### EXTENDED TO NOVEMBER 15, 2018 Form **990-T Exempt Organization Business Income Tax Return** OMB No. 1545-0687 (and proxy tax under section 6033(e)) For calendar year 2017 or other tax year beginning ► Go to www.irs.gov/Form990T for instructions and the latest information. epartment of the Treasury ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service Name of organization ( Check box if name changed and see instructions.) Check hox if address changed **B** Exempt under section Print BILL & MELINDA GATES FOUNDATION TRUST 91-1663695 E Unrelated business activity codes (See instructions.) X 501(c)(3 or Number, street, and room or suite no. If a P.O. box, see instructions. Type 408(e) 220(e) P.O. BOX 23350 ] 408A 7530(a) City or town, state or province, country, and ZIP or foreign postal code ]529(a) SEATTLE, WA 98102 523000 C Book value of all assets **F** Group exemption number (See instructions.) at end of year 50,889,278,743. G Check organization type 501(c) corporation X 501(c) trust 401(a) trust Other trust SEE STATEMENT 18 H Describe the organization's primary unrelated business activity. X No During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes If "Yes," enter the name and identifying number of the parent corporation. The books are in care of JENNIFER DEGER Telephone number ▶ 206-709-3100 **Unrelated Trade or Business Income** (A) Income (B) Expenses (C) Net 1a Gross receipts or sales **b** Less returns and allowances c Balance ..... 1c Cost of goods sold (Schedule A, line 7) 2 2 3 Gross profit. Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D) 4a -359 -359. **b** Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b Capital loss deduction for trusts 4c STMT 19 192 192. Income (loss) from partnerships and S corporations (attach statement) 5 5 Rent income (Schedule C) 6 6 Unrelated debt-financed income (Schedule E) 7 7 8 8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 Exploited exempt activity income (Schedule I) 10 10 Advertising income (Schedule J) 11 11 Other income (See instructions; attach schedule) STATEMENT 20 74. 12 12 -93. -93. Total. Combine lines 3 through 12 13 **Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.) Part II (Except for contributions, deductions must be directly connected with the unrelated business income.) Compensation of officers, directors, and trustees (Schedule K) 14 14 15 Salaries and wages 15 16 16 17 17 18 Interest (attach schedule) 18 8,198. 19 Taxes and licenses 19 20 20 Charitable contributions (See instructions for limitation rules) Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return 22 22b 23 23 Contributions to deferred compensation plans 24 24

Form **990-T** (2017)

8,198.

-8,291.

-8,291.

1,000.

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line 32

Employee benefit programs

Excess readership costs (Schedule J)

Total deductions. Add lines 14 through 28

Net operating loss deduction (limited to the amount on line 30)

SEE STATEMENT 21

Unrelated business taxable income before specific deduction. Subtract line 31 from line 30

Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)

Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or

Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Other deductions (attach schedule)

Excess exempt expenses (Schedule I)

A3 Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)  44 Total tax. Add lines 42 and 43  45 a Payments: A 2016 overpayment credited to 2017  45 a Payments: A 2016 overpayment credited to 2017  45 a Payments: A 2016 overpayment credited to 2017  5 2017 estimated tax payments  6 Tax deposited with Form 8868  4 55						
Part III   Tax Computation   Tax Computation   So Organizations Taxable as Corporations. See instructions for tax computation.   Controlled group members (sections 1561 and 1563) check here   See instructions and:	- 000 T	WOOD DIVING WHITTING COMPANY TO MINISTER TO A MINISTER TO	01 16636	0.5		Page
So Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here   See instructions and:   a Entry your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):   (1)   See   2   Additional 3% tax (not more than \$11,750)   See   2   Additional 3% tax (not more than \$11,000   See   2   Additional 3% tax (not more than \$100,000   See   2   Additional 3% tax (not more than \$11,750)   See   2   Additional 3% tax (not more than \$100,000   See   2   Additional 3% tax (not more than \$110,000   See   2   Additional 3% tax (not more than \$110,000   See   2   Additional 3% tax (not more than \$110,000   See   2   Additional 3% tax (not more than \$110,000   See   2   Additional 3% tax (not more than \$110,000   See   2   Additional 3% tax (not more than \$110,000   See   2   Additional 3% tax (not more than \$110,000   See   3   Additional 3% tax (not more than \$110,000   See   3   Additional 3% tax (not more than \$100,000   See   3   Additional 3% tax (not more than \$110,000   See   3   Additional 3% tax (not more than \$100,000   See   3   Additional 3% tax (not more than \$100,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additional 3% tax (not more than \$1,000   See   3   Additiona			91-10030	95		rage
(2) Additional 3% tax (not more than \$100,000)	35 a	Organizations Taxable as Corporations. See instructions for tax computation.  Controlled group members (sections 1561 and 1563) check here   See instructions and:  Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):  (1) \$ (3) \$				
X Tax rate schedule or   Schedule D (Form 1041)   36   0	С	(2) Additional 3% tax (not more than \$100,000) \$ Income tax on the amount on line 34		35c	<u> </u>	
Total Add lines 37, 38 and 39 to line 35c or 36, whichever applies	37 38	Tax rate schedule or Schedule D (Form 1041)  Proxy tax. See instructions  Alternative minimum tax		37 38		0
### Foreign tax credit (corporations attach Form 1118; trusts attach Form 1118)  ### A 11a  ### A						
### At a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) ### Atta  ### D. Other credits (see instructions) ### Atta	Part I	Tax and Payments		40		
b Other credits (see instructions) c General business credit. Attach Form 3800 d Credit for prior year minimum tax (attach Form 8801 or 8827)  • Total credits. Add lines 41a through 41d  42 Subtract line 41e from line 40  43 Other taxes. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8666 ☐ Other (attach schedule)  44 Total tax. Add lines 42 and 43  45 a Payments: A 2016 overpayment credited to 2017 ☐ 45a ☐ 100,000.  b 2017 estimated tax payments c Tax deposited with Form 8868 ☐ 45b ☐ 45						
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b 2017 estimated tax payments c Tax deposited with Form 8688 d Foreign organizations; Tax paid or withheld at source (see instructions) e Backup withholding (see instructions) f Credit for small employer health insurance premiums (Attach Form 8941) g Other credits and payments: Form 2439 Form 4136 Other Form 4136  46 Total payments. Add lines 45a through 45g Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed  47 Estimated tax penalty (see instructions). Check if Form 2220 is attached   49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid  49 Overpayment. If line 49 you want: Credited to 2018 estimated tax  100,000. Refunded  50 Enter the amount of line 49 you want: Credited to 2018 estimated tax  100,000. 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  SEE STATEMENT 22  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  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.  When the IRS discuss this return with the proparer shown below (see  When the IRS discuss this return with the preparer shown below (see				3444		
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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.  May the IRS discuss this return with the preparer shown below (see				vi .		
Sign Here    Careful Content of C	53	Enter the amount of tax-exempt interest received or accrued during the tax year >\$				
		correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Caroly Chief Financial Office	ER Me	ay the IRS dis	scuss this return own below (see	

Phone no. (206) 716-7000 Form **990-T** (2017)

instructions)? X Yes

P00235481

86-1065772

PTIN

**Paid** 

Preparer

**Use Only** 

Print/Type preparer's name

Firm's name ▶ DELOITTE TAX LLP

Firm's address > SEATTLE, WA 98104-1126

JOLENE G. COX

Date

10/30/2018

Check

self- employed

Firm's EIN ▶

925 FOURTH AVENUE, SUITE 3300

Preparer's signature

Schedule A - Cost of Goods S	old. Enter	method of invent	tory v	aluation N/A					
1 Inventory at beginning of year	1		6	Inventory at end of yea	r		6		
2 Purchases	2			Cost of goods sold. Su					
3 Cost of labor	3			from line 5. Enter here	and in F	Part I,			
4a Additional section 263A costs				line 2			7		
(attach schedule)	4a		8	Do the rules of section	263A (\	vith respect to		Yes	No
<b>b</b> Other costs (attach schedule)	4b			property produced or a	cquired	for resale) apply to			
5 Total. Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income (Fr	om Real I	Property and	Per	sonal Property L	ease	d With Real Prope	erty)		
(see instructions)									
1. Description of property									
(1)									
(2)									
(3)									_
(4)									
3	2. Rent receive	ed or accrued							
(a) From personal property (if the percent rent for personal property is more tha 10% but not more than 50%)	age of n	` ´ of rent for p	ersonal	onal property (if the percentage property exceeds 50% or if ed on profit or income)	ре	<b>3(a)</b> Deductions directly of columns 2(a) and	connect d 2(b) (a	ted with the income in attach schedule)	
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns 2(a here and on page 1, Part I, line 6, column (A	)	▶			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<b>&gt;</b>		0.
Schedule E - Unrelated Debt-	Financed	Income (see	instru	ctions)					
			,	. Gross income from		3. Deductions directly conne			
1. Description of debt-finance	ed property			or allocable to debt-	(a)	Straight line depreciation	Τ̈́	(b) Other deductions	_
1. Description of descrinance	ced property			financed property	, ,	(attach schedule)		(attach schedule)	
(1)									
(2)									_
(3)									
(4)									
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property n 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 column 3(a) and 3(b))	
(1)				%					
(2)				%					
(3)				%					
(4)				%					
					Е	nter here and on page 1,	E	inter here and on page 1,	,
					F	Part I, line 7, column (A).		Part I, line 7, column (B).	
Totals				<b>)</b>		0.			0.
Total dividends-received deductions inclu			<u></u>			<u> </u>			0.

Form **990-T** (2017)

Schedule F - Interest,	<b>Annuitie</b>	s, Royal	ties, an	d Rents	From Co	ntrolle	d Organiza	tions	see ins	structio	ns)	
				Exempt (	Controlled O	rganizati	ons					
1. Name of controlled organizat	ion	<b>2.</b> Em identifi	cation	3. Net unr	elated income instructions)	<b>4</b> . Tot	tal of specified ments made	includ	rt of column 4 led in the cont ation's gross	rolling	<b>6.</b> co	Deductions directly innected with income in column 5
(1)												
<u>(1)</u> <u>(2)</u>												
(3)												
(4) Nonexempt Controlled Organi	zatione	ļ				<u> </u>						
	1	unrelated incom	no (lono)	O Total	of appoiling you		10 Dank of activ	O 4b-o	t in included	44 .	D = =1::=1	
7. Taxable Income		see instructions		y, rotar	of specified payi made	ments	10. Part of column in the controlling gross	mn 9 tha ing organ s income	nization's	II. I	ith inco	tions directly connected ome in column 10
(1)												
(2)												
(3)												
(4)												
_(+)				I			Add colun	nne 5 an	d 10		Add co	olumns 6 and 11.
							Enter here and		e 1, Part I,		r here a	and on page 1, Part I, 8, column (B).
<u>Totals</u>									0.			0.
Schedule G - Investme	nt Incor	ne of a S	Section	501(c)(7	'), (9), or (	17) Org	ganization					
(see inst												
1. Desc	ription of inco	ome			2. Amount of	income	3. Deductio directly conne (attach sched	cted	4. Set-	-asides schedule)		5. Total deductions and set-asides (col. 3 plus col. 4)
(1)												
(2) (3)												
(3)												
(4)												
					Enter here and Part I, line 9, co							Enter here and on page 1 Part I, line 9, column (B).
Totals				<b>•</b>		0.						0
Schedule I - Exploited (see instru	-	Activity	Incom	e, Other	Than Adv	ertisin/	g Income					
			2 -		4. Net incon	ne (loss)						7
1. Description of exploited activity	unrelated incom	Gross I business ne from business	directly of with proof unit	penses connected oduction related s income	from unrelated business (co minus colum gain, comput through	d trade or olumn 2 n 3). If a e cols. 5	<ol> <li>Gross income from activity to is not unrelated business income.</li> </ol>	hat ed	attribu	penses table to mn 5		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)												
(1) (2) (3) (4)												
(3)												
(4)											$\top$	
Totals	page 1	re and on 1, Part I, , col. (A).	page 1	ere and on 1, Part I, , col. (B).								Enter here and on page 1, Part II, line 26.
Schedule J - Advertision	na Incor	-	netruction									
Part I Income From					solidated	Basis						
1. Name of periodical		2. Gross advertising income		3. Direct ertising costs	or (loss) (c col. 3). If a g	tising gain ol. 2 minus ain, comput nrough 7.			6. Read		c	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)												
(1) (2) (3) (4)												
(3)												
(4)												
Totals (carry to Part II, line (5))	<b>•</b>		0.	(	).							0
	1										1	

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

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

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

	1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)			%	
(2)			%	
(3)			%	
(4)	SEE STATEMENT 23		%	
Total. Enter	here and on page 1, Part II, line 14		<b>&gt;</b>	0.

Form **990-T** (2017)

### **SCHEDULE I** (Form 1041)

## **Alternative Minimum Tax - Estates and Trusts**

Attach to Form 1041.

► Go to www.irs.gov/Form1041 for instructions and the latest information.

Employer identification number

Department of the Treasury Internal Revenue Service Name of estate or trust

OMB No. 1545-0092

BII	L & MELINDA GATES FOUNDATION TRUST			91-1663	695
Pa	art I Estate's or Trust's Share of Alternative Minimum Taxable	Incom	е	•	
1	Adjusted total income or (loss) (from Form 1041, line 17)			1	-8,291.
2	Interest				
3	Taxes			1 _ 1	
4	Miscellaneous itemized deductions (from Form 1041, line 15c)			4	
5	Refund of taxes				)
6	Depletion (difference between regular tax and AMT)				
7	Net operating loss deduction. Enter as a positive amount	SEE	STATEMENT 24	7	
8	Interest from specified private activity bonds exempt from the regular tax				
9	Qualified small business stock (see instructions)				
10	Exercise of incentive stock options (excess of AMT income over regular tax income)			10	
11	Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)				
12	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)				
13	Disposition of property (difference between AMT and regular tax gain or loss)			13	
14	Depreciation on assets placed in service after 1986 (difference between regular tax and AM	T)		14	
15	Passive activities (difference between AMT and regular tax income or loss)			15	
16	Loss limitations (difference between AMT and regular tax income or loss)			16	
17	Circulation costs (difference between regular tax and AMT)			17	
18	Long-term contracts (difference between AMT and regular tax income)			18	
19	Mining costs (difference between regular tax and AMT)				
20	Research and experimental costs (difference between regular tax and AMT)			20	
21	Income from certain installment sales before January 1, 1987				)
22	Intangible drilling costs preference			22	
23	Other adjustments, including income-based related adjustments			23	
24	Alternative tax net operating loss deduction (See the instructions for the limitation that appl				)
25	Adjusted alternative minimum taxable income. Combine lines 1 through 24			25	-8,291.
	Note: Complete Part II below before going to line 26.				
26	Income distribution deduction from Part II, line 44 N/A		26		
27	Estate tax deduction (from Form 1041, line 19) N/A		27		
28	Add lines 26 and 27			28	
29	Estate's or trust's share of alternative minimum taxable income. Subtract line 28 from line 2	25		29	-8,291.
	If line 29 is:				

- \$24,100 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c. The estate or trust isn't liable for the alternative minimum tax.
- Over \$24,100, but less than \$176,850, go to line 45.

_	• \$176,850 or more, enter the amount from line 29 on line 51 and go to line 52.		
Pa	rt II Income Distribution Deduction on a Minimum Tax Basis N/A		
30	Adjusted alternative minimum taxable income (see instructions)	30	
31	Adjusted tax-exempt interest (other than amounts included on line 8)	31	
32	Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-		
33	Capital gains for the tax year allocated to corpus and paid or permanently set aside for		
	charitable purposes (from Form 1041, Schedule A, line 4)	33	
34	Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)	04	
35	Capital gains computed on a minimum tax basis included on line 25	35 (	)
36	Capital losses computed on a minimum tax basis included on line 25. Enter as a positive amount		
37	Distributable net alternative minimum taxable income (DNAMTI). Combine lines 30 through 36. If zero or less, enter -0-	37	
38	Income required to be distributed currently (from Form 1041, Schedule B, line 9)	38	
39	Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)		
40	Total distributions. Add lines 38 and 39	40	
41	Tax-exempt income included on line 40 (other than amounts included on line 8)	41	
42	Tentative income distribution deduction on a minimum tax basis. Subtract line 41 from line 40		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule I (Form 1041) (2017)

Pa	rt II Income Distribution Deduction on a Minimum Tax Basis	(contin	nued)	N/A	<b>.</b>
43	Tentative income distribution deduction on a minimum tax basis. Subtract line 31 from line 3	7.	,		
	If zero or less, enter -0-	43			
44	Income distribution deduction on a minimum tax basis. Enter the smaller of line 42 or line $$				
	Enter here and on line 26			44	
Pa	rt III Alternative Minimum Tax				
	Exemption amount			45	\$24,100.00
	Enter the amount from line 29	46			
	Phase-out of exemption amount		\$80,450.00		
48	Subtract line 47 from line 46. If zero or less, enter -0-				
49	Multiply line 48 by 25% (0.25)			49	
50	Subtract line 49 from line 45. If zero or less, enter -0-			50	
	Subtract line 50 from line 46			51	
52	Go to Part IV of Schedule I to figure line 52 if the estate or trust has qualified dividends or ha	•			
	of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary). Otherwise	e, if line	51 is -		
	• \$187,800 or less, multiply line 51 by 26% (0.26).				
	• Over \$187,800, multiply line 51 by 28% (0.28) and subtract \$3,756 from the result			52	
	Alternative minimum foreign tax credit (see instructions)			53	
	Tentative minimum tax. Subtract line 53 from line 52			54	
	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedu		e 2a)	55	
56	Alternative minimum tax. Subtract line 55 from line 54. If zero or less, enter -0 Enter here	and on			
Do	rt IV Line 52 Computation Using Maximum Capital Gains Rate			56	
Га				$\overline{}$	
	Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D T				
	or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the	instruc	ctions		
<b>5</b> 7	before completing this part.			<sub>57</sub>	
	Enter the amount from Schodulo D (Form 1041), line 36, line 12 of the Schodulo D Tay	I		57	
58	Enter the amount from Schedule D (Form 1041), line 26, line 13 of the Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for				
	5 4044 111 11 ( 6 16 16 18 48 7 16 1)	58			
59	Enter the amount from Schedule D (Form 1041), line 18b, column (2)	30			
JJ	(as refigured for the AMT, if necessary). If you didn't complete				
	Schedule D for the regular tax or the AMT, enter -0-	59			
60	If you didn't complete a Schedule D Tax Worksheet for the regular tax or the	"			
00	AMT, enter the amount from line 58. Otherwise, add lines 58 and 59 and enter				
	the <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax				
	Worksheet (as refigured for the AMT, if necessary)	60			
61	Enter the <b>smaller</b> of line 57 or line 60			61	
62	Subtract line 61 from line 57			62	
	If line 62 is \$187,800 or less, multiply line 62 by 26% (0.26). Otherwise, multiply line 62 by				
	28% (0.28) and subtract \$3,756 from the result			63	
64	Maximum amount subject to the 0% rate	64	\$2,550.00		
	Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D		,		
	Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions				
	for Form 1041, whichever applies (as figured for the regular tax). If you didn't				
	complete Schedule D or either worksheet for the regular tax, enter the amount				
	from Form 1041, line 22; if zero or less, enter -0-	65			
66	Subtract line 65 from line 64. If zero or less, enter -0-	66			
67	Enter the <b>smaller</b> of line 57 or line 58				
68	Enter the <b>smaller</b> of line 66 or line 67. This amount is taxed at 0%	68			
69	Subtract line 68 from line 67	69			

719862 12-20-17 Schedule I (Form 1041) (2017)

Schedule I (Form 1041) (2017) Page **3** 

Pa	rt IV Line 52 Computation Using Maximum Capital Gair	ns Rates (conti	inued)		g
70	Maximum amount subject to rates below 20%	70	\$12,500.00		
71	Enter the amount from line 66	71			
72	Enter the amount from line 27 of Schedule D (Form 1041), line 18 of the				
	Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax				
	Worksheet, whichever applies (as figured for the regular tax). If you				
	didn't complete Schedule D or either worksheet for the regular tax, enter				
	the amount from Form 1041, line 22; if zero or less, enter -0-	> 72			
73	Add line 71 and line 72	73			
74	Subtract line 73 from line 70. If zero or less, enter -0-				
75	Enter the <b>smaller</b> of line 69 or 74	75			
76	Multiply line 75 by 15% (0.15)			76	
77	Add lines 68 and 75	77			
	If lines 77 and 57 are the same, skip lines 78 through 82 and go to line 83. Othe	rwise, go to line 78.			
78	Subtract line 77 from line 67	78			
79	Multiply line 78 by 20% (0.20)		<b>&gt;</b>	79	
	If line 59 is zero or blank, skip lines 80 through 82 and go to line 83. Otherwise,	go to line 80.			
80	Add lines 62, 77, and 78	80			
81	Subtract line 80 from line 57	81			
82	Multiply line 81 by 25% (0.25)		<b>&gt;</b>	82	
83	Add lines 63, 76, 79, and 82			83	
84	If line 57 is \$187,800 or less, multiply line 57 by 26% (0.26). Otherwise, multiply li	ne 57 by 28% (0.28)			
	and subtract \$3,756 from the result			84	
85	Enter the <b>smaller</b> of line 83 or line 84 here and on line 52			85	

Schedule I (Form 1041) (2017)

## Form **4797**Department of the Treasury

### Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

Attach to your tax return.

OMB No. 1545-0184 **2017** 

► Go to www.irs.gov/Form4797 for instructions and the latest information.

Attachment Sequence No. **27** 

BILL & MELINDA GATES FOUNDATION TRUST 91-1663695 1 Enter the gross proceeds from sales or exchanges reported to you for 2017 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (e) Depreciation (f) Cost or other (g) Gain or (loss) (a) Description (b) Date acquired (d) Gross sales (c) Date sold 2 allowed or basis, plus of property Subtract (f) from the (mo., day, yr.) (mo., day, yr.) allowable since improvements and sum of (d) and (e) acquisition expense of sale TOWER SQUARE CAPITAL PARTNERS II, LP - PAL -359. Gain, if any, from Form 4684, line 39 3 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 Gain, if any, from line 32, from other than casualty or theft 6 6 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: 7 -359. 7 Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. Nonrecaptured net section 1231 losses from prior years. See instructions 8 8 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions Ordinary Gains and Losses (see instructions) Part II Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): 359. Loss, if any, from line 7 11 11 Gain, if any, from line 7 or amount from line 8, if applicable 12 12 Gain, if any, from line 31 13 13 Net gain or (loss) from Form 4684, lines 31 and 38a 14 14 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 15 16 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 Combine lines 10 through 16 -359. 17 17 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines 18 a and b below. For individual returns, complete lines a and b below: If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a." 18a b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on 18h Form 4797 (2017) For Paperwork Reduction Act Notice, see separate instructions.

<b>9</b> (a) Description of section 1245, 1250, 1252, 1254, o	or 1255 p	property:			(b) Date acquir (mo., day, yr.		(c) Date sold (mo., day, yr.)
Α							
3							
)							
These columns relate to the properties on lines 19A through 19D.	<b>•</b>	Property A	Property	/ B	Property	С	Property D
Gross sales price ( <b>Note:</b> See line 1 before completing.)	20						
Cost or other basis plus expense of sale	21						
Depreciation (or depletion) allowed or allowable	22						
Adjusted basis. Subtract line 22 from line 21	23						
Total gain. Subtract line 23 from line 20	24						
If section 1245 property:							
a Depreciation allowed or allowable from line 22	25a						
<b>b</b> Enter the <b>smaller</b> of line 24 or 25a	25b						
If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
<b>a</b> Additional depreciation after 1975. See instructions	26a						
<b>b</b> Applicable percentage multiplied by the <b>smaller</b> of line 24 or line 26a. See instructions	26b						
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
<b>d</b> Additional depreciation after 1969 and before 1976	26d						
e Enter the smaller of line 26c or 26d	26e						
f Section 291 amount (corporations only)	26f						
g Add lines 26b, 26e, and 26f	26g						
If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).	07.						
a Soil, water, and land clearing expenses	27a						
<b>b</b> Line 27a multiplied by applicable percentage	27b						
c Enter the smaller of line 24 or 27b	27c						
If section 1254 property:  a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
<b>b</b> Enter the <b>smaller</b> of line 24 or 28a	28b						
If section 1255 property:  a Applicable percentage of payments excluded from income under section 126. See instructions	29a						
<b>b</b> Enter the <b>smaller</b> of line 24 or 29a. See instructions	29b						
	•		1		1	<u> </u>	
immary of Part III Gains. Complete property of	olumns	A through D through	ı line 29b before	going	to line 30.		
Total gains for all properties. Add property columns	A throug	nh D line 24				30	
rotal game for an proportion. And proporty columns	, , , , , , ,	gir 2, iii 2 1					
Add property columns A through D, lines 25b, 26g,	27c. 28t	o, and 29b. Enter he	re and on line 1	3		31	
Subtract line 31 from line 30. Enter the portion from		•					
_ ·		•	•		·	32	
from other than casualty or theft on Form 4797, line art IV Recapture Amounts Under Section	ns 179	and 280F(b)(2)	When Busir	ness l	Use Drops to	50% c	or Less
(see instructions)					•		
,					(a) Section 179	1	(b) Section 280F(b)(2)
Section 179 expense deduction or depreciation allo	wahle in	prior years		33			
1 Recomputed depreciation. See instructions 5 Recapture amount. Subtract line 34 from line 33. Se		structions for whore		34			

## Form **5884** (Rev. December 2016)

**Work Opportunity Credit** 

OMB No. 1545-0219

Department of the Treasury Internal Revenue Service ► Attach to your tax return.
► Information about Form 5884 and its separate instructions is at <a href="https://www.irs.gov/form5884">www.irs.gov/form5884</a> .

Attachment Sequence No. **77** 

Name(s) shown on return

Identifying number

BI:	LL & MELINDA GATES FOUNDATION TRUST		91-1663695
1	Enter on the applicable line below the total qualified first- or second-year wages paid or incurred during the tax year, and multiply by the percentage shown, for services of employees who are certified as members of a targeted group.	A	
a	Qualified first-year wages of employees who worked for you at least		
	120 hours but fewer than 400 hours \$ x 25% (0	.25) <b>1a</b>	
t	Qualified first-year wages of employees who worked for you at least 400 hours \$x 40% (0	.40) <b>1b</b>	
c	Qualified second-year wages of employees certified as long-term samily assistance recipientsx 50% (0	.50) <u>1c</u>	
2	Add lines 1a, 1b, and 1c. See instructions for the adjustment you must make to salaries and wages	2	
3	Work opportunity credit from partnerships, S corporations, cooperatives, estates, and trusts (see instructions) STATEMENT 25	3	366.
4	Add lines 2 and 3. Cooperatives, estates, and trusts, go to line 5. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, stop here and report this amount on Form 3800, Part III, line 4b	4	0.
5	Amount allocated to patrons of the cooperative or beneficiaries of the estate or trust (see instructions)	5	
6	Cooperatives, estates, and trusts, subtract line 5 from line 4. Report this amount on Form 3800,  Part III, line 4b	6	5004

For Paperwork Reduction Act Notice, see separate instructions.

Form **5884** (Rev. 12-2016)

# Form **6765**(Rev. March 2018) Department of the Treasury Internal Revenue Service Name(s) shown on return

## **Credit for Increasing Research Activities**

► Attach to your tax return.

► Go to www.irs.gov/Form6765 for instructions and the latest information.

OMB No. 1545-0619

Attachment Sequence No. **81** 

Identifying number

### BILL & MELINDA GATES FOUNDATION TRUST

91-1663695

	ion A - Regular Credit. Skip this section and go to Section B if you are electing of lified credit.	or previ	ously elected (and are not	revoki	ng) the alternative
1	Certain amounts paid or incurred to energy consortia			1	
2	Basic research payments to qualified organizations	2			
3	Qualified organization base period amount				
4	Subtract line 3 from line 2. If zero or less, enter -0-			4	
5	Wages for qualified services (do not include wages used in figuring the				
	work opportunity credit)	5			
6	Cost of supplies	6			
7	Rental or lease costs of computers	7			
8	Enter the applicable percentage of contract research expenses	8			
9	Total qualified research expenses. Add lines 5 through 8	9			
10	Enter fixed-base percentage, but not more than 16% (0.16)	10	%		
11	Enter average annual gross receipts	11			
12	Multiply line 11 by the percentage on line 10	12			
13	Subtract line 12 from line 9. If zero or less, enter -0-	13			
14	Multiply line 9 by 50% (0.50)	14			
15	Enter the <b>smaller</b> of line 13 or line 14			15	
16	Add lines 1, 4, and 15			16	
17	Are you electing the reduced credit under section 280C? ▶ Yes				
	If "Yes," multiply line 16 by 13% (0.13). If "No," multiply line 16 by 20% (0.20) and see the i	nstructi	ons for the statement		
	that must be attached. Fiscal year filers: see instructions. Members of controlled groups or	busines	sses under common		
	control; see instructions for the statement that must be attached			17	
Sect	ion B - Alternative Simplified Credit. Skip this section if you are completing Sec	tion A.		,	_
18	Certain amounts paid or incurred to energy consortia		 I	18	
19	Basic research payments to qualified organizations			_	
20	Qualified organization base period amount	20			
21	Subtract line 20 from line 19. If zero or less, enter -0-			21	
22	Add lines 18 and 21			22	
23	Multiply line 22 by 20% (0.20)			23	
24	Wages for qualified services (do not include wages used in figuring the				
	work opportunity credit)	24			
25	Cost of supplies	25			
26	Rental or lease costs of computers	26			
27	Enter the applicable percentage of contract research expenses	27			
28	Total qualified research expenses. Add lines 24 through 27	28		_	
29	Enter your total qualified research expenses for the prior 3 tax years. If you had no				
	qualified research expenses in any one of those years, skip lines 30 and 31	29			
30	Divide line 29 by 6.0	30			
31	Subtract line 30 from line 28. If zero or less, enter -0-	31			
32	Multiply line 31 by 14% (0.14). If you skipped lines 30 and 31, multiply line 28 by 6% (0.06	S)		32	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **6765** (Rev. 3-2018)

Sec	tion B - Alternative Simplified Credit (continued)		
33	Add lines 23 and 32	33	
34	Are you electing the reduced credit under section 280C? ▶ Yes  No		
	If "Yes," multiply line 33 by 65% (0.65). If "No," enter the amount from line 33 and see the line 17		
	instructions for the statement that must be attached. Fiscal year filers; see instructions. Members		
	of controlled groups or businesses under common control; see instructions for the statement that		
	must be attached	34	
Sec	tion C - Current Year Credit		
35	Enter the portion of the credit from Form 8932, line 2, that is attributable to wages that were also		
	used to figure the credit on line 17 or line 34 (whichever applies)	35	
36	Subtract line 35 from line 17 or line 34 (whichever applies). If zero or less, enter -0-	36	
37	Credit for increasing research activities from partnerships, S corporations, estates, and trusts <b>STATEMENT</b> 26	37	7,966.
38	Add lines 36 and 37	38	0.
	• Estates and trusts, go to line 39.		
	• Partnerships and S corporations not electing the payroll tax credit, stop here and report this amount on Schedule K.		
	• Partnerships and S corporations electing the payroll tax credit, complete Section D and report on Schedule K the		
	amount on this line reduced by the amount on line 44.		
	• Eligible small businesses, stop here and report the credit on Form 3800, Part III, line 4i. See instructions for the		
	definition of eligible small business.		
	• Filers other than eligible small businesses, stop here and report the credit on Form 3800, Part III, line 1c.		
	Note: Qualified small business filers, other than partnerships and S corporations, electing the payroll tax credit must		
	complete Form 3800 before completing Section D.		
39	Amount allocated to beneficiaries of the estate or trust	39	
40	Estates and trusts, subtract line 39 from line 38. For eligible small businesses, report the credit on Form 3800, Part III,		
	line 4i. See instructions. For filers other than eligible small businesses, report the credit on Form 3800, Part III, line 1c	40	
	tion D - Qualified Small Business Payroll Tax Election and Payroll Tax Credit. Skip this section if the payroll ta. apply. See instructions.	x electi	on does
41	Check this box if you are a qualified small business electing the payroll tax credit. See instructions		
42	Enter the portion of line 36 elected as a payroll tax credit (do not enter more than \$250,000). See instructions	42	
43	General business credit carryforward from the current year (see instructions). Partnerships and S corporations skip		
	this line and go to line 44	43	
44	Partnerships and S corporations, enter the smaller of line 36 or line 42. All others, enter the smallest of line 36, line 42, or		
	line 43. Enter here and on the applicable line of Form 8974, Part 1, column (e). Members of controlled groups or businesses		
	under common control; see instructions for the statement that must be attached	44	

Form **6765** (Rev. 3-2018)

Department of the Treasury

Passive Activity Loss Limitations

See separate instructions.

► Attach to Form 1040 or Form 1041. ► Go to www.irs.gov/Form8582 for instructions and the latest information.

OMB No. 1545-1008

Internal Revenue Service (99) Name(s) shown on return

Identifying number

BT	LL & MELINDA GATES FOUNDATION TRUST		91-1663695
Pa	rt I 2017 Passive Activity Loss Caution: Complete Worksheets 1, 2, and 3 before completing Part I.		
Ren	tal Real Estate Activities With Active Participation (For the definition of active participation, see		
	cial Allowance for Rental Real Estate Activities in the instructions.)		
•	,		
та	Activities with net income (enter the amount from Worksheet 1, column (a))		
		-	
b	Activities with net loss (enter the amount from Worksheet 1,		
	column (b)) 1b (	4	
С	Prior years' unallowed losses (enter the amount from Worksheet		
	1, column (c)) <b>1c</b> (		
	Combine lines 1a, 1b, and 1c	1d	
	nmercial Revitalization Deductions From Rental Real Estate Activities		
2a	Commercial revitalization deductions from Worksheet 2, column (a)	4	
b	Prior year unallowed commercial revitalization deductions from		
	Worksheet 2, column (b)		
С	Add lines 2a and 2b	2c	(
All (	Other Passive Activities		
За	Activities with net income (enter the amount from Worksheet 3,		
	column (a)) 3a 32,886.		
h	Activities with net loss (enter the amount from Worksheet 3,		
	column (b))		
_	Prior years' unallowed losses (enter the amount from Worksheet 3,		
C	column (c)) 3c ( 422,922		
d	Combine lines 3a, 3b, and 3c	3d	-406,001.
	Combine lines 1d, 2c, and 3d. If this line is zero or more, stop here and include this form with your return; all		
	losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Report the losses on		
	Also farmer and pale of decreased by and	4	-406,001.
	If line 4 is a loss and:  • Line 1d is a loss, go to Part II.		100/0010
	. •		
	• Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.	- 15	
0-	<ul> <li>Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line</li> </ul>		
	ution: If your filing status is married filing separately and you lived with your spouse at any time during the year, dot t Il or Part III. Instead, go to line 15.	not c	complete
_	rt II   Special Allowance for Rental Real Estate Activities With Active Participation		
1 6	Note: Enter all numbers in Part II as positive amounts. See instructions for an example.		
_		Τ_	T
5	Enter the <b>smaller</b> of the loss on line 1d or the loss on line 4	5	
6	Enter \$150,000. If married filing separately, see instructions	-	
7	Enter modified adjusted gross income, but not less than zero (see instructions)		
	Note: If line 7 is greater than or equal to line 6, skip lines 8 and		
	9, enter -0- on line 10. Otherwise, go to line 8.		
8	Subtract line 7 from line 6		
9	Multiply line 8 by 50% (0.50). <b>Do not</b> enter more than \$25,000. If married filing separately, see instructions	9	
10	Enter the <b>smaller</b> of line 5 or line 9	10	
	If line 2c is a loss, go to Part III. Otherwise, go to line 15.		
Pa	rt III Special Allowance for Commercial Revitalization Deductions From Rental Real E	state	Activities
	Note: Enter all numbers in Part III as positive amounts. See the example for Part II in the instructions.		
11	Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11	
12	Enter the loss from line 4	12	
13	Reduce line 12 by the amount on line 10	13	
14	Enter the <b>smallest</b> of line 2c (treated as a positive amount), line 11, or line 13	14	
	irt IV   Total Losses Allowed		<u> </u>
15	Add the income, if any, on lines 1a and 3a and enter the total	15	32,886.
16	Total losses allowed from all passive activities for 2017. Add lines 10, 14, and 15. See instructions		32,3301
.0	to find out how to report the losses on your tay return SEE STATEMENT 31	16	32 886.

Caution: The worksheets must be filed with your tax return. Keep a copy for your records. Worksheet 1 - For Form 8582, Lines 1a, 1b, and 1c (See instructions.) **Current year** Prior years Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 1a) (line 1b) loss (line 1c) Total. Enter on Form 8582, lines 1a, 1b, and 1c Worksheet 2 - For Form 8582, Lines 2a and 2b (See instructions.) (a) Current year (b) Prior year (c) Overall loss Name of activity deductions (line 2a) unallowed deductions (line 2b) Total. Enter on Form 8582, lines 2a and 2b Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.) **Current year Prior years** Overall gain or loss Name of activity (a) Net income (b) Net loss (c) Unallowed (d) Gain (e) Loss (line 3a) (line 3b) loss (line 3c) SEE ATTACHED STATEMENT FOR WORKSHEET 3 Total. Enter on Form 8582, lines 3a, 32,886. -15,965. -422,922.3b, and 3c Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.) Form or schedule (d) Subtract and line number (c) Special column (c) Name of activity (a) Loss (b) Ratio to be reported on allowance from column (a) (see instructions) Total Worksheet 5 - Allocation of Unallowed Losses (See instructions.) Form or schedule and line number Name of activity (a) Loss (b) Ratio (c) Unallowed loss to be reported on (see instructions) SEE ATTACHED STATEMENT FOR WORKSHEET 5 424,333. 1.000000000 406,001. Total

Worksheet 6 - Allowed Losses (See ins	tructions.)							
Name of activity	Form or sch and line nu to be report (see instruc	mber ed on	(a) L	.oss	(b) Ur	nallowed loss	(0	c) Allowed loss
		CHED	כתאשביו	MENTO E	אס שר	ORKSHEET	6	
Total	<b>'</b>			4,808.		335,122.		29,686.
Total Worksheet 7 - Activities With Losses R	eported on Tw	o or M	ore Form	s or Sche	dules	(See instruc	tions	s.)
Name of activity:	(a)		(b)	(c) Rat		(d) Unallowe		(e) Allowed loss
Form or schedule and line number to be reported on (see instructions):								
1a Net loss plus prior year unallowed loss from form or schedule								
b Net income from form or schedule								
c Subtract line 1b from line 1a. If zero or less, ent	er -0 ▶							
Form or schedule and line number to be reported on (see instructions):								
1a Net loss plus prior year unallowed loss from form or schedule								
<b>b</b> Net income from form or schedule								
c Subtract line 1b from line 1a. If zero or less, ent	er -0 <b>&gt;</b>						_	
Form or schedule and line number to be reported on (see instructions):								
1a Net loss plus prior year unallowed loss from form or schedule								
b Net income from form or schedule								
	SEE ATTA	CHED	STATE	MENT FO	OR WO	RKSHEET	7	
c Subtract line 1b from line 1a. If zero or less, ent							$\dashv$	
	VERALL	7	<i>1</i> 070	1.000	0000	70 07	ا ۵	3 200
Total	<u></u>	/	<del>⊈</del> ,∪/ጛ•	1 T O O O	0000	70,87	フ・	3,200.

Form **8582** (2017)

## Form **8582-CR** (Rev. January 2012)

Department of the Treasury Internal Revenue Service

Part I Passive Activity Credits

Name(s) shown on return

**Passive Activity Credit Limitations** 

► See separate instructions.

► Attach to Form 1040 or 1041.

OMB No. 1545-1034

Attachment Sequence No. **89** 

91-1663695

ldentifying number

### BILL & MELINDA GATES FOUNDATION TRUST

	Caution: If you have credits from a publicly t	raded p	oartnership, see Publi	cly Tradeo	Partnersi	nips (PTPs) in tl	he inst	ructions.
	ts From Rental Real Estate Activities With Active Partic Income Housing Credits) (See Lines 1a through 1c in th	-	•	tion Credits	and			
1a	Credits from Worksheet 1, column (a)			<u>1a</u>				
b	Prior year unallowed credits from Worksheet 1, column	n (b)		1b				
С	Add lines 1a and 1b						1c	
	bilitation Credits From Rental Real Estate Activities an		•		•			
Befor	e 1990 (or From Pass-Through Interests Acquired Befo	re 1990	) (See Lines 2a through	<b>1 2c</b> in the i	nstructions	5.)		
				1	1			
2a	Credits from Worksheet 2, column (a)			2a				
b	Prior year unallowed credits from Worksheet 2, column	ı (b)		2b				
c	Add lines 2a and 2b						2c	
	ncome Housing Credits for Property Placed in Service							
						,		
За	Credits from Worksheet 3, column (a)			3a				
b	Prior year unallowed credits from Worksheet 3, column	ı (b)		3b				
	Add lines 3a and 3b						3с	
All O	her Passive Activity Credits (See Lines 4a through 4c i			1	ı	405		
4a	Credits from Worksheet 4, column (a)			4a		425. 8,838.		
b	Prior year unallowed credits from Worksheet 4, column					•		0 262
_ <u>c</u>	Add lines 4a and 4b						4c	9,263. 9,263.
5	Add lines 1c, 2c, 3c, and 4c	truotion	۵۱				5	9,203.
6 7	Enter the tax attributable to net passive income (see ins Subtract line 6 from line 5. If line 6 is more than or equ						<u>6</u> 7	9,263.
	: If your filing status is married filing separately and							5,205.
14010	do not complete Part II, III, or IV. Instead, go to			at arry tirri	e during t	ile year,		
Pa	rt II   Special Allowance for Rental Re			ith Activ	e Parti	cipation		
	Note: Complete this part only if you have an	amour	nt on line 1c. Otherwis	se, go to P	art III.	_		
8	Enter the smaller of line 1c or line 7						8	
9	Enter \$150,000. If married filing separately, see instruc							
10	Enter modified adjusted gross income, but not less that	n zero (s	see instructions).					
	If line 10 is equal to or more than line 9, skip lines 11							
	through 15 and enter -0- on line 16							
11	Subtract line 10 from line 9			11				
12	Multiply line 11 by 50% (.50). <b>Do not</b> enter more than			40				
10-	filing separately, see instructions			12				
13a	Enter the amount, if any, from line 10 of Form 8582	13a						
b	Enter the amount, if any, from line 14 of Form 8582	13b						
С	Add lines 13a and 13b			13c				
14	Subtract line 13c from line 12			14				
15	Enter the tax attributable to the amount on line 14 (see	instructi	ions)				15	
16	Enter the <b>smaller</b> of line 8 or line 15						16	

Га	Housing Credits for Property Placed in S Acquired Before 1990)	ervice Before 1990 (c	or From Pass-Through	Interests	
	Note: Complete this part only if you have an amount o	n line 2c. Otherwise, go to I	Part IV.		
17	Enter the amount from line 7			17	
18	Enter the amount from line 16			18	
19	Subtract line 18 from line 17. If zero, enter -0- here and on lines 30 a				
20	Enter the <b>smaller</b> of line 2c or line 19			20	
21	Enter \$250,000. If married filing separately, see instructions to find				
	out if you can skip lines 21 through 26		21		
22	Enter modified adjusted gross income, but not less than zero. (See in				
	22 is equal to or more than line 21, skip lines 23 through 29 and enter			-	
23	Subtract line 22 from line 21		23	-	
24	Multiply line 23 by 50% (.50). Do not enter more than \$25,000. If ma				
OF -	filing separately, see instructions		24		
25a	Enter the amount, if any, from line 10 of	05-			
L	Form 8582	25a	$\dashv$		
D	Enter the amount, if any, from line 14 of	OEh			
	Form 8582	<u> </u>			
	Add lines 25a and 25b Subtract line 25c from line 24				
20 27	Enter the tax attributable to the amount on line 26 (see instructions)		27		
28	Enter the amount, if any, from line 18				
29	Subtract line 28 from line 27			29	
30	Enter the <b>smaller</b> of line 20 or line 29			30	
Pa	Enter the smaller of line 20 or line 29	ing Credits for Prope	erty Placed in Service A	After 1989	
	Note: Complete this part only if you have an amount o	n line 3c. Otherwise, go to F	Part V.	1 1	
31	If you completed Part III, enter the amount from line 19. Otherwise, s			31	
32	Enter the amount from line 30			32	
33	Subtract line 32 from line 31. If zero, enter -0- here and on line 36				
34	Enter the <b>smaller</b> of line 3c or line 33				
35	Tax attributable to the remaining special allowance (see instructions)	!		35	
36	Enter the <b>smaller</b> of line 34 or line 35			36	
	rt V Passive Activity Credit Allowed				
	<u> </u>				
37	Passive Activity Credit Allowed. Add lines 6, 16, 30, and 36. S		·		
	your tax return and how to allocate allowed and unallowed credits if y				0 3
	activity. If you have any credits from a publicly traded partnership, se	Publicly Traded Partner	ships (PTPs) in the instructions	s.  <b>37</b>	0.
Pa	rt VI Election To Increase Basis of Credit Prop	perty			
38	If you disposed of your entire interest in a passive activity or former	passive activity in a fully taxabl	e transaction, and you		
	elect to increase your basis in credit property used in that activity by				
	property, check this box. See instructions				• 🔲
39	Name of passive activity disposed of ▶				
40	Description of the credit property for which the election is being mad	le <b>&gt;</b>	<u> </u>		

Form **8582-CR** (Rev. 01-2012)

▶ \$

\* SEE STATEMENTS 32, 33 & 34

41 Amount of unallowed credit that reduced your basis in the property

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 18
BUSINESS ACTIVITY

THE PRIMARY UNRELATED BUSINESS ACTIVITY IS CONDUCTED WITHIN PASSIVE INVESTMENT PARTNERSHIPS IN WHICH THE BILL & MELINDA GATES FOUNDATION TRUST HOLDS AN INTEREST.

TO FORM 990-T, PAGE 1

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS	STATEMENT 19
DESCRIPTION		AMOUNT
PASSIVE LOSS - B PASSIVE LOSS - S PASSIVE LOSS - S PASSIVE LOSS - S	TOWER SQUARE CAPITAL PARTNERS III, LP ANNISTER HOLDINGS, LLC ANGAEA ONE, L.P. MB PRIVATE EDUCATION LOAN TRUST 2014-A TRATEGIC PARTNERS II, LP UFFOLK TIMBER HOLDINGS, LLC OWER SQUARE CAPITAL PARTNERS II, LP	18,3324,9016672,0811677,4832,841.
TOTAL TO FORM 99	0-T, PAGE 1, LINE 5	192.
FORM 990-T	OTHER INCOME	STATEMENT 20
DESCRIPTION		AMOUNT
STATE TAX REFUND	S	74.
TOTAL TO FORM 99	0-T, PAGE 1, LINE 12	74.

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 21
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/08	353.	0.	353.	353.
12/31/09	15,323.	0.	15,323.	15,323.
12/31/10	57,959.	0.	57,959.	57,959.
12/31/11	333.	0.	333.	333.
12/31/12	5,930.	0.	5,930.	5,930.
12/31/13	4,153.	0.	4,153.	4,153.
12/31/14	7,773.	0.	7,773.	7,773.
12/31/15	245,765.	0.	245,765.	245,765.
12/31/16	9,384.	0.	9,384.	9,384.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	346,973.	346,973.

FORM 990-T

## NAME OF FOREIGN COUNTRY IN WHICH ORGANIZATION HAS FINANCIAL INTEREST

STATEMENT 22

### NAME OF COUNTRY

UNITED ARAB EMIRATES

BRAZIL

CHILE

CHINA

COLOMBIA

CZECH REPUBLIC

DENMARK

**EGYPT** 

UNITED KINGDOM

**GHANA** 

**GREECE** 

HONG KONG

HUNGARY

INDONESIA

**ISRAEL** 

INDIA

**JAMAICA** 

JAPAN

MALAYSIA

PERU

PHILIPPINES

POLAND

OATAR

ROMANIA

THAILAND

TURKEY

TAIWAN

VIETNAM

ARGENTINA

AUSTRALIA

BULGARIA

**CANADA** 

CROATIA

FRANCE

**ICELAND** 

KOREA (SOUTH)

KUWAIT

LATVIA

LITHUANIA

**MEXICO** 

MOROCCO

NEW ZEALAND

NORWAY

SINGAPORE

SOUTH AFRICA

**SWEDEN** 

SWITZERLAND

FORM 990-T SCHEDULE K -	STATEMENT 23		
NAME	TITLE	PERCENT	COMPENSATION
WILLIAM H. GATES, III	TRUSTEE AND CEO	.00%	0.
MELINDA FRENCH GATES	TRUSTEE	.00%	0.
JIM BROMLEY	CHIEF FINANCIAL		
	OFFICER	.00%	0.
KEITH TRAVERSE	SECRETARY	.00%	0.
MICHAEL LARSON	LLC MANAGER	.00%	0.
TOTAL TO FORM 990-T, SCHEDULE	K		

SCHEDULE I	NET	OPERATING LOSS	CARRYOVER	STATEMENT 24
		LOSS PREVIOUSLY		
TAX YEAR	LOSS SUSTAINED	APPLIED		AMOUNT
12/31/08	353.		0.	353.
12/31/09	15,323.		0.	15,323.
12/31/10	57,959.		0.	57,959.
12/31/11	333.		0.	333.
12/31/12	5,930.		0.	5,930.
12/31/13	4,153.		0.	4,153.
12/31/14	7,773.		0.	7,773.
12/31/15	245,765.		0.	245,765.
12/31/16	9,384.		0.	9,384.
TOTAL TO SO	CHEDULE I, LINE	7		346,973.

FORM 5884 PASSIVE	ACTIVITY CREDIT L	IMITATIONS	STATEMENT 25
NAME OF ACTIVITY	CREDITS	UNALLOWED CREDITS	ALLOWED CREDITS
TOWER SQUARE CAPITAL PARTNERS			
III, LP	67.	67.	0.
STRATEGIC PARTNERS II, LP - PASSIVE - CARRYFORWARD	114.	114.	0.
TOWER SQUARE CAPITAL PARTNERS	114.	114.	0.
II, LP - CARRYFORWARD	29.	29.	0.
TOWER SQUARE CAPITAL PARTNERS			
III, LP - CARRYFORWARD	156.	156.	0.
TOTAL TO FORM 5884, LINE 4	366.	366.	0.

FORM 6765 PASSIVE	ACTIVITY CREDIT L	IMITATIONS	STATEMENT 26
NAME OF ACTIVITY	CREDITS	UNALLOWED CREDITS	ALLOWED CREDITS
TOWER SQUARE CAPITAL PARTNERS			
II, LP - CARRYFORWARD	469.	469.	0.
TOWER SQUARE CAPITAL PARTNERS			_
III, LP	358.	358.	0.
TOWER SQUARE CAPITAL PARTNERS III, LP - CARRYFORWARD	5,837.	5,837.	0.
WINTERGREEN PARTNERS FUND	5,057.	5,057.	0.
- CARRYFORWARD	1,284.	1,284.	0.
STRATEGIC PARTNERS II, LP -	,	,	
PASSIVE - CARRYFORWARD	18.	18.	0.
TOTAL TO FORM 6765, LINE 38	7,966.	7,966.	0.

FORM 8582	OTHER	R PASSIV	E ACTIVITIE	S - WORKSHEET	3 5	STATEMENT 27
		CURRENT	YEAR	PRIOR YEAR UNALLOWED	OVERALL G	AIN OR LOSS
NAME OF ACTIVITY	NET	INCOME	NET LOSS	LOSS	GAIN	LOSS
TOWER SQUARE CAPITAL PARTNERS II, LP BANNISTER HOLDINGS,		0.	-14,578.	-59,501.		-74,079.
LLC SUFFOLK TIMBER		0.	0.	-113,443.		-113,443.
HOLDINGS, LLC SMB PRIVATE EDUCATION	J	0.	0.	-173,202.		-173,202.
LOAN TRUST 2014-A TOWER SQUARE CAPITAL	•	2,452.	0.	-50,633.		-48,181.
PARTNERS III, LP PANGAEA ONE, L.P.	:	30,434. 0.	0. -1,387.	-12,102. -14,041.	18,332.	-15,428.
TOTALS		32,886.	-15,965.	-422,922.	18,332.	-424,333.

FORM 8582	ALLOCATION O	F UNALLOWE	D LOSSE	S - WORKSI	HEET 5 ST	ATEMENT 28
NAME OF ACTIVITY		O	RM R DULE	LOSS	RATIO	UNALLOWED LOSS
TOWER SQUARE CAPI LP BANNISTER HOLDING SUFFOLK TIMBER HO	S, LLC LDINGS, LLC	990-т, 990-т, 990-т,	LINE 5	113,443.	.174577513 .267344279 .408174712	70,879. 108,542. 165,719.
SMB PRIVATE EDUCA 2014-A PANGAEA ONE, L.P.	TION LOAN TRU	990-T, 990-T,		48,181. 15,428.	.113545258 .036358238	46,100. 14,761.
TOTALS			_	424,333.	1.00000000	406,001.

FORM 8582 ALLOWED LOSSES	- WORKSHEET 6	STA	ATEMENT 29
NAME OF ACTIVITY	LOSS	UNALLOWED LOSS	ALLOWED LOSS
BANNISTER HOLDINGS, LLC	113,443.	108,542.	4,901.
SUFFOLK TIMBER HOLDINGS, LLC SMB PRIVATE EDUCATION LOAN TRUST	173,202.	165,719.	7,483.
2014-A TOWER SQUARE CAPITAL PARTNERS III,	50,633.	46,100.	4,533.
LP	12,102.	0.	12,102.
PANGAEA ONE, L.P.	15,428.		667.
TOTALS	364,808.	335,122.	29,686.

FORM 8582	_			PORTED ON 2 ( ULES - WORKS)	- ст	ATEMENT 30
GROUP NO. NAME	FORM OR SCHEDULE NET LOSS	FORM OR SCHEDULE NET GAIN	OVERALL LOSS	RATIO	UNALLOWED LOSS	ALLOWED LOSS
1 TOWER SQUARE CAPITAL PARTNERS II, LP 1 TOWER SQUARE	8,308.		8,308.	.112150542	7,949.	359.
CAPITAL PARTNERS II, LP	65,771.		65,771.	.887849458	62,930.	2,841.
			74,079.	1.00000000	70,879.	3,200.

FORM 8582	SUMMARY OF PA	MARY OF PASSIVE ACTIVITIES			TEMENT 3
R R E A NAME	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
TOWER SQUARE CAPITAL PARTNERS II, LP TOWER SQUARE	0.	-8,308.	-8,308.	7,949.	359.
CAPITAL PARTNERS II, LP	-14,578.	-51,193.	-65,771.	62,930.	2,841.
BANNISTER HOLDINGS, LLC SUFFOLK TIMBER	0.	-113,443.	-113,443.	108,542.	4,901.
HOLDINGS, LLC SMB PRIVATE EDUCATION LOAN	0.	-173,202.	-173,202.	165,719.	7,483.
TRUST 2014-A TOWER SQUARE CAPITAL PARTNERS	2,452.	-50,633.	-48,181.	46,100.	2,081.
CAPITAL PARTNERS III, LP PANGAEA ONE, L.P.		•	18,332. -15,428.	14,761.	667.
TOTALS	16,921.	-422,922.	-406,001.	406,001.	18,332.
PRIOR YEAR CARRYOVERS AI	LOWED DUE TO	CURRENT YE	AR NET ACTI	VITY INCOME	14,554.
TOTAL TO FORM 8582, LINE	<b>E</b> 16				32,886.

FORM 8582-CR OTHER PASSIVE ACTIVITY CREDITS WORKSHEET 4				STATEMENT 32
NAME OF ACTIVITY	FROM FORM	CURRENT YEAR CREDITS	PRIOR YEAR UNALLOWED CREDITS	TOTAL CREDITS
TOWER SQUARE CAPITAL PARTNERS III, LP	5884/3800, LINE 32	67.		67.
TOWER SQUARE CAPITAL PARTNERS III, LP TOWER SQUARE CAPITAL	6765/3800, LINE 2 CARRYOVER	358.		358.
PARTNERS III, LP STRATEGIC PARTNERS II,			5,837.	5,837.
LP - PASSIVE TOWER SQUARE CAPITAL	CARRYOVER		114.	114.
PARTNERS II, LP TOWER SOUARE CAPITAL	CARRYOVER		29.	29.
PARTNERS III, LP STRATEGIC PARTNERS II,	CARRYOVER		156.	156.
LP - PASSIVE TOWER SQUARE CAPITAL	CARRYOVER		18.	18.
PARTNERS II, LP TOWER SQUARE CAPITAL	CARRYOVER		469.	469.
PARTNERS III, LP WINTERGREEN PARTNERS	CARRYOVER		682.	682.
FUND - CARRYFORWARD STRATEGIC PARTNERS II,	CARRYOVER		1,284. 207.	1,284.
LP - PASSIVE STRATEGIC PARTNERS II, LP - PASSIVE	CARRYOVER		42.	207. 42.
TOTALS		425.	8,838.	9,263.

FORM 8582-CR ALLOCATION OF	UNALLOWED CRED	OITS - WORK	SHEET 8 S	TATEMENT 33
NAME OF ACTIVITY	FORM TO BE REPORTED ON	CREDITS	RATIO	UNALLOWED CREDITS
TOWER SQUARE CAPITAL PARTNERS	FORM 3800,			
III, LP	LINE 33	67.	.007233078	67.
TOWER SQUARE CAPITAL PARTNERS	FORM 3800, LINE 3	358.	.038648386	358.
III, LP TOWER SQUARE CAPITAL PARTNERS	FORM 3800,	330.	.030040300	330.
III, LP	LINE 3	5,837.	.630141423	5,837.
STRATEGIC PARTNERS II, LP -	FORM 3800,	2,22.1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<b>0,00</b> .0
PASSIVE	LINE 33	114.	.012307028	114.
TOWER SQUARE CAPITAL PARTNERS	FORM 3800,			
II, LP	LINE 33	29.	.003130735	29.
TOWER SQUARE CAPITAL PARTNERS	FORM 3800,	156	016041106	156
III, LP	LINE 33 FORM 3800,	156.	.016841196	156.
STRATEGIC PARTNERS II, LP - PASSIVE	LINE 3	18.	.001943215	18.
TOWER SQUARE CAPITAL PARTNERS	FORM 3800,	10.	.001943213	10.
II, LP	LINE 3	469.	.050631545	469.
TOWER SQUARE CAPITAL PARTNERS	FORM 3800,			
III, LP	LINE 33	682.	.073626255	682.
	FORM 3800,			
WINTERGREEN PARTNERS FUND	LINE 3	1,284.	.138615999	1,284.
STRATEGIC PARTNERS II, LP -	FORM 3800,	207	000046070	207
PASSIVE STRATEGIC PARTNERS II, LP -	LINE 33 FORM 3800,	207.	.022346972	207.
PASSIVE	LINE 33	42.	.004534168	42.
TOTALS		9,263.	1.00000000	9,263.

FORM 8582-CR ALLOWE	D CREDITS - W	ORKSHEET 9	SI	TATEMENT 34
NAME OF ACTIVITY	FORM TO BE REPORTED ON		UNALLOWED CREDITS	
TOWER SQUARE CAPITAL PARTNERS	FORM 3800, LINE 33	67.	67.	0.
TOWER SQUARE CAPITAL PARTNERS III, LP TOWER SQUARE CAPITAL PARTNERS	FORM 3800, LINE 3 FORM 3800,	358.	358.	0.
III, LP STRATEGIC PARTNERS II, LP -	LINE 3 FORM 3800,	5,837.	•	0.
PASSIVE TOWER SQUARE CAPITAL PARTNERS II, LP	LINE 33 FORM 3800, LINE 33	114. 29.		0.
TOWER SQUARE CAPITAL PARTNERS	FORM 3800, LINE 33	156.		0.
STRATEGIC PARTNERS II, LP - PASSIVE TOWER SQUARE CAPITAL PARTNERS II,	LINE 3	18.	18.	0.
LP TOWER SQUARE CAPITAL PARTNERS	LINE 3 FORM 3800,	469.		0.
III, LP WINTERGREEN PARTNERS FUND	LINE 33 FORM 3800, LINE 3	682. 1,284.	682. 1,284.	0.
STRATEGIC PARTNERS II, LP - PASSIVE	FORM 3800, LINE 33	207.	•	0.
STRATEGIC PARTNERS II, LP - PASSIVE	FORM 3800, LINE 33	42.	42.	0.
TOTALS		9,263.	9,263.	0.

STATEMENT 35 FOOTNOTES

PURSUANT TO CODE SEC. 172(B)(3), THE BILL AND MELINDA GATES FOUNDATION TRUST HEREBY ELECTS TO RELINQUISH THE ENTIRE CARRYBACK PERIOD WITH RESPECT TO THE NET OPERATING LOSS INCURRED FOR THE TAX YEAR ENDED DECEMBER 31, 2017, AND WILL HAVE SUCH LOSS AVAILABLE FOR CARRYFORWARD ONLY.

## BILL & MELINDA GATES FOUNDATION TRUST EIN # 91-1663695 FORM 990-T

## CHARITABLE CONTRIBUTION CARRYFORWARD SCHEDULE FOR THE YEAR ENDED DECEMBER 31, 2017

YEAR END	CONTRIBUTIONS SUBJECT TO 50% LIMITATION	CONTRIBUTIONS SUBJECT TO 30% LIMITATION	CURRENT YEAR AMOUNT UTILIZED	50% LIMITATION CARRYFORWARD	_	)% <u>LIMITATION</u> ARRYFORWARD
12/31/13	307	2,158,000,000	-	307		2,158,000,000
12/31/14	324	2,283,500,000	-	324		2,283,500,000
12/31/15	303	2,350,000,000	-	303		2,350,000,000
12/31/16	205	2,185,000,000	-	205		2,185,000,000
12/31/17	135	2,502,000,000	-	135		2,502,000,000
TOTAL			\$ -	\$ 1,274	\$	11,478,500,000

**TOTAL CARRYFORWARD TO 12/31/2018:** 

\$ 11,478,501,274



Department of the Treasury Internal Revenue Service Ogden UT 84201

Notice	CP211A
Tax period	December 31, 2017
Notice date	May 28, 2018
Employer ID number	91-1663695
To contact us	Phone 1-877-829-5500
	FAX 801-620-5555

Page 1 of 1

BILL & MELINDA GATES FOUNDATION % WILLIAM H GATES III PO BOX 23350 SEATTLE WA 98102-0650



201003

Important information about your December 31, 2017 Form 990T

# We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your December 31, 2017 Form 990T.

Your new due date is November 15, 2018.

## What you need to do

File your December 31, 2017 Form 990T by November 15, 2018.

Visit www.irs.gov/charities to learn about approved e-File providers, what types of returns can be filed electronically, and whether you are required to file electronically.

### Additional information

- Visit www.irs.gov/cp211a
- For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).
- Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.