	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26 7. Excess readership costs (column 6 minus column 6, but not more
1. Description of exploited activity (1) (2) (3) (4) Totals Schedule J - Advidence F 1 Name of period (1) (2)	Enter he page 1 line 10,	re and on Part I, col (A) O • The (see ins advertising advertising advertising business)	3. Expenses directly connected with production of unrelated business income Enter here and on page 1, Part I, line 10, col (B) 0. tructions) ted on a Con	4. Net incomfrom unrelated business (cominus cofurmingain, compute through	e (loss) trade or umn 2 13) If a cols 5 7	5. Gross income from activity that is not unrelated business income	attribut colur	able to nn 5	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26 7. Excess readership costs (column 6 minus column 6, but not more
1. Description of exploited activity (1) (2) (3) (4) Totals Schedule J - Advergant I_ Income F 1 Name of perio (1) (2) (3)	Enter he page 1 line 10,	re and on Part I, col (A) O • The (see ins advertising advertising advertising business)	3. Expenses directly connected with production of unrelated business income Enter here and on page 1, Part I, line 10, col (B) 0. tructions) ted on a Con	4. Net incomfrom unrelated business (cominus cofurmingain, compute through	e (loss) trade or umn 2 13) If a cols 5 7	5. Gross income from activity that is not unrelated business income	attribut colur	able to nn 5	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26 7. Excess readership costs (column 6 minus column 6, but not more
1. Description of exploited activity (1) (2) (3) (4) Totals Schedule J - Advide Part I Income F 1 Name of period (1) (2)	Enter he page 1 line 10,	re and on Part I, col (A) O • The (see ins advertising advertising advertising business)	3. Expenses directly connected with production of unrelated business income Enter here and on page 1, Part I, line 10, col (B) 1. Tructions) 1. Direct advertising costs	4. Net incomfrom unrelated business (cominus cofurminus cofurminus compute through through 4. Advertor (loss) (cc col 3) if a gercols 5 th	e (loss) trade or umn 2 13) If a cols 5 7	5. Gross income from activity that is not unrelated business income	attribut colur	able to nn 5	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26 7. Excess readership costs (column 6 minus column 6, but not more

Form 990-T (2018) THE UNIVERSITY OF MONTANA FOUNDATION Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis) 7. Excess readership costs (column 6 minus column 5, but not more than column 4) 4 Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7 2. Gross 3. Direct 5. Circulation 6. Readership advertising income 1. Name of periodical costs (1) (2) (3) (4) 0. 0. 0. Totals from Part I Enter here and on page 1, Part I, line 11, col (A) Enter here and on page 1, Part I, line 11, col (B) Enter here and on page 1, Part II, line 27 0 0. Totals, Part II (lines 1-5) Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3 Percent of time devoted to business 4 Compensation attributable to unrelated business 2. Title 1 Name % (1) (2) % % (3) % (4)

Form 990-T (2018)

▶

0.

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

FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 1
DESCRIPTION	NET INCOME OR (LOSS)
ABBOTT CAPITAL PRIVATE EQUITY FUND VI, L.P. 26-2293853 - ORDINARY BUSINESS AMBERBROOK V LLC 80-0144875 - ORDINARY BUSINESS INCOME	4,946.
(LOSS) AMBERBROOK VI, LLC 90-0806597 - ORDINARY BUSINESS INCOME (LOSS)	-214. -746.
AMBERBROOK VII, LP 47-5318417 - ORDINARY BUSINESS INCOME (LOSS) COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VII, LP -	-3,478.
ORDINARY BUSINESS IN FALCON STRATEGIC PARTNERS IV LP 37-1700706 - ORDINARY	12,681. -17,763.
BUSINESS INCOME (LOSS FALCON STRATEGIC PARTNERS V, LP 47-4102851 - ORDINARY BUSINESS INCOME (LOSS	-46,043.
GEM REALTY FUND V, L.P. 46-1696235 - ORDINARY BUSINESS INCOME (LOSS) GREENSPRING GLOBAL PARTNERS VII-B, LP - ORDINARY BUSINESS	9,389.
INCOME (LOSS) HARVEST MLP INCOME FUND LLC 27-2968896 - ORDINARY BUSINESS INCOME (LOSS)	-238. -320,543.
IRON POINT REAL ESTATE PARTNERS II-TE, LP - ORDINARY BUSINESS INCOME (LOSS) KAYNE ANDERSON MLP FUND, LP - ORDINARY BUSINESS INCOME	-12,166.
(LOSS) MARANON SENIOR CREDIT FUND V-UNLEVERED LP - ORDINARY	-73. 2,569.
BUSINESS INCOME (LOSS) NORTHGATE IV, LP 26-1902666 - ORDINARY BUSINESS INCOME (LOSS)	10,387.
Q-BLK REAL ASSETS II LP 20-4552354 - ORDINARY BUSINESS INCOME (LOSS) ROCKLAND POWER PARTNERS III LP 81-3771439 - ORDINARY	534.
BUSINESS INCOME (LOSS) SIGULER GUFF DISTRESSED OPPORTUNITIES FUND IIII, LP - ORDINARY BUSINESS INCO	160,907. 62.
THE ENERGY & MINERALS GROUP FUND II, LP 45-1962496 - ORDINARY BUSINESS INCO VIA ENERGY II, L.P. 27-3260011 - ORDINARY BUSINESS INCOME	68,719.
(LOSS) VIA ENERGY III, L.P. 41-2282342 - ORDINARY BUSINESS	-125,127. -158,734.
INCOME (LOSS) VIA ENERGY, L.P. 26-3244781 - ORDINARY BUSINESS INCOME (LOSS)	-7,902.
WCP REAL ESTATE FUND II(B), LP 27-1049391 - ORDINARY BUSINESS INCOME (LOSS) WCP REAL ESTATE FUND IV, LP 46-2682326 - ORDINARY	5,848.
BUSINESS INCOME (LOSS) WCP NEWCOLD, LP 47-3997648 - ORDINARY BUSINESS INCOME (LOSS)	106,503. -33,109.
(1000)	-343,591.

TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5

FORM 990-T	OTHER DEDUCTIONS	STATEMENT	2
DESCRIPTION		AMOUNT	
TAX PREPARATION FEE	S	2,2	50.
TOTAL TO FORM 990-T, PAGE 1, LINE 28		2,2!	50.
FORM 990-T	NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST	STATEMENT	3

NAME OF COUNTRY

CAYMAN ISLANDS **GUERNSEY**

FORM 990-T	NET	OPERATING LOSS D	EDUCTION	STATEMENT 4
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/14	118,512.	112,035.	6,477.	6,477.
06/30/15	426,700.	0.	426,700.	426,700.
06/30/16	172,750.	0.	172,750.	172,750.
06/30/17	240,185.	0.	240,185.	240,185.
06/30/18	467,024.	0.	467,024.	467,024.
NOL CARRYO	VER AVAILABLE THIS	YEAR	1,313,136.	1,313,136.

SCHEDULE M (Form 990-T)

Department of the Treasury Internal Revenue Service (99)

Unrelated Business Taxable Income for Unrelated Trade or Business

For calendar year 2018 or other tax year beginning $\ \ JUL\ 1$, $\ 2018$, and ending $\ \ JUN\ 30$, $\ \ 2019$

year 2018 or other tax year beginning 001 1, 2010 and ending 00N 30, 2019

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

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

ENTITY 1

OMB No 1545-0687

2018

501(c)(3) Organizations Only

Name of the organization Employer identification number THE UNIVERSITY OF MONTANA FOUNDATION 81-0362989 523000 Unrelated business activity code (see instructions) ► S CORP INVESTMENTS Describe the unrelated trade or business Part I. Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales **b** Less returns and allowances c Balance ▶ 1c Cost of goods sold (Schedule A, line 7) Gross profit Subtract line 2 from line 1c 3 3 4a Capital gain net income (attach Schedule D) 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach 28,492 28,492. statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 10 Advertising income (Schedule J) 11 11 Other income (See instructions, attach schedule) 12 12 28,492. 28,492. Total. Combine lines 3 through 12 13 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)				14	
15	Salaries and wages				15	
16	Repairs and maintenance				16	
17	Bad debts				17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses				19	
20	Charitable contributions (See instructions for limitation rules)				20	
21	Depreciation (attach Form 4562)	2	1			
22	Less depreciation claimed on Schedule A and elsewhere on return	22	2a		22b	
23	Depletion				23	
24	Contributions to deferred compensation plans				24	
25	Employee benefit programs				25	
26	Excess exempt expenses (Schedule I)				26	
27	Excess readership costs (Schedule J)				27	
28	Other deductions (attach schedule)	EE	S	TATEMENT 5	28	500.
29	Total deductions. Add lines 14 through 28				29	500.
30	Unrelated business taxable income before net operating loss deduction. Subtract	line 2	9 fr	om line 13	30	27,992.
31	Deduction for net operating loss arising in tax years beginning on or after January	1, 201	18 (see		
	instructions)				31	
32	Unrelated business taxable income Subtract line 31 from line 30				32	27,992.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

FORM '990-T (M)	OTHER DEDUCTIONS	STATEMENT 5
DESCRIPTION		AMOUNT
TAX PREPARATION FEE		500.
TOTAL TO SCHEDULE M, PART II, LINE 28		500.

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

▶ 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.

OMB No 1545-0123

Name

Employer identification number

THE UNIVERSITY OF		81-0362989			
Part I / Short-Term Capital Ga	ins and Losses (See	instructions.)			
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part I, line 2, column (ain 49, g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked		-			
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked					4,805.
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 37	7		4	
5 Short-term capital gain or (loss) from like-kind	d exchanges from Form 8824			5	
6 Unused capital loss carryover (attach comput	ation)			6	()
7 Net short-term capital gain or (loss). Combin				7	4,805.
ິ_Part II ∰ Long-Term Capital Gai	ns and Losses (See I	nstructions)			
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you	(d) Proceeds	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	49.	(ħ) Gain or (toss) Subtract column (e) from column (d) and combine the result with column (g)
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	ratti, iiie 2, coluitiit	197	combine the result with column (g)
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 adjustments (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 Box D checked					
9 Totals for all transactions reported on					
Form(s) 8949 with Box E checked					<u> </u>
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked				,	87,723.
11 Enter gain from Form 4797, line 7 or 9				11	
12 Long-term capital gain from installment sales	from Form 6252, line 26 or 37	7		12	
13 Long-term capital gain or (loss) from like-kind	d exchanges from Form 8824			13	
14 Capital gain distributions				14	
15 Net long-term capital gain or (loss). Combine		<u>1 h</u>		15	87,723.
Part III. Summary of Parts I and	d II			,	
16 Enter excess of net short-term capital gain (lin	ie 7) over net long-term capita	l loss (line 15)		16	4,805.
17 Net capital gain Enter excess of net long-term	ı capıtal gaın (line 15) over net	short-term capital loss (lii	ne 7)	17	87,723.
18 Add lines 16 and 17 Enter here and on Form	1120 name 1 line 8 or the pro	oner line on other returns		18	92.528.

For Paperwork Reduction Act Notice, see the Instructions for Form 1120

Note: If losses exceed gains, see Capital losses in the instructions.

Schedule D (Form 1120) 2018

JWA

Department of the Treasury Internal Revenue Service

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. OMB No 1545-0074

Attachment Sequence No 12A

Name(s) shown on return

Social security number or taxpayer identification no.

81-0362989

THE UNIVERSITY OF MONTANA 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 how to check.

broker and may even tell you which							
Part I Short-Term. Transact	tions involving capi	tal assets you held	1 year or less are g	enerally short term (se	e instructio	ns) For long-term	
transactions, see page 2 Note: You may aggregate a	II short-term transa	ctions reported on	Form(s) 1099-B sho	wing basis was repor	ted to the IF	RS and for which no	adjustments or
codes are required Enter th	e totals directly on	Schedule D, line 1	a, you aren't require	ed to report these tran	sactions on	Form 8949 (see inst	ructions)
You must check Box A, B, or C below If you have more short-term transactions than w	Check only one b	ox, if more than one it one or more of the box	es, complete as many	forms with the same box	checked as yo	ou need	or each applicable box
(A) Short-term transactions re	ported on Form(s) 1099-B showir	ng basis was repo	orted to the IRS (se	e Note ab	ove)	
(B) Short-term transactions re	ported on Form(s) 1099-B showir	ng basis wasn't r	eported to the IRS			
X (C) Short-term transactions no	ot reported to vo	u on Form 1099-	В				
1 (a)	(b)	(c)	(d)	(e)		nt, if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds	Cost or other	i 1088. IT ye Lin column	ou enter an amount (g), enter a code in	Gain or (loss).
(Example: 100 sh XYZ Co)	(Mo, day, yr)	disposed of	(sales price)	basis See the	column (f). See instructions	Subtract column (e) from column (d) &
		(Mo , day, yr)		see Column (e) in	(f)	(g)	combine the result
				the instructions	Code(s)	Amount of adjustment	with column (g)
ABBOTT CAPITAL							
PRIVATE EQUITY							
FUND VI, L							<66.>
AMBERBROOK V LLC	 				-		
80-0144875	 			+			<6.>
AMBERBROOK VI, LLC							
90-0806597	1		-	+			19.
AMBERBROOK VII, LF				-		<u> </u>	
47-5318417							90.
COMMONFUND CAPITAL	1						
NATURAL RESOURCES	4	<u></u>					
							<5.>
PAR IRON POINT REAL							\
ESTATE PARTNERS				 			4,764.
II-TE, L							4,704.
NORTHGATE IV, LP							9.
26-1902666				-			9.
	<u> </u>			ļ		-	
				ļ			
		.,					
		_					
2 Totals. Add the amounts in colui	mns (d), (e), (a), a	ind (h) (subtract					
negative amounts) Enter each to							
Schedule D, line 1b (if Box A abo		-					
above is checked), or line 3 (if B	•						4,805.

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.

823011 11-28-18 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2018)

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on page 1

Social security number or taxpayer identification no.

THE UNIVERSITY OF MONTANA FOUNDATION

81-0362989

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions,

see page 1

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a, you aren't required to report these transactions on Form 8949 (see instructions).

On the second of the seco You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box if you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS X (F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or (h) (d) (a) (b) (e) loss. If you enter an amount Gain or (loss). Description of property Proceeds Cost or other Date acquired Date sold or in column (g), enter a code in column (f). See instructions. (sales price) Subtract column (e) basis See the (Example: 100 sh XYZ Co) (Mo, day, yr) disposed of from column (d) & Note below and (Mo, day, yr) (g) see Column (e) ın combine the result Amount of Code(s) with column (a) the instructions adjustment ABBOTT CAPITAL PRIVATE EQUITY FUND VI, L 1,700. AMBERBROOK V LLC 80-0144875 66. AMBERBROOK VI, LLC 2,137. 90-0806597 AMBERBROOK VII, LP <1,222.> 47-5318417 COMMONFUND CAPITAL NATURAL RESOURCES PAR <1,196.>FALCON STRATEGIC PARTNERS IV LP $\overline{<140.}>$ 37 - 1700FALCON STRATEGIC PARTNERS V, LP 15,451. 47-4102 HARVEST MLP INCOME FUND LLC 27-2968896 10,229. IRON POINT REAL ESTATE PARTNERS 23,688. II-TE, L KAYNE ANDERSON MLP 25,652. FUND, LP NORTHGATE IV, LP <682.> 26-1902666 O-BLK REAL ASSETS 703. II LP 20-4552354 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D. line 8b (if Box D above is checked), line 9 (if Box E

above is checked), or line 10 (if Box F above is checked) 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

823012 11-28-18

Form 8949 (2018)

87,723.

Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on page 1

Social security number or taxpayer identification no.

THE UNIVERSITY OF MONTANA FOUNDATION

81-0362989

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute	
statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your	
broker and may even tell you which box to check	
	_

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required Enter the totals directly on Schedule D, line 8a, you aren't required to report these transactions on Form 8949 (see instructions)

You must check Box D, E, or F below. Check only one box, if more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box if you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or (h) (d) (e) (b) (a) loss If you enter an amount Proceeds Cost or other Gain or (loss). Description of property Date acquired Date sold or in column (g), enter a code in (sales price) Subtract column (e) basis See the (Example 100 sh XYZ Co) (Mo, day, yr) disposed of column (f) See instructions. from column (d) & Note below and (Mo, day, yr) (f) (g) combine the result see Column (e) ın Amount of adjustment Code(s) with column (g) the instructions THE ENERGY & MINERALS GROUP FUND II, LP <1,189.> VIA ENERGY II, 14,601. L.P. 27-3260011 VIA ENERGY III, L.P. 41-2282342 250. VIA ENERGY, L.P. <284.> 26-3244781 WCP REAL ESTATE FUND IV, LP <2,041. 46-2682326 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E

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.

above is checked), or line 10 (if Box F above is checked)