### **PUBLIC DISCLOSURE COPY**

 $\mathsf{Form}\, 990\text{-}T$ 

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

For calendar year 2023 or other tax year beginning 10/01 , 2023, and ending 09/30

	nent of the Treasury Revenue Service	Open to Public Inspection for 501(c)(3).  Organizations Only					
	Check box if address changed.		Name of organization ( Check box if name changed and see instructions.)  PUBLIC WELFARE FOUNDATION INC.	D Employer identification number 54-0597601			
	npt under section	Print	Number, street, and room or suite no. If a P.O. box, see instructions.	E Group exemption number			
	01( C )( 3 )	or	1200 U STREET NORTHWEST	(see instructions)			
_	08(e) 220(e)	Туре	City or town, state or province, country, and ZIP or foreign postal code				
=	08A 530(a)		WASHINGTON, DC 20009-4443	F $\Box$	Che	ck box if	
=	29(a) 529A	C Bool	value of all assets at end of year	- ∟		mended return.	
	<u> </u>			te co	llege	/university	
•		,	6417(d)(1)(A) Applicable entity			<u> </u>	
<b>H</b> Ch	eck if filing only	/ to clai	m ☐ Credit from Form 8941 ☐ Refund shown on Form 2439 ☐ Elective payr	nent a	amou	int from Form 3800	
I Ch	eck if a 501(c)(	3) orgai	nization filing a consolidated return with a 501(c)(2) titleholding corporation .			🗌	
J En	ter the number	of attac	ched Schedules A (Form 990-T)			. 1	
			he corporation a subsidiary in an affiliated group or a parent-subsidiary controlle				
If "	'Yes," enter the	name	and identifying number of the parent corporation				
L Th	e books are in o	care of	(SEE STATEMENT) Telephone number		(20	02) 965-1800	
Part	Total U	nrelate	ed Business Taxable Income				
1	Total of unrelate	ed busir	ness taxable income computed from all unrelated trades or businesses (see instructio	ns)	1	0	
2	Reserved			. [	2		
3	Add lines 1 an	d2 .		. [	3	0	
4	Charitable cor	ntributio	ns (see instructions for limitation rules)	. [	4	0	
5	Total unrelated	d busin	ess taxable income before net operating losses. Subtract line 4 from line 3 .	. [	5	0	
6	Deduction for	net ope	erating loss. See instructions	. [	6	0	
7			siness taxable income before specific deduction and section 199A deduction	on.			
	Subtract line 6	from li	ne 5	.	7	0	
8	Specific deduc	ction (g	enerally \$1,000, but see instructions for exceptions)	. [	8	0	
9	Trusts. Section	n 199A	deduction. See instructions	. [	9	0	
10	Total deducti	ons. Ad	dd lines 8 and 9	. [	10	0	
11			taxable income. Subtract line 10 from line 7. If line 10 is greater than line				
					11	0	
Part							
1	Organizations	s taxab	le as corporations. Multiply Part I, line 11, by 21% (0.21)		1	0	
2			ust rates. See instructions for tax computation. Income tax on the amount				
	Part I, line 11,	from:	☐ Tax rate schedule or ☐ Schedule D (Form 1041)	.	2		
3	•		ctions		3	0	
4			ee instructions	.	4	0	
5			tax		5	0	
6		-	t facility income. See instructions	.	6	0	
7			ough 6 to line 1 or 2, whichever applies		7	0	
Part							
1a	_	-	rporations attach Form 1118; trusts attach Form 1116)	0			
b	Other credits (	•	· · · · · · · · · · · · · · · · · · ·	0			
С			dit. Attach Form 3800 (see instructions) 1c	0			
d	•	-	ninimum tax (attach Form 8801 or 8827)				
е			es 1a through 1d	_	le	0	
2			Part II, line 7		2	0	
3a	Amount due fr						
b			m 8611				
C	Amount due fr						
d	Amount due fr			_[			
е			see instructions)	0			
f			dd lines 3a through 3e	<u>_</u> :	3f	0	
4			and 3f (see instructions).   Check if includes tax previously deferred under				
_			tax amount here	_	4	0	
5	Current net 96	5 tax li	ability paid from Form 965-A, Part II, column (k)		5	0	

Part	I ax and Payments (continued)								
6a	Payments: Preceding year's overpayment	credited to the current year .	. 6a	(	98,068				
b	Current year's estimated tax payments. C	heck if section 643(g) election							
	applies		6b		0				
С	Tax deposited with Form 8868		. 6с	2	28,000				
d	Foreign organizations: Tax paid or withhel	d at source (see instructions)	. 6d		0				
е	Backup withholding (see instructions)		. 6е		0				
f	Credit for small employer health insurance	premiums (attach Form 8941)	. 6f		0				
g	Elective payment election amount from Fo	orm 3800	. 6g		0				
h					0				
i	Credit from Form 4136		. 6i		0				
j	Other (see instructions)		. 6j		0				
7	Total payments. Add lines 6a through 6j					7		12	6,068
8	Estimated tax penalty (see instructions). C					8			0
9	Tax due. If line 7 is smaller than the total of					9			0
10	Overpayment. If line 7 is larger than the to					10		12	6,068
11	Enter the amount of line 10 you want: Credit			000 Refun		11		6	4,068
Part I									
1	At any time during the 2023 calendar year							Yes	No
	over a financial account (bank, securities,								
	FinCEN Form 114, Report of Foreign Banl here	and Financial Accounts. If "Ye	s," enter	the name of t	ne tor	reign coi	intry	1000	
		P. L. H. W. C			Starking Sec.				<b>/</b>
	During the tax year, did the organization recei			or, or transfero	r to, a	foreign ti	rust?	tusytus.	✓
	If "Yes," see instructions for other forms the			Φ.			404		
3 4	Enter the amount of tax-exempt interest re	eceived or accrued during the tal	x year	· · · · Þ	7 110		181		
4	Enter available pre-2018 NOL carryovers h shown on Schedule A (Form 990-T). Don	t reduce the NOL carryover sh	own her	any post-201 e by any dedi	/ NO	reporte	ver		
	Part I, line 6.	t rouded the real daily ever on	OWII IIOI	o by any acad	2011011	roporto	0.11		
	Post-2017 NOL carryovers. Enter the Busir	ness Activity Code and available	post-20	17 NOL carryo	vers	Don't red	duce		
	the amounts shown below by any NOL clair								
	Business Activity			able post-201					
			•	abic post 201	11101	- carryov	<del>-</del>		
			·   \$				[		
			\$						
6a	Reserved for future use		14		tiette treet				
	Reserved for future use				100			14- N	
Part \	Supplemental Information	<u>. 1907   1907   1907   1904   1907  </u>	, <u>, , , , , , , , , , , , , , , , , , </u>	E 581 ABA 182 NEX					
The second second	any additional information. See instruction	าร.							
	Under penalties of perjury, I declare that I have exam							owledg	ge and
Sign	belief, it is true, correct, and complete. Declaration of	preparer (other than taxpayer) is based of	on all inforn	nation of which pre	eparer h	nas any kno	wledge.		
7.5	R D DAI	1/1-1				May the If	RS discus	s this r	eturn
Here	Cray le Pellyender	1/30/2025 CFAO				with the p			
	Signature of officer	Date Title			_	(see instru	ictions)? [.	∐Yes	∐No
Paid	Print/Type preparer's name	Preparer's signature		Date	Chec	k 🔲 if	PTIN		
	RACHEL SPURLOCK	RACHEL SPURLOCK		07/21/2025		employed	P00	5207	29
Prepa	Leirm's name (LRC)///ELLP				Firm's	EIN	35-092	1680	
Use C	Firm's address 4801 OLYMPIA PARK PLA	AZA, SUITE 4000, LOUISVILLE, KY	40241-20	98	Phone	-	502) 32	6-399	16
								A T	50 50

Form 990-T (2023)

# SCHEDULE A (Form 990-T)

# **Unrelated Business Taxable Income From an Unrelated Trade or Business**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information.

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

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

B Employer identification number A Name of the organization PUBLIC WELFARE FOUNDATION INC. 54-0597601 901101 1 **C** Unrelated business activity code (see instructions) **D** Sequence: E Describe the unrelated trade or business INVESTMENT ACTIVITIES Part I **Unrelated Trade or Business Income** (A) Income (B) Expenses (C) Net 1a Gross receipts or sales 0 c Balance Less returns and allowances 0 1c Cost of goods sold (Part III, line 8) . . . . . . . . . . . 2 2 0 3 Gross profit. Subtract line 2 from line 1c. . . . . 3 0 0 Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions . . . . . . . . . . . 4a 198,741 198,741 Net gain (loss) (Form 4797) (attach Form 4797). See 4b 0 0 Capital loss deduction for trusts . . . . . . 0 4c 0 5 Income (loss) from a partnership or an S corporation (attach statement) 5 (461,797)(461,797)Rent income (Part IV) . . . . . . . . . . . . . . . . . 6 6 0 0 0 7 7 Unrelated debt-financed income (Part V) . . . . . 0 0 0 8 Interest, annuities, royalties, and rents from a controlled 8 0 0 0 9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) . . . . . . . . . . . . . . . 0 9 0 0 10 Exploited exempt activity income (Part VIII) . . . . . . 10 0 0 0 11 Advertising income (Part IX) . . . . . . . . . . . . . 11 0 0 0 12 0 0 12 Other income (see instructions; attach statement) . . . . Total. Combine lines 3 through 12 . . . . . . . . 13 13 (263.056)(263,056)Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be Part II directly connected with the unrelated business income. Compensation of officers, directors, and trustees (Part X) . . . 0 1 0 2 Salaries and wages 2 3 3 0 4 4 0 Rad debts 5 5 80,335 Interest (attach statement). See instructions 6 6 13,411 7 Depreciation (attach Form 4562). See instructions . . . . . 8 Less depreciation claimed in Part III and elsewhere on return. 0 8b 0 9 73.052 10 Contributions to deferred compensation plans . . . 10 0 0 11 Employee benefit programs . . . . . . . . . . . . . 11 12 0 12 Excess exempt expenses (Part VIII) . . . . . . 13 Excess readership costs (Part IX) . . . . . . . . . . . 13 0 14 14 21,838 15 Total deductions. Add lines 1 through 14 . . . . . . 15 188,636 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, 16 16 (451,692)17 17 0 Unrelated business taxable income. Subtract line 17 from line 16 . . . (451,692)18

Schedule A (Form 990-T) 2023

	e A (1 01111 330-1) 2023				Fage Z
Part		thod of inventory valu			
1	Inventory at beginning of year				0
2	Purchases				0
3	Cost of labor				0
4	Additional section 263A costs (attach statement)				0
5	Other costs (attach statement)				0
6 7	<b>Total.</b> Add lines 1 through 5				0
8	Inventory at end of year				0
9	Do the rules of section 263A (with respect to prope				
-	IV Rent Income (From Real Property and				100 _ 110
1	Description of property (property street address,				
	A 🗆	• • • • • • • • • • • • • • • • • • • •			
	В 🗌				
	c 🗆				
	D 🗌				
		Α	В	С	D
2	Rent received or accrued				
а	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) .				
С	Total rents received or accrued by property.				
C	Add lines 2a and 2b, columns A through D				
	, rad inico za arid zb, ociarinio / tanougr b				
3	Total rents received or accrued. Add line 2c, column	ns A through D. Enter	here and on Part I,	line 6, column (A)	0
4	Deductions directly connected with the income				
	in lines 2a and 2b (attach statement)				
5	Total deductions. Add line 4, columns A through	D Enter here and a	n Dort Lling 6 ook	ımn (D)	0
			TI Fart I, IIIIe 0, Coil	ліні ( <b>Б</b> )	
Par	· ·				
1	Description of debt-financed property (street add	lress, city, state, ZIP	code). Check if a c	lual-use. See instruc	tions.
	A				
	B				
	D				
		Α	В	С	
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement) .			•	
b	Other deductions (attach statement)				
С	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt- financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A throu	ıgh D). Enter here an	d on Part I, line 7, o	column (A)	0
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns	A through D. Enter he	ere and on Part I, lir	ne 7, column (B)	0
11	Total dividends — received deductions include	ed in line 10			0

Schedule A (Form 990-T) 2023

	Lile A (Form 990-1) 2023	liaa Days III.	a and Dant	- F <sub>"</sub> -	ma Cambuallad C			Page 3
Par	Part VI Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)  Exempt Controlled Organizations							
	Name of controlled organization	2. Employer identification number	3. Net unrela income (los (see instruction	ss)	Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income		Deductions directly connected with scome in column 5
(1)								
(2)								
(3)								
(4)								
						T		
	7. Taxable income	inco	t unrelated me (loss) astructions)	9	. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income		Deductions directly connected with come in column 10
(1)								
(2)								
(3)								
(4)								
Tota	ıls					Add columns 5 and 10. Enter here and on Part I, line 8, column (A).	Ente	d columns 6 and 11. er here and on Part I, ine 8, column (B).
Par	Investment Inc	ome of a Se	ction 501(c)(	7), (9	), or (17) Organiza	ation (see instructions)		
	1. Description of income	2. Amou	ınt of income	1	3. Deductions directly connected attach statement)	4. Set-asides (attach statement)		Total deductions and set-asides Id columns 3 and 4)
(1)								
(2)								
(3)								
(4)								
	Enter here		nts in column 2. e and on Part I, column (A).				Ente	amounts in column 5. er here and on Part I, ine 9, column (B).
Tota	-		0					0
Part	-	<u> </u>	ncome, Othe	r Th	an Advertising In	come (see instructions	s)	I
1	Description of exploited		<u> </u>					
2							2	
3	<b>3</b> Expenses directly connected with production of unrelated business income. Enter here and on Part I line 10, column (B)							
4	` ,					e 2. If a gain, complete	4	
5	Gross income from act						5	
6	Expenses attributable t						6	
7								

Schedule A (Form 990-T) 2023

Schedule A (Form 990-T) 2023 Page 4

	IV Advantiation I are					. ago <u>-</u>
	Advertising Income					
1	Name(s) of periodical(s). Check box if rep	oorting to	vo or more periodi	cals on a consoli	dated basis.	
	<u>A</u> <u></u>					
	B					
	c 🗌					
	D 🗌					
nter	amounts for each periodical listed above in	n the co	<u> </u>			
		-	Α	В	С	D
2	Gross advertising income	[				
а	Add columns A through D. Enter here and	d on Par	t I, line 11, column	(A)		0
3	Direct advertising costs by periodical .	[				
а	Add columns A through D. Enter here and	d on Par -	t I, line 11, column	(B)		0
4	Advertising gain (loss). Subtract line 3 from 2. For any column in line 4 showing a complete lines 5 through 8. For any column 4 showing a loss or zero, do not contines 5 through 7, and enter -0- on line 8	a gain, umn in mplete				
5	Readership costs	†				
6	Circulation income	-				
7	Excess readership costs. If line 6 is les	s than				
	line 5, subtract line 6 from line 5. If line 5	is less				
	than line 6, enter -0					
8	Excess readership costs allowed deduction. For each column showing a gline 4, enter the lesser of line 4 or line 7.	gain on				
а	Add line 8, columns A through D. Enter Part II, line 13	_				
Par	Compensation of Officers, Dire					
	•			,	3. Percentage	4. Compensation
	1. Name		<b>2.</b> Title		of time devoted to business	attributable to unrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
Tota	I. Enter here and on Part II, line 1					0
Part	XI Supplemental Information (see	e instruc	ctions)			

Form 990T	Additional Information
Return Reference - Identifier	Explanation
BOOK CARE - NAME AND ADDRESS	CRAIG ALEXANDER, 1200 U STREET NW, WASHINGTON, DC 20009-4443

### Form 990T Part I, Line 4

Charitable Contributions

Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Converted to NOL	Amount Remaining	Contribution Carryover Expires
2018	21,256,206	0			21,256,206	2023
2019	20,608,346	0			20,608,346	2024
2020	19,889,496	0			19,889,496	2025
2021	21,799,722	10,814			21,788,908	2026
2022	24,774,798	33,162			24,741,636	2027
2023	25,498,275				25,498,275	2028
Totals	133,826,843	43,976	0	0	133,782,867	

8

Name of Partnership	Share of gross income	Share of deductions	Gain or loss
INVESTMENT ACTIVITIES			
(1) INCOME (LOSS) FROM QUALIFIED PARTNERSHIP INVESTMENTS	348,953	810,750	(461,797)
Total	348,953	810,750	(461,797)

Schedule A - Part II, Line 5	Interest	

Description	Amount
INVESTMENT ACTIVITIES	
(1) INTEREST EXPENSE	80,335
Total for Schedule A - F	art II, Line 5 80,335

Sched	la ^	Part I	1 1	ina l	0
Scheo	uie A -	Faill		met	0

Taxes and Licenses

Description	Amount
INVESTMENT ACTIVITIES	
(1) FOREIGN TAXES PAID	2
(2) STATE TAXES PAID	13,409
Total	13,411

Schedule A - Part II, Line 14	Other Deductions	
	Description	Amount

INVESTMENT ACTIVITIES
(1) PROFESSIONAL FEES

21,838

#### Schedule A - Part II, Line 17 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining						
INVESTMENT ACTIVITI	IVESTMENT ACTIVITIES										
2023	023 451,692 451,692										
Totals	451,692	0	0	0	451,692						

#### 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

2023

**Employer identification number** PUBLIC WELFARE FOUNDATION INC. 54-0597601 Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes 🗸 No If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Assets Held One Year or Less See instructions for how to figure the amounts to enter on (g) Adjustments to gain (h) Gain or (loss) (d) (e) the lines below or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part I, line 2, column (d) and combine This form may be easier to complete if you round off cents to (or other basis) (sales price) the result with column (g) column (g) whole dollars. 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, 0 leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 with **Box A** checked 0 2 Totals for all transactions reported on Form(s) 8949 0 with **Box B** checked 3 Totals for all transactions reported on Form(s) 8949 703 (699)with Box C checked 0 Short-term capital gain from installment sales from Form 6252, line 26 or 37. 4 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 5 **6** Unused capital loss carryover (attach computation) 6 0) 7 (699)7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h Long-Term Capital Gains and Losses—Assets Held More Than One Year See instructions for how to figure the amounts to enter on the (g) Adjustments to gain (h) Gain or (loss) (d) lines below or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part II, line 2, column (d) and combine This form may be easier to complete if you round off cents to (or other basis) (sales price) column (g) the result with column (g) whole dollars. 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, 0 leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 0 with **Box D** checked 9 Totals for all transactions reported on Form(s) 8949 with **Box E** checked 0 10 Totals for all transactions reported on Form(s) 8949 0 with **Box F** checked 60.076 0 60,076 11 Enter gain from Form 4797, line 7 or 9 11 139.364 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37. 12 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 **14** Capital gain distributions (see instructions) 14 199,440 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h 15 Summary of Parts I and II Part III 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 16 0 17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) 17 198.741 18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns . 18 198,741 **Note:** If losses exceed gains, see Capital Losses in the instructions.

# **8949**

Department of the Treasury

Internal Revenue Service

#### **Sales and Other Dispositions of Capital Assets**

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

OMB No. 1545-0074 Attachment

Sequence No. 12A

Name(s) shown on return PUBLIC WELFARE FOUNDATION INC. Social security number or taxpayer identification number

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.

Part I

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A. B. or C below. Check only one box. If more than one box applies for your short-term transactions. complete a separate Form 8949, page 1, for each applicable box. If you have more short-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.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

∠ (C) Short-term transactions	not reported	to you on F	orm 1099-B				
1 (a) Description of property	(b) Date acquired	<b>(c)</b> Date sold or	(d) Proceeds	(e) Cost or other basis See the <b>Note</b> below	If you enter an enter a c	f any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g).
SHORT-TERM GAIN/LOSS FROM INVESTMENTS				703		0	(703)
SHORT-TERM CAPITAL GAIN/LOSS			4			0	4
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box 6)	al here and incle is checked), <b>lin</b>	ude on your le 2 (if Box B	4	703		0	(699)

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.

Form 8949 (2023) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side PUBLIC WELFARE FOUNDATION INC.

Social security number or taxpayer identification number 54-0597601

Before you check Box D, E, or F 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.

#### Part II

**Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, 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 for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* 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 Form 8949, page 2, for each applicable box. If you have 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.

	(D) Long-term transactions reported on Form(s)	1099-B showing basis was reported to the IRS (see Note above)
Г	(E) Long-term transactions reported on Form(s)	1099-B showing basis <b>wasn't</b> reported to the IRS

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

(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis See the <b>Note</b> below and see <i>Column</i> (e)	If you enter an enter a c	if any, to gain or loss amount in column (g), ode in column (f). parate instructions.	(h) Gain or (loss) Subtract column (e) from column (d) and
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions.	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	combine the result with column (g).
LONG-TERM GAIN/LOSS FROM INVESTMENTS			60,071			0	60,071
LONG-TERM CAPITAL GAIN/LOSS			5			0	5
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	I here and inc is checked), <b>lir</b>	lude on your ne 9 (if Box E	60,076	0		0	60,076

**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.

Form **8949** (2023)

## **3800**

**General Business Credit** 

Go to www.irs.gov/Form3800 for instructions and the latest information.

OMB No. 1545-0895

2023

Attachment Sequence No. 22

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form3800 for instructions and the latest information.

You must include all pages of Form 3800 with your return.

	Shown on return	identilyir	-	
PUBL	C WELFARE FOUNDATION INC.			0597601
Α	Corporate Alternative Minimum Tax (CAMT) and Base Erosion Anti-Abuse Tax (BEAT). Are y corporation" within the meaning of section 59(k)(1) for the CAMT, and (b) an "applicable taxpayer"	' within	the m	
	section 59A(e) for the BEAT? See instructions		. [	Yes 🔽 No
Part	Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (Too to Part III before Parts I and II. See instructions.	ГМТ)		
1	Non-passive credits from Part III, line 2: combine column (e) with non-passive amounts from cc (g). See instructions	lumn	1	0
2	Passive credits from Part III, line 2: combine column (f) with passive amounts in column (g). See instructions	2,709	•	
3	Enter the applicable passive activity credits allowed for 2023. See instructions	-	3	
4	Carryforward of general business credit to 2023. See instructions for statement to attach		4	0
	Check this box if the carryforward was changed or revised from the original reported amount.	. 🗆 🛚		
5	Carryback of general business credit from 2024. See instructions	[	5	0
6	Add lines 1, 3, 4, and 5		6	0
Part				
7	Regular tax before credits:  • Individuals. Enter the sum of the amounts from Form 1040, 1040-SR, or 1040-NR, line 16; and Schedule 2 (Form 1040), line 2.			
	• Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 1; or the applicable line of your return.		7	0
	• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, plus any Form 8978 amount included on line 1d; or the amount from the applicable line of your return.			
8	Alternative minimum tax:  • Individuals. Enter the amount from Form 6251, line 11.			
	<ul> <li>Corporations. Enter the amount from Form 4626, Part II, line 13.</li> <li>Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54.</li> </ul>		8	0
9	Add lines 7 and 8		9	0
10a	Foreign tax credit			
b	Certain allowable credits (see instructions)			
С	Add lines 10a and 10b	📙	10c	0
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on lines 12 through 15 t	ne 16	11	0
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0   12			
13	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0 12 Enter 25% (0.25) of the excess, if any, of line 12 (line 11 for corporations) over	-		
	\$25,000. See instructions			
14	Tentative minimum tax:			
	• Individuals. Enter the amount from Form 6251, line 9.			
	<ul> <li>Corporations. Enter -0</li> <li>Estates and trusts. Enter the amount from Schedule I (Form 1041), line 52.</li> </ul>	$\dashv$		
15	Enter the greater of line 13 or line 14	[	15	
16	Subtract line 15 from line 11. If zero or less, enter -0-	-	16	0
17	Enter the <b>smaller</b> of line 6 or line 16	-	17	0
	<b>C</b> corporations: See the line 17 instructions if there has been an ownership change, acquisition reorganization.	on, or		
or Pa	perwork Reduction Act Notice, see separate instructions. Cat. No. 12392F			Form <b>3800</b> (2023)

Form 3800 (2023) Page **2** 

Part			
Note:	If you are not required to report any amounts on line 22 or line 24 below, skip lines 18 through 25 and en	ter -0-	on line 26.
18	Multiply line 14 by 75% (0.75). See instructions	18	0
19	Enter the greater of line 13 or line 18	19	0
20	Subtract line 19 from line 11. If zero or less, enter -0	20	0
21	Subtract line 17 from line 20. If zero or less, enter -0	21	0
22	Combine the amounts from line 3 of Part III, column (e), with the sum of the non-passive activity credit amounts in Part IV, line 3, column (e) plus column (f)	22	0
23	Passive activity credit from line 3 of Part III, column (f) plus the sum of the passive activity credit amounts in Part IV, line 3, column (e) plus column (f) .		
24	Enter the applicable passive activity credit allowed for 2023. See instructions	24	
25	Add lines 22 and 24	25	0
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0
27	Subtract line 13 from line 11. If zero or less, enter -0	27	0
28	Add lines 17 and 26	28	0
29	Subtract line 28 from line 27. If zero or less, enter -0	29	0
30	Enter the general business credit from line 5 of Part III: combine column (e) with non-passive amounts in column (g). See instructions	30	0
31	Reserved	31	
32	Passive activity credits from line 5 of Part III: combine column (f) with passive amounts in column (g). See instructions		
33	Enter the applicable passive activity credits allowed for 2023. See instructions	33	
34	Carryforward of business credit to 2023. Enter the amount from line 5 of Part IV, column (f), and line 6 of Part IV, column (g). See instructions for statement to attach	34	125
	Check this box if the carryforward was changed or revised from the original reported amount $$ . $$		
35	Carryback of business credit from 2024. Enter the amount from line 5 of Part IV, column (e). See instructions	35	0
36	Add lines 30, 33, 34, and 35	36	125
37	Enter the <b>smaller</b> of line 29 or line 36	37	0
38	Credit allowed for the current year. Add lines 28 and 37.  Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36; see instructions) as indicated below or on the applicable line of your return.		
	<ul> <li>Individuals. Schedule 3 (Form 1040), line 6a.</li> <li>Corporations. Form 1120, Schedule J, Part I, line 5c.</li> <li>Estates and trusts. Form 1041, Schedule G, line 2b.</li> </ul>	38	0

Part III Current Year General Business Credits (GBCs) (see instructions). If there is more than one credit amount to report on lines 1a through 1zz, line 3, or lines 4a through 4z, enter the number of items you have for that line in column (c) and complete Part V.

	(a) Current year credits from:	(b) Elective payment or transfer registration number	#	(d) Pass-through or transfer credit entity EIN	(e) Credits from non-passive activities		(g) Credit transfer election amount (enter amounts transferred out as a negative amount)	(h) Gross elective payment election amount	(i) Net elective payment election amount	(j) Combine columns (e), (f), and (g), less column (i)
1a	Form 3468, Part II									
b	Form 7207									
С	Form 6765		1	85-2000765		2,709				2,709
d	Form 3468, Part III									
е	Form 8826									
f	Form 8835, Part II									
g	Form 7210									
h	Form 8820									
i	Form 8874									
j	Form 8881, Part I									
k	Form 8882									
- 1	Form 8864 (diesel)									
m	Form 8896									
n	Form 8906									
0	Form 3468, Part IV									
р	Form 8908									
q	Reserved (45Z)									
r	Form 8910									
S	Form 8911, Part II									
t	Form 8830									
u	Form 7213, Part II									
٧	Form 3468, Part V									
W	Form 8932									
X	Form 8933									
У	Form 8936, Part II									
Z	Reserved									
aa	Form 8936, Part V									
bb	Form 8904									
	Form 7213, Part I									
dd	Form 8881, Part II									
ee	Form 8881, Part III									
	Form 8864, line 8									
	Reserved (1gg)									
	Reserved (1hh)									
	Reserved (1ii)									
	Reserved (1jj)									
	Other credits									
2	Add lines 1a through 1zz		1			2,709				2,709 Form <b>3800</b> (2023)

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Part III Current Year General Business Credits (GBCs) (see instructions). If there is more than one credit amount to report on lines 1a through 1zz, line 3, or lines 4a through 4z, enter the number of items you have for that line in column (c) and complete Part V. (continued)

	iines 4a through 42, ente	er the number	OIIL	erris you na	ve for triat lifte if	i column (c) and	complete Fart v	. (continuea)		
	(a) Current year credits from:	(b) Elective payment or transfer registration number	#	(d) Pass-through or transfer credit entity EIN	(e) Credits from non-passive activities	(f) Credits from passive activities	(g) Credit transfer election amount (enter amounts transferred out as a negative amount)	(h) Gross elective payment election amount	(i) Net elective payment election amount	(j) Combine columns (e), (f), and (g), less column (i)
3	Form 8844									
4	Specified credits:	•							•	
а	Form 3468, Part VI									
	Form 5884									
	Form 6478									
	Form 8586									
	Form 8835, Part II									
f	Form 8846		1	85-2000765		213				213
g	Form 8900									
	Form 8941									
i	Form 6765 ESB credit									
j	Form 8994									
k	Form 3468, Part VII									
- 1	Reserved (4I)									
m	Reserved (4m)									
Z	Other specified credits									
5	Add lines 4a through 4z					213				213
6	Add lines 2, 3, and 5		2			2,922				2,922

Form **3800** (2023)

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## Part IV Carryovers of General Business Credits (GBCs) or Eligible Small Business Credits (ESBCs)

(see instructions)

	(see instructions)						
	Credits carried over to tax year 2023	(b) Check if non- passive	(c) Year	(d) Pass-through entity EIN	(e) Credit carrybacks to current year	(f) Carryforwards (excluding ESBCs)	(g) Eligible small business credit (ESBC) carryforwards
1a	Form 3468, Part II (coal, gasification)						
b	Form 7207 (manufacturing production)						
С	Form 6765 (research)						
d	Form 3468, Part III (advanced energy)						
е	Form 8826 (disabled access)						
f	Form 8835, Part II (renewable electricity)						
g	Form 7210 (clean hydrogen)						
•	Form 8820 (orphan drug)						
i	Form 8874 (new markets)						
i	Form 8881, Part I (pension plan startup)						
k	Form 8882 (employer-provided childcare)						
ï	Form 8864 (biodiesel and renewable diesel)						
m	Form 8896 (low sulfur diesel fuel)						-
n	Form 8906 (distilled spirits)						
0	Form 3468, Part IV (advanced manufacturing)						
	Form 8908 (energy-efficient home)						
p	Reserved						
r	Form 8910 (alternative motor vehicle)						
S	Form 8911, Part II (alternative fuel refueling)						
t	Form 8830 (enhanced oil recovery)						
u	Form 7213, Part II (zero-emission nuclear production) .						
V	Form 3468, Part V (reserved)						
W	Form 8932 (differential wage)						_
X	Form 8933 (carbon oxide sequestration)						
	Form 8936, Part II (clean vehicle)						
	Reserved						
	Form 8936, Part V (commercial clean vehicle)						
	Form 8904 (oil and gas production)						
	Form 7213, Part I (advanced nuclear production)						
	Form 8881, Part II (pension auto enrollment)						
	Form 8881, Part III (military spouse)						
ff	Form 8864 (sustainable aviation fuel mixture)						
gg	Reserved						
	Reserved						
ii	Reserved						
jj	Reserved						
ZZ	Other						
2	Credits for which only carryforwards are allowed:						
а	Form 5884-A (employee retention)						
b	Form 8586 (low-income housing) (pre-2008)						
С	Form 8845 (Indian employment)						
d	Form 8907 (nonconventional source fuel)						
е	Form 8909 (energy efficient appliance)						
f	Form 8923 (mine rescue team training)						
g	Form 8834 (qualified plug-in electric vehicle)						
h	Form 8931 (agricultural chemicals security)						
i	Form 1065-B (GBCs from electing partnership)						
j	Form 5884 (work opportunity) (pre-2007)						
k	Form 6478 (alcohol fuel) (pre-2005)						
I	Form 8846 (employer taxes) (pre-2007)						
	<u> </u>					F	orm <b>3800</b> (2023)

## Part IV Carryovers of General Business Credits (GBCs) or Eligible Small Business Credits (ESBCs)

(see instructions) (continued)

	(a) Credits carried over to tax year 2023	(b) Check if non- passive	(c) Year	(d) Pass-through entity EIN	(e) Credit carrybacks to current year	(f) Carryforwards (excluding ESBCs)	(g) Eligible small business credit (ESBC) carryforwards
m	Form 8900 (railroad track maintenance) (pre-2008)						,
n	Trans-Alaska pipeline liability fund credit						
0	Form 5884-A, Section A (employers affected by Hurricane Katrina, Rita, or Wilma)						
р	Form 5884-A, Section B (Hurricane Katrina housing) .						
q	Form 5884-A, Section A (affected Midwestern disaster						
	area employers)						
r	Form 5884-A, Section B (employer housing)						
s	Form 5884-B (new hire retention)						
t	Form 8847 (contributions to community development						
	corporations)						
u	Form 8861 (welfare to work)						
V	Form 8884 (New York Liberty Zone business employee)						
w	Form 8942 (therapeutic drug)						
уу	Other credits (see instructions)						
ZZ	Add lines 1a through 1zz and 2a through 2yy						
3	Form 8844 (empowerment zone)						
4	Specified credits:						
а	Form 3468, Part VI (energy)						
b	Form 5884 (work opportunity)						
С	Form 6478 (biofuel producer)						
d	Form 8586 (low-income housing) (post-2007)						
е	Form 8835 (renewable electricity)						
f	Form 8846 (employer taxes)		2022	85-2000765		125	
g	Form 8900 (railroad track maintenance)						
h	Form 8941 (employer health insurance)						
i	Form 6765 ESB credit (research)						
j	Form 8994 (paid family and medical leave)						
k	Form 3468, Part VII (rehabilitation) (post-2007)						
ı	Reserved (4I)						
m	Reserved (4m)						
Z	Other specified credits						
5	Add lines 4a through 4z					125	
<u>6</u>	Add lines 2zz, 3, and 5					125	orm 3800 (2023)

Form **3800** (2023)

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(a) Line number from Part III	(b) Elective payment or transfer registration number	(c) Pass-through or transfer credit entity EIN	(d) Current year credits from non-passive activities	(e) Current year credits from passive activity before passive activity credit limitation	(f) Credit transfer election amount	(g) Gross elective payment election amount	(h) Net elective payment election amount	(i) Carryover of pass activity credit allowable in current year
				+		1	1	

Form 3800 (2023) Page **8** 

Part V	Breakao	The straight	gate Amoun	t <b>s in Part IV</b> (see			, ,
	(a) Line number from Part IV	(b) Check if non-passive	<b>(c)</b> Year	(d) Pass-through entity EIN	(e) Credit carrybacks to current year	(f) Carryforwards (excluding ESBCs)	(g) Eligible small busines credit (ESBC) carryforwards
1							
2							
3							
4							
5							
6 7							
8							
9							
10							
11							
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13							
14							
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20 21							
22							
23							
24							
25							
26							
27							
28							
29							
80							
81							
32							
33							
34 35							
55 36		+					
37   37		+ +					
88		+ +					
39		†					
10							
H [							
12							
13							
14							
<b>45</b>							
16							
17							
18							
49							

Form **3800** (2023)

Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

OMB No. 1545-0184

Attachment Sequence No. 27

Department of the Treasury Internal Revenue Service

Attach to your tax return. Go to www.irs.gov/Form4797 for instructions and the latest information.

Name(s) shown on return								number		
PUBL	IC WELFARE FOUNDATI	54-059	97601							
1a	Enter the gross procee substitute statement) the	1a								
b	Enter the total amount MACRS assets	1b								
С	Enter the total amount of assets	· · · · · · · · · · · · · · · · · · ·	-				1c			
Par		inges of Propert					sions	From Other		
	Than Casualty	or Theft-Most	<b>Property Held</b>	l More Than 1 Y	<b>'ear</b> (see instru	ctions)				
2	(a) Description of property     (b) Date acquired (mo., day, yr.)     (c) Date sold (mo., day, yr.)     (d) Gross allowed or allowed or allowable since acquisition     (e) Depreciation allowed or allowable since acquisition							(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)		
SEC	TION 1231 GAIN			139,364			0	139,364		
	11011 1201 07 1111			.00,00.						
3	Gain, if any, from Form	4684, line 39					3			
4	Section 1231 gain from	*					4			
5	Section 1231 gain or (los		•				5			
6	Gain, if any, from line 32	,	•				6			
7	Combine lines 2 through		•				7	139,364		
	Partnerships and S colline 10, or Form 1120-S, Individuals, partners, S from line 7 on line 11 b 1231 losses, or they we Schedule D filed with you	S corporation share selow and skip lines are recaptured in an e	Skip lines 8, 9, 11, holders, and all c 8 and 9. If line 7 is arlier year, enter th	and 12 below.  others. If line 7 is z is a gain and you did it is gain from line 7 as	ero or a loss, enter	the amount year section				
8	Nonrecaptured net secti	•					8			
9	Subtract line 8 from line line 9 is more than zero,									
	capital gain on the Sche						9			
Part	Ordinary Gains	and Losses (se	ee instructions)							
10	Ordinary gains and losse	es not included on lin	es 11 through 16 (	include property hel	d 1 year or less):					
11	Loss, if any, from line 7						11	( )		
12	Gain, if any, from line 7						12	<u>,                                      </u>		
13	Gain, if any, from line 31						13	0		
14	Net gain or (loss) from F						14			
15	. , ,						15			
16	Ordinary gain from insta Ordinary gain or (loss) fr						16			
17	Combine lines 10 through	`	•				17	0		
							17	0		
18	For all except individual a and b below. For indiv				ine of your return a	nd skip lines				
а	If the loss on line 11 inclufrom income-producing p		, ,	( )( )/						
	employee.) Identify as fro						18a			
b	Redetermine the gain o (Form 1040), Part I, line		-	if any, on line 18a.			18b			
For Pa	perwork Reduction Act		•		Cat. No. 13086I			Form <b>4797</b> (2023)		

Form 4797 (2023) Page **2** 

19	(a) Description of section 1245, 1250, 1252, 1254, or 125		(b) Date acque (mo., day, )		(c) Date sold (mo., day, yr.)			
Α								
В								
С								
D								
	These columns relate to the properties on lines 19A through 19D	).	Property A	Property	/ B	Property	, C	Property D
20	Gross sales price (Note: See line 1a before completing.) .	20						
21	Cost or other basis plus expense of sale	21						
22	Depreciation (or depletion) allowed or allowable	22						
23	Adjusted basis. Subtract line 22 from line 21	23						
	Table and O March Page 00 for a Page 00							
24	Total gain. Subtract line 23 from line 20	24						
25	If section 1245 property:  Depreciation allowed or allowable from line 22	05-						
a		25a 25b						
b		230						
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
а	Additional depreciation after 1975. See instructions .	26a						
	Applicable percentage multiplied by the <b>smaller</b> of line							
	24 or line 26a. See instructions	26b						
С	Subtract line 26a from line 24. If residential rental property							
	or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
d	Additional depreciation after 1969 and before 1976 .	26d						
е	Enter the <b>smaller</b> of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
g	Add lines 26b, 26e, and 26f	26g						
27	If section 1252 property: Skip this section if you didn't							
	dispose of farmland or if this form is being completed for a partnership.							
а	Soil, water, and land clearing expenses	27a						
b	Line 27a multiplied by applicable percentage. See instructions	27b						
c	Enter the <b>smaller</b> of line 24 or 27b	27c						
28	If section 1254 property:	1						
•	Intangible drilling and development costs, expenditures							
а	for development of mines and other natural deposits,							
	mining exploration costs, and depletion. See instructions	28a						
b	Enter the <b>smaller</b> of line 24 or 28a	28b						
29	If section 1255 property:							
а	Applicable percentage of payments excluded from							
	income under section 126. See instructions	29a						
b Sur	Enter the smaller of line 24 or 29a. See instructions	nns A	through D throug	h line 29h l	hefor	 e aoina to lir	ne 30	
	mary or raise in Gamer Complete property colar		inough B anoug	g.,o <u>_</u>	00101	<u> </u>		
30	Total gains for all properties. Add property columns A thro	ouah D.	line 24				30	
31	Add property columns A through D, lines 25b, 26g, 27c, 2	0 /					31	(
32	Subtract line 31 from line 30. Enter the portion from cast							
							32	(
Pa	TIV Recapture Amounts Under Sections 17 (see instructions)	79 and	I 280F(b)(2) Wh	en Busine	ss Us	se Drops to	50%	or Less
						(a) Section 179		(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable	in prior	vears		33			. , , ,
34					34			
35	Recapture amount. Subtract line 34 from line 33. See the				35		0	(

Form **4797** (2023)

**Gains and Losses From Section 1256 Contracts and Straddles** 

Attach to your tax return. Department of the Treasury

OMB No. 1545-0644 Attachment Sequence No. **82** 

Go to www.irs.gov/Form6781 for the latest information.

Internal	Revenue Service		Go to w	ww.irs.gov	/Form6781 1	for the la	tes	t inform	nation.			ŝ	sequence No. <b>82</b>
Name(s) shown on tax return PUBLIC WELFARE FOUNDATION INC.												-	ing number 54-0597601
	k all applicable bo		☐ Mixed s	straddle ele	ection			(	C Mixed	stra	ddle ac		election
	structions.	В	☐ Straddle	e-by-strad	dle identific	ation ele	ecti	ion <b>I</b>	D 🗌 Net se	ection	า 1256 ต	contra	cts loss election
Par	Section 1	256 Contrac	ts Marke	d to Mar	ket								
		(a) Identifi	cation of acc	ount				(b)	(b) (Loss) (c) Ga			1	
1	SECTION 1256 C	CONTRACTS A	AND STRA	DDLES FF	ROM INVES	NVESTMENTS			0				
						<u> </u>							
2	Add the amount							(	0)			9	0
3 4	Net gain or (loss Form 1099-B ad											3	9
5												<del></del>	9
3	Combine lines 3 and 4										3	3	
6	If you have a ne be carried back.									t of l	oss to	6	0
7	Combine lines 5	and 6										7	9
8	Short-term cap Schedule D or o											8	4
9	Long-term cap Schedule D or o	n Form 8949.	See instruc	ctions .								9	5
Part	■ Gains and	d Losses Fro	om Strado	<b>dles.</b> Attac	ch a separa	te stater	ner	nt listin	g each stra	ddle	and its	comp	onents.
Secti	on A-Losses	From Stradd	lles						1				
	(a) Description of p	ription of property  (b) Date entered into or acquired  (c) Date closed out or sold			(d) Gross sales pric	` '			basis more than (d), enter difference.  Otherwise Unre		(g) Unrecog gain o offsett positio	nized on ing	(h) Recognized loss If column (f) is more than (g), enter difference. Otherwise, enter -0
10													
11a	Enter the short-to- D or on Form 89				column (h),		ıd i	include	on line 4 c	of Sch	nedule 	11a	(
b	Enter the long-to D or on Form 89											11b	(
Secti	on B—Gains F	rom Straddle	es										
	(a) Description of property			(b) Date entered into or acquired	(c) Date closed o or solo	ut	sales price oth			(e) Cost or other basis plus expense of sale		(f) Gain. If column (d) is more than (e), enter difference. Otherwise, enter -0	
12													
13a	Enter the short-t			n line 12, c	olumn (f), h	ere and	inc	lude o	n line 4 of S	 Sched	dule D	10-	
b	Enter the long-to D or on Form 89	erm portion of	gains from		olumn (f), h			 clude c	n line 11 o	 of Sch	 nedule	13a 13b	
Part		nized Gains						гах Ye	ar. Memo	entry	only (s		tructions)
	(a) Description of property					(b) Date acquire	Э	(c) Fair market (d) (value on last other			(d) Cost of the co	or iis	(e) Unrecognized gain. If column (c) is more than (d), enter difference. Otherwise, enter -0
14													