Form <b>990-T</b>	## 990-T Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))							OMB No. 1545-0047
	Fax 00	•						2019
	For Ca	lendar year 2019 or other tax ye	.irs.gov/Form990T for in		, and ending	ation	— ·	2013
Department of the Treasury Internal Revenue Service	<b></b>	Do not enter SSN numbe	•				. 5d	pen to Public Inspection for 01(c)(3) Organizations Only
A Check box if address changed		Name of organization (	Check box if name cl	hanged	and see instructions.)			er identification number yees' trust, see ions.)
<b>B</b> Exempt under section	Print	The Piton Foundat	ion				81-	0587194
x 501(c)(3)	Type	Number, street, and room		k, see in	structions.			ed business activity code tructions.)
408(e) 220(e)	) liyhe	1705 17th Street					]	
408A 530(a)		City or town, state or production Denver, CO 80202		r foreig	n postal code		523000	)
C Book value of all assets at end of year		F Group exemption number	,	<b>&gt;</b>			'	
201,018		<b>G</b> Check organization typ		oration	501(c) trust	401(a)	) trust	Other trust
	•	ation's unrelated trades or b	· -	1		the only (or first) ur		
		estment in limited				complete Parts I-V.		
		ace at the end of the previou	us sentence, complete Pa	ırts I an	d II, complete a Schedule	M for each addition	nal trade o	or
business, then complete			· ·				1,,	
		ooration a subsidiary in an a tifying number of the parer		nt-subsi	diary controlled group?	▶ l	Yes	X No
		The Piton Foundati	<u> </u>		Talanh	one number $\triangleright$ 3	03-638	_ 3 8 0 0
		de or Business Inc			(A) Income	(B) Expense		(C) Net
1a Gross receipts or sa		uo or Buomicoo mi			(1)	(= ) = =	-	(5)
<b>b</b> Less returns and allo			<b>c</b> Balance	1c				
		e A, line 7)		2				
3 Gross profit. Subtract				3				
		ch Schedule D)		4a	133,203.			133,203.
		Part II, line 17) (attach Form		4b	•			· ·
		sts		4c				
		ship or an S corporation (a		5	-614,838.	Stmt 17		-614,838.
6 Rent income (Sched	lule C)			6				
7 Unrelated debt-finan	ced inco	me (Schedule E)		7				
8 Interest, annuities, re	oyalties, a	and rents from a controlled	organization (Schedule F)	8				
		on 501(c)(7), (9), or (17) o	· · · · · · · · · · · · · · · · · · ·	9				
		ome (Schedule I)		10				
11 Advertising income	(Schedule	e J)		11				
		ns; attach schedule)		12				
		igh 12			-481,635.			-481,635.
(Deduction	ıs must l	ot Taken Elsewher be directly connected w	ith the unrelated busin	ness in	come.)			
		rectors, and trustees (Sche					14	6,956.
							15	
							16	
							17	
		ee instructions)					18	
19 Taxes and licenses	h Eorm 4	 ECQ\					19	
		562)					21b	
		n Schedule A and elsewher					22	
		mpensation plans					23	
		inpensation plans					24	
25 Excess exempt exp	enses (S	chedule I)					25	
26 Excess readership	costs (So	hedule J)					26	
27 Other deductions (a	attach scl	hedule)			See Statemen	t 18	27	66,925.
		14 through 27					28	73,881.
		ncome before net operating					29	-555,516.
		loss arising in tax years be						· · · · · ·
(see instructions)							30	0.
		ncome. Subtract line 30 fro					31	-555,516.

Paid Preparer Use Only  Print/Type preparer's name  Preparer's signature  Date  Check if PTIN self- employed  Point/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Point/Type preparer's name  Preparer's signature  Point/Type preparer's name  Print/Type preparer's name  Point/Type preparer's name  Print/Type preparer's	Part		otal Unrelated Business Taxa	ble income							
34 Charlable contributions (see instructions for limitation rules)  58 Total unrelated business taxable recome before people of the Note. And appealize deduction. Subtract the 94 for the search files \$2 and 33  58 Deduction for not operating loss a sishing in tax years beginning before January 1, 2018 (see instructions)  77 Total of unrelated business taxable income before specific deduction. Subtract line 36 for miles 55  78 Total of unrelated business taxable income before specific deduction. Subtract line 36 for miles 55  88 Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)  9 Unrelated business taxable and corporations. Multiply line 39 by 21% (0.21)  40 Organizations Izaable as Corporations. Multiply line 39 by 21% (0.21)  41 Trasts Taxable at Trust Rates. See instructions for fix computation. Income tax on the amount on line 39 from:  42 Trava in Noncompliant Facility income. See instructions  43 Alternative minimum tax (rusts only)  44 Tax on Noncompliant Facility income. See instructions  54 Total. Additine 42, 43, and 44 to line 40 or 41, whichever applies  45 Total. Additine 42, 43, and 44 to line 40 or 41, whichever applies  46 Foreign its credit (corporations attach Form 1116; trusts attach Form 1116)  46 Order (roth) every eur minimum tax (rusts only)  46 Credit for pricy eur minimum tax (rusts only)  47 Subtract line 46 form line 45  48 Other carditis (see instructions)  49 Total tax Additis Add lines 43 and 45 line 40 or 41, whichever applies  49 Total tax Additis Add lines 46 the 40 or 41, whichever applies  49 Total tax Additis Add lines 46 the 40 or 41, whichever applies  40 Total credits, Add lines 47 and 46 lines 40 or 41, whichever applies  40 Total credits, Add lines 47 and 46 lines 40 or 40 or 41, whichever applies  40 Total credits, Add lines 47 or 40 or	32	Total of	unrelated business taxable income computed	from all unrelated trades of	or businesses (s	ee instructions)		32		-555	,516.
38 Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract time 3 from the quant of times 32 and 33 B Deduction for not exposing to search specific deduction (Generally \$1,000, but see line 38 instructions for exceptions) 37 Total of unrelated business taxable income before specific deduction. Subtract time 36 from line 35 37 37 38 Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions) 39 Unrelated business taxable income. Subtract line 36 from line 37.	33	Amount	s paid for disallowed fringes					33			
38 Deduction for net operating loss arishing in tax years beginning before January 1, 2015 (see instructions)  37 Total of unrelated business taxable income before specific deduction. Subtract line 38 from line 35  38 Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)  39 Unrelated business taxable in access taxable income. Subtract line 38 from line 37. If line 30 is greater than line 37, arter the smaller of zero or line 37  Part VI Tax Computation  10 Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)  41 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:  12 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:  13 Atternative minimum tax (fluxis only)  42 Proxy tax. See instructions  43 Atternative minimum tax (fluxis only)  44 Tax on Moncompliant Facility income. See instructions  45 Total And lines 42, 48, and 44 to line 40 or 41, whichever applies  46 Foreign tax credit (corporations attach Form 1116; tsusts attach Form 1116)  46 Under the following see instructions  46 Other credits (see instructions)  46 Other credits (see instructions)  47 Total And lines 47 and 48 (see instructions)  48 Other credit (see instructions)  49 Total credits. Add lines 46a through 46d  40 Total tax. Add lines 47 and 48 (see instructions)  50 2019 end glor var minimum tax of attach Form 8801 or 8827)  51 Payments: A 2016 overpayment credited to 2019  52 Lose from 4158  53 Total payments Add lines 51 at through 51g  54 Tax due; Iffine 22 is larger than the total of lines 49, 50, and 53, enter amount overpaid  55 Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid  56 Total tax. Add lines 47 and 48 (see instructions)  5	34	Charitab	ole contributions (see instructions for limitatio	n rules)	٤	tmt 19		34			0.
37 Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35  38 Sepecific deduction (Generally 5100, Dut see line 36 instructions for exceptions)  39 Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37, or on the shall only 20 to line 37.  Part IV Tax Computation  40 Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)  41 Trusts Taxable at Trust fates. See instructions for tax computation. Income tax on the amount on line 39 from:  41 Trusts Taxable at Trust fates. See instructions for tax computation. Income tax on the amount on line 39 from:  42 Proxy tax. See instructions  43 Alternative minimum tax (trusts only)  44 Tax on Noncompliant Facility income. See listifuctions  45 Total. Add line 42, 43, and 44 to line 40 or 41, whichever applies  46 Total tax line 42, 43, and 44 to line 40 or 41, whichever applies  46 Foreign tax credit (corporations statch Form 1118; trusts attach Form 1116)  46 Part V Tax and Payments  46 General business credit. Attach from 800 or 8827)  47 Total credits. Add lines 46 attrough 466  48 Other taxes. Check if from:  48 Total Lax did lines 47 and 48 (see instructions)  50 2019 set setting and 48 (see instructions)  51 a Payments: A 2018 overpayment credited to 2019  52 Total credits. Add lines 47 and 48 (see instructions)  51 a Payments: A 2018 overpayment credited to 2019  52 Total payments. Add lines 51 as through 55 (or mit 888)  51 a Payments: A 2018 overpayment credited to 2019  53 Estimated tax payments:  51 Great for small engal	35	Total un	related business taxable income before pre-20	018 NOLs and specific dec	luction. Subtract	line 34 from the sun	n of lines 32 and 3	з <b>35</b>		-555	,516.
38 Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions) and unrelated business taxable as Comporations. Multiply line 39 by 21% (0,21) Part IV Tax Computation 40 Organizations Taxable as 2 Groporations. Multiply line 39 by 21% (0,21)  11 Trust Taxable at Trust Rates. See instructions for tax computation, income tax on the amount on line 39 from:    Tax at a schedule or   Schedule 0 (Form 1041)   Tax and rate schedule or   Schedule 0 (Form 1041)   Tax and Rate schedule or   Schedule 0 (Form 1041)   Tax and Roncompliant Facility Income. See instructions   41 Tax on Noncompliant Facility Income. See instructions   43 Alternative minimum tax (trusts only)   44 Tax on Noncompliant Facility Income. See instructions   45 Total Add lines 42, 43, and 44 to line 40 or 41, whichever applies   Part V   Tax and Payments   46 Foreign tax credit (corporations attach Form 118; trusts attach Form 1116)   46	36	Deduction	on for net operating loss arising in tax years b	eginning before January 1	, 2018 (see instr	uctions)		36			0.
Part IV   Tax Computation	37	Total of	unrelated business taxable income before spe	ecific deduction. Subtract l	ine 36 from line	35		37		-555	,516.
enter the smaller of zero or line 37    Part IV   Tax Computation   Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)   11 Trusts Taxable as Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:	38	Specific	deduction (Generally \$1,000, but see line $38$	instructions for exceptions	s)			38		1,	,000.
Part IV   Tax Computation	39	Unrelat	ed business taxable income. Subtract line 38	3 from line 37. If line 38 is	greater than line	37,					
40 Organizations Taxable as Croporations, Multiply line 39 by 21% (0.21) 41 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:  □ Tax rats schedule or □ Schedule D (Form 1041) 42 Proxy tax. See instructions 43 Alternative minimum tax (trusts only) 43 Alternative minimum tax (trusts only) 44 Tax on Noncompliant Facility Income. See instructions 44 It ax on Noncompliant Facility Income. See instructions 45 Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies  Part V □ Tax and Payments  46 Poreign tax credit (corporations attach Form 1118); trusts attach Form 1116) 46 D other credits (see instructions) 46 D other credits (see instructions) 46 O credit for griny vaer minimum tax (attach Form 8801 or 8827)  • Total credits, Add lines 46a through 46d 47 Subtract line 46e from line 45 48 Other taxes. Check if from: □ Form 4255 □ Form 8611 □ Form 8697 □ Form 8866 □ Other (intrach-scheoule) 49 Total tax. Add lines 47 and 48 (see instructions) 50 2019 net 96 tax lability land from Form 965-6 or Form 96-6 P, Part III, column (k), line 3 51a Payments: A 2018 overpayment credited to 2019 51a Payments: A 2018 overpayment credited to 2019 51b Credit for small employer health insurance premiums (attach Form 8941) 51b □ Credit for small employer health insurance premiums (attach Form 8941) 51c Total payments, add lines 51a through 51g 52 Estimated tax penalty (see instructions) 51c □ Gredit for small employer health insurance premiums (attach Form 8941) 51g Other credits, adjustments, and payments: □ Form 2230 is statached by a penalty line subtractions) 51d □ Gredit for small employer health insurance premiums (attach Form 8941) 51g Other credits, adjustments, and payments: □ Form 2230 is statached by a penalty line subtractions) 51d □ Gredit for small employer health insurance premiums (attach Form 8941) 51d □ Gredit for small employer health insurance premiums (attach Form 8941) 51d □ Gredit for small employer health insurance premiums (attach Form 8			***********					39		-555	,516.
Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:											
Tax rate schedule or								▶ 40			0.
42 Proxy tax. See instructions  43 Alternative minimum tax (trusts only)  44 Tax on Noncompliant Facility income. See instructions  45 Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies  46 Foreign tax credit (corporations attach Form 118; trusts attach Form 1116)  46 Foreign tax credit (corporations attach Form 118; trusts attach Form 1116)  46 Foreign tax credit (corporations attach Form 8801 or 8827)  46 Foreign tax credit (corporations attach Form 8801 or 8827)  47 Foreign tax credit (corporations attach Form 8801 or 8827)  48 Foreign tax credit (corporations attach Form 8801 or 8827)  49 Foreign tax. Add lines 46 attrough 86d  47 Subtract line 46e from line 45  48 Other taxes. Check if from:  49 Form 865: A lability paid from Form 955-A or Form 955-B, Part III, column (k), line 3  50 2019 net 956: tax lability paid from Form 955-A or Form 955-B, Part III, column (k), line 3  51 a Payments. 2 2018 oversyament credited to 2019  51 a Payments. 2 2018 oversyament credited to 2019  51 a Payments. 2 2018 oversyament credited to 2019  51 credit for small employer health insurance premiums (attach Form 8941)  51 (Credit for small employer health insurance premiums (attach Form 8941)  51 (Credit for small employer health insurance premiums (attach Form 8941)  51 (Credit for small employer health insurance premiums (attach Form 8941)  52 Total payments. 4d lines 51 a through 51g  53 Estimated tax penalty (see instructions)  54 Tax due. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid  55 Verpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid  56 Evert manument of lines 59, 50, and 59, enter amount overpaid  57 At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account; Credited to 2020 estimated tax  58 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?  18 Prim's	41										
All Allemative minimum tax (trusts only)  41 Tax on Noncompliant facility income. See instructions  42 Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies  43 Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)  44 Total ax or defit (corporations attach Form 1118; trusts attach Form 1116)  45 Foreign to prior year minimum tax (attach Form 8801 or 8827)  46 Order for prior year minimum tax (attach Form 8801 or 8827)  46 Order for prior year minimum tax (attach Form 8801 or 8827)  47 Total tax. Add lines 46 from line 45  48 Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (artach schedule)  49 Total tax. Add lines 47 and 48 (see instructions)  50 2019 net 956 fax lability add from Form 865-A or Form 965-B, Part II, column (k), line 3  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  51 a Payments: A 2018 overpayment credited to 2019  52 a Total payments. Add lines 51 a through 51g  53 b Stimated tax penalty (see instructions). Check If Form 2230 is attached ▶ 51g  54 Tax due; I line 52 is les tam the total of lines 49, 50, and 53, enter amount overpaid  55 b Tenter the amount of line 52 you want: Credited to 2020 estimated tax because the amount of line 52 is store the amount of line 52 you want: Credited to 2020 estimated tax penalty and the credited to 2020 estimated tax penalty a		L Ta	x rate schedule or Schedule D (Form	1041)				▶ 41			
44 Tax on Moncompliant Facility Income. See instructions 45 Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies  Part V											
Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies  45   Portel   Tax and Payments  46   Foreign tax credit (corporations attach Form 1116); trusts attach Form 1116)   46a   46b   46b   46b   46c	43	Alternat	ive minimum tax (trusts only)					43			
Part V   Tax and Payments	44	Tax on	Noncompliant Facility Income. See instruction	ns				44			
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b Other credits (see instructions) c General business credit. Attach Form 8800 d Credit for prior year minimum tax (attach Form 8801 or 8827) e Total credits. Add lines 46a through 46d 47 Subtract line 46e from line 45 48 Other taxes. Check if from:			<del>-</del>								
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d Credit for prior year minimum tax (attach Form 8801 or 8827)  e Total credits. Add lines 46a through 46d  47 Subtract line 46a from line 45  48 Other taxes. Check if from:											
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48 Other taxes. Check if from:								46e			
49 Total tax. Add lines 47 and 48 (see instructions)  50 2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3  51 a Payments: A 2018 overpayment credited to 2019  b 2019 estimated tax payments  c Tax deposited with Form 8868  d Foreign organizations: Tax paid or withheld at source (see instructions)  f Credit for small employer health insurance premiums (attach Form 8941)  g Other credits, adjustments, and payments:											0.
50 2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3  51 a Payments: A 2018 overpayment credited to 2019  b 2019 estimated tax payments  c Tax deposited with Form 8868  d Foreign organizations: Tax paid or withheld at source (see instructions)  e Backup withholding (see instructions)  f Credit for small employer health insurance premiums (attach Form 8941)  g Other credits, adjustments, and payments: Form 2439  or Total payments. Add lines 51a through 51g  52 Total payments. Add lines 51a through 51g  53 Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ 53  54 Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed ▶ 54  55 Overpayment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid ▶ 55  56 Enter the amount of line 55 you want: Credited to 2020 estimated tax ▶ Refunded ▶ 56  Part VI Statements Regarding Certain Activities and Other Information (see instructions)  57 At any time during the 2019 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 ▶  58 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.  FincEN Form 114, Report of Foreign Bank and Financial Accounts. If *Yes,* enter the name of the foreign country here ▶  Sign  Lunder 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, if Pinty Yes, and the amount of tax-exempt interest received or accrued during the tax year.  Firm's Find Printy Properer's name  Preparer's signature  Print/Type prepare									<u> </u>		
b 2019 estimated tax payments:  c Tax deposited with Form 8868 d Foreign organizations: Tax paid or withheld at source (see instructions) e Backup withholding (see instructions) f Credit for small employer health insurance premiums (attach Form 8941) g Other credits, adjustments, and payments:											0.
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Total payments. Add lines 51a through 51g  52  53  Estimated tax penalty (see instructions). Check if Form 2220 is attached   Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed  54  55  Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid  56  Enter the amount of line 55 you want: Credited to 2020 estimated tax  Part VI Statements Regarding Certain Activities and Other Information (see instructions)  57  At any time during the 2019 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  58  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.  59  Enter the amount of tax-exempt interest received or accrued during the tax year   Sign  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, if correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Date  Check if PTIN  Firm's EIN   A75 Lincoln Street, Suite 200	g										
Sign   Stimated tax penalty (see instructions). Check if Form 2220 is attached											
Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed  55  Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid  56  Enter the amount of line 55 you want: Credited to 2020 estimated tax  Refunded  56  Part VI Statements Regarding Certain Activities and Other Information (see instructions)  57  At any time during the 2019 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  58  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.  59  Enter the amount of tax-exempt interest received or accrued during the tax year  Sign Here  Prind/Type preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Date  Check if PTIN  Self- employed  Firm's name Kundinger, Corder & Engle P.C.  Firm's EIN  Firm's EIN									<del>                                     </del>		
Statements Regarding Certain Activities and Other Information (see instructions)   Statements Regarding Certain Activities and Other Information (see instructions)				·	L				<b>├</b>		
Enter the amount of line 55 you want: Credited to 2020 estimated tax    Part VI    Statements Regarding Certain Activities and Other Information (see instructions)  57     At any time during the 2019 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    Name								_	-		
Part VI Statements Regarding Certain Activities and Other Information (see instructions)  57 At any time during the 2019 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 ▶  58 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.  59 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$  Sign Here  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, is correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Firm's name ▶ Kundinger, Corder & Engle P.C.  Firm's EIN ▶			-		ount overpaid .				—		
57 At any time during the 2019 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 ▶  58 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.  59 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$  Sign  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, is correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Paid  Preparer  Use Only  Firm's name ▶ Kundinger, Corder & Engle P.C.  Firm's EIN ▶  475 Lincoln Street, Suite 200					a a u lunda uma a			<b>&gt;</b>   56			
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    Solution										L.,	
FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here  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.  Enter the amount of tax-exempt interest received or accrued during the tax year  Sign  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, if correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Print/Type preparer's name  Preparer's signature  Date  Check if PTIN self-employed  Firm's name Kundinger, Corder & Engle P.C.  Firm's EIN   475 Lincoln Street, Suite 200					=		-			Yes	No
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.  59 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$  Sign Here    Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, if correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.    Print/Type preparer's name   Preparer's signature   Date   Check   if printy			•		=	-					
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.  59 Enter the amount of tax-exempt interest received or accrued during the tax year ▶  Sign  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, is correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  May the IRS discuss the preparer shown be instructions)? ▼  Titlle  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Date  Check if PTIN self-employed  Firm's name ▶ Kundinger, Corder & Engle P.C.  Firm's lama ▶ Kundinger, Corder & Engle P.C.  Firm's EIN ▶			Form 114, Report of Foreign Bank and Financ	iai Accounts. II Yes, enter	r the name of the	e toreigh country					77
If "Yes," see instructions for other forms the organization may have to file.  59 Enter the amount of tax-exempt interest received or accrued during the tax year   Sign Here  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, in correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  May the IRS discuss the preparer shown be instructions)?    Title  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Date  Check if PTIN self-employed  Firm's name   Kundinger, Corder & Engle P.C.  Firm's EIN  475 Lincoln Street, Suite 200				to the contract of the second							X
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 correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  May the IRS discuss the preparer shown beinstructions)?    Title  Print/Type preparer's name  Preparer's signature  Print/Type preparer's name  Preparer's signature  Date  Check if PTIN  self- employed  Firm's name    Kundinger, Corder & Engle P.C.  Firm's EIN		-			e grantor of, or ti	ransteror to, a to	reign trust?				Х
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 correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  May the IRS discuss the preparer shown be instructions)? ▼  Print/Type preparer's name  Preparer's signature  Preparer's signature  Date  Check if PTIN  self- employed  Firm's name ► Kundinger, Corder & Engle P.C.  Firm's lincoln Street, Suite 200			•	•	<b>•</b> •						
Sign Here    Correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.    May the IRS discuss the preparer shown be instructions)?   X			•	9 ,	,	nd statements, and	to the best of my	knowledge :	and helief it is	true	
Here    Signature of officer   Date   Title	Sign	coi	rrect, and complete. Declaration of preparer (other than	n taxpayer) is based on all infor	mation of which pre	eparer has any knov	vledge.	Kilowiedge	and belief, it is	s ii ue,	
Signature of officer  Date  Title  Print/Type preparer's name  Preparer's signature  Preparer's signature  Date  Check if PTIN  self- employed  Pol141669  Firm's name ► Kundinger, Corder & Engle P.C.  475 Lincoln Street, Suite 200	_			1							with
Paid Preparer Use Only  Print/Type preparer's name Preparer's signature Preparer's signature Date Check if PTIN self- employed Proparer's name Preparer's signature Preparer's signature Self- employed Proparer's name Preparer's signature Print/Type preparer's name Prepa			Signature of officer	 Date	Title						¬ No
Paid Preparer Use Only  Laurie Anderson Firm's name ▶ Kundinger, Corder & Engle P.C.  475 Lincoln Street, Suite 200			<u> </u>			Doto	Chaole				No
Preparer Use Only  Laurie Anderson  Firm's name ► Kundinger, Corder & Engle P.C.  475 Lincoln Street, Suite 200	_		r minv rype preparer's name	rreparer's signature		Dale	1		IIN		
Use Only  Firm's name ► Kundinger, Corder & Engle P.C.  475 Lincoln Street, Suite 200			Laurie Anderson				Sen- employ		01/16607	,	
475 Lincoln Street, Suite 200	-			Engle P C			Firm's EIN		0141003/		
	Use	Only	-				I IIIII S EIN	_			
THIII 9 GURIEGO - DETIVET CO 01303 TAUDE III (313) 237-24			Firm's address Denver, CO 8020	-			Phone no	(303)	534-595	3	

Schedule A - Cost of Goods	<b>Sold.</b> Enter	method of inven	tory v	aluation N/A					
1 Inventory at beginning of year	1		6	Inventory at end of yea	r		6		
2 Purchases				Cost of goods sold. Su					
3 Cost of labor			1	from line 5. Enter here	and in F	Part I,			
4 a Additional section 263A costs			1	line 2			7		
(attach schedule)	4a		8	Do the rules of section				Yes	No
<b>b</b> Other costs (attach schedule)	4b		1	property produced or a	cquired	for resale) apply to			
5 Total. Add lines 1 through 4b			1		•				
Schedule C - Rent Income (		Property and	Pe						
(see instructions)							-		
Description of property									
(1)									
(2)									
(3)									
(4)									
	2. Rent receiv	ed or accrued				24.5			
(a) From personal property (if the percorent for personal property is more 10% but not more than 50%)	than	of rent for p	ersonal	onal property (if the percenta property exceeds 50% or if ed on profit or income)	ige	<b>3(a)</b> Deductions directly columns 2(a) ar		cted with the income in attach schedule)	
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns 2 here and on page 1, Part I, line 6, column	(a) and 2(b). En (A)	ter <b>&gt;</b>			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<b>•</b>		0.
Schedule E - Unrelated Deb			instru	ctions)					
			,	Gross income from		3. Deductions directly con to debt-finance			
1. Description of debt-fina	anced property		-	or allocable to debt- financed property	(a)	Straight line depreciation	<u> </u>	(b) Other deductions	
The Bassarphian of dest link	anoca property			imanced property		(attach schedule)		(attach schedule)	
(1)									
(2)							1		
(3)									
(4)									
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis illocable to nced property	6	. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	(	8. Allocable deduction column 6 x total of column 3(a) and 3(b))	
	(attacr	n schedule)							
(1)				%					
(2)				%					
(3)				%					
(4)				%					
						nter here and on page 1, Part I, line 7, column (A).		Enter here and on page Part I, line 7, column (B	
Totals				▶		0			0.
Total dividends-received deductions inc	luded in column	18				<b>&gt;</b>	.   _		0.

Form **990-T** (2019)

<u> </u>		1	-	Exempt (	Controlled O	rganizati	ons				
1. Name of controlled organization	ation	<b>2.</b> Em identifi num	cation		related income instructions)		al of specified ments made	includ	rt of column 4 led in the cont cation's gross	rolling	6. Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organ	nizations	•									
7. Taxable Income		unrelated incon see instructions		9. Total	of specified pay made	nents	10. Part of column in the controllingross	mn 9 tha ing orga s income	nization's		eductions directly connected h income in column 10
(1)											
(2)											
(3)											
(4)											
							Add colun Enter here and line 8, o		e 1, Part I,		dd columns 6 and 11. here and on page 1, Part I, line 8, column (B).
Totals						▶			0.		(
Schedule G - Investme	ent Inco	me of a	Section	n 501(c)(	7), (9), or	(17) Or	ganization	1			
	scription of inc	ome			2. Amount of	income	3. Deductio directly conne (attach scheo	ected	4. Set-	asides schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)							(attach conce				(coi. o pius coi. 4)
(2)											
(3)											
(4)											
(1)					Enter here and Part I, line 9, co	on page 1, lumn (A).					Enter here and on page Part I, line 9, column (B)
Totals				<b>&gt;</b>		0.					
Schedule I - Exploited (see instr	I Exemp				r Than Ac	lvertisi	ng Income	9			
			3 EV	penses	4. Net incon		-				7. Excess exempt
1. Description of exploited activity	unrelated	Gross d business ne from business	directly with pr of un	connected roduction irelated ss income	from unrelated business (co minus colum gain, comput through	olumn 2 n 3). If a e cols. 5	5. Gross inco from activity to is not unrelate business inco	that ted	attribut	penses table to mn 5	expenses (column 6 minus column 5, but not more than column 4).
(1)											
(2) (3)											
(3)											
(4)											
	page	ere and on 1, Part I, , col. (A).	page	ere and on 1, Part I, I, col. (B).							Enter here and on page 1, Part II, line 25.
Totals	•	0.		0.							(
Schedule J - Advertis	ing Inco	me (see i	nstructio	ns)							
Part I Income From	Periodi	cals Rep	orted o	n a Con	solidated	Basis					
1. Name of periodical		2. Gross advertising income	adv	3. Direct vertising costs	or (loss) (c col. 3). If a g	ising gain ol. 2 minus ain, comput nrough 7.			6. Read		7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)											
(2) (3)											
(3)											
(4)											
Totals (carry to Part II, line (5))			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)						
Totals from Part I	0.	0.				0.
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 26.
Totals, Part II (lines 1-5)	0.	0.				0.

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

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

Form **990-T** (2019)

Form 990-T	Income (Loss) from Partnerships	Statement 17
Description		Net Income or (Loss)
(loss)	TE LP - Ordinary Business Income Short Duration Fund, LP - Ordinary	-131,188
Business Income ( Vision Ridge Sustainabl	e Assets - Ordinary Business Income	5,328
	dinary Business Income (loss) Fund IV - Ordinary Business Income	295,338 -6,033
(loss) Kimpact Evergreen RE In	vestment - Ordinary Business Income	1,479
(loss) Total Included on Form	990-T Page 1 line 5	-779,762, 
10041 111014464 011 10111	330 1, 1 age 1, 11 a	
Form 990-T	Other Deductions	Statement 18
Description		Amount
Investment advisor fees Accounting fees	3	65,000 1,925
Total to Form 990-T, Pa	age 1, line 27	66,925

Form 990-T Con	tributions Summary		Statement	19
Qualified Contributions Subjection Qualified Contributions Subjections				
Carryover of Prior Years Unuse For Tax Year 2014 For Tax Year 2015				
For Tax Year 2016 For Tax Year 2017 For Tax Year 2018	9,302,274 8,969,741			
Total Carryover Total Current Year 10% Contri	butions	18,272,015		
Total Contributions Available Taxable Income Limitation as A	Adjusted	18,272,015		
Excess Contributions Excess 100% Contributions Total Excess Contributions		18,272,015 0 18,272,015		
Allowable Contributions Deduc	tion —			0
Total Contribution Deduction				0

### **SCHEDULE D** (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

▶ Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

Name

Employer identification number

The Piton Foundation				81-0	587194
Did the corporation dispose of any investme	nt(s) in a qualified opportu	nity fund during the tax y	/ear?		Yes X No
If "Yes," attach Form 8949 and see its instru					. ,
Part I Short-Term Capital Ga			<u> </u>		
See instructions for how to figure the amounts to enter on the lines below.	(d)	(a)	(a) Adjustments to asi	_	(h) Cain av (lana) Subtract
This form may be easier to complete if you round off cents to whole dollars.	Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gai or loss from Form(s) 894 Part I, line 2, column (g	!9,  )	(N) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
1a 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					
<b>1b</b> Totals for all transactions reported on					
Form(s) 8949 with <b>Box A</b> checked					
2 Totals for all transactions reported on					
Form(s) 8949 with <b>Box B</b> checked					
3 Totals for all transactions reported on					
Form(s) 8949 with <b>Box C</b> checked					-33.
4 Short-term capital gain from installment sales				4	
5 Short-term capital gain or (loss) from like-kind	d exchanges from Form 8824			5	
6 Unused capital loss carryover (attach computa	ation)	See Stat	ement 20	6	( 4,303.)
7 Net short-term capital gain or (loss). Combine				7	-4,336.
Part II Long-Term Capital Gai	ns and Losses (See	instructions.)			
See instructions for how to figure the amounts to enter on the lines below.	(d)	(e)	(g) Adjustments to gai	n	(h) Gain or (loss). Subtract
This form may be easier to complete if you round off cents to whole dollars.	Proceeds (sales price)	Cost (or other basis)	or loss from Form(s) 894 Part II, line 2, column (g	9,	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
8a 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					
8b Totals for all transactions reported on					
Form(s) 8949 with <b>Box D</b> checked					
<b>9</b> Totals for all transactions reported on					
Form(s) 8949 with <b>Box E</b> checked					
10 Totals for all transactions reported on					
Form(s) 8949 with <b>Box F</b> checked					137,539.
				11	
12 Long-term capital gain from installment sales	from Form 6252, line 26 or 3	7		12	
13 Long-term capital gain or (loss) from like-kind	d exchanges from Form 8824			13	
14 Capital gain distributions				14	
15 Net long-term capital gain or (loss). Combine		ın h		15	137,539.
Part III Summary of Parts I and					
16 Enter excess of net short-term capital gain (lin				16	
17 Net capital gain. Enter excess of net long-term				17	133,203.
18 Add lines 16 and 17. Enter here and on Form	1120, page 1, line 8, or the pr	oper line on other returns		18	133,203.
Note: If losses exceed gains, see Capital Los	ses in the instructions.				

LHA

### Form **8949**

Department of the Treasury Internal Revenue Service **Sales and Other Dispositions of Capital Assets** 

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.
 ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

OMB No. 1545-0074

Attachment Sequence No. **12A** 

Name(s) shown on return

The Piton Foundation

Social security number or taxpayer identification no.

81-0587194

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

transactions, see page 2.	•	•	-	•				
Note: You may aggregate all codes are required. Enter the	e totals directly on	Schedule D, line 1:	a; you aren't require	ed to report these trans	sactions on	Form 8949 (see inst	ructions).	
ou must check Box A, B, or C below.	Check only one be	ox. If more than one b	oox applies for your sho	ort-term transactions, com	plete a separa	ate Form 8949, page 1, 1	or each applicable box.	
(A) Short-term transactions rep	. •				•			
(B) Short-term transactions rep		-	-	•		•		
X (C) Short-term transactions no	t reported to you	u on Form 1099-	В					
(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis. See the	loss. If yo in column	nt, if any, to gain or ou enter an amount (g), enter a code in ). See instructions.	(h) Gain or (loss). Subtract column (e)	
		(Mo., day, yr.)		Note below and see Column (e) in the instructions	(f) Code(s)	<b>(g)</b> Amount of adjustment	from column (d) & combine the result with column (g)	
Jorth Sky Clean Growth Fund								
.V							<33.	
							_	
Totals Add the amounts in solut	nns (d) (s) (a) s	und (b) (subtract						
2 Totals. Add the amounts in colur								
negative amounts). Enter each to Schedule D, <b>line 1b</b> (if <b>Box A</b> about								
above is checked) or line 3 (if Box	**	•					~33 ·	

**Note:** If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

The Piton Foundation

(F) Long-term transactions not reported to you on Form 1099-B

81-0587194

statemen broker an	ou check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from yo t will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was rej ad may even tell you which box to check.	ported to the IRS by your
Part II	Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions) see page 1.  Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form	d for which no adjustments or
	check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate For more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need	m 8949, page 2, for each applicable box.
	Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see <b>Note</b> above)	1.
` ′	Languterm transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS	

(Example: 100 sh. XYZ Co.)  (Mo., day, yr.)  (Sales price)  (Sales price)  (Sales price)  (Sales price)  (Sales price)  (Mo., day, yr.)  (Sales price)  (Mo., day, yr.)  (F)  Code(s)  Amount of adjustment  (Combine the rewith column (form c		<del> </del>						
Short Duration F North Sky Clean Growth Fund  IV    Kimpact Evergreen RE Investment   137, 6	Description of property (Example: 100 sh. XYZ Co.)	Date acquired	Date sold or disposed of	Proceeds	Cost or other basis. See the <b>Note</b> below and see <i>Column</i> (e) in	(f)	(g) Amount of	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
North Sky Clean Growth Fund  IV	Brevet Direct Lending -							
TV Kimpact Evergreen RE Investment  137,6  137,6  137,6  137,6  137,6  137,6  137,6  137,6  137,6  137,6  137,6	Short Duration F							430.
Ximpact Evergreen RE Investment 137,6  137,6  137,6  137,6  137,6  137,6  137,6	North Sky Clean Growth Fund	1						
Investment 137,6	IV							<550.
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your	Kimpact Evergreen RE							
negative amounts). Enter each total here and include on your	Investment							137,659.
negative amounts). Enter each total here and include on your								
negative amounts). Enter each total here and include on your								
negative amounts). Enter each total here and include on your								
negative amounts). Enter each total here and include on your								
negative amounts). Enter each total here and include on your								
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negative amounts). Enter each total here and include on your								
negative amounts). Enter each total here and include on your								
negative amounts). Enter each total here and include on your								
negative amounts). Enter each total here and include on your								
negative amounts). Enter each total here and include on your								
negative amounts). Enter each total here and include on your								
negative amounts). Enter each total here and include on your		1						
negative amounts). Enter each total here and include on your		1						
negative amounts). Enter each total here and include on your		1						
negative amounts). Enter each total here and include on your	2 Totals. Add the amounts in colu	mns (d), (e), (a) =	and (h) (subtract					
ANABARINA DA MINANA DI DUN DI GULVE IN CHECKEUL MICENTI DUN E. I								
								137,539.

**Note:** If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

Schedule D	Ca	Statement 20		
	Loss Year	Original Loss Sustained	Loss Previously Applied	Loss Remaining
	2014 2015 2016 2017 2018	8,925 184	4,806	4,119
Capital Loss	Carryover to (	Current Taxable Year		4,303

Department of the Treasury

Internal Revenue Service

### Return of U.S. Persons With Respect to Certain Foreign Partnerships

Attach to your tax return.

Go to www.irs.gov/Form8865 for instructions and the latest information.

JAN 1

beginning

Information furnished for the foreign partnership's tax year

. 2019, and ending DEC 31 2019 OMB No. 1545-1668

Attachment Sequence No. **118** 

Name of person filing this return Filer's identification number 81-0587194 The Piton Foundation Filer's address (if you aren't filing this form with your tax return) A Category of filer (see Categories of Filers in the instructions and check applicable box(es)): 3 | X | 2 2019 , and ending В JAN 1 DEC 31 2019 beainnina C Filer's share of liabilities: Nonrecourse \$ Qualified nonrecourse financing \$ Other \$ D If filer is a member of a consolidated group but not the parent, enter the following information about the parent; EIN Name Address Check if any excepted specified foreign financial assets are reported on this form. See instructions Information about certain other partners (see instructions) (4) Check applicable box(es) (1) Name (2) Address (3) Identification number Category 1 Category 2 Constructive owne 2(a) EIN (if any) **G1** Name and address of foreign partnership Elevar Equity III, LP 2(b) Reference ID number 95 S. Jackson Street, Suite 245 3 Country under whose laws organized Seattle, WA 98104 Cavman Islands 7 Principal business activity 4 Date of organization 5 Principal place of business Principal business activity code number Functiona currency Exchange rate (see instructions) 03/07/2008 Cayman Islands 523900 Investments USD **H** Provide the following information for the foreign partnership's tax year: 1 Name, address, and identification number of agent (if any) in the United States 2 Check if the foreign partnership must file: Form 1042 Form 1065 Form 8804 Service Center where Form 1065 is filed: A Name and address of person(s) with custody of the books and records of the foreign partnership, and the location of such books and records, if different 3 Name and address of foreign partnership's agent in country of organization, if any Elevar Equity Fund III, LP 220 2nd Ave S, Suite 206 Seattle WA 98104 During the tax year, did the foreign partnership pay or accrue any interest or royalty for which the deduction is not X No allowed under section 267A? See instructions If "Yes," enter the total amount of the disallowed deductions 6 Is the partnership a section 721(c) partnership, as defined in Temporary Regulations section 1.721(c)-1T(b)(14)? Yes X No 7 Were any special allocations made by the foreign partnership? X No Enter the number of Forms 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), attached to this return. See instructions How is this partnership classified under the law of the country in which it's organized? 10 a Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that's a separate unit under Reg. 1.1503(d)-1(b)(4) or part of a combined separate unit under Reg. 1.1503(d)-1(b)(4)(ii)? If "No," X Yes Stmt 21 b If "Yes," does the separate unit or combined separate unit have a dual consolidated loss, as defined in Nο Reg. 1.1503(d)-1(b)(5)(ii)? 11 Does this partnership meet both of the following requirements? 1. The partnership's total receipts for the tax year were less than \$250,000. 2. The value of the partnership's total assets at the end of the tax year was less than \$1 million. If "Yes," don't complete Schedules L, M-1, and M-2.

Form 88	365 (2019)	The Piton Foundation					81	1-0587194		Page 2		
12 a	Is the filer of	this Form 8865 claiming a foreign-de	rived inta	ngible income deduction (u	nder section 2	250) with res	pect to					
		listed on Schedule N?		- '			•	Yes Yes	x	: No		
b	If "Yes," enter	the amount of gross income derived	from sal	es, leases, exchanges, or ot	her dispositio	ns (but not li	censes)					
		tions with or by the foreign partnersh		_ · · · · · · · · · · · · · · · · · · ·	-	,	,					
	eligible incon	ne (FDDEI)	•		•		ì	<b>&gt;</b>				
С	If "Yes." enter	the amount of gross income derived						•				
	•					•	_	<b>&gt;</b>				
d	If "Yes," enter	the amount of gross income derived						•	-	-		
		s computation of FDDEI				-		<b>&gt;</b>				
13		mber of foreign partners subject to se										
		nip or of receiving a distribution from			-			<b>&gt;</b>				
14		luring the tax year were any transfers						•	-			
								► Yes	x	. No		
15 a	requirements of Regulations section 1.707-8? Yes LX No  Were there any transfers of property or money within a 2-year period between the partnership and any of its partners											
		quire disclosure under Regs. 1.703-3				-						
		ulue of each transfer, and an explanati				_		Yes Yes	x	. No		
b		ership assume a liability or receive pr			•							
	-	od of transferring the property to the			-	-	-					
		or value of each transfer, the debt ass		•				Yes Yes	x	. No		
Sign Here		enalties of perjury, I declare that I have exam					•	•				
if You're I This Forn		and complete. Declaration of preparer (other	tnan gene	rai partner or limited liability com	pany member) is	s based on all I	nformation of which	preparer nas an	y knowled	ge.		
Separatel Not With												
Tax Retu	rn. S	ignature of general partner or limited liability	company	member					Date			
Paid	Print/Typ	e preparer's name	Prepar	er's signature		Date	Check	] PTIN				
Prepa	Laurie	e Anderson					self-employ	ed P014	16697			
Use	Firm's r	name Kundinger, Corder	& Engl	e P.C.		•	Firm's EIN					
Only	Firm's a	address >475 Lincoln Street	, Suit	e 200			Phone no.(30	3) 534-59				
Office	Denver	c, CO 80203										
Sche	dule A	Constructive Ownership	of Part	nership Interest. Ch	eck the bo	xes that a	pply to the file	er. If you c	heck			
		box <b>b</b> , enter the name, add	dress, a	nd U.S. taxpayer iden	tification n	umber (if	any) of the pe	rson(s) wh	ose			
		interest you constructively	own. S	ee instructions.								
		a X Owns a direct interest		b [	Owns a	constructive	interest					
									Check if	Check if		
		Name		Address			Identification num	ber (if any)	foreign person	direct partner		
Sche	dule A-1	Certain Partners of Forei	gn Part	nership (see instruct	tions)							
•										Check if		
See	Statement	Name 22		Address			Identification	n number (if any)	1	foreign person		
Sche	dule A-2	Foreign Partners of Secti	on 721	(c) Partnership (see	instruction	ıs)			,			
	of foreign	Address		Country of organization	U.S. tax identification		Check if related to	Percer	ntage intere	est		
pa	artner	, tadioss		(if any)	(if an		U.S. transferor	Capital	F	Profits		
									%	%		
									%	%		
Does the	e partnership l	nave any other foreign person as a di	ect partn	er?			L	Yes		No		
Sche	dule A-3	Affiliation Schedule. List	all parti	nerships (foreign or do	mestic) in	which the	foreign partn	ership ow	าร			
		a direct interest or indirect			•			•				
							EIN	Total	Total ordinary			
		Name		Address	(if any)		e or loss	Check i foreign partner ship				
Eleva	r Investme	ents Canada,	595 Bu	rrard St, Suite 26	00			1		х		
		·	Vancou	ver, British Colum	bi							

### SCHEDULE O (Form 8865)

(Rev. December 2018)
Department of the Treasury
Internal Revenue Service

# Transfer of Property to a Foreign Partnership (Under Section 6038B)

► Attach to Form 8865. See the Instructions for Form 8865.

► Go to www.irs.gov/Form8865 for instructions and the latest information.

OMB No. 1545-1668

Name of transfero	r								Filer's identi	ifying nun	nber	
	The Piton	Foundat	ion						81-058			
Name of foreign pa	artnership Ele <sup>.</sup>	var Equi	ty III,	LP				EIN (if any)		Reference	ce ID numi	ber (see instr)
<ul><li>b If "Yes," was</li><li>2 Was any int</li></ul>	s the gain deferral it angible property tr	method app ransferred c	lied to avoi onsidered (	d the recognition	on of o be,	Regulations section gain upon the contract the time of the traction 1.482-7(c)(1)?	ribution of p ansfer or at	oroperty?			Yes Yes Yes	X No X No
	ansfers Reportabl											
Type of property	(a) Date of transfer	(b) Description of property	Fair ma	(c) rket value of transfer		(d) Cost or other basis	(e Recover		(f) Section 704 allocation me		Gain re	(g) ecognized rransfer
Cash	12/31/19		1	172,500.								
Stock, notes receivable and payable, and other securities												
Inventory												
Tangible property used in trade or business												
Intangible property described in section 197(f)(9)												
Intangible property, other than intangible property described in section 197(f)(9)												
Other property												
Totals				172,500.								
3 Enter the tra Supplemental Info	ansferor's percenta				fore th	ne transfer	3.4013	%	(b) After	the transf	er	3.4013 %
Part II Di	spositions Report	able Under	Section 60	38B								
(a) Type of property	(b) Date of original transfer		(c) ate of position	(d) Manner of disposition		(e) Gain recognized by partnership	rec	(f) reciation capture ognized artnership	(g) Gain alloc to partn		Depr recaptur	(h) eciation re allocated partner
					+							
Part III Is	any transfer report	ted on this s	chedule su	bject to gain re	ecogn	ition under section	904(f)(3) o	r section 904(	(f)(5)(F)?	🗲	Yes	X No

Department of the Treasury

Internal Revenue Service

### Return of U.S. Persons With Respect to Certain Foreign Partnerships

Attach to your tax return.

Go to www.irs.gov/Form8865 for instructions and the latest information.

JAN 1

beginning

Information furnished for the foreign partnership's tax year . 2019, and ending DEC 31

2019

Attachment Sequence No. **118** 

OMB No. 1545-1668

Name of person filing this return Filer's identification number 81-0587194 The Piton Foundation Filer's address (if you aren't filing this form with your tax return) A Category of filer (see Categories of Filers in the instructions and check applicable box(es)): 3 | X | 2 2019 , and ending В JAN 1 DEC 31 2019 beainnina C Filer's share of liabilities: Nonrecourse \$ Qualified nonrecourse financing \$ Other \$ D If filer is a member of a consolidated group but not the parent, enter the following information about the parent; EIN Name Address Check if any excepted specified foreign financial assets are reported on this form. See instructions Information about certain other partners (see instructions) (4) Check applicable box(es) (1) Name (2) Address (3) Identification number Category 1 Category 2 Constructive owne **2(a)** EIN (if any) **G1** Name and address of foreign partnership Learn Capital Venture Partners III, LP 98-1199896 c/o Campbells Corporate Services Ltd 2(b) Reference ID number Floor 4, Willow House, Cricket Sq, PO Box 268 3 Country under whose laws organized Grand Cayman, Cayman Islands KY1-1104 Cavman Islands 7 Principal business activity 4 Date of organization 5 Principal place of business 6 Principal business activity code number Functiona currency Exchange rate (see instructions) 05/27/2015 Cayman Islands 523900 Investments USD **H** Provide the following information for the foreign partnership's tax year: 1 Name, address, and identification number of agent (if any) in the United States 2 Check if the foreign partnership must file: Form 1042 Form 1065 Form 8804 Service Center where Form 1065 is filed: A Name and address of person(s) with custody of the books and records of the foreign partnership, and the location of such books and records, if different 3 Name and address of foreign partnership's agent in country of organization, if any Robert Hutter 620 Congress Ave, Suite 200 Austin TX 78701 During the tax year, did the foreign partnership pay or accrue any interest or royalty for which the deduction is not X No allowed under section 267A? See instructions If "Yes," enter the total amount of the disallowed deductions 6 Is the partnership a section 721(c) partnership, as defined in Temporary Regulations section 1.721(c)-1T(b)(14)? Yes X No 7 Were any special allocations made by the foreign partnership? X No Enter the number of Forms 8858, Information Return of U.S. Persons With Respect to Foreign Disregarded Entities (FDEs) and Foreign Branches (FBs), attached to this return. See instructions How is this partnership classified under the law of the country in which it's organized? 10 a Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that's a separate unit under Reg. 1.1503(d)-1(b)(4) or part of a combined separate unit under Reg. 1.1503(d)-1(b)(4)(ii)? If "No," X No b If "Yes," does the separate unit or combined separate unit have a dual consolidated loss, as defined in No Reg. 1.1503(d)-1(b)(5)(ii)? 11 Does this partnership meet both of the following requirements? 1. The partnership's total receipts for the tax year were less than \$250,000. 2. The value of the partnership's total assets at the end of the tax year was less than \$1 million. If "Yes," don't complete Schedules L, M-1, and M-2.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 8865 (2019)

orm 88	65 (2	019)	The Piton Foundation						8	1-05	87194		Page 2
12 a	Is the	e filer of t	his Form 8865 claiming a foreign-der	ived inta	ngible income deduction (ur	nder section 2	50) with re	spect to					
	any a	amounts	listed on Schedule N?							ightharpoons	Yes	X	No
b	If "Ye	es," enter	the amount of gross income derived	from sal	es, leases, exchanges, or oth	ner dispositior	ns (but not	licenses)					
	from	transacti	ons with or by the foreign partnershi	p that the	e filer included in its comput	ation of foreig	n-derived d	leduction					
	eligib	ole incom	e (FDDEI)							▶			
C	If "Ye	es," enter	the amount of gross income derived	from a li	cense of property to or by th	e foreign part	nership tha	t the					
	filer i	included i	n its computation of FDDEI							▶ .			
d	If "Ye	es," enter	the amount of gross income derived	from ser	vices provided to or by the f	oreign partnei	rship that th	ne filer					
	inclu	ded in its	computation of FDDEI							▶ .			
13	Ente	r the num	ber of foreign partners subject to sec	tion 864	(c)(8) as a result of transfer	ring all or a po	ortion of an	interest i	ı				
	the p	artnershi	p or of receiving a distribution from t	he partn	ership					▶ .			
14		-	ıring the tax year were any transfers l							_		_	_
			of Regulations section 1.707-8?							► L	Yes	Х	No
15 a	Were	e there an	y transfers of property or money with	nin a 2-ye	ear period between the partn	ership and an	y of its part	tners					
			quire disclosure under Regs. 1.703-3					ers, the			_	_	_
			ue of each transfer, and an explanation			-				► L	Yes	X	_ No
b		•	rship assume a liability or receive pro		•	-		•					
	-		d of transferring the property to the p					-			<b>—</b>		٦
Sign Here			value of each transfer, the debt assunations of perjury, I declare that I have examinated by the control of the								Yes	X of it is tru	No
You're F	iling		nd complete. Declaration of preparer (other										
his Form Separatel		١.									LK		
lot With	Your	<u> </u>	gnature of general partner or limited liability								▶ ;	2-4-	
ax Retur	n.		preparer's name		member er's signature		Date			_	PTIN	Date	
Paid				'	J				heck L_ elf-emplo	⊥if ved	P0141	6607	
Prepa	irer		Anderson Ame •Kundinger, Corder	· Fnal	o D C						P0141	0091	
Jse			ddress >475 Lincoln Street					_	EIN >	(303) 534-5953			
Only			, CO 80203	, suit	200				; 110.( 3 (	,,,	334-39.	, ,	
Sche			Constructive Ownership	f Parti	nershin Interest Che	eck the ho	xes that a	annly to	the fil	er If	vou ch	eck	
00110	<u>uu.o</u>		box <b>b</b> , enter the name, add		•						•		
			interest you constructively		• •		a	u, 0.	ш.о р		.(0)		
			a X Owns a direct interest		b [	Ownsa	constructive	e interest					
			2 Swile & dill set interest				oonou douv	0 111101001			1	Check if	Check if
			Name		Address						foreign person	direct partner	
Sche	dule	A-1	Certain Partners of Foreig	ın Part	nership (see instruct	ions)	· · · · · · · · · · · · · · · · · · ·						
		•	Name		Addison			l al			(if )		Check if
			Name		Address			Ide	entificatio	n numi	oer (if any)		foreign person
Sche	dule	A-2	Foreign Partners of Section	on 721		instruction	,						
Name o		gn	Address		Country of organization	U.S. taxp identification			related to		Percent	age intere	st
pa	rtner				(if any)	(if an		U.S. tr	ansferor		Capital	Р	rofits
												%	%
											C	%	%
			ave any other foreign person as a dire						l		Yes		No
Sche	dule	A-3	Affiliation Schedule. List a			mestic) in	which the	e foreig	n partr	nersh	nip own	S	
			a direct interest or indirectly	y owns	a 10% interest.		<del></del>						Ob L 19
			Name		Address			EI (if a			Total or income		Check it foreign partner- ship
								(ii a	' <i>Y)</i>		income	01 1035	ship

Form **8865** (2019)

### SCHEDULE O (Form 8865)

(Rev. December 2018)
Department of the Treasury
Internal Revenue Service

# Transfer of Property to a Foreign Partnership (Under Section 6038B)

► Attach to Form 8865. See the Instructions for Form 8865.

► Go to www.irs.gov/Form8865 for instructions and the latest information.

OMB No. 1545-1668

Name of transfero	r							Filer's identi	fying numbe	r	
	The Pitor	Foundat	ion					81-058			
Name of foreign p	artnership Lea	ırn Capit	al Ventur	e Partne	rs III, LP		EIN (if any)		Reference I	D numbei	(see instr)
			ls Corpor				98-119989				
		. , .			rary Regulations sect	. ,	. , . , ,				X No
					n of gain upon the co					Yes _	No
					be, at the time of the						<b>_</b>
				gulations sec	tion 1.482-7(c)(1)?					Yes	X No
Part I T	ransfers Reportab	le Under Se	ction 6038B			_					
Type of property	(a) Date of transfer	(b) Description of property	(c) Fair marke on date of		(d) Cost or other basis		(e) ry period	(f) Section 704 allocation me		(g) Gain reco on tran	
Cash	12/31/19		314	4,179.							
Stock, notes											
receivable											
and payable, and other											
securities											
Inventory											
Tangible											
property											
used in trade											
or business											
Intangible											
property described in											
section											
197(f)(9)											
Intangible property, other											
than intangible											
property described in											
section 197(f)(9)											
Other											
property											
T-1-1-											
Totals				14,179.			0/	(1.) AC			2 - 2 2 2/
	ansferor's percent	-		,	ore the transfer	2.2500	%	(b) After	the transfer	2.	3530 %
Supplemental ini	ormation Require	u io be nep	iorieu (see ilis	siruciions).							
Part II D	ispositions Repor	table Under	Section 6038	В							
(a)	(b)		(c)	(d)	(e)		(f)	(g)		<i>β</i> - \	
Type of property	Date of original transfer		position	Manner of disposition	Gain recognized by partnership	re	(f) preciation ecapture cognized partnership	Gain alloca to partn		(h) Depreci recapture a to part	llocated
						-71					
						1					
Part III Is	any transfer repor	ted on this s	chedule subje	ect to gain red	cognition under sectio	n 904(f)(3) o	or section 904	(f)(5)(F)?	<b>&gt;</b> L	Yes	X No

Form 8865	Separate	Units	Owned	by	the	Foreig	n Part	nership	Stateme	ent	21
Elevar M-III IFS Court, Tw Cybercity, Ek			L								
Form 8865	С	ertain	Partne	ers	of 1	Foreign	Partr	nership	Stateme	ent	22
Name			Addre	ess				ntifying umber	Check Foreign B		on
Elevar Investme	ents 59	5 Burra	ard Sti	reet	#2	600			Х		
Credijusto Ltd	в1	ncouve vd Migu xico Ci	iel De	Cer	rvan	tes	98-1	425492	Х		

# Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property

to a Foreign Corporation

▶ Go to www.irs.gov/Form926 for instructions and the latest information.

► Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. **128** 

Pai	rt I U.S. Transferor Information (see instructions)		-	
Nam	e of transferor		Identifying numbe	er (see instructions)
Th	e Piton Foundation			
			81-0587194	
1	Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporati	on?	Yes	X No
2	If the transferor was a corporation, complete questions 2a through 2d.			
а	If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)	) by		
	five or fewer domestic corporations?			└── No
b	Did the transferor remain in existence after the transfer?		Yes	└── No
	If not, list the controlling shareholder(s) and their identifying number(s).			
	Controlling shareholder	Ider	ntifying number	
С	If the transferor was a member of an affiliated group filing a consolidated return, was it the parent co If not, list the name and employer identification number (EIN) of the parent corporation.	rporation?	Yes	└── No
	in not, list the name and employer identification number (Em) of the parent corporation.			
	Name of parent corporation	EIN of	parent corporati	on
	Have basis adjustments under section 367(a)(4) been made?		Yes	□ No
_	(4)(1) 2001 (4)		100	
3	If the transferor was a partner in a partnership that was the actual transferor (but is not treated as su	ch under secti	on 367).	
	complete questions 3a through 3d.		,,	
а	List the name and EIN of the transferor's partnership.			
	Name of marks and the	FIN		
	Name of partnership	EIN	of partnership	
	-	7-2972531		
	Did the partner pick up its pro rata share of gain on the transfer of partnership assets?			X No
	Is the partner disposing of its <b>entire</b> interest in the partnership?		L Yes	X No
d	Is the partner disposing of an interest in a limited partnership that is regularly traded on an established	ed		
	securities market?		Yes	X No
Pa	rt II Transferee Foreign Corporation Information (see instructions)			
4	Name of transferee (foreign corporation)	5a l	dentifying numb	er, if any
CI	M Cayman Holdings LLC	98-	1475073	
6	Address (including country)	5b F	Reference ID num	ber
_	and House nd Cayman KY1-1104 Cayman Islands			
<b>7</b> CJ	Country code of country of incorporation or organization			
<b>8</b>	Foreign law characterization (see instructions) rporation			
	Is the transferee foreign corporation a controlled foreign corporation?		X Yes	No

	Regarding Tran	isfer of Property (see in	nstructions)							
Section A - Cash	(a)	/h)	(a)	(4)	(a)					
Type of property	(a) Date of transfer	<b>(b)</b> Description of property	(c) Fair market value on date of transfer	<b>(d)</b> Cost or other basis	<b>(e)</b> Gain recognized on transfer					
Cash	12/31/2018		4,992,252.							
10 Was cash the only pro If "Yes," skip the rema	ainder of Part III and				X Yes No					
Section B - Other Pro	<del> </del>	an intangible property								
Type of property	(a) Date of transfer	<b>(b)</b> Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	<b>(e)</b> Gain recognized on transfer					
Stock and securities										
Inventory										
involuory										
Other property (not listed under										
another category)										
Property with										
built-in loss										
Totals										
12 a Were any assets of a foreign corporation?  If "Yes," go to line 12b b Was the transferor a c (including a branch th If "Yes," continue to li c Immediately after the transferee foreign corporate in the transferred li d Enter the transferred li Did the transferor transfer if "No," skip Section Continue to li continue	If "Yes," go to line 12b.  b Was the transferor a domestic corporation that transferred substantially all of the assets of a foreign branch (including a branch that is a foreign disregarded entity) to a specified 10%-owned foreign corporation?  If "Yes," continue to line 12c. If "No," skip lines 12c and 12d, and go to line 13.  c Immediately after the transfer, was the domestic corporation a U.S. shareholder with respect to the transferee foreign corporation?  If "Yes," continue to line 12d. If "No," skip line 12d, and go to line 13.  d Enter the transferred loss amount included in gross income as required under section 91 ▶\$									
Section C - Intangible	e Property Subj	ect to Section 367(d)			1					
Type of property	(a) Date of transfer	<b>(b)</b> Description of property	(c) (d) Useful Arm's length pri on date of trans	•	(f) Income inclusion for year of transfer					
			1							
Property described										
in sec. 367(d)(4)										
Tatala										
Totals										

c Recapture under section 1503(d)

d Exchange gain under section 987

Did this transfer result from a change in entity classification?

b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)·2(b) ▶\$

property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?

20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions)

c Did the domestic corporation not recognize gain or loss on the distribution of property because the

Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation

Form **926** (Rev. 11-2018)

X No

X No

X No

X No

□ No

Yes Yes

Yes

Yes

Yes

If "Yes." complete lines 20b and 20c.

covered by section 367(e)(1)? See instructions

# Form **926**(Rev. November 2018) Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property to a Foreign Corporation

to a Foreign Corporation

▶ Go to www.irs.gov/Form926 for instructions and the latest information.

► Attach to your income tax return for the year of the transfer or distribution.

OMB No. 1545-0026

Attachment Sequence No. **128** 

Pai	rt I U.S. Transferor Information (see instructions)	-
Name	e of transferor	Identifying number (see instructions)
The	e Piton Foundation	
		81-0587194
1	Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?	Yes X No
2	If the transferor was a corporation, complete questions 2a through 2d.	
а	If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by	
	five or fewer domestic corporations?	
b		Yes L No
	If not, list the controlling shareholder(s) and their identifying number(s).	
	Controlling shareholder	Identifying number
С	If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporati	on? Yes No
	If not, list the name and employer identification number (EIN) of the parent corporation.	
	Name of parent corporation	EIN of parent corporation
d	Have basis adjustments under section 367(a)(4) been made?	Yes No
	(-)( )	
3	If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such unc	der section 367),
	complete questions 3a through 3d.	
а	List the name and EIN of the transferor's partnership.	
	Name of partnership	EIN of partnership
	Name of parties stip	Ent of partition ship
	Did the partner pick up its pro rata share of gain on the transfer of partnership assets?	
	Is the partner disposing of its <b>entire</b> interest in the partnership?	Yes
a	Is the partner disposing of an interest in a limited partnership that is regularly traded on an established	□ Vee □ Ne
Pai	securities market?  rt II Transferee Foreign Corporation Information (see instructions)	Yes No
4	Name of transferee (foreign corporation)	5a Identifying number, if any
-	Name of transferee (foreign corporation)	Ja luentifying number, if any
Al	thelia Sustainable Ocean Fund	
6	Address (including country)	5b Reference ID number
5, r	rue Guillaume Kroll, L-1882 Luxembourgh	
-	nd Duchy of Luxembourgh Luxembourg	
7	Country code of country of incorporation or organization	·
LU		
8	Foreign law characterization (see instructions)	
Co	rporate partnership	
9	Is the transferee foreign corporation a controlled foreign corporation?	Yes X No

	Regarding Tran	isfer of Property (see i	nstructions)		
Section A - Cash	(a)	/h)	(a)	(4)	1 (a)
Type of property	(a) Date of transfer	<b>(b)</b> Description of property	(c) Fair market value on date of transfer	<b>(d)</b> Cost or other basis	(e) Gain recognized on transfer
Cash	12/31/2019	1 1	173,402.		
10 Was cash the only pro	ainder of Part III and				X Yes No
Section B - Other Pro		an intangible property			1 (2)
Type of property	<b>(a)</b> Date of transfer	<b>(b)</b> Description of property	(c) Fair market value on date of transfer	<b>(d)</b> Cost or other basis	(e) Gain recognized on transfer
Stock and securities					
Inventory					
Other property (not listed under another category)					
Drop orty with					
Property with built-in loss					
Totals					
12 a Were any assets of a foreign corporation?  If "Yes," go to line 12l  b Was the transferor a concluding a branch the second of the second	foreign branch (included) b. domestic corporation hat is a foreign disregatine 12c. If "No," skip transfer, was the doreporation? ine 12d. If "No," skip loss amount included hasfer property described and questions 14a.	through 15.	n disregarded entity) trans y all of the assets of a fore 0%-owned foreign corpora line 13. areholder with respect to t	eign branch ation?	Yes No Yes No Yes No Yes No Yes No
Section C - Intangible	e Property Subj	ect to Section 367(d)			
Type of property	(a) Date of transfer	<b>(b)</b> Description of property	(c) (d) Useful Arm's length properties on date of trans		(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)					
Totals					

**b** Gain recognition under section 904(f)(5)(F)

c Recapture under section 1503(d)

d Exchange gain under section 987

Did this transfer result from a change in entity classification?

b Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)·2(b) ▶\$

property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?

20 a Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions)

c Did the domestic corporation not recognize gain or loss on the distribution of property because the

Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation

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X No

X No

X No

X No

X No

□ No

Yes

Yes Yes

Yes

Yes

Yes

If "Yes." complete lines 20b and 20c.

covered by section 367(e)(1)? See instructions