Form 990-T	Ex	xempt Orga	nization Bus	sine	ss Income T	ax Returi	ι L	OMB No 1545-0687	
			and proxy tax und					2017	
	For calen		year beginning NOV 1,			•	<u>.8</u>	Z U 1 <i>1</i>	
Department of the Treasury Internal Revenue Service	▶t		w.irs.gov/Form990T for in ers on this form as it may					pen to Public Inspection for 11(c)(3) Organizations Only	
A Check box if address changed		Name of organization (Check box if name changed and see instructions.) BERLIN FAMILY FOUNDATION, INC. DEmployer identification number (Employees' trust, see instructions.)							
B Exempt under section	L	C/O TERRY 1						-0230453	
X 501(C <u>103</u>)		Number, street, and roo			ed business activity codes tructions)				
408(e) 220(e)	l L	1795 BROOK City or town, state or pr		1					
408A530(a) 529(a)	5313	90							
C Book value of all assets at end of year	[F Group exemption nur	nber (See instructions.)	<u> </u>	7 1				
at end of year 16,317,3	19.	G Check organization ty	pe 🕨 501(c) cor			401(a		Other trust	
H Describe the organization	n's primar	y unrelated business ac	tivity. INVESTM			PARTNERS		1 37 1	
			affiliated group or a pare	nt-subs	idiary controlled group?	> 1	Yes	X No	
If "Yes," enter the name a					Talaah	one number 🕨 (330)	867-2490	
J The books are in care of Part I Unrelate					(A) Income	(B) Expense		(C) Net	
<u> </u>		e OI Dusilless III	T	$\overline{}$	(A) Illoonio	(D) Expense	+	(0) 1101	
1a Gross receipts or sale b Less returns and allo	-		c Balance	1c					
2 Cost of goods sold (S		1 line 71	Chalance	2					
3 Gross profit. Subtract			*******	3					
4a Capital gain net incon				4a					
		rt II, line 17) (attach For	m 4797)	4b					
c Capital loss deduction			•	4c					
5 Income (loss) from p	artnership	s and S corporations (a	ittach statement)	5	2,359.	STMT 9		2,359.	
6 Rent income (Schedu	ule C)			6				•	
7 Unrelated debt-finance		•		7	23,417.			23,417.	
8 Interest, annuities, ro	yaltıes, an	d rents from controlled	organizations (Sch. F)	8					
9 Investment income o	f a section	1 501(c)(7), (9), or (17)	organization (Schedule G)						
10 Exploited exempt act	•	,		10					
11 Advertising income (•		11					
12 Other income (See in				12	25 776			25,776.	
Part II Deduction			ere (See instructions for	13	25,776.		<u> </u>	25,110.	
(Except for	contribut	tions, deductions mu	st be directly connecte	d with	the unrelated busines	s income)			
14 Compensation of of	ficers, dire	ectors, and trustees (Sc	hedule K)				14		
15 Salaries and wages							15		
16 Repairs and mainter	nance						16		
17 Bad debts							17		
18 Interest (attach sche19 Taxes and licenses	equie)						19		
19 Taxes and licenses 20 Charitable contribut	ione /Saa i	instructions for limitati	n rules)RECEIVE				20		
21 Depreciation (attach	Form 456	32)	WECEIVE	=1)	21		1		
•		Schedule A and elsewh	FP on return		22a		22b		
23 Depletion			MAK 11 20	119	22a		23		
24 Contributions to def	ferred com	pensation plans			181		24		
25 Employee benefit pr	rograms	·	OGDEN,	Į ĮT	·=		25		
26 Excess exempt expe	enses (Sch	nedule I)	OCCEPT,	01			26		
27 Excess readership of	osts (Sch	edule J)			•		27		
28 Other deductions (a		•					28		
29 Total deductions. A		-					29	0.	
			ng loss deduction. Subtra	ct line 2	9 from line 13		30	25,776.	
. •		(limited to the amount o	•				31	25 776	
			duction. Subtract line 31 f				32	25,776. 1,000.	
33 Specific deduction (Generally :	a 1,000, but see line 33	instructions for exception	S)	than line 20 anter the a-	naller of zero or	33	1,000.	
			instructions for exception 3 from line 32. If line 33 is	greater	man line 32, enter the sh	namer of zero or	34	24,776.	
723701 01-22-18 I HA F	or Paperw	vork Reduction Act Not	ce see instructions					Form 990-T (2017)	

Form 990-T	(2017) C/O TERRY LAWRENCE	65-0230	453 Page 2
Part I		•	
35	Organizations Taxable as Corporations. See instructions for tax computation.		
	Controlled group members (sections 1561 and 1563) check here ▶ ☐ See instructions and:		
а	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):		
_	(1) \$ (2) \$ (3) \$		
h	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)		
	(2) Additional 3% tax (not more than \$100,000)		1
	Income tax on the amount on line 34	▶ 3	35c
36	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:	· · ·	-
50	X Tax rate schedule or Schedule D (Form 1041)	I—	8,094.
37	Proxy tax. See instructions	· -	37
38	Alternative minimum tax		38
39	Tax on Non-Compliant Facility Income. See instructions	<u> </u>	39
40	Total Add lines 37, 38 and 39 to line 35c or 36, whichever applies		8,094.
	V Tax and Payments		40 0 / 0 5 1 1
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 41a		
_			
b	Other credits (see instructions) - 41b General business credit. Attach Form 3800 41c		
نا			
0	Credit for prior year minimum tax (attach Form 8801 or 8827) Total credits. Add lines 41a through 41d	 -	17e
	·		42 8,094.
42	Subtract line 41e from line 40 Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other		43
43	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other Total tax. Add lines 42 and 43	(artiach schedule)	
44	["\tau\]	1,687.	44 0,05±0
	aymonic record ordinary man distribution to zon.	1,007.	
	2017 estimated tax payments 45b		
	Tax deposited with Form 8868 45c		
	Foreign organizations: Tax paid or withheld at source (see instructions) 45d		
	Backup withholding (see instructions) 45e		
	Credit for small employer health insurance premiums (Attach Form 8941) 45f		
9	Other credits and payments: Form 2439		
40	☐ Form 4136 ☐ Other ☐ Total ► 45g	GI-	46 1,687.
46	Total payments. Add lines 45a through 45g		46 1,687. 47 5.
47	Estimated tax penalty (see instructions). Check if Form 2220 is attached		48 6,412.
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed	<i>~ ,</i> -	49
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid		50
50 Part \			90
51	At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority		Yes No
31	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file		163 110
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country	,	
	here		x
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fo	reign trust?	———
JZ	If YES, see instructions for other forms the organization may have to file.	reign trusts	
53	Enter the amount of tax-exempt interest received or accrued during the tax year >\$		
	Under genalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and to	the best of my knowle	dge and belief, It is true,
Sign	correct, and complete Declaration of prepare (other than taxpayer) is based on all information of which preparer has any knowle	dge	
Here	Nadeline Buh 2/23/19 ▶ PRESIDENT		the IRS discuss this return with reparer shown below (see
	Signature of officer Date / Title		ictions)? X Yes No
	Print/Type preparer's name Preparer's signature Date	Check If	PTIN
	Trinit Type property 3 mains	self- employed	
Paid	JESSICA L. TEPUS 02/21/19	23 Upi0300	P01067325
Prepa	DODED MARKEY ENDORON OF COMPANY	Firm's EIN ▶	34-1523030
Use (3421 RIDGEWOOD ROAD, SUITE 300		
	Firm's address ► AKRON, OH 44333	Phone no. (3	30)7 <u>62-9785</u>
		• • • • • • • • • • • • • • • • • • • •	Form 990-T (2017)

Form 990-T (2017) C/O TERRY LAWRENCE

Schedule A - Cost of Good	s Sold. Enter	method of inven	tory valuation N/A					
1 Inventory at beginning of year	1		6 Inventory at end of year	ır		6		
2 Purchases	2		7 Cost of goods sold. St	ubtract l	ine 6			
3 Cost of labor	3		from line 5. Enter here	and in F	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 acquired for resale) apply					T
5 Total. Add lines 1 through 4b	5		the organization?					
Schedule C - Rent Income (see instructions)	(From Real	Property and	d Personal Property	Leas	ed With Real Pro	pert	y)	
Description of property								
			-					
(1)								
(2)			·					
(3)								
(4)	2 Rent receiv	ed or accrued	·		T			
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	rcentage of	(b) From real a	and personal property (if the percent personal property exceeds 50% or if at is based on profit or Income)	age	3(a) Deductions directly columns 2(a) a		cted with the income (attach schedule)	in
(1)	<u>'</u>	u10101	it is based on profit of income,					
(2)			<u></u>					
(3)								
(4)	•							
Total	0.	Total		0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		ter 🕨		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	•		0.
Schedule E - Unrelated Del	ot-Financed	l Income (see	instructions)					
			2. Gross Income from		3. Deductions directly conto debt-finan			
1. Description of debt-fit	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule	ons i)
(1)								
(2)								
(3)								
(4)								
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or a debt-fina	e adjusted basis allocable to inced property h schedule)	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8, Allocable deduction (column 6 x total of column 3(a) and 3(b))	columns
(1)			%					
(2)		-	%					
(3)			%					
(4)		-	%					
					nter here and on page 1, Part I, line 7, column (A)		Enter here and on pa Part I, line 7, column	
Totals			•		0			0.
Total dividends-received deductions in	icluded in columi	n 8			•	-	 	0.

Form 990-T (2017) C/O TERRY LAWRENCE 65-0230453
Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

				ontrolled Or				- (5556	tructions	•	
1. Name of controlled organizat		mployer tification umber	3. Net unre	plated income Instructions)	4. Tota	al of specified nents made	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)			1					•			
(3)				Î							
(4)											
Nonexempt Controlled Organi	zations									·	
7. Taxable Income	8. Net unrelated inc (see instruction	ome (loss) ons)	9. Total o	of specified payn made	rents	10. Part of column in the controlling gross				uctions directly connected Income in column 10	
(1)											
(2)											
(3)											
(4)											
						Add colum Enter here and line 8, o		1, Part I, \)	Enter he	d columns 6 and 11 are and on page 1, Part I, une 8, column (B)	
Totals					<u>▶</u>			0.		0.	
Schedule G - Investme (see inst		Section	n 501(c)(7	7), (9), or ((17) Or	ganization	ı				
1. Desc	cription of income	***		2. Amount of	income	 Deduction directly connected (attach schedule) 	ected	4. Set-a (attach s		5. Total deductions and set-asides (col 3 plus col 4)	
(1)											
(2)			•			•					
(3)											
(4)											
				Enter here and o Part I, line 9, col						Enter here and on page 1 Part I, line 9, column (B)	
Totals					0.					0	
Schedule I - Exploited (see instru	-	ty Incon	ne, Othei	r Than Ad	vertisi	ng Income	e 				
Description of exploited activity	2. Gross unrelated business income from trade or business	directly with pi of ur	xpenses connected roduction related ss income	4. Net Incomfrom unrelated business (cominus columi gain, compute through	trade or lumn 2 n 3) If a e cols 5	5. Gross inco from activity is not unrela business inco	that ited	6. Exp attributi colun	able to	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)	page line 10	ere and on 1, Part I,), col (B)							Enter here and on page 1, Part II, line 26	
Totals >	0		0.	L						0_	
Schedule J - Advertisi Part I Income From				solidated	Basis						
		 -		1					<u>-</u>	7	
1. Name of periodical	2. Gross advertisin income	_	3. Direct vertising costs	4. Advert or (loss) (co col 3) If a ga cols 5 th	aln, comput			6. Reade cost		 Excess readership costs (column 6 minus column 5, but not more than column 4). 	
(1)						1					
(2)	<u> </u>			7			\neg				
(3)				7							
(4)	-			┪			\neg		$\neg \neg$		
Totals (carry to Part II, line (5))		0.	0			1				0	
iviais (carry to rait ii, lille (3))		U • I	U	•			l l		I	0	

Form 990-T (2017) C/O TERRY LAWRENCE 65-02304

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)							1
Totals from Part I		0.	0.	-			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).	1			Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	▶	0.	0.				0

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)			%	
(2)			%	
(3)			%	
(4)			%	
Total. Enter here and o	n page 1, Part II, line 14		•	0.

Form 990-T (2017)

SCHEDULE I (Form 1041)

Department of the Treasury

Name of estate or trust

Internal Revenue Service

Alternative Minimum Tax - Estates and Trusts

► Attach to Form 1041.

▶ Go to www.irs.gov/Form1041 for instructions and the latest information.

OMB No 1545-0092

2017

Employer identification number

65-0230453 BERLIN FAMILY FOUNDATION, INC. C/O TERRY Part I Estate's or Trust's Share of Alternative Minimum Taxable Income 25,776. 1 Adjusted total income or (loss) (from Form 1041, line 17) 2 Interest 3 3 Taxes 4 4 Miscellaneous itemized deductions (from Form 1041, line 15c) 5 Refund of taxes 6 Depletion (difference between regular tax and AMT) 7 7 Net operating loss deduction. Enter as a positive amount 8 Interest from specified private activity bonds exempt from the regular tax 9 Qualified small business stock (see instructions) Exercise of incentive stock options (excess of AMT income over regular tax income) 10 10 11 Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) 11 12 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) Disposition of property (difference between AMT and regular tax gain or loss) 14 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 15 Passive activities (difference between AMT and regular tax income or loss) 15 16 Loss limitations (difference between AMT and regular tax income or loss) 16 17 17 Circulation costs (difference between regular tax and AMT) 18 18 Long-term contracts (difference between AMT and regular tax income) 19 19 Mining costs (difference between regular tax and AMT) 20 Research and experimental costs (difference between regular tax and AMT) 21 21 Income from certain installment sales before January 1, 1987 22 22 Intangible drilling costs preference 23 Other adjustments, including income-based related adjustments 24 24 Alternative tax net operating loss deduction (See the instructions for the limitation that applies.) 25,776. 25 Adjusted alternative minimum taxable income. Combine lines 1 through 24 Note: Complete Part II below before going to line 26 N/A 26 Income distribution deduction from Part II, line 44 N/A 27 Estate tax deduction (from Form 1041, line 19) 27 28 Add lines 26 and 27 28 25,776. 29 Estate's or trust's share of alternative minimum taxable income. Subtract line 28 from line 25 29 If line 29 is: \$24,100 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c. The estate or trust isn't liable for the alternative minimum tax. Over \$24,100, but less than \$176,850, go to line 45. \$176,850 or more, enter the amount from line 29 on line 51 and go to line 52. N/A Part II Income Distribution Deduction on a Minimum Tax Basis 30 30 Adjusted alternative minimum taxable income (see instructions) 31 Adjusted tax-exempt interest (other than amounts included on line 8) 31 32 Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-33 Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes (from Form 1041, Schedule A, line 4)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

42 Tentative income distribution deduction on a minimum tax basis. Subtract line 41 from line 40

Income required to be distributed currently (from Form 1041, Schedule B, line 9)

41 Tax-exempt income included on line 40 (other than amounts included on line 8)

Capital gains computed on a minimum tax basis included on line 25

34 Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)

37 Distributable net alternative minimum taxable income (DNAMTI). Combine lines 30 through 36. If zero or less, enter -0-

Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)

36 Capital losses computed on a minimum tax basis included on line 25. Enter as a positive amount

Schedule I (Form 1041) (2017)

34

35

36

37 38

39 40

41

Total distributions. Add lines 38 and 39

	dule (Form 1041) (2017) BERLIN FAMILY FOUNDATION, INC				65-	-0230453 Page 2
IPa	rt II I Income Distribution Deduction on a Minimum Tax Basis	(contii	nue	d)	_N/ <i>P</i>	1
43	Tentative income distribution deduction on a minimum tax basis. Subtract line 31 from line 3					
	If zero or less, enter -0-				43	
44	Income distribution deduction on a minimum tax basis. Enter the smaller of line 42 or line	43 .				
_	Enter here and on line 26				44	
Pa	rt III Alternative Minimum Tax					
45	Exemption amount				45	\$24,100.00
46	Enter the amount from line 29	46		25,776.		
47	Phase-out of exemption amount	47		\$80,450.00		
48	Subtract line 47 from line 46. If zero or less, enter -0-	48		0.		_
49	Multiply line 48 by 25% (0.25)				49	0.
50	Subtract line 49 from line 45. If zero or less, enter -0-				50	24,100.
51	Subtract line 50 from line 46				51	1,676.
52	Go to Part IV of Schedule I to figure line 52 if the estate or trust has qualified dividends or has	_				
	of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary). Otherwise	e, if line	51	ıs -		
	• \$187,800 or less, multiply line 51 by 26% (0.26).					426
	 Over \$187,800, multiply line 51 by 28% (0.28) and subtract \$3,756 from the result 				52	436.
53	Alternative minimum foreign tax credit (see instructions)				53	
54	Tentative minimum tax. Subtract line 53 from line 52				54	436.
55	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedu			a)	55	8,094.
56	Alternative minimum tax. Subtract line 55 from line 54. If zero or less, enter -0 Enter here	and or	1			0
	Form 1041, Schedule G, line 1c				56	0.
<u> Pa</u>	rt IV Line 52 Computation Using Maximum Capital Gains Rat				г т	
	Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D					
	or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see th	e ınstr	ucti	ons		
	before completing this part					
-	Enter the amount from line 51	1	ı		57	
58	Enter the amount from Schedule D (Form 1041), line 26, line 13 of the Schedule D Tax					
	Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for					
	Form 1041, whichever applies (as refigured for the AMT, if necessary)	58	⊢			
59	Enter the amount from Schedule D (Form 1041), line 18b, column (2)					
	(as refigured for the AMT, if necessary). If you didn't complete	50				
	Schedule D for the regular tax or the AMT, enter -0-	59	⊢		1 1	
60	If you didn't complete a Schedule D Tax Worksheet for the regular tax or the					
	AMT, enter the amount from line 58. Otherwise, add lines 58 and 59 and enter					
	the smaller of that result or the amount from line 10 of the Schedule D Tax	60				
61	Worksheet (as refigured for the AMT, if necessary)	00	1		61	
	Enter the smaller of line 57 or line 60				62	 "
63	Subtract line 61 from line 57				 	
00	If line 62 is \$187,800 or less, multiply line 62 by 26% (0.26). Otherwise, multiply line 62 by 28% (0.28) and subtract \$3.756 from the result			•	63	
64	Maximum amount subject to the 0% rate	64	ı	\$2,550 00	 " 	
	Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D	<u> </u>	╁	ΨΕ,000 00	1	
•	Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions					
	for Form 1041, whichever applies (as figured for the regular tax). If you didn't					
	complete Schedule D or either worksheet for the regular tax, enter the amount		l			
	from Form 1041, line 22; if zero or less, enter -0-	65	l			
66	Subtract line 65 from line 64. If zero or less, enter -0-	66	Г		1	
67	Enter the smaller of line 57 or line 58	67	T		1	
68	Enter the smaller of line 66 or line 67. This amount is taxed at 0%	68	1		1	
69	Subtract line 68 from line 67	69]	
_	62 12-20-17			•	Sci	hedule I (Form 1041) (2017)

Pa	Part IV Line 52 Computation Using Maximum Capital Gains Rates (continued)							
70	Maximum amount subject to rates below 20%	7Ò	\$12,500.00					
71	Enter the amount from line 66	71						
72	Enter the amount from line 27 of Schedule D (Form 1041), line 18 of the		•					
	Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax							
	Worksheet, whichever applies (as figured for the regular tax). If you							
	didn't complete Schedule D or either worksheet for the regular tax, enter							
	the amount from Form 1041, line 22; if zero or less, enter -0-	72						
73	Add line 71 and line 72	73						
74	Subtract line 73 from line 70. If zero or less, enter -0-	74						
75	Enter the smaller of line 69 or 74	75						
76	Multiply line 75 by 15% (0.15)		•	76				
77	Add lines 68 and 75	77						
	If lines 77 and 57 are the same, skip lines 78 through 82 and go to line 83. Otherwise, go	to line	78.					
78	Subtract line 77 from line 67	78						
79	Multiply line 78 by 20% (0.20)		>	79	<u> </u>			
	If line 59 is zero or blank, skip lines 80 through 82 and go to line 83. Otherwise, go to line	e 80.	•					
80	Add lines 62, 77, and 78	80						
81	Subtract line 80 from line 57	81						
82	Multiply line 81 by 25% (0.25)		•	82	<u> </u>			
83	Add lines 63, 76, 79, and 82			83				
84	If line 57 is \$187,800 or less, multiply line 57 by 26% (0.26). Otherwise, multiply line 57 by 2	28% (0	.28)		{			
	and subtract \$3,756 from the result			84				
85	Enter the smaller of line 83 or line 84 here and on line 52			85				
				8	Schedule I (Form 1041) (2017)			

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS	STATEMENT 9
DESCRIPTION		AMOUNT
UBTI FROM LAND	MARK EQUITY PARTNERS XV LP - 2017 K-1	2,359.
TOTAL TO FORM	990-T, PAGE 1, LINE 5	2,359.