

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

2013

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

For calendar year 2013 or other tax year beginning , and ending

Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

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

Department of the Treasury Internal Revenue Service

Form header section containing: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets at end of year; D Employer identification number; E Unrelated business activity codes; F Group exemption number; G Check organization type; H Describe the organization's primary unrelated business activity.

Form header section containing: F Group exemption number; G Check organization type (501(c) corporation, 501(c) trust, 401(a) trust, Other trust)

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

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

J The books are in care of KARLA JONES-WEBER Telephone number 515-883-2701

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows include: 1a Gross receipts or sales, 1c Balance, 2 Cost of goods sold, 3 Gross profit, 4a Capital gain net income, 4b Net gain (loss), 4c Capital loss deduction for trusts, 5 Income (loss) from partnerships and S corporations, 6 Rent income, 7 Unrelated debt-financed income, 8 Interest, annuities, royalties, and rents from controlled organizations, 9 Investment income, 10 Exploited exempt activity income, 11 Advertising income, 12 Other income, 13 Total.

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.)

Table with 4 columns: Line number, Description, Sub-column, Total. Rows include: 14 Compensation of officers, directors, and trustees, 15 Salaries and wages, 16 Repairs and maintenance, 17 Bad debts, 18 Interest, 19 Taxes and licenses, 20 Charitable contributions, 21 Depreciation, 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, 27 Excess readership costs, 28 Other deductions, 29 Total deductions, 30 Unrelated business taxable income before net operating loss deduction, 31 Net operating loss deduction, 32 Unrelated business taxable income before specific deduction, 33 Specific deduction, 34 Unrelated business taxable income.

<b>Part III Tax Computation</b>	
<b>35 Organizations Taxable as Corporations.</b> See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and: <b>a</b> Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____ <b>b</b> Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____ (2) Additional 3% tax (not more than \$100,000) \$ _____ <b>c</b> Income tax on the amount on line 34	<b>35c</b> <b>80,449.</b>
<b>36 Trusts Taxable at Trust Rates.</b> See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	<b>36</b>
<b>37 Proxy tax.</b> See instructions	<b>37</b>
<b>38 Alternative minimum tax</b>	<b>38</b>
<b>39 Total.</b> Add lines 37 and 38 to line 35c or 36, whichever applies	<b>39</b> <b>80,449.</b>

<b>Part IV Tax and Payments</b>	
<b>40a</b> Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	<b>40a</b>
<b>b</b> Other credits (see instructions)	<b>40b</b>
<b>c</b> General business credit. Attach Form 3800	<b>40c</b>
<b>d</b> Credit for prior year minimum tax (attach Form 8801 or 8827)	<b>40d</b>
<b>e Total credits.</b> Add lines 40a through 40d	<b>40e</b>
<b>41</b> Subtract line 40e from line 39	<b>41</b> <b>80,449.</b>
<b>42</b> 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)	<b>42</b>
<b>43 Total tax.</b> Add lines 41 and 42	<b>43</b> <b>80,449.</b>
<b>44a</b> Payments: A 2012 overpayment credited to 2013	<b>44a</b>
<b>b</b> 2013 estimated tax payments	<b>44b</b> <b>26,880.</b>
<b>c</b> Tax deposited with Form 8868	<b>44c</b> <b>160,500.</b>
<b>d</b> Foreign organizations: Tax paid or withheld at source (see instructions)	<b>44d</b>
<b>e</b> Backup withholding (see instructions)	<b>44e</b>
<b>f</b> Credit for small employer health insurance premiums (Attach Form 8941)	<b>44f</b>
<b>g</b> Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total	<b>44g</b>
<b>45 Total payments.</b> Add lines 44a through 44g	<b>45</b> <b>187,380.</b>
<b>46</b> Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	<b>46</b> <b>287.</b>
<b>47 Tax due.</b> If line 45 is less than the total of lines 43 and 46, enter amount owed	<b>47</b>
<b>48 Overpayment.</b> If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	<b>48</b> <b>106,644.</b>
<b>49</b> Enter the amount of line 48 you want: <b>Credited to 2014 estimated tax</b> <b>80,480.</b> <b>Refunded</b>	<b>49</b> <b>26,164.</b>

<b>Part V Statements Regarding Certain Activities and Other Information</b> (see instructions)	
<b>1</b> At any time during the 2013 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 Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here	Yes No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>
<b>2</b> 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 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>
<b>3</b> Enter the amount of tax-exempt interest received or accrued during the tax year \$	Yes No <input type="checkbox"/> <input type="checkbox"/>

<b>Schedule A - Cost of Goods Sold.</b> Enter method of inventory valuation <b>N/A</b>	
<b>1</b> Inventory at beginning of year	<b>1</b>
<b>2</b> Purchases	<b>2</b>
<b>3</b> Cost of labor	<b>3</b>
<b>4a</b> Additional section 263A costs (att. schedule)	<b>4a</b>
<b>b</b> Other costs (attach schedule)	<b>4b</b>
<b>5 Total.</b> Add lines 1 through 4b	<b>5</b>
<b>6</b> Inventory at end of year	<b>6</b>
<b>7 Cost of goods sold.</b> Subtract line 6 from line 5. Enter here and in Part I, line 2	<b>7</b>
<b>8</b> Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes No <input type="checkbox"/> <input type="checkbox"/>

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.

<b>Sign Here</b>	Signature of officer _____ Date _____	Title <b>PRESIDENT</b>
<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>KAY HEGARTY</b>	Check <input type="checkbox"/> if self-employed
	Firm's name <b>MCGLADREY LLP</b>	PTIN <b>P00091057</b>
	Firm's address <b>400 LOCUST ST, STE 640</b>	Firm's EIN <b>42-0714325</b>
	Firm's address <b>DES MOINES, IA 50309-2354</b>	Phone no. <b>515-558-6600</b>

May the IRS discuss this return with the preparer shown below (see instructions)?  Yes  No

**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		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(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)	
(1)		
(2)		
(3)		
(4)		
Total	0.	Total
		(b) Total deductions.
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) .....		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 .....			0.	0.
Total dividends-received deductions included in column 8 .....			0.	0.

**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)					
Totals .....			0.	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).	
			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)				
<b>Totals</b>	<b>0.</b>			<b>0.</b>

**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)						
<b>Totals</b>	<b>0.</b>	<b>0.</b>				<b>0.</b>

**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)						
<b>Totals (carry to Part II, line (5))</b>	<b>0.</b>	<b>0.</b>				<b>0.</b>

**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>
<b>Totals, Part II (lines 1-5)</b>	<b>0.</b>	<b>0.</b>				<b>0.</b>

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

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
<b>Total. Enter here and on page 1, Part II, line 14</b>			<b>0.</b>

**Alternative Minimum Tax - Corporations**

▶ Attach to the corporation's tax return.

▶ Information about Form 4626 and its separate instructions is at [www.irs.gov/form4626](http://www.irs.gov/form4626).

**2013**

Name <b>COMMUNITY FDN OF GREATER DES MOINES F/K/A GREATER DES MOINES COMMUNITY FDN</b>		Employer identification number <b>42-6139033</b>
<b>Note:</b> See the instructions to find out if the corporation is a small corporation exempt from the alternative minimum tax (AMT) under section 55(e).		
1	Taxable income or (loss) before net operating loss deduction .....	249,228.
2	<b>Adjustments and preferences:</b>	
a	Depreciation of post-1986 property .....	-8,471.
b	Amortization of certified pollution control facilities .....	
c	Amortization of mining exploration and development costs .....	
d	Amortization of circulation expenditures (personal holding companies only) .....	
e	Adjusted gain or loss .....	-142.
f	Long-term contracts .....	
g	Merchant marine capital construction funds .....	
h	Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only) .....	
i	Tax shelter farm activities (personal service corporations only) .....	
j	Passive activities (closely held corporations and personal service corporations only) .....	
k	Loss limitations .....	
l	Depletion .....	
m	Tax-exempt interest income from specified private activity bonds .....	
n	Intangible drilling costs .....	
o	Other adjustments and preferences .....	*
3	Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 2o .....	240,615.
4	<b>Adjusted current earnings (ACE) adjustment:</b>	
a	ACE from line 10 of the ACE worksheet in the instructions .....	240,615.
b	Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a negative amount (see instructions) .....	0.
c	Multiply line 4b by 75% (.75). Enter the result as a positive amount .....	
d	Enter the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments (see instructions). <b>Note:</b> You <b>must</b> enter an amount on line 4d (even if line 4b is positive) .....	
e	ACE adjustment. <ul style="list-style-type: none"> <li>• If line 4b is zero or more, enter the amount from line 4c</li> <li>• If line 4b is less than zero, enter the <b>smaller</b> of line 4c or line 4d as a negative amount</li> </ul>	0.
5	Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT .....	240,615.
6	Alternative tax net operating loss deduction (see instructions) .....	
7	<b>Alternative minimum taxable income.</b> Subtract line 6 from line 5. If the corporation held a residual interest in a REMIC, see instructions .....	240,615.
8	<b>Exemption phase-out</b> (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c):	
a	Subtract \$150,000 from line 7 (if completing this line for a member of a controlled group, see instructions). If zero or less, enter -0- .....	90,615.
b	Multiply line 8a by 25% (.25) .....	22,654.
c	Exemption. Subtract line 8b from \$40,000 (if completing this line for a member of a controlled group, see instructions). If zero or less, enter -0- .....	17,346.
9	Subtract line 8c from line 7. If zero or less, enter -0- .....	223,269.
10	Multiply line 9 by 20% (.20) .....	44,654.
11	Alternative minimum tax foreign tax credit (AMTFTC) (see instructions) .....	
12	Tentative minimum tax. Subtract line 11 from line 10 .....	44,654.
13	Regular tax liability before applying all credits except the foreign tax credit .....	80,449.
14	<b>Alternative minimum tax.</b> Subtract line 13 from line 12. If zero or less, enter -0-. Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return .....	0.

JWA For Paperwork Reduction Act Notice, see separate instructions.

Form 4626 (2013)

\* SEE ALSO

STATEMENT 3

**Adjusted Current Earnings (ACE) Worksheet**

▶ See ACE Worksheet Instructions.

1 Pre-adjustment AMTI. Enter the amount from line 3 of Form 4626		1	240,615.
2 ACE depreciation adjustment:			
a AMT depreciation		2a	
b ACE depreciation:			
(1) Post-1993 property	2b(1)		
(2) Post-1989, pre-1994 property	2b(2)		
(3) Pre-1990 MACRS property	2b(3)		
(4) Pre-1990 original ACRS property	2b(4)		
(5) Property described in sections 168(f)(1) through (4)	2b(5)		
(6) Other property	2b(6)		
(7) Total ACE depreciation. Add lines 2b(1) through 2b(6)	2b(7)		
c ACE depreciation adjustment. Subtract line 2b(7) from line 2a		2c	
3 Inclusion in ACE of items included in earnings and profits (E&P):			
a Tax-exempt interest income		3a	
b Death benefits from life insurance contracts		3b	
c All other distributions from life insurance contracts (including surrenders)		3c	
d Inside buildup of undistributed income in life insurance contracts		3d	
e Other items (see Regulations sections 1.56(g)-1(c)(6)(iii) through (ix) for a partial list)		3e	
f Total increase to ACE from inclusion in ACE of items included in E&P. Add lines 3a through 3e		3f	
4 Disallowance of items not deductible from E&P:			
a Certain dividends received		4a	
b Dividends paid on certain preferred stock of public utilities that are deductible under section 247		4b	
c Dividends paid to an ESOP that are deductible under section 404(k)		4c	
d Nonpatronage dividends that are paid and deductible under section 1382(c)		4d	
e Other items (see Regulations sections 1.56(g)-1(d)(3)(i) and (ii) for a partial list)		4e	
f Total increase to ACE because of disallowance of items not deductible from E&P. Add lines 4a through 4e		4f	
5 Other adjustments based on rules for figuring E&P:			
a Intangible drilling costs		5a	
b Circulation expenditures		5b	
c Organizational expenditures		5c	
d LIFO inventory adjustments		5d	
e Installment sales		5e	
f Total other E&P adjustments. Combine lines 5a through 5e		5f	
6 Disallowance of loss on exchange of debt pools		6	
7 Acquisition expenses of life insurance companies for qualified foreign contracts		7	
8 Depletion		8	
9 Basis adjustments in determining gain or loss from sale or exchange of pre-1994 property		9	
10 <b>Adjusted current earnings.</b> Combine lines 1, 2c, 3f, 4f, and 5f through 9. Enter the result here and on line 4a of Form 4626		10	240,615.

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS	STATEMENT	1
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DESCRIPTION	AMOUNT
UBS REAL ESTATE OPPORTUNITY FUND LLC	168,703.
UBS REAL ESTATE OPPORTUNITY FUND II LLC	239,925.
UBS PRIVATE EQUITY FUND VII LLC	-3,218.
NEWBURY EQUITY PARTNERS LP	2,214.
NORTHGATE IV LP	9,460.
DES MOINES TECHNOLOGY BUSINESS	-4,530.
MIDWEST RENEWABLE LLC	-65,474.
MONTAUK TRIGUARD FUND V, LP	-34,231.
ALLIANCE RESOURCE PARTNERS LP	1.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	312,850.

FORM 990-T	OTHER DEDUCTIONS	STATEMENT	2
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DESCRIPTION	AMOUNT
INVESTMENT FEES	7,497.
TOTAL TO FORM 990-T, PAGE 1, LINE 28	7,497.

FORM 4626

AMT CONTRIBUTIONS

STATEMENT 3

## CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS

FOR TAX YEAR 2008

FOR TAX YEAR 2009

FOR TAX YEAR 2010

FOR TAX YEAR 2011

FOR TAX YEAR 2012

## TOTAL CARRYOVER

CURRENT YEAR CONTRIBUTIONS

## TOTAL CONTRIBUTIONS

10% OF TAXABLE INCOME AS ADJUSTED

26,831

EXCESS CONTRIBUTIONS

0

ALLOWABLE CONTRIBUTIONS

0

AMT CHARITABLE DEDUCTION

0

REGULAR CONTRIBUTION DEDUCTION

27,692

AMT CONTRIBUTION ADJUSTMENT

27,692



# Underpayment of Estimated Tax by Corporations

Department of the Treasury  
Internal Revenue Service

▶ Attach to the corporation's tax return. **FORM 990-T**

**2013**

▶ Information about Form 2220 and its separate instructions is at [www.irs.gov/form2220](http://www.irs.gov/form2220).

Name <b>COMMUNITY FDN OF GREATER DES MOINES</b> <b>F/K/A GREATER DES MOINES COMMUNITY FDN</b>	Employer identification number <b>42-6139033</b>
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**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

<b>Part I Required Annual Payment</b>			
1 Total tax (see instructions) .....		<b>1</b>	<b>80,449.</b>
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....	<b>2a</b>		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	<b>2b</b>		
c Credit for federal tax paid on fuels (see instructions) .....	<b>2c</b>		
d Total. Add lines 2a through 2c .....		<b>2d</b>	
3 Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty .....		<b>3</b>	<b>80,449.</b>
4 Enter the tax shown on the corporation's 2012 income tax return (see instructions). <b>Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5</b> .....		<b>4</b>	<b>26,876.</b>
5 <b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....		<b>5</b>	<b>26,876.</b>

**Part II Reasons for Filing** - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty (see instructions).

6  The corporation is using the adjusted seasonal installment method.

7  The corporation is using the annualized income installment method.

8  The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

<b>Part III Figuring the Underpayment</b>					
		(a)	(b)	(c)	(d)
9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th ( <b>Form 990-PF filers:</b> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....	<b>9</b>	<b>04/15/13</b>	<b>06/15/13</b>	<b>09/15/13</b>	<b>12/15/13</b>
10 <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column. ....	<b>10</b>	<b>6,719.</b>	<b>6,719.</b>	<b>6,719.</b>	<b>6,719.</b>
11 Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15 .....	<b>11</b>				<b>26,880.</b>
<b>Complete lines 12 through 18 of one column before going to the next column.</b>					
12 Enter amount, if any, from line 18 of the preceding column .....	<b>12</b>				
13 Add lines 11 and 12 .....	<b>13</b>				<b>26,880.</b>
14 Add amounts on lines 16 and 17 of the preceding column .....	<b>14</b>		<b>6,719.</b>	<b>13,438.</b>	<b>20,157.</b>
15 Subtract line 14 from line 13. If zero or less, enter -0- .....	<b>15</b>	<b>0.</b>	<b>0.</b>	<b>0.</b>	<b>6,723.</b>
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....	<b>16</b>		<b>6,719.</b>	<b>13,438.</b>	
17 <b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 .....	<b>17</b>	<b>6,719.</b>	<b>6,719.</b>	<b>6,719.</b>	
18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....	<b>18</b>				

**Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.**

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 3rd month after the close of the tax year, whichever is earlier (see instructions). (Form 990-PF and Form 990-T filers: Use 5th month instead of 3rd month.)	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2013 and before 7/1/2013	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 3\%}{365}$	22	\$	\$	\$
23 Number of days on line 20 after 06/30/2013 and before 10/1/2013	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 3\%}{365}$	24	\$	\$	\$
25 Number of days on line 20 after 9/30/2013 and before 1/1/2014	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 3\%}{365}$	26	\$	\$	\$
27 Number of days on line 20 after 12/31/2013 and before 4/1/2014	27	<b>SEE ATTACHED WORKSHEET</b>		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 3\%}{365}$	28	\$	\$	\$
29 Number of days on line 20 after 3/31/2014 and before 7/1/2014	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times 3\%}{365}$	30	\$	\$	\$
31 Number of days on line 20 after 6/30/2014 and before 10/01/2014	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times 3\%}{365}$	32	\$	\$	\$
33 Number of days on line 20 after 9/30/2014 and before 1/1/2015	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times 3\%}{365}$	34	\$	\$	\$
35 Number of days on line 20 after 12/31/2014 and before 2/16/2015	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times 3\%}{365}$	36	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$
38 <b>Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120; line 33; or the comparable line for other income tax returns	38	\$		<b>287.</b>

\* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.



FORM 8886 PARTICIPATED IN TRANSACTION THROUGH STATEMENT 4  
ANOTHER ENTITY

TRANSACTION NAME: LOSSES FROM TRADING ACTIVITIES

NAME AND EIN OF OTHER ENTITY	TYPE OF ENTITY				DATE K-1 RECEIVED
	PARTNER	S CORP	TRUST	FOREIGN	
GLOBAL FIXED INCOME INVESTMENT GRADE BRANDYWINE INVESTMENT TRUST 76-0822143	X				03/31/2014
NEWBURY EQUITY PARTNERS LP 71-1012623	X				08/11/2014
GLOBAL FIXED INCOME INVESTMENT GRADE BRANDYWINE INVESTMENT TRUST 76-0822143	X				03/31/2014
UBS REAL ESTATE OPPORTUNITY FUND II LLC 20-4079577	X				08/18/2014

FORM 8886

STATEMENT 5

THE TAXPAYER RECEIVED SCHEDULE K-1S FROM THE ABOVE ENTITIES REPORTING SECTION 988 LOSSES IN THE AMOUNT OF:

GLOBAL FIXED INCOME INVESTMENT GRADE BRANDYWINE INVESTMENT TRUST	(290,124)
GLOBAL FIXED INCOME INVESTMENT GRADE BRANDYWINE INVESTMENT TRUST	(27,906)
UBS REAL ESTATE OPPORTUNITY FUND II LLC	(13,734)
NEWBURY EQUITY PARTNERS LP	(10)
SUM OF REPORTABLE LOSSES	(331,774)

THE TAXPAYER HAS REPORTED THE UBI PORTION OF THE AMOUNT ON LINE 5 ON FORM 990-T. THE TAXPAYER IS FILING FORM 8886 AS A PROTECTIVE MEASURE. THE ABOVE 8886 AMOUNTS ARE TOTALS. DETAIL OF TOTALS IS AVAILABLE ON REQUEST.

FORM 8886

STATEMENT 6

## SECTION 165 REPORTABLE LOSS TRANSACTION

THE TAXPAYER RECEIVED A SCHEDULE K-1 FROM THE AFOREMENTIONED ENTITY REPORTING SECTION 165 LOSSES IN THE AMOUNT OF:

BRE/MAURITIUS BIDCO EIN: 20-3397400 (9,358)

THE TAXPAYER HAS REPORTED THE UBI PORTION OF THE AMOUNT ON LINE 5 OF FORM 990-T. THE TAXPAYER IS FILING FORM 8886 AS A PROTECTIVE MEASURE.