

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

OMB No. 1545-0047

**2022**Department of the Treasury  
Internal Revenue Service

For calendar year 2022 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.

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

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

<b>A</b> <input type="checkbox"/> Check box if address changed.  <b>B</b> Exempt under section <input checked="" type="checkbox"/> 501(c)(3) ) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A	Print or Type	Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.) <b>C. K. BLANDIN FOUNDATION</b> Number, street, and room or suite no. If a P.O. box, see instructions. <b>100 N POKEGAMA AVE</b> City or town, state or province, country, and ZIP or foreign postal code <b>GRAND RAPIDS, MN 55744</b> <b>C</b> Book value of all assets at end of year ..... <b>473,816,755.</b>	<b>D</b> Employer identification number <b>41-6038619</b> <b>E</b> Group exemption number (see instructions)  <b>F</b> <input type="checkbox"/> Check box if an amended return.
<b>G</b> Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust <input type="checkbox"/> State college/university		<b>H</b> Check if filing only to <input type="checkbox"/> Claim credit from Form 8941 <input type="checkbox"/> Claim a refund shown on Form 2439	
<b>I</b> Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ..... <input type="checkbox"/>		<b>J</b> Enter the number of attached Schedules A (Form 990-T) ..... <b>1</b>	
<b>K</b> During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," enter the name and identifying number of the parent corporation.			
<b>L</b> The books are in care of <b>DANIEL LEMM</b>		Telephone number <b>218-326-0523</b>	

**Part I Total Unrelated Business Taxable Income**

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) .....	1	44,182.
2 Reserved .....	2	
3 Add lines 1 and 2 .....	3	44,182.
4 Charitable contributions (see instructions for limitation rules) <b>STMT 21 STMT 22</b> .....	4	30.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 .....	5	44,152.
6 Deduction for net operating loss. See instructions .....	6	
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 .....	7	44,152.
8 Specific deduction (generally \$1,000, but see instructions for exceptions) .....	8	1,000.
9 <b>Trusts.</b> Section 199A deduction. See instructions .....	9	
10 <b>Total deductions.</b> Add lines 8 and 9 .....	10	1,000.
11 <b>Unrelated business taxable income.</b> Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero .....	11	43,152.

**Part II Tax Computation**

1 <b>Organizations taxable as corporations.</b> Multiply Part I, line 11 by 21% (0.21) .....	1	9,062.
2 <b>Trusts taxable at trust rates.</b> See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) .....	2	
3 <b>Proxy tax.</b> See instructions .....	3	
4 Other tax amounts. See instructions .....	4	
5 Alternative minimum tax (trusts only) .....	5	
6 <b>Tax on noncompliant facility income.</b> See instructions .....	6	
7 <b>Total.</b> Add lines 3 through 6 to line 1 or 2, whichever applies .....	7	9,062.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-T (2022)

**Part III Tax and Payments**


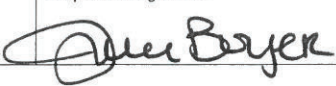
1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b	Other credits (see instructions) <b>SEE STATEMENT 23</b>	1b	1,088.	
c	General business credit. Attach Form 3800 (see instructions)	1c		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	1d		
e	<b>Total credits.</b> Add lines 1a through 1d	1e	1,088.	
2	Subtract line 1e from Part II, line 7	2	7,974.	
3	Other amounts due. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement)	3		
4	<b>Total tax.</b> Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	4	7,974.	
5	Current net 965 tax liability paid from Form 965-A, Part II, column (k)	5	0.	
6a	Payments: A 2021 overpayment credited to 2022	6a	42,999.	
b	2022 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b		
c	Tax deposited with Form 8868	6c		
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e	Backup withholding (see instructions)	6e		
f	Credit for small employer health insurance premiums (attach Form 8941)	6f		
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total	6g		
7	<b>Total payments.</b> Add lines 6a through 6g	7	42,999.	
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	8		
9	<b>Tax due.</b> If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9		
10	<b>Overpayment.</b> If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10	35,025.	
11	Enter the amount of line 10 you want: <b>Credited to 2023 estimated tax</b> 35,025. <b>Refunded</b>	11	0.	

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

1	At any time during the 2022 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes	No
2	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.		X
3	Enter the amount of tax-exempt interest received or accrued during the tax year \$		
4	Enter available pre-2018 NOL carryovers here \$ Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
	Business Activity Code	Available post-2017 NOL carryover	
	901101	\$ 104,942.	
		\$	
6a	Did the organization change its method of accounting? (see instructions)		X
b	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V		

**Part V Supplemental Information**

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
		Date 11/14/23	Title PRESIDENT/CEO	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	JULIE BOYER		11/7/23	P01278549
	Firm's name RSM US LLP	Firm's EIN 42-0714325		
	Firm's address 227 WEST FIRST STREET, SUITE 700 DULUTH, MN 55802	Phone no. 218-727-5025		

May the IRS discuss this return with the preparer shown below (see instructions)?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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FORM 990-T

CONTRIBUTIONS

STATEMENT 21

DESCRIPTION/KIND OF PROPERTY

METHOD USED TO DETERMINE FMV

AMOUNT

CHARITABLE CONTRIBUTIONS -  
PASS-THROUGH FROM VARIOUS K-1S

N/A

30.

TOTAL TO FORM 990-T, PART I, LINE 4

30.

## FORM 990-T

## CONTRIBUTIONS SUMMARY

## STATEMENT 22

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT  
QUALIFIED CONTRIBUTIONS SUBJECT TO 25% LIMIT

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS  
FOR TAX YEAR 2017  
FOR TAX YEAR 2018  
FOR TAX YEAR 2019  
FOR TAX YEAR 2020  
FOR TAX YEAR 2021

TOTAL CARRYOVER

TOTAL CURRENT YEAR 10% CONTRIBUTIONS

30

TOTAL CONTRIBUTIONS AVAILABLE

30

TAXABLE INCOME LIMITATION AS ADJUSTED

4,318

EXCESS CONTRIBUTIONS

0

EXCESS 100% CONTRIBUTIONS

0

TOTAL EXCESS CONTRIBUTIONS

0

ALLOWABLE CONTRIBUTIONS DEDUCTION

30

TOTAL CONTRIBUTION DEDUCTION

30

FORM 990-T

OTHER CREDITS

STATEMENT 23

DESCRIPTIONAMOUNT

FORM 8978 TAX CREDIT FOR 2018-2020

1,088.

TOTAL TO FORM 990-T, PAGE 2, PART III, LINE 1B

1,088.

**SCHEDULE A  
(Form 990-T)**

Department of the Treasury  
Internal Revenue Service

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

Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.

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

1  
OMB No. 1545-0047

**2022**

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

<b>A</b> Name of the organization <b>C. K. BLANDIN FOUNDATION</b>	<b>B</b> Employer identification number <b>41-6038619</b>
<b>C</b> Unrelated business activity code (see instructions) <b>901101</b>	<b>D</b> Sequence: <b>1</b> of <b>1</b>

**E** Describe the unrelated trade or business **UBI FROM PARTNERSHIP K-1S**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
<b>1 a</b> Gross receipts or sales				
<b>b</b> Less returns and allowances	<b>c</b> Balance	<b>1c</b>		
<b>2</b> Cost of goods sold (Part III, line 8)		<b>2</b>		
<b>3</b> Gross profit. Subtract line 2 from line 1c		<b>3</b>		
<b>4 a</b> Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions		<b>4a</b> 65,876.		65,876.
<b>b</b> Net gain (loss) (Form 4797) (attach Form 4797). See instructions		<b>4b</b>		
<b>c</b> Capital loss deduction for trusts		<b>4c</b>		
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement) <b>STATEMENT 24</b>		<b>5</b> 83,254.		83,254.
<b>6</b> Rent income (Part IV)		<b>6</b>		
<b>7</b> Unrelated debt-financed income (Part V)		<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Part VI)		<b>8</b>		
<b>9</b> Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)		<b>9</b>		
<b>10</b> Exploited exempt activity income (Part VIII)		<b>10</b>		
<b>11</b> Advertising income (Part IX)		<b>11</b>		
<b>12</b> Other income (see instructions; attach statement)		<b>12</b>		
<b>13 Total.</b> Combine lines 3 through 12		<b>13</b> 149,130.		149,130.

**Part II Deductions Not Taken Elsewhere** See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

<b>1</b> Compensation of officers, directors, and trustees (Part X)	<b>1</b>	
<b>2</b> Salaries and wages	<b>2</b>	
<b>3</b> Repairs and maintenance	<b>3</b>	
<b>4</b> Bad debts	<b>4</b>	
<b>5</b> Interest (attach statement). See instructions	<b>5</b>	
<b>6</b> Taxes and licenses	<b>6</b>	6.
<b>7</b> Depreciation (attach Form 4562). See instructions	<b>7</b>	
<b>8</b> Less depreciation claimed in Part III and elsewhere on return	<b>8a</b>	<b>8b</b>
<b>9</b> Depletion	<b>9</b>	
<b>10</b> Contributions to deferred compensation plans	<b>10</b>	
<b>11</b> Employee benefit programs	<b>11</b>	
<b>12</b> Excess exempt expenses (Part VIII)	<b>12</b>	
<b>13</b> Excess readership costs (Part IX)	<b>13</b>	
<b>14</b> Other deductions (attach statement)	<b>14</b>	
<b>15 Total deductions.</b> Add lines 1 through 14	<b>15</b>	6.
<b>16</b> Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	<b>16</b>	149,124.
<b>17</b> Deduction for net operating loss. See instructions <b>STMT 25 STMT 27</b>	<b>17</b>	104,942.
<b>18 Unrelated business taxable income.</b> Subtract line 17 from line 16	<b>18</b>	44,182.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022



**Part III Cost of Goods Sold**

Enter method of inventory valuation

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

**Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)**

1	Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.				
A	<input type="checkbox"/>				
B	<input type="checkbox"/>				
C	<input type="checkbox"/>				
D	<input type="checkbox"/>				
2	Rent received or accrued	A	B	C	D
a	From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) .....				
b	From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) .....				
c	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D .....				
3	Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A) .....	0.			
4	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) .....				
5	<b>Total deductions.</b> Add line 4 columns A through D. Enter here and on Part I, line 6, column (B) .....	0.			

**Part V Unrelated Debt-Financed Income** (see instructions)

1	Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.				
A	<input type="checkbox"/>				
B	<input type="checkbox"/>				
C	<input type="checkbox"/>				
D	<input type="checkbox"/>				
2	Gross income from or allocable to debt-financed property .....	A	B	C	D
3	Deductions directly connected with or allocable to debt-financed property				
a	Straight line depreciation (attach statement) .....				
b	Other deductions (attach statement) .....				
c	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	<b>Total gross income</b> (add line 7, columns A through D). Enter here and on Part I, line 7, column (A) .....	0.			
9	Allocable deductions. Multiply line 3c by line 6 .....				
10	<b>Total allocable deductions.</b> Add line 9, columns A through D. Enter here and on Part I, line 7, column (B) .....	0.			
11	<b>Total dividends-received deductions</b> included in line 10 .....	0.			

**Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations** (see instructions)

1. Name of controlled organization		2. Employer identification number	Exempt Controlled Organizations			6. Deductions directly connected with income in column 5
			3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	
(1)						
(2)						
(3)						
(4)						

Nonexempt Controlled Organizations				
7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)
<b>Totals</b>			0.	0.

**Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
	Add amounts in column 2. Enter here and on Part I, line 9, column (A)			Add amounts in column 5. Enter here and on Part I, line 9, column (B)
<b>Totals</b>	0.			0.

**Part VIII Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1	Description of exploited activity: _____		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) _____	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) _____	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 _____	4	
5	Gross income from activity that is not unrelated business income _____	5	
6	Expenses attributable to income entered on line 5 _____	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12 _____	7	

Schedule A (Form 990-T) 2022



**Part IX Advertising Income**

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

A ☐B ☐C ☐D ☐

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income .....				
Add columns A through D. Enter here and on Part I, line 11, column (A) .....				0.

a

3 Direct advertising costs by periodical .....				
a Add columns A through D. Enter here and on Part I, line 11, column (B) .....				0.

4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8 .....

5 Readership costs .....

6 Circulation income .....

7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero .....

8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7 .....

a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13 .....				0.
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**Part X Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	

Total. Enter here and on Part II, line 1 .....	0.
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**Part XI Supplemental Information** (see instructions)

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## FORM 990-T (A)

## INCOME (LOSS) FROM PARTNERSHIPS

## STATEMENT 24

DESCRIPTION	NET INCOME OR (LOSS)
DBL PARTNERS III - EIN: 47-2525593 - OTHER INCOME (LOSS)	-60.
LYME FOREST FUND IV TE LP - EIN: 45-5189160 - ORDINARY BUSINESS INCOME (LOSS)	-4,889.
LYME FOREST FUND IV TE LP - EIN: 45-5189160 - NET RENTAL REAL ESTATE INCOME	14.
LYME FOREST FUND IV TE LP - EIN: 45-5189160 - OTHER INCOME (LOSS)	-556.
MERCED PARTNERS IV, L.P. - EIN: 36-4756959 - ORDINARY BUSINESS INCOME (LOSS)	-681.
MERCED PARTNERS IV, L.P. - EIN: 36-4756959 - OTHER INCOME (LOSS)	-44.
NGP NATURAL GAS PARTNERS XI - EIN: 47-1245315 - ORDINARY BUSINESS INCOME (LO	171,970.
NGP NATURAL GAS PARTNERS XI - EIN: 47-1245315 - OTHER NET RENTAL INCOME (LOS	46.
NGP NATURAL GAS PARTNERS XI - EIN: 47-1245315 - INTEREST INCOME	146.
NGP NATURAL GAS PARTNERS XI - EIN: 47-1245315 - DIVIDEND INCOME	26.
NGP NATURAL GAS PARTNERS XI - EIN: 47-1245315 - ROYALTIES	24,524.
NGP NATURAL GAS PARTNERS XI - EIN: 47-1245315 - OTHER PORTFOLIO INCOME (LOSS	-1,602.
NGP NATURAL GAS PARTNERS XI - EIN: 47-1245315 - OTHER INCOME (LOSS)	-123,909.
WCP REAL ESTATE FUND III LP - EIN: 27-4591086 - ORDINARY BUSINESS INCOME (LO	18,235.
WCP REAL ESTATE FUND III LP - EIN: 27-4591086 - NET RENTAL REAL ESTATE INCOM	-182.
STEELE OFFSHORE (ALTERNATIVE) LP - EIN: 98-1483512 - OTHER PORTFOLIO INCOME	74.
STEELE OFFSHORE (ALTERNATIVE) LP - EIN: 98-1483512 - OTHER INCOME (LOSS)	-183.
RESOURCE CAPITAL FUND VII L.P. - EIN 98-1332082 - INTEREST INCOME	62.
FEG PRIVATE OPPORTUNITIES FUND VI, LP - EIN: 87-2508439 - ORDINARY BUSINESS	254.
FEG PRIVATE OPPORTUNITIES FUND VI, LP - EIN: 87-2508439 - INTEREST INCOME	6.
FEG PRIVATE OPPORTUNITIES FUND VI, LP - EIN: 87-2508439 - DIVIDEND INCOME	6.
FEG PRIVATE OPPORTUNITIES FUND VI, LP - EIN: 87-2508439 - OTHER INCOME (LOSS	-3.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	83,254.

FORM 990-T (A)

POST 2017 NOL SCHEDULE

STATEMENT 25

PRIOR YEAR POST  
2017 NOL

104,942.

NOL DEDUCTION

104,942.

CARRYFORWARD OF  
POST 2017 NOL

0.

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990-T SCH A POST-2017 NET OPERATING LOSS DEDUCTION STATEMENT 26

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TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/19	104,997.	24,590.	80,407.	80,407.
12/31/20	24,535.	0.	24,535.	24,535.
NOL CARRYOVER AVAILABLE THIS YEAR			104,942.	104,942.

## SCH A (990-T)

## SCHEDULE A NOL DETAIL

## STATEMENT 27

TAXABLE INCOME FROM ALL ENTITIES	149,124.
THIS ENTITIES PORTION OF TAXABLE INCOME	149,124.
THIS ENTITIES PERCENTAGE OF PRE-2018 NET OPERATING LOSS	100.00%
THIS ENTITIES ALLOWED PRE-2018 NET OPERATING LOSS	0.
TAXABLE INCOME AFTER PRE-2018 NET OPERATING LOSS	149,124.
80% INCOME LIMITATION	119,299.
POST-2017 AVAILABLE	104,942.
LESSER OF POST-2017 NET OPERATING LOSS OR 80% LIMITATION	104,942.

**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](http://www.irs.gov/Form1120) for instructions and the latest information.

OMB No. 1545-0123

**2022**

Name

**C. K. BLANDIN FOUNDATION**

Employer identification number

**41-6038619**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 the lines below.

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

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> 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 .....				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked .....				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked .....				<b>217.</b>
<b>4</b> Short-term capital gain from installment sales from Form 6252, line 26 or 37 .....			<b>4</b>	
<b>5</b> Short-term capital gain or (loss) from like-kind exchanges from Form 8824 .....			<b>5</b>	
<b>6</b> Unused capital loss carryover (attach computation) .....			<b>6</b>	( )
<b>7</b> Net short-term capital gain or (loss). Combine lines 1a through 6 in column h .....			<b>7</b>	<b>217.</b>

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

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

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

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> 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 .....				
<b>8b</b> 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 .....				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked .....				<b>53.</b>
<b>11</b> Enter gain from Form 4797, line 7 or 9 .....			<b>11</b>	<b>65,606.</b>
<b>12</b> Long-term capital gain from installment sales from Form 6252, line 26 or 37 .....			<b>12</b>	
<b>13</b> Long-term capital gain or (loss) from like-kind exchanges from Form 8824 .....			<b>13</b>	
<b>14</b> Capital gain distributions .....			<b>14</b>	
<b>15</b> Net long-term capital gain or (loss). Combine lines 8a through 14 in column h .....			<b>15</b>	<b>65,659.</b>

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

<b>16</b> Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) .....	<b>16</b>	<b>217.</b>
<b>17</b> Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) .....	<b>17</b>	<b>65,659.</b>
<b>18</b> Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns .....	<b>18</b>	<b>65,876.</b>

Note: If losses exceed gains, see *Capital Losses* in the instructions.





41-6038619

*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.*

**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).

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

53. C

53.

Form **8949** (2022)

Form **4797**Department of the Treasury  
Internal Revenue Service**Sales of Business Property**  
(Also Involuntary Conversions and Recapture Amounts  
Under Sections 179 and 280F(b)(2))

Attach to your tax return.

Go to [www.irs.gov/Form4797](http://www.irs.gov/Form4797) for instructions and the latest information.

OMB No. 1545-0184

**2022**Attachment  
Sequence No. **27**

Name(s) shown on return

Identifying number

**C. K. BLANDIN FOUNDATION****41-6038619**

- 1a** Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 .....
- b** Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets .....
- c** Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets .....

**1a****1b****1c****Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year** (see instructions)

2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
	<b>SEE STATEMENT 28</b>						
<b>3</b>	Gain, if any, from Form 4684, line 39 .....						<b>3</b>
<b>4</b>	Section 1231 gain from installment sales from Form 6252, line 26 or 37 .....						<b>4</b>
<b>5</b>	Section 1231 gain or (loss) from like-kind exchanges from Form 8824 .....						<b>5</b>
<b>6</b>	Gain, if any, from line 32, from other than casualty or theft .....						<b>6</b>
<b>7</b>	Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows .....						<b>7</b> <b>65,606.</b>
	<b>Partnerships and S corporations.</b> Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.						
	<b>Individuals, partners, S corporation shareholders, and all others.</b> If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.						
<b>8</b>	Nonrecaptured net section 1231 losses from prior years. See instructions .....						<b>8</b>
<b>9</b>	Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions .....						<b>9</b> <b>65,606.</b>

**Part II Ordinary Gains and Losses** (see instructions)**10** Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

<b>11</b>	Loss, if any, from line 7 .....					<b>11</b> ( )
<b>12</b>	Gain, if any, from line 7 or amount from line 8, if applicable .....					<b>12</b>
<b>13</b>	Gain, if any, from line 31 .....					<b>13</b>
<b>14</b>	Net gain or (loss) from Form 4684, lines 31 and 38a .....					<b>14</b>
<b>15</b>	Ordinary gain from installment sales from Form 6252, line 25 or 36 .....					<b>15</b>
<b>16</b>	Ordinary gain or (loss) from like-kind exchanges from Form 8824 .....					<b>16</b>
<b>17</b>	Combine lines 10 through 16 .....					<b>17</b>
<b>18</b>	For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.					
	<b>a</b> If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions .....					<b>18a</b>
	<b>b</b> Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 .....					<b>18b</b>

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2022)

**Part III** Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A			
B			
C			
D			
<b>These columns relate to the properties on lines 19A through 19D.</b>		<b>Property A</b>	<b>Property B</b>
		<b>Property C</b>	<b>Property D</b>
20	Gross sales price ( <b>Note:</b> 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	
24	Total gain. Subtract line 23 from line 20	24	
25	<b>If section 1245 property:</b>		
a	Depreciation allowed or allowable from line 22	25a	
b	Enter the <b>smaller</b> of line 24 or 25a	25b	
26	<b>If section 1250 property:</b> If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.		
a	Additional depreciation after 1975. See instructions	26a	
b	Applicable percentage multiplied by the <b>smaller</b> of line 24 or line 26a. See instructions	26b	
c	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	
e	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	<b>If section 1252 property:</b> Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.		
a	Soil, water, and land clearing expenses	27a	
b	Line 27a multiplied by applicable percentage	27b	
c	Enter the <b>smaller</b> of line 24 or 27b	27c	
28	<b>If section 1254 property:</b>		
a	Intangible drilling and development costs, expenditures 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	<b>If section 1255 property:</b>		
a	Applicable percentage of payments excluded from income under section 126. See instructions	29a	
b	Enter the <b>smaller</b> of line 24 or 29a. See instructions	29b	

**Summary of Part III Gains.** Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties. Add property columns A through D, line 24	30	
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32	

**Part IV** Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (see instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33
34	Recomputed depreciation. See instructions	34
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35

FORM 4797

PROPERTY HELD MORE THAN ONE YEAR

STATEMENT 28

DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
LYME FOREST FUND IV TE LP - EIN: 45-5189						6,512.
NGP NATURAL GAS PARTNERS XI - EIN: 47-12						37,212.
WCP REAL ESTATE FUND III LP - EIN: 27-45						21,881.
FEG PRIVATE OPPORTUNITIES FUND VI, LP -						1.
TOTAL TO 4797, PART I, LINE 2						65,606.

**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](http://www.irs.gov/Form1120) for instructions and the latest information.

OMB No. 1545-0123

**2022**

Name

**C. K. BLANDIN FOUNDATION**

Employer identification number

**41-6038619**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 the lines below.

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

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> 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 .....				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked .....				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked .....				<b>217.</b>
<b>4</b> Short-term capital gain from installment sales from Form 6252, line 26 or 37 .....			<b>4</b>	
<b>5</b> Short-term capital gain or (loss) from like-kind exchanges from Form 8824 .....			<b>5</b>	
<b>6</b> Unused capital loss carryover (attach computation) .....			<b>6</b>	( )
<b>7</b> Net short-term capital gain or (loss). Combine lines 1a through 6 in column h .....			<b>7</b>	<b>217.</b>

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

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

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

	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> 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 .....				
<b>8b</b> 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 .....				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked .....				<b>53.</b>
<b>11</b> Enter gain from Form 4797, line 7 or 9 .....			<b>11</b>	<b>65,606.</b>
<b>12</b> Long-term capital gain from installment sales from Form 6252, line 26 or 37 .....			<b>12</b>	
<b>13</b> Long-term capital gain or (loss) from like-kind exchanges from Form 8824 .....			<b>13</b>	
<b>14</b> Capital gain distributions .....			<b>14</b>	
<b>15</b> Net long-term capital gain or (loss). Combine lines 8a through 14 in column h .....			<b>15</b>	<b>65,659.</b>

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

<b>16</b> Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) .....	<b>16</b>	<b>217.</b>
<b>17</b> Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) .....	<b>17</b>	<b>65,659.</b>
<b>18</b> Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns .....	<b>18</b>	<b>65,876.</b>

Note: If losses exceed gains, see *Capital Losses* in the instructions.



## Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

2022

Attachment Sequence No. **12A**

Go to [www.irs.gov/Form8949](http://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.

Name(s) shown on return

**Social security number or taxpayer identification no.**

41-6038619

C. K. BLANDIN FOUNDATION

*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 Form 1099-B

[illegible]

**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.

41-6038619

## C. K. BLANDIN FOUNDATION

*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)
- ☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis **wasn't** reported to the IRS
- ☒ (F) Long-term transactions not reported to you on Form 1099-B

[illegible]

**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 **4797**Department of the Treasury  
Internal Revenue Service**Sales of Business Property**  
(Also Involuntary Conversions and Recapture Amounts  
Under Sections 179 and 280F(b)(2))

Attach to your tax return.

Go to [www.irs.gov/Form4797](http://www.irs.gov/Form4797) for instructions and the latest information.

OMB No. 1545-0184

**2022**Attachment  
Sequence No. **27**

Name(s) shown on return

Identifying number

**C. K. BLANDIN FOUNDATION****41-6038619**

- 1a** Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 .....
- b** Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets .....
- c** Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets .....

**1a****1b****1c****Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft—Most Property Held More Than 1 Year** (see instructions)

<b>2</b>	<b>(a)</b> Description of property	<b>(b)</b> Date acquired (mo., day, yr.)	<b>(c)</b> Date sold (mo., day, yr.)	<b>(d)</b> Gross sales price	<b>(e)</b> Depreciation allowed or allowable since acquisition	<b>(f)</b> Cost or other basis, plus improvements and expense of sale	<b>(g)</b> Gain or (loss) Subtract (f) from the sum of (d) and (e)
<b>SEE STATEMENT 29</b>							
<b>3</b>	Gain, if any, from Form 4684, line 39 .....						<b>3</b>
<b>4</b>	Section 1231 gain from installment sales from Form 6252, line 26 or 37 .....						<b>4</b>
<b>5</b>	Section 1231 gain or (loss) from like-kind exchanges from Form 8824 .....						<b>5</b>
<b>6</b>	Gain, if any, from line 32, from other than casualty or theft .....						<b>6</b>
<b>7</b>	Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows .....						<b>7</b> <b>65,606.</b>
<b>Partnerships and S corporations.</b> Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below.  <b>Individuals, partners, S corporation shareholders, and all others.</b> If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.							
<b>8</b>	Nonrecaptured net section 1231 losses from prior years. See instructions .....						<b>8</b>
<b>9</b>	Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions .....						<b>9</b> <b>65,606.</b>

**Part II Ordinary Gains and Losses** (see instructions)**10** Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

<b>11</b>	Loss, if any, from line 7 .....						<b>11</b> ( )
<b>12</b>	Gain, if any, from line 7 or amount from line 8, if applicable .....						<b>12</b>
<b>13</b>	Gain, if any, from line 31 .....						<b>13</b>
<b>14</b>	Net gain or (loss) from Form 4684, lines 31 and 38a .....						<b>14</b>
<b>15</b>	Ordinary gain from installment sales from Form 6252, line 25 or 36 .....						<b>15</b>
<b>16</b>	Ordinary gain or (loss) from like-kind exchanges from Form 8824 .....						<b>16</b>
<b>17</b>	Combine lines 10 through 16 .....						<b>17</b>
<b>18</b>	For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below.						
<b>a</b>	If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions .....						<b>18a</b>
<b>b</b>	Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 .....						<b>18b</b>

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2022)

**Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255** (see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A			
B			
C			
D			
<b>These columns relate to the properties on lines 19A through 19D.</b>		<b>Property A</b>	<b>Property B</b>
		<b>Property C</b>	<b>Property D</b>
20 Gross sales price ( <b>Note:</b> 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		
24 Total gain. Subtract line 23 from line 20	24		
<b>25 If section 1245 property:</b>			
a Depreciation allowed or allowable from line 22	25a		
b Enter the <b>smaller</b> of line 24 or 25a	25b		
<b>26 If section 1250 property:</b> If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.			
a Additional depreciation after 1975. See instructions	26a		
b Applicable percentage multiplied by the <b>smaller</b> of line 24 or line 26a. See instructions	26b		
c 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		
e 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		
<b>27 If section 1252 property:</b> Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.			
a Soil, water, and land clearing expenses	27a		
b Line 27a multiplied by applicable percentage	27b		
c Enter the <b>smaller</b> of line 24 or 27b	27c		
<b>28 If section 1254 property:</b>			
a Intangible drilling and development costs, expenditures 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		
<b>29 If section 1255 property:</b>			
a Applicable percentage of payments excluded from income under section 126. See instructions	29a		
b Enter the <b>smaller</b> of line 24 or 29a. See instructions	29b		

**Summary of Part III Gains.** Complete property columns A through D through line 29b before going to line 30.

30 Total gains for all properties. Add property columns A through D, line 24	30	
31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6	32	

**Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less** (see instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation allowable in prior years	33	
34 Recomputed depreciation. See instructions	34	
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35	

FORM 4797

PROPERTY HELD MORE THAN ONE YEAR

STATEMENT 29

DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
LYME FOREST FUND IV TE LP - EIN: 45-5189						6,512.
NGP NATURAL GAS PARTNERS XI - EIN: 47-12						37,212.
WCP REAL ESTATE FUND III LP - EIN: 27-45						21,881.
FEG PRIVATE OPPORTUNITIES FUND VI, LP -						1.
TOTAL TO 4797, PART I, LINE 2						65,606.

Form

**8865**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](http://www.irs.gov/Form8865) for instructions and the latest information.

Information furnished for the foreign partnership's tax year

beginning **JAN 1**, 2022, and ending **DEC 31**, 2022

OMB No. 1545-1668

**2022**Attachment  
Sequence No. **865**

Name of person filing this return

**C. K. BLANDIN FOUNDATION**

Filer's identification number

**41-6038619**

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)):1 ☐ 2 ☒ 3 ☐ 4 ☒**B** Filer's tax year beginning **JAN 1**, 2022, and ending **DEC 31**, 2022**C** Filer's share of liabilities: Nonrecourse \$ **64** . 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:

Name

EIN

Address

**E** Check if any excepted specified foreign financial assets are reported on this form. See instructions ☐**F** Information about certain other partners (see instructions)

(1) Name	(2) Address	(3) Identification number	(4) Check applicable box(es)		
			Category 1	Category 2	Constructive owner

**G1** Name and address of foreign partnership**EUROPEAN STRATEGIC PARTNERS II 'B', L.P.****2(a)** EIN (if any)**98-0384043****2(b)** Reference ID number**1** **GEORGE STREET****EDINBURGH, SCOTLAND, UNITED KINGDOM EH2 2LL****3** Country under whose laws organized**UNITED KINGDOM**

<b>4</b> Date of organization <b>10/20/2003</b>	<b>5</b> Principal place of business <b>UNITED KINGDOM</b>	<b>6</b> Principal business activity code number <b>523900</b>	<b>7</b> Principal business activity <b>INVESTMENTS</b>	<b>8a</b> Functional currency <b>EUR</b>	<b>8b</b> Exchange rate (see instructions) <b>.951009</b>
--	---	---	--	---	--

**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 8804 ☒ Form 1065

Service Center where Form 1065 is filed:

**E-FILE****3** Name and address of foreign partnership's agent in country of organization, if any**SL CAPITAL PARTNERS LLP  
1735 MARKET ST. FLOOR 32  
PHILADELPHIA, PA 19103****4** 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**5** During the tax year, did the foreign partnership pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions☐ Yes ☒ No

If "Yes," enter the total amount of the disallowed deductions \$

**6** Is the partnership a section 721(c) partnership, as defined in Regulations section 1.721(c)-1(b)(14)?☐ Yes ☒ No**7** Were any special allocations made by the foreign partnership?☐ Yes ☒ No**8** 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**9** How is this partnership classified under the law of the country in which it's organized?**LIMITED PARTNERSHIP****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 Regulations section 1.1503(d)-1(b)(4) or part of a combined separate unit under Regulations section 1.1503(d)-1(b)(4)(ii)? If "No," skip question 10b☐ Yes ☐ No**b** If "Yes," does the separate unit or combined separate unit have a dual consolidated loss, as defined in Regulations section 1.1503(d)-1(b)(5)(ii)?☐ Yes ☐ No**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.

☐ Yes ☐ No

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** (2022)



- 12 a** Is the filer of this Form 8865 claiming a foreign-derived intangible income (FDII) deduction (under section 250) with respect to any transaction with the foreign partnership? If "Yes," complete lines 12b, 12c, and 12d. See instructions ☐ Yes ☒ No
- b** Enter the amount of gross receipts derived from all sales of general property to the foreign partnership that the filer included in its computation of foreign-derived deduction eligible income (FDDEI) \_\_\_\_\_
- c** Enter the amount of gross receipts derived from all sales of intangible property to the foreign partnership that the filer included in its computation of FDDEI \_\_\_\_\_
- d** Enter the amount of gross receipts derived from all services provided to the foreign partnership that the filer included in its computation of FDDEI \_\_\_\_\_
- 13** Enter the number of foreign partners subject to section 864(c)(8) as a result of transferring all or a portion of an interest in the partnership or of receiving a distribution from the partnership \_\_\_\_\_
- 14** At any time during the tax year were any transfers between the partnership and its partners subject to the disclosure requirements of Regulations section 1.707-8? ☐ Yes ☒ No

<b>Sign Here Only if You're Filing This Form Separately and Not With Your Tax Return.</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than general partner or limited liability company member) is based on all information of which preparer has any knowledge.			
	Signature of general partner or limited liability company member			Date
	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	Firm's name		Firm's EIN	
<b>Paid Preparer Use Only</b>	Firm's address		Phone no.	

**Schedule A** **Constructive Ownership of Partnership Interest.** Check the boxes that apply to the filer. If you check box **b**, enter the name, address, and U.S. taxpayer identification number (if any) of the person(s) whose interest you constructively own. See instructions.

**a** ☒ Owns a direct interest **b** ☐ Owns a constructive interest

Name	Address	Identification number (if any)	Check if foreign person	Check if direct partner

**Schedule A-1** **Certain Partners of Foreign Partnership** (see instructions)

Name	Address	Identification number (if any)	Check if foreign person

**Schedule A-2** **Foreign Partners of Section 721(c) Partnership** (see instructions)

Name of foreign partner	Address	Country of organization (if any)	U.S. taxpayer identification number (if any)	Check if related to U.S. transferor	Percentage interest	
					Capital	Profits
				<input type="checkbox"/>	%	%
				<input type="checkbox"/>	%	%

Does the partnership have any other foreign person as a direct partner? ☐ Yes ☐ No

**Schedule A-3** **Affiliation Schedule.** List all partnerships (foreign or domestic) in which the foreign partnership owns a direct interest or indirectly owns a 10% interest.

Name	Address	EIN (if any)	Total ordinary income or loss	Check if foreign partnership
ESP II CONDUIT, LP	1 GEORGE STREET EDINBURGH, UNITED KINGDOM	98-0384042		<input checked="" type="checkbox"/>

**Schedule N Transactions Between Controlled Foreign Partnership and Partners or Other Related Entities**

**Important:** Complete a separate Form 8865 and Schedule N for each controlled foreign partnership. Enter the totals for each type of transaction that occurred between the foreign partnership and the persons listed in columns (a) through (d).

Transactions of foreign partnership	(a) U.S. person filing this return	(b) Any domestic corporation or partnership controlling or controlled by the U.S. person filing this return	(c) Any other foreign corporation or partnership controlling or controlled by the U.S. person filing this return	(d) Any U.S. person with a 10% or more direct interest in the controlled foreign partnership (other than the U.S. person filing this return)
<b>1</b> Sales of inventory .....				
<b>2</b> Sales of property rights (patents, trademarks, etc.) ...				
<b>3</b> Compensation received for technical, managerial, engineering, construction, or like services .....				
<b>4</b> Commissions received .....				
<b>5</b> Rents, royalties, and license fees received .....				
<b>6</b> Distributions received .....				
<b>7</b> Interest received .....				
<b>8</b> Other .....				
<b>9</b> Add lines 1 through 8 .....				
<b>10</b> Purchases of inventory .....				
<b>11</b> Purchases of tangible property other than inventory .....				
<b>12</b> Purchases of property rights (patents, trademarks, etc.)				
<b>13</b> Compensation paid for technical, managerial, engineering, construction, or like services .....				
<b>14</b> Commissions paid .....				
<b>15</b> Rents, royalties, and license fees paid .....				
<b>16</b> Distributions paid .....				
<b>17</b> Interest paid .....				
<b>18</b> Other .....				
<b>19</b> Add lines 10 through 18 ...				
<b>20</b> Amounts borrowed (enter the maximum loan balance during the tax year). See instructions .....				
<b>21</b> Amounts loaned (enter the maximum loan balance during the tax year). See instructions .....				

**SCHEDULE P  
(Form 8865)**(Rev. December 2019)  
Department of the Treasury  
Internal Revenue Service**Acquisitions, Dispositions, and Changes of Interests  
in a Foreign Partnership (Under Section 6046A)**▶ Attach to Form 8865. See Instructions for Form 8865.  
▶ Go to [www.irs.gov/Form8865](http://www.irs.gov/Form8865) for instructions and the latest information.

OMB No. 1545-1668

Name of person filing Form 8865

**C. K. BLANDIN FOUNDATION**

Filer's identification number

**41-6038619**

Name of foreign partnership

**EUROPEAN STRATEGIC PARTNERS II 'B**

EIN (if any)

**98-0384043**

Reference ID number (see instr.)

**Part I Acquisitions**

(a) Name, address, and identification number of person from whom your interest was acquired	(b) Date of acquisition	(c) FMV of interest acquired	(d) Basis in interest acquired	(e) % of interest before acquisition	(f) % of interest after acquisition
<b>C. K. BLANDIN RESIDUARY T 6325 S RAINBOW BLVD, 3RD</b>	<b>01/01/22</b>	<b>0.</b>	<b>0.</b>	<b>.054418</b>	<b>.467803</b>

**Part II Dispositions**

(a) Name, address, and identification number of person who acquired your interest	(b) Date of disposition	(c) FMV of interest disposed	(d) Basis in interest disposed	(e) % of interest before disposition	(f) % of interest after disposition

**Part III Change in Proportional Interest**

(a) Description of change	(b) Date of change	(c) FMV of interest	(d) Basis in interest	(e) % of interest before change	(f) % of interest after change
<b>CHANGE IN PROFIT AND LOSS</b>	<b>01/01/22</b>	<b>0.</b>	<b>0.</b>	<b>.054418</b>	<b>.467803</b>

**Part IV Supplemental Information Required To Be Reported (see instructions)****PROFIT AND LOSS PERCENTAGES INCREASED FROM 5.4418% TO 46.7803%**

Schedule K-1  
(Form 8865)Department of the Treasury  
Internal Revenue ServiceFor calendar year 2022, or tax  
year beginning \_\_\_\_\_  
ending \_\_\_\_\_**2022**☐ Final K-1☐ Amended K-1

OMB No. 1545-1668

**Partner's Share of Income, Deductions,  
Credits, etc.**

<b>Part I Information About the Partnership</b>		<b>Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items</b>																					
<b>A1</b> Partnership's employer identification number <b>98-0384043</b>		<b>1</b> Ordinary business income (loss)	<b>15</b> Credits																				
<b>A2</b> Reference ID number (see instructions)		<b>2</b> Net rental real estate income (loss)																					
<b>B</b> Partnership's name, address, city, state, and ZIP code <b>EUROPEAN STRATEGIC PARTNERS II 'B', L.P.</b>  <b>1 GEORGE STREET</b> <b>EDINBURGH, SCOTLAND, UNITED KINGDOM EH2</b>		<b>3</b> Other net rental income (loss)																					
<b>Part II Information About the Partner</b>  <b>C</b> Partner's SSN or TIN (Do not use TIN of a disregarded entity). See instructions. <b>41-6038619</b>  <b>D1</b> Name, address, city, state, and ZIP code for partner entered in C. See instructions. <b>CHARLES K BLANDIN FOUNDATION</b>  <b>100 N POKEGAMA AVENUE</b> <b>GRAND RAPIDS, MN 55744</b>  <b>D2</b> <input type="checkbox"/> If partnership interest is owned through a disregarded entity (DE), enter DE's: <div style="display: flex; justify-content: space-between;"><span>TIN</span><span>Name</span></div>		<b>4a</b> Guaranteed payments for services																					
		<b>4b</b> Guaranteed payments for capital	<b>16</b> Schedule K-3 is attached if checked <input checked="" type="checkbox"/>																				
<b>E</b> Partner's share of profit, loss, capital, and deductions (see Partner's Instr. (Form 1065)): <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Beginning</th> <th></th> <th style="text-align: center;">Ending</th> </tr> </thead> <tbody> <tr> <td>Profit</td> <td style="text-align: right;">5.4418000 %</td> <td></td> <td style="text-align: right;">46.7803000 %</td> </tr> <tr> <td>Loss</td> <td style="text-align: right;">5.4418000 %</td> <td></td> <td style="text-align: right;">46.7803000 %</td> </tr> <tr> <td>Capital</td> <td style="text-align: right;">5.2478000 %</td> <td></td> <td style="text-align: right;">5.9222000 %</td> </tr> <tr> <td>Deductions</td> <td style="text-align: right;">5.4418000 %</td> <td></td> <td style="text-align: right;">46.7803000 %</td> </tr> </tbody> </table> Check if decrease is due to sale or exchange of partnership interest <input type="checkbox"/>			Beginning		Ending	Profit	5.4418000 %		46.7803000 %	Loss	5.4418000 %		46.7803000 %	Capital	5.2478000 %		5.9222000 %	Deductions	5.4418000 %		46.7803000 %	<b>4c</b> Total guaranteed payments	<b>17</b> Alternative minimum tax (AMT) items
	Beginning		Ending																				
Profit	5.4418000 %		46.7803000 %																				
Loss	5.4418000 %		46.7803000 %																				
Capital	5.2478000 %		5.9222000 %																				
Deductions	5.4418000 %		46.7803000 %																				
		<b>5</b> Interest income																					
		<b>6a</b> Ordinary dividends <span style="float: right;">79.</span>																					
		<b>6b</b> Qualified dividends																					
		<b>6c</b> Dividend equivalents	<b>18</b> Tax-exempt income and nondeductible expenses																				
		<b>7</b> Royalties																					
		<b>8</b> Net short-term capital gain (loss)																					
		<b>9a</b> Net long-term capital gain (loss) <span style="float: right;">-18,890.</span>	<b>19</b> Distributions																				
		<b>9b</b> Collectibles (28%) gain (loss)																					
		<b>9c</b> Unrecaptured section 1250 gain	<b>20</b> Other information																				
		<b>10</b> Net section 1231 gain (loss)	<b>A</b> <span style="float: right;">80.</span>																				
		<b>11</b> Other income (loss) <span style="float: right;">1.</span>																					
<b>F Partner's Capital Account Analysis</b>  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Beginning capital account</td> <td style="width: 5%;">\$</td> <td style="width: 35%; text-align: right;">-18,887.</td> </tr> <tr> <td>Capital contributed during the year</td> <td>\$</td> <td></td> </tr> <tr> <td>Current year net income (loss)</td> <td>\$</td> <td style="text-align: right;">-18,982.</td> </tr> <tr> <td>Other increase (decrease) (attach explanation)</td> <td>\$</td> <td></td> </tr> <tr> <td>Withdrawals &amp; distributions</td> <td>\$</td> <td style="text-align: right;">( )</td> </tr> <tr> <td>Ending capital account</td> <td>\$</td> <td style="text-align: right;">-37,869.</td> </tr> </table>		Beginning capital account	\$	-18,887.	Capital contributed during the year	\$		Current year net income (loss)	\$	-18,982.	Other increase (decrease) (attach explanation)	\$		Withdrawals & distributions	\$	( )	Ending capital account	\$	-37,869.	<b>12</b> Section 179 deduction			
		Beginning capital account	\$	-18,887.																			
Capital contributed during the year	\$																						
Current year net income (loss)	\$	-18,982.																					
Other increase (decrease) (attach explanation)	\$																						
Withdrawals & distributions	\$	( )																					
Ending capital account	\$	-37,869.																					
		<b>13</b> Other deductions <span style="float: right;">W* STMT</span>	<b>21</b> Foreign taxes paid or accrued																				
<b>G Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)</b> Beginning ..... \$ ..... Ending ..... \$ .....		<b>14</b> Self-employment earnings (loss)																					
For IRS Use Only																							

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SCHEDULE K-1  
(FORM 8865)

OTHER DEDUCTIONS, BOX 13, CODE W

STATEMENT 30

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DESCRIPTION

AMOUNT

OTHER MISCELLANEOUS DEDUCTIONS

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172.

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

OMB No. 1545-0026

► Go to [www.irs.gov/Form926](http://www.irs.gov/Form926) for instructions and the latest information.  
► Attach to your income tax return for the year of the transfer or distribution.

Attachment  
Sequence No. **128**

**Part I U.S. Transferor Information** (see instructions)

Name of transferor <b>C. K. BLANDIN FOUNDATION</b>	Identifying number (see instructions) <b>41-6038619</b>
---	--

- 1** Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation? ☐ Yes ☒ No
- 2** If the transferor was a corporation, complete questions 2a through 2d.
- a** 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? ☐ Yes ☒ 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	Identifying number

- c** If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation? ☐ 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 under section 367), complete questions 3a through 3d.
- a** List the name and EIN of the transferor's partnership.

Name of partnership	EIN of partnership

- b** Did the partner pick up its pro rata share of gain on the transfer of partnership assets? ☐ Yes ☐ No
- c** Is the partner disposing of its **entire** interest in the partnership? ☐ Yes ☐ No
- d** Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? ☐ Yes ☐ No

**Part II Transferee Foreign Corporation Information** (see instructions)

<b>4</b> Name of transferee (foreign corporation) <b>PORTFOLIO ADVISORS SECONDARY FUND IV (OFFSHORE) L.P</b>	<b>5a</b> Identifying number, if any <b>98-1518580</b>
<b>6</b> Address (including country) <b>C/O INTERTRUST CORPORATE SERVICES (CAYMAN) LIMITED, 190 GEORGE TOWN, GRAND CAYMAN KY1-9005 CAYMAN ISLANDS</b>	<b>5b</b> Reference ID number
<b>7</b> Country code of country of incorporation or organization <b>CJ</b>	

- 8** Foreign law characterization (see instructions)  
**PARTNERSHIP**

- 9** Is the transferee foreign corporation a controlled foreign corporation? ☐ Yes ☒ No



**Part III Information Regarding Transfer of Property** (see instructions)**Section A - Cash**

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash <b>STMT 31</b>					

- 10** Was cash the only property transferred? ☒ **Yes** ☐ **No**  
If "Yes," skip the remainder of Part III and go to Part IV.

**Section B - Other Property (other than intangible property subject to section 367(d))**

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities					
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
Totals					

- 11** Did the transferor transfer stock or securities subject to section 367(a) with respect to which a gain recognition agreement was filed? ☐ **Yes** ☐ **No**
- 12 a** Were any assets of a foreign branch (including a branch that is a foreign disregarded entity) transferred to a foreign corporation? ☐ **Yes** ☐ **No**  
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? ☐ **Yes** ☐ **No**  
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? ☐ **Yes** ☐ **No**  
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 ► \$ \_\_\_\_\_
- 13** Did the transferor transfer property described in section 367(d)(4)? ☐ **Yes** ☐ **No**  
If "No," skip Section C and questions 14a through 15.

**Section C - Intangible Property Subject to Section 367(d)**

Type of property	(a) Date of transfer	(b) Description of property	(c) Useful life	(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)						
Totals						

- 14 a** Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years? ☐ Yes ☐ No
- b** At the time of the transfer, did any of the transferred intangible property have an indefinite useful life? ☐ Yes ☐ No
- c** Did the transferor choose to apply the 20-year inclusion period provided under Regulations section 1.367(d)-1(c)(3)(ii) for any intangible property? ☐ Yes ☐ No
- d** If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) ► \$ \_\_\_\_\_
- 15** Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? ☐ Yes ☐ No

**Supplemental Part III Information Required To Be Reported** (see instructions)**Part IV Additional Information Regarding Transfer of Property** (see instructions)

- 16** Enter the transferor's interest in the transferee foreign corporation before and after the transfer.  
(a) Before .018 % (b) After .018 %
- 17** Type of nonrecognition transaction (see instructions) ► IRC SECTION 351
- 18** Indicate whether any transfer reported in Part III is subject to any of the following.
- |  |                              |  |
|--|------------------------------|--|
| <b>a</b> Gain recognition under section 904(f)(3)    | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <b>b</b> Gain recognition under section 904(f)(5)(F) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <b>c</b> Recapture under section 1503(d)             | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <b>d</b> Exchange gain under section 987             | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
- 19** Did this transfer result from a change in entity classification? ☐ Yes ☒ No
- 20 a** Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) ☐ Yes ☒ No  
If "Yes," complete lines 20b and 20c.
- b** Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ► \$ \_\_\_\_\_
- c** Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? ☐ Yes ☐ No
- 21** Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation covered by section 367(e)(1)? See instructions ☐ Yes ☒ No

Form 926 (Rev. 11-2018)

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

OMB No. 1545-0026

► Go to [www.irs.gov/Form926](http://www.irs.gov/Form926) for instructions and the latest information.  
► Attach to your income tax return for the year of the transfer or distribution.

Attachment  
Sequence No. **128**

**Part I U.S. Transferor Information** (see instructions)

Name of transferor

C. K. BLANDIN FOUNDATION

Identifying number (see instructions)

41-6038619

- 1 Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation? ☐ Yes ☒ No
- 2 If the transferor was a corporation, complete questions 2a through 2d.
- a 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? ☐ Yes ☒ 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	Identifying number

- c If the transferor was a member of an affiliated group filing a consolidated return, was it the parent corporation? ☐ 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 under section 367), complete questions 3a through 3d.
- a List the name and EIN of the transferor's partnership.

Name of partnership	EIN of partnership

- b Did the partner pick up its pro rata share of gain on the transfer of partnership assets? ☐ Yes ☐ No
- c Is the partner disposing of its **entire** interest in the partnership? ☐ Yes ☐ No
- d Is the partner disposing of an interest in a limited partnership that is regularly traded on an established securities market? ☐ Yes ☐ No

**Part II Transferee Foreign Corporation Information** (see instructions)

4 Name of transferee (foreign corporation)

H.I.G. BAYSIDE LOAN OPPORTUNITY FEEDER FUND VI, L.P.

5a Identifying number, if any

98-1515760

6 Address (including country)

P.O. BOX 309, GT UGLAND HOUSE, SOUTH CHURCH STREET  
GEORGE TOWN, GRAND CAYMAN KY1-1104 CAYMAN ISLANDS

5b Reference ID number

7 Country code of country of incorporation or organization

CJ

8 Foreign law characterization (see instructions)

PARTNERSHIP

- 9 Is the transferee foreign corporation a controlled foreign corporation? ☐ Yes ☒ No

**Part III Information Regarding Transfer of Property** (see instructions)**Section A - Cash**

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Cash <b>STMT 32</b>					

- 10** Was cash the only property transferred? ☒ **Yes** ☐ **No**  
If "Yes," skip the remainder of Part III and go to Part IV.

**Section B - Other Property (other than intangible property subject to section 367(d))**

Type of property	(a) Date of transfer	(b) Description of property	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Gain recognized on transfer
Stock and securities					
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
Totals					

- 11** Did the transferor transfer stock or securities subject to section 367(a) with respect to which a gain recognition agreement was filed? ☐ **Yes** ☐ **No**
- 12 a** Were any assets of a foreign branch (including a branch that is a foreign disregarded entity) transferred to a foreign corporation? ☐ **Yes** ☐ **No**  
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? ☐ **Yes** ☐ **No**  
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? ☐ **Yes** ☐ **No**  
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 ► \$ \_\_\_\_\_
- 13** Did the transferor transfer property described in section 367(d)(4)? ☐ **Yes** ☐ **No**  
If "No," skip Section C and questions 14a through 15.

**Section C - Intangible Property Subject to Section 367(d)**

Type of property	(a) Date of transfer	(b) Description of property	(c) Useful life	(d) Arm's length price on date of transfer	(e) Cost or other basis	(f) Income inclusion for year of transfer
Property described in sec. 367(d)(4)						
Totals						

- 14 a** Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years? ☐ Yes ☐ No
- b** At the time of the transfer, did any of the transferred intangible property have an indefinite useful life? ☐ Yes ☐ No
- c** Did the transferor choose to apply the 20-year inclusion period provided under Regulations section 1.367(d)-1(c)(3)(ii) for any intangible property? ☐ Yes ☐ No
- d** If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) ► \$ \_\_\_\_\_
- 15** Was any intangible property transferred considered or anticipated to be, at the time of the transfer or at any time thereafter, a platform contribution as defined in Regulations section 1.482-7(c)(1)? ☐ Yes ☐ No

**Supplemental Part III Information Required To Be Reported** (see instructions)**Part IV Additional Information Regarding Transfer of Property** (see instructions)

- 16** Enter the transferor's interest in the transferee foreign corporation before and after the transfer.  
(a) Before .036 % (b) After .036 %
- 17** Type of nonrecognition transaction (see instructions) ► IRC SECTION 351
- 18** Indicate whether any transfer reported in Part III is subject to any of the following.
- |  |                              |  |
|--|------------------------------|--|
| <b>a</b> Gain recognition under section 904(f)(3)    | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <b>b</b> Gain recognition under section 904(f)(5)(F) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <b>c</b> Recapture under section 1503(d)             | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <b>d</b> Exchange gain under section 987             | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
- 19** Did this transfer result from a change in entity classification? ☐ Yes ☒ No
- 20 a** Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) ☐ Yes ☒ No  
If "Yes," complete lines 20b and 20c.
- b** Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b) ► \$ \_\_\_\_\_
- c** Did the domestic corporation not recognize gain or loss on the distribution of property because the property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)? ☐ Yes ☐ No
- 21** Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation covered by section 367(e)(1)? See instructions ☐ Yes ☒ No

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

FORM 926

PART III - INFORMATION REGARDING  
TRANSFER OF PROPERTY

STATEMENT 31

## CASH

(A) DATE OF TRANSFER	(C) FAIR MARKET VALUE ON DATE OF TRANSFER
03/28/2022	13,859.
12/31/2022	41,662.
	<u>55,521.</u>

FORM 926

PART III - INFORMATION REGARDING  
TRANSFER OF PROPERTY

STATEMENT 32

## CASH

(A) DATE OF TRANSFER	(C) FAIR MARKET VALUE ON DATE OF TRANSFER
02/15/2022	18,646.
05/02/2022	17,212.
06/27/2022	19,124.
	54,982.

Electronic Filing PDF Attachment



## Partner's Additional Reporting Year Tax

OMB No. 1545-0123

Go to [www.irs.gov/Form8978](http://www.irs.gov/Form8978) for instructions and the latest information.

Attachment  
Sequence No. **57**

Name of partner(s)

C. K. BLANDIN FOUNDATION

Partner tax ID number

41-6038619

Source of review year adjustments: ☐ BBA Audit ☒ AAR Filing

### Part I Computation of Additional Reporting Year Tax (see instructions)

		(a) Tax Year Ended DEC 31 2018	(b) Tax Year Ended DEC 31 2019	(c) Tax Year Ended DEC 31 2020	(d) Tax Year Ended 20
<b>1a</b> Total income per original return or as previously adjusted . . . . .	<b>1a</b>	285,751	(102,751)	(17,502)	
<b>b</b> Adjustments to income from Schedule A (Form 8978), line 2, columns (a) through (d) . . . . .	<b>1b</b>	(5,181)	(1,279)	761	
<b>2</b> Combine lines 1a and 1b and enter the corrected income. See instructions . . . . .	<b>2</b>	280,570.00	(104,030.00)	(16,741.00)	
<b>3a</b> Total deductions per original return or as previously adjusted . . . . .	<b>3a</b>	212,854	967	7,794	
<b>b</b> Adjustments to deductions from Schedule A (Form 8978), line 4, columns (a) through (d) . . . . .	<b>3b</b>				
<b>4</b> Combine lines 3a and 3b and enter the corrected deductions. See instructions . . . . .	<b>4</b>	212,854.00	967.00	7,794.00	
<b>5</b> Corrected taxable income. Subtract line 4 from line 2 . . . . .	<b>5</b>	67,716	(104,997)	(24,535)	
<b>6</b> Income tax on line 5 (see instructions) . . . . .	<b>6</b>	14,220	0	0	
<b>7</b> Alternative minimum tax on line 5 (see instructions) . . . . .	<b>7</b>				
<b>8</b> Total corrected income tax. Add lines 6 and 7 . . . . .	<b>8</b>	14,220.00	0.00	0.00	
<b>9a</b> Total credits per original return or as previously adjusted . . . . .	<b>9a</b>				
<b>b</b> Adjustments to credits from Schedule A (Form 8978), line 6, columns (a) through (d) . . . . .	<b>9b</b>				
<b>10</b> Combine lines 9a and 9b and enter the corrected credits. See instructions . . . . .	<b>10</b>	0.00	0.00	0.00	
<b>11</b> Total corrected income tax liability. Subtract line 10 from line 8 . . . . .	<b>11</b>	14,220.00	0.00	0.00	
<b>12</b> Total income tax shown on original return or as previously adjusted . . . . .	<b>12</b>	15,308	0	0	
<b>13</b> Increase/Decrease to tax. Subtract line 12 from line 11, columns (a) through (d) . . . . .	<b>13</b>	(1,088.00)	0.00	0.00	
<b>14</b> Total increase/decrease to reporting year tax. Add line 13, columns (a) through (d). Enter here and on the appropriate line on your tax return . . . . .	<b>14</b>				(1,088.00)

### Part II Penalties (see instructions)

<b>15</b> Penalties . . . . .	<b>15</b>				
<b>16</b> Total penalties. Add line 15, columns (a) through (d) . . . . .	<b>16</b>				0.00

### Part III Interest (see instructions)

<b>17</b> Interest . . . . .	<b>17</b>				
<b>18</b> Total interest. Add line 17, columns (a) through (d) . . . . .	<b>18</b>				0.00

For Paperwork Reduction Act Notice, see instructions.

Form **8978** (1-2023)

**SCHEDULE A  
(Form 8978)**(Rev. January 2023)  
Department of the Treasury  
Internal Revenue Service**Partner's Additional Reporting Year Tax  
(Schedule of Adjustments)**Attach to Form 8978.  
Go to [www.irs.gov/Form8978](http://www.irs.gov/Form8978) for the latest information.

OMB No. 1545-0123

Name of partner(s)

C. K. BLANDIN FOUNDATION

Partner tax ID number

41-6038619

Source of review year adjustments: ☐ BBA Audit ☒ AAR Filing

Adjustments (see instructions)	Tracking Number	(a) Tax Year Ended DEC 31/2018	(b) Tax Year Ended DEC 31/2019	(c) Tax Year Ended DEC 31/2020	(d) Tax Year Ended /20
<b>1</b> Income:					
<b>a</b> K-1, LINE 20V, 1		(1,308)	(365)	10,068	
<b>b</b> K-1, LINE 20V, 3C		1	(3)		
<b>c</b> K-1, LINE 20V, 7			1	(303)	
<b>d</b> K-1, LINE 20V, 10			(24)	253	
<b>e</b> K-1, LINE 20V, 11				34	
<b>f</b> K-1, LINE 20T		321	(160)	(3,982)	
<b>g</b> TOTAL FROM PG 2		(4,195)	(728)	(5,309)	
<b>2</b> Total adjustments to income (add lines 1a through 1g in each column (a) through (d)) . . . . .		(5,181.00)	(1,279.00)	761.00	
<b>3</b> Deductions:					
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b>					
<b>g</b>					
<b>4</b> Total adjustments to deductions (add lines 3a through 3g in each column (a) through (d)) . . . . .					
<b>5</b> Credits:					
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b>					
<b>g</b>					
<b>6</b> Total adjustments to credits (add lines 5a through 5g in each column (a) through (d)) . . . . .					

For Paperwork Reduction Act Notice, see the Instructions for Form 1065.

Schedule A (Form 8978) (1-2023)

**SCHEDULE A  
(Form 8978)**(Rev. January 2023)  
Department of the Treasury  
Internal Revenue Service**Partner's Additional Reporting Year Tax  
(Schedule of Adjustments)**Attach to Form 8978.  
Go to [www.irs.gov/Form8978](http://www.irs.gov/Form8978) for the latest information.

OMB No. 1545-0123

Name of partner(s)

C. K. BLANDIN FOUNDATION

Partner tax ID number

41-6038619

Source of review year adjustments: ☐ BBA Audit ☒ AAR Filing

Adjustments (see instructions)	Tracking Number	(a) Tax Year Ended DEC 31/2018	(b) Tax Year Ended DEC 31/2019	(c) Tax Year Ended DEC 31/2020	(d) Tax Year Ended /20
<b>1</b> Income:					
<b>a</b> K-1, LINE 20V, 13I			(35)	(2)	
<b>b</b> K-1, LINE 20V, 13J		(4,195)	(693)	(5,307)	
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b>					
<b>g</b>					
<b>2</b> Total adjustments to income (add lines 1a through 1g in each column (a) through (d)) . . . . .		(4,195.00)	(728.00)	(5,309.00)	
<b>3</b> Deductions:					
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b>					
<b>g</b>					
<b>4</b> Total adjustments to deductions (add lines 3a through 3g in each column (a) through (d)) . . . . .					
<b>5</b> Credits:					
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b>					
<b>g</b>					
<b>6</b> Total adjustments to credits (add lines 5a through 5g in each column (a) through (d)) . . . . .					

For Paperwork Reduction Act Notice, see the Instructions for Form 1065.

Schedule A (Form 8978) (1-2023)

**C.K. Blandin Foundation**  
**41-6038619**  
**Form 8978, line 6**

	<u>2018</u>	<u>2019</u>	<u>2020</u>
Adjusted Taxable Income - from Form 8978, Line 5	67,716.00	(104,997.00)	(24,535.00)
Taxable as Corporation - 21%	<u>0.21</u>	<u>0.21</u>	<u>0.21</u>
Adjusted Tax Computation - to 8978 Line 6	<u>14,220.00</u>	<u>-</u>	<u>-</u>

**Application for Automatic Extension of Time To File an  
Exempt Organization Return**

OMB No. 1545-0047

► **File a separate application for each return.**  
► **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

**Automatic 6-Month Extension of Time.** Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions.  <b>C. K. BLANDIN FOUNDATION</b>	Taxpayer identification number (TIN)  <b>41-6038619</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>100 N POKEGAMA AVE</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>GRAND RAPIDS, MN 55744</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 

0	7
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Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

**DANIEL LEMM**

- The books are in the care of ► **100 N POKEGAMA AVENUE - GRAND RAPIDS, MN 55744**

Telephone No. ► **218-326-0523**

Fax No. ► \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box ☐ ► ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and TINs of all members the extension is for.

- 1** I request an automatic 6-month extension of time until **NOVEMBER 15, 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► ☒ calendar year **2022** or► ☐ tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

- 2** If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return  
☐ Change in accounting period

<b>3a</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	<b>0.</b>
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	<b>42,999.</b>
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	<b>0.</b>

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.