

Form 990-T

Exempt Organization Business Income Tax Return

(and proxy tax under section 6033(e))

OMB No 1545-0687

2017

Department of the Treasury
Internal Revenue Service

For calendar year 2017 or other tax year beginning JUL 1, 2017, and ending JUN 30, 2018

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

A ☐ Check box if address changed		Name of organization (☐ Check box if name changed and see instructions.) DUKE UNIVERSITY PHILANTHROPIES, INC.		D Employer identification number (Employees' trust, see instructions) 57-1211099	
B Exempt under section ☒ 501(c)(3) ☐ 408(e) ☐ 220(e) ☐ 408A ☐ 530(a) ☐ 529(a)		Print or Type Number, street, and room or suite no. If a P.O. box, see instructions. 324 BLACKWELL ST., WASHIN BLDG., NO. 850 City or town, state or province, country, and ZIP or foreign postal code DURHAM, NC 27701		E Unrelated business activity codes (See instructions) 525990	
C Book value of all assets at end of year 10,562,859.		F Group exemption number (See instructions.) ☐			
G Check organization type ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust					

H Describe the organization's primary unrelated business activity. PARTNERSHIP INVESTMENT

 I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidary controlled group? ☐ Yes ☒ No
 If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of DUKE UNIVERSITY Telephone number (919) 684-2006

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
c Balance		1c		
2	Cost of goods sold (Schedule A, line 7)	2		
3	Gross profit. Subtract line 2 from line 1c	3		
4a	Capital gain net income (attach Schedule D)	4a		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c	Capital loss deduction for trusts	4c		
5	Income (loss) from partnerships and S corporations (attach statement)	5	561,716.	561,716.
6	Rent income (Schedule C)	6		
7	Unrelated debt-financed income (Schedule E)	7		
8	Interest, annuities, royalties, and rents from controlled organizations (Sch. F)	8		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10	Exploited exempt activity income (Schedule I)	10		
11	Advertising income (Schedule J)	11		
12	Other income (See instructions; attach schedule)	12		
13	Total. Combine lines 3 through 12	13	561,716.	561,716.

 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
 (Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule)	18	
19	Taxes and licenses	19	26,326.
20	Charitable contributions (See instructions for limitation rules) SEE STATEMENT 2	20	19,385.
21	Depreciation (attach Form 4562)	21	
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule)	28	
29	Total deductions. Add lines 14 through 28	29	45,711.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	516,005.
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	516,005.
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	515,005.

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) \$ 515,005.

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

35c 141,902.

36 Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 34 from:☐ Tax rate schedule or ☐ Schedule D (Form 1041)

36

37 Proxy tax See instructions

37

38 Alternative minimum tax

38

39 Tax on Non-Compliant Facility Income. See instructions

39

40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies

40 141,902.

Part IV Tax and Payments**41a** Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)

41a

b Other credits (see instructions)

41b

c General business credit. Attach Form 3800

41c

d Credit for prior year minimum tax (attach Form 8801 or 8827)

41d

e Total credits. Add lines 41a through 41d

41e

42 Subtract line 41e from line 40

42 141,902.

43 Other taxes. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule)

43

44 Total tax. Add lines 42 and 43

44 141,902.

45a Payments: A 2016 overpayment credited to 2017

45a

178,106.

b 2017 estimated tax payments

45b

300,000.

c Tax deposited with Form 8868

45c

d Foreign organizations: Tax paid or withheld at source (see instructions)

45d

e Backup withholding (see instructions)

45e

f Credit for small employer health insurance premiums (Attach Form 8941)

45f

g Other credits and payments:☐ Form 2439☐ Form 4136 ☐ Other

Total

45g

46 Total payments. Add lines 45a through 45g

46 478,106.

47 Estimated tax penalty (see instructions). Check if Form 2220 is attached ☐

47

48 Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed

48

49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid

49 336,204.

50 Enter the amount of line 49 you want: Credited to 2018 estimated tax 336,204.

Refunded

50 0.

Part V Statements Regarding Certain Activities and Other Information (see instructions)**51** At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here

Yes No

52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.

Yes No

53 Enter the amount of tax-exempt interest received or accrued during the tax year \$**Sign Here**

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 belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer

Date

PRESIDENT
TitleMay the IRS discuss this return with the preparer shown below (see instructions)? ☐ Yes ☒ No**Paid Preparer Use Only**

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

Firm's name

Firm's EIN

Firm's address

Phone no.

Schedule A - Cost of Goods Sold. Enter method of inventory 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. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3 Cost of labor	3				
4a Additional section 263A costs (attach schedule)	4a		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
b Other costs (attach schedule)	4b				
5 Total. Add lines 1 through 4b	5				X

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

N/A

1. Description of property

(1)
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total 0.	Total 0.	

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)

(b) Total deductions.

Enter here and on page 1, Part I, line 6, column (B)

0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

N/A

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	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)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
			0.	0.
Total dividends-received deductions included in column 8				0.

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Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

N/A

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	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)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)
Totals			0.	0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

N/A

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
		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 Exempt Activity Income, Other Than Advertising Income (see instructions)

N/A

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses 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 and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 26
Totals		0.	0.			0.

Schedule J - Advertising Income (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	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.

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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 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 (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col (A) 0.	Enter here and on page 1, Part I, line 11, col (B) 0.				Enter here and on page 1, Part II, line 27 0.

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			0.

Form 990-T (2017)

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

Name DUKE UNIVERSITY PHILANTHROPIES, INC.		Employer identification number 57-1211099																																																																			
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 2 Adjustments and preferences: a Depreciation of post-1986 property b Amortization of certified pollution control facilities c Amortization of mining exploration and development costs d Amortization of circulation expenditures (personal holding companies only) e Adjusted gain or loss f Long-term contracts g Merchant marine capital construction funds h Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only) i Tax shelter farm activities (personal service corporations only) j Passive activities (closely held corporations and personal service corporations only) k Loss limitations l Depletion m Tax-exempt interest income from specified private activity bonds n Intangible drilling costs o Other adjustments and preferences 3 Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 2o 4 Adjusted current earnings (ACE) adjustment: a ACE from line 10 of the ACE worksheet in the instructions b Subtract line 10 from line 4a. If line 10 exceeds line 4a, enter the difference as a negative amount. See instructions c Multiply line 4b by 75% (0.75). Enter the result as a positive amount d 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 (even if line 4b is positive) e 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 5 Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT 6 Alternative tax net operating loss deduction. See instructions 7 Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a residual interest in a REMIC, see instructions 8 Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c): a 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- b Multiply line 8a by 25% (0.25) c Exemption. Subtract line 8b from \$40,000. If completing this line for a member of a controlled group, see instructions. If zero or less, enter -0- 9 Subtract line 8c from line 7. If zero or less, enter -0- 10 Multiply line 9 by 20% (0.20) 11 Alternative minimum tax foreign tax credit (AMTFTC). See instructions 12 Tentative minimum tax. Subtract line 11 from line 10 13 Regular tax liability before applying all credits except the foreign tax credit 14 Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0-. Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width:10%;">1</td><td style="width:90%;">515,005.</td></tr> <tr><td>2a</td><td></td></tr> <tr><td>2b</td><td></td></tr> <tr><td>2c</td><td></td></tr> <tr><td>2d</td><td></td></tr> <tr><td>2e</td><td></td></tr> <tr><td>2f</td><td></td></tr> <tr><td>2g</td><td></td></tr> <tr><td>2h</td><td></td></tr> <tr><td>2i</td><td></td></tr> <tr><td>2j</td><td></td></tr> <tr><td>2k</td><td></td></tr> <tr><td>2l</td><td></td></tr> <tr><td>2m</td><td></td></tr> <tr><td>2n</td><td></td></tr> <tr><td>2o</td><td>118,352.</td></tr> <tr><td>3</td><td>633,357.</td></tr> <tr><td>4a</td><td>633,357.</td></tr> <tr><td>4b</td><td>0.</td></tr> <tr><td>4c</td><td></td></tr> <tr><td>4d</td><td></td></tr> <tr><td>4e</td><td>0.</td></tr> <tr><td>5</td><td>633,357.</td></tr> <tr><td>6</td><td></td></tr> <tr><td>7</td><td>633,357.</td></tr> <tr><td>8a</td><td></td></tr> <tr><td>8b</td><td></td></tr> <tr><td>8c</td><td>0.</td></tr> <tr><td>9</td><td>633,357.</td></tr> <tr><td>10</td><td>126,671.</td></tr> <tr><td>11</td><td></td></tr> <tr><td>12</td><td>63,856.</td></tr> <tr><td>13</td><td>141,902.</td></tr> <tr><td>14</td><td>0.</td></tr> </table>	1	515,005.	2a		2b		2c		2d		2e		2f		2g		2h		2i		2j		2k		2l		2m		2n		2o	118,352.	3	633,357.	4a	633,357.	4b	0.	4c		4d		4e	0.	5	633,357.	6		7	633,357.	8a		8b		8c	0.	9	633,357.	10	126,671.	11		12	63,856.	13	141,902.	14	0.
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JWA For Paperwork Reduction Act Notice, see separate instructions.

Form 4626 (2017)

* SEE ALSO

SEE STATEMENT 5

FORM 990-T	CONTRIBUTIONS	STATEMENT	1
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DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
CHARITABLE CONTRIBUTION	N/A	19,385.
TOTAL TO FORM 990-T, PAGE 1, LINE 20		19,385.

FORM 990-T	CONTRIBUTIONS SUMMARY	STATEMENT	2
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QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS

FOR TAX YEAR 2012

FOR TAX YEAR 2013

FOR TAX YEAR 2014

FOR TAX YEAR 2015

FOR TAX YEAR 2016

TOTAL CARRYOVER

TOTAL CURRENT YEAR 10% CONTRIBUTIONS

19,385

TOTAL CONTRIBUTIONS AVAILABLE

19,385

TAXABLE INCOME LIMITATION AS ADJUSTED

53,439

EXCESS 10% CONTRIBUTIONS

0

EXCESS 100% CONTRIBUTIONS

0

TOTAL EXCESS CONTRIBUTIONS

0

ALLOWABLE CONTRIBUTIONS DEDUCTION

19,385

TOTAL CONTRIBUTION DEDUCTION

19,385

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT	3
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PARTNERSHIP NAME	GROSS INCOME	DEDUCTIONS	NET INCOME OR (LOSS)
INVESTMENT INCOME FROM FORESTER PARTNERS, LP	1,233.	0.	1,233.
INVESTMENT INCOME FROM DUNE REAL ESTATE	531,620.	0.	531,620.
INVESTMENT INCOME FROM REPLAY HOLDINGS, LLC	12,032.	0.	12,032.
INVESTMENT INCOME FROM REPLAY HOLDINGS, LLC	298.	0.	298.
LOSS FROM SENGENIX, INC.	-1,983.	0.	-1,983.
INVESTMENT INCOME FROM SYNECOR LLC	18,516.	0.	18,516.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	561,716.	0.	561,716.

FORM 990-T	LINE 35C TAX COMPUTATION	STATEMENT	4
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1.	TAXABLE INCOME	515,005	
2.	LESSER OF LINE 1 OR FIRST BRACKET AMOUNT . .	0	
3.	LINE 1 LESS LINE 2	515,005	
4.	LESSER OF LINE 3 OR SECOND BRACKET AMOUNT . .	0	
5.	LINE 3 LESS LINE 4	515,005	
6.	INCOME SUBJECT TO 34% TAX RATE	515,005	
7.	INCOME SUBJECT TO 35% TAX RATE	0	
8.	15 PERCENT OF LINE 2	0	
9.	25 PERCENT OF LINE 4	0	
10.	34 PERCENT OF LINE 6	175,102	
11.	35 PERCENT OF LINE 7	0	
12.	ADDITIONAL 5% SURTAX	0	
13.	ADDITIONAL 3% SURTAX	0	
14.	TOTAL INCOME TAX		175,102
15.	TAX AT 21% RATE EFFECTIVE AFTER 12/31/2017	108,151	
DAYS			
16.	TAX PRORATED FOR NUMBER OF DAYS IN 2017	184	88,271
17.	TAX PRORATED FOR NUMBER OF DAYS IN 2018	181	53,631
18.	TOTAL TAX PRORATED	365	141,902

FORM 4626	AMT CONTRIBUTIONS	STATEMENT	5
CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS			
FOR TAX YEAR 2012			
FOR TAX YEAR 2013			
FOR TAX YEAR 2014			
FOR TAX YEAR 2015			
FOR TAX YEAR 2016			
TOTAL CARRYOVER			
CURRENT YEAR CONTRIBUTIONS		19,385	
TOTAL CONTRIBUTIONS		19,385	
10% OF TAXABLE INCOME AS ADJUSTED		65,274	
EXCESS CONTRIBUTIONS		0	
ALLOWABLE CONTRIBUTIONS		19,385	
AMT CHARITABLE DEDUCTION		19,385	
REGULAR CONTRIBUTION DEDUCTION		19,385	
AMT CONTRIBUTION ADJUSTMENT		0	

FORM 4626

OTHER AMT ADJUSTMENTS

STATEMENT 6

DESCRIPTION

AMOUNT

OTHER AMT ITEMS FROM PARTNERSHIPS

118,352.

TOTAL TO FORM 4626, LINE 20

118,352.

TENTATIVE MINIMUM TAX (TMT) PRORATION

STATEMENT

7

TENTATIVE MINIMUM TAX FOR THE ENTIRE YEAR . . . 126,671.

TMT IN EFFECT BEFORE 01/01/2018 126,671.

TMT IN EFFECT AFTER 12/31/2017 0.

DAYS

TMT PRORATED FOR NUMBER OF DAYS IN 2017 . . 184 63,856.

TMT PRORATED FOR NUMBER OF DAYS IN 2018 . . 181 0.

TMT PRORATED 365 63,856.