

EXTENDED TO NOVEMBER 16, 2020
Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No 1545-0047

2019

For calendar year 2019 or other tax year beginning _____, and ending _____

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).

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

Department of the Treasury
Internal Revenue Service

A Check box if address changed

B Exempt under section
 501(c)(3) **03**
 408(e) 220(e)
 408A 530(a)
 529(a)

C Book value of all assets at end of year: **172,937,584.**

D Employer identification number (Employees' trust, see instructions): **91-1917506**

E Unrelated business activity code (See instructions): **523000**

Name of organization (Check box if name changed and see instructions.): **VINIK FAMILY FOUNDATION**

Number, street, and room or suite no. If a P.O. box, see instructions: **401 E JACKSON STREET, SUITE 2525**

City or town, state or province, country, and ZIP or foreign postal code: **TAMPA, FL 33602**

F Group exemption number (See instructions.)

G Check organization type: 501(c) corporation 501(c) trust 401(a) trust Other trust

H Enter the number of the organization's unrelated trades or businesses: **1** Describe the only (or first) unrelated trade or business here: **INVESTMENTS FROM PARTNERSHIPS**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation.

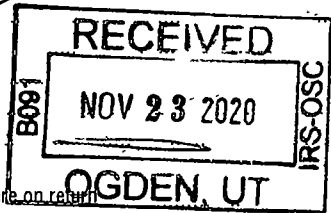
J The books are in care of: **JEFFREY N. VINIK** Telephone number: **813-229-0420**

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			
2 Cost of goods sold (Schedule A, line 7)			
3 Gross profit. Subtract line 2 from line 1c			
3			
4a Capital gain net income (attach Schedule D)			
4b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
4c			
4c	-3,000.		-3,000.
5 Income (loss) from a partnership or an S corporation (attach statement)			
5	563.		563.
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			
12 Other income (See instructions; attach schedule)			
12			
13 Total. Combine lines 3 through 12	-2,437.		-2,437.

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	563.
19 Taxes and licenses	19	
20 Depreciation (attach Form 4562)	20	
21 Less depreciation claimed on Schedule A and elsewhere on return	21a	
21b		
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	3,058.
28 Total deductions. Add lines 14 through 27	28	3,621.
29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-6,058.
30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	30	0.
31 Unrelated business taxable income. Subtract line 30 from line 29	31	-6,058.



SEE STATEMENT 18

SEE STATEMENT 19

SEE STATEMENT 20

SCANNED AUG 25 2021

Part I

9-15

2939305805001

Part III Total Unrelated Business Taxable Income

Table with 2 columns: Description and Amount. Rows include: 32 Total of unrelated business taxable income... -6,058.; 33 Amounts paid for disallowed fringes; 34 Charitable contributions... 0.; 35 Total unrelated business taxable income before pre-2018 NOLs... -6,058.; 36 Deduction for net operating loss...; 37 Total of unrelated business taxable income before specific deduction... -6,058.; 38 Specific deduction... 1,000.; 39 Unrelated business taxable income... -6,058.

Part IV Tax Computation

Table with 2 columns: Description and Amount. Rows include: 40 Organizations Taxable as Corporations; 41 Trusts Taxable at Trust Rates... 0.; 42 Proxy tax; 43 Alternative minimum tax; 44 Tax on Noncompliant Facility Income; 45 Total... 0.

Part V Tax and Payments

Table with 2 columns: Description and Amount. Rows include: 46a Foreign tax credit; 46b Other credits; 46c General business credit; 46d Credit for prior year minimum tax; 47 Total credits... 0.; 48 Other taxes; 49 Total tax... 0.; 50 2019 net 965 tax liability... 0.; 51a Payments: A 2018 overpayment... 10,000.; 51b 2019 estimated tax payments; 51c Tax deposited with Form 8868; 51d Foreign organizations; 51e Backup withholding; 51f Credit for small employer health insurance; 51g Other credits, adjustments, and payments; 52 Total payments... 10,000.; 53 Estimated tax penalty; 54 Tax due; 55 Overpayment... 10,000.; 56 Enter the amount of line 55 you want: Credited to 2020 estimated tax 10,000. Refunded 0.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 2 columns: Question and Yes/No. Rows include: 57 At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account... X; 58 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? X; 59 Enter the amount of tax-exempt interest received or accrued during the tax year \$

Sign Here: Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature of officer: [Signature] Date: 11/15/2020 Title: TRUSTEE

Paid Preparer Use Only: Print/Type preparer's name: ALAN B. HILL; Preparer's signature: [Signature]; Date: 11/9/20; Check self-employed: [] PTIN: P01550188; Firm's name: DELOITTE TAX; Firm's EIN: 86-1065772; Firm's address: 201 N. FRANKLIN STREET, STE. 3600 TAMPA, FL 33602; Phone no.: 813-273-8300

Schedule A - Cost of Goods Sold. Enter method of inventory 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. Subtract line 6 from line 5. Enter here and in Part I, line 2	7			
3 Cost of labor	3						
4a Additional section 263A costs (attach schedule)	4a						
b Other costs (attach schedule)	4b		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?			Yes	No
5 Total. Add lines 1 through 4b	5						

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1)	
(2)	
(3)	
(4)	

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)

(b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B) 0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			0.	0.
Total dividends-received deductions included in column 8				0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
Totals			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)

0. 0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
Totals		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)

0. 0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. 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	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 25

0. 0. 0.

Schedule J - Advertising Income (see instructions)

Part I - Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

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)

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 (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	0. <small>Enter here and on page 1, Part I, line 11, col (A)</small>	0. <small>Enter here and on page 1, Part I, line 11, col (B)</small>				0. <small>Enter here and on page 1, Part II, line 26</small>

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

**SCHEDULE D
(Form 1041)**

Capital Gains and Losses

OMB No. 1545-0092

- ▶ Attach to Form 1041, Form 5227, or Form 990-T.
- ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.
- ▶ Go to www.irs.gov/F1041 for instructions and the latest information.

2019

Department of the Treasury
Internal Revenue Service

Name of estate or trust

Employer identification number

VINIK FAMILY FOUNDATION

91-1917506

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

Yes No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

Note: Form 5227 filers need to complete only Parts I and II.

Part I Short-Term Capital Gains and Losses-Generally Assets Held One Year or Less (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 gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1 a 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				
1 b 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 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2018 Capital Loss Carryover Worksheet				6 ()
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on page 2				7

Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than One Year (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 gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8 a 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				
8 b 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				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts				12
13 Capital gain distributions				13
14 Gain from Form 4797, Part I				14
15 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2018 Capital Loss Carryover Worksheet				15 (211,432.)
16 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on line 18a, column (3) on page 2				16 -211,432.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2019

Part III Summary of Parts I and II

	(1) Beneficiaries'	(2) Estate's or trust's	(3) Total
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Caution: Read the instructions before completing this part

17 Net short-term gain or (loss)	17		
18 Net long-term gain or (loss):			
a Total for year	18a	-211,432.	-211,432.
b Unrecaptured section 1250 gain (see line 18 of the worksheet)	18b		
c 28% rate gain	18c		
19 Total net gain or (loss). Combine lines 17 and 18	19	-211,432.	-211,432.

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 18a and 19, column (2), are net gains, go to Part V, and don't complete Part IV If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary

Part IV Capital Loss Limitation

20 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of:			
a The loss on line 19, column (3) or b \$3,000	20	(3,000.)	

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 23 (or Form 990-T, line 39), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover

Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 23, is more than zero.

Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if

- Either line 18b, col (2) or line 18c, col (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero

Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 39, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero.

21 Enter taxable income from Form 1041, line 23 (or Form 990-T, line 39)	21			
22 Enter the smaller of line 18a or 19 in column (2) but not less than zero	22			
23 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	23			
24 Add lines 22 and 23	24			
25 If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0-	25			
26 Subtract line 25 from line 24. If zero or less, enter -0-	26			
27 Subtract line 26 from line 21. If zero or less, enter -0-	27			
28 Enter the smaller of the amount on line 21 or \$2,650	28			
29 Enter the smaller of the amount on line 27 or line 28	29			
30 Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0%			30	
31 Enter the smaller of line 21 or line 26	31			
32 Subtract line 30 from line 26	32			
33 Enter the smaller of line 21 or \$12,950	33			
34 Add lines 27 and 30	34			
35 Subtract line 34 from line 33. If zero or less, enter -0-	35			
36 Enter the smaller of line 32 or line 35	36			
37 Multiply line 36 by 15% (0.15)			37	
38 Enter the amount from line 31	38			
39 Add lines 30 and 36	39			
40 Subtract line 39 from line 38. If zero or less, enter -0-	40			
41 Multiply line 40 by 20% (0.20)			41	
42 Figure the tax on the amount on line 27. Use the 2019 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	42			
43 Add lines 37, 41, and 42	43			
44 Figure the tax on the amount on line 21. Use the 2019 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	44			
45 Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, Part I, line 1a (or Form 990-T, line 41)			45	

**SCHEDULE I
(Form 1041)**

Department of the Treasury
Internal Revenue Service

Alternative Minimum Tax - Estates and Trusts

▶ Attach to Form 1041.
▶ Go to www.irs.gov/Form1041 for instructions and the latest information.

OMB No 1545-0092

2019

Name of estate or trust VINIK FAMILY FOUNDATION	Employer identification number 91-1917506
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Part I | Estate's or Trust's Share of Alternative Minimum Taxable Income

1	Adjusted total income or (loss) (from Form 1041, line 17). ESBTs, see instructions	1	-6,058.
2	Interest	2	
3	Taxes	3	
4	Refund of taxes	4	()
5	Depletion (difference between regular tax and AMT)	5	
6	Net operating loss deduction. Enter as a positive amount	6	SEE STATEMENT 23
7	Interest from specified private activity bonds exempt from the regular tax	7	
8	Qualified small business stock (see instructions)	8	
9	Exercise of incentive stock options (excess of AMT income over regular tax income)	9	
10	Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	10	
11	Disposition of property (difference between AMT and regular tax gain or loss)	11	
12	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	12	
13	Passive activities (difference between AMT and regular tax income or loss)	13	
14	Loss limitations (difference between AMT and regular tax income or loss)	14	
15	Circulation costs (difference between regular tax and AMT)	15	
16	Long-term contracts (difference between AMT and regular tax income)	16	
17	Mining costs (difference between regular tax and AMT)	17	
18	Research and experimental costs (difference between regular tax and AMT)	18	
19	Income from certain installment sales before January 1, 1987	19	()
20	Intangible drilling costs preference	20	
21	Other adjustments, including income-based related adjustments	21	
22	Alternative tax net operating loss deduction (See the instructions for the limitation that applies.)	22	()
23	Adjusted alternative minimum taxable income. Combine lines 1 through 22	23	-6,058.
Note: Complete Part II below before going to line 24.			
24	Income distribution deduction from Part II, line 42	24	N/A
25	Estate tax deduction (from Form 1041, line 19)	25	N/A
26	Add lines 24 and 25	26	
27	Estate's or trust's share of alternative minimum taxable income. Subtract line 26 from line 23	27	-6,058.

- If line 27 is
- \$25,000 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c. The estate or trust isn't liable for the alternative minimum tax.
 - Over \$25,000, but less than \$183,500, go to line 43.
 - \$183,500 or more, enter the amount from line 27 on line 49 and go to line 50.
 - ESBTs, see instructions

Part II | Income Distribution Deduction on a Minimum Tax Basis

N/A

28	Adjusted alternative minimum taxable income (see instructions)	28	
29	Adjusted tax-exempt interest (other than amounts included on line 7)	29	
30	Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-	30	
31	Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes (from Form 1041, Schedule A, line 4)	31	
32	Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)	32	
33	Capital gains computed on a minimum tax basis included on line 23	33	()
34	Capital losses computed on a minimum tax basis included on line 23. Enter as a positive amount	34	
35	Distributable net alternative minimum taxable income (DNAMTI). Combine lines 28 through 34. If zero or less, enter -0-	35	
36	Income required to be distributed currently (from Form 1041, Schedule B, line 9)	36	
37	Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)	37	
38	Total distributions. Add lines 36 and 37	38	
39	Tax-exempt income included on line 38 (other than amounts included on line 7)	39	
40	Tentative income distribution deduction on a minimum tax basis. Subtract line 39 from line 38	40	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule I (Form 1041) (2019)

Part II Income Distribution Deduction on a Minimum Tax Basis (continued)

N/A

41 Tentative income distribution deduction on a minimum tax basis. Subtract line 29 from line 35. If zero or less, enter -0-		41	
42 Income distribution deduction on a minimum tax basis. Enter the smaller of line 40 or line 41. Enter here and on line 24		42	

Part III Alternative Minimum Tax

43 Exemption amount		43	\$25,000
44 Enter the amount from line 27	44		
45 Phase-out of exemption amount	45	\$83,500	
46 Subtract line 45 from line 44. If zero or less, enter -0-	46		
47 Multiply line 46 by 25% (0.25)		47	
48 Subtract line 47 from line 43. If zero or less, enter -0-		48	
49 Subtract line 48 from line 44		49	
50 Go to Part IV of Schedule I to figure line 50 if the estate or trust has qualified dividends or has a gain on lines 18a and 19 of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary). Otherwise, if line 49 is: • \$194,800 or less, multiply line 49 by 26% (0.26). • Over \$194,800, multiply line 49 by 28% (0.28) and subtract \$3,896 from the result		50	
51 Alternative minimum foreign tax credit (see instructions)		51	
52 Tentative minimum tax. Subtract line 51 from line 50		52	
53 Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedule G, line 2a)		53	
54 Alternative minimum tax. Subtract line 53 from line 52. If zero or less, enter -0-. Enter here and on Form 1041, Schedule G, line 1c		54	

Part IV Line 50 Computation Using Maximum Capital Gains Rates

Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D Tax Worksheet, or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the instructions before completing this part

55 Enter the amount from line 49		55	
56 Enter the amount from line 26 of Schedule D (Form 1041), line 13 of the Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as refigured for the AMT, if necessary)	56		
57 Enter the amount from Schedule D (Form 1041), line 18b, column (2) (as refigured for the AMT, if necessary). If you didn't complete Schedule D for the regular tax or the AMT, enter -0-	57		
58 If you didn't complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 56. Otherwise, add lines 56 and 57 and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary)	58		
59 Enter the smaller of line 55 or line 58		59	
60 Subtract line 59 from line 55		60	
61 If line 60 is \$194,800 or less, multiply line 60 by 26% (0.26). Otherwise, multiply line 60 by 28% (0.28) and subtract \$3,896 from the result		61	
62 Maximum amount subject to the 0% rate	62	\$2,650	
63 Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 23; if zero or less, enter -0-	63		
64 Subtract line 63 from line 62. If zero or less, enter -0-	64		
65 Enter the smaller of line 55 or line 56	65		
66 Enter the smaller of line 64 or line 65. This amount is taxed at 0%	66		
67 Subtract line 66 from line 65	67		

Part IV Line 50 Computation Using Maximum Capital Gains Rates (continued)

68 Maximum amount subject to rates below 20%	68	\$12,950	
69 Enter the amount from line 64	69		
70 Enter the amount from line 27 of Schedule D (Form 1041), line 18 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 23, if zero or less, enter -0-	70		
71 Add line 69 and line 70	71		
72 Subtract line 71 from line 68. If zero or less, enter -0-	72		
73 Enter the smaller of line 67 or 72	73		
74 Multiply line 73 by 15% (0.15)			74
75 Add lines 66 and 73	75		
If lines 75 and 55 are the same, skip lines 76 through 80 and go to line 81. Otherwise, go to line 76.			
76 Subtract line 75 from line 65	76		
77 Multiply line 76 by 20% (0.20)			77
If line 57 is zero or blank, skip lines 78 through 80 and go to line 81. Otherwise, go to line 78.			
78 Add lines 60, 75, and 76	78		
79 Subtract line 78 from line 55	79		
80 Multiply line 79 by 25% (0.25)			80
81 Add lines 61, 74, 77, and 80			81
82 If line 55 is \$194,800 or less, multiply line 55 by 26% (0.26). Otherwise, multiply line 55 by 28% (0.28) and subtract \$3,896 from the result			82
83 Enter the smaller of line 81 or line 82 here and on line 50			83

FORM 990-T	INTEREST PAID	STATEMENT 18
DESCRIPTION		AMOUNT
INVESTMENT INTEREST EXPENSE		563.
TOTAL TO FORM 990-T, PAGE 1, LINE 18		563.

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 19
DESCRIPTION		AMOUNT
TAX PREPARATION FEES		3,058.
TOTAL TO FORM 990-T, PAGE 1, LINE 27		3,058.

FORM 990-T	NET OPERATING LOSS DEDUCTION			STATEMENT 20
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	4,156.	0.	4,156.	4,156.
NOL CARRYOVER AVAILABLE THIS YEAR			4,156.	4,156.

FORM 990-T	CONTRIBUTIONS		STATEMENT 21
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV		AMOUNT
CASH DONATIONS	N/A		11,576,013.
CHARITABLE DEDUCTIONS FROM SCHEDULE K-1S	N/A		23,108.
TOTAL TO FORM 990-T, PAGE 2, LINE 34			11,599,121.

FORM 990-T

CONTRIBUTIONS SUMMARY

STATEMENT 22

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS - 60% LIMIT

FOR TAX YEAR 2018

TOTAL CARRYOVER

TOTAL CURRENT YEAR 60% CONTRIBUTIONS

TOTAL CONTRIBUTIONS AVAILABLE

TAXABLE INCOME LIMITATION AS ADJUSTED 0

EXCESS 60% CONTRIBUTIONS 0

TOTAL EXCESS CONTRIBUTIONS 0

ALLOWABLE CONTRIBUTIONS DEDUCTION 0

TAXABLE INCOME FOR LIMITATION AFTER 60% CONTRIBUTIONS

-10,214

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS - 50% LIMIT

FOR TAX YEAR 2014

FOR TAX YEAR 2015

FOR TAX YEAR 2016

FOR TAX YEAR 2017

FOR TAX YEAR 2018

9,801,749

TOTAL CARRYOVER

9,801,749

TOTAL CURRENT YEAR 50% CONTRIBUTIONS

11,599,121

TOTAL CONTRIBUTIONS AVAILABLE

21,400,870

TAXABLE INCOME LIMITATION AS ADJUSTED

0

EXCESS 50% CONTRIBUTIONS

21,400,870

TOTAL EXCESS CONTRIBUTIONS

21,400,870

ALLOWABLE CONTRIBUTIONS DEDUCTION 0

TOTAL CONTRIBUTION DEDUCTION 0

SCHEDULE I		NET OPERATING LOSS CARRYOVER		STATEMENT 23
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	AMOUNT	
12/31/18	4,156.	0.	4,156.	
TOTAL TO SCHEDULE I, LINE 6			4,156.	

SCHEDULE D	CAPITAL LOSS CARRYOVER WORKSHEET	STATEMENT 24
1. ENTER THE AMOUNT FROM FORM 990-T, LINE 39		-6,058
2. ENTER THE LOSS FROM SCHEDULE D, LINE 20, AS A POSITIVE AMT . .		3,000
3. COMBINE LINES 1 AND 2. IF ZERO OR LESS, ENTER -0-		0
4. ENTER THE SMALLER OF LINE 2 OR LINE 3		0
NOTE: IF LINE 7 OF SCHEDULE D IS A LOSS, GO TO LINE 5; OTHERWISE, ENTER -0- ON LINE 5 AND GO TO LINE 9.		
5. ENTER THE LOSS FROM SCH D, LINE 7, AS A POSITIVE AMOUNT . . .		0
6. ENTER ANY GAIN FROM SCHEDULE D, LINE 16	0	
7. ADD LINES 4 AND 6		0
8. SHORT-TERM CAPITAL LOSS CARRYOVER TO 2020 . SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0-		0
NOTE: IF LINE 16 OF SCHEDULE D IS A LOSS, GO TO LINE 9; OTHERWISE, SKIP LINES 9 THROUGH 13.		
9. ENTER THE LOSS FROM SCHEDULE D, LINE 16, AS A POSITIVE AMT . .		211,432
10. ENTER ANY GAIN FROM SCHEDULE D, LINE 7	0	
11. SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0-	0	
12. ADD LINES 10 AND 11		0
13. LONG-TERM CAPITAL LOSS CARRYOVER TO 2020 . SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0-		211,432