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Exempt Organization Business Income Tax Return (and proxy tax under section 69326)   Colin and ending   Co		ر ا	0,53/_								
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B. Describe the organization's primary unrelated business activity   S-CORP EARNINGS	C B	ook value of all assets at nd of year					<u>ত</u>	lees.			. 🗆
During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group		<u> </u>	•		501(c	) corporation	n 🔽	501(c) tr	ust40	) (a) tr	rust Uotner trust
During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group   If Yes, 'enter the name and identifying number of the parent corporation   J The books are in care of ▼ CENTRAL VALLEY COMMINITY FOUND   Telephone number ▼ 559-226-5600   Part   Unrelated Trade or Business Income   (A) Income   (B) Expenses   (C) Net     1 a Gross recepts or sales   C				ess activity							
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Charitable contributions (See instructions for limitation rities)  Depreciation (attach Form 4562)  Less depreciation claimed on Schedule A and elsewhere on return  Depletion  Contributions to deferred compensation plans  Employee benefit programs  Excess exempt expenses (Schedule I)  Excess readership costs (Schedule J)  Other deductions (attach schedule)  Total deductions. Add lines 14 through 28.  Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13  Net operating loss deduction (limited to the amount on line 30)  Unrelated business taxable income before specific deduction Subtract line 31 from line 30  Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)  Unrelated business taxable income. Subtract line 32 if line 33 is greater than line 32, enter the smaller of zero or line 32  469, 918.  20  469, 918.  22b  22b  22b  22b  22c  22c  22c  22					OG	DEN, U	JT T	<u>-</u> }		$\longrightarrow$	
22 Less depreciation claimed on Schedule A and elsewhere on return  22 Depletion  23 Contributions to deferred compensation plans  25 Employee benefit programs  26 Excess exempt expenses (Schedule I)  27 Excess readership costs (Schedule J)  28 Other deductions (attach schedule)  29 Total deductions. Add lines 14 through 28  20 Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13  27 Net operating loss deduction (limited to the amount on line 30)  29 Unrelated business taxable income before specific deduction Subtract line 31 from line 30  30 428,626.  31 Unrelated business taxable income before specific deduction Subtract line 31 from line 30  32 428,626.  33 1,000.  34 427,626.			•	ation rules)				~=		20	469,918.
Depletion  Contributions to deferred compensation plans  Employee benefit programs  Excess exempt expenses (Schedule I)  Excess readership costs (Schedule J)  Other deductions (attach schedule)  Total deductions. Add lines 14 through 28  Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13  Net operating loss deduction (limited to the amount on line 30)  Unrelated business taxable income before specific deduction Subtract line 31 from line 30  Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)  Unrelated business taxable income. Subtract line 33 from line 32 If line 33 is greater than line 32, enter the smaller of zero or line 32  24  25  26  27  28  121,537.  29  642,417.  30  428,626.  31  428,626.  33  Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)  31  32  428,626.  33  427,626.			•				-				
Contributions to deferred compensation plans  Employee benefit programs  Excess exempt expenses (Schedule I)  Excess readership costs (Schedule J)  Other deductions (attach schedule)  Total deductions. Add lines 14 through 28  Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13  Net operating loss deduction (limited to the amount on line 30)  Unrelated business taxable income before specific deduction Subtract line 31 from line 30  Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)  Unrelated business taxable income. Subtract line 33 from line 32 If line 33 is greater than line 32, enter the smaller of zero or line 32  24  25  26  27  28  121,537.  29  642,417.  30  428,626.  31  428,626.  33  428,626.		•	claimed on Schedule A and else	ewnere on ret	urn		22a			-	<del></del>
Employee benefit programs  Excess exempt expenses (Schedule I)  Excess readership costs (Schedule J)  Other deductions (attach schedule)  Total deductions. Add lines 14 through 28  Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13  Net operating loss deduction (limited to the amount on line 30)  Unrelated business taxable income before specific deduction Subtract line 31 from line 30  Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)  Unrelated business taxable income. Subtract line 33 from line 32 If line 33 is greater than line 32, enter the smaller of zero or line 32  25  26  27  28  121,537.  29  642,417.  30  428,626.  31  428,626.  33  428,626.			forward assessment as along								<del></del>
Excess exempt expenses (Schedule I)  27 Excess readership costs (Schedule J)  28 Other deductions (attach schedule)  29 Total deductions. Add lines 14 through 28.  30 Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13  30 Unrelated business taxable income before specific deduction Subtract line 31 from line 30  31 Unrelated business taxable income before specific deduction Subtract line 31 from line 30  32 428,626.  33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)  34 Unrelated business taxable income. Subtract line 33 from line 32 If line 33 is greater than line 32, enter the smaller of zero or line 32  427  28 121,537.  29 642,417.  30 428,626.  31 1000.			•							$\vdash$	
27 Excess readership costs (Schedule J) 28 Other deductions (attach schedule) 29 Total deductions. Add lines 14 through 28. 30 Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13 30 Unrelated business taxable income before specific deduction Subtract line 31 from line 30 31 Unrelated business taxable income before specific deduction Subtract line 31 from line 30 32 428,626. 33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions) 34 Unrelated business taxable income. Subtract line 33 from line 32 If line 33 is greater than line 32, enter the smaller of zero or line 32 34 427,626.			-							$\vdash$	
Other deductions (attach schedule)  Total deductions. Add lines 14 through 28.  Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13  Net operating loss deduction (limited to the amount on line 30)  Unrelated business taxable income before specific deduction Subtract line 31 from line 30  Unrelated business taxable income before specific deduction Subtract line 31 from line 30  Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)  Unrelated business taxable income. Subtract line 33 from line 32 lf line 33 is greater than line 32, enter the smaller of zero or line 32  428  121,537.  29  642,417.  30  428,626.  31  428,626.		•									<del></del>
Total deductions. Add lines 14 through 28.  30 Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13  30 Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13  31 Unrelated business taxable income before specific deduction Subtract line 31 from line 30  32 Unrelated business taxable income before specific deduction Subtract line 31 from line 30  32 Unrelated business taxable income. Subtract line 33 instructions for exceptions)  33 1,000.  34 Unrelated business taxable income. Subtract line 33 from line 32 If line 33 is greater than line 32, enter the smaller of zero or line 32  34 427, 626.		•	•				SE	EE STA	TEMENT 2		121.537
30 Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13 30 428, 626.  31 Net operating loss deduction (limited to the amount on line 30) 31 32 Unrelated business taxable income before specific deduction Subtract line 31 from line 30 32 428, 626. 33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions) 33 1,000. 34 Unrelated business taxable income. Subtract line 33 from line 32 If line 33 is greater than line 32, enter the smaller of zero or line 32 34 427, 626.			•								
Net operating loss deduction (limited to the amount on line 30)  Unrelated business taxable income before specific deduction. Subtract line 31 from line 30.  Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions).  Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32.  31.  428,626.  32.  428,626.			•	•	eduction	on Subtract	t line 29	from lin	e 13		
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions) 33 1,000. 34 Unrelated business taxable income. Subtract line 33 from line 32 If line 33 is greater than line 32, enter the smaller of zero or line 32 427, 626.			•	-			_				
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32. 34. 427, 626.			•					30			
		=	•					maller of	ore or line 20		
					greater				ao or line 32	34	

Form 990-1	(2017) LYLES FOUNDATION	13	-7334864	Pa	age <b>2</b>
Part III	Tax Computation				
35 Organ	nizations Taxable as Corporations. See instructions for tax computation			-	
_	olled 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)  \$				
	organization's share of (1) Additional 5% tax (not more than \$11,750) \$				
<b>(2)</b> Ac	Iditional 3% tax (not more than \$100,000)				
c Incon	ne tax on the amount on line 34	▶	35 c		
36 Trust	s Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount				
on lin	e 34 from Tax rate schedule or X Schedule D (Form 1041)	▶	36	159,2	294.
37 Proxy	r tax. See instructions	•	37		
38 Alterr	native minimum tax		38		
39 Tax o	n Non-Compliant Facility Income. See instructions		39		
40 Total	Add lines 37, 38 and 39 to line 35c or 36, whichever applies	ļ	40	159,2	94.
	Tax and Payments		<del></del>	<u>-</u>	
		L,1 <u>5</u> 4.	<del></del>		
	credits (see instructions) . 41 b	L, 134.			
	· <u></u>	7,403.			
	t for prior year minimum tax (attach Form 8801 or 8827) . 41 d	7,405.			
	credits. Add lines 41a through 41d		41 e	ΩΓ	57.
	act line 41e from line 40		42	150,7	
	taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866		<del>"</del>	100, 1	<u> </u>
	ther (attach schedule)		43		
. —	tax. Add lines 42 and 43		44	150,7	737
	ents A 2016 overpayment credited to 2017 45 a		-	100, 1	<u> </u>
		0,000.			
	eposited with Form 8868 . 45 c	3,000.			
	gn organizations Tax paid or withheld at source (see instructions)  45 d				
	up withholding (see instructions).				
	t for small employer health insurance premiums (Attach Form 8941)  45f				
	credits and payments Form 2439				
· ~	orm 4136 ☐ Other Total ► 45 g				
	payments. Add lines 45a through 45g		46	170,0	ነበበ
	nated tax penalty (see instructions). Check if Form 2220 is attached	ं►□	47	1,0,0	,00.
	ue. If line 46 is less than the total of lines 44 and 47, enter amount owed.		48		
			49	10 (	
	payment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid			19,2	
		unded >	50		<u>0.</u>
Part V	Statements Regarding Certain Activities and Other Information (see instruction				,
	y time during the 2017 calendar year, did the organization have an interest in or a signature or other at			Yes	No
	cial account (bank, securities, or other) in a foreign country? If YES, the organization may have to fil		Form 114,		
Repo	rt of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here •			-	Х
52 Durin	g the tax year, did the organization receive a distribution from, or was it the grantor of, or trans	sferor to,	a foreign trust?		Х
If YE	S, see instructions for other forms the organization may have to file				
53 Enter	the amount of tax-exempt interest received or accrued during the tax year > \$	0.			ļ ,
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and belief it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which prep		of my knowledge and		<b></b>
Sign	l. / . n/) \	arer has any	May the IRS discus		n with
Here	Signature of officer Date Tritle		the preparer shown	below (see	e
	Signature of officer 1 Date Title		X	Yes	No
	Print/Type preparer's name Preparer's signature Date , Ci	heck if	PTIN		<del></del>
Paid		If-employed	P0019691	2	
Pre- parer		rm's EIN	77-0203007		
Use	TAZON, TATON AND CONTANT	, 3 LIIY	71-0203007		
Only	Firm's address 677 SCOTT AVENUE	hana =-	/EFO\ 000	05.40	
	330120, 311 3022	hone no	(559) 299-		2017
BAA	TEEA0202L 03/26/18		⊦orm	990-T (2	2017)

Schedule A — Cost of Good	s Sold. Enter method	of invei	ntory valuation	<b>&gt;</b>						
1 Inventory at beginning of year		6	6 Inventory at end of year 6							
2 Purchases	2		7			ls sold. Subtract				
3 Cost of labor	3		line 6 from line 5. Enter here and in Part I, line 2							
4 a Additional section 263A costs (attach	schedule)			and in	−art i,	line Z			Yes	No
	4 a		١,	D- 45-		-fli 2024 (th			162	NO
b Other costs (attach sch)	4 b		8			of section 263A (with Juced or acquired for				
5 Total. Add lines 1 through 4b	5			to the o				, ,		Х
Schedule C - Rent Income	(From Real Propert	ty and	Personal P	roperty	Leas	sed With Real Pr	opert	<b>y)</b> (see ı	nstruct	ions)
1 Description of property										
(1)										
(2)										
(3)										
(4)										
<del></del>	2 Rent received or accru					3(a) Deductions	direct	lv conne	cted wi	th
(a) From personal prope (if the percentage of rent for j property is more than 10% i more than 50%)	personal (if the	e perce ertv exc	al and persona intage of rent f ceeds 50% or it on profit or inc	or person the rent	personal (attach schedule)					
(1)										
(2)										
(3)										
(4)										
Total	Total					46 X T-4-1 d-444	_4_			
(c) Total income. Add totals of columere and on page 1, Part I, line 6,	` ' ' ' ' '	er ►				(b) Total deductions E here and on page 1, Part I, line 6, column (B)				
Schedule E - Unrelated Del	ot-Financed Incom	e (see i	instructions)							
1 Description of debt-	financed property		2 Gross incom		<b>3</b> D€	eductions directly cor debt-finan			allocab	le to
1 Description of descri	maneca property		or allocable to debt- financed property dep		depr	(a) Straight line depreciation (attach sch)		(b) Other deductions (attach schedule)		
(1)										
(2)	<del></del> -						1	_		
(3)										
(4)										
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted bas or allocable to debt-fina property (attach sched	anced	6 Colum divided column	by 5	rep	7 Gross income ortable (column 2 x column 6)	(	illocable column 6 umns 3(a	x total	of
(1)				%						
(2)				%						
(3)				%						
(4)				%						
					Ente Part	r here and on page 1 I, line 7, column (A)	Ente Part	r here an I, line 7,	d on pa colum	age 1, n (B)
Totals				•						
Total dividends-received deductio	ns included in column 8	3					•			
BAA		TEE	EA0203L 10/04/17					Form	990-T	(20 <u>17)</u>

Form 990-T (2017) LYLES F	OUNDA	TION								13-7	33486	4 Page 4
Schedule F - Interest, A	nnuiti	es, Royaltie	es, ar	nd Re	nts Fro	m C	ontrolled (	Orgai	nizations	(see in	struction	ns)
			Exem	pt Con	trolled Or	rganı	zations					
organization iden		Employer ntification number	tification ir		Net unrelated ncome (loss) ee instructions)		4 Total of specified payments made		5 Part of column that is included in the controlling organization's gross income			
(1)												
(2)												
(3)			,			<b> </b>						
(4)	L					<u>l</u>						
Nonexempt Controlled Organiz			1	<del></del> .			100 1 1		0 11 1		44.5	
inc		et unrelated come (loss) instructions)	paymer		f specified nts made	d	10 Part of colum included in the organization's gr		controlling		connect	uctions directly ed with income column 10
(1)												
(2)												
(3)												
(4)	ł									+		
Totals.							Add columns nere and on p 8, co		, Part I, line		and on	ns 6 and 11 Enter page 1, Part I, line olumn (B)
Schedule G - Investmen	nt Inco	me of a Se	ction	501(	c)(7), (9)	), or	(17) Orga	nizat	on (see in	structio	ns)	
1 Description of income	;	2 Amount	of inco	ome	direc	ctly c	uctions connected chedule)	(a	4 Set-aside ttach sched		set-	tal deductions and asides (column 3 olus column 4)
(1)												
(1) (2) (3)												
(3)							· · · · <u>· · · · · · · · · · · · · · · </u>					
(4)				-							F	1
Tatala		Enter here an Part I, line 9,	d on p colun	nn (A)							Part I,	nere and on page 1 line 9, column (B)
Totals  Schodula I Evaloited I	-	t Antivity In		- O+	har Tha	n A	dvorticina	Incor	<b>30</b> /222 mg	.trat.ar	<u> </u>	
Schedule I – Exploited I	zxemp	2 Gross				_	et income (loss)		-		penses	7 Evenes avament
1 Description of exploited	activity	unrelate busines income fro trade of busines	ed s om r	3 Expenses directly connected with production of unrelated business income		from or bu 2 mi	om unrelated trade   activ		s income from ity that is not ated business income	attributable to column 5		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)												
(2)												
(3)												
(4)		Enter here on page Part I, line column (	1, e 10,	on   Part	here and page 1, I, line 10, mn (B)			<u> </u>				Enter here and on page 1, Part II, line 26
Totals		<b>&gt;</b>										
Schedule J - Advertisir	ig Inco	me (See inst	tructio	ns)								
Part I Income From Pe	riodic	als Reporte	ed on	ı a Co	nsolida	ited	Basis					
1 Name of periodica	I	2 Gross advertisi income	ng	adv	Direct ertising osts	(los	dvertising gain or ss) (col 2 minus ol 3) If a gain, ompute cols 5 through 7		irculation ncome		adership osts	7 Excess readership costs (col 6 minus col 5, but not more than col 4)
(1)		-	$\longrightarrow$			4						<b>-</b>
(2)		<del> </del>	-	_		4		<u> </u>		<u> </u>		_
(3) (4)	_	<del>-</del>	-+			$\exists$			·			_
(4)						+					-	
Totals (carry to Part II, line (5)	))	•										

Part II Income From Periodica 7 on a line-by-line basis )	ils Reported or	a Separate E	Basis (For each p	eriodical listed in	Part II, fill in co	lumns 2 through
1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (col 6 minus col 5, but not more than col 4)
(1)					·	
(2)					_	
(3)					_	
(4)		-				
Totals from Part I						
	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1− 5)	·[					
Schedule K - Compensation o	f Officers, Dire	ctors, and Tri	<b>ustees</b> (see instri	uctions)	•	
1 Name	-		2 Title	3 Percent of time devote to business	ed to unrel	ation attributable ated business
					%	
					%	
					ે	
					%	
Total. Enter here and on page 1, Part I	I, line 14	-	···		<b>•</b>	
BAA	-	TEEA0204 L	10/04/17			Form <b>990-T</b> (2017)

## **SCHEDULE D**

(Form 1041)

Department of the Treasury Internal Revenue Service

LYLES FOUNDATION

Name of estate or trust

## **Capital Gains and Losses**

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

OMB No 1545-0092

2017

(A CHARITABLE TRUST) 13-7334864 Note: Form 5227 filers need to complete only Parts I and II Assets Held One Year or Less Short-Term Capital Gains and Losses — (h) Gain or (loss) See instructions for how to figure the amounts to enter on the (e) Cost (d) (g) Proceeds Adjustments to gain or Subtract col (e) from col lines below (or other basis) (d) & combine the result with col (g) This form may be easier to complete if you round off cents to (sales price) loss from Form(s) 8949, whole dollars Part I, line 2, col (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 Totals for all transactions reported on Form(s) 8949 with Box B checked Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 4 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 5 -18,240.Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2016 6 Capital Loss Carryover Worksheet Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h) Enter here and 7 on line 17, column (3) on the back -18,240.Long-Term Capital Gains and Losses — Assets Held More Than One Year Part II (h) Gain or (loss) See instructions for how to figure the amounts to enter on the (d) (e) Cost Proceeds Adjustments to gain or Subtract col (e) from col lines below (sales price) (or other basis) loss from Form(s) 8949 (d) and combine the result This form may be easier to complete if you round off cents to Part II, line 2, col (g) with col (g) 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 Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked 11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 11 12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 64,198. Capital gain distributions 13 14 Gain from Form 4797, Part I 14 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2016 Capital Loss Carryover Worksheet 15 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h) Enter here and on line 18a, 16 column (3) on the back 64,198.

Schedule	e D (Form 1041) 2017 LYLES FOUNDATION			13-7334	4864 Page <b>2</b>
Part II	Summary of Parts I and II Caution: Read the instructions before completing th	ıs part	(1) Beneficiaries' (see instructions)	(2) Estate's or trust's	<b>(3)</b> Total
17 Ne	t short-term gain or (loss)	17		-18,240.	-18,240.
18 Ne	t long-term gain or (loss):				
<b>a</b> To	tal for year	18a		64,198.	64,198.
<b>b</b> Un	recaptured section 1250 gain (see line 18 of the workshop	eet) 18b		13,596.	13,596.
c 28	% rate gain	18c			
19 To	tal net gain or (loss). Combine lines 17 and 18a	▶ 19		45,958.	45,958.
are net g	line 19, column (3), is a net gain, enter the gain on Forn gains, go to Part V, and <b>don't</b> complete Part IV if line 1: e <mark>et,</mark> as necessary	n 1041, lir. 9, column	ne 4 (or Form 990-T, P (3), is a net loss, con	art I, line 4a) If lines 18 aplete Part IV and the <b>C</b> a	la and 19, column (2), apital Loss Carryover
Part I\	Capital Loss Limitation			-	
<b>20</b> En	ter here and enter as a (loss) on Form 1041, line 4 (or Fo	rm 990-T, Pa	art I, line 4c, if a trust), the	smaller of	
	e loss on line 19, column (3) <b>or b</b> \$3,000			20	
Note: If	the loss on line 19, column (3), is more than \$3,000, <mark>or</mark> L <mark>oss Carryover Worksheet</mark> in the instructions to figure you	f Form 10 r capital lo	041, page 1, line 22 (oi oss carryover	r Form 990-T, line 34), is	s a loss, complete the
Part V					
	41 filers. Complete this part only if both lines 18a and 1			amount is entered in Pa	art I or Part II and there
is an en	try on Form 1041, line 2b(2), and Form 1041, line 22, is	more thar	n zero		
	: Skip this part and complete the Schedule D Tax Works				
	er line 18b, column (2) or line 18c, column (2) is more th			MODIFICE TO THE TOTAL TO A TOTAL TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE THE TOTAL TO T	FO 204
	i Form 1041, line 2b(1), and Form 4952, line 4g are more 10-T trusts. Complete this part only if both lines 18a and			WORKSHEET TAX 1	•
990-T. a	nd Form 990-T, line 34, is more than zero. Skip this partumn (2) or line 18c, column (2) is more than zero.				
<b>21</b> En	ter taxable income from Form 1041, line 22 (or Form 99	0-T, line 3	34) 21		
	ter the <b>smaller</b> of line 18a or 19 in column (2) t not less than zero				
	ter the estate's or trust's qualified dividends				
dıv	m Form 1041, line 2b(2) (or enter the qualified udends included in income in Part I of				
	rm 990-T) 23				
	d lines 22 and 23				
	the estate or trust is filing Form 4952, enter amount from line 4g, otherwise, enter -0-				
<b>26</b> Su	btract line 25 from line 24 If zero or less, enter -0-		26		
<b>27</b> Su	btract line 26 from line 21 If zero or less, enter -0-		27		
<b>28</b> En	ter the smaller of the amount on line 21 or \$2,550		28		
<b>29</b> En	ter the smaller of the amount on line 27 or line 28.		29		
<b>30</b> Su	btract line 29 from line 28 If zero or less, enter -0- This	amount	is taxed at 0%	▶ 30	
<b>31</b> En	iter the smaller of line 21 or line 26		31	! 	
<b>32</b> Su	btract line 30 from line 26		32		
<b>33</b> En	ter the smaller of line 21 or \$12,500		33		
<b>34</b> Ad	d lines 27 and 30		34		
<b>35</b> Su	obtract line 34 from line 33 If zero or less, enter -0-		35		
	iter the smaller of line 32 or line 35		36		
	ultiply line 36 by 15% (0 15)		[ ]	→ 37	-
	ster the amount from line 31		38	\ <del></del>	<del>                                     </del>
	ld lines 30 and 36		39		
			40		
<b>⊶</b> u ⊃u	ibtract line 39 from line 38 If zero or less, enter -0-		40	ı	1

Schedule D (Form 1041) 2017

41

42

43

44

41 Multiply line 40 by 20% (0 20)

43 Add lines 37, 41, and 42

42 Figure the tax on the amount on line 27 Use the 2017 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)

Figure the tax on the amount on line 21. Use the 2017 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)

Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36)

2017

## **FEDERAL STATEMENTS**

PAGE 1

LYLES FOUNDATION (A CHARITABLE TRUST)

13-7334864

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

 NAME
 GROSS INCOME
 DEDUCTIONS
 INCOME (LOSS)

 LYLES DIVERSIFIED, INC.
 \$ 1,204,542.
 \$ 144,908.
 \$ 1,059,634.

 TOTAL
 \$ 1,059,634.

STATEMENT 2 FORM 990-T, PART II, LINE 28 OTHER DEDUCTIONS

ACCOUNTING ADMINISTRATIVE COSTS DOMESTIC PRODUCTION ACTIVITIES DEDUCTION \$ 7,840. 71,404. 42,293. TOTAL \$ 121,537.