ع. ° ده	EXTENDED TO NOVEMBER 15, 2019	_
Form 990-T	Exempt Organization Business Income Tax Return	OMB No. 1545-0687
	(and proxy tax under section 6033(e))	0040
-	For calendar year 2018 or other tax year beginning, and ending	_ 2018
Department of the Treasury	Go to www.irs.gov/Form990T for Instructions and the latest Information.	TIMES IN LABOR DEPARTMENT OF
Internal 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 to 50 1(c)(3) Organizations Only
A Check box if	Mairie di diganzation (L. Check box il hame changes and see insulscions.) -	Employer Identification number (Employees' trust, see
address changed	<u> </u>	instructions.)
B Exempt under section	Print WAYNE COUNTY INDIANA FOUNDATION, INC.	35-1406033
X 501(c (23_)	Type Number, street, and room or suite no. If a P.O. box, see instructions.	(See instructions.)
408(e) 220(e)		
408A530(a) 529(a)		22100
at end of year 39, 099, 0	F Group exemption number (See instructions.) O 3 . G Check organization type X 501(c) corporation 501(c) trust 401(a) to	rust Other trust
	organization's unrelated trades or businesses. 1 Describe the only (or first) unre	
	► SEE STATEMENT 1 . If only one, complete Parts I-V. If	
	blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional	· · · · · · · · · · · · · · · · · · ·
business, then complete	·	
I During the tax year, was	s the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?	Yes X No
If "Yes," enter the name a	and identifying number of the parent corporation.	
	f ► STEPHEN C. BORCHERS Telephone number ► 76	
	d Trade or Business Income (A) Income (B) Expenses	(C) Net
1 a Gross receipts or sale		
b Less returns and allow		1
2 Cost of goods sold (S	Schedule A, line 7) 2 thine 2 from line 1c 3	and the same of th
3 Gross profit. Subtract	t line 2 from line 1c 3	
4 a Capital gain net incon	me (attach Schedule D) 4a 347.	*·
	14/5/, Fait ii, line 1/) (attacil 10/11/4/5/)	
c Capital loss deduction	in for trusts 4c 4c 3rd	41,633.
		41,033
	200 0/	
		
	oyalties, and rents from a controlled organization (Schedule F) 8 If a section 501(c)(7), (9), or (17) organization (Schedule G) 9	
	tivity income (Schedule I) 10	-
	Schedule J) 11	
12 Other income (See in:	nstructions; attach schedule) 12	-
	s 3 through 12	41,980.
Part II Deduction	ons 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 off	fficers, directors, and trustees (Schedule K)	14
		15
16 Repairs and mainter	nance	16
		17
	edule) (see instructions)	18
19 Taxes and licenses		19
20 Charitable contributi	tions (See instructions to Diffination rules). h Form 4562) laimed on Schedule A and elsewhere on return	20
21 Depreofation (attach	Form 4562) 21 21 22 21 22 22 22 22 22 22 22 22 22	F7.
22 Less depreciation cl	laimed on Schedule A and eisewhere on return	22b
23 Depletion	ferred compensation plans NOV 1-9-2019	23
24 Contributions to def	rerred compensation plans p	24 25
25 Employee benefit pr	rograms	26
26 Excess exempt expe 27 Excess readership c	enses (Schedule I) OGDEN, UT	27
28 Other deductions (at	attach schedule) SEE STATEMENT 2	28 7,102.
29 Total deductions (a	Add lines 14 through 28	29 7,102.
30 Unrelated business	taxable income before net operating loss deduction. Subtract line 29 from line 13	30 34,878
	perating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	31
32 Unrēlated business	taxable income. Subtract line 31 from line 30	32 34,878
(0, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Car Denominate Deduction Act Nation one instructions	Form QQO_T (2018

56 2018.05000 WAYNE COUNTY INDIANA FOUNDA 20115_01

Form 990-1			35-140	06033	Page 2
<u>Rart I</u>	Total Unrelated Business Taxable Income				
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (se				34,878.
34	Amounts paid for disallowed fringes			34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instru		STMT 3	35	5,346.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the su			1	20 522
	lines 33 and 34	•••••	••••••••••••	36	29,532.
	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)			37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 3			1	00 530
lpastr	enter the smaller of zero or line 36			38	28,532.
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)			I an I	5,992.
	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount of			39	3,992.
70	Tax rate schedule or Schedule D (Form 1041)				
41	Proxy tax. See Instructions	•••••	T	40	
				42	_
43	Alternative minimum tax (trusts only) Tax on Noncompliant Facility Income. See instructions		••••••		
44	Total Add lines 41, 42, and 43 to line 39 or 40, whichever applies	•••••	••••••	44	5,992.
(Darty)	Tax and Payments	********		111	3,334.
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a		1800.00	
	Other credits (see instructions)				
	General business credit. Attach Form 3800	45c	- .		
ď	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d			
-	Total credits. Add lines 45a through 45d	,,,,,		450	
48	Subtract line 45e from line 44	•••••		46	5,992.
47	Subtract line 45e from line 44	is 🗀	Other fattach schedule)	47	0,0021
48	Total tax. Add lines 46 and 47 (see instructions)	~	02101 (21221 221022)	48	5,992.
	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2			40	0.
	Payments: A 2017 overpayment credited to 2018			V ST	
	2018 estimated tax payments	50b			
6	Tax deposited with Form 8868	50c	•	[[]	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d			
	Backup withholding (see instructions)	50e			
f	Credit for small employer health insurance premiums (attach Form 8941)	50f			
	Other credits, adjustments, and payments: Torm 2439				
	☐ Form 4136 ☐ Other ☐ Total ▶	50g			
51	Total payments. Add lines 50a through 50g			51	
52	F-MA-Man 1			52	253.
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed		>	53	6,245.
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid \dots		, \	54	
	Enter the amount of line 54 you want: Credited to 2019 estimated tax	_	Refunded >	55	
<u>Rart\v</u>	I- Statements Regarding Certain Activities and Other Information)N (see	instructions)		
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature o	or other a	authority		Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization	-			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the f	loreign c	ountry		
	here >				<u> </u>
	During the tax year, did the organization receive a distribution from, or was it the grantor of, or tra	nsferor t	to, a foreign trust?		Х
	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 > \$				\hat{\chi} \chi \chi \chi \chi \chi \chi \chi \chi
Cian	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and st correct, and climplets Contestion of preparer (other than texpeyer) is based on all information of which prepare	istements. Ir has any	, and to the best of my kno knowledge.	wiedge and be	ellef, it is true,
Sign Here	IN MAS I I I I I I I I I I I I I I I I I I I		M	lay the IRS disc	cuse this return with
IICIO	EXECUTIVE PARTY OF THE PARTY OF	AR D		ne preparer sho	
	Signature of officer Date Title			structions)?	X Yes No
	Print/Type preparer's name Preparer's signature / / Date	8		if PTIN	
Paid	MDAGY A VATNES 17 AJL 11	/10/	self- employed	D00	E17E41
Prepa	Cimio name & DDADY WADD & CCHOPNERID THE	<u>/12/</u>			517541 1476702
Use O	nly Firm's name ▶ BRADY, WARE & SCHOENFELD, INC. ONE WOODSIDE DRIVE		Firm's EIN	35-	14/0/04
	Firm's address RICHMOND, IN 47374		Phone no. (7651	966-0531
823711 01-			TEHONE HO.		orm 990-T (2018)
0E3/ 11 U1	ve- : e			FC	жи өөч- I (2018)

Schedule A - Cost of Good	is Sold. Enter	method of inver	ntory valuation	► N/A				
1 Inventory at beginning of year			6 Inventory at end of year				6	
2 Purchases			7 Cost of goods sold. Subtract line 6					
3 Cost of labor			from line	5. Enter here a	and in I	Part I,		
4 a Additional section 263A costs			line 2				7	
(attach schedule)			8 Do the ru	les of section :	263A (1	with respect to		Yes No
b Other costs (attach schedule)	4b		property	produced or a	cquired	l for resale) apply to		
5 Total. Add lines 1 through 4b	5		the organ	ization?				
Schedule C - Rent Income (see instructions)	(From Real	Property an	d Personal	Property I	Leas	ed With Real Pro	perty)	
1. Description of property								
(1)	<u>-</u>							
(2)								
(3)	•							
(4)								
-	2. Rent receiv					9/s\Dadustians diseat		to the income in
rent for personal property is more than of rent for p			and personal propert personal property ex nt is based on profit	ceeds 50% or if	Çe .	3(a) Deductions directly columns 2(a) e	nd 2(b) (attach	chedule)
(1)								
(2)								
(3)								
(4)								
Total	0.	Total			0.			-
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, colum	s 2(a) and 2(b). Er In (A)	nter ▶			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>	0
Schedule E - Unrelated De			instructions)					
			2. Gross inc	ome from		3. Deductions directly cor to debt-finance	nected with or ced property	allocable
1. Description of debt-f	financed property		or allocable financed p		(2)	Straight line depreciation (attach schedule)	(b) o	ther deductions ach schedule)
(1)						· 	+	
(2)			1					
(3)			+					
(4)			1					
Amount of average acquisition debt on or allocable to debt-financed property (attach achedule)	of or a	a adjusted basis allocable to unced property h schedule)	6. Column 4 by colu			7. Gross income reportable (column 2 x column 6)	(column	ocable deductions 6 x total of columns 3(a) and 3(b))
(1)	†		 	%			1	
(2)			1	%			1	
(3)	1		1	%			1	
(4)	 		1	%	-			
	<u> </u>					inter here and on page 1, Part I, line 7, column (A).		re and on page 1, ine 7, column (B).
Totale						0	-	0
Totals Total dividends-received deductions i			····· ············ ··· ··	<u>- </u>			•	- 0

rom **990-1** (20 16)

		T		nd Rents From Controlled Organizations (see instructions) Exempt Controlled Organizations								
1. Name of controlled organiza	ation	2. Emp Identific numb	loyer etion er				ments made Incl		5. Part of column 4 that is included in the controlling organization's gross income		ing connected with income	
(1)	•			 								
(2)												
(3)							•				•	
(4)											_	
Nonexempt Controlled Organ	izations											
7. Taxable income		inrelated incom see instructions		9. Total	of specified pays made	ments	10. Part of colu in the controll grow	mn 9 the Ing orga s income	nization's	11. De with	ductions directly connect income in column 10	
(1)												
(2)												
(3)												
(4)												
							Add colur Enter here and line 6,		e 1, Part I,	Enter h	d columns 5 and 11, ere and on page 1, Part I line 8, column (8).	
Totals	• 		·····			▶			0.			
Schedule G - Investm							rganizatior	1				
1, Des	cription of inci	этте		•	2. Amount of	income	3. Deduction directly connection (attach schedule)	cted	4. Set-	asides ichedule)	5. Total deduction and set-asides (col. 3 plus col. 4	
(1)										_		
(2)												
(3)				_								
(4)							L					
Totals					Enter here and Part I, line 9, co	o .		19			Enter here and on page Part I, line 9, column (
Schedule I - Exploited (see instr	_	t Activity	Incom	ie, Othe	r Than Ac	ivertis	ing Income	9				
1. Description of explorted activity	2. (unrelated incon	Gross I business ne from business	directly with pr of un	penses connected roduction related us Income	4. Net incon from unrelated business (comminus colum gain, comput through	I trade or Numn 2 n 3), If a e cols 5	5. Gross Inco from activity is not unrela- business inco	that led	6. Exp attribut colur	able to	7. Excess exemple expenses (column 6 minus column 5, but not more than column 4).	
(1)				-	-							
(2)	T											
(3)												
(4)	1											
	page	re and on 1, Part I, , col. (A).	page	re and on 1, Part I, , col (B).		5 - 44 - 44 - 47					Enter here and on page 1, Part II, line 26.	
Schedule J - Advertis	ina Inac	0 .	oda jaši-	0.	1 34 5	<u> </u>	. e ef.~ .	٠.	اللهراء	27 %		
Part Income From					solidated	Basis	I					
1. Name of periodical		2. Gross advertising income	adv	3. Direct vertising costs:	or (loss) (c col. 3). If a g	tising geln ol, 2 minus aln, compu arough 7.			6. Readi		7. Excess readership costs (column 6 minu column 5, but not mor than column 4).	
(1)						L. Mari						
(2)					47 K A							
(3)												
(4)					1		-4				"是你	
Totals (carry to Part II, line (5))	▶).	0).						(
	-										Form 990-T (20	

%

Form 990-T (2018) WAYNE COUNTY INDIANA FOUNDATION, INC. 35-14060
| Rancill 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. Reedership costs	7. Excess readership costs (column 5 minus column 5, but not more than column 4).
(1)		-				
(2)						
(3)	-	_				
(4)		-				
Totals from Part I	0.	0.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0.
	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.
Totals, Part II (lines 1-5)	0.	0.				0.
Schedule K - Compensation	n of Officers,	Directors, an	d Trustees (see in	nstructions)		
1. Name	•		2. Titte	3. Perce time devo	ted to T. Comp	ensation attributable related business

0.

Form 990-T (2018)

(1) (2)

(3) (4)

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

	INCO	ME (LOSS) FROM I	PARTNERSHIPS	STATEMENT :
DESCRIPTION	ī			NET INCOME OR (LOSS)
	PRIVATE REAL ESTA	TE 2008 - ORDINA	ARY BUSINESS	
INCOME (LOS			TMOOME (TOGG)	176
	PRIVATE REAL ESTAPRIVATE 2007-08 -			8
(LOSS)	111111111111111111111111111111111111111	ONDIMENT BODING	·	3,336
SAVILE ROW	PRIVATE 2007-08 -			3
	PRIVATE 2007-08 -		3	14
	PRIVATE 2007-08 -			3.
	PRIVATE 2007-08 -			38
	ENERGY OPPORTUNIT	IES Q, LLC - ORI	DINARY BUSINESS	40 407
INCOME (LOS	ENERGY OPPORTUNIT	דעט ר ז.ז.כ – טעז	TNADY BUCTNECC	42,487
INCOME (LOS		IES Q, IEC - OKI	JIMARI BUBINBBB	-15,513
	SET SPECIAL SITUAT	IONS FUND S 2016	5-2 - INTEREST	13,313
INCOME				836
SAVILE ROW BUSINESS IN	SPECIALTY FINANCE	FUND VP 2016-1	LLC - ORDINARY	10,245
	DED ON FORM 990-T	PACE 1 LINE	,	41,633
FORM 990-T		OTHER DEDUCT	PIONS	STATEMENT
DESCRIPTION	Ī			AMOUNT
TRUSTEE FEE	- S			6,602
DESCRIPTION TRUSTEE FEE TAX PREPARA	- S			·
TRUSTEE FEE TAX PREPARA	- S	LINE 28		6,602
TRUSTEE FEE TAX PREPARA TOTAL TO FO	- SS TION ORM 990-T, PAGE 1,	LINE 28 OPERATING LOSS	DEDUCTION .	6,602
TRUSTEE FEE TAX PREPARA	- SS TION ORM 990-T, PAGE 1,		DEDUCTION .	6,602 500 7,102
TRUSTEE FEE TAX PREPARA TOTAL TO FO	SS ATION ORM 990-T, PAGE 1,	OPERATING LOSS	DEDUCTION .	6,602 500 7,102
TRUSTEE FEE TAX PREPARA TOTAL TO FO FORM 990-T	- SS TION ORM 990-T, PAGE 1,	OPERATING LOSS	· ·	6,602 500 7,102 STATEMENT
TRUSTEE FEE TAX PREPARA TOTAL TO FO FORM 990-T	LOSS SUSTAINED	OPERATING LOSS LOSS PREVIOUSLY APPLIED	LOSS REMAINING	6,602 500 7,102 STATEMENT AVAILABLE THIS YEAR
TRUSTEE FEE TAX PREPARA TOTAL TO FO FORM 990-T TAX YEAR 12/31/12	LOSS SUSTAINED	OPERATING LOSS LOSS PREVIOUSLY APPLIED 12,937.	LOSS REMAINING	6,602 500 7,102 STATEMENT AVAILABLE THIS YEAR 0.
TRUSTEE FEE TAX PREPARA TOTAL TO FO FORM 990-T TAX YEAR 12/31/12 12/31/13	LOSS SUSTAINED 12,937. 18,127.	OPERATING LOSS LOSS PREVIOUSLY APPLIED 12,937. 18,127.	LOSS REMAINING 0. 0.	6,602 500 7,102 STATEMENT AVAILABLE THIS YEAR 0. 0.
TRUSTEE FEE TAX PREPARA TOTAL TO FO FORM 990-T TAX YEAR 12/31/12 12/31/13 12/31/15	LOSS SUSTAINED	OPERATING LOSS LOSS PREVIOUSLY APPLIED 12,937.	LOSS REMAINING	6,602 500 7,102 STATEMENT AVAILABLE THIS YEAR 0. 0. 0.
TRUSTEE FEE TAX PREPARA TOTAL TO FO FORM 990-T TAX YEAR 12/31/12 12/31/13 12/31/15 12/31/16	LOSS SUSTAINED 12,937. 18,127. 3,932.	LOSS PREVIOUSLY APPLIED 12,937. 18,127. 3,932. 1,307.	LOSS REMAINING 0. 0. 0.	6,602 500 7,102 STATEMENT AVAILABLE THIS YEAR 0. 0.

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. ▶ 60 to www.irs.gov/Form1120 for instructions and the latest information.

2018

Name

Employer Identification number

WAYNE COUNTY INDIANA FOUNDATION, INC. 35-1406033

Partial Short-Term Capital Gains and Losses (See instructions.)

Snort-Term Capital G	ains and Losses (See	instructions.)			
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss from Form(s) 8949		(h) Gain or (loss). Subtract
This form may be easier to complete if you round off cents to whole dollars.	Proceeds (sales price)	Cost (or other basis)	or loss from Form(s) 8949 Part I, line 2, column (g)	9. C	(It) Gain or (loss). Subtract column (e) from column (d) and ombine 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	1				
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked	<u>'</u>				
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked	<u> </u>	L			
4 Short-term capital gain from installment sale				4	
5 Short-term capital gain or (loss) from like-ki				5	
6 Unused capital loss carryover (attach compu	rtation)			6 ((
7 Net short-term capital gain or (loss). Combi				7	
Part Long-Term Capital Ga	ains and Losses (See	instructions.)			
See instructions for how to figure the amounts to enter on the lines below.	(d)	(e)	(g) Adjustments to caln		(h) Gain or (loss), Subtract
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 besis)	(g) Adjustments to gain or loss from Form(s) 8949 Part II, line 2, column (g)		(h) Gain or (loss). Subtract column (a) from column (d) and ombine the result with column (g
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to	Proceeds (sales price)	Cost	(9) 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 ombine the result with column (g
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to	Proceeds (sales price)	Cost	(9) Adjustments to gain or loss from Form(s) 8949 Part II, line 2, column (g)		(h) Gain or (loss). Subtract column (a) from column (d) and ombine the result with column (g
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b	Proceeds (sales price)	Cost	(9) Adjustments to gain or loss from Form(s) 8946 Part II, line 2, column (g)	or o	(h) Gain or (loss). Subtract column (a) from column (d) and ombine the result with column (p
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no 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	Proceeds (sales price)	Cost	(9) Adjustments to gain or loss from Form(s) 8948 Part II, line 2, column (g)		(h) Gain or (loss). Subtract column (a) from column (d) and ombine the result with column (g
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no 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	Proceeds (sales price)	Cost	(9) Adjustments to gain or loss from Form(s) 8948 Part II, line 2, column (g)		(h) Gain or (loss). Subtract column (a) from column (d) and ombine the result with column (g
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 9 Totals for all transactions reported on	Proceeds (sales price)	Cost	(9) Adjustments to gain or loss from Form(s) 8945 Part II, line 2, column (g)	or o	(h) Gain or (loss). Subtract column (a) from column (d) and ombine the result with column (g
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no 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	Proceeds (sales price)	Cost	(9) Adjustments to gain or loss from Formés) 6946 Part II, line 2, column (g)		
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to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. 8a Totals for all long-term fransactions 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 10 Totals for all transactions reported on Form(s) 8949 with Box E checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sale 13 Long-term capital gain or (loss) from like-kit 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combin	re lines 8a through 14 in column	Cost (or other basis)	Part II, line 2, column (g)	11 12 13	
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no 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 10 Totals for all transactions reported on Form(s) 8949 with Box E checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain or (loss) from like-kit 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combin Part's II. Summary of Parts I ar	Proceeds (seles price) If the seles price is from Form 6252, line 26 or 3 and exchanges from Form 8824 are lines 8a through 14 in columnic ii	Cost (or other besis)	Part II, line 2, column (g)	11 12 13 14	305. 42.
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. 8a Totals for all long-term fransactions 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 10 Totals for all transactions reported on Form(s) 8949 with Box E checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sale 13 Long-term capital gain or (loss) from like-kit 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combit Parts III. Summary of Parts I ar	re lines 8a through 14 in columnic II	(or other beels) 7 In h al loss (line 15)	Part II, line 2, column (g)	11 12 13 14 15	305. 42.
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. 8a Totals for all long-term fransactions 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 10 Totals for all transactions reported on Form(s) 8949 with Box E checked 11 Enter gain from Form 4797, line 7 or 9 12 Long-term capital gain from installment sale 13 Long-term capital gain or (loss) from like-kit 14 Capital gain distributions 15 Net long-term capital gain or (loss). Combin Parts III. Summary of Parts I ar	receives price) s from Form 6252, line 26 or 3 and exchanges from Form 8824 are lines 8a through 14 in columnod ii ine 7) over net long-term capital gain (line 15) over ne	(or other beels) 7 In h al loss (line 15) t short-term capital loss (line 15)	Part II, line 2, column (g)	11 12 13 14 15	(h) Gain or (loss). Subtract column (s) from column (c) and ornbine the result with column (g. 305.

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

Schedule D (Form 1120) 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.

WAVNR	COLIMITA	TNDTANA	FOUNDATION.	TNC.
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35-1406033

	you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute 🦼
statement will have the same information as Form 103	99-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.	

Paitill 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) 1099-8 showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8e; 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

1 (a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see Column (e) in	Adjustmer loss. If you in column (f)	nt, if any, to gain or ou enter an amount (g), enter a code in . See instructions.	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result
				the instructions	Code(s)	Amount of adjustment	with column (g)
SAVILE ROW PRIVATE							
REAL ESTATE 2008							19.
SAVILE ROW PRIVATE	·-			•			
2007-08				<u> </u>			286.
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2 Totals. Add the amounts in colur	nns (d), (e), (a), a	and (h) (subtract		<u> </u>	. 25.		
negative amounts). Enter each to							
Schedule D, line 8b (if Box D abo		-			7		
above is checked), or line 10 (if E							305.

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)