				- · - 	_	_					- - - -
		-					~	*	61	طاح	
							•				
		_		amendi	ED RETURN - 2	016	NOL CARRYBA	CK	•		
	Form	990-T	E	xempt Org	ganization Bus	sine	ss Income T	ax Return	Ĺ	OMB No	1545-0687
				•	(and proxy tax und	ier se	ction 6033(e))		1		
世界		, i	For cal	endar year ወ or other t	ax year beginning JUL_1	20	14 , and ending JU	N 30, 201	5	/20	J4W
ವ್ಷ≍) Da	ment of the Treasury			ut Form 990-T and its instru				_	4	14
S. A.	Interna	ment of the Treasury I Revenue Service	•		mbers on this form as it ma				Γ	Open to Pub 501(c)(3) Or	olic Inspection for ganizations Only
ШH		Check box if			n (Check box if name					oyer identific	cation number
73		address changed				_				ictions)	, 555
		empt under section	Print	MICHIGAN	STATE UNIVERS	YTI			3	8-600	05984
≥ ∞	X]501(c)(3)	or	Number, street, and	room or suite no If a P O bo	ox, see II	nstructions.			ated busines nstructions)	ss activity codes
Sin] 408(e)220(e)	Type	426 AUDIT	ORIUM ROAD RO	OM :	394			,	
8 8 8 8] 408A530(a)		City or town, state or	r province, country, and ZIP	or foreig	n postal code]		
~100		529(a)		EAST LANS	ING, MI 4882	4			713	910	541800
9	C Boo	k value of all assets and of year	F Group	exemption number (See instructions.)						
**			G Check	k organization type 🕨	X 501(c) corporation	on [501(c) trust	401(a) trust		Other	trust
	H Des	scribe the organization	n's prima	ary unrelated business	activity.	SEE	STATEMENT 1				
	I Du	ring the tax year, was	the corp	oration a subsidiary in	n an affiliated group or a pare	ent-subs	idiary controlled group?	▶ [Ye	s X] No
					parent corporation.						
					NG CONTROLLER	<u> </u>	Telepho	one number 🕨 5	<u> 17-</u>	<u>355-5</u>	5020
	Pa	rt I Unrelate	d Trac	le or Business			(A) Income	(B) Expenses	3		C) Net
	1 a	Gross receipts or sale	es .	1,219,49	8.	1]			1	
	b	Less returns and allo	wances		c Balance ►	1c	1,219,498.			 	
	2	Cost of goods sold (S	Schedule	A, line 7)		2	387,596.			<u> </u>	
	3	Gross profit Subtract	l line 2 fr	om line 1c		3	831,902.				31,902.
		Capital gain net incon		•		4a	601,796.				01,796.
	p	Net gain (loss) (Form	4797, P	art II, line 17) (attach	Form 4797)	4b	170,888.	- 		1	<u>70,888.</u>
		Capital loss deduction				4c	555 040			<u> </u>	F2 040
				ips and S corporation:	s (attach statement)	5	-553,949.			-55	53,949.
		Rent income (Schedu	•			6				 -	
		Unrelated debt-finance				7	 				
					lled organizations (Sch. F)	8	 				
					17) organization (Schedule G					 	
		Exploited exempt acti	•	,		10	F0 000				50 000
		Advertising income (S		•	STATEMENT 3	11	50,000.				50,000. 30,173.
	. –	Other income (See in		, ,	SIMIEMENIS	12	3,430,810.	<u> </u>			30,173. $30,810.$
		Total. Combine lines	ne No	t Taken Fleew	here (See instructions t	13				3,4-	30,610.
	_ u				nust be directly connecte			income)			
	14	<u></u>							14		
	15	Salaries and wages	iloti 3, ui	rect STATUT	ENUNI				15	8:	21,159.
\$	16	Repairs and mainter	апсе	RECE	I√FD				16		66,723.
2018	17	Bad debts			. 4 0040				17	 	
0	18	Interest (attach sche	dule)		4 2018				18		
era	19	Taxes and licenses	,		DANCH				19		
	20	Charitable contributi	ons (Sei	e instructions DG 562)	HODINS) STATEM	ENT	6 SEE STAT	EMENT 4	20		0.
یے	21	Depreciation (attach	Form 4	₅₆₂₎	DEILA		21	238,506.		<u> </u>	
	22			n Schedule A and else			228		22b	2.	38,506.
	23	Depletion							23		
2	24	Contributions to def	erred co	mpensation plans	RECEIV	ED	}		24		
SCANNED 'nct	25	Employee benefit pr	ograms						25	19	96,254.
	26	Excess exempt expe	nses (So	chedule I)	OCT 22 21	018			26		
20	27	Excess readership c	osts (Sc	hedule J)	[20]	010	(S)		27		
¥0	28	Other deductions (a	•	•	A A B Til		J≝ SEE STAT	EMENT 5	28		44,810.
	29	Total deductions		•	OGDEN,	UT			29		67,452.
\bigcirc	30	Unrelated business	taxable u	ncome before net ope	rating loss deduction. Subtra	ct line 2	9 from line 13		30		63,358.
\simeq	31			(limited to the amour				EMENT 7	31	86	63,358.
2	32	Unrelated business	taxable ı	ncome before specific	deduction. Subtract line 31 f	from line	e 30		32		0.
	33	Specific deduction (Generall	y \$1,000, but see line	33 instructions for exception	ıs)			33		1,000.
_	34	Unrelated business	taxable	income. Subtract lin	e 33 from line 32. If line 33 is	s greatei	r than line 32, enter the sn	naller of zero or			
<u></u>	100	line 32							34		<u> </u>
7	42370 01-13-	1 LHA For Pa	erwork	Reduction Act Notice	, see instructions			C \ \ C		Form 9	990-T (2014

Form 990-T (2014) MICHIGAN STATE UNIVERSITY	38-6005984	Page 2
Part III Tax Computation		
35 Organizations Taxable as Corporations See instructions for tax computation.		
Controlled group members (sections 1561 and 1563) check here See instructions and:		
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):		
(1) \$ (2) \$ (3) \$		
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$	[
(2) Additional 3% tax (not more than \$100,000)		
c Income tax on the amount on line 34	050	0.
	▶ 35c	<u> </u>
36 Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 34 from:	<u> </u>	
Tax rate schedule or Schedule D (Form 1041)	▶ 36	
37 Proxy tax. See instructions	▶ 37	
38 Alternative minimum tax	38	
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies	39	0.
Part IV Tax and Payments		
40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)		
b Other credits (see instructions) 40b		
c General business credit. Attach Form 3800	6,178.	
d Credit for prior year minimum tax (attach Form 8801 or 8827)		
e Total credits Add lines 40a through 40d	40e	6,178.
41 Subtract line 40e from line 39	41	0.
	(attach schedule) 42	
	·	0.
	43	
44 a Payments: A 2013 overpayment credited to 2014	52,530.	
· · · · · · · · · · · · · · · · · · ·	52,530.	
c Tax deposited with Form 8868		
d Foreign organizations: Tax paid or withheld at source (see instructions)		
e Backup withholding (see instructions)		
f Credit for small employer health insurance premiums (Attach Form 8941) 44f		
g Other credits and payments Form 2439		
☐ Form 4136 Other Total ▶ 44g		
45 Total payments. Add lines 44a through 44g	45	652,530.
46 Estimated tax penalty (see instructions) Check if Form 2220 is attached ▶ ☐	46	
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed	▶ 47	
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	▶ 48	652,530.
200 400	funded 49	274,354.
Part V Statements Regarding Certain Activities and Other Information (see instru		2,1,331.
1 At any time during the 2014 calendar year, did the organization have an interest in or a signature or other authority ov		Von No
	,	, Yes No
securities, or other) in a foreign country? If YES, the organization may have to file Form FinCEN Form 114, Report of I	roreigh Bank and Financial	
Accounts If YES, enter the name of the foreign country here VINITED ARAB EMIRATES 2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		_ X +
If YES, see instructions for other forms the organization may have to file		<u> </u>
3 Enter the amount of tax-exempt interest received or accrued during the tax year >\$		
Schedule A - Cost of Goods Sold. Enter method of inventory valuation N/A	·····	
1 Inventory at beginning of year 1 71,317. 6 Inventory at end of year	6	65,041.
2 Purchases 2 381,320. 7 Cost of goods sold Subtract line 6		
3 Cost of labor 3 from line 5 Enter here and in Part I, Iii	ne 2	387,596.
48 Additional section 263A costs (att. schedule) 48 B Do the rules of section 263A (with res	pect to	Yes No
b Other costs (attach schedule) 4b property produced or acquired for res	ale) apply to	
5 Total Add lines 1 through 4b 5 452,637. the organization?	, ,,,,	l x
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 belie	f, it is true,
Sign correct, and complete Disclaration of progress to their than taxpayer) is based on all information of which preparer has any knowledge	•	
Sign correct, and complete Abclaration of progress better than taxpayer) is based on all information of which preparer has any knowledge	•	scuss this return with
Sign Here Correct, and complete Declaration of progress of the rithan taxpayer) is based on all information of which prepare has any knowledge. 10-5-18	May the IRS dis	scuss this return with own below (see
Sign Here Correct, and complete Disclaration of progress tother than taxpayer) is based on all information of which prepare has any knowledge. Correct, and complete Disclaration of progress tother than taxpayer) is based on all information of which prepare has any knowledge. Correct, and complete Disclaration of progress tother than taxpayer) is based on all information of which prepare has any knowledge. Correct, and complete Disclaration of progress tother than taxpayer) is based on all information of which prepare has any knowledge. Correct, and complete Disclaration of progress tother than taxpayer) is based on all information of which prepare has any knowledge. Correct, and complete Disclaration of progress to the progress tother than taxpayer) is based on all information of which prepare has any knowledge. Correct, and complete Disclaration of progress to the p	May the IRS do the preparer sh instructions)?	scuss this return with own below (see
Sign Here Correct, and complete Declaration of progress of the rithan taxpayer) is based on all information of which prepare has any knowledge. 10-5-18	May the IRS did the preparer sh instructions)? Check If PTIN	scuss this return with own below (see
Sign Here Correct, and complete Declaration of propersy tother than taxpayer) is based on all information of which preparer has any knowledge. Correct, and complete Declaration of propersy tother than taxpayer) is based on all information of which preparer has any knowledge. Correct, and complete Declaration of propersy to based on all information of which preparer has any knowledge. Correct, and complete Declaration of propersy to the taxpayer) is based on all information of which preparer has any knowledge. Correct, and complete Declaration of propersy to the taxpayer) is based on all information of which preparer has any knowledge. Correct, and complete Declaration of propersy to the taxpayer) is based on all information of which preparer has any knowledge. Correct, and complete Declaration of propersy to the taxpayer) is based on all information of which preparer has any knowledge. Correct, and complete Declaration of propersy to the taxpayer) Correct, and any taxpayer C	May the IRS distance of the preparer ship instructions)? Check if PTIN self-employed	scuss this return with own below (see
Sign Here Correct, and complete Declaration of progress of the results from taxpayer) is based on all information of which preparer has any knowledge Co-5-/8 V Finance Title	May the IRS did the preparer sh instructions)? Check if PTIN self- employed	ccuss this return with own below (see X Yes No
Sign Here Correct, and complete Disclaration of property than taxpayer) is based on all information of which preparer has any knowledge Correct, and complete Disclaration of property is based on all information of which preparer has any knowledge Correct, and complete Disclaration of property is based on all information of which preparer has any knowledge Correct, and complete Disclaration of property is based on all information of which preparer has any knowledge Correct, and complete Disclaration of property is based on all information of which preparer has any knowledge Correct, and complete Disclaration of property is based on all information of which preparer has any knowledge Correct, and complete Disclaration of property is based on all information of which preparer has any knowledge Correct, and complete Disclaration of property is based on all information of which preparer has any knowledge Correct, and complete Disclaration of property is based on all information of which preparer has any knowledge Correct, and	May the IRS did the preparer sh instructions)? Check if PTIN self- employed	scuss this return with own below (see
Here Correct, and complete Declaration of progress tother than taxpayer) is based on all information of which preparer has any knowledge Correct, and complete Declaration of progress tother than taxpayer) is based on all information of which preparer has any knowledge Correct, and complete Declaration of progress than taxpayer) is based on all information of which preparer has any knowledge Correct, and complete Declaration of progress than taxpayer) is based on all information of which preparer has any knowledge Correct, and correct	May the IRS do the preparer sh instructions)? Check if PTIN self- employed P00 Firm's EIN ▶ 38-	ecuss this return with own below (see X Yes No No No 100422 -1357951
Sign Here Correct, and complete Declaration of progress outser than taxpayer) is based on all information of which preparer has any knowledge Co-5-/8 V Finance Title	May the IRS did the preparer sh instructions)? Check if PTIN self- employed P00 Firm's EIN > 38-	ccuss this return with own below (see X Yes No

Form 990-T (2014) MICHIGAN				Porporal F)	. 1	38-60		
Schedule C - Rent Income	(Froin hear	rroperi	ly and	Personal P	roperty	Leased	With Real Pro	pen	(see instructions)
1. Description of property									
(1)									
(2)									
(3)									
(4)									
	2. Rent receiv	ed or accrue	d						
(a) From personal property (if the per	centage of	(b) ^F	rom real ar	nd personal propert	y (if the perce	entage	3(a) Deductions dire columns 2(a	ctly con a) and 2(nected with the income in b) (attach schedule)
rent for personal property is more 10% but not more than 50%)		ľ	the rent	ersonal property ex- us based on profit	ceeds 50% or or income)	r IT			,,
(1)									
(2)									
(3)									
(4)									
Total	0.	Total				0.			
(c) Total income. Add totals of columns	2(a) and 2(b). En	ter					(b) Total deductions		
here and on page 1, Part I, line 6, columi	n (A)	>				0.	Enter here and on page 1 Part I, line 6, column (B)	· •	0 .
Schedule E - Unrelated Deb	t-Financed	Incom	e (see	nstructions)					
				_			3 Deductions directly		
				2. Gross ind or allocable		(0)	to debt-fin	 -	
1 Description of debt-fit	nanced property			financed		(a)	Straight line depreciation (attach schedule)	ł	(b) Other deductions (attach schedule)
				Į.		l		l	
(1)									
(2)									
(3)									
(4)									
4 Amount of average acquisition	5 Average	adjusted ba	sis	6. Column	4 divided		7. Gross income		8, Allocable deductions
debt on or allocable to debt-financed property (attach schedule)	debt-fina	allocable to nced proper	ty	by colu	mn 5		reportable (column 2 x column 6)		(column 6 x total of columns 3(a) and 3(b))
	(attacl	h schedule)		<u> </u>					
(1)					- 9	6			
(2)	l					6 T			
(3)					9/	6			
(4)					9/	6			
						Er	nter here and on page 1,		Enter here and on page 1,
						Р	art I, line 7, column (A)	- 1	Part I, line 7, column (B)
Totals						▶∟		0.	0.
Total dividends-received deductions	cluded in column	18							0.
Schedule F - Interest, Annu	ities, Royali	ies, an	d Rent	s From Co	ntrolled	Organi	zations (see in	nstruc	tions)
	ì		Exemp	t Controlled O	rganizatio	ns			,
1 Name of controlled organization	Employer ide	antification	Notur	3 related income	Total	4. of specified	5 Part of column 4	that is	6 Deductions directly
	numi			see instructions)		ents made	included in the cont organization's gross		connected with income in column 5
					↓				
(1)					<u> </u>				ļ
(2)			_		ļ				<u> </u>
(3)			<u> </u>		├				
(4)			L		L		_ 		L
Nonexempt Controlled Organization	S								
7 Taxable Income 8	Net unrelated incom (see instructions		9 To	tal of specified pays made	ments	10. Part of c	olumn 9 that is included rolling organization's		Deductions directly connected with income in column 10
İ	,	•			1		ross income]	
			<u> </u>		\longrightarrow			Ь.	
(1)			<u> </u>			 _		<u> </u>	
(2)			├					-	
(3)			 -					-	
(4)	•		L					 	
							olumns 5 and 10		Add columns 6 and 11
							and on page 1, Part I, 8, column (A)	Ent	ter here and on page 1, Part I, line 8, cotumn (B)
Totals							0.	L	0.
423721 01-13-15									Form 990-T (2014

Form 990-T (2014) MICHI	GAN :	STATE UN	IIVERS:	ITY				38-6	005984	Page 4
Schedule G - Investm (see in:	ent Ind		ection 5	01(c)(7)), (9), or (17) Or	ganizati	on	-		
1 . De	scription of	income			2. Amount of income		luctions connected schedule)		Set-asides ch schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1)						_				
(2)										
(3)										
(4)								<u> </u>		<u> </u>
					Enter here and on page 1, Part I, line 9, column (A)					Enter here and on page 1, Part I, line 9, column (B)
Totals				•	0.			_		0.
Schedule I - Exploited (see inst	d Exem tructions	-	Income,	Other '	Than Advertisin	ng incor	ne			
1 Description of exploited activity	(1	2 Gross lated business ncome from de or business	3. Exper directly con with produ of unrela business in	nected ction ted	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	from act	s income tivity that nrelated s income	attr	Expenses ibutable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)	1							 		
(2)	+									1
(3)						_	· ·	Γ —		
(4)										
	pa	er here and on age 1, Part I, e 10, col (A)	Enter here a page 1, P line 10, co	artl, I(B)						Enter here and on page 1, Part II, line 26
Totals	<u>▶</u>	0.		0.						0.
Schedule J - Advertis					olidated Basis					
Part I Income From	Peno	uicais nepi	ortea on a	a Cons	olidated basis					
								Τ		
1 Name of periodical		2. Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3) If a gain, comput cols 5 through 7		rculation come		eadership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)					_			L		
(2)			 -		4	 				
(3)					_					
(4)										
		dicals Repo		0 a Sepa	rate Basis (For	each perio	odical listed	d in Par	t II, fill in	0.
columns 2 throug	n 7 on a	l line-by-line ba	SIS) 							
1 Name of periodical		2. Gross advertising income		Direct sing costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, comput cols 5 through 7		rculation come		eadership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) ATHLETICS -	MSU	50,000).		50,000	<u>.l_</u>				
(2)										
(3)										
(4)					 			L		
Totals from Part I).	0	<u>-</u>				<u> </u>	0.
		Enter here and o page 1, Part I, line 11, col (A)	page line 1	are and on 1, Part I I, col (B)					}	Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) Schedule K - Compe	neotia:	50,000		0						0.
Schedule K - Compe	Name	1 of Officers	s, Directo	ors, and	2, Title	instructio	3 Percei	ed to		nsation attributable
							busines	$-\!\!\!-\!\!\!\!+$		
(1)				 			}	<u></u> %		
(2)							 	<u>%</u>		
(3)							├──	<u> </u>		
(4)	Dort II I	uno 14					L	%		0.
Total. Enter here and on page 1	<u>, railii, l</u>	14				·				Form 990-T (2014)

11251002 147228 65897

MICHIGAN STATE UNIVERSITY

38-6005984

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1 BUSINESS ACTIVITY

USE OF FACILITY & ASSETS BY THE GENERAL PUBLIC

TO FORM 990-T, PAGE 1

FORM 990-T	OTHER	INCOME	STATEMENT 3
DESCRIPTION			AMOUNT
AKERS GOLF COURSE			609,998.
WKAR PRODUCTION SERVICES			8,465.
SUMMER CONFERENCES			138,108.
ALUMNI ASSOCIATION			136,055.
BRESLIN CENTER EVENTS			15,318.
GRAND RAPIDS PARKING			87,282.
ATHLETIC SPONSORSHIP			544,420.
BRESLIN PARKING			1,466.
KELLOGG GIFT SHOP			528,946.
			26A 115
KELLOGG PARKING			260,115.
TOTAL TO FORM 990-T, PAGE 1,	LINE 12		2,330,173.
	_ 	IBUTIONS	·
TOTAL TO FORM 990-T, PAGE 1,	CONTR	IBUTIONS D USED TO DETERMINE FMV	2,330,173.
TOTAL TO FORM 990-T, PAGE 1, FORM 990-T	CONTR		2,330,173. STATEMENT 4
TOTAL TO FORM 990-T, PAGE 1, FORM 990-T DESCRIPTION/KIND OF PROPERTY	CONTR		2,330,173. STATEMENT 4 AMOUNT
TOTAL TO FORM 990-T, PAGE 1, FORM 990-T DESCRIPTION/KIND OF PROPERTY FOOD	CONTR:		2,330,173. STATEMENT 4 AMOUNT 5,000.

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 5
DESCRIPTION		AMOUNT
CONTRACT SERVICES		372,906.
REFUNDS		33,268.
SUPPLIES		375,888.
MISCELLANEOUS		67,391.
PHONE/POSTAGE		17,590.
UTILITIES		41,415.
SUPPORT SERVICES		67,516.
PRINTING		16,574.
RENTALS		5,897.
TRAVEL AND CONFERENCES		22,941.
FREIGHT		4.
ADVERSTISING		8,414.
DOMESTIC PRODUCTION ACTIVITI	ES DEDUCTION	15,006.
TOTAL TO FORM 990-T, PAGE 1,	LINE 28	1,044,810.

, 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.
Information about Schedule D (Form 1120) and its separate instructions is at www.irs gov/form1120.

OMB No 1545-0123

Employer Identification number

MICHIGAN STATE UNI				38-	6005984
Part I Short-Term Capital Ga	ins and Losses - Ass	ets Held One Yea	r or Less		
See Instructions for how to figure the amounts to enter on the lines below	(d) Proceeds	(e) Cost	(9) Adjustments to ga or loss from Form(s) 89	in 19.	(ħ) Gain or (loss). Subtract column (a) from column (d) and
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Part I line 2, column (combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked			l .		
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked	4,131.		\		4,131.
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 37			4	
5 Short-term capital gain or (loss) from like-kin-	d exchanges from Form 8824			5	1
6 Unused capital loss carryover (attach comput	ation)			6	(
7 Net short-term capital gain or (loss). Combin	e lines 1a through 6 in column	h		7	4,131.
Part II Long-Term Capital Gai			an One Year		·
See instructions for how to figure the amounts					
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column (in 49, g)	(f) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked			}		
9 Totals for all transactions reported on					
Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked	597,665.		1		597,665.
11 Enter gain from Form 4797, line 7 or 9				11	
12 Long-term capital gain from installment sales	from Form 6252, line 26 or 37			12	
13 Long-term capital gain or (loss) from like-king	d exchanges from Form 8824			13	
14 Capital gain distributions	•			14	
15 Net long-term capital gain or (loss). Combine	lines 8a through 14 in column	h		15	597,665.
Part III Summary of Parts I and					
16 Enter excess of net short-term capital gain (lin		loss (line 15)		16	4,131.
17 Net capital gain Enter excess of net long-term		, ,	e 7)	17	597,665.
18 Add lines 16 and 17. Enter here and on Form			,	18	601,796.
Note If losses exceed gains, see Capital loss	····				
JWA For Paperwork Reduction Act Notice,	see the Instructions for Form	1120.		Sc	hedule D (Form 1120) (2014)

Form 8949

Sales and Other Dispositions of Capital Assets

OMB No 1545-0074

2014

Department of the Treasury Internal Revenue Service ► Information about Form 8949 and its separate instructions is at www.lrs.gov/form8949.

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment Sequence No 12A

Name(s) shown on return

Social security number or taxpayer identification no.

38-6005984

MICHIGAN STATE UNIVERSITY

Before you check Box A, 8, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain idebt instruments you bought in 2014 or later).

Part | Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2 Note. You may aggregate all short term transactions reported on Form(s) 1099 B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a, you are not required to report these transactions on Form 8949 (see instructions) You must check Box A, B, or C below. Check only one box, if more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box ctions 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 (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS X (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss. If you enter an amount (b) (c) (e) (h) Proceeds Gain or (loss). Subtract column (e) Cost or other Description of property Date acquired Date sold or in column (g), enter a code in column (f). See instructions. (sales price) basis See the (Example 100 sh XYZ Co) (Mo, day, yr) disposed Note below and from column (d) & (Mo, day, yr) (f) (g) Amount of combine the result see Column (e) ır Code(s) the instructions with column (g) adjustment VARIOUS VARIOUS VARIOUS 4,131 4,131. Totals. Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B 4,131. above is checked), or line 3 (if Box C above is checked)

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

423011 12-04-14 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2014)

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

423012 12-04-14

4562

Depreciation and Amortization

(Including Information on Listed Property) 990-T

► Attach to your tax return.

OMB No 1545-0172

Sequence No 179

Information about Form 4562 and its separate instructions is at www.irs.gov/form4562 MICHIGAN STATE UNIVERSITY FORM 990-T PAGE 1 38-6005984 Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 500,000. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-5 Oollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0- if married filing separately, see instructions (b) Cost (business use only) (a) Description of property (c) Elected cost 7 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 Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2013 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2015. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 14 15 Property subject to section 168(f)(1) election 15 347. 16 Other depreciation (including ACRS) 16 Part III | MACRS Depreciation (Do not include listed property) (See instructions) 173,621. 17 MACRS deductions for assets placed in service in tax years beginning before 2014 17 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 2014 Tax Year Using the General Depreciation System (b) Month and year placed in service (c) Basis for depreciation (business/investment use only - see instructions) (d) Recovery period (e) Convention (g) Depreciation deduction (a) Classification of property 19a 3-year property 5-year property 7-year property 10 year property 15-year property 20-year property S/L 25-year property MM S/L 27 5 yrs Residential rental property ММ 27.5 yrs S/L MM S/L 39 yrs Nonresidential real property MM Section C - Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System 20 a Class life S/L 18,402. 1,534. 12 yrs S/L 12-year b 40 <u>year</u> 40 yrs S/L 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 (g), and line 21

Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr

23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs

238,506.

22

Form 4562 (2014) MICHIGAN	STATE	UNIV	ERS	ITY					38-	6005	984 f	age 2
Part V Listed Property (Include automobiles, o	ertain otl	her vehicle	s, cert	ain aircr	aft, ce	rtain com	puters, a	and prop				
recreation, or amusement) Note: For any vehicle for which you are	ısına the	standard i	milead	e rate or	dedu	ctino lease	expens	e como	lete	24a. 24	lb. colum	ns (a)
through (c) of Section A, all of Section B	, and Sec	ction C if a	pplical	ble.					only	2.10, 2.		
Section A - Depreciation and Othe			tion: S	See the ii	struc	tions for li	mits for	oasseng	er auton	nobiles)	,	
24a Do you have evidence to support the business/investm	ent use cl	aimed? L	<u> </u>		No	24b If "Y	es," is th	ne evide	nce writt	ten?	Yes L	No_
(a) (b) (c) Date Business	,	(d)	Bas	(e) is for depre	ciation	(f)		g)		h)	Elec	I) tod
(list vehicles first) placed iii litvesullet	t a	Cost or ther basis		uness/inve	stment	Recovery period		thod/ ention		ciation action	section	n 179
Service use percent	iye		_!	use only		<u> </u>	<u> </u>				CO	st
25 Special depreciation allowance for qualified listed	property	y placed in	servic	e during	the t	ax year an	d					
used more than 50% in a qualified business use								25	<u> </u>			
26 Property used more than 50% in a qualified busin												
	%	·			···							
	%						<u> </u>					——
O7. Department 50% or locally a modified by	%					L	l		L			
27 Property used 50% or less in a qualified busines:							T					
	%						S/L·					
	% %						S/L·		 			
28 Add amounts in column (h), lines 25 through 27						L	S/L·	1 00	 			
· //			ine z i,	page i				28	I	1 00		
29 Add amounts in column (i), line 26 Enter here an		7, page i B - Inform		on Hoo	-41/-1					29		
Complete this section for vehicles used by a sole pro									. 16			
												,
to your employees, first answer the questions in Sect	ion C to	see ii you	meet a	ın excep	tion to	Completi	ng mis s	section	or those	venicies	i.	
	т	a)		h)		(0)	,	d)	T 7	e)	(f	
30 Total business/investment miles driven during the		hicle	•	(b) Vehicle		(c) /ehicle		ncie		nicle	Vehi	
year (do not include commuting miles)	100	111010		11010	-	Cilicio	1	11616	1 001	11010	V C I I	
31 Total commuting miles driven during the year	\vdash				-		 					
32 Total other personal (noncommuting) miles	 						 					
driven		i							ŀ			
33 Total miles driven during the year.	—								 			
Add lines 30 through 32												
34 Was the vehicle available for personal use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
during off-duty hours?	100	 					1.55		1	1,15		
35 Was the vehicle used primarily by a more												
than 5% owner or related person?	1	()					l		ļ] !	. !	
36 Is another vehicle available for personal		† <u>†</u>										
use?	j						i					
Section C - Questions	for Emp	loyers Wh	o Pro	vide Veh	icles	for Use b	y Their i	Employe	ees	 -	<u> </u>	
Answer these questions to determine if you meet an	exceptio	n to compl	eting S	Section E	3 for v	ehicles us	ed by e	mployee	s who a	re not m	ore than	5%
owners or related persons	•		_				•					
37 Do you maintain a written policy statement that p	rohibits a	all persona	l use d	of vehicle	es, inc	luding cor	nmuting	, by you	ır		Yes	No
employees?												
38 Do you maintain a written policy statement that p	rohibits į	personal u	se of v	ehicles,	excep	ot commut	ing, by y	our				
employees? See the instructions for vehicles use	d by corp	porate offi	cers, d	lirectors,	or 1%	6 or more	owners					<u> </u>
39 Do you treat all use of vehicles by employees as	personal	use?										
40 Do you provide more than five vehicles to your en	nployees	, obtain in	format	tion from	your	employee	s about	V				
the use of the vehicles, and retain the information	receive	d?									L	<u> </u>
41 Do you meet the requirements concerning qualifi											L.	<u> </u>
Note: If your answer to 37, 38, 39, 40, or 41 is "Y	es," do n	ot comple	te Sec	tion B fo	r the c	covered ve	hicles		- 			
Part VI Amortization												
(a) Description of costs	(b) nodsschoms s	, ا	(C) vmortizat	ole	į.	(d) Code	l	(e) Amortiza		Aı	(f) nortization	
Description of desire	begins		amount			section		period or pe		fo	r this year	
42 Amortization of costs that begins during your 20	14 tax ye	ar							-,			
					4_			_				
		L							,			
43 Amortization of costs that began before your 201									43			
44 Total. Add amounts in column (f). See the instruc	tions for	where to	report						44			
416252 01-08-15										F	orm 4562	2 (2014)

General Business Credit

▶ Information about Form 3800 and its separate instructions is at www.lrs.gov/form3800.
 ▶ You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

MI	CHIGAN STATE UNIVERSITY	38-6005984		
Pá	art I Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT)		
	(See instructions and complete Part(s) III before Parts I and II)			
1	General business credit from line 2 of all Parts III with box A checked	1	0.	
2	Passive activity credits from line 2 of all Parts III with box B checked 2			
3	Enter the applicable passive activity credits allowed for 2014 (see instructions)	3		
4	Carryforward of general business credit to 2014. Enter the amount from line 2 of Part III with			
	box C checked. See instructions for statement to attach	4		
5	Carryback of general business credit from 2015. Enter the amount from line 2 of Part III with			
	box D checked	5		
6	Add lines 1, 3, 4, and 5	6		
Pa	art II Allowable Credit			
7	Regular tax before credits			
	• Individuals Enter the sum of the amounts from Form 1040, lines 44 and 46, or	}		
	the sum of the amounts from Form 1040 NR, lines 42 and 44			
	• Corporations Enter the amount from Form 1120, Schedule J, Part I, line 2, or the	7	0.	
	applicable line of your return			
	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G,	1		
	lines 1a and 1b, or the amount from the applicable line of your return	l		
8	Alternative minimum tax			
	• Individuals Enter the amount from Form 6251, line 35	1		
	• Corporations Enter the amount from Form 4626, line 14	В	0.	
	• Estates and trusts Enter the amount from Schedule I (Form 1041), line 56			
		\	ļ	
9	Add lines 7 and 8	9	0.	
10 a	Foreign tax credit 10a	}		
t	Certain allowable credits (see instructions)			
c	Add lines 10a and 10b	10c		
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16.	11	0.	
12	Net regular tax. Subtract line 10c from line 7 If zero or less, enter -0-]		
		1		
13	Enter 25% (25) of the excess, if any, of line 12 over \$25,000 (see instructions)	}	}	
14	Tentative minimum tax	}		
	Individuals Enter the amount from Form 6251, line 33	İ		
	Corporations Enter the amount from Form 4626, line 12]		
	Estates and trusts Enter the amount from Schedule I]		
	(Form 1041), line 54			
15	Enter the greater of line 13 or line 14	15		
16	Subtract line 15 from line 11 If zero or less, enter -0-	16		
17	Enter the smaller of line 6 or line 16	17	<u></u>	
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition,			
_	or reorganization			
LHZ	For Panerwork Reduction Act Notice, see separate instructions		Form 3800 (2014)	

414401 12-22-14

For	m 3800 (2014) MICHIGAN STATE UNIVERSITY 38	<u>3-6005984 </u>	Page 2
Pi	art II Allowable Credit (Continued)		
Not	e. If you are not required to report any amounts on lines 22 or 24 below, skip lines 18 through 25 and enter -0- on lin	e 26	
18	Multiply line 14 by 75% (75) (see instructions)	18	
19	Enter the greater of line 13 or line 18	19	
		1 1	
20	Subtract line 19 from line 11 If zero or less, enter -0-	20	
21	Subtract line 17 from line 20 If zero or less, enter -0-	21	
		1 1	
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	
23	Passive activity credit from line 3 of all Parts III with box B checked 23	4	
24	Enter the applicable passive activity credit allowed for 2014 (see instructions)	24	
25	Add lines 22 and 24	25	
26	Empowerment zone and renewal community employment credit allowed. Enter the	\	
	smaller of line 21 or line 25	26	
			•
27	Subtract line 13 from line 11 If zero or less, enter -0-	27	0.
			0
28	Add lines 17 and 26	28	0.
		}	0
29	Subtract line 28 from line 27 If zero or less, enter -0-	29	0.
	Should be a state of the state		6,178.
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	0,170.
24	Paganiad	31	
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked 32		
UZ.	assive activity credits from fine 3 of all 1 arts in with 55% b checked	┥	
33	Enter the applicable passive activity credits allowed for 2014 (see instructions)	33	
00	Eliter the applicable passive activity distance to 2014 (add instructions)		
34	Carryforward of business credit to 2014. Enter the amount from line 5 of Part III with box C checked	1 1	
•	and line 6 of Part III with box G checked. See instructions for statement to attach	34	
35	Carryback of business credit from 2015 Enter the amount from line 5 of Part III with box D checked	1 1	
	(see instructions)	35	
36	Add lines 30, 33, 34, and 35	36	6,178.
37	Enter the smaller of line 29 or line 36	37	<u> </u>
		i i	
38	Credit allowed for the current year. Add lines 28 and 37	1 (
	Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36,		
	see instructions) as indicated below or on the applicable line of your return	1 1	
	• Individuals Form 1040, line 54, or Form 1040NR, line 51		
	Corporations Form 1120, Schedule J, Part I, line 5c		^
	Estates and trusts Form 1041, Schedule G, line 2b	38	0.
		Form	1 3800 (2014)

Form	3800 (2014)			Page 3
Name	s) shown on return MICHIGAN STATE UNIVERSITY			dentifying number 38–600598 4
Pa	rt III General Business Credits or Eligible Small Business Credi	ts/see		30-0003364
Com	plete a separate Part III for each box checked below (see instructions)	(00		
Α	X General Business Credit From a Non-Passive Activity E Reserv	ed .		
В	General Business Credit From a Passive Activity F Reserv	red		
С	General Business Credit Carryforwards G Eligible	Smal	Business Credit Carryfon	wards
D	General Business Credit Carrybacks H Reserv		, ,	
1	If you are filing more than one Part III with box A or B checked, complete and attach f	irst an	additional Part III combini	ing amounts from all
	Parts III with box A or B checked. Check here if this is the consolidated Part III			▶ □
	(a) Description of credit		(b)	(c)
need	on any line where the credit is from more than one source, a separate Part III is led for each pass through entity		(b) If claiming the credit from a pass-through entity enter the EIN	Enter the appropriate amount
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
b	Reserved	1b		
C	increasing research activities (Form 6765)	1c		
d	Low-income housing (Form 8586, Part I only)	1d		
e	Disabled access (Form 8826) (see instructions for limitation)	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		<u> </u>
g	Indian employment (Form 8845)	1g	 	
h	Orphan drug (Form 8820)	1h		
	New markets (Form 8874)	11		
i	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1 ₁		
k	Employer-provided child care facilities and services (Form 8882) (see instructions	'''		· · · · · · · · · · · · · · · · · · ·
••	for limitation)	1k		
1	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m		
n	Distilled spirits (Form 8906)	1n		
0	Nonconventional source fuel (Form 8907)	10		
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (Form 8909)	1q		· · · · · · · · · · · · · · · · · · ·
7	Alternative motor vehicle (Form 8910)	1r		
· s	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Reserved	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (Form 8931) (see instructions for limitation)	10		
w	Employer differential wage payments (Form 8932)	1w	-	
X	Carbon dioxide sequestration (Form 8933)	1x		
	Qualified plug-in electric drive motor vehicle (Form 8936)	1y	 	
y	Qualified plug-in electric universities (rorm 955) Qualified plug-in electric vehicle (carryforward only)	1z		<u> </u>
Z	New hire retention (carryforward only)	1aa	 	
	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	- · · ·	 	
		1bb		
2	Other Add lines 1a through 1zz and enter here and on the applicable line of Part I	1zz 2	 	
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3	 	
	Investment (Form 3468, Part III) (attach Form 3468)		 	
4a	•	4a	 	
b	Work opportunity (Form 5884)	4b	ļ	
C	Biofuel producer (Form 6478)	4c	 	
d	Low-income housing (Form 8586, Part II)	4d		
e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e	 	
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	41		6,178.
9	Qualified railroad track maintenance (Form 8900)	49		
h	Small employer health insurance premiums (Form 8941)	4h		
1	Reserved	41		
j	Reserved	4j		<u> </u>
z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		6,178.
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		6,178.

FORM 990-T	NET	OPERATIN	G LOSS DI	DUCTI	ON	STATEMEN	 Г 7
							
TAX YEAR	LOSS SUSTAINED	LOS PREVIO APPL	USLY		OSS AINING	AVAILABLI THIS YEAR	
06/30/17	1,955,687.		0.	1	,955,687.	1,955,6	587.
NOL CARRYOV	ER AVAILABLE THIS	YEAR		1	,955,687.	1,955,	587.
FORM 990-T	INCO	ME (LOSS)	FROM PAI	RTNERS	HIPS	STATEMEN	г 8
PARTNERSHIP	NAME		GROSS II	NCOME	DEDUCTIONS	NET INCO	
ABRY PARTNE	RS VII, LP		-40	,934.	0	-40	934.
	EQUITY IV, LP			,783.	0		783.
BLACKSTONE TE 2 LP	REAL ESTATE PARTN	ERS VI		657.	0		657.
	REAL ESTATE PARTN	ERS VI		057.	U	•	057.
TE 2-ESH LP				-23.	0	•	-23.
	REAL ESTATE PARTN	ERS VI	1.2	070	0	1.2	070
TE 2-NQ LP BLACKSTONE	REAL ESTATE PARTN	ERS VII	13	,879.	0	. 13	,879.
TE.5 LP				17.	0	•	17.
	REAL ESTATE PARTN	ERS VII			_		
TE.5 -NQ LP	BROADWAY, LP		48	,068. -2.	0		,068, -2.
	STITUTIONAL PARTN	ERS,		- 2 •	U	•	-2.
L.P., SERIE	S ONE	·	-	-101.	0	•	-101.
	STITUTIONAL PARTN	ERS,		100	•		100
L.P., SERIE Charlesbank	EQUITY FUND VII,	T.1D		-179. ,290.	0		-179. ,290.
	EQUITY FUND VIII			, 249.	0		249
	SSY & SIMMONS PRI		_	, 2 1 3 1	ŭ	-	
EQUITY V LP			180	,788.	0	. 180	788.
	PITAL EQUITY PART	NERS IV	2.2	150	0	2.2	1 - 0
(QP) LP COMMON FIND	- CAPITAL PRIVAT	R	-23	,159.	U	-23	159.
EQUITY PART			8	,092.	0	. 8	092.
	- CAPITAL VENTUR	E					
PARTNERS VI		-	-1	,248.	0	-1,	248.
COMMON FUND PARTNERS VI	- CAPITAL VENTUR	E	1	,304.	0	. 1	304.
	- ENDOWMENT ENER	GY	-	, 5011	ŭ	•	, 50 1
PARTNERS IV				-574.	0	•	-574.
	- ENDOWMENT PRIV	ATE		202	0		202
EQUITY III COMMON FUND	- ENDOWMENT PRIV	ATE	•	-202.	U	•	-202.
EQUITY IV			1	,180.	0	. 1	180.
	- ENDOWMENT PRIV	ATE					
EQUITY PART		DWMBD C	•	-318.	0	•	-318.
CROSSHARBOR II L.P.	INSTITUTIONAL PA	KTNEKS	_112	,677.	n	118	677
	AND GAS COINVEST	MENT	110	, , , , ,	U	-110	
FUND LP			-2	,791.			791.
			10			STATEMENT (S)	. 7

MICHIGAN STATE UNIVERSITY			38-60059 84
ENCAP ENERGY CAPITAL FUND IX, LP ENCAP FLATROCK MIDSTREAM FUND III,	-585,836.	0.	-585,836.
LP	-98,417.	0.	-98,417.
FR X ONSHORE, LP	11,500.		11,500.
FORTRESS CREDIT OPPORTUNITIES FUND			
III (B) LP	3,837.	0.	3,837.
GREAT HILL EQUITY PARNTERS IV, LP	-1,098.	0.	
GTCR FUND XI/B LP	-14,527.	0.	-14,527.
JH WHITNEY VII AIV, LP	1,963.	0.	1,963.
JMI VI MICRO AIV A, LP	3,063.	0.	3,063.
JMI VI DE AIV A, LP	-4,475.	0.	-4,475.
KIA VIII (OWL) LP	-313.	0.	-313.
KIA VIII (P2) L.P	9,367.		
KIA VIII (POWER) L.P	-9,865.		
LIGHTSPEED VENTURE PARTNERS IX LP	-9.	0.	
LIME ROCK RESOURCES C, LP	-4,589.		
LS POWER FUND III FEEDER 1 LP MADISON DEARBORN FUND IV, LP	-232,880.	0.	-232,880.
(MADISON DEARBORN CAP. PARTNERS IV) MADISON DEARBORN CAPITAL PARTNERS	5,552.	0.	5,552.
V-B L.P.	5,850.	0.	5,850.
MANGROVE INVESTORS II LP	-52,187.		-
NATURAL GAS PARTNERS IX, LP	-20,965.	0.	-20,965.
OCM OPPORTUNITIES FUND VI AIF	20,505.	0.	-20,903.
(DELAWARE), LP	-8,943.	0.	-8,943.
OCM OPPORTUNITIES FUND VIIB AIF	0,743.	0.	-0,943.
(DELAWARE), L.P.	258.	0.	258.
PARK STREET CAPITAL NATURAL	250.	0.	250.
RESOURCE FUND II AIV, L.P.	985.	0.	985.
PARK STREET CAPITAL NATURAL	J05.	0.	J03 .
RESOURCE FUND II, L.P.	-554.	0.	-554.
PARK STREET CAPITAL PRIVATE EQUITY	334.	0.	224.
FUND V, L.P.	1,550.	0.	1,550.
PARK STREET CAPITAL PRIVATE EQUITY	1,3301	•	1,5501
FUND VI, L.P.	38,837.	0.	38,837.
PARK STREET CAPITAL PRIVATE EQUITY	30,037.	•	30,037.
FUND VII, L.P.	-11,517.	0.	-11,517.
PROVIDENCE QUITY PARTNERS V LP	-6,285.	ŏ.	-6,285 .
PROVIDENCE QUITY PARTNERS VI LP	34,174.	ŏ.	34,174.
SENTINEL CAPITAL PARTNERS V LP	-7,354.	ŏ.	-7,354.
SYMMETRIC PARTNERS, LP	308,214.	0.	308,214.
TRIDENT VI LP	-1,254.	0.	-1,254.
TUCKER ANTHONY PRIVATE EQUITY FUND			•
IV, L.P.	13,439.	0.	13,439.
THE VARDE FUND VIII LP	-862.	0.	-862.
THE VARDE FUND IX, LP	25,542.	0.	25,542.
THE VARDE FUND X(B) (FEEDER) LP	31,524.	0.	31,524.
WESTBROOK REAL ESTATE FUND IX, LP	8,779.	0.	8,779.
HANSON COLD STORAGE CO	526.	0.	526.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	-553,949.	0.	-553,949.