2019
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NON
SCANNED N

	For	- - 990-T	E	Exempt Orga	nization Bu	sine	ess Inc	ome T	ax Retur	34	9.9.3.3.9.2
		ي.		\a	nu proxy tax un	der se	ection 603	33(e))			2018
POSTMARK DATE	,	For calendar year 2018 or other tax year beginning, and ending							-	2010	
	Depa Inter								, t	Open to Public Inspection fo 501(c)(3) Organizations Only	
	" Ā [Check box if								D Empl	oyer identification number loyees' trust, see
	₹_	address changed	INIBARATIONAL FOONDATION EMPLOTEES						instru	uctions)	
冥		xempt under seetlen	0f Number street and room or stute no. If a P.O. hove see instructions								9-1034021 ated business activity code
모	ᄴ	501(a)()									nstructions)
H	F	408(e) 220(e) P.O. BOX 69 City or town, state or province, country, and ZIP or foreign postal code								┥	
0CT	7										099
7	C B	Book value of all assets at end of year 39,995,676. G Check organization type \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \								12 0 0	
-) trust	Other trust
CE (5)	H E	iter the number of the c	organizai	tion's unrelated trades or	businesses. 🕨	1			the only (or first) ur		
2019	tra			EE STATEMENT					complete Parts I-V		•
G				ce at the end of the previo	us sentence, complete P	'arts I ai	nd II, complete	a Schedule	M for each addition	nai trade	e or
		isiness, then complete f		oration a subsidiary in an	affiliated group or a pare	nt-subs	udiary controll	ed group?	> [Ye	s X No
		-		ifying number of the parer		,iii 300.	ndial y controll	co group:		''	.3 [22] 140
				THE ORGANIZA				Telepho	one number 🕨 2	62-	786-6700
	Pa	rt I Unrelated	Trad	le or Business Inc	ome		(A) Inc	ome	(B) Expense:	8	(C) Net
	1 a	Gross receipts or sales	S			1					
	b	Less returns and allow			c Balance . 🕨	1c	ļ <u>.</u>		·- ·		
	2	Cost of goods sold (So		•		2			· · · · · ·		
	3	Gross profit. Subtract		• •		3		,463.			F 463
_	4 a	Capital gain net income	•	n Schedule D) art II, line 17) (attach Form	. 4707\	4a 4b		,403.			5,463
202	C	Capital loss deduction	-		14/3/)	4c					
	5	•		hip or an S corporation (a)	ttach statement)	5		540.	STMT 2	:	540.
2 7	6	Rent income (Scheduli			,	6					
	7	Unrelated debt-finance	d incom	ne (Schedule E)		7					
NON	8	Interest, annuities, roya	alties, ar	nd rents from a controlled	organization (Schedule F)	8					
	9			n 501(c)(7), (9), or (17) o	rganization (Schedule G						
Ξ	10	Exploited exempt activ	•			10					
Ž	11	Advertising income (Sec. 1981)		•	•	11 12				 	
CANNED	12 13	Other income (See inst Total, Combine lines		· · · · · · · · · · · · · · · · · · ·		13	6	,003.			6,003.
		rt II Deduction	is No	t Taken Elsewher	'e (See instructions fo						0,003.
Ŋ		/Fire and for a			the state of the same of the				income.)		
	14	Compensation of office	ers, dire	ectors, and trustees (Sche	dule K)	FΙΛ		1		14	
	15	Salaries and wages		ectors, and trustees (Sche	181		ပ္ထ	l		15	
	16	Repairs and maintena	псе			8 21)19 👸	ł		16	
	17	000 000.0					SE	G		17	121
	18	Interest (attach sched	ule) (see	e instructions)	1 OGDF	M	IIT	ŞTATI	ement 3	18	131.
	19	Taxes and licenses	nc /Saa	instructions for limitation	rules) STATEME	NIT!	SEE	CTDATE	EMENT 4	19	0.
	20 21	Depreciation (attach F	-		rules) SIAIEME	114.1	ا عبير ن	21	rurni 4	20	•
	22			Schedule A and elsewhere	e on return		1	22a		22b	
	23	Depletion								23	
	24	Contributions to defer	red com	pensation plans						24	
	25	Employee benefit prog	grams							25	
	26	Excess exempt expens	ses (Sch	nedule I)						26	
	27	Excess readership cos					~	am =		27	2 400
	28	Other deductions (atta					SEE	STATE	EMENT 5	28	3,132.
	29	Total deductions Add			Jose deduction Cubine	st line Of) from line 10			29	3,263. 2,740.
	30			come before net operating iss arising in tax years beg				ctions)		30	4,140.
	31 32			oss ansing in tax years beg come. Subtract line 31 fro		., y 1, 20	io (acciniant	onona)		32	2,740.
				ork Reduction Act Notice							Form 990-1 (2018)

2018.04030 INTERNATIONAL FOUNDATION EM 60130X_2

INTERNATIONAL FOUNDATION EMPLOYEES Form 980-T (2018) RETIREMENT PLAN

Form 980-	T (2018) RETIREMENT PLAN	39-10	34021	Page 2
Part				
. 33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instruction	ns)	33	2,740.
34	Amounts paid for disallowed fringes	,	34	
35	•	STMT 7	35	2,247.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of			
•	lines 33 and 34		36	493.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	•	37	1,000.
38	Unrelated business taxable income Subtract line 37 from line 36. If line 37 is greater than line 36,	• •	.31	1,000.
30	enter the smaller of zero or line 36			^
Dort	V Tax Computation		38	0.
			100	
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0 21)		► <u>39</u>	
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 fro	om;		•
	Tax rate schedule or Schedule D (Form 1041)	P	· 40	0.
41	Proxy tax See instructions .	•	· 41	
42	Alternative minimum tax (trusts only)		42	
43	Tax on Noncompliant Facility Income See Instructions		43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies		44	0.
Part \	/ Tax and Payments			
45 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)		_	
b	Other credits (see instructions)		_	
C	General business credit. Attach Form 3800			
d	Credit for prior year minimum tax (attach Form 8801 or 8827) 45d			
e	Total credits Add lines 45a through 45d		45e	
46	Subtract line 45e from line 44		46	0.
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Oth	er (altach schedule		- <u> </u>
48	Total tax Add lines 46 and 47 (see instructions)		48	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2		49	0.
	Payments: A 2017 overpayment credited to 2018	•	7,	
	2018 estimated tax payments 50b		-	
	· · · · · · · · · · · · · · · · · · ·		╡	
	Tax deposited with Form 8868 . 50c		⊣ 1	
	Foreign organizations: Tax paid or withheld at source (see instructions) 500		⊣	
	Backup withholding (see instructions) 50e		⊣	
	Credit for small employer health insurance premiums (attach Form 8941)		-	
g	Other credits, adjustments, and payments: Form 2439			
	Form 4136 Other Total ▶ <u>50g</u>		⊣	
	Total payments. Add lines 50a through 50g		1 64	
52			51	
	Estimated tax penalty (see instructions). Check if Form 2220 is attached 🕨 📖		52	
	Estimated tax penalty (see instructions). Check if Form 2220 is attached Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	. •	52 53	
53 54	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	>	52 53 54	
53 54	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax	. Pefunded	52 53	
53 54	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax		52 53 54	
53 54 55 Part V	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax	ructions)	52 53 54	Yes No
53 54 55 Part V	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax Statements Regarding Certain Activities and Other Information (see inst	ructions) arity	52 53 54	Yes No
53 54 55 Part V 56	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax Statements Regarding Certain Activities and Other Information (see inst At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authors.	ructions) ority file	52 53 54	Yes No
53 54 55 Part V	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to	ructions) ority file	52 53 54	
53 54 55 Part V 56	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want; Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign count here	ructions) arity file try	52 53 54	X
53 54 55 Part V 56	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authorized financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign count here Ourring the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a	ructions) arity file try	52 53 54	
53 54 55 Part V 56	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst. At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authorover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign count here. During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a lif "Yes," see instructions for other forms the organization may have to file.	ructions) arity file try	52 53 54	X
53 54 55 Part V 56	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign count here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year \$\Begin{array}{c} \text{ See instructions for other forms the organization may have to file.} \end{array}\$	ructions) ority file try foreign frust?	52 53 54 55 55	X
53 54 55 Part V 56 57	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst. At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authorover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign count here. During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a lif "Yes," see instructions for other forms the organization may have to file.	ructions) ority file try foreign trust?	52 53 54 55 55 55 55	X X
53 54 55 Part V 56 57 58 Sign	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign count here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year \$\Begin{array}{c} \text{ See instructions for other forms the organization may have to file.} \end{array}\$	ructions) ority file try foreign trust? to the best of my kr	52 53 54 55 55	X X X It is true,
53 54 55 Part V 56 57	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign count here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year \$\Begin{array}{c} \text{ See instructions for other forms the organization may have to file.} \end{array}\$	ructions) ority file try foreign trust? to the best of my knowledge	52 53 54 55 55	X X X It is true.
53 54 55 Part V 56 57 58 Sign	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want; Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign count here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a li "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Under penalties of perjury, I declare that I have dramined this return, including accompanying schedules and statements, and correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any know Signature of officer Date Title	ructions) ority file try foreign trust? to the best of my kr	52 53 54 55 55 May the IRS discuss the preparer shown instructions)?	X X X It is true,
53 54 55 Part V 56 57 58 Sign Here	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign count here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year \$\Begin{array}{c} \text{ See instructions for other forms the organization may have to file.} \end{array}\$	ructions) ority file firy foreign trust? to the best of my knowledge	52 53 54 55 55 May the IRS discuss the preparer shown instructions)? X	X X X It is true.
53 54 55 Part V 56 57 58 Sign	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want; Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign count here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a li "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Under penalties of perjury, I declare that I have dramined this return, including accompanying schedules and statements, and correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any know Print/Type preparer's name Preparer's signature Date Date Date	ructions) ority file try foreign trust? to the best of my kr	52 53 54 55 55 May the IRS discuss the preparer shown instructions)? X	It is true, this return with below (see Yes No
53 54 55 Part V 56 57 58 Sign Here	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want; Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign count here During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year Under penalties of perjury, I declare that I have dramined this return, including accompanying schedules and statements, and correct, and complete Declaration of prepare (other than taxpayer) is based on all information of which preparer has any know I Date Print/Type preparer's name Preparer's signature Date I Date I DATE Date	ructions) ority file foreign frust? to the best of my knowledge Check	52 53 54 55 55 May the IRS discuss the preparer shown instructions)? X If PTIN S P0095	this return with pelow (see Yes No
53 54 55 Part V 56 57 58 Sign Here	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want; Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign count here ▶ During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$ Under penalties of perjury, I declare that I have dramined this return, including accompanying schedules and statements, and correct, and complete Declaration of prepare (other than taxpayer) is based on all information of which preparer has any know Signature of officer Date	ructions) ority file firy foreign trust? to the best of my knowledge	52 53 54 55 55 May the IRS discuss the preparer shown instructions)? X If PTIN S P0095	It is true, this return with below (see Yes No
53 54 55 Part V 56 57 58 Sign Here Paid Prepai	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst. At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign count here. During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a lif "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year. Under penalties of perjury, I declare that I have stammed this return, including accompanying schedules and statements, and correct, and complete. Declaration of prepage (other than taxpayer) is based on all information of which prepare has any know a light of the preparer is signature. Preparer's signature. Preparer's signature. Date Preparer's signature. Date I O / I / 19 Firm's name LEGACY PROFESSIONALS LLP 4 WESTBROOK CORPORATE CTR #700	ructions) ority file foreign frust? to the best of my knowledge Check self- employed	52 53 54 55 55 May the IRS discuss the preparer shown instructions)? X If PTIN 3 P0095	this return with pelow (see No
53 54 55 Part V 56 57 58 Sign Here Paid Prepai	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want; Credited to 2019 estimated tax I Statements Regarding Certain Activities and Other Information (see inst At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authover a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign count here ▶ During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$ Under penalties of perjury, I declare that I have dramined this return, including accompanying schedules and statements, and correct, and complete Declaration of prepare (other than taxpayer) is based on all information of which preparer has any know Signature of officer Date	ructions) ority file foreign frust? to the best of my knowledge Check self- employed	52 53 54 55 55 May the IRS discuss the preparer shown instructions)? X If PTIN 3 P0095 32-06 312-368-	this return with pelow (see No

Schedule A - Cost of Good	ds Sold. Enter	method of inve	ntory 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			
3 Cost of labor	3		from line 5 Enter he	ere and in	Part I,		}	
4 a Additional section 263A costs			line 2					
(attach schedule)	4a		8 Do the rules of secti	on 263A	(with respect to		Yes	No
 Other costs (attach schedule) 	4b		property produced (or acquire	d for resale) apply to			
5 Total Add lines 1 through 4b	5		the organization?				<u> </u>	
Schedule C - Rent Income (see instructions)	(From Real	Property an	d Personal Propert	y Leas	ed With Real Pro	pert	y) 	
1 Description of property								
(1)								
(2)								
(3)								
(4)								
	2 Rent receive	ed or accrued			2/a) Doductions dupot		atod with the recens or	
(a) From personal property (if the prent for personal property is more 10% but not more than 50%	re than	of rent for	and personal property (if the perce personal property exceeds 50% o nt is based on profit or income)	entage r if	3(a) Deductions directl columns 2(a) a		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, colum		er >		0.	(b) Total deductions Enter here and on page 1, Part I, line 8 column (B)	>		0.
Schedule E - Unrelated De	bt-Financed	Income (see	instructions)					
			2 Gross income from		3 Deductions directly con to debt-finance			
1 Description of debt-fi	inanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)	
(1)				┪	 -	+-		
(2)				1		1	***	
(3)						1		
(4)						1		
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or all debt-finan	adjusted basis locable to ced property schedule)	6 Column 4 divided by column 5		7. Gross income reportable (column 2 x column 8)	(6	8. Allocable deduction column 6 x total of colum 3(a) and 3(b))	
(1)			%					
(2)			%					
(3)			%					
(4)			%					
					nter here and on page 1, Part I, line 7, column (A)		nter here and on page 1 Part I, line 7, column (8)	
Totals			Þ	•	0		\	0.
Total dividends-received deductions in	icluded in column	8						0.
							Form 990-T (2	018)

orm 990-T (2018)	RETIREMENT	PLAN

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

. columns 2 throug	gh 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)							<u> </u>
(4)							
Totals from Part I	>	0.	0.				0.
		Enter here and on page 1, Part I, tine 11, col (A)	Enter here and on page 1, Part I, line 11, col (8)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	<u> </u>	0.	_0.	<u></u>			0.

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

1. Name	2. Tille	3 Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
otal. Enter here and on page 1, Part II, line 14		>	

Form 990-T (2018)

FORM 990-T DESCRIPTION OF	ORGANIZATION'S PRIMARY UNRELATE BUSINESS ACTIVITY	D STATEMENT 1
UBTI(L) PASSED THROUGH FROM	PARTNERSHIP INVESTMENTS	
TO FORM 990-T, PAGE 1		
FORM 990-T INCOM	E (LOSS) FROM PARTNERSHIPS	STATEMENT 2
DESCRIPTION		NET INCOME OR (LOSS)
MESIROW FINANCIAL PRIVATE EQU ORDINARY BUSINESS INCOME	ITY PARTNERSHIP FUN -	766.
MESIROW FINANCIAL PRIVATE EQU RENTAL REAL ESTATE IN		. 1.
MESIROW FINANCIAL PRIVATE EQU NET RENTAL INCOME (<532.>
MESIROW FINANCIAL PRIVATE EQUINTEREST INCOME		87.
MESIROW FINANCIAL PRIVATE EQU DIVIDEND INCOME	ITY PARTNERSHIP FUN -	78.
MESIROW FINANCIAL PRIVATE EQU ROYALTIES	ITY PARTNERSHIP FUN -	64.
MESIROW FINANCIAL PRIVATE EQU PORTFOLIO INCOME (L	ITY PARTNERSHIP FUN - OTHER	82.
MESIROW FINANCIAL PRIVATE EQU INCOME (LOSS)	ITY PARTNERSHIP FUN - OTHER	<6.>
TOTAL INCLUDED ON FORM 990-T,	PAGE 1, LINE 5	540.
FORM 990-T	INTEREST PAID	STATEMENT 3
DESCRIPTION		AMOUNT
PASSED THROUGH FROM MESIROW F	INL PEP FUND VI. LP	131.
	· ·	131.
TOTAL TO FORM 990-T, PAGE 1,	DING TO	131.

INTERNATIONAL FOUNDATION EMPLOYEES RETIR

FORM 990-T	CONTRIBUTIONS	STATEMENT	4
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT	
PASSED THROUGH FROM MESIROW FINL PEP FUND VI, LP		7.	
TOTAL TO FORM 990~T, PAGE 1, I		7.	
	21111 20		
FORM 990-T	OTHER DEDUCTIONS	STATEMENT	5
		STATEMENT	
FORM 990-T	OTHER DEDUCTIONS		5

FORM 990-T	CONTRIBUTIONS SUMMARY	ST	ATEMENT	
CARRYOVER OF PRIOR YEARS U	JNUSED CONTRIBUTIONS			
FOR TAX YEAR 2013 FOR TAX YEAR 2014 FOR TAX YEAR 2015 FOR TAX YEAR 2016 FOR TAX YEAR 2017	1			
TOTAL CARRYOVER TOTAL CURRENT YEAR 50% COM	VTRIBUTIONS	1 7		
TOTAL CONTRIBUTIONS AVAILATAXABLE INCOME LIMITATION		8		
EXCESS 50% CONTRIBUTIONS TOTAL EXCESS CONTRIBUTIONS	3			
ALLOWABLE CONTRIBUTIONS DE	EDUCTION			0
TOTAL CONTRIBUTION DEDUCTI	ON			0

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 7
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/17	2,247.	0.	2,247.	2,247.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	2,247.	2,247.

SCHEDULE I (Form 1041)

Alternative Minimum Tax - Estates and Trusts

➤ Attach to Form 1041

Internal Revenue Service	"' Go to www.irs.gov/Form1041 for instructions	and the latest information.	ĺ	
Name of estate or tru	st		Employer id	lentification number
INTERNATT	ONAL FOUNDATION EMPLOYEES RETIR		1	34021
	's or Trust's Share of Alternative Minimum Taxable	e Income		
	ncome or (loss) (from Form 1041, line 17)		1	493.
2 Interest		• •	2	
3 Taxes			3	
4 Reserved for fu	ure use	••• • • • • •	4	
5 Refund of taxes			5 ()
	ence between regular tax and AMT)		6	
•	ss deduction. Enter as a positive amount	SEE STATEMENT 8	7	2,247.
	ecified private activity bonds exempt from the regular tax		8	
•	pusiness stock (see instructions)		9	
	ntive stock options (excess of AMT income over regular tax income)		10	
	d trusts (amount from Schedule K-1 (Form 1041), box 12, code A)		11	·
	irtnerships (amount from Schedule K-1 (Form 1065-B), box 6)		12	
	roperty (difference between AMT and regular tax gain or loss)		13	·····
	assets placed in service after 1986 (difference between regular tax and AM	T)	14	<2.
	s (difference between AMT and regular tax income or loss)	,	15	
	(difference between AMT and regular tax income or loss)		16	
-	s (difference between regular tax and AMT)	,	17	
· -	acts (difference between AMT and regular tax income)	•	18	
	fference between regular tax and AMT)	• •	19	
	perimental costs (difference between regular tax and AMT)		20	
	tain installment sales before January 1, 1987	•••	21 (
	g costs preference	• • • • • • • • • • • • • • • • • • • •	22	3,126.
-	ts, including income-based related adjustments	• • • • • • • • • • • • • • • • • • • •	23	3,120
•	et operating loss deduction (See the instructions for the limitation that appli		24 (, , , , , , , , , , , , , , , , , ,
				5,864.
	live minimum taxable income. Combine lines 1 through 24		25	3,604.
•	Part II below before going to line 26 ion deduction from Part II, line 44 N/A	N 26		
			-	
		27	١ ؞؞ ا	
8 Add lines 26 and	•	ne.	28	E 061
	s share of alternative minimum taxable income. Subtract line 28 from line 2		29	5,864.
If line 29 is;	and the base and antico O an Form 1041 Cabadula C line to The solute of	or truck and bable for the		
	ss, stop here and enter -0- on Form 1041, Schedule G, line 1c. The estate of	or trust isn't habie for the		
alternative m	· · · · · · ·			
), but less than \$180,300, go to line 45.			
	more, enter the amount from line 29 on line 51 and go to line 52.	37/3		
	Distribution Deduction on a Minimum Tax Basis	N/A	T 00 T	
	ive minimum taxable income (see instructions)		30	
•	mpt interest (other than amounts included on line 8)		31	
•	m Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-		32	
	the tax year allocated to corpus and paid or permanently set aside for			
	ses (from Form 1041, Schedule A, line 4)		33	
	d or permanently set aside for charitable purposes from gross income (see	instructions) .	34	
	nputed on a minimum tax basis included on line 25		35 (
	mputed on a minimum tax basis included on line 25. Enter as a positive am		36	
	alternative minimum taxable income (DNAMTI). Combine lines 30 through	36. It zero or less, enter -0-	37	·
8 Income required	to be distributed currently (from Form 1041, Schedule B, line 9)		38	

42 Tentative income distribution deduction on a minimum tax basis. Subtract line 41 from line 40 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

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

39 Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule 8, line 10)

. .

Schedule I (Form 1041) (2018)

40

41

40 Total distributions. Add lines 38 and 39

	nedule (Form 1041) (2018) INTERNATIONAL FOUNDATION EMP		1034021 Page 2		
_	art II Income Distribution Deduction on a Minimum Tax Bas		inuea)	N/A	
43	Tentative income distribution deduction on a minimum tax basis. Subtract line 31 from line	e 37.		1,0	
	If zero or less, enter -0-	no 42		43	
44	Income distribution deduction on a minimum tax basis. Enter the smaller of line 42 or line Enter here and on line 26	16 43.		144	
	art III Alternative Minimum Tax			44	
				145	#04 COO DO
45	Exemption amount Enter the amount from line 29	140		45	\$24,600 00
46		46	\$81,900 00	\dashv \mid	
47	Phase-out of exemption amount Subtract line 47 from line 46. If zero or less, enter -0-	48	\$61,900.00	⊣ ∣	
48	Multiply line 48 by 25% (0 25)	40		┤ ₄。	
49 50	Subtract line 49 from line 45. If zero or less, enter -0-			50	
51		•		51	
52		hac a na	n on lines 182 and 10	131	
32	of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary). Otherw	-		1 1	
	• \$191,100 or less, multiply line 51 by 26% (0.26).	130, 11 1111	60113		
	• Over \$191,100, multiply line 51 by 28% (0.28) and subtract \$3,822 from the result			52	
53	Alternative minimum foreign tax credit (see instructions)			53	
54	Tentative minimum tax. Subtract line 53 from line 52			54	
55	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Sche	dule G. I	 ine 2a)	55	
56	Alternative minimum tax. Subtract line 55 from line 54. If zero or less, enter -0 Enter he			33	
50	Form 1041, Schedule G, line 1c	10 4110 0	ч	56	
P	art IV Line 52 Computation Using Maximum Capital Gains Ra	ites	t	1 00 1	
	Gaution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D Tax Wo.		···	7 7	
	or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the instruc				
	before completing this part				
57	Enter the amount from line 51			57	
-	Enter the amount from Schedule D (Form 1041), line 26, line 13 of the Schedule D Tax	ĺ	1		
	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)			7	
	(as religured for the AMT, if necessary). If you didn't complete				
	Schedule D for the regular tax or the AMT, enter -0-	59			
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	1			
	the smaller of that result or the amount from line 10 of the Schedule D Tax				
	Worksheet (as refigured for the AMT, if necessary)	60			
61	Enter the smaller of line 57 or line 60			61	
62	Subtract line 61 from line 57			62	
63		,			
	28% (0.28) and subtract \$3,822 from the result			63	
64	Maximum amount subject to the 0% rate	64	\$2,600 00		
65	Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D~				
	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				
	from Form 1041, line 22; if zero or less, enter -0-	_65		_	
66	Subtract line 65 from line 64. If zero or less, enter -0-	66]	
67	Enter the smaller of line 57 or line 58	67]	
68	Enter the smaller of line 66 or line 67. This amount is taxed at 0%	68		_	
69	Subtract line 68 from line 67	69		<u></u>	· ····································
	2 12-13-18			Sched	tule I (Form 1041) (2018)

84 If line 57 is \$191,100 or less, multiply line 57 by 26% (0.26). Otherwise, multiply line 57 by 28% (0.28)

and subtract \$3,822 from the result

85 -Enter the smaller of line 83 or line 84 here and on line 52

Schedule I (Form 1041) (2018)

SCHEDULE I	NET	OPERATING LOSS	CARRYOVER	STATEMENT	8
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED		AMOUNT	
12/31/17	2,247.	(<u> </u>	2,24	
TOTAL TO S	SCHEDULE I, LINE 7	7		2,2	47.

SCHEDULE D (Form 1041)

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

2018

Department of the Treasury Internal Revenue Service

Name of estate or trust
INTERNATIONAL FOUNDATION EMPLOYEES

RETIREMENT PLAN

Employer identification number

<u>39-</u>1034021

	art I Short-Term Capital Gains and Losses-Gen	erally Assets F	leid One Year	or Less (Se	e inst	ructions)
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars		(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part line 2, column (g)		combine the result
1 a	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			ł		
	these transactions on Form 8949, leave this line blank and go to line 1b					
1 ь	Totals for all transactions reported on Form(s) 8949 with					
<u> </u>	Box A checked	<u> </u>	 			
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with					
	Box C checked					
4	Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824		•		4	
5	Net short-term gain or (loss) from partnerships, S corporations, and other	r estates or trusts			5	
6	Short-term capital loss carryover. Enter the amount, if any, from line 9 of the short term capital loss carryover.				•	
Ü	Carryover Worksheet	inc 2017 Ouphur 2005			6	,
7	Net short-term capital gain or (loss). Combine lines 1a through 6 in colu	mn (h) Enter here an	d on line 17		-	1
•	column (3) on page 2	intil (ity. Citter fiere and	o on mie 17,	_	,	
Pa	rt II Long-Term Capital Gains and Losses-Gene	erally Assets H	eld More Tha	n One Year	See ir	estructions)
	structions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustme	nts	(h) Gain or (loss) Subtract column (e)
This fo	orm may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	to gain or los Form(s) 8949, line 2, colum	Part II,	from column (d) and combine the result with column (g)
8 a	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			1		
	these transactions on Form 8949, leave this line blank and go to line 8b					
8 b	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with					
•	Box E checked					
		_,				
10	Totals for all transactions reported on Form(s) 8949 with					
10	Totals for all transactions reported on Form(s) 8949 with					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked				 	
	Box F checked	8824			11	
	, , ,	8824			11	
10	Box F checked Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and		SEE STATE	MENT 9	11	<263.:
11	Box F checked		SEE STATE	MENT 9		<263.
	Box F checked Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and		SEE STATE	MENT 9		<263.

810841 12-21-18 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2017 Capital Loss

16 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on line 18a,

Schedule D (Form 1041) 2018

5,726.

5,463.

Gain from Form 4797, Part 1

Carryover Worksheet

column (3) on page 2

14

Schedule D (Form 1041) 2018 RETIREMENT PI	LAN	· LOI	CES	39-	-1034021 Page 2
Part III' Summary of Parts I and II			(1) Beneficiaries'	(2) Estate	
Caution: Read the instructions before coi	mpleting this part.	- ((1)	or trust's	
17 Net short-term gain or (loss)		17			
18 Net long-term gain or (loss):	·				
a Total for year		18a		5,4	163. 5,463.
b Unrecaptured section 1250 gain (see line 18 of the wor	rksheet)	18b			
c 28% rate gain		18c			
19 Total net gain or (loss). Combine lines 17 and 18a	>	19		5,4	163. 5,463.
Note If line 19, column (3), is a net gain, enter the gain	on Form 1041, line 4 (or Form	990-T,	Part I, line 4a) If line	s 18a and 19	, column (2), are net gains,
go to Part V, and don't complete Part IV. If line 19, colu	ımn (3), ıs a net loss, complete	Part IV	and the Capital Loss C	arryover Work	isheet, as necessary
Part IV Capital Loss Limitation			······		
20 Enter here and enter as a (loss) on Form 1041, line 4 (d	or Form 990-T, Part I, line 4c, if a ti	rust), the	e smaller of:		
a The loss on line 19, column (3) or b \$3,000				20	1()
Note: If the loss on line 19, column (3), is more than \$3		ne 22 (d	or Form 990-T, line 3	8), is a loss, o	complete theCapital
Loss Carryover Worksheet in the instructions to figure you					
Part V Tax Computation Using Maxi	imum Capital Gains Ra	tes			
Form 1041 filers Complete this part only if both lines 18a ar	nd 19 in column (2) are gains, or a	n amour	it is entered in Part I or	Part II and the	re is an entry on Form 1041,
line 2b(2), and Form 1041, line 22, is more than zero.					
Caution: Skip this part and complete the Schedule D Tax		1			
Either line 18b, col. (2) or line 18c, col. (2) is more ti					
Both Form 1041, line 2b(1), and Form 4952, line 4g					
Form 990-T trusts Complete this part only if both lines 18a	* ' '				•
38, is more than zero. Skip this part and complete the Sched			either line 180, col. (2)	or line 180, co	i. (2) is more than zero.
21 Enter taxable income from Form 1041, line 22 (or Form !	990-1, line 30)	21	+		
22 Enter the smaller of line 18a or 19 in column (2) but not less than zero	22			j ,	j
	"	_			
23 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends		ł			
included in income in Part I of Form 990-T)	23	ļ			
24 Add lines 22 and 23	24	\dashv			
25 If the estate or trust is filing Form 4952, enter the	24	\dashv			
amount from line 4g; otherwise, enter -0-	25				
26 Subtract line 25 from line 24. If zero or less, enter -0-		26			
27 Subtract line 26 from line 21. If zero or less, enter -0-		27	· · · · · · · · · · · · · · · · · · ·		
28 Enter the smaller of the amount on line 21 or \$2,600	•••	28	<u> </u>		
29 Enter the smaller of the amount on line 27 or line 28	• • •	29	<u> </u>		
30 Subtract line 29 from line 28. If zero or less, enter -0 Th	nis amount is taxed at 0%			▶ 30	
31 Enter the smaller of line 21 or line 26		31	1		
32 Subtract line 30 from line 26		32			
33 Enter the smaller of line 21 or \$12,700		33			
34 Add lines 27 and 30		34			
35 Subtract line 34 from line 33. If zero or less, enter -0-		35			
36 Enter the smaller of line 32 or line 35		36			
37 Multiply line 36 by 15% (0.15)				▶ 37	
38 Enter the amount from line 31		38			
39 Add lines 30 and 36	• •	39			
40 Subtract line 39 from line 38. If zero or less, enter -0-	•	40			
41 Multiply line 40 by 20% (0.20)				▶ 41	
42 Figure the tax on the amount on line 27. Use the 2018 Ta					
and Trusts (see the Schedule G instructions in the instruc	ctions for Form 1041)	42			i
43 Add lines 37, 41, and 42		43	ļ		
44 Figure the tax on the amount on line 21. Use the 2018 Ta	x Rate Schedule for Estates				
and Trusts (see the Schedule G instructions in the instruc	·	44	L]	1
45 Tax on all taxable income. Enter the smaller of line 43 of	or line 44 here and on Form 1041,	Schedule)		
G, line 1a (or Form 990-T, line 40)				▶ 45	
810842 12-21-18				Sc	chedule D (Form 1041) 2018

SCHEDULE D	NET LONG-TERM GAIN OR LOSS FROM PARTNERSHIPS AND S-CORPORATIONS		STATEMENT	9
DESCRIPTION OF ACTIVITY		GAIN OR LOSS	28% GAIN	ī
MESIROW FINANCIAL PRIVATE EQUITY PARTNER		<263.	>	
TOTAL TO SCHEDU	E D, PART II, LINE 12	<263.	>	