Form 990-T (2016)

RAGE 69

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For Paperwork Reduction Act Notice, see instructions.

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990-	T E	empt Organization (and proxy tax	Bus	iness Inco	ome '	Tax Retu	rn 🕅	OMB No 1545-0687
,¢.,j,500	For cala	and proxy tax) ndar year 2016 or other tax year begin					2017	21 MC
	I	formation about Form 990-T and						
Department of the Treas Internal Revenue Service		not enter SSN numbers on this form a						Open to Public Inspection for 501(c)(3) Organizations Only
A Check box	1 00	- , -		ne changed and see				er identification number
address cha		Incline or organization (on one or				,	(Employ	ees' trust, see instructions)
B Exempt under sect	tion	BALL STATE UNIVERSI	TY F	OUNDATION.	TNC.			
X 501(C)(B)	Print	Number, street, and room or suite no					35-60	24566
<u> </u>	or 220(e) Type			,				ted business activity codes
— · · · · · · · · · · · · · · · · · · ·	^{220(e)} Type _{530(a)}	2800 W. BETHEL AVEN	HE.				(See ins	tructions)
529(a)	330(a)	City or town, state or province, countr		IP or foreign postal c	ode		1	
C Book value of all as	ssets	MUNCIE, IN 47304	,,	 , ,			90000	3
at end of year		up exemption number (See instruct	ions) l	<u> </u>			1 30000	
239,675,5	· · · · · ·	eck organization type X 501	<u> </u>		501(c	trust	401(a) t	rust Other trust
		rimary unrelated business activity			1 30 1(0	tiust [401(8) (dat Other trast
		corporation a subsidiary in an affil			hardranı	natrolled group?		Yes X No
					ibsidial y	will olled glodp.		
		identifying number of the parent co	rporau		Telephon	e number ▶ 76	5-285-	8312
				1				(C) Net
		or Business Income	1	(A) Incom	-	(B) Expe	1303	(C) Het
1a Gross receip								
b Less returns and		c Balance ▶	<u> </u>					
•	•	lule A, line 7)	2	·				
•		2 from line 1c	3	105	100			105 122
		attach Schedule D)	4a	195,	122.			195,122
		Part II, line 17) (attach Form 4797)	4b					
c Capital loss	deduction for	trusts	4c_					050 750
5 Income (loss) from partnershi	ps and S corporations (attach statement)	5	260,	768.	ATCH 1	_	260 , 768
Rent income	e (Schedule C)		6					
7 Unrelated d	lebt-financed ir	ncome (Schedule E)	7	_				
8 Interest, annuite	es, royalties, and re	nts from controlled organizations (Schedule F)	8					
9 Investment inco	ome of a section 50	01(c)(7), (9), or (17) organization (Schedule G)	9					
10 Exploited ex	kempt activity i	ncome (Schedule I)	10					
11 Advertising	income (Sche	dule J)	11					
12 Other incom	ne (See instru	ctions, attach schedule)	12					
		ough 12			890.			455,890
		Taken Elsewhere (See inst					Except for	or contributions,
dedu	ctions mus	t be directly connected with	the ur	nrelated busine	ess inco	me.)		
		directors, and trustees (Schedule K					14	
15 Salaries and	d wages	RECEIV		,			15	17,267
16 Repairs and	d maintenance	KECEIV	CU				16	
17 Bad debts				,			17	
18 Interest (att	tach schedule)	8 . MAY 2 5 2	በ ነቧ.	. 8			18	
19 Taxes and I	icenses			٠١٠٠١.			19	
20 Charitable	contributions (See instructions for limitation rules)		기준				
21 Depreciatio	n (attach Form	14562)QGDEN.	UT	° <u>2</u>	1			
22 Less depre	ciation claimed	1 4562) OGDEN . d on Schedule A and elsewhere on r	eturn=	,,,,, , [2:	2a		22b	<u> </u>
_							23	
		compensation plans						
25 Employee b	enefit program	is					25	
		(Schedule I)						
		Schedule J)						
		schedule)						177,929
		es 14 through 28						195,196
		ble income before net operating						260,694
		tion (limited to the amount on line 3						
		le income before specific deduction						260,694
		rally \$1,000, but see line 33 instru						1,000
		able income. Subtract line 33 instru					F	1,000
	maller of zero o		rom II	110 JZ II IIIIC J.	o is git	ater trian illie	32,	259,694

V 16-7.16

Pai	rt III	Tax Computation									
35	Organ	izations Taxable as Corporations. See instructions for tax computation Controlled group									
		ers (sections 1561 and 1563) check here See instructions and									
а	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 o	organization's share of (1) Additional 5% tax (not more than \$11,750) \$									
	(2) Add	litional 3% tax (not more than \$100,000)									
С			35c	84,5	531.						
36	Trusts	Taxable at Trust Rates. See instructions for tax computation Income tax on									
	the am	ount on line 34 from ☐ Tax rate schedule or ☐ Schedule D (Form 1041)	36								
37	Proxy 1		37								
38			38								
39	Tax on	Non-Compliant Facility Income. See instructions	39								
40		N. 1.1	40	84,5	531.						
Pai		Tax and Payments									
41 a	Foreign	n tax credit (corporations attach Form 1118, trusts attach Form 1116) 41a									
b		credits (see instructions)									
		al business credit Attach Form 3800 (see instructions)									
		for prior year minimum tax (attach Form 8801 or 8827)									
			11e								
42			42	84,5	531.						
43	Other ta		43								
44			44	84,5	531.						
45 a		nts A 2015 overpayment credited to 2016									
		stimated tax payments									
С		posited with Form 8868									
d		n organizations Tax paid or withheld at source (see instructions)									
		withholding (see instructions)									
f		for small employer health insurance premiums (Attach Form 8941)									
g		credits and payments Form 2439									
	F	orm 4136 Other Total ▶ 45g									
46			46	77,8	302.						
47			47		113.						
48			48	6,8	342.						
49			49								
50			50								
Par	t V	Statements Regarding Certain Activities and Other Information (see instructions)									
51	At any	time during the 2016 calendar year, did the organization have an interest in or a signature or o		Yes	No						
		financial account (bank, securities, or other) in a foreign country? If YES, the organization may									
	FinCEN	Form 114, Report of Foreign Bank and Financial Accounts If YES, enter the name of the fo	oreign country								
	here 🕨	·			Х						
52	During	the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign	n trust?		X						
		see instructions for other forms the organization may have to file									
<u>53</u>		he amount of tax-exempt interest received or accrued during the tax year ▶ \$									
	l tr	inder penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best ue, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	t of my knowledge	and bel	ief, it is						
Sig	n 📐		the IRS discuss	this	elum						
Her		July Wills 1919 Mr. nagre 4 11 Marie With	the preparer si		elow						
	s		nstructions)? X Y	98	No						
Paid	1	Print/Type preparer's name Privarer's signature Date Check	ıf PTIN								
	oarer	LAUREN R DENTON TOULD IN 1918 self-emp			0						
	Only		IN ►44-0160	260							
		Firm's address ▶ 200 E. MAIN ST. SUITE 700, FORT WAYNE, IN 46802 Phone n									
			Form 9	90-T	(2016)						

JSA

Form 990-T (2016)		_							F	Page 3		
Schedule A - Cost of Go	ods Sold. Er	ter method	of inventory	valuation	>							
1 Inventory at beginning of y			6			ar	6					
2 Purchases 2				7 Cost of goods sold. Subtract line								
	Cost of labor				line 5 En	ter here and in						
4a Additional section 263A co	a Additional section 263A costs					Part I, line 2						
(attach schedule)	4a		8			section 263A (v		espect to	Yes	No		
b Other costs (attach schedu	i i					or acquired for						
5 Total. Add lines 1 through	· · · —									х		
Schedule C - Rent Income	(From Real P	roperty ar	nd Personal	Property	Leased V	Vith Real Prope	rty)					
(see instructions)	•			• •		•	••					
Description of property												
(1)			<u> </u>		_							
(2)												
(3)						-		·				
(4)			-									
	2. Rent recei	ved or accrue	ed									
for personal property is more than 10% but not percentage of ren			ige of rent for pe					rectly connected with the income a) and 2(b) (attach schedule)				
(1)												
(2)												
(3)												
(4)								•				
Total		Total			·							
(c) Total income. Add totals of co						(b) Total deduction Enter here and or Part I, line 6, colu	n page 1					
Schedule E - Unrelated De			e instructions	.)		Fait I, lille 0, colu	min (B)					
Schedule L - Officiated B	ent-i mancea i	iicome (se		-	3. [Deductions directly co	nnected	with or allocal	ble to			
1. Description of del	t-financed property		2 Gross inco allocable to d				ced property					
·			prop		(a) Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule					
(1)					(,		· · · · · · · · · · · · · · · · · · ·				
(2)					-							
(3)	· · · · · · · · · · · · · · · · · · ·	_										
(4)									_			
4 Amount of average	5 Average adju	sted basis	0.01					AU	44			
acquisition debt on or of or allocable to allocable to debt-financed debt-financed property property (attach schedule)		4 divi			ross income reportable olumn 2 x column 6) 8 Allocable (column 6 x to 3(a) ar			of colum				
(1)				%								
(2)				%								
(3)				%								
(4)				%								
					Enter here Part I, lin	e and on page 1, e 7, column (A)	Enter Part	here and I, line 7, co	on pag olumn	зе 1, (В)		
Totals	ione included in co	· · · · · ·		▶	<u> </u>							

Form **990-T** (2016)

Form 990-T (2016)	BALL STA	TE UNI	VERSI	TY FOUND	ATION	, INC)24566 Page 4
Schedule F - Interest, Annu	uities, Royalties						tions (see	instruction	ns)	
1 Name of controlled organization	2. Employer identification numb	er 3.	3. Net unrelated income (loss) (see instructions) 4. Total o paymen			d included	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)						Ċ				
(2)										
(3)					ļ <u></u>		ļ			
Noneyeart Contails d Conse							<u> </u>			
Nonexempt Controlled Organia						10 B	art of column	O that is	11	Doductions dimethy
7. Taxable Income	8. Net unrelated in (loss) (see instruc	1		Total of specific payments made		ınclu	ded in the co	ntrolling		Deductions directly nected with income in column 10
(1)										
(2)										
(3)										
Totals						Ente	I columns 5 a r here and on I, line 8, colu	page 1,	Ente	d columns 6 and 11 er here and on page 1, t I, line 8, column (B)
Schedule G - Investment Ir	ncome of a Sec	tion 50	1(c)(7),	(9), or (17) Orga	nizatio	n (see inst	tructions)		
1. Description of income	2. Amount of	'income		3 Deduction directly contact (attach sch	nected		4 Set-asides (attach schedu		5. Total deduc	
(1)										-
(2)										
(3)										
(4)	 									
Totals ▶	Enter here and on p Part I, line 9, colum							Enter here and on page 1 Part I, line 9, column (8)		
Schedule I - Exploited Exe	empt Activity In	come. O	ther Ti	nan Adverti	sina In	come	(see instru	ctions)		
1. Description of exploited activity	2 Gross unrelated business income from trade or business	3 Exp dire connect produc unrel business	enses ctly led with ction of lated	4. Net incor from unrelat or business 2 minus col If a gain, o cols 5 thro	ne (loss) ed trade (column umn 3) ompute	5. Gross income from activity that is not unrelated business income		ble to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)	-	_	· -			-				
(2)										
(3)										
(4)										
Tatala	Enter here and on page 1, Part I, line 10, col (A)	Enter her page 1, line 10,	Part I,							Enter here and on page 1, Part II, line 26
Totals	Icome (see instr	uctione)		1						<u></u>
Part I Income From Per			Conso	lidated Rad				 _		
1. Name of periodical	2 Gross advertising income	3. D	4 Adver gain or (los ertising costs a gain, cocos 5 three		tising ss) (col ol 3) If mpute	5 Circulation income		n 6 Readership costs		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)				<u> </u>		<u> </u>				1
(2)				┑						7
(3)				7		_				7
(4)				1_						7
Totals (carry to Part II, line (5))										
				· · · · · ·						Form 990-T (2016)

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 penodical	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 ▶	-					
	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) ▶						

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			

Form 990-T (2016)

ATTACHMENT 1

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS

AUDA SECONDARY FUND, LP CAPITAL DYNAMICS REAL ESTATE III LP CARLYLE/RIVERSTONE GLOBAL ENERGY & POWER FUND III CARLYLE/RIVERSTONE III NISKA TEF INVESTMENT LLP CENTERFIELD CAPITAL PARTHERS II LP COMMONFUND CAPITAL INTERNATIONAL PARTNERS V, LP COMMONFUND CAPITAL INTERNATIONAL PARTNERS VI, LP COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VII COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VII COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VIII COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VIP COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VI, LP COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VII, LP COMMONFUND CAPITAL VENTURE PARTNERS VII, LP COMMONFUND CAPITAL VENTURE PARTNERS VIII, LP COMMONFUND CAPITAL VENTURE PARTNERS VIII, LP COMMONFUND REALTY PARTNERS I LP ENDOWMENT VENTURE PARTNERS I, LP ENTERPRISE PRODUCT PARTNERS, LP ENTERPRISE PRODUCT PARTNERS, LP MERCER PIP NEWBURY EQUITY PARTNERS LP PANTHEON GLOBAL SECONDARY FUND II, LP PLAINS ALL AMERICAN PIPELINE, LP QUANTUM ENERGY PARTNERS V LP RIVERSTONE/CARLYLE TE PARTNERS IV WALTON STREET REAL ESTATE VI ENERGY TRANSFER EQUITY LP BUCKEYE PARTNERS LP ANTERO MIDSTREAM DOMINION MIDSTREAM PARTNERS LP EQT GP HOLDINGS L9	438. 2,809. 104,1869,853. 9,49626. 74021,448. 33,665. 40,032. 4,489. 1,4243,525. 251. 1934551,780142241,387. 16,2162,398449856. 77,791364. 19,23246651. 3782169.
EQT MIDSTREAM PARTNERS LP	-106.
GENESIS ENERGY LP	-1,978.
MAGELLAN MIDSTREAM PARTNERS	-180.
MPLX LP	-2,188.
PHILLIPS 66 PARTNERSHIP LP	-236.
SHELL MIDSTREAM PARTNERS LP	-152.
SUNOCO LOGISTICS PARTNERS LP	-366.
TESORO LOGISTICS LP	-331.
VALERO ENERGY PARTNERS LP	-64.
WESTER GAS EQUITY PARTNERS LP	-146.
NGL ENERGY PARTNERS	-708.
RICE MIDSTREAM PARTNERS	-54.
WESTERN GAS PARTNERS	-175.

260,768.

INCOME (LOSS) FROM PARTNERSHIPS

FEDERAL ELECTIONS

DESCRIPTION: SECTION 59(E) (2) EXPENDITURES

FORM & LINE/INSTRUCTION REFERENCE: FORM 990-T, PART I, LINE 5

REGULATION REFERENCE: IRS SEC. 59(E) (1); REG. 1.59-1(B) (1)

PURSUANT TO IRC SECTION 59(E)(4), TAXPAYER HEREBY ELECTS TO CAPITALIZE AND AMORTIZE THE FOLLOWING EXPENDITURES OVER THE PERIOD TIME INDICATED.

TYPE OF EXPENDITURES: INTANGIBLE DRILLING COSTS CODE SECTION NO.: IRC SEC. 263(C) AMORTIZATION PERIOD: 5 YEARS (60 MONTHS)

TAXPAYER ELECTS TO CAPITALIZE AND AMORTIZE INTANGIBLE DRILLING COSTS REPORTED ON THE FOLLOWING K-1'S:

AUDA SECONDARY FUND LP EIN: 33-1015252 AMOUNT OF AMORTIZATION TAKEN IN CURRENT YEAR: \$61

CAPITAL DYNAMICS REAL ESTATE III, LP EIN: 20-5748590 AMOUNT OF AMORTIZATION TAKEN IN CURRENT YEAR: \$61

COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VI, LP EIN: 25-1910076 AMOUNT OF AMORTIZATION TAKEN IN CURRENT YEAR: \$18,454

COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VII, LP EIN: 51-0605779 AMOUNT OF AMORTIZATION TAKEN IN CURRENT YEAR: \$25,303

COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VIII, LP EIN: 26-3180228 AMOUNT OF AMORTIZATION TAKEN IN CURRENT YEAR: \$10,646

COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS V, LP EIN: 06-1605326 AMOUNT OF AMORTIZATION TAKEN IN CURRENT YEAR: \$40

COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VI, LP EIN: 16-1720029 AMOUNT OF AMORTIZATION TAKEN IN CURRENT YEAR: \$19

COMMONFUND CAPITAL VENTURE PARTNERS VII, LP EIN: 16-1720044 AMOUNT OF AMORTIZATION TAKEN IN CURRENT YEAR: \$20

PANTHEON GLOBAL SECONDARY FUND II, LP EIN: 20-0712793 AMOUNT OF AMORTIZATION TAKEN IN CURRENT YEAR: \$2

CARLYLE/RIVERSTONE GLOBAL ENERGY AND POWER FUND III LP EIN: 20-3716055 AMOUNT OF AMORTIZATION TAKEN IN CURRENT YEAR: \$6,443

QUANTUM ENERGY PARTNERS V, LP EIN: 26-2514715 AMOUNT OF AMORTIZATION TAKEN IN CURRENT YEAR: \$49,971

ATTACHMENT 2

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

INVESTMENT FEES TAX PREP FEES SIT WITHHOLDING 168,682.

9,180.

67.

PART II - LINE 28 - OTHER DEDUCTIONS

177,929.

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-ISC, 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

2016

Employer identification number BALL STATE UNIVERSITY FOUNDATION, INC. 35-6024566 Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I (g) Adjustments to gain (h) Gain or (loss) See instructions for how to figure the amounts to enter on (d) (e) Subtract column (e) from or loss from Form(s) the lines below Proceeds Cost column (d) and combine 8949, Part I, line 2, This form may be easier to complete if you round off cents to (sales once) (or other basis) the result with column (a) column (g) whole dollars 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 2 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 3,732. 3,732. 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-kind exchanges from Form 8824 5 6 Unused capital loss carryover (attach computation) 3,732. 7 Net short-term capital gain or (loss) Combine lines 1a through 6 in column h. Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (g) Adjustments to gain (h) Gain or (loss) See instructions for how to figure the amounts to enter on Subtract column (e) from the lines below or loss from Form(s) Proceeds Cost 8949. Part II. line 2. column (d) and combine This form may be easier to complete if you round off cents to (sales pnce) (or other basis) the result with column (a) whole dollars 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 Totals for all transactions reported on Form(s) 8949 10 Totals for all transactions reported on Form(s) 8949 83,441. 83,441. 11 Enter gain from Form 4797, line 7 or 9 107,949. 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 Capital gain distributions (see instructions) 14 15 Net long-term capital gain or (loss) Combine lines 8a through 14 in column h 191,390. Part III Summary of Parts I and II 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 16 3,732. 17 Net capital gain Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7).... 17 191,390. 18 Add lines 16 and 17 Enter here and on Form 1120, page 1, line 8, or the proper line on other returns If 195,122. Note: If losses exceed gains, see Capital losses in the instructions

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

Sales and Other Dispositions of Capital Assets ▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

OMB No. 1545-0074

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

Internal Revenue Service Name(s) shown on return Social security number or taxpayer identification number

BALL STATE UNIVERSITY FOUNDATION, INC.

35-6024566

Before you check Box A, B, 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 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

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 totals directly on Schedule D, line 1a; you aren't 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. If you have more short-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

(A) Short-term transactions (B) Short-term transactions (C) Short-term transactions	reported on F	orm(s) 1099-	B showing basis			e Note above)	
1 (a)	(b)	(c)	(d)	(e) Cost or other basis See the Note below	If you enter an a	(h) Gain or (loss) Subtract column (e)	
Description of property (Example 100 sh XYZ Co)	Date acquired (Mo , day, yr)	disposed of (Mo, day, yr)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	iny, to gain or loss. Imount in column (g) Is in column (f) rate instructions (g) Amount of adjustment	from column (d) and combine the result with column (g)
SHORT TERM CAPITAL GAINS	VAR	VAR	3,732.				3,732
	-						
						<u> </u>	
		-					
Totals. Add the amounts in columns negative amounts) Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C all columns).	l here and inc e is checked), lir	clude on your ne 2 (if Box B	3,732				3,732

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

For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2016)

Form 8949 (2016) •					Att	achment Sequence No	12A Page 2
Name(s) shown on return Name and SSN or taxpa	yer identification no	not required if sho	own on other side	Social sec		taxpayer identificat	
BALL STATE UNIVERSITY	FOUNDATIC	N. INC.				35-6024566	
Before you check Box D, E, or F below, s statement will have the same information broker and may even tell you which box	see whether yo on as Form 109	u received any					
Part II Long-Term. Transact transactions, see page	je 1.	-	-				
Note: You may aggr to the IRS and for w 8a; you aren't require	hich no adj	ustments o	r codes are red	quired Enter	the totals d	irectly on Sche	
You must check Box D, E, or F be	elow. Check	only one bo	x. If more than	one box appli	es for your lo	ng-term transac	
a separate Form 8949, page 2, for more of the boxes, complete as ma (D) Long-term transactions re (E) Long-term transactions re X (F) Long-term transactions no	iny forms wit eported on F eported on F	h the same b orm(s) 1099- orm(s) 1099-	oox checked as y -B showing basis B showing basis	ou need. was reported t	o the IRS (see		ge for one or
1 (a) Description of property	(b) Toperty Date acquired		(d) Proceeds (sales proce) (see instructions)	(e) Cost or other basis See the Note below	Adjustment, if If you enter an enter a co See the sepa		
(Example 100 sh XYZ Co)	(Mo , day, yr)			in the separate	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
LONG TERM CAPITAL GAINS	VAR	VAR	83,441				83,441.
				-			
					-		

negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E 83,441 83,441. above is checked), or line 10 (if Box F above is checked)▶ 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

JSA 6X2616 2 000 Form 8949 (2016)

2 Totals Add the amounts in columns (d), (e), (g), and (h) (subtract