	9	0							0000	07	7
	(1)	74) ,		mo 270171		ın 15	2010	2939	ப் ე .	3500601
	000 T \X	(5) k		EXTENDED					ov Doturn	. 1	ONE No. 1545 0597
Form	990-T		exempt C		xy tax und				ax Return	'	OMB No 1545-0687
		_	1		-	er se					2017
		For ca		ther tax year beginning to www irs gov/F		otruot.		ending		-	ZU 11
	tment of the Treasury al Revenue Service	I ▶		•					ation is a 501(c)(3)	T _i	Open to Public Inspection for 501(c)(3) Organizations Only
ΑΓ	Check box if	_	T	ation (Chec						D Émplo	yer identification number
	address changed	1	, warne or organiz		N DOX II HUING C	nangou	una 500 mo				oyees' trust, see ctions)
B E	xempt under section	Print	HOLLING	SWORTH FU	JNDS, I	NC.				5	7-1003814
X] 501(c (3 .)	or	Number, street,	and room or suite	no. If a P.O. bo	x, see ir	structions				ated business activity codes instructions)
] 408(e) [220(e)	Туре	124 VER	DAE BLVD	, NO. 5	02				, ,	
	408A530(a)			ite or provincè, cou		r foreig	n postal cod	е			
	529(a)	L	GREENVI	•	29607					900	003
C at	ok value of all assets end of year 375,314,3	01	F Group exemp	tion number (See i		>					Other toward
<u>u D</u>	scribe the organization	0 T •	G Uneck organiz	ation type				501(c) trust	401(a)		Other trust
	iring the tax year, was							-	L CVIA	Ye	
	"Yes," enter the name a	-		-		แ-อนมอ	ulary contro	med group.		'6	3 [22] 140
_	ne books are in care of							Teleph	one number > 8	64-	627-8306
			de or Busine				(A) I	ncome	(B) Expenses	;	(C) Net
1 a	Gross receipts or sale	es							,		. Y
b	Less returns and allow	wances		c Balan	ice >	1c_			-		· .
2	Cost of goods sold (S	Schedule	e A, line 7)			2					
3	Gross profit. Subtract					3					
	Capital gain net incon					4a			,		
	Net gain (loss) (Form			tach Form 4797)		4b			-		
C	Capital loss deduction Income (loss) from p			itions (attach state)	mont)	4c 5	<i>-279</i>	,568.>			<279,568.>
5 6	Rent income (Schedu		iips and 5 corpora	ilions (attach state)	ilierit)	6	\275	, 30012	•		(275,5001)
7	Unrelated debt-finance		me (Schedule E)			7	59:	1,111.	463,3	77.	127,734.
8	Interest, annuities, ro		•	ntrolled organizatio	ons (Sch. F)	8		2,267.	•		192,267.
9	Investment income of					9					
10	Exploited exempt acti	vity inco	ome (Schedule I)			10					
11	Advertising income (S	Schedule	e J)			11					
12	Other income (See in:		•	e)		12	E 0	2 010	162.2	77	40 422
13 De	Total. Combine lines			ewhere (See	inata iationa fa	13		3,810.	463,3	<u>//.</u>	40,433.
1.0				ns must be direc					income)		
14	Compensation of off								·	14	10,114.
15	Salaries and wages	,		<u></u>	DEAL	- 98 28-	. ~			15	1,333.
16	Repairs and mainter	nance		Į,	REC	<u> IV</u> E	<u>.</u>		•	16	
17	Bad debts			ဖွ	16	1	100			17	
18	Interest (attach sche	edule)		230	NOV 2	3 20	18			18	
19	Taxes and licenses			-		<i></i>				19	671.
20	Charitable contributi	•		lımıtatıon rules)	OGDE	N. I	JT	t I	106 214	20	_
21	Depreciation (attach		•	بببا		,		21	186,314. 186,314.		0.
22	Less depreciation cla	aimed o	n Schedule A and	elsewhere on retur	'n			22a	100,314.	22b 23	· ·
23 24	Depletion Contributions to def	arrad co	impenestion plane							24	1,423.
25	Employee benefit pro		impensation plans							25	1,349.
26	Excess exempt expe	-	chedule 1)							26	
27	Excess readership c	•								27	
28	Other deductions (at									28	
29	Total deductions A	dd lines	14 through 28							29	14,890.
30	Unrelated business			-	luction. Subtrac	t line 2				30	25,543.
31	Net operating loss d		•	<u>-</u>				E STAT	EMENT 1	31	25,543.
32	Unrelated business						30			32	0.
33	Specific deduction (than line ac) antar the an	naller of zero or	33	1,000.
34	Unrelated business line 32	taxable	income Subtrac	a iine 33 trom linë	oz. II line 33 i\$	greater	man ine 32	., enter the Sh	naner of zero of	34	0.
	11110 UZ									34	r4 000 T (0047

Form 990-T (2017)	HOLLINGSWORTH FUND	S, INC.		57-1	003814		Page
Part III	Tax Computation						
35 Orga	nizations Taxable as Corporations See instr	uctions for tax computation.					
Contr	olled group members (sections 1561 and 156	3) check here 🕨 🔲 See instructions	s and:				
a Enter	your share of the \$50,000, \$25,000, and \$9,9	25,000 taxable income brackets (in that or	rder):				
(1)	\$ (2) \[\\$	(3) [\$					
b Enter	organization's share of. (1) Additional 5% tax	x (not more than \$11,750) \$			1 1		
(2) A	dditional 3% tax (not more than \$100,000)	[\$			ll		
c Incor	ne tax on the amount on line 34				➤ 35c		0.
36 Trust	s Taxable at Trust Rates See instructions for	r tax computation. Income tax on the amo	unt on line 3	4 from:			
	Tax rate schedule or Schedule D (For	rm 1041)		I	▶ 36		
37 Proxy	tax See instructions			i	37		
38 Alteri	native minimum tax				38		
39 Tax o	n Non-Compliant Facility Income See instru	ictions			39		
	. Add lines 37, 38 and 39 to line 35c or 36, wh				40		0.
	Tax and Payments		-				
	gn tax credit (corporations attach Form 1118;	trusts attach Form 1116)	41a				
	credits (see instructions)	,	41b				
	ral business credit. Attach Form 3800		41c				
	t for prior year minimum tax (attach Form 880	11 or 8827)	41d				
	credits Add lines 41a through 41d	7. 6. 6627)	710		41e		
	ract line 41e from line 40				42		0.
		Form 8611 Form 8697 Form	n 8866 🗀	Other (attach schedu			
	tax Add lines 42 and 43	FOIII 60 11 FOIII 6097 FOIII	11 0000 [J Other (attach schedu	44		0.
			450		44		
_	nents: A 2016 overpayment credited to 2017		45a		\dashv		
	estimated tax payments		45b				
	leposited with Form 8868		45c				
	gn organizations; Tax paid or withheld at sour	ce (see instructions)	45d				
	up withholding (see instructions)		45e		⊣		
	t for small employer health insurance premiur		45f				
·	• • • =	orm 2439					
		ther Total	► 45g				
	payments. Add lines 45a through 45g				46		
	nated tax penalty (see instructions). Check if Fo				47		
48 Tax	lue. If line 46 is less than the total of lines 44	and 47, enter amount owed			48		0.
49 Over	payment If line 46 is larger than the total of li	ines 44 and 47, enter amount overpaid			► 49		<u> </u>
	the amount of line 49 you want: Credited to 2			Refunded	▶ 50		
Part V	Statements Regarding Certain	Activities and Other Informa	tion (see	e instructions)			
51 At an	y time during the 2017 calendar year, did the	organization have an interest in or a signal	ture or other	authority		Yes	s No
over	a financial account (bank, securities, or other)	in a foreign country? If YES, the organiza	tion may hav	re to file			
FinCl	N Form 114, Report of Foreign Bank and Fina	incial Accounts. If YES, enter the name of	the foreign c	ountry			
here	>						X
52 Durir	ng the tax year, did the organization receive a c	distribution from, or was it the grantor of,	or transferor	to, a foreign trust?			X
If YE	S, see instructions for other forms the organiz	ation may have to file.					
53 Enter	the amount of tax-exempt interest received or	r accrued during the tax year >\$				<u> </u>	
U	nder penalties of perjury, I declare that I have examined orrect, and complete Declaration of perjury (other than	this return, including accompanying schedules an	d statements, a	and to the best of my knowledge	owledge and belief	it is true,	
Sigit	orrect, and complete Declaration of Separer (other than	n taxpayer) is based on all information of which pre	:parer nas any k	rnowleage	May the IRS disc		n web
Here	While It Hotel	11/12/2018 CFO/	(COO		the preparer show		
7	Signature of officer	Date Title			instructions)?	Yes	No
	Print/Type preparer's name	Preparer's signature	Date	Check	ıf PTIN		
Daid	Type proparer o name	The state of the s		self- emplo	- 1		
Paid				33 3	,		
Preparer	Firm's name		<u>. </u>	Firm's EIN	•		
Use Only	Timis name			7 11111 3 2111	-		
	Firm's address			Phone no			
	i ii iii 3 auul 633 💌			L Holle Ho			

Schedule A - Cost of Good	s Sold. Enter	method of invento	ory valuation N/A	· · · · · · · · · · · · · · · · · · ·	
1 Inventory at beginning of year	1		6 Inventory at end of year		6
2 Purchases	2		7 Cost of goods sold. Su	btract line 6	
3 Cost of labor	3		from line 5. Enter here a	and in Part I,	
4a Additional section 263A costs			line 2		7
(attach schedule)	4a		8 Do the rules of section	263A (with respect to	Yes No
b Other costs (attach schedule)	4b		property produced or a	cquired for resale) apply to	<u></u>
5 Total Add lines 1 through 4b	5		the organization?		
Schedule C - Rent Income (see instructions)	(From Real	Property and I	Personal Property L	eased With Real Prop	erty)
1 Description of property					
(1)					
(2)					
(3)					
(4)					
		ed or accrued		3(a) Deductions directly	connected with the income in
(a) From personal property (if the personal property is more 10% but not more than 50%	e than	of rent for per	d personal property (if the percentag sonal property exceeds 50% or if is based on profit or income)	ge columns 2(a) a	nd 2(b) (attach schedule)
(1)					
(2)					
(3)					
(4)					
Total	0.	Total		0.	
(c) Total income Add totals of columns here and on page 1, Part I, line 6, columns	ın (A)			(b) Total deductions Enter here and on page 1, Part I, line 6, column (B))
Schedule E - Unrelated De	bt-Financed	Income (see in	nstructions)		
			Gross income from or allocable to debt-	3 Deductions directly cor to debt-finan	ced property
1 Description of debt-	inanced property		financed property	(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
			0.60 0.10	STATEMENT 3	STATEMENT 4
(1) OFFICE BUILDING			968,240.	209,877	. 549,136.
(2)			<u>.</u>	<u> </u>	-
(3)					-
(4)	T -				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) STATEMENT 5	of or a	adjusted basis allocable to inced property h schedule) MENT 6	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1) 3,682,663.		,032,281.	61.05%	591,111	. 463,377.
(2)	<u> </u>	, , , , , , , , ,	%		
(3)			%		
(4)			%		
	-			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Totals			•	591,111	. 463,377.
Total dividends-received deductions	ıncluded ın columi	n 8			0.

Schedule F - Interest, A	uitie	, rioyan	ail		Controlled O				SEE INST	ructions	
Name of controlled organization	on	2. Employer identification number			elated income		al of specified	5 Part of c	olumn 4 th	nat is	6 Deductions directly connected with income
•				(loss) (see	instructions)	payn	nents made	included in organization			in column 5
(1) VERDAE DEVELOR	PMENT								·		
(2) INC		20-18	08028								
(3)											
(4)			_								
Nonexempt Controlled Organiz	ations			•							
7. Taxable Income	8. Net u	inrelated incom see instructions		9 Total	of specified payi made	ments	10 Part of colu in the controll gross	mn 9 that is in ing organizations income	cluded on's		uctions directly connected income in column 10
(1)											
(2) <500,059.>		<500,0	059.>		192,	267.		192,2	67.	_	
(3)		,		<u> </u>						_	
(4)	-	,		<u> </u>					- t		· ·
				<u> </u>			Enter here and	column (A)		Enter he	d columns 6 and 11 re and on page 1, Part I, ine 8, column (B)
Totals						•		192,2	67.		0.
Schedule G - Investmen		ne of a S	Section	501(c)(7	'), (9), or (17) Org	janization				
(see instr	uctions)				<u>-</u> -		3 Deductio	ons			5 Total deductions
1. Descr	iption of inco	ome			2 Amount of	ıncome	directly conne	ected	4. Set-a (attach sc		and set-asides (col 3 plus col 4)
(1)											<u> </u>
(2)											
(3)											
(4)											
(4)			-		Enter here and Part I, line 9, co			1			Enter here and on page 1, Part I, line 9, column (B)
					Part I, line 9, cc	ilumn (A)					
Totals				•		0.					0.
Schedule I - Exploited I	-	Activity	Income	e, Other	Than Adv	ertisin/	g Income				
Description of exploited activity	2 ounrelated	Gross I business ne from business	directly of with pro of unr	penses connected oduction related s income	4 Net inconfrom unrelated business (cominus colum gain, comput through	trade or olumn 2 n 3) If a e cols 5	5 Gross inco from activity is not unrela business inco	that ted	6 Expe attributa colum	ble to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(2)											
(3)											
(4)											
Totals •	page 1	re and on I, Part I, , col (A)	page 1	re and on I, Part I, col (B)							Enter here and on page 1, Part II, line 26
Schedule J - Advertisir	ng Incor		nstruction		1						
Part I Income From F					solidated	Basis					
1 Name of periodical		2 Gross advertising income		3 Direct ertising costs	or (loss) (c col 3) if a g	tising gain ol 2 minus ain comput hrough 7	5 Circula e income		6 Reade		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) (2)						•					
(3) (4)											
Totals (carry to Part II, line (5))	•		0.	0	•						0.
											Form 990-T (2017

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in

Columns 2 triroug	n 7 on a	i iine-by-iine basis)					
. 1. Name of periodical	•	2. Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (cot 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	•	0.	0.	· 医生活不管	公路公司	对外影像区分	0.
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	•	0.	0.			The street of the street	0.
Calcadada V Camanan			Sina akawa awal	Tweeters			

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2. Title	3 Percent of time devoted to business	Compensation attributable to unrelated business
(1) W. KENNETH HUNT, III	CFO	5.00%	7,988.
(2) JAMES W. TERRY	PRESIDENT & CEO	1.00%	2,126.
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14	 	<u> </u>	10,114.

Form 990-T (2017)

Form 4626 Department of the Treasury Internal Revenue Service

Alternative Minimum Tax - Corporations

► Attach to the corporation's tax return

► Go to www irs gov/Form4626 for instructions and the latest information.

OMB No 1545-0123

2017
Employer identification number

	HOLLINGSWORTH FUNDS, INC.					57-1003814
	Note: See the instructions to find out if the corporation is a small corporation exempt					
	from the alternative minimum tax (AMT) under section 55(e).					
1	Taxable income or (loss) before net operating loss deduction				1	24,543.
2	Adjustments and preferences.					
i	Depreciation of post-1986 property				2a	
1	Amortization of certified pollution control facilities				2b	<u> </u>
(Amortization of mining exploration and development costs				2c	
(Amortization of circulation expenditures (personal holding companies only)				2 d	
(Adjusted gain or loss				2e	
1	Long-term contracts			:	2f	
(Merchant marine capital construction funds				29	
- 1	Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)				2h	
i	Tax shelter farm activities (personal service corporations only)				2i	
į	Passive activities (closely held corporations and personal service corporations only)				2j	
I	Loss limitations				2k	
1	Depletion				21	
ı	n Tax-exempt interest income from specified private activity bonds				2m	
١	Intangible drilling costs				2n	
	Other adjustments and preferences				20	24 542
3	Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20				3	24,543.
4	Adjusted current earnings (ACE) adjustment:	1.1		24 542	-	
	A ACE from line 10 of the ACE worksheet in the instructions	4a		24,543.		
	Subtract line 3 from line 4a If line 3 exceeds line 4a, enter the difference as a	,		0.		
	negative amount. See instructions	4b		0.		
	Multiply line 4b by 75% (0.75). Enter the result as a positive amount	4c				
	1 Enter the excess, if any, of the corporation's total increases in AMTI from prior					
	year ACE adjustments over its total reductions in AMTI from prior year ACE					
	adjustments. See instructions. Note : You must enter an amount on line 4d	4d				
	(even if line 4b is positive) ACE adjustment.					
	If line 4b is zero or more, enter the amount from line 4c	_				
	If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount	•			4e	0.
5	Combine lines 3 and 4e If zero or less, stop here; the corporation does not owe any AMT	J			5	24,543.
6	Alternative tax net operating loss deduction. See instructions	SI	TATEME	NT 7	6	22,089.
7	Alternative minimum taxable income Subtract line 6 from line 5. If the corporation held a				۲	
•	interest in a REMIC, see instructions				7	2,454.
8	Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on	line 8c):				
	Subtract \$150,000 from line 7. If completing this line for a member of a controlled					
	group, see instructions. If zero or less, enter -0-	8a		0.		
	Multiply line 8a by 25% (0.25)	8b		0.		
	Exemption. Subtract line 8b from \$40,000. If completing this line for a member of a control	lled				
	group, see instructions. If zero or less, enter -0-				8c	40,000.
9	Subtract line 8c from line 7. If zero or less, enter -0-				9	0.
10	Multiply line 9 by 20% (0.20)				10	0.
11	Alternative minimum tax foreign tax credit (AMTFTC). See instructions				11	
12	Tentative minimum tax. Subtract line 11 from line 10				12	0.
13	Regular tax liability before applying all credits except the foreign tax credit				13	
14	Alternative minimum tax Subtract line 13 from line 12. If zero or less, enter -0 Enter her		11			_
	Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	n			14	0.
ILA / /	For Departure Production Act Motion, one connects instructions					Form 4626 (2017

Adjusted Current Earnings (ACE) Worksheet

	See ACE Worksneet I	nstructions.			
A Decide should AMATE Sets the core of feet by	0.455				24 542
1 Pre-adjustment AMTI. Enter the amount from lin	e 3 of Form 4626		,	1	24,543.
2 ACE depreciation adjustment:		1 - 1	106 214		
a AMT depreciation		2a	186,314.		
b ACE depreciation:	106.3	14			
(1) Post-1993 property	2b(1) 186,3	14.			
(2) Post-1989, pre-1994 property	2b(2)		:		
(3) Pre-1990 MACRS property	2b(3)		1		
(4) Pre-1990 original ACRS property	2b(4)				
(5) Property described in sections					
168(f)(1) through (4)	2b(5)				
(6) Other property	2b(6)				
(7) Total ACE depreciation. Add lines 2b(1) th	rough 2b(6)	2b(7)	186,314.		
c ACE depreciation adjustment. Subtract line 2b(7)	from line 2a			2c	
3 Inclusion in ACE of items included in earnings ar	d profits (E&P):				
a Tax-exempt interest income		3a			
b Death benefits from life insurance contracts		3b			
c All other distributions from life insurance contract	ts (including surrenders)	3c			
d Inside buildup of undistributed income in life ins	urance contracts	3d			
e Other items (see Regulations sections 1.56(g)-1	c)(6)(III) through (IX)				
for a partial list)		3e			
f Total increase to ACE from inclusion in ACE of ite	ems included in E&P. Add lines 3a ti	hrough 3e		3f	
4 Disallowance of items not deductible from E&P:					
a Certain dividends received		4a			
Dividends paid on certain preferred stock of public utilities	that are deductible under section 247 (as				
affected by P.L. 113-295, Div. A, section 221(a)(41)(A). Dec	19, 2014, 128 Stat 4043)	4b			
c Dividends paid to an ESOP that are deductible ur	ider section 404(k)	4c			
d Nonpatronage dividends that are paid and deduc	tible under section				
1382(c)		4d			
e Other items (see Regulations sections 1.56(g)-16	d)(3)(i) and (ii) for a				
partial list)		4e		ł	
f Total increase to ACE because of disallowance of	items not deductible from E&P. Ad	d lines 4a through 4	e	4f	
5 Other adjustments based on rules for figuring E&	ιP:				
a Intangible drilling costs		5a			
b Circulation expenditures		5b			
c Organizational expenditures		5c			
d LIFO inventory adjustments		5d			
e Installment sales		5e			
f Total other E&P adjustments. Combine lines 5a t	hrough 5e			5f	
6 Disallowance of loss on exchange of debt pools	-			6	
7 Acquisition expenses of life insurance companies	s for qualified foreign contracts			7	
8 Depletion	1			8	
9 Basis adjustments in determining gain or loss fro	om sale or exchange of pre-1994 pre	operty		9	
10 Adjusted current earnings Combine lines 1, 2c	- · · · · · · · · · · · · · · · · · · ·		ne 4a of		
Form 4626	, , ,			10	24,543.

FORM 990-T	NET	OPERATING LOS	DEDUCTI	ON	STATEMENT 1
TAX YEAR	. LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED		OSS AINING	AVAILABLE THIS YEAR
12/31/02	319,386.	319,386		0.	0.
12/31/03	828,294.	828,294	•	0.	0.
12/31/04	776,270.	614,578	1	161,692.	161,692.
12/31/05	659,082.	0	•	659,082.	659,082.
12/31/06	256,621.	0	ì	256,621.	256,621.
12/31/07	403,174.	0	•	403,174.	403,174.
12/31/14	40,566.	0	•	40,566.	40,566.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	1	,521,135.	1,521,135.
FORM 990-T	INCO	ME (LOSS) FROM	PARTNERS	HIPS	STATEMENT 2
FORM 990-T			PARTNERS S INCOME	HIPS DEDUCTIONS	STATEMENT 2 NET INCOME OR (LOSS)
PARTNERSHIP UBTI FROM K PRIVATE EQU	NAME	GROS: K FUND		DEDUCTIONS	NET INCOME
PARTNERSHIP UBTI FROM K PRIVATE EQU III UBTI FROM K	NAME - NAME - DEUTSCHE BAN - JITY GLOBAL SELECT - DEUTSCHE BAN	GROS: K FUND	SINCOME	DEDUCTIONS	NET INCOME OR (LOSS)
PARTNERSHIP UBTI FROM K PRIVATE EQU III UBTI FROM K	NAME	GROS: K FUND	SINCOME	DEDUCTIONS	NET INCOME OR (LOSS)
PARTNERSHIP UBTI FROM K PRIVATE EQU III UBTI FROM K PRIVATE EQU IV	NAME	GROS: FUND K FUND FUND	S INCOME <865.>	DEDUCTIONS 0.	NET INCOME OR (LOSS)
PARTNERSHIP UBTI FROM K PRIVATE EQU III UBTI FROM K PRIVATE EQU IV UBTI FROM K	NAME	GROS: FUND K FUND FUND	<pre>S INCOME <865.> <2.></pre>	DEDUCTIONS 0.	NET INCOME OR (LOSS)
PARTNERSHIP UBTI FROM K PRIVATE EQU III UBTI FROM K PRIVATE EQU IV UBTI FROM K INVESTMENT UBTI FROM K	NAME C-1 - DEUTSCHE BAN UITY GLOBAL SELECT C-1 - DEUTSCHE BAN UITY GLOBAL SELECT C-1 - MEDPROPERTIE PARTNERSHIP, LP C-1 - MEDCORE REAL	GROSS K FUND K FUND S TY, LP <1	S INCOME <865.>	DEDUCTIONS 0. 0.	NET INCOME OR (LOSS)
PARTNERSHIP UBTI FROM K PRIVATE EQU III UBTI FROM K PRIVATE EQU IV UBTI FROM K INVESTMENT UBTI FROM K UBTI FROM K ASSETS FUND	NAME C-1 - DEUTSCHE BAN JITY GLOBAL SELECT C-1 - DEUTSCHE BAN JITY GLOBAL SELECT C-1 - MEDPROPERTIE PARTNERSHIP, LP C-1 - MEDCORE REAL C-1 - CORRUM CAPIT D, LP	GROSS K FUND K FUND S TY, LP AL REAL	<pre>< INCOME</pre>	DEDUCTIONS 0. 0.	NET INCOME OR (LOSS) <865.:
PARTNERSHIP UBTI FROM K PRIVATE EQU III UBTI FROM K PRIVATE EQU IV UBTI FROM K INVESTMENT UBTI FROM K UBTI FROM K ASSETS FUND	NAME C-1 - DEUTSCHE BAN JITY GLOBAL SELECT C-1 - DEUTSCHE BAN JITY GLOBAL SELECT C-1 - MEDPROPERTIE PARTNERSHIP, LP C-1 - MEDCORE REAL C-1 - CORRUM CAPIT O, LP C-1 - CORRUM CAPIT	GROSS K FUND K FUND SS TY, LP CAL REAL	<pre><865.> <2.> 1,988. 34,052.></pre>	DEDUCTIONS 0. 0. 0.	NET INCOME OR (LOSS) <865.2 1,988. <134,052.2

FORM 990-T	SCHEDULE E - DEPRECIA	ATION DEDUCT	ION	STATEMENT 3
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION AMORTIZATION	- SUBTOTAL	- 1	186,314. 23,563.	209,877.
TOTAL OF FORM 9	90-T, SCHEDULE E, COLUMN	3(A)		209,877.

FORM 990-T	SCHEDULE E - OTHER	DEDUCTIONS		STATEMENT 4
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
REPAIRS & MAINT PROPERTY MANG FET PROPERTY TAXES & UTILITES & INSURA INTEREST EXPENSE MISCELLANEOUS	LICENSES		156,943. 39,647. 105,741. 108,439. 137,812. 554.	
	- SUBTOTAL -	1		549,136.
TOTAL OF FORM 99	0-T, SCHEDULE E, COLUMN	3(B)		549,136.

FORM 990-T AVERAGE ACQUISITION ALLOCABLE TO DEBT-FI			STATEMENT 5
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
AVERAGE AQUISITION DEBT - SUBTOTAL	- 1	3,682,663.	3,682,663.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN	4		3,682,663.

FORM 990-T AVERAGE ADJUSTED IN ALLOCABLE TO DEBT-FIRM	STATEMENT 6		
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
AVERAGE ADJUSTED BASIS - SUBTOTAL -	1	6,032,281.	6,032,281.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN !	5		6,032,281.

FORM 4626	ALTERNATI	VE MINIMUM TAX NO	OL DEDUCTION	STATEMENT		
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING			
12/31/02	319,386.	319,386.	0.			
12/31/03	828,294.	828,294.	0.			
12/31/04	776,270.	496,262.	280,008.			
12/31/05	659,082.	0.	659,082.			
12/31/06	256,621.	0.	256,621.			
12/31/07	403,174.	0.	403,174.			
12/31/14	40,566.	0.	40,566.			
AMT NOL CA	RRYOVER AVAILABLE TI	HIS YEAR	1,639,451.			

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

E-

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OMB No 1545-0172

Department of the Treasury Internal Revenue Service (99)

► Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return Business or activity to which this form relates

Identifying number

HOLLINGSWORTH FUNDS, IN	OFF	ICE	BUIL	57-1003814				
Part 1 Election To Expense Certain Property	Under Section 17	9 Note: If yo	u have an <u>y l</u> is	ted pr	operty, c	omplete Part \	√ before y	
1 Maximum amount (see instructions)							1	510,000.
2 Total cost of section 179 property placed	2							
3 Threshold cost of section 179 property b	efore reduction	ın lımıtatıon					3	2,030,000.
4 Reduction in limitation Subtract line 3 fro	om line 2 If zero	or less, enter	r -0·				4	
5 Dollar limitation for tax year Subtract line 4 from line 1	If zero or less, enter -	D- If married filing	separately, see in	struction	ns		5	
6 (a) Description of prop	ost	`~**						
				_				
7 Listed property Enter the amount from li	ne 29				7			
8 Total elected cost of section 179 propert	y Add amounts	ın column (c)	, lines 6 and 1	7			8	
9 Tentative deduction Enter the smaller of	of line 5 or line 8						9	
10 Carryover of disallowed deduction from I	ine 13 of your 20	016 Form 456	52				10	
11 Business income limitation. Enter the sm	aller of business	income (not	less than zero	o) or lir	ne 5		11	
12 Section 179 expense deduction Add line	es 9 and 10, but	don't enter m	nore than line	11			12	
13 Carryover of disallowed deduction to 20	8 Add lines 9 a	nd 10, less lii	ne 12	▶	13			
Note: Don't use Part II or Part III below for his	sted property In:	stead, use Pa	art V					
Part II Special Depreciation Allowan	ce and Other De	epreciation (Don't include	e listed	property	/)		
14 Special depreciation allowance for qualif	ed property (oth	er than listed	l property) pla	iced in	service o	during		
the tax year							14	
15 Property subject to section 168(f)(1) elec	tion						15	
16 Other depreciation (including ACRS)							16	
Part III MACRS Depreciation (Don't II	nclude listed pro	perty) (See i	nstructions)					
		Se	ction A			<u>.</u>		
17 MACRS deductions for assets placed in	service in tax ye	ars beginning	before 2017				17	
18 If you are electing to group any assets placed in service	during the tax year in	ito one or more ge	eneral asset accou	nts, ched	k here	▶ □		
Section B - Assets F						ral Depreciat	ion Syste	em
(a) Classification of property	(b) Month and year placed in service	(business/in	depreciation vestment use instructions)		Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property								
b 5-year property					-			-
c 7-year property								
d 10-year property								
e 15-year property								
f 20-year property	,							
g 25-year property	'			2	5 yrs		S/L	
3	/				5 yrs	ММ	S/L	
h Residential rental property	,			1	' 5 yrs	MM	S/L	
	,			1	9 yrs	MM	S/L	
 Nonresidential real property 	',				- , ,,,	MM	S/L	
Section C - Assets Pl	aced in Service	Durina 2017	Tax Year Us	ina th	e Alterna			tem
20a Class life		3				1	S/L	
b 12-year			· -	1	2 yrs		S/L	
c 40-year	,				0 yrs	ММ	S/L	
Part IV Summary (See instructions)	· /	<u> </u>			- 7.0	1 141141	<u> </u>	1
21 Listed property Enter amount from line 2							21	
22 Total. Add amounts from line 12, lines 1		ac 10 and 00	lun column (a)	and I	ına 21			
Enter here and on the appropriate lines of	of your return Pa	artnerships ar	nd S corporat				22	186,314.
23 For assets shown above and placed in s	ervice during the	current year	, enter the					,

HOLLINGSWORTH	FUNDS,	INC.
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Form 4562 (2017)	HOL	LINGSWO	RTH	FUND.	S, I	NC.					<u> 57-</u>	<u> 1003</u>	814	Page 2
recreation, or	rty (Include a amusement) v vehicle for w				·			•	·	• •	•			•
(a) through (c) of Section A,	<u>, all of Section</u>	B, and S	Section (C if appli	icable								
	- Depreciation				ution: S	See the I	nstruct	tions for lii	mits for p	asseng	er auton	nobiles)		
24a Do you have evidence to			ent use cla	ıımed?	<u> </u>	es _	_ No	24b If "Y			nce writt	ten?	_ Yes	No
(a)					Bas	(e) as for depre	eciation	(f)	1	g)		(h)		(i) cted
(list vehicles first)	(list vehicles first) placed in investmen			Cost or her basis	l (bus	siness/inve	stment	Recovery period		hod/ ention	Depreciation deduction		section	оп 179
	service	use percenta	yc			use only			<u> </u>	_		_	C	ost
25 Special depreciation a	,		property	placed	ın servic	e during	the ta	x year and	1				}	
used more than 50% ii 26 Property used more th										25				
26 Property used more th	1211 30% III a q												ī	
	 		% %						-					
	 	 	%											
27 Property used 50% or	less in a qualif	·			1			<u> </u>	<u> </u>					
Zi Troperty asea som or	Toss iii a quaii	1	%					T	S/L				<u> </u>	
	1	1	%						S/L -				1	
		†	%						S/L -				1	
28 Add amounts in colum	in (h) lines 25.			and on	line 21	page 1		1	10/2	28			1	
29 Add amounts in colum	• •	•				pago .						29		
29 / lad difficultion fooduli			Section I			on Use	of Veh	icles				, 20		
Complete this section for v	ehicles used l								related	person	lf vou pi	rovided v	vehicles	
to your employees, first an		, , ,	• •					•						
to your omproyees, met an	quu	3.1.0.1.0 II.1 COO.1.	0 10 0			oncop			.g					
			(a)	(b)			(c)	(6	d)	(e)	(f)	
30 Total business/investmen	it miles driven d	luring the	1	nicle	1 '	hicle	Ιv	/ehicle		ııcle		hicle	Vehicle	
year (don't include comm		3												
31 Total commuting miles	- ,	the vear												
32 Total other personal (n	_													
driven		,,					i							
33 Total miles driven duri	ng the year													
Add lines 30 through 3	32													
34 Was the vehicle availa	ble for person	al use	Yes	No	Yes	No	Yes	No No	Yes	No	Yes	No	Yes	No
during off-duty hours?														
35 Was the vehicle used	primarily by a	more												
than 5% owner or rela	ted person?													
36 Is another vehicle avail	lable for perso	onal												
use?							<u> </u>						<u> </u>	
	Section C	- Questions	for Empl	oyers W	/ho Prov	vide Veh	ncles f	for Use by	/ Their E	mploye	es			
Answer these questions to	determine if y	you meet an e	xception	to com	pleting S	Section E	3 for ve	ehicles use	ed by em	ployees	who a	ren't mo	re than !	5%
owners or related persons														
37 Do you maintain a writ	ten policy stat	tement that p	rohibits a	II persor	nal use o	of vehicle	es, incli	uding com	ımutıng,	by your			Yes	No
employees?														
38 Do you maintain a writ		•	•							our				
employees? See the ir	structions for	vehicles used	by corp	orate of	ficers, di	rectors,	or 1%	or more o	wners					+
39 Do you treat all use of	vehicles by er	mployees as p	ersonal u	use?										+-
40 Do you provide more t	han five vehic	les to your en	nployees,	obtain i	nformati	on from	your e	employees	about					
the use of the vehicles	-													+-
41 Do you meet the requi		• .											-	
Note: If your answer to	o 37, 38, 39, 4	10, or 41 is "Y	es," don'	t comple	ete Secti	on B for	the co	vered veh	icles					····
Part VI Amortization	 	1	<i>(</i> L.)		(-)			(-1)	1	(-)			<u> </u>	
(a) Description		Dat	(b) e amortization begins		(c) Amortizat amount			(d) Code section	de Amortization			(f) Amortization for this year		
42 Amortization of costs	that begins du	iring your 201	7 tax yea	ır										
				<u> </u>									_	
43 Amortization of costs	that began be	fore your 201	7 tax yea	r							43			<u>563.</u>
AA Total Add amounts in	column /A C	aa tha instric	tions for	where +-	raport						44		2.3	563.

Credit for Prior Year Minimum Tax - Corporations

OMB No. 1545-0123

Employer identification number

Department of the Treasury Internal Revenue Service

Attach to the corporation's tax return ► Go to www irs gov/Form8827 for the latest information

57-1003814 HOLLINGSWORTH FUNDS, INC. 1 Alternative minimum tax (AMT) for 2016. Enter the amount from line 14 of the 2016 Form 4626 5,754. 2 Minimum tax credit carryforward from 2016. Enter the amount from line 9 of the 2016 Form 8827 2 3 Enter any 2016 unallowed qualified electric vehicle credit (see instructions) 3 5,754. 4 Add lines 1, 2, and 3 4 5 Enter the corporation's 2017 regular income tax liability minus allowable tax credits (see 0. 5 instructions) 6 Is the corporation a "small corporation" exempt from the AMT for 2017 (see instructions)? • Yes Enter 25% of the excess of line 5 over \$25,000. If line 5 is \$25,000 or less, enter -0-• No. Complete Form 4626 for 2017 and enter the tentative minimum tax from line 12 7a 7a Subtract line 6 from line 5. If zero or less, enter -0b For a corporation electing to accelerate the minimum tax credit, enter the bonus depreciation amount attributable to the minimum tax credit (see instructions) 7b c Add lines 7a and 7b 7с 8a Enter the smaller of line 4 or line 7c. If the corporation had a post-1986 ownership change or has pre-acquisition excess credits, see instructions 8a b Current year minimum tax credit Enter the smaller of line 4 or line 7a here and on Form 1120, Schedule J, Part I, line 5d (or the applicable line of your return). If the corporation had a post-1986 ownership change or has pre-acquisition 0. excess credits, see instructions. If you made an entry on line 7b, go to line 8c. Otherwise, skip line 8c 8b c Subtract line 8b from line 8a. This is the refundable amount for a corporation electing to accelerate the minimum tax credit. Include this amount on Form 1120, Schedule J, Part II, line 19c (or the applicable line of 8c your return) 9 Minimum tax credit carryforward to 2018 Subtract line 8a from line 4 Keep a record of this 5,754. amount to carry forward and use in future years