_			Evennt Organization Rus	cinac	22	Income T	av Retur	n	ОМ	IB No 1545-068	B 7
Form	990-T Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))										
				2017							
		For cale	ndar year 2017 or other tax year beginning					10			
	ent of the Treasury evenue Service	► Do r	► Go to www.irs.gov/Form990T for i not enter SSN numbers on this form as it m					1(c)(3)	Open to	Public Inspecti	ion for
C	heck box if	- 501	Name of organization (Check box if nai	501(c)(3) Organizations Only							
<u>A ⊔ ac</u>	Idress changed		Regents of the University of Colorado	ployer identification number ployees' trust, see instructions)							
	it under section	Print	Number, street, and room or suite no. If a P.O.	hov se	e ins	tructions		84-600	ነስፍፍፍ		
☐ 408		or	1800 Grant Street, Suite 600	, box, sc.	C III3	tractions				siness activity o	codes
☐ 408		Type	City or town, state or province, country, and 2	7IP or fore	eian i	nostal code		(See	e instructions)		
529			Denver, CO 80203	0. 1010	o.g., (postar code		72232	0	541800	
	value of all assets of year	F Gr	oup exemption number (See instruct	ions) ▶	<u> </u>			1.2202		1011000	
at end	\$7,006,367,000		eck organization type ► 🛛 501(c)			n 🗍 501(c) trust	401(a) trust	☐ Other	trust
			n's primary unrelated business activit	_					·		
			e corporation a subsidiary in an affiliated					roup?	•	☐ Yes 🛚	No
- If "	Yes," enter the	name a	and identifying number of the parent	corpora	atioi	n 🕨		·			
J The	books are in	care of	➤ University Controller's Office	•		Tele	phone numbe	er ▶ (3	03) 837	'-2116	
Part	Unrelated	d Trad	e or Business Income			(A) Income	(B) E	kpenses		(C) Net	
1a	Gross receipts	or sale	es 3,007,364				-			_	
b	Less returns and	allowance	es c Balance	∍► <u></u> 1	1c	3,007,364	00				
2	Cost of goods	sold (S	Schedule A, line 7)		2	0 0	00				
3	Gross profit S	Subtract	line 2 from line 1c	. [_:	3	3,007,364	00			3,007,364	00
4a	Capital gain no	et incor	ne (attach Schedule D)	. 4	ŧa					0	00
b	Net gain (loss)	(Form 4	4797, Part II, line 17) (attach Form 479	97) 4	\$b					0	00
C	Capital loss de	eductio	n for trusts	. 4	4c						00
5	Income (loss) fro	m partn	erships and S corporations (attach statem	ent)	5						00
6	Rent income (Schedu	le C)		6						00
7	Unrelated deb	t-financ	ced income (Schedule E) .		7					0	00
8	Interest, annuities,	royalties,	and rents from controlled organizations (Schedu	ule F)	8_					0	00
9	Investment incom	e of a sec	ction 501(c)(7), (9), or (17) organization (Schedu	ıle G)	9						00
10	Exploited exer	mpt act	ıvıty income (Schedule I)	1	10					0	00
11	Advertising inc	come (S	Schedule J)	. [1	11	5,379	00	239 0	0	5,140	00
12	Other income (See inst	ructions; attach schedule)		12	1,334,688				1,334,688	
13	Total. Combin				13	4,347,431		239 0		4,347,192	00
Part			Taken Elsewhere (See instruction					ept for	contri	butions,	
			be directly connected with the unr		bus	siness income	.)	· ···			
14			cers, directors, and trustees (Schedu	ile K)				· -	14		
15	Salaries and w	•			•		•	·	15	3,675,050	
16	Repairs and m	naintena	ance		است	5 .			16		
17	Bad debts			CEN	ル	U. 101 · ·	• •	⊢	17		
18	Interest (attack		lule)	سسسند	•		•	-	18		
19	Taxes and lice	enses		50	1 2	019 : [8]	•		19		
20	Charitable cor	ntributio	ons (See instructions for limitation rule	es) b	• •	المقالس		ı F	20		
21	Depreciation (attach i	-orm 4562)	نسسنسير	سسن ۱ هن	UT 211	446,577		226	446 577	00
22	Less deprecia	tion cla	imed on Schedule A and elsewhere	SCOT	417	, ZZa		l	22b 23	446,577	00
23	Depletion .	مامام	d commonation plans					-	24		
2 24 2 25			rred compensation plans	• •			•		25		
- 25 D 26	Employee ber	-	-				•		26		
> 26 > 27	-	-	nses (Schedule I)				· · · ·	·	27		
21 20 ا		-	ests (Schedule J)				•	-	28	1,492,533	
년 28 29		-	ach schedule) Id lines 14 through 28	•	•			. -	29	5,614,160	00
~ 20 ~ 20			xable income before net operating lo	ce dadu	Ictic	n Subtract line	 o 29 from line	·	30	(1,266,968	
130 1134			eduction (limited to the amount on line			Gubtiact iiili	C 20 HOIT IIIE	' '	31		00]
Z32			exable income before specific deduc			 act line 31 from	n line 30	-	32	(1,266,968	00)
Q33			exable income before specific deductions and the second deductions are specific deductions. See the second deductions are specific deductions.					 	33	1,200,300	<u> </u>
130 131 NA32 V33 C34			taxable income. Subtract line 33 fro					-32. H			
U)	enter the sma							~~~	34	(1.266.968	00)

For Paperwork Reduction Act Notice, see instructions.

Part I	II Ta	x Computation		-							
	_	zations Taxable as Corrs (sections 1561 and 156	•		•	ion C	Controlled gro	oup			
	Enter yo (1) \$	our share of the \$50,000,	\$25,000, and) \$		ole income brac	kets (in that order)				
b	Enter of	rganization's share of: (1)	Additional 5	•		\$					
с 36	Income Trusts	tax on the amount on lin	e 34 . ates. See	instructions for	tax computation	on I	ncome tax	▶ on	35c		
		ount on line 34 from: []] ax. See instructions	fax rate sche	edule or Sched		11) .		>	36 37		
	•	ive minimum tax							38		
		Non-Compliant Facility							39		
		Add lines 37, 38 and 39 to			•				40		0 00
Part I		x and Payments		oo, manara, app.				•			0 100
		tax credit (corporations att	ach Form 111	8 trusts attach Forr	n 1116)	41a					
	_	redits (see instructions)		o,	,	41b					
		business credit Attach I	 Form 3800 (s	ee instructions)		41c					
		or prior year minimum tax	•	•		41d					
		redits. Add lines 41a thro		11 0001 01 0027)	•	714			41e		0 00
		et line 41e from line 40	Jugii 4 iu			•	• •		42		0 00
		tes Check if from Form		0044 🖂 5 0007 [7 0000 /7 (245 /-			43		000
			4255 L. Form	8611 🗀 Form 8697 L	Form 8866 (Jiner (a	ittach schedule)		44		0.00
		ax. Add lines 42 and 43			•	45-	· · · ·	•	44		0 00
	•	nts ⁻ A 2016 overpayment	credited to 2	2017		45a					
		stimated tax payments	•			45b					
	-	posited with Form 8868				45c					
	_	organizations: Tax paid			uctions) .	45d			.,		
	-	withholding (see instruct	•		•	45e					
		or small employer health			rm 8941)	45f					
_	Other c	redits and payments a 4136	☐ Form 2 ☐ Other	2439	Total ▶	45g	0	00			
46	Total p	ayments. Add lines 45a f	hrough 45g		-				46		0 00
	-	ed tax penalty (see instru		ck if Form 2220 is	attached			▶ □	47		
		e. If line 46 is less than th	-					•	48	•	0 00
		yment. If line 46 is larger				t over	paid	•	49		0 00
	-	amount of line 49 you want					Refunded	ı ►	50		0 00
Part \		atements Regarding				n (see					<u> </u>
		time during the 2017 cale							her auth	ority	Yes No
		financial account (bank,								, ⊢	
		Form 114, Report of Fo									
	here ▶	•					at Britain			· -	Х
52	During t	he tax year, did the organiza	tion receive a	distribution from or				a fore	eian taust		X
	•	see instructions for other			-	i Oi, Oi	transition to,	a 1010	agii tiust	·	^_
	Enter th	e amount of tax-exempt	interest rece	ived or accrued du	iring the tax yea						
O:		penalties of perjury, I declare that prrect, and complete. Declaration of							st of my kn	owledge an	nd belief, it is
Sign Here	1	out CKne	hen	5-13-14	Associate Vice		•	•	with the	preparer sh	s this return nown below]Yes No
	Signati	ure of officer	<u>'</u>	Date	Title				<u> </u>		
Paid		Print/Type preparer's name		Preparer's signature			Date		eck f-employe		1
Prepa		Firm's name ▶						$\overline{}$	n's EIN ►		
Use (ווע	Firm's address ►		· · · · · · · · · · · · · · · · · · ·					one no		
				· · · · · · · · · · · · · · · · · · ·				,		Earn QQ	N-T (2017)

Schedule A—Cost of Good	ds Sold. En	ter meth	od of inv	vento	ry va	luation >						
1 Inventory at beginning of	of year	1			6	Inventory a	it end of year	6				
2 Purchases		2			7	Cost of	goods sold. Subtract					
3 Cost of labor		3				line 6 from	line 5. Enter here and					
4a Additional section 263	A costs					in Part I, Im	ne 2	7		0	00	
(attach schedule)	4	la		-	8	Do the rule	es of section 263A (wit	h res	pect to	Yes	No	
b Other costs (attach scho	edule) 4	ь					roduced or acquired for				Ī	
5 Total. Add lines 1 throu	· —	5	0	00		to the orga						
Schedule C—Rent Income		i Prope			onal	Property L	Leased With Real Pro	perty	/)			
(see instructions)	•	-	•						. •			
Description of property												
(1)				-								
(2)									•			
(3)				***								
(4)												
	2. Rent receive	ed or accru	ed									
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) (b) From real are percentage of rent 50% or if the rent					onal pro	perty exceeds	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)					
(1)												
(2)												
(3)												
(4)												
Total		Total					(b) Total deductions.					
(c) Total income. Add totals of co here and on page 1, Part I, line 6, c	olumn (A)	` 1	>				Enter here and on page 1, Part I, line 6, column (B) ▶					
Schedule E—Unrelated De	ebt-Finance	d Inco	me (see i	nstruc	ctions	.)	· · ·					
1. Description of deb	ot-financed prope	erty				come from or debt-financed	Deductions directly connected with or allocable to debt-financed property (a) Straight line depreciation (b) Other deductions					
				property			(a) Straight line depreciation (b) Other diagram (attach schedule) (attach s				S	
(1)												
(2)												
(3)												
(4)							·					
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	e adjusted l allocable to inced propi h schedule	erty	6. Column 4 divided by column 5			7. Gross income reportable (column 2 × column 6)	8. Allocable deduction (column 6 × total of column 3(a) and 3(b))		of colu			
(1)						%						
(2)						%						
(3)						%						
(4)						%						
							Enter here and on page 1, Part I, line 7, column (A)		r here and t I, line 7, c			
Totals			•									
Total dividends-received deducti	ions included	in column	8				<u> </u>	·		<u> </u>		
									Form 9	3U- I	(2017)	

Schedule F—Interest, Annu	uities,	Royalties,				anizations (se	e instruc	ctions)	
		_	Exempt	Controlled	l Organizations				
Name of controlled organization	· · ·				4. Total of specified payments made	5. Part of colum included in the coorganization's gro	controlling	conne	eductions directly ected with income in column 5
(1)								_	
(2)									
(3)		-					_		· -
(4)							-		
Nonexempt Controlled Organiz	ations	·			•	•			
7 Tayahle income		Net unrelated incoss) (see instructi			otal of specified yments made	included in the o	10. Part of column 9 that is included in the controlling organization's gross income		eductions directly cted with income in column 10
(1)					-		•		
(2)				-		-		+	
(3)									
(4)									
Totals						Add columns 5 Enter here and c Part I, line 8, cc	on page 1,	Enter h	columns 6 and 11 here and on page 1, line 8, column (B)
Schedule G-Investment I	ncom	e of a Sect	ion 501(c)(7), (9),	or (17) Organi	zation (see ins	tructions	<u>-</u> s)	
1. Description of income		2. Amount of income		3. Deductions directly connected (attach schedule)		4. Set-asides (attach schedule)		5. To and s	otal deductions et-asides (col. 3 plus col. 4)
(1)									
(2)									
(3)									
(4)									
Totals	•	Enter here and Part I, line 9, c	olumn (A)		A decarding to			Part I, II	re and on page 1, ne 9, column (B)
Schedule I—Exploited Exe	empt A	Activity inco	ome, Oti	ner inan	Advertising in	icome (see insi	ructions	5)	Т
Description of exploited activi	2. Gross unrelated business incor from trade o business	me conr r pro	Expenses directly nected with duction of nrelated less income	Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	attribu	penses Itable to Imn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)									
(2)									
(3)									
(4)									
Totals	•	Enter here and page 1, Part line 10, col (/	I, pag	here and on e 1, Part I, 10, col (B)					Enter here and on page 1, Part II, line 26
Schedule J—Advertising I	ncom	e (see instruc	ctions)		1				,
Part I Income From P				Consoli	dated Basis				
1. Name of periodical		2. Gross advertising income		3. Direct rtising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income		idership osts	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)									
(2)]
(3)]
(4)									
Totals (carry to Part II, line (5))	>								

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) (col costs (column 6 6. Readership 3. Direct 5. Circulation 1. Name of periodical advertising 2 minus col 3) If minus column 5, but advertising costs income costs ıncome a gain, compute not more than cols 5 through 7 column 4) (1) The Scribe 5,379 239 5,140.00 91,854 73,371 (2) (3) (4) **Totals from Part I** Enter here and on 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 27 Totals, Part II (lines 1-5) 5,379.00 239 00 Schedule K—Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of 4. Compensation attributable to time devoted to business 1 Name 2. Title unrelated business

Form 990-T (2017)

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

Employer identification number Name Regents of the University of Colorado 84-6000555 Note: See the instructions to find out if the corporation is a small corporation exempt from the alternative minimum tax (AMT) under section 55(e). (1,266,968)Taxable income or (loss) before net operating loss deduction . . . 1 Adjustments and preferences: Depreciation of post-1986 property **b** Amortization of certified pollution control facilities . . Amortization of mining exploration and development costs Amortization of circulation expenditures (personal holding companies only) Adjusted gain or loss Long-term contracts Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only) . Tax shelter farm activities (personal service corporations only) Passive activities (closely held corporations and personal service corporations only) 2m m Tax-exempt interest income from specified private activity bonds 2n Other adjustments and preferences (1,266,968.00)Pre-adjustment alternative minimum taxable income (AMTI) Combine lines 1 through 20. 3 Adjusted current earnings (ACE) adjustment: a ACE from line 10 of the ACE worksheet in the instructions . . . Subtract line 3 from line 4a If line 3 exceeds line 4a, enter the difference as a 4b 0.00 4c 0.00 Multiply line 4b by 75% (0.75). Enter the result as a positive amount 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 4d e ACE adjustment 0 00 4e If line 4b is zero or more, enter the amount from line 4c • If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount (1,266,968.00)5 Combine lines 3 and 4e If zero or less, stop here, the corporation does not owe any AMT. 6 Alternative minimum taxable income. Subtract line 6 from line 5 If the corporation held a residual 7 7 interest in a REMIC, see instructions Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c): Subtract \$150,000 from line 7 If completing this line for a member of a Exemption Subtract line 8b from \$40,000 If completing this line for a member of a controlled group, see instructions. If zero or less, enter -0-9 10 11 Alternative minimum tax foreign tax credit (AMTFTC) See instructions . . . 11 Tentative minimum tax. Subtract line 11 from line 10 12 13 13 Regular tax liability before applying all credits except the foreign tax credit 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 For Paperwork Reduction Act Notice, see separate instructions.

Form 4562

Department of the Treasury

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

Internal Revenue Service (99) ► Go to www.ii

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

OMB No 1545-0172

20**17**Attachment

Form 4562 (2017)

Sequence No

Business or activity to which this form relates Identifying number Name(s) shown on return Regents of the University of Colorado Form 990-T 84-6000555 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I Maximum amount (see instructions) . . . 2 Total cost of section 179 property placed in service (see instructions) 2 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8. 9 10 Carryover of disallowed deduction from line 13 of your 2016 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11 13 Carryover of disallowed deduction to 2018 Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property) (See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election . . . 15 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Don't include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2017. 446,577 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2017 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction penod service only-see instructions) 3-year property 5-year property 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L h Residential rental 27.5 yrs MM S/L property 27.5 yrs. MM S/L i Nonresidential real MM S/L 39 yrs. S/L property MM Section C-Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L 12 yrs. b 12-year 40 yrs. c 40-year Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (q), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions 22 446,577.00 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2017)

Form	4562 (2017)																Page 2
Pai	t V Listed	d Propert for enterta	• ,					vehic	les, ce	rtain	aircr	aft,	certain	com	outers	s, and p	roperty
		For any ve olumns (a)											lease e	expens	e, cor	nplete c	nly 24a
	Section A	—Depreci	ation and	Other Inf	ormati	on (Ca	ution:	See the	e instru	ctions	s for li	mıts	for pas	senge	r auto	mobiles)
24a	Do you have e	vidence to su	upport the b	usiness/inve	estment	use clain	ned?] Yes [No	24b	If "Ye	es," is	the evi	dence v	written'	? 🗌 Ye:	s 🗌 No
	(a) e of property (list rehicles first)	(b) Date placed in service	(c) Business/ investment us percentage		d) ther basis		(e) for depreness/investuse only)	stment	(f) Recover period	- 1	(g) Metho Convent			(h) reciation duction	,	(i) Elected se co	ction 179
25	25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) . 25																
26	Property use	ed more that	an 50% ın	a qualified	d busin	ess use	2 :										
		T		6													
		_		6						+						_	
			+	6		+		<u>-</u>							-		
27	Property use	ed 50% or	<u> </u>	<u> </u>	isiness	IISB.		1_					l				
	1 Toperty us	1		6	20111000	1				S/	L-		1				
				6							-						
		-		6		-		-			-		 				
28	Add amount	te in colum	 		h 27 E	nter he	re and	on line	21 nac		<u>-</u>	28			\dashv		
29	Add amount			_					Σ1, ρας	J C 1	L		<u> </u>		29	-	
	Add amoun	is in column	11 (1), 11116 2				mation		e of Ve	hicle		•	<u> </u>				
Com	plete this sect	on for vehic	rles used h									, or r	elated r	erson	If vou	nrovideo	l vehicles
	ur employees																
,.	ur omproyees				г .		Ť.		T		1						* 0
30	(a) (b) (c) (d) (e) Total business/investment miles driven during the year (don't include commuting miles) .							Ve	(f) Vehicle 6								
31	Total commu	ting miles dr	iven during	the year													
32	Total other	persona	_	-													
33	Total miles lines 30 thro	driven dur	ring the y	ear. Add	:			*******									
34	Was the ve			personal	Yes	No	Yes	No	Yes	No	οΥ	'es	No	Yes	No	Yes	No
35	Was the veh																
36	ls another vel	hicle availab	le for perso	nal use?		<u> </u>		1	1					<u> </u>	1		1
	io another ver			stions for	Emplo	vers W	/ho Pro	vide V	ehicles	for l	Jse b	v Th	eir Em	ploves	 ?S		
	wer these que than 5% ow	estions to d	letermine	ıf you mee	t an ex	ception										s who a	ren't
37	Do you mai		tten policy	statemen	t that p	orohibit	s all pe	rsonal	use of	vehic	les, ir	nclud	ling co	nmutir	ng, by	Yes	No
38	Do you mai employees?															r 📄	
39	Do you trea								•	·							
40	Do you pro			-				taın ınf	ormatic	n fro	m you	ur er	nployee	s abo	ut the	,	
-	use of the v				-				•								
41	Do you mee	t the requir	rements c	oncerning	qualifie	ed auto	mobile (demon	stration	ı use'	(See	inst	ruction	s) .			
	Note: If you	ur answer t	o 37, 38, 3	39, 40, or 4	11 is "Y	es," do	n't com	plete :	Section	B for	the c	ove	red veh	icles.			
Pa	it VI Amoi																
		(a) on of costs		(b) Date amortiza begins	ation	Amo	(c) rtizable a	mount	((d Code s			(e) Amortiza period percent	or	Amort	(f) ization for	this year
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REGENTS OF THE UNIVERSITY OF COLORADO

FEIN: 84-6000555

Year ended June 30, 2018

Statements

Statement 1

Detail of other income:

Qualified Transportation Fringe Total (to Form 990-T, Part I;		 1,334,688 1,334,688
Statement 2 Detail of other deductions:		
Administrative expense Operating expenses Facilities expense	.,	313,379 963,243 215,911

Statement 3

Form 990-T, Part II, Line 31
Net Operating Loss Deduction

Total (to Form 990-T, Part II, line 28)

		Loss	
Loss Year	Original	Previously	Loss
Ending	Loss	Used	Available
6/30/2004	140,894	129,299	11,595
6/30/2005	62,098		62,098
6/30/2006	98,395		98,395
6/30/2007	104,035		104,035
6/30/2008	221,065		221,065
6/30/2009	694,223		694,223
6/30/2010	258,011		258,011
6/30/2011	0		0
6/30/2012	0		0
6/30/2013	523,247		523,247
6/30/2014	1,584,687		1,584,687
6/30/2015	1,554,977		1,554,977
6/30/2016	1,504,877		1,504,877
6/30/2017	357,608		357,608
Net Operating Loss Available			6,974,818
Taxable Income	~,~		(1,266,968)
Net Operating Loss Deduction (Limited	0		