

Form 990-T

EXTENDED TO NOVEMBER 15, 2019

Exempt Organization Business Income Tax Return  
(and proxy tax under section 6033(e))

OMB No 1545-0687

2018

For calendar year 2018 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

► Go to [www.irs.gov/Form990T](http://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 OnlyDepartment of the Treasury  
Internal Revenue ServiceA  Check box if  
address changedName of organization (  Check box if name changed and see instructions.)D Employer identification number  
(Employees' trust, see  
instructions)B Exempt under section  
 501(c)(3)  
 408(e)  220(e)  
 408A  530(a)  
 529(a)

THE JOHN J. POHANKA FAMILY FOUNDATION

56-6784266

Print  
or  
Type

Number, street, and room or suite no. If a P.O. box, see instructions.

E Unrelated business activity code  
(See instructions)

1772 RITCHIE STATION COURT

523000

City or town, state or province, country, and ZIP or foreign postal code

CAPITOL HEIGHTS, MD 20743

C Book value of all assets  
at end of year

18,357,396.

F Group exemption number (See instructions.) ►

G Check organization type ►  501(c) corporation  501(c) trust  401(a) trust  Other trustH Enter the number of the organization's unrelated trades or businesses. ► 1 Describe the only (or first) unrelated  
trade or business here ► SEE STATEMENT 12 . If only one, complete Parts I-V. If more than one,  
describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or  
business, then complete Parts III-V.I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ►  Yes  No  
If "Yes," enter the name and identifying number of the parent corporation. ►

J The books are in care of ► TRUSTEES

Telephone number ► (301) 899-7800

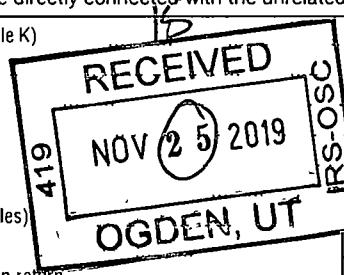
## Part I Unrelated Trade or Business Income

		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances	c Balance		
2	Cost of goods sold (Schedule A, line 7)	► 1c		
3	Gross profit. Subtract line 2 from line 1c	2		
4a	Capital gain net income (attach Schedule D)	3		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4a		
c	Capital loss deduction for trusts	4b		
5	Income (loss) from a partnership or an S corporation (attach statement)	4c -3,000.		-3,000.
6	Rent income (Schedule C)	5 64,946.	STMT 613	64,946.
7	Unrelated debt-financed income (Schedule E)	6		
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	7		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	8		
10	Exploited exempt activity income (Schedule I)	9		
11	Advertising income (Schedule J)	10		
12	Other income (See instructions, attach schedule)	11		
13	Total. Combine lines 3 through 12	12		
		13 61,946.		61,946.

## 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)
- 15 Salaries and wages
- 16 Repairs and maintenance
- 17 Bad debts
- 18 Interest (attach schedule) (see instructions)
- 19 Taxes and licenses
- 20 Charitable contributions (See instructions for limitation rules)
- 21 Depreciation (attach Form 4562)
- 22 Less depreciation claimed on Schedule A and elsewhere on return
- 23 Depletion
- 24 Contributions to deferred compensation plans
- 25 Employee benefit programs
- 26 Excess exempt expenses (Schedule I)
- 27 Excess readership costs (Schedule J)
- 28 Other deductions (attach schedule)
- 29 Total deductions. Add lines 14 through 28
- 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13
- 31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)
- 32 Unrelated business taxable income. Subtract line 31 from line 30



14	
15	
16	
17	
18	
19	
20	
21	
22a	
22b	
23	
24	
25	
26	
27	
28	
29	0.
30	61,946.
31	
32	61,946.

823701 01-09-19 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-T (2018)

14491114 144198 566784266

2018.05000 THE JOHN J. POHANKA FAMIL 56678421

**Part III Total Unrelated Business Taxable Income**

33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	61,946.
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	61,946.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34	36	
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, enter the smaller of zero or line 36	38	0.

**Part IV Tax Computation**

39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from <input checked="" type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	40	0.
41	Proxy tax. See instructions	41	
42	Alternative minimum tax (trusts only)	42	9,710.
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	9,710.

**Part V Tax and Payments**

45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a	
b	Other credits (see instructions)	45b	
c	General business credit. Attach Form 3800	45c	
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	9,710.
47	Other taxes. Check if from <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	47	
48	Total tax. Add lines 46 and 47 (see instructions)	48	9,710.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
50a	Payments A 2017 overpayment credited to 2018	50a	93,823.
b	2018 estimated tax payments	50b	
c	Tax deposited with Form 8868	50c	
d	Foreign organizations Tax paid or withheld at source (see instructions)	50d	
e	Backup withholding (see instructions)	50e	
f	Credit for small employer health insurance premiums (attach Form 8941)	50f	
g	Other credits, adjustments, and payments <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other	50g	
	Total ►	51	93,823.
51	Total payments. Add lines 50a through 50g	51	93,823.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached ► <input type="checkbox"/>	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	
54	Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	84,113.
55	Enter the amount of line 54 you want Credited to 2019 estimated tax ► 84,113.   Refunded ► 55	55	0.

**Part VI Statements Regarding Certain Activities and Other Information (see instructions)**

56	At any time during the 2018 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
57	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
58	Enter the amount of tax-exempt interest received or accrued during the tax year ► \$	Yes	No

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	Title
	11/15/19	TRUSTEE	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Paid Preparer Use Only	Print/Type preparer's name SCOTT BARNARD	Preparer's signature	Date 11/14/19	Check <input type="checkbox"/> if self-employed	PTIN P00243277
	Firm's name ► BAKER TILLY VIRCHOW KRAUSE, LLP			Firm's EIN ►	39-0859910
	8219 LEESBURG PIKE, SUITE 800				
	Firm's address ► TYSONS, VA 22182			Phone no.	(703) 923-8300

**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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
b Other costs (attach schedule)	4b		
5 Total. Add lines 1 through 4b	5		

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

(see instructions)

**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.	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)		0.
		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ► 0.

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

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) ► 0.	Enter here and on page 1, Part I, line 7, column (B) ► 0.	0.
Total dividends-received deductions included in column 8					0.

Form 990-T (2018)

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

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)

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 8, column (B)
Totals		0.			0.

## Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

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.	0.

**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)						
<b>Totals from Part I</b> ►	<b>0.</b>	<b>0.</b>				<b>0.</b>
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
<b>Totals, Part II (lines 1-5)</b> ►	<b>0.</b>	<b>0.</b>				<b>0.</b>
<b>Schedule K - Compensation of Officers, Directors, and Trustees</b> (see instructions)						
1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business			
(1)		%				
(2)		%				
(3)		%				
(4)		%				
<b>Total. Enter here and on page 1, Part II, line 14</b> ►						<b>0.</b>

Form 990-T (2018)

THE JOHN J. POHANKA FAMILY FOUNDATION

56-6784266

FORM 990-T      DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY      STATEMENT 12

INVESTMENT IN PARTNERSHIPS WITH UNDERLYING UNRELATED BUSINESS INCOME INVESTMENTS

TO FORM 990-T, PAGE 1

FORM 990-T      INCOME (LOSS) FROM PARTNERSHIPS      STATEMENT 13

DESCRIPTION	NET INCOME OR (LOSS)
DB PE GLOBAL SELECT FUND II - ORDINARY BUSINESS INCOME (LOSS)	-1,981.
DB PE GLOBAL SELECT FUND IV - ORDINARY BUSINESS INCOME (LOSS)	15.
SPECIAL OPPORTUNITIES FUND II - ORDINARY BUSINESS INCOME (LOSS)	-2.
ENERGY TRANSFER LP - ORDINARY BUSINESS INCOME (LOSS)	-1,892.
ENTERPRISE PRODUCTS PARTNERS LP - ORDINARY BUSINESS INCOME (LOSS)	-3,001.
RYAN SPECIALTY GROUP LLC - ORDINARY BUSINESS INCOME (LOSS)	71,807.
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5	64,946.

FORM 990-T      NET OPERATING LOSS DEDUCTION      STATEMENT 14

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/16	47,055.	0.	47,055.	47,055.
12/31/17	21,276.	0.	21,276.	21,276.
NOL CARRYOVER AVAILABLE THIS YEAR				68,331.

**SCHEDULE I  
(Form 1041)****Alternative Minimum Tax - Estates and Trusts**

OMB No 1545-0092

**2018**Department of the Treasury  
Internal Revenue Service► Attach to Form 1041.  
► Go to [www.irs.gov/Form1041](http://www.irs.gov/Form1041) for instructions and the latest information.

Name of estate or trust

**THE JOHN J. POHANKA FAMILY FOUNDATION**Employer identification number  
**56-6784266****Part II Estate's or Trust's Share of Alternative Minimum Taxable Income**

- 1 Adjusted total income or (loss) (from Form 1041, line 17)
- 2 Interest
- 3 Taxes
- 4 Reserved for future use
- 5 Refund of taxes
- 6 Depletion (difference between regular tax and AMT)
- 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)
- 10 Exercise of incentive stock options (excess of AMT income over regular tax income)
- 11 Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)
- 12 Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)
- 13 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)
- 16 Loss limitations (difference between AMT and regular tax income or loss)
- 17 Circulation costs (difference between regular tax and AMT)
- 18 Long-term contracts (difference between AMT and regular tax income)
- 19 Mining costs (difference between regular tax and AMT)
- 20 Research and experimental costs (difference between regular tax and AMT)
- 21 Income from certain installment sales before January 1, 1987
- 22 Intangible drilling costs preference
- 23 Other adjustments, including income-based related adjustments
- 24 Alternative tax net operating loss deduction (See the instructions for the limitation that applies.)
- 25 Adjusted alternative minimum taxable income Combine lines 1 through 24

**SEE STATEMENT 15**

1	
2	
3	
4	
5	( )
6	
7	<b>61,946.</b>
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	( )
22	
23	
24	( )
25	<b>61,946.</b>

Note: Complete Part II below before going to line 26

- 26 Income distribution deduction from Part II, line 44
- 27 Estate tax deduction (from Form 1041, line 19)
- 28 Add lines 26 and 27
- 29 Estate's or trust's share of alternative minimum taxable income Subtract line 28 from line 25

<b>N/A</b>	26	
<b>N/A</b>	27	
	28	
	29	<b>61,946.</b>

If line 29 is

- \$24,600 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 \$24,600, but less than \$180,300, go to line 45
- \$180,300 or more, enter the amount from line 29 on line 51 and go to line 52.

**Part III Income Distribution Deduction on a Minimum Tax Basis****N/A**

- 30 Adjusted alternative minimum taxable income (see instructions)
- 31 Adjusted tax-exempt interest (other than amounts included on line 8)
- 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)
- 34 Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)
- 35 Capital gains computed on a minimum tax basis included on line 25
- 36 Capital losses computed on a minimum tax basis included on line 25. Enter as a positive amount
- 37 Distributable net alternative minimum taxable income (DNAMTI). Combine lines 30 through 36. If zero or less, enter -0-
- 38 Income required to be distributed currently (from Form 1041, Schedule B, line 9)
- 39 Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)
- 40 Total distributions Add lines 38 and 39
- 41 Tax-exempt income included on line 40 (other than amounts included on line 8)
- 42 Tentative income distribution deduction on a minimum tax basis Subtract line 41 from line 40

30	
31	
32	
33	
34	
35	( )
36	
37	
38	
39	
40	
41	
42	

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

Schedule I (Form 1041) (2018)

**Part II | Income Distribution Deduction on a Minimum Tax Basis (continued)**

N/A

43 Tentative income distribution deduction on a minimum tax basis. Subtract line 31 from line 37

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

**Part III | Alternative Minimum Tax**

45 Exemption amount

45 \$24,600 00

46 Enter the amount from line 29

46 61,946.

47 Phase-out of exemption amount

47 \$81,900 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 24,600.

51 Subtract line 50 from line 46

51 37,346.

52 Go to Part IV of Schedule I to figure line 52 if the estate or trust has qualified dividends or has a gain on lines 18a and 19 of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary). Otherwise, if line 51 is -

• \$191,100 or less, multiply line 51 by 26% (0.26).

52 9,710.

• Over \$191,100, multiply line 51 by 28% (0.28) and subtract \$3,822 from the result

53 Alternative minimum foreign tax credit (see instructions)

53

54 Tentative minimum tax Subtract line 53 from line 52

54 9,710.

55 Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedule G, line 2a)

55 0.

56 Alternative minimum tax Subtract line 55 from line 54. If zero or less, enter -0-. Enter here and on Form 1041, Schedule G, line 1c

56 9,710.

**Part IV | Line 52 Computation Using Maximum Capital Gains Rates**

Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D Tax Worksheet, or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the instructions before completing this part.

57 Enter the amount from line 51

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 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 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 If line 62 is \$191,100 or less, multiply line 62 by 26% (0.26). Otherwise, multiply line 62 by 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

**Part IV Line 52 Computation Using Maximum Capital Gains Rates (continued)**

70 Maximum amount subject to rates below 20%

71 Enter the amount from line 66

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-

73 Add line 71 and line 72

74 Subtract line 73 from line 70. If zero or less, enter -0-

75 Enter the smaller of line 69 or 74

76 Multiply line 75 by 15% (0.15)

77 Add lines 68 and 75  
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

79 Multiply line 78 by 20% (0.20)  
If line 59 is zero or blank, skip lines 80 through 82 and go to line 83. Otherwise, go to line 80.

80 Add lines 62, 77, and 78

81 Subtract line 80 from line 57

82 Multiply line 81 by 25% (0.25)

83 Add lines 63, 76, 79, and 82

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

70	\$12,700 00	
71		
72		
73		
74		
75		
76		
77		
78		
79		
80		
81		
82		
83		
84		
85		

Schedule I (Form 1041) (2018)

THE JOHN J. POHANKA FAMILY FOUNDATION

56-6784266

SCHEDULE I		NET OPERATING LOSS CARRYOVER	STATEMENT 15
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	AMOUNT
12/31/16	47,055.	0.	47,055.
12/31/17	21,276.	0.	21,276.
TOTAL TO SCHEDULE I, LINE 7			68,331.

14491114 144198 566784266

10  
2018.05000 THE JOHN J. POHANKA FAMIL 56678421  
STATEMENT(S) 15

**SCHEDULE D**  
**(Form 1041)**Department of the Treasury  
Internal Revenue Service**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](http://www.irs.gov/F1041) for instructions and the latest information.

OMB No. 1545-0092

**2018**

Name of estate or trust

Employer identification number

**THE JOHN J. POHANKA FAMILY FOUNDATION****56-6784266**

Note: Form 5227 filers need to complete only Parts I and II.

**Part I Short-Term Capital Gains and Losses-Generally Assets Held One Year or Less (See instructions)**

See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
This form may be easier to complete if you round off cents to whole dollars.				
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 these transactions on Form 8949, leave this line blank and go to line 1b				
1 b Totals for all transactions reported on Form(s) 8949 with <b>Box A checked</b>				
2 Totals for all transactions reported on Form(s) 8949 with <b>Box B checked</b>				
3 Totals for all transactions reported on Form(s) 8949 with <b>Box C checked</b>				
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 estates or trusts				5 216 .
6 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2017 Capital Loss Carryover Worksheet				6 (149 , 219 .)
7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on page 2				7 -149 , 003 .

**Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than One Year (See instructions)**

See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
This form may be easier to complete if you round off cents to whole dollars.				
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 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 <b>Box D checked</b>				
9 Totals for all transactions reported on Form(s) 8949 with <b>Box E checked</b>				
10 Totals for all transactions reported on Form(s) 8949 with <b>Box F checked</b>				
11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts				12 -265 .
13 Capital gain distributions				13
14 Gain from Form 4797, Part I				14
15 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2017 Capital Loss Carryover Worksheet				15 (165 , 892 .)
16 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on line 18a, column (3) on page 2				16 -166 , 157 .

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

Schedule D (Form 1041) 2018

**Part III** **Summary of Parts I and II**

Caution: Read the instructions before completing this part.

	(1) Beneficiaries'	(2) Estate's or trust's	(3) Total
17 Net short-term gain or (loss)	17	-149,003.	-149,003.
18 Net long-term gain or (loss):			
a Total for year	18a	-166,157.	-166,157.
b Unrecaptured section 1250 gain (see line 18 of the worksheet)	18b		
c 28% rate gain	18c		
19 Total net gain or (loss). Combine lines 17 and 18a	19	-315,160.	-315,160.

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 lines 18a and 19, column (2), are net gains, go to Part V, and don't complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

**Part IV** **Capital Loss Limitation**

20 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of:

a The loss on line 19, column (3) or b \$3,000

20 ( 3,000. )

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 38), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover.

**Part V** **Tax Computation Using Maximum Capital Gains Rates**

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there 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 Worksheet in the instructions if:

- Either line 18b, col. (2) or line 18c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.

Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 38, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero.

21 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 38)	21		
22 Enter the smaller of line 18a or 19 in column (2) but not less than zero	22		
23 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	23		
24 Add lines 22 and 23	24		
25 If the estate or trust is filing Form 4952, enter the 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		
29 Enter the smaller of the amount on line 27 or line 28	29		
30 Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0%	30		
31 Enter the smaller of line 21 or line 26	31		
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 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	42		
43 Add lines 37, 41, and 42	43		
44 Figure the tax on the amount on line 21. Use the 2018 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	44		
45 Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 40)	45		

**SCHEDULE D**  
**(Form 1041)**

Department of the Treasury  
Internal Revenue Service

**ALTERNATIVE MINIMUM TAX  
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](http://www.irs.gov/F1041) for instructions and the latest information.

OMB No. 1545-0092

**2018**

Name of estate or trust

Employer identification number

**THE JOHN J. POHANKA FAMILY FOUNDATION**

**56-6784266**

Note: Form 5227 filers need to complete only Parts I and II.

**Part I Short-Term Capital Gains and Losses-Generally Assets Held One Year or Less (See instructions)**

See instructions for how to figure the amounts to enter on the lines below.

(d)  
Proceeds  
(sales price)

(e)  
Cost  
(or other basis)

(g)  
Adjustments  
to gain or loss from  
Form(s) 8949, Part I,  
line 2, column (g)

(h) Gain or (loss)  
Subtract column (e)  
from column (d) and  
combine the result  
with column (g)

This form may be easier to complete if you round off cents to whole dollars.

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 these transactions on Form 8949, leave this line blank and go to line 1b

1 b Totals for all transactions reported on Form(s) 8949 with **Box A** checked

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 estates or trusts

**SEE STATEMENT 19**

6 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2017 Capital Loss Carryover Worksheet

6

7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on page 2

7

**Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than One Year (See instructions)**

See instructions for how to figure the amounts to enter on the lines below.

(d)  
Proceeds  
(sales price)

(e)  
Cost  
(or other basis)

(g)  
Adjustments  
to gain or loss from  
Form(s) 8949, Part II,  
line 2, column (g)

(h) Gain or (loss)  
Subtract column (e)  
from column (d) and  
combine the result  
with column (g)

This form may be easier to complete if you round off cents to whole dollars.

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 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 **Box F** checked

11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824

11

12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts

**SEE STATEMENT 20**

12

**-265.**

13 Capital gain distributions

13

14 Gain from Form 4797, Part I

14

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

15

16 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on line 18a, column (3) on page 2

16

**-265.**

## ALTERNATIVE MINIMUM TAX

Schedule D (Form 1041) 2018 THE JOHN J. POHANKA FAMILY FOUNDATION

56-6784266 Page 2

**Part III** Summary of Parts I and II

Caution: Read the instructions before completing this part.

	(1) Beneficiaries'	(2) Estate's or trust's	(3) Total
17 Net short-term gain or (loss)	17	216.	216.
18 Net long-term gain or (loss):			
a Total for year			
b Unrecaptured section 1250 gain (see line 18 of the worksheet)	18a	-265.	-265.
c 28% rate gain	18b		
19 Total net gain or (loss). Combine lines 17 and 18a	18c		
	19	-49.	-49.

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 lines 18a and 19, column (2), are net gains, go to Part V, and don't complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

**Part IV** Capital Loss Limitation

20 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of  
a The loss on line 19, column (3) or b \$3,000

20	(	49.)
----	---	------

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 38), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover.

**Part V** Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there 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 Worksheet in the instructions if

- Either line 18b, col. (2) or line 18c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero

Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 38, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero.

21 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 38)	21		
22 Enter the smaller of line 18a or 19 in column (2) but not less than zero	22		
23 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	23		
24 Add lines 22 and 23	24		
25 If the estate or trust is filing Form 4952, enter the 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		
29 Enter the smaller of the amount on line 27 or line 28	29		
30 Subtract line 29 from line 28. If zero or less, enter -0. This amount is taxed at 0%		30	
31 Enter the smaller of line 21 or line 26	31		
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 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	42		
43 Add lines 37, 41, and 42	43		
44 Figure the tax on the amount on line 21. Use the 2018 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)	44		
45 Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 40)		45	

810842 12-21-18

Schedule D (Form 1041) 2018

14491114 144198 566784266

14  
2018.05000 THE JOHN J. POHANKA FAMIL 56678421

THE JOHN J. POHANKA FAMILY FOUNDATION

56-6784266

SCHEDULE D NET SHORT-TERM GAIN OR LOSS FROM STATEMENT 16  
PARTNERSHIPS AND S-CORPORATIONS

DESCRIPTION OF ACTIVITY	GAIN OR LOSS
FROM K-1 PRIVATE EQUITY GLOBAL SELECT FUND II	210.
FROM K-1 PRIVATE EQUITY GLOBAL SELECT FUND IV	6.
TOTAL TO SCHEDULE D, PART I, LINE 5	216.

SCHEDULE D NET LONG-TERM GAIN OR LOSS FROM STATEMENT 17  
PARTNERSHIPS AND S-CORPORATIONS

DESCRIPTION OF ACTIVITY	GAIN OR LOSS	28% GAIN
FROM K-1 PRIVATE EQUITY GLOBAL SELECT FUND II	-265.	
TOTAL TO SCHEDULE D, PART II, LINE 12	-265.	

SCHEDULE D	CAPITAL LOSS CARRYOVER WORKSHEET	STATEMENT 18
1. ENTER THE AMOUNT FROM FORM 990-T, LINE 38 . . . . .		0
2. ENTER THE LOSS FROM SCHEDULE D, LINE 20, AS A POSITIVE AMT . . .		3,000
3. COMBINE LINES 1 AND 2. IF ZERO OR LESS, ENTER -0- . . . . .		3,000
4. ENTER THE SMALLER OF LINE 2 OR LINE 3 . . . . .		3,000
NOTE: IF LINE 7 OF SCHEDULE D IS A LOSS, GO TO LINE 5; OTHERWISE, ENTER -0- ON LINE 5 AND GO TO LINE 9.		
5. ENTER THE LOSS FROM SCH D, LINE 7, AS A POSITIVE AMOUNT . . .		149,003
6. ENTER ANY GAIN FROM SCHEDULE D, LINE 16 . . . . .		0
7. ADD LINES 4 AND 6 . . . . .		3,000
8. SHORT-TERM CAPITAL LOSS CARRYOVER TO 2019 . SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0- . . . . .		146,003
NOTE: IF LINE 16 OF SCHEDULE D IS A LOSS, GO TO LINE 9; OTHERWISE, SKIP LINES 9 THROUGH 13.		
9. ENTER THE LOSS FROM SCHEDULE D, LINE 16, AS A POSITIVE AMT . . .		166,157
10. ENTER ANY GAIN FROM SCHEDULE D, LINE 7 . . . . .		0
11. SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0- . . . . .		0
12. ADD LINES 10 AND 11 . . . . .		0
13. LONG-TERM CAPITAL LOSS CARRYOVER TO 2019 . SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0- . . . . .		166,157

SCHEDULE D AMT	NET SHORT-TERM GAIN OR LOSS FROM PARTNERSHIPS AND S-CORPORATIONS	STATEMENT 19
DESCRIPTION OF ACTIVITY		GAIN OR LOSS
FROM K-1 PRIVATE EQUITY GLOBAL SELECT FUND II		210.
FROM K-1 PRIVATE EQUITY GLOBAL SELECT FUND IV		6.
TOTAL TO SCHEDULE D, PART I, LINE 5		216.

THE JOHN J. POHANKA FAMILY FOUNDATION

56-6784266

**SCHEDULE D AMT**      **NET LONG-TERM GAIN OR LOSS FROM  
PARTNERSHIPS AND S-CORPORATIONS**      **STATEMENT 20**

DESCRIPTION OF ACTIVITY	GAIN OR LOSS	28% GAIN
FROM K-1 PRIVATE EQUITY GLOBAL SELECT FUND II	-265.	
TOTAL TO SCHEDULE D, PART II, LINE 12	-265.	