OMB No. 1545-0687

2018

Exempt Organization Business Income Tax Return

► Go to www.irs.gov/Form990T for instructions and the latest information. 1906

(and proxy tax under section 6033(e))

For calendar year 2018 or other tax year beginning $\frac{7/01}{}$, 2018, and ending $\frac{6}{30}$

Form 990-T

ť		1					
Form	999	T (2018) COLBURN MUSIC FUN	D		95	-4804766	Page 2
Par	t III	Total Unrelated Business Tax					
		l of unrelated business taxable income	computed from all unrelated trades	or businesses (se	e	1	
		uctions)			ι		<u>-213,300.</u>
		ounts paid for disallowed fringes	to the second se	1 2018 /		34	
33		uction for net operating loss arising in tuctions)		1,2018 (SEE EE STATEMENT	2	35	
36		l of unrelated business taxable income		, .		 	
		nes 33 and 34				36	<u>-213,300.</u>
37	Spec	cific deduction (Generally \$1,000, but s	ee line 37 instructions for exception	ns)		37	
38		elated business taxable income. Subtra	act line 37 from line 36. If line 37 is	greater than line 3	16, II (5)	1	212 200
_		r the smaller of zero or line 36			1100	38-	-213,300.
		Tax Computation	20. 010/ (0.01)			T20 T	
		anizations Taxable as Corporations. M	· ·	v an tha amaunt		39	0.
40		ts Taxable at Trust Rates. See instruct		ax on the amount		40	
41		ne 38 from: Tax rate schedule o	r Schedule D (Form 1041)			41	
		ry tax. See instructions realized minimum tax (trusts only)			-	42	
		on Noncompliant Facility Income. See	instructions			43	
		I. Add lines 41, 42, and 43 to line 39 o				44	0.
Par		Tax and Payments	Witte, Willellevel applies			1	
		ign tax credit (corporations attach Forn	n 1118: truste attach Form 1116)	45a		 	
		er credits (see instructions)	ir rifo, irusis attacti i oitii 1110)	45b		1 1	
		eral business credit Attach Form 3800	(see instructions)	45 c	 -	1	
		it for prior year minimum tax (attach Fo	,	45 d		1 1	
		I credits. Add lines 45a through 45d	•	<u> </u>		45 e	0.
46	Subt	ract line 45e from line 44				46	0.
47	Othe	r taxes Check if from Form 4255	Form 8611 Form 8697 For	m 8866			
	\Box	Other (attach schedule).				47	
		I tax. Add lines 46 and 47 (see instruct	•			48	0.
49	2018	net 965 tax liability paid from Form 96	55-A or Form 965-B, Part II, column	(k), line 2		49	
50 a	Payn	nents A 2017 overpayment credited to	2018	50 a			
		estimated tax payments		50 b	·•		
		deposited with Form 8868		50 c]	
		ign organizations. Tax paid or withheld	at source (see instructions)	50 d			
		sup withholding (see instructions)	() (5 0041)	50 e			
		it for small employer health insurance		50 f			
g	_	r credits, adjustments, and payments Form 4136	Form 2439 ner Total	50.5			
- 1			ler Total	► 50 g		51	•
		1 payments. Add lines 50a through 50g	neals of Form 2220 is ottoched		► [X]	52	0.
		mated tax penalty (see instructions) Ch due. If line 51 is less than the total of li		ywod	· 🖺	53	
53						54	
54		payment. If line 51 is larger than the to		mount overpaid	Dofundad >	55	
55 Dow		r the amount of line 54 you want Cred		antion (assert	Refunded >	55	
		Statements Regarding Certain					IV. IN-
56		ty time during the 2018 calendar year, did	5	•	•		Yes No
		icial account (bank, securities, or other) in a	-	=	o nie Pincer	r FORM 114,	
		rt of Foreign Bank and Financial Accounts			*		- X
57		ng the tax year, did the organization red		ne grantor of, or tra	ansteror to,	a toreign trust?	' X
		s, see instructions for other forms the org	-		_		
58	Enter	the amount of tax-exempt interest received.		S hedules and statements	0.	of my knowledge and	
Sign		Under penalties of perjury, I declare that I have exbellef, it is the, correct, and complete Declaration	n of preparer (other than taxpayer) is based on	all information of which p	preparer has any		
Here		James Kinkers	11/20	TREASURER		May the IRS discus the preparer shown	s this return with below (see
2.2.6		Signature of officer	Date	Title		instructions)?	Yes No
_		Print/Type preparer's name	Preparer's signature	Date	Check I if	PTIN	<u>. </u>
Paid			SELF-PREPARED		self-employed		
Pre-		Firm's name	DUDI TIME AIMED		Firm's EIN	L	
pare Use		Firm's address			, ,, 3 EllY		
Only					Phone no		
BAA			TEEA0202L 01/24/19		1. 10000 110	Form	990-T (2018)
			ILLAUZUZE UNZAITS			, 0111	130 . (2010)

TOTAL SOUTH (2010) COMBOINT	MOSIC TOND				7007700			
Schedule A - Cost of Goo	ds Sold. Enter method of inv	entory valuation 🕨						
1 Inventory at beginning of ye	6 Invento	ry at e	end of year	6				
2 Purchases	hases 2			7 Cost of goods sold. Subtract				
3 Cost of labor	line 6 f		ne 5 Enter here	7				
4 a Additional section 263A costs (attack		anum	raiti,	line 2		Yes No		
b Other costs	4 a		rules	of section 263A (with	respect to			
(attach sch) 5 Total. Add lines 1 through 48	4 b 5	propert to the c		oduced or acquired for resale) apply				
Schedule C - Rent Income					operty) (see in			
1 Description of property	, (, , , , , , , , , , , , , , , , , ,				-1			
(1)								
(2)								
(3)								
(4)								
	2 Rent received or accrued							
(a) From personal prop	erty (b) From r	eal and personal property			ctions directly connected with			
(If the percentage of rent for property is more than 10% more than 50%)	but not property ex	entage of rent for personaticeeds 50% or if the rent if d on profit or income)	al S	the income in columns 2(a) and 2(b) (attach schedule)				
(1)					_			
(2)								
(3)								
(4)								
Total	Total							
(c) Total income. Add totals of col here and on page 1, Part I, line 6,				(b) Total deductions. Er here and on page 1, Part 1, line 6, column (B)	iter ►			
Schedule E - Unrelated De	bt-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 debt-financed property				
				(a) Straight line eciation (attach sch)	(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 ortable (column 2 x column 6)	8 Allocable d (column 6 columns 3(a)	k total of		
(1)		90						
(2)		%						
(3)		%						
(4)		%						
			Enter Part	here and on page 1, 1, line 7, column (A)	Enter here and Part I, line 7,	l on page 1, column (B)		
Totals		▶						
Total dividends-received deduction	ons included in column 8			·				
BAA	TE	EA0203L 01/30/19			Form 9	990-T (2018)		

		,			trolled O		izations	or gui		(300 111		·/ ·
1 Name of controlled organization	ıde	Employer entification number		3 Net unrelated income (loss) (see instructions)		4	4 Total of specified payments made				d in connected with income in column	
(1)												
. (2)						T						
(3)						Т						
(4)						T						
Nonexempt Controlled Organiza	ations											
7 Taxable Income 8 Ne				nents made included		included ii	f column 9 that is in the controlling on's gross income			11 Deductions directly connected with income in column 10		
(1)			\top	_	•		 ·			1	-	
(2)			+			┪				1	_	
(3)			+							+-		
(4)			+			_			-	+		
					-		Add columns here and on p 8, co		, Part I, line		e and on p	s 6 and 11 Enter page 1, Part I, line lumn (B)
Totals									<u> </u>			
Schedule G - Investmen	t Inco	me of a Se	ctio	n 501(ns)	···
1 Description of income		2 Amount of Income		3 Deductions directly connected (attach schedule)		4 Set-asides (attach schedule)			e) 5 Total deduction set-asides (column plus column			
(1)							· 					
(2)												
(3)												
(4)						•						
Totals	•	Enter here an Part I, line 9,	d on p colui	nn (A)							Enter he Part I, I	re and on page 1 ine 9, column (B)
Schedule I – Exploited Ex	VAM F	t Activity Is	2000	20 04	or The	- A	dvorticina	ncor	20 (222 :22			
Schedule I – Exploited E.	xemp	2 Gross									_	T
1 Description of exploited ad	ctivity	unrelate busines income fr trade o busines	ed s om r	conne prod of u	ses directly ected with duction nrelated ess income	fror or b 2 m	let income (loss) n unrelated trade pusiness (column ninus column 3) a gain, compute imns 5 through 7	activi unrela	s income from ty that is not ited business income	attribu	penses utable to umn 5	7 Excess exempt expenses (column 6 minus column 5, bu not more than column 4)
(1)		 			-							
(2)		 										
(3)		+				-						
(4)		 										
Totals		Enter here on page Part I, line column (age 1, on p line 10, Part l		ter here and on page 1, art I, line 10, olumn (B)				ų. I	1,		Enter here and on page 1, Part II, line 26.
Schedule J – Advertising	ı İnco	me (see inch	ructio	nc)		Ц						<u> </u>
					1:-l-	نہ مہ	Pasia					
Part I Income From Per	loaic	2 Gross				_						1
1 Name of periodical		advertisii		adve	Direct ertising osts	(lo	dvertising gain or iss) (col 2 minus ol 3) If a gain, compute cols 5 through 7		rculation ncome		idership osts	7 Excess readership costs (col 6 minus col 5, but not more than col. 4)
(1)						Ι						
(2)						1						1
(3)						1						1
(4)		 				<u> </u>						
Totals (carry to Part II, line (5))	1	-					د .					

Page 5

COMPOST HODE					30 1001.00	
Part II Income From Periodic 7 on a line-by-line basis)	als Reported or	n a Separate I	Basis (For each p	eriodical listed in	Part II, fill in co	lumns 2 through
1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols. 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (col 6 minus col 5, but not more than col 4)
(1)						
(2) (3) (4)						
(3)						-
(4)						<u></u>
Totals from Part I	•					
	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B)				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)	•		-			
Schedule K - Compensation of	f Officers, Dire	ctors, and Tru	ustees (see instri	uctions)		·
1 Name			2 Title	3 Percent o time devote to business	d to unrela	ation attributable ated business
					%	
					%	
					8	
					%	
Total. Enter here and on page 1, Part	II, line 14	-		-	P	
BAA		TEEA0204 L _	12/31/18		F	orm 990-T (2018)

2018

FEDERAL STATEMENTS

PAGE 1

COLBURN MUSIC FUND

95-4804766

STATEMENT 1 FORM 990-T, PART I, LINE 5 INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS

NAME	GROSS INCOME	<u>DEDUCTIONS</u>	INCOME (LOSS)
ANGELES GLOBAL EQUITY OPPORTUNITY LP ANGELES PRIVATE MARKET FUND LP ANGELES PRIVATE MARKET FUND 2 LP CONTRARIAN DISTRESSED REAL ESTATE DUNE REAL ESTATE FUND III LP HARVEST MLP INCOME FUND LLC KAYNE ANDERSON ENERGY FUND V OCH-ZIFF REAL ESTATE FUND II PATHWAY PRIVATE EQUITY FUND 2008	\$ -5,143. -248,649. -14,692. -1,562. -22,825. 128,847. -161,181. 86,802. 25,103.	\$ 0. \$ 0. 0. 0. 0. 0. 0. 0. 0. TOTAL \$\overline{5}\$	-5,143248,64914,6921,56222,825. 128,847161,181. 86,802. 25,103213,300.

STATEMENT 2 FORM 990-T, PART III, LINE 35 NET OPERATING LOSS DEDUCTION

LOSS YEAR ENDING	0	RIGINAL LOSS	LOSS PREVIOUSLY USED	<u> </u>	LOSS AVAILABLE		
6/30/16 6/30/17 6/30/18	\$	231,930. 386,489. 241,572.	\$	0. \$ 0. 0.	231,930. 386,489. 241,572.		
NET OPERATING LOSS TAXABLE INCOME NET OPERATING LOSS		(LIMITED TO T	'AXABLE INCOME)		\$ 859,991. \$ -213,300. \$ 0.		