

Form **990-T****Exempt Organization Business Income Tax Return**
(and proxy tax under section 6033(e))

OMB No. 1545-0687

2017For calendar year 2017 or other tax year beginning **JUN 1, 2017**, and ending **MAY 31, 2018**▶ Go to **www.irs.gov/Form990T** for instructions and the latest information.

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

Open to Public Inspection for
501(c)(3) Organizations OnlyDepartment of the Treasury
Internal Revenue Service

A <input type="checkbox"/> Check box if address changed	Print or Type	Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.)	D Employer identification number (Employees' trust, see instructions.)
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)		ABILENE CHRISTIAN UNIVERSITY	75-0851900
Number, street, and room or suite no. If a P.O. box, see instructions.		E Unrelated business activity codes (See instructions.)	
City or town, state or province, country, and ZIP or foreign postal code			
C Book value of all assets at end of year 732,351,720.		ABILENE, TX 79699-9120	451211 812900
		F Group exemption number (See instructions.) ▶	
		G 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	

H Describe the organization's primary unrelated business activity. ▶ **RETAIL SALES, RENTALS, INVESTMENT INCOME****I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ ☐ Yes ☒ No

If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ **KEVIN CAMPBELL** Telephone number ▶ **325-674-6552**

Part I Unrelated Trade or Business Income				(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales	90,674.					
b Less returns and allowances		c Balance ▶	1c	90,674.		
2 Cost of goods sold (Schedule A, line 7)			2	27,183.		
3 Gross profit. Subtract line 2 from line 1c			3	63,491.		63,491.
4a Capital gain net income (attach Schedule D)			4a			
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			4b			
c Capital loss deduction for trusts			4c			
5 Income (loss) from partnerships and S corporations (attach statement)			5	-53,055.		-53,055.
6 Rent income (Schedule C)			6	130,618.	58,973.	71,645.
7 Unrelated debt-financed income (Schedule E)			7			
8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)...			8			
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			9			
10 Exploited exempt activity income (Schedule I)			10			
11 Advertising income (Schedule J)			11			
12 Other income (See instructions; attach schedule)			12			
13 Total. Combine lines 3 through 12			13	141,054.	58,973.	82,081.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
(Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	
15 Salaries and wages	15	14,414.
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule)	18	
19 Taxes and licenses	19	
20 Charitable contributions (See instructions for limitation rules)	20	
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	
23 Depletion	23	2,770.
24 Contributions to deferred compensation plans	24	
25 Employee benefit programs	25	3.
26 Excess exempt expenses (Schedule I)	26	
27 Excess readership costs (Schedule J)	27	
28 Other deductions (attach schedule) SEE STATEMENT 2	28	53,247.
29 Total deductions. Add lines 14 through 28	29	70,434.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	11,647.
31 Net operating loss deduction (limited to the amount on line 30) SEE STATEMENT 3	31	11,647.
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	0.
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	33	1,000.
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	0.

Part III Tax Computation**35 Organizations Taxable as Corporations.** See instructions for tax computation.Controlled group members (sections 1561 and 1563) check here ☐ See instructions and:**a** Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):

(1) \$ (2) \$ (3) \$

b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$

(2) Additional 3% tax (not more than \$100,000) \$

c Income tax on the amount on line 34 **35c** 0.**36 Trusts Taxable at Trust Rates.** See instructions for tax computation. Income tax on the amount on line 34 from:☐ Tax rate schedule or ☐ Schedule D (Form 1041) **36****37 Proxy tax.** See instructions **37****38 Alternative minimum tax** **38****39 Tax on Non-Compliant Facility Income.** See instructions **39****40 Total.** Add lines 37, 38 and 39 to line 35c or 36, whichever applies **40** 0.**Part IV Tax and Payments****41a** Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) **41a****b** Other credits (see instructions) **41b****c** General business credit. Attach Form 3800 **41c****d** Credit for prior year minimum tax (attach Form 8801 or 8827) **41d****e** Total credits. Add lines 41a through 41d **41e****42** Subtract line 41e from line 40 **42** 0.**43** Other taxes. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule) **43****44** Total tax. Add lines 42 and 43 **44** 0.**45a** Payments: A 2016 overpayment credited to 2017 **45a****b** 2017 estimated tax payments **45b****c** Tax deposited with Form 8868 **45c****d** Foreign organizations: Tax paid or withheld at source (see instructions) **45d****e** Backup withholding (see instructions) **45e****f** Credit for small employer health insurance premiums (Attach Form 8941) **45f****g** Other credits and payments: ☐ Form 2439 **45g**☐ Form 4136 ☐ Other Total **45g****46** Total payments. Add lines 45a through 45g **46****47** Estimated tax penalty (see instructions). Check if Form 2220 is attached ☐ **47****48** Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed **48** 0.**49** Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid **49** 0.**50** Enter the amount of line 49 you want: Credited to 2018 estimated tax ☐ Refunded ☐ **50****Part V Statements Regarding Certain Activities and Other Information** (see instructions)**51** At any time during the 2017 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 **UNITED KINGDOM** Yes No X**52** During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file. Yes No X**53** Enter the amount of tax-exempt interest received or accrued during the tax year \$**Sign Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer Date Title **SENIOR VP**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 ☐ if self-employed PTIN
JOE MELSON CPA JOE MELSON CPA 02/10/19 P00158111
Firm's name **EIDE BAILLY LLP** Firm's EIN **45-0250958**
Firm's address **400 PINE ST, STE 600 ABILENE, TX 79601-5190** Phone no. **325-672-4000**

Form 990-T (2017)

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

1	Inventory at beginning of year	1	0.	6	Inventory at end of year	6	0.
2	Purchases	2	27,183.	7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	27,183.
3	Cost of labor	3		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					
b	Other costs (attach schedule)	4b					
5	Total. Add lines 1 through 4b	5	27,183.				X

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

(see instructions)

1. Description of property

- (1) TOWER RENTALS
- (2) HWC CONFERENCE ROOMS
- (3) CHAPEL ON THE HILL
- (4)

2. Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	SEE STATEMENT 5
(1)	69,774.	
(2)	54,619.	55,628.
(3)	6,225.	3,345.
(4)		
Total	0.	Total 130,618.
(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)
130,618.		58,973.

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

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
			0.	0.
Total dividends-received deductions included in column 8				0.

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

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

Nonexempt Controlled Organizations

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

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

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals		Enter here and on page 1, Part I, line 9, column (A). 0.		Enter here and on page 1, Part I, line 9, column (B). 0.

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). 0.	Enter here and on page 1, Part I, line 10, col. (B). 0.			Enter here and on page 1, Part II, line 26. 0.

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))		0.	0.			0.

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

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col. (A). 0.	Enter here and on page 1, Part I, line 11, col. (B). 0.				Enter here and on page 1, Part II, line 27. 0.

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			0.

Form **990-T** (2017)

FOOTNOTES		STATEMENT	1
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SECTION 1.263(A)-1(F) DE MINIMIS SAFE HARBOR ELECTION

THE ORGANIZATION IS MAKING THE DE MINIMIS SAFE HARBOR
ELECTION UNDER REG. SEC. 1.263(A)-1(F).

FORM 990-T	OTHER DEDUCTIONS	STATEMENT	2
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DESCRIPTION	AMOUNT
OIL & GAS WORKING INTEREST EXPENSES	3,277.
OPERATING EXPENSES - CAMPUS STORE	385.
OPERATING EXPENSES - STUDENT REC AND WELLNESS CENTER	49,585.
TOTAL TO FORM 990-T, PAGE 1, LINE 28	53,247.

FORM 990-T	NET OPERATING LOSS DEDUCTION	STATEMENT	3
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TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
05/31/11	174,228.	40,664.	133,564.	133,564.
05/31/14	73,974.	0.	73,974.	73,974.
05/31/16	49,326.	0.	49,326.	49,326.
05/31/17	56,125.	0.	56,125.	56,125.
NOL CARRYOVER AVAILABLE THIS YEAR			312,989.	312,989.

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT	4
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PARTNERSHIP NAME	GROSS INCOME	DEDUCTIONS	NET INCOME OR (LOSS)
COMMONFUND CAPITAL EQUITY PARTNERS VI, LP	-678.	0.	-678.
RESERVOIR CAPITAL INVESTMENT PARTNERS, LP	6,596.	0.	6,596.
PASSIVE K-1S - SEE FORM 8810	95,497.	2,297,520.	-2,202,023.
DISALLOWED PASSIVE LOSS - SEE FORM 8810	0.	-2,143,050.	2,143,050.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	101,415.	154,470.	-53,055.

FORM 990-T		DEDUCTIONS CONNECTED WITH RENTAL INCOME		STATEMENT	5
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL	
OPERATING EXPENSES			55,628.		
	- SUBTOTAL -	6		55,628.	
PERSONNEL EXPENSES			3,345.		
	- SUBTOTAL -	7		3,345.	
TOTAL TO FORM 990-T, SCHEDULE C, COLUMN 3				58,973.	

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 for instructions and the latest information.**
Information furnished for the foreign partnership's tax year
beginning **JAN 1**, 2017, and ending **DEC 31**, 2017

OMB No. 1545-1668

2017Attachment
Sequence No. **118**

Name of person filing this return

ABILENE CHRISTIAN UNIVERSITY

Filer's address (if you are not filing this form with your tax return)

Filer's identifying number

75-0851900**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 **JUN 1**, 2017, and ending **MAY 31**, 2018**C** Filer's share of liabilities: Nonrecourse \$ Qualified nonrecourse financing \$ Other \$**D** If filer is a member of a consolidated group but not the parent, enter the following information about the parent:

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) Identifying number	(4) Check applicable box(es)		
			Category 1	Category 2	Constructive owner

G1 Name and address of foreign partnership**ENDCAP FLATROCK MIDSTREAM FUND II-C, LP****1100 LOUISIANA, SUITE 7900
HOUSTON, TX 77002****2(a)** EIN (if any)**98-1049602****2(b)** Reference ID number**3** Country under whose laws organized**CAYMAN ISLANDS**

4 Date of organization	5 Principal place of business	6 Principal business activity code number 523900	7 Principal business activity INVESTMENT	8a Functional currency US DOLLAR	8b Exchange rate (see instr.)
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H Provide the following information for the foreign partnership's tax year:

1 Name, address, and identifying number of agent (if any) in the United States	2 Check if the foreign partnership must file: <input type="checkbox"/> Form 1042 <input type="checkbox"/> Form 8804 <input checked="" type="checkbox"/> Form 1065 or 1065-B Service Center where Form 1065 or 1065-B is filed: E-FILE
3 Name and address of foreign partnership's agent in country of organization, if any	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** Were any special allocations made by the foreign partnership? ☐ Yes ☒ No
- 6** Enter the no. of Forms 8858, Info Return of U.S. Persons With Respect To Foreign Disregarded Entities, attached to this return ☐
- 7** How is this partnership classified under the law of the country in which it is organized? **LIMITED PARTNERSHIP**
- 8a** Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that is a separate unit under Reg. 1.1503(d)-1(b)(4) or part of a combined separate unit under Reg. 1.1503(d)-1(b)(4)(ii)? If "No," skip question 8b. ☐ Yes ☒ No
- b** If "Yes," does the separate unit or combined separate unit have a dual consolidated loss as defined in Reg. 1.1503(d)-1(b)(5)(ii)? ☐ Yes ☐ No
- 9** Does this partnership meet **both** of the following requirements?
• The partnership's total receipts for the tax year were less than \$250,000 and
• The value of the partnership's total assets at the end of the tax year was less than \$1 million. ☐ Yes ☐ No
If "Yes," **do not** complete Schedules L, M-1, and M-2.

Sign Here Only If You Are Filing This Form Separately and Not With Your Tax Return.	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
	Paid Preparer Use Only	Firm's name ► EIDE BAILLY LLP	Firm's EIN ► 45-0250958	Phone no. 325-672-4000

Firm's address ► 400 PINE ST, STE 600 ABILENE, TX 79601-5190

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 identifying 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	Identifying number (if any)	Check if foreign person	Check if direct partner

Schedule A-1

Certain Partners of Foreign Partnership (see instructions)

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

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

Schedule A-2

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

STATEMENT 6**Schedule B**

Income Statement - Trade or Business Income

Caution: Include **only** trade or business income and expenses on lines 1a through 22 below. See the instructions for more information.

Income	1 a Gross receipts or sales	1a		
	b Less returns and allowances	1b		1c
	2 Cost of goods sold			2
	3 Gross profit. Subtract line 2 from line 1c			3
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)			4
	5 Net farm profit (loss) (attach Schedule F (Form 1040))			5
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)			6
7 Other income (loss) (attach statement)			7	
8 Total income (loss). Combine lines 3 through 7			8	
Deductions (see instructions for limitations)	9 Salaries and wages (other than to partners) (less employment credits)			9
	10 Guaranteed payments to partners			10
	11 Repairs and maintenance			11
	12 Bad debts			12
	13 Rent			13
	14 Taxes and licenses			14
	15 Interest			15
	16 a Depreciation (if required, attach Form 4562)	16a		
	b Less depreciation reported elsewhere on return	16b		16c
	17 Depletion (Do not deduct oil and gas depletion.)			17
	18 Retirement plans, etc.			18
	19 Employee benefit programs			19
	20 Other deductions (attach statement)			20
	21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20			21
22 Ordinary business income (loss) from trade or business activities. Subtract line 21 from line 8			22	

**SCHEDULE O
(Form 8865)**Department of the Treasury
Internal Revenue Service**Transfer of Property to a Foreign Partnership
(under section 6038B)**▶ Attach to Form 8865. See Instructions for Form 8865.
▶ Go to www.irs.gov/Form8865 for instructions and the latest information.

OMB No. 1545-1668

2017Name of transferor **ABILENE CHRISTIAN UNIVERSITY** Filer's identifying number **75-0851900**Name of foreign partnership **ENDCAP FLATROCK MIDSTREAM FUND II** EIN (if any) **98-1049602** Reference ID number (see instr)

- 1 a Is the partnership a section 721(c) partnership (as defined in Temporary Regulations section 1.721(c)-1T(b)(14)? See instructions ☐ Yes ☒ No
- b If "Yes," was the gain deferral method applied to avoid the recognition of gain upon the contribution of property? ☐ Yes ☐ No
- 2 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

Part I Transfers Reportable Under Section 6038B

Type of property	(a) Date of transfer	(b) Number of items transferred	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Section 704(c) allocation method	(f) Gain recognized on transfer
Cash	05/31/18		170,688.			
Stock, notes receivable and payable, and other securities						
Inventory						
Tangible property used in trade or business						
Intangible property described in section 197(f)(9)						
Intangible property, other than intangible property described in section 197(f)(9)						
Other property						
Totals			170,688.			

3 Enter the transferor's percentage interest in the partnership: (a) Before the transfer **1.5385** % (b) After the transfer **1.5385** %**Supplemental Information Required To Be Reported** (see instructions):**Part II Dispositions Reportable Under Section 6038B**

(a) Type of property	(b) Date of original transfer	(c) Date of disposition	(d) Manner of disposition	(e) Gain recognized by partnership	(f) Depreciation recapture recognized by partnership	(g) Gain allocated to partner	(h) Depreciation recapture allocated to partner

Part III Is any transfer reported on this schedule subject to gain recognition under section 904(f)(3) or section 904(f)(5)(F)? ☐ Yes ☒ No

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 8865.

Schedule O (Form 8865) 2017

Form **8865****Return of U.S. Persons With Respect to
Certain Foreign Partnerships**

OMB No. 1545-1668

Department of the Treasury
Internal Revenue Service

► **Attach to your tax return.**
► **Go to www.irs.gov/Form8865 for instructions and the latest information.**
Information furnished for the foreign partnership's tax year
beginning **JAN 1**, 2017, and ending **DEC 31**, 2017

2017Attachment
Sequence No. **118**

Name of person filing this return

Filer's identifying number
75-0851900**ABILENE CHRISTIAN UNIVERSITY**

Filer's address (if you are not 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 **JUN 1**, 2017, and ending **MAY 31**, 2018**C** Filer's share of liabilities: Nonrecourse \$ Qualified nonrecourse financing \$ Other \$**D** If filer is a member of a consolidated group but not the parent, enter the following information about the parent:

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) Identifying number	(4) Check applicable box(es)		
			Category 1	Category 2	Constructive owner

G1 Name and address of foreign partnership**AXIOM ASIA IV, LP****WILLOW HOUSE, CRICKET SQ, PO BOX 709
GRAND CAYMAN, CAYMAN ISLANDS KY1-1107****2(a)** EIN (if any)**98-1276355****2(b)** Reference ID number**3** Country under whose laws organized**CAYMAN ISLANDS**

4 Date of organization 02/02/2016	5 Principal place of business CAYMAN ISLANDS	6 Principal business activity code number 523900	7 Principal business activity INVESTMENT	8a Functional currency US DOLLAR	8b Exchange rate (see instr.)
--	---	---	---	---	--------------------------------------

H Provide the following information for the foreign partnership's tax year:**1** Name, address, and identifying number of agent (if any) in the United States**2** Check if the foreign partnership must file:☐ Form 1042 ☐ Form 8804 ☒ Form 1065 or 1065-B

Service Center where Form 1065 or 1065-B is filed:

OGDEN, UT**3** Name and address of foreign partnership's agent in country of organization, if any**MISSION CAPITAL GP IV LP
ZEPHYR HOUSE, 122 MARY ST
GRAND CAYMAN, CAYMAN ISLANDS KY10110****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**STATE STREET FUND LIMITED
68/F, 8 FINANCE ST
CENTRAL HONG KONG****5** Were any special allocations made by the foreign partnership? ☐ Yes ☒ No**6** Enter the no. of Forms 8858, Info Return of U.S. Persons With Respect To Foreign Disregarded Entities, attached to this return ☐**7** How is this partnership classified under the law of the country in which it is organized? **EXEMPT LTD PART.****8a** Does the filer have an interest in the foreign partnership, or an interest indirectly through the foreign partnership, that is a separate unit under Reg. 1.1503(d)-1(b)(4) or part of a combined separate unit under Reg. 1.1503(d)-1(b)(4)(ii)? If "No," skip question 8b. ☐ Yes ☒ No**b** If "Yes," does the separate unit or combined separate unit have a dual consolidated loss as defined in Reg. 1.1503(d)-1(b)(5)(ii)? ☐ Yes ☐ No

9 Does this partnership meet **both** of the following requirements?
• The partnership's total receipts for the tax year were less than \$250,000 and
• The value of the partnership's total assets at the end of the tax year was less than \$1 million. ☐ Yes ☐ No
If "Yes," **do not** complete Schedules L, M-1, and M-2.

Sign Here
Only If You
Are Filing
This Form
Separately
and Not With
Your Tax
Return.

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

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	JOE MELSON CPA	JOE MELSON CPA	02/10/19		P00158111
	Firm's name ► EIDE BAILLY LLP	Firm's EIN ► 45-0250958			
	Firm's address ► 400 PINE ST, STE 600 ABILENE, TX 79601-5190	Phone no. 325-672-4000			

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 identifying 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	Identifying number (if any)	Check if foreign person	Check if direct partner

Schedule A-1

Certain Partners of Foreign Partnership (see instructions)

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

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

Schedule A-2

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

STATEMENT 7

Schedule B

Income Statement - Trade or Business Income

Caution: Include **only** trade or business income and expenses on lines 1a through 22 below. See the instructions for more information.

Income	1 a Gross receipts or sales	1a		
	b Less returns and allowances	1b		1c
	2 Cost of goods sold			2
	3 Gross profit. Subtract line 2 from line 1c			3
	4 Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)			4
	5 Net farm profit (loss) (attach Schedule F (Form 1040))			5
	6 Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)			6
7 Other income (loss) (attach statement)			7	
8 Total income (loss). Combine lines 3 through 7			8	
Deductions (see instructions for limitations)	9 Salaries and wages (other than to partners) (less employment credits)			9
	10 Guaranteed payments to partners			10
	11 Repairs and maintenance			11
	12 Bad debts			12
	13 Rent			13
	14 Taxes and licenses			14
	15 Interest			15
	16 a Depreciation (if required, attach Form 4562)	16a		
	b Less depreciation reported elsewhere on return	16b		16c
	17 Depletion (Do not deduct oil and gas depletion.)			17
	18 Retirement plans, etc.			18
	19 Employee benefit programs			19
	20 Other deductions (attach statement)			20
	21 Total deductions. Add the amounts shown in the far right column for lines 9 through 20			21
	22 Ordinary business income (loss) from trade or business activities. Subtract line 21 from line 8			22

**SCHEDULE O
(Form 8865)**Department of the Treasury
Internal Revenue Service**Transfer of Property to a Foreign Partnership
(under section 6038B)**▶ Attach to Form 8865. See Instructions for Form 8865.
▶ Go to www.irs.gov/Form8865 for instructions and the latest information.

OMB No. 1545-1668

2017

Name of transferor

ABILENE CHRISTIAN UNIVERSITY

Filer's identifying number

75-0851900

Name of foreign partnership

AXIOM ASIA IV, LP

EIN (if any)

98-1276355

Reference ID number (see instr)

- 1 a** Is the partnership a section 721(c) partnership (as defined in Temporary Regulations section 1.721(c)-1T(b)(14)? See instructions ☐ Yes ☒ No
- b** If "Yes," was the gain deferral method applied to avoid the recognition of gain upon the contribution of property? ☐ Yes ☐ No
- 2** 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

Part I Transfers Reportable Under Section 6038B

Type of property	(a) Date of transfer	(b) Number of items transferred	(c) Fair market value on date of transfer	(d) Cost or other basis	(e) Section 704(c) allocation method	(f) Gain recognized on transfer
Cash	05/31/18		867,158.			
Stock, notes receivable and payable, and other securities						
Inventory						
Tangible property used in trade or business						
Intangible property described in section 197(f)(9)						
Intangible property, other than intangible property described in section 197(f)(9)						
Other property						
Totals			867,158.			

3 Enter the transferor's percentage interest in the partnership: (a) Before the transfer **.4576** % (b) After the transfer **.4816** %

Supplemental Information Required To Be Reported (see instructions):**Part II Dispositions Reportable Under Section 6038B**

(a) Type of property	(b) Date of original transfer	(c) Date of disposition	(d) Manner of disposition	(e) Gain recognized by partnership	(f) Depreciation recapture recognized by partnership	(g) Gain allocated to partner	(h) Depreciation recapture allocated to partner

Part III Is any transfer reported on this schedule subject to gain recognition under section 904(f)(3) or section 904(f)(5)(F)? ☐ Yes ☒ No

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 8865.

Schedule O (Form 8865) 2017

FORM 8865		AFFILIATION SCHEDULE		STATEMENT	6
NAME	ADDRESS	IDENTIFYING NUMBER	TOTAL ORDINARY INCOME OR (LOSS)	CK IF FOR- EIGN P'SH	
ENCAP FLATROCK MIDST II LP	1100 LOUISIANA, SUITE 4900 HOUSTON, TX 77002	45-5057812			
EAGLECLAW MIDSTREAM LLC	414 W. TEXAS AVE, STE 315 MIDLAND, TX 79701	45-5431151			
CAIMAN ENERGY II LLC	5949 SHERRY LN, STE 1300 DALLAS, TX 78225	45-5625126			
RANGELAND ENERGY II LLC	2150 TOWN SQUARE, STE 700 SUGARLAND, TX 77479	09-0920212			
TALL OAK MIDSTREAM II LLC	2575 KELLEY POINTE STE 34 EDMOND, OK 73013	61-1758570			
LUCID ENERGY GROUP LLC	3100 MCKINNON STE 800 DALLAS, TX 75201	30-0710374			
TRADITION MIDSTREAM LLC	10077 GROGANS MILL STE 590 THE WOODLANDS, TX 77380	90-0919350			
TALL OAK MIDSTREAM III LLC	2575 KELLEY POINTE STE 34 EDMOND, OK 73013	82-2093372			
CARDINAL MISTREAM II LLC	815 N CENT EXP, STE 1725 DALLAS, TX 75206	61-1710229			
GRAVITY MIDSTREAM LLC	1100 LOUISIANA, STE 5025 HOUSTON, TX 77002	46-3043174			
NUEVO MIDSTREAM DOS LLC	1221 LAMAR, STE 1100 HOUSTON, TX 77010	47-3442721			
CARDINAL MISTREAM III LLC	815 N CENT EXP, STE 1725 DALLAS, TX 75206	82-1546582			
TALL OAK MIDSTREAM LLC	2575 KELLEY POINTE STE 34 EDMOND, OK 73013	46-4347243			

FORM 8865		AFFILIATION SCHEDULE		STATEMENT	7
NAME	ADDRESS	IDENTIFYING NUMBER	TOTAL ORDINARY INCOME OR (LOSS)	CK IF FOR- EIGN P'SH	
ALTO KOREA OPP FUND 2	2882 SAND HILL, SUITE 100 MENLO PARK, CA 94025	47-5383540			
DCM VENTURES CHINA FUND	2420 SAND HILL RD, STE 200 MENLO PARK, CA 94025	98-1276648			X
LIGHTSPEED CHINA PARTNERS	PO BOX 309 - UGLAND HOUSE GRAND CAYMAN, CAYMAN ISLAN	98-1309256			X
ACE REDPOINT VENT. CHINA I	4F WILLOW HOUSE PO BOX 268 GRAND CAYMAN, CAYMAN ISLAN	98-1329655			X
BOYU CAPITAL FUND III, LP	121 S CHURCH ST. GRAND CAYMAN, CAYMAN ISLAN	98-1294730			X
LYFE CAPITAL FUND II, LP	STE 1804, 1468 NANJING RD SHANGHAI, CHINA 20040	98-1345432			X
ALTOS KOREA OPP FUND, LP	2882 SAND HILL, SUITE 100 MENLO PARK, CA 94025	32-0412303			
ALTOS WOOWA, LP	2882 SAND HILL, SUITE 100 MENLO PARK, CA 94025	82-3109836			
BANYAN PARTNERS FUND 3 LP	27 HOSPITAL ROAD GEORGE TOWN, GRAND CAYMAN				X
BANYAN PARTNERS FUND I LP	27 HOSPITAL ROAD GEORGE TOWN, GRAND CAYMAN				X
C-BRIDGE HEALTHCARE FUND 2	PO BOX 309 - UGLAND HOUSE GRAND CAYMAN, CAYMAN ISLAN				X
VIG PVT. EQUI. FUND 3 PLUS	16F AIA TWR, TONGIL RO 2 JUNG-GU, SEOUL SOUTH KOREA				X
VIG PVT. EQUI. FUND 3-2	16F AIA TWR, TONGIL RO 2 JUNG-GU, SEOUL SOUTH KOREA				X
AP CAYMAN PARTNERS 3, LP	17 F TORANOMON TWRS MINATO-KU, TOKYO JAPAN 105	98-1285996			X
AP CAYPMAN PARTNERS 3-1 LP	17 F TORANOMON TWRS MINATO-KU, TOKYO JAPAN 105				X
SUNRISE CAPITAL 3, LP	809, 1 PACIFIC PL 88 QUEEN ADMIRALITY, HONG KONG	98-1353618			X

LYFE CAPITAL BLUE ARCH LTD	SUITE 1804, 1468 NANJING R SHANGHAI, CHINA 200040	98-1345473	X
LYFE CAPITAL SURGICAL LTD	SUITE 1804, 1468 NANJING R SHANGHAI, CHINA 200040	98-1405080	X
ADAMANTEM CAP. FUND I LP	LVL 12, 2 CHIFLEY SQUARE SYDNEY, AUSTRALIA NSW 2000		X
ASCENDENT HARBOUR 3 LTD	22/F EDINBURGH TOWER, LNDM THE LANDMARK CENTRAL, HONG	98-1401379	X
ADAMANTEM CAP FUND I TR 1A	LVL 12, 2 CHIFLEY SQUARE SYDNEY, AUSTRALIA NSW 2000		X

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

OMB No. 1545-0026

- Go to www.irs.gov/Form926 for instructions and the latest information.
► Attach to your income tax return for the year of the transfer or distribution.

Attachment
Sequence No. **128**

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

Name of transferor ABILENE CHRISTIAN UNIVERSITY	Identifying number (see instructions) 75-0851900
---	--

1 If the transferor was a corporation, complete questions 1a through 1d.

- a** If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by 5 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)(5) been made? ☐ Yes ☒ No

2 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 2a through 2d.

- a** List the name and EIN of the transferor's partnership.

Name of partnership	EIN of partnership
AXIOM ASIA IV, LP	98-1276355

- 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)

3 Name of transferee (foreign corporation) A4J LTD	4a Identifying number, if any
5 Address (including country) WILLOW HOUSE, CRICKET SQUARE, PO BOX 709 GRAND CAYMAN, KY1-1107, CAYMAN ISLANDS	4b Reference ID number 1000
6 Country code of country of incorporation or organization CJ	
7 Foreign law characterization (see instructions) CORPORATION	
8 Is the transferee foreign corporation a controlled foreign corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **926** (Rev. 12-2017)

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

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 STMT 8					
Stock and securities (other than those that qualify as eligible property under Regs. sec. 1.367(a)-2(b)(3))					

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

10 Did the transferor transfer stock or securities subject to section 367(a) with respect to which a gain recognition agreement was filed? ☐ **Yes** ☐ **No**

Section B - Property qualifying for Active Trade or Business exception under Regs. sec. 1.367(a)-2(a)(2)(i) and (ii)

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*
Tangible property (not listed under another category)					
Working interest in oil and gas property (as described in Regs. sec. 1.367(a)-2(b)(2) and (f))					
Financial asset (as described in Regs. sec. 1.367(a)-2(b)(3))					
Certain tangible property to be leased (see Regs. sec. 1.367(a)-2(e))					
Totals					

* If property listed in this section is subject to depreciation recapture or branch loss recapture, see instructions.

Section C - Property not qualifying for Active Trade or Business exception (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*
Inventory					
Installment obligations, etc. (as described in Regs. sec. 1.367(a)-2(c)(2))					
Nonfunctional currency, etc. (as described in Regs. sec. 1.367(a)-2(c)(3))					
Certain leased tangible property (as described in Regs. sec. 1.367(a)-2(c)(4))					
Certain property to be retransferred (see Regs. sec. 1.367(a)-2(g))					
Property described in Regs. sec. 1.6038B-1(c)(4)(iv)					
Property described in Regs. sec. 1.6038B-1(c)(4)(vii)					
Totals					

* If property listed in this section is subject to depreciation recapture or branch loss recapture, see instructions.

- 11** Did the transferor transfer assets that qualify for the trade or business exception under section 367(a)(3)? ☐ Yes ☐ No
- 12** Indicate whether the transferor was required to recognize income under final and Temporary Regulations sections 1.367(a)-2 through 1.367(a)-7 for any of the following.
- a** Transfer of property subject to section 367(a)(1) gain recognition ☐ Yes ☐ No
- b** Depreciation recapture ☐ Yes ☐ No
- c** Branch loss recapture ☐ Yes ☐ No
- d** If the answer to 12c is "Yes," enter the amount of foreign branch loss recapture ► \$ _____
- e** Any other income recognition provision contained in the above-referenced regulations ☐ Yes ☐ No
- If the answer to line 12a, 12b, 12c, or 12e is "Yes," see instructions for information that must be included in the Supplemental Part III Information Required To Be Reported section below.

Section D - Intangible property under Regs. sec. 1.367(a)-1(d)(5)

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. 936(h)(3)(B)						
Property subject to sec. 367(d) pursuant to Regs. sec. 1.367(a)-1(b)(5)						
Totals						

- 13 a** Did the transferor transfer property described in section 936(h)(3)(B) (not including section 1221(a)(3) property or a working interest in oil and gas property)? ☐ Yes ☐ No
- b** If the answer to line 13a is "Yes," enter the total amount included in income under section 367(d), if any, for the transfer of all such property on the income tax return for the year of the transfer ► \$ _____
- 14 a** Did the transferor apply section 367(d) to a transfer of any property pursuant to Regulations section 1.367(a)-1(b)(5)? ☐ Yes ☐ No
- b** If the answer to line 14a is "Yes," enter the total amount included in income under section 367(d), if any, for the transfer of all such property on the income tax return for the year of the transfer ► \$ _____
- c** If the answer to line 14a is "No," did the transferor transfer any property for which it could have applied section 367(d) pursuant to Regulations section 1.367(a)-1(b)(5) but did not? ☐ Yes ☐ No
- d** If the answer to line 14c is "Yes," enter the total amount of gain recognized, if any, under section 367(a)(1) on the transfer of all such property on the income tax return for the year of the transfer ► \$ _____
- 15 a** Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed twenty 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 15c 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) ► \$ _____
- 16** 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)

- 17** Enter the transferor's interest in the foreign transferee corporation before and after the transfer.
(a) Before 0.482 % (b) After 0.482 %
- 18** Type of nonrecognition transaction (see instructions) ► IRC SECTION 351
- 19** Indicate whether any transfer reported in Part III is subject to any of the following.
- | | | |
|--|------------------------------|--|
| a Gain recognition under section 904(f)(3) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b Gain recognition under section 904(f)(5)(F) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c Recapture under section 1503(d) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d Exchange gain under section 987 | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
- 20** Did this transfer result from a change in entity classification? ☐ Yes ☒ No
- 21 a** Did a domestic corporation make a distribution of property covered by section 367(e)(2) (see instructions)? ☐ Yes ☒ No
If "Yes," complete lines 21b and 21c.
- 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

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

OMB No. 1545-0026

- Go to www.irs.gov/Form926 for instructions and the latest information.
► Attach to your income tax return for the year of the transfer or distribution.

Attachment
Sequence No. **128**

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

Name of transferor ABILENE CHRISTIAN UNIVERSITY	Identifying number (see instructions) 75-0851900
---	--

1 If the transferor was a corporation, complete questions 1a through 1d.

a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by 5 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)(5) been made? ☐ Yes ☒ No

2 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 2a through 2d.

a List the name and EIN of the transferor's partnership.

Name of partnership	EIN of partnership
AXIOM ASIA IV, LP	98-1276355

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)

3 Name of transferee (foreign corporation) A4C-1 LTD.	4a Identifying number, if any
--	--------------------------------------

5 Address (including country) WILLOW HOUSE, CRICKET SQUARE, PO BOX 709 GRAND CAYMAN, KY1-1107, CAYMAN ISLANDS	4b Reference ID number 1001
--	--

6 Country code of country of incorporation or organization CJ
--

7 Foreign law characterization (see instructions) CORPORATION
--

8 Is the transferee foreign corporation a controlled foreign corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **926** (Rev. 12-2017)

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

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	07/21/2017		116,116.		
Stock and securities (other than those that qualify as eligible property under Regs. sec. 1.367(a)-2(b)(3))					

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

10 Did the transferor transfer stock or securities subject to section 367(a) with respect to which a gain recognition agreement was filed? ☐ **Yes** ☐ **No**

Section B - Property qualifying for Active Trade or Business exception under Regs. sec. 1.367(a)-2(a)(2)(i) and (ii)

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*
Tangible property (not listed under another category)					
Working interest in oil and gas property (as described in Regs. sec. 1.367(a)-2(b)(2) and (f))					
Financial asset (as described in Regs. sec. 1.367(a)-2(b)(3))					
Certain tangible property to be leased (see Regs. sec. 1.367(a)-2(e))					
Totals					

* If property listed in this section is subject to depreciation recapture or branch loss recapture, see instructions.

Section C - Property not qualifying for Active Trade or Business exception (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*
Inventory					
Installment obligations, etc. (as described in Regs. sec. 1.367(a)-2(c)(2))					
Nonfunctional currency, etc. (as described in Regs. sec. 1.367(a)-2(c)(3))					
Certain leased tangible property (as described in Regs. sec. 1.367(a)-2(c)(4))					
Certain property to be retransferred (see Regs. sec. 1.367(a)-2(g))					
Property described in Regs. sec. 1.6038B-1(c)(4)(iv)					
Property described in Regs. sec. 1.6038B-1(c)(4)(vii)					
Totals					

* If property listed in this section is subject to depreciation recapture or branch loss recapture, see instructions.

- 11** Did the transferor transfer assets that qualify for the trade or business exception under section 367(a)(3)? ☐ Yes ☐ No
- 12** Indicate whether the transferor was required to recognize income under final and Temporary Regulations sections 1.367(a)-2 through 1.367(a)-7 for any of the following.
- a** Transfer of property subject to section 367(a)(1) gain recognition ☐ Yes ☐ No
- b** Depreciation recapture ☐ Yes ☐ No
- c** Branch loss recapture ☐ Yes ☐ No
- d** If the answer to 12c is "Yes," enter the amount of foreign branch loss recapture ► \$ _____
- e** Any other income recognition provision contained in the above-referenced regulations ☐ Yes ☐ No
- If the answer to line 12a, 12b, 12c, or 12e is "Yes," see instructions for information that must be included in the *Supplemental Part III Information Required To Be Reported* section below.

Section D - Intangible property under Regs. sec. 1.367(a)-1(d)(5)

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. 936(h)(3)(B)						
Property subject to sec. 367(d) pursuant to Regs. sec. 1.367(a)-1(b)(5)						
Totals						

- 13 a** Did the transferor transfer property described in section 936(h)(3)(B) (not including section 1221(a)(3) property or a working interest in oil and gas property)? ☐ Yes ☐ No
- b** If the answer to line 13a is "Yes," enter the total amount included in income under section 367(d), if any, for the transfer of all such property on the income tax return for the year of the transfer ► \$ _____
- 14 a** Did the transferor apply section 367(d) to a transfer of any property pursuant to Regulations section 1.367(a)-1(b)(5)? ☐ Yes ☐ No
- b** If the answer to line 14a is "Yes," enter the total amount included in income under section 367(d), if any, for the transfer of all such property on the income tax return for the year of the transfer ► \$ _____
- c** If the answer to line 14a is "No," did the transferor transfer any property for which it could have applied section 367(d) pursuant to Regulations section 1.367(a)-1(b)(5) but did not? ☐ Yes ☐ No
- d** If the answer to line 14c is "Yes," enter the total amount of gain recognized, if any, under section 367(a)(1) on the transfer of all such property on the income tax return for the year of the transfer ► \$ _____
- 15 a** Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed twenty 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 15c 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) ► \$ _____
- 16** 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)

- 17** Enter the transferor's interest in the foreign transferee corporation before and after the transfer.
(a) Before 0.361 % (b) After 0.361 %
- 18** Type of nonrecognition transaction (see instructions) ► IRC SECTION 351
- 19** Indicate whether any transfer reported in Part III is subject to any of the following.
- | | | |
|--|------------------------------|--|
| a Gain recognition under section 904(f)(3) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| b Gain recognition under section 904(f)(5)(F) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| c Recapture under section 1503(d) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| d Exchange gain under section 987 | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
- 20** Did this transfer result from a change in entity classification? ☐ Yes ☒ No
- 21 a** Did a domestic corporation make a distribution of property covered by section 367(e)(2) (see instructions)? ☐ Yes ☒ No
If "Yes," complete lines 21b and 21c.
- 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

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

OMB No. 1545-0026

- Go to www.irs.gov/Form926 for instructions and the latest information.
► Attach to your income tax return for the year of the transfer or distribution.

Attachment
Sequence No. **128**

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

Name of transferor ABILENE CHRISTIAN UNIVERSITY	Identifying number (see instructions) 75-0851900
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1 If the transferor was a corporation, complete questions 1a through 1d.

- a** If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by 5 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)(5) been made? ☐ Yes ☒ No

2 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 2a through 2d.

- a** List the name and EIN of the transferor's partnership.

Name of partnership	EIN of partnership
PEG U.S. CORPORATE FINANCE VI SELECT L.P.	82-2010450

- 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)

3 Name of transferee (foreign corporation) TOP ACES INC. F/K/A DISCOVERY AIR DEFENSE SERVICES, INC	4a Identifying number, if any 88-4862913
5 Address (including country) 1675 TRANS CANADA, SUITE 201 DORVAL, QC H9P1J1 CANADA	4b Reference ID number 1002
6 Country code of country of incorporation or organization CA	
7 Foreign law characterization (see instructions) CORPORATION	
8 Is the transferee foreign corporation a controlled foreign corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **926** (Rev. 12-2017)

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

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	12/21/2017		108,932.		
Stock and securities (other than those that qualify as eligible property under Regs. sec. 1.367(a)-2(b)(3))					

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

10 Did the transferor transfer stock or securities subject to section 367(a) with respect to which a gain recognition agreement was filed? ☐ **Yes** ☐ **No**

Section B - Property qualifying for Active Trade or Business exception under Regs. sec. 1.367(a)-2(a)(2)(i) and (ii)

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*
Tangible property (not listed under another category)					
Working interest in oil and gas property (as described in Regs. sec. 1.367(a)-2(b)(2) and (f))					
Financial asset (as described in Regs. sec. 1.367(a)-2(b)(3))					
Certain tangible property to be leased (see Regs. sec. 1.367(a)-2(e))					
Totals					

* If property listed in this section is subject to depreciation recapture or branch loss recapture, see instructions.

Section C - Property not qualifying for Active Trade or Business exception (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*
Inventory					
Installment obligations, etc. (as described in Regs. sec. 1.367(a)-2(c)(2))					
Nonfunctional currency, etc. (as described in Regs. sec. 1.367(a)-2(c)(3))					
Certain leased tangible property (as described in Regs. sec. 1.367(a)-2(c)(4))					
Certain property to be retransferred (see Regs. sec. 1.367(a)-2(g))					
Property described in Regs. sec. 1.6038B-1(c)(4)(iv)					
Property described in Regs. sec. 1.6038B-1(c)(4)(vii)					
Totals					

* If property listed in this section is subject to depreciation recapture or branch loss recapture, see instructions.

- 11** Did the transferor transfer assets that qualify for the trade or business exception under section 367(a)(3)? ☐ Yes ☐ No
- 12** Indicate whether the transferor was required to recognize income under final and Temporary Regulations sections 1.367(a)-2 through 1.367(a)-7 for any of the following.
- a** Transfer of property subject to section 367(a)(1) gain recognition ☐ Yes ☐ No
- b** Depreciation recapture ☐ Yes ☐ No
- c** Branch loss recapture ☐ Yes ☐ No
- d** If the answer to 12c is "Yes," enter the amount of foreign branch loss recapture ► \$ _____
- e** Any other income recognition provision contained in the above-referenced regulations ☐ Yes ☐ No
- If the answer to line 12a, 12b, 12c, or 12e is "Yes," see instructions for information that must be included in the *Supplemental Part III Information Required To Be Reported* section below.

Section D - Intangible property under Regs. sec. 1.367(a)-1(d)(5)

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Totals						

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

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- 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

FORM 926

PART III - INFORMATION REGARDING
TRANSFER OF PROPERTY

STATEMENT 8

CASH

(A) DATE OF TRANSFER	(C) FAIR MARKET VALUE ON DATE OF TRANSFER
03/01/2017	1,693.
06/01/2017	71,512.
07/01/2017	49,620.
08/01/2017	30,202.
10/01/2017	1,378.
11/01/2017	24,024.
12/01/2017	2,151.
	<hr/>
	180,580.
	<hr/>

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

OMB No. 1545-1709

► **File a separate application for each return.**

► **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

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/efile, click on Charities & Non-Profits, and click on 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.

Type or print	Name of exempt organization or other filer, see instructions.	Enter filer's identifying number
File by the due date for filing your return. See instructions.	ABILENE CHRISTIAN UNIVERSITY	Employer identification number (EIN) or 75-0851900
	Number, street, and room or suite no. If a P.O. box, see instructions. ACU BOX 29120	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ABILENE, TX 79699-9120	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 7

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	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

KEVIN CAMPBELL

• The books are in the care of ► **ACU BOX 29120 - ABILENE, TX 79699**
Telephone No. ► **325-674-6552** Fax No. ► **325-674-6713**

- 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 EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **APRIL 15, 2019**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► ☐ calendar year _____ or
► ☒ tax year beginning **JUN 1, 2017**, and ending **MAY 31, 2018**.

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

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
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.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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

**MAIL TO: DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE CENTER
OGDEN, UT 84201-0045**