

Form 990-T

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

OMB No 1545-0687

2015

For calendar year 2015 or other tax year beginning 07/01, 2015, and ending 06/30, 2016

Information about Form 990-T and its instructions is available at www.irs.gov/form990t. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

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

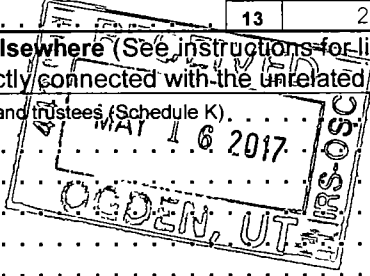
Department of the Treasury Internal Revenue Service

Form header section including: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets at end of year; D Employer identification number; E Unrelated business activity codes; F Group exemption number; G Check organization type (501(c) corporation); H Describe the organization's primary unrelated business activity (ATTACHMENT 1); I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?; J The books are in care of ROBERT CALAMO Telephone number 718-741-8211.

Part I Unrelated Trade or Business Income table header and first row (1a Gross receipts or sales 1,949,706).

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows 1a-13 detailing income and expenses, including total of 2,766,929.

Part II Deductions Not Taken Elsewhere table header and rows 14-34 detailing various deductions and resulting taxable income of 1,533,580.



SCANNED MAY 31 2017

Handwritten number: 916-139

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation Controlled group members (sections 1561 and 1563) check here <input checked="" type="checkbox"/> See instructions and		
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)		
(1) \$ 50,000. (2) \$ 25,000. (3) \$ 1,458,580.		
b Enter organization's share of (1) Additional 5% tax (not more than \$11,750),	\$ 11,750.	
(2) Additional 3% tax (not more than \$100,000)	\$	
c Income tax on the amount on line 34, ATCH 5 ▶		35c 521,417.
36 Trusts Taxable at Trust Rates. See instructions for tax computation Income tax on the amount on line 34 from <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041), ▶		36
37 Proxy tax. See instructions ▶		37
38 Alternative minimum tax ▶		38
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies ▶		39 521,417.

Part IV Tax and Payments

40 a Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116),	40a		
b Other credits (see instructions),	40b		
c General business credit Attach Form 3800 (see instructions)	40c		
d Credit for prior year minimum tax (attach Form 8801 or 8827),	40d		
e Total credits. Add lines 40a through 40d	40e		
41 Subtract line 40e from line 39	41		521,417.
42 Other taxes Check if from <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	42		
43 Total tax. Add lines 41 and 42	43		521,417.
44 a Payments A 2014 overpayment credited to 2015	44a		
b 2015 estimated tax payments	44b		
c Tax deposited with Form 8868,	44c	200,000.	
d Foreign organizations Tax paid or withheld at source (see instructions)	44d		
e Backup withholding (see instructions)	44e		
f Credit for small employer health insurance premiums (Attach Form 8941)	44f		
g Other credits and payments <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total ▶	44g		
45 Total payments. Add lines 44a through 44g	45		200,000.
46 Estimated tax penalty (see instructions) Check if Form 2220 is attached, <input checked="" type="checkbox"/>	46		15,116.
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed ▶	47		336,533.
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid ▶	48		
49 Enter the amount of line 48 you want Credited to 2016 estimated tax ▶ Refunded ▶	49		

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

1 At any time during the 2015 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 ▶SEE ATTACHMENT# 7	Yes	No
	X	
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 ▶ \$ 30,542.		

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2	419,134.	7 Cost of goods sold. Subtract line 6 from line 5 Enter here and in Part I, line 2,	7	2,034,712.
3 Cost of labor	3	278,213.	8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a Additional section 263A costs (attach schedule)	4a				X
b Other costs (attach schedule)	4b *	1,337,365.			
5 Total. Add lines 1 through 4b	5	2,034,712.			

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

Sign Here ▶

Devin L Duncan 5/5/17 VP & COMPTROLLER
Signature of officer Date Title

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

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	DEVIN L DUNCAN	<i>Devin L Duncan</i>	5/5/17		P01249521
	Firm's name ▶ KPMG			Firm's EIN ▶ 13-5565207	
	Firm's address ▶ 345 PARK AVENUE			Phone no 212-758-9700	

** ATCH 6 NEW YORK, NY 10154-0102

Form 990-T (2015)

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

(see instructions)

1. Description of property

(1) N/A

(2)

(3)

(4)

2. Rent received or accrued

Table with 3 columns: (a) From personal property, (b) From real and personal property, and 3(a) Deductions directly connected with the income. Includes rows (1) through (4) and a Total row.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A).

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

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

Table with 5 columns: 1 Description of debt-financed property, 2 Gross income from or allocable to debt-financed property, 3 Deductions directly connected with or allocable to debt-financed property, 4 Amount of average acquisition debt, 5 Average adjusted basis, 6 Column 4 divided by column 5, 7 Gross income reportable, 8 Allocable deductions. Includes rows (1) through (4) and a Totals row.

Totals

Total dividends-received deductions included in column 8

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

Table for Exempt Controlled Organizations with 6 columns: 1 Name of controlled organization, 2 Employer identification number, 3 Net unrelated income, 4 Total of specified payments made, 5 Part of column 4 that is included in the controlling organization's gross income, 6 Deductions directly connected with income in column 5. Includes rows (1) through (4).

Nonexempt Controlled Organizations

Table for Nonexempt Controlled Organizations with 5 columns: 7 Taxable Income, 8 Net unrelated income, 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. Includes rows (1) through (4).

Totals. Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).

Totals

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
Totals ▶		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)

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

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals ▶		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 26

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)) . . . ▶						

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I ▶						
Totals, Part II (lines 1-5) ▶		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)			Enter here and on page 1, Part II, line 27

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

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

ATTACHMENT 2

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS

MARATHON REAL ESTATE OPPORTUNITY FUND LLC	335,463.
MAKENA CAPITAL SPLITTER X, L.P.	173,138.
INCOME (LOSS) FROM PARTNERSHIPS	<u>508,601.</u>

ATTACHMENT 3

FORM 990T - PART II - LINE 18 - INTEREST

MAKENA CAPITAL SPLITTER X, L.P.

22,526.

PART II - LINE 18 - INTEREST

22,526.

FORM 990T - PART II - LINE 19 - TAXES AND LICENSES

Arizona	50
California	2,779
Colorado	118
Connecticut	43
DC	250
Georgia	404
Illinois	160
Iowa	83
Massachusetts	5,123
Maine	35
Michigan	73
Minnesota	724
North Carolina	1,437
North Dakota	35
New Mexico	75
New York	80,000
Oregon	7
South Carolina	155
	<u>91,551</u>

WILDLIFE CONSERVATION SOCIETY

13-1740011

FORM 990-T, PART II, LINE 20 - CHARITABLE CONTRIBUTION

Charitable contributions carried forward to 06/30/2017

YEAR GENERATED	CONTRIBUTION AMOUNT PAID	YEAR UTILIZED	UTILIZED AMOUNT 10% LIMITATION ON TAXABLE INCOME	CARRYFORWARD AMOUNT	5 YEAR CARRYFORWARD
6/30/2016	6,108,366		170,398	5,937,968	3/30/2020
TOTAL CARRYFORWARD TO 06/30/2017				5,937,968	

ATTACHMENT 4

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

MAKENA CAPITAL SPLITTER X, L.P.
TAX PREP FEE

538,302.
24,106.

PART II - LINE 28 - OTHER DEDUCTIONS

562,408.

Form 990T Part V Line 1 – Financial accounts in Foreign Countries

AFGHANISTAN, ARGENTINA, BELIZE, BELGIUM, BOLIVIA, CAMBODIA, CONGO (REPUBLIC OF CONGO), CHINA, CHILE, CAMEROON, COLOMBIA, DEMOCRATIC REPUBLIC OF CONGO, ECUADOR, FIJI, GABON, GUATEMALA, INDONESIA, KENYA, LAOS, MADAGASCAR, MOZAMBIQUE, MONGOLIA, MYANMAR, NIGERIA, NICARAGUA, PARAGUAY, PERU, PAKISTAN, PAPUA NEW GUINEA, RUSSIA, RWANDA, SUDAN, THAILAND, TANZANIA, UGANDA, UNITED KINGDOM, VIETNAM.

ATTACHMENT 6

FORM 990T - SCHEDULE A - LINE 4B - OTHER COSTS

OTPS	193,532.
BUSINESS SERVICES OVERHEAD	44,461.
CORPORATE OVERHEAD	192,680.
CATERING EXPENSE	906,692.
TOTAL OTHER COSTS	<u>1,337,365.</u>

**SCHEDULE D
(Form 1120)**

Capital Gains and Losses

OMB No 1545-0123

Department of the Treasury
Internal Revenue Service

▶ 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.
▶ Information about Schedule D (Form 1120) and its separate instructions is at www.irs.gov/form1120

2015

Name **WILDLIFE CONSERVATION SOCIETY** Employer identification number **13-1740011**

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)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked	13,556.			13,556.
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37				4
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824				5
6 Unused capital loss carryover (attach computation)				6 ()
7 Net short-term capital gain or (loss) Combine lines 1a through 6 in column h				7 13,556.

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)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	1,999,783.			1,999,783.
11 Enter gain from Form 4797, line 7 or 9				11 329,995.
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37				12
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824				13
14 Capital gain distributions (see instructions)				14
15 Net long-term capital gain or (loss) Combine lines 8a through 14 in column h				15 2,329,778.

Part III Summary of Parts I and II

16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)				16 13,556.
17 Net capital gain Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)				17 2,329,778.
18 Add lines 16 and 17 Enter here and on Form 1120, page 1, line 8, or the proper line on other returns				18 2,343,334.

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

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) (2015)

Form **8949**

Sales and Other Dispositions of Capital Assets

OMB No 1545-0074

Department of the Treasury
Internal Revenue Service

► Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

2015

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment Sequence No **12A**

Name(s) shown on return

WILDLIFE CONSERVATION SOCIETY

Social security number or taxpayer identification number

13-1740011

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 short term. 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 was **not** reported to the IRS
- (C) Short-term transactions **not** reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column (e)</i> in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	MAKENA CAPITAL SPLITTER, X, L P	VAR	VAR	13,556.				13,556
2 Totals.	Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ►			13,556				13,556

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.

For Paperwork Reduction Act Notice, see your tax return instructions. Form **8949** (2015)

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side WILDLIFE CONSERVATION SOCIETY	Social security number or taxpayer identification number 13-1740011
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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 long term. 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 was **not** reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr)	(c) Date sold or disposed (Mo , day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	MAKENA CAPITAL SPLITTER, X, L P	VAR	VAR	399,290				399,290
	MARATHON REAL ESTATE OPPTY	VAR	VAR	1,600,493.				1,600,493
2 Totals	Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked)▶			1,999,783.				1,999,783

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 **4626**

Alternative Minimum Tax - Corporations

OMB No 1545-0123

Department of the Treasury
Internal Revenue Service

▶ Attach to the corporation's tax return.

2015

▶ Information about Form 4626 and its separate instructions is at www.irs.gov/form4626.

Name WILDLIFE CONSERVATION SOCIETY	Employer identification number 13-1740011
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Note: See the instructions to find out if the corporation is a small corporation exempt from the alternative minimum tax (AMT) under section 55(e)

1 Taxable income or (loss) before net operating loss deduction		1	1,920,046
2 Adjustments and preferences:			
a Depreciation of post-1986 property		2a	18,579
b Amortization of certified pollution control facilities		2b	
c Amortization of mining exploration and development costs		2c	
d Amortization of circulation expenditures (personal holding companies only)		2d	
e Adjusted gain or loss		2e	-15,596
f Long-term contracts		2f	
g Merchant marine capital construction funds		2g	
h Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)		2h	
i Tax shelter farm activities (personal service corporations only)		2i	
j Passive activities (closely held corporations and personal service corporations only)		2j	
k Loss limitations		2k	
l Depletion		2l	
m Tax-exempt interest income from specified private activity bonds		2m	
n Intangible drilling costs		2n	
o Other adjustments and preferences OTHER FLOW-THROUGH PREFERENCE ITEMS		2o	433,700
3 Pre-adjustment alternative minimum taxable income (AMTI) Combine lines 1 through 2o		3	2,356,729
4 Adjusted current earnings (ACE) adjustment:			
a ACE from line 10 of the ACE worksheet in the instructions	4a		2,356,729
b Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a negative amount (see instructions)	4b		
c Multiply line 4b by 75% (75). Enter the result as a positive amount	4c		
d Enter the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments (see instructions) Note: You must enter an amount on line 4d (even if line 4b is positive)	4d		
e ACE adjustment		4e	
• If line 4b is zero or more, enter the amount from line 4c			
• If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount }			
5 Combine lines 3 and 4e. If zero or less, stop here, the corporation does not owe any AMT		5	2,356,729
6 Alternative tax net operating loss deduction (see instructions)		6	
7 Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a residual interest in a REMIC, see instructions		7	2,356,729
8 Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c)			
a Subtract \$150,000 from line 7 (if completing this line for a member of a controlled group, see instructions) If zero or less, enter -0-	8a		
b Multiply line 8a by 25% (25).	8b		
c Exemption Subtract line 8b from \$40,000 (if completing this line for a member of a controlled group, see instructions) If zero or less, enter -0-		8c	
9 Subtract line 8c from line 7. If zero or less, enter -0-		9	2,356,729
10 Multiply line 9 by 20% (20)		10	471,346
11 Alternative minimum tax foreign tax credit (AMTFTC) (see instructions)		11	
12 Tentative minimum tax Subtract line 11 from line 10		12	471,346
13 Regular tax liability before applying all credits except the foreign tax credit		13	521,417
14 Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0-. Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return		14	0

For Paperwork Reduction Act Notice, see separate instructions.

Form **4626** (2015)