Comparison of the Trickers Comparison of	Form 990-T	j e	Exempt Orga	AMENDED I			x Return	1_	OMB No. 1545-0687			
Description in the investory												
Denote tests 28 for a market of the complete Parts Famous or granucation (For ca	For calendar year 2018 or other tax year beginning OCT 1, 2018, and ending SEP 30, 2019									
Description of the process between the plant of the position	Department of the Treasury	,	► Go to www.irs.gov/Form990T for instructions and the latest information.									
Print Prin		▶	Do not enter SSN numb	ers on this form as it may	be mad	e public if your organizat		50	(c)(3) Organizations Only			
The policy is a case to the name and identifying number of the parent corporation. Telephone number Separate Standard and identifying number of the parent corporation. Telephone number Separate Standard and identifying number of the parent corporation Separate Separat		ged	Name of organization (Check box if name c	hanged a	and see instructions.)		(Employe	es' trust, see			
Section Sect	B Exempt under secti	ion Print	Endowment F	or Health,	Inc.			02	-0512290			
408	X 501(c)(3)		Number, street, and roo	m or suite no. If a P.O. box	x, see ins	structions.						
Concord, NH 03301 525990	408(e) 220	O(e) Type	One Pillsbu	ry Street, I	No.	301		,	,			
Brown value of all assets F Group exemption number (See instructions) M 25 and (8.5, 36.5, 32.2. Grobe presented makes of businesses.	408A530	0(a)			r foreign	postal code						
Second Comparison Seco			Concord, NE	1 03301				5259	90			
History the number of the organizations surrelated trades of businesses. I Describe the only for first) imrelated related or business since IN See Statement 19. If only one, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. I During the tax year, was the compete Parts III-V. I During the tax year, was the compete Parts III-V. I During the tax year, was the compete Parts III-V. I During the tax year, was the compete Parts III-V. I During the tax year, was the compete of the psent composition. In the parts of the parts	C Book value of all assets at end of year		F Group exemption nun	nber (See instructions.)								
History the number of the organizations surrelated trades of businesses. I Describe the only for first) imrelated related or business since IN See Statement 19. If only one, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. I During the tax year, was the compete Parts III-V. I During the tax year, was the compete Parts III-V. I During the tax year, was the compete Parts III-V. I During the tax year, was the compete Parts III-V. I During the tax year, was the compete of the psent composition. In the parts of the parts	85,665	,322.	G Check organization ty	pe 🕟 🛛 X 501(c) corp	ooration	501(c) trust	401(a) 1	trust	Other trust			
describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. During the tax year, was the comporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No II 'Yes, enter the name and identifying number of the parent corporation. During the tax year, was the comporation as understood in the controlled group? Yes No II 'Yes, enter the name and identifying number of the parent corporation. During the tax year, was the comporation of the parent corporation. During the tax year, was the comporation of the parent corporation. During the tax year, was the composition of the parent corporation. During the tax year, was the controlled group? During the tax year, was the controlled group? During the tax year, was the controlled group of the parent corporation. During the tax year, was the controlled group of the parent corporation and the parent corporation that year. During the tax year, was the corporation of the parent corporation of the pare	H Enter the number of	the organiza	ation's unrelated trades or	businesses.	1							
Durling the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes X No If "es; etter the name and identifying number of the parent corporation.												
Durrigh te tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?	describe the first in t	the blank spa	ace at the end of the previo	ous sentence, complete Pa	rts I and	II, complete a Schedule N	/l for each additional	l trade or				
The books are in care of Susan Fulton Telephone number 603 - 228 - 2448								_				
The books are in care of Susan Fulton					nt-subsic	liary controlled group?		Yes	X No			
Part Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net								22 0	20 2442			
1a Gross receipts or sales b Less returns and allowances c Cost of goods sold (Schedule A, line 7) 3 Gross profit. Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) b Net gain (css) (from 1479, Fart II, line 17) (attach Form 4797) c Capital loss deduction for trusts 6 Income (loss) from a partmership or an Scorporation (attach statement) c Capital loss deduction for trusts 5 Income (solss) from a partmership or an Scorporation (attach statement) 6 Rent Income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annulties, royatties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule F) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule U) 12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12 14 Compensation of officers, directors, and trustees (Schedule K) 15 Salaries and wages 16 Compensation of officers, directors, and trustees (Schedule K) 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 18 Interest (attach schedule) (see instructions) 19 Taxes and licenses 19 Depreciation (attach form 4562) 20 Charitable contributions (See instructions for limitation rules) 21 Depreciation (attach form 4562) 22 Less depreciation (attach form 4562) 23 Depletion 24 Contributions to deferred compensation plans 25 Employee benefit programs 26 Excess recempt expenses (Schedule J) 27 Contributions to deferred compensation plans 28 Excess recempt expenses (Schedule J) 29 Ofter deductions Additach Schedule) 20 Urrelated business taxable income Subtract line 31 from line 30 10 Urrelated business taxable income Subtract line 31 from line 30 11 Urrelated business taxable income Subtract line 31 from line 30 12 Urrelated business taxable income. Subtract line 31 from line 30 13 Urrelated business taxable income Subtract line 31 from line 30 14 Urrelated business tax								13-4.				
Description			de or busiliess illi	Come	-	(A) Income	(B) Expenses	-	(C) Net			
2				Policina Del								
3	_		A . II = ->	_	-			+				
4a					\rightarrow			-+				
Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 46 46 46 46 46 46 46 4					\rightarrow			-				
Capital loss deduction for trusts					-		- 13 - 13 - 1					
Income (Costs) from a partnership or an S corporation (attach statement) 5 -444 553 Stmt 21 -444 553 Stmt 21 -444 553 Stmt 1 Composition (Schedule C) Toward (Schedule C)												
6 Rent income (Schedule C) 6 7 7 Turrelated debt-financed income (Schedule E) 7 7 8 Intrest, annutities, royalties, not rents from a controlled organization (Schedule F) 8 9 9 Investment income of a section 501(c)/7), (9), or (17) organization (Schedule G) 9 9 10 Exploited exempt activity income (Schedule I) 10 11 11 Advertising income (Schedule J) 12					-	-444 553	Ctmt 2	1	-111 553			
The compensation of officers, directors, and trustees (Schedule K) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers, directors, and trustees (Schedule I) The compensation of officers (Schedule I) The compensation of officers (Schedule I) The compensation of officers (Schedule I) The compensation officers (Schedule I)					-	444,000.	SUMU 2	1	-444,333.			
8					-			-				
Notestment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9					\rightarrow			-				
10				-	\rightarrow			_				
11 Advertising income (Schedule J) 11 1 1 1 1 1 1 1 1 1												
12												
13 Total. Combine lines 3 through 12 13 -444,553.					-		1	715				
Compensation of officers, directors, and trustees (Schedule K)	13 Total Combine	lines 3 throu	ich 12	***************************************		-444.553.			-444,553.			
14	Part II Deduc	ctions No	t Taken Elsewhe	re (See instructions fo	r limitat	tions on deductions.)						
15 Salaries and wages 15 16 Repairs and maintenance 16 17 Bad debts 17 18 Interest (attach schedule) (see instructions) 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 23 23 Depletion 23 24 Contributions to deferred compensation plans 24 25 Employee benefit programs 25 26 Excess exempt expenses (Schedule I) 26 27 Excess readership costs (Schedule J) 27 28 Other deductions (attach schedule) 28 29 Other deductions, Add lines 14 through 28 29 Other deductions on the operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) 31 30 Unrelated business taxable income. Subtract line 31 from line 30 32 -4444, 5533.	(Except	for contribu	utions, deductions mus	st be directly connected	with th	e unrelated business ir	ncome.)					
15 Salaries and wages 15 16 Repairs and maintenance 16 17 Bad debts 17 18 Interest (attach schedule) (see instructions) 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 23 23 Depletion 23 24 Contributions to deferred compensation plans 24 25 Employee benefit programs 25 26 Excess exempt expenses (Schedule I) 26 27 Excess readership costs (Schedule J) 27 28 Other deductions (attach schedule) 28 29 Other deductions, Add lines 14 through 28 29 Other deductions on the operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) 31 30 Unrelated business taxable income. Subtract line 31 from line 30 32 -4444, 5533.	14 Compensation of	of officers, di	rectors, and trustees (Sch	nedule K)				14				
16 Repairs and maintenance 16 17 Bad debts 17 18 Interest (attach schedule) (see instructions) 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 22b 23 Depletion 23 24 24 Contributions to deferred compensation plans 24 24 25 Employee benefit programs 25 25 26 Excess exempt expenses (Schedule J) 27 27 28 Other deductions (attach schedule) 28 28 29 Total deductions. Add lines 14 through 28 29 0. 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 -4444, 553. 31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) 31 -4444, 553.												
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27Excess readership costs (Schedule J)2728Other deductions (attach schedule)2829Total deductions. Add lines 14 through 28290 .30Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 1330-444,553.31Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)3132Unrelated business taxable income. Subtract line 31 from line 3032-444,553.	26 Excess exempt	expenses (So	chedule I)		,							
28Other deductions (attach schedule)2829Total deductions. Add lines 14 through 28290 •30Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 1330-444,553 •31Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)3132Unrelated business taxable income. Subtract line 31 from line 3032-444,553 •	27 Excess readersh	nip costs (Sc	hedule J)					27				
Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 31 from line 30 Jet 19 19 19 19 19 19 19 19 19 19 19 19 19	28 Other deduction	is (attach sch	nedule)									
Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 31 from line 30 31 -444,553.												
32 Unrelated business taxable income. Subtract line 31 from line 30			•	•					-444,553.			
							-		444 550			
823701 01-09-19 LHA For Paperwork Reduction Act Notice, see instructions.						.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			-444,553. Form 990-T (2018)			

Form 990-			0 2	1-05.	12290		rage Z
Part							
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	e instru	ctions)	,	33	-444,5	53.
34	Amounts paid for disallowed fringes				34		
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instru		Stmt	22	35		0.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the su	ım of					
	lines 33 and 34				36	-444,5	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)				37	1,(000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 3	-					
	enter the smaller of zero or line 36				38	-444,5	553.
Part I	V Tax Computation						
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)				39		0.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount of						
	Tax rate schedule or Schedule D (Form 1041)			▶	40		
41	Proxy tax. See instructions				41		
42	Alternative minimum tax (trusts only)				42		
43	Tax on Noncompliant Facility Income. See instructions				43		
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies				44		0.
Part \							
45 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a					
b	Other credits (see instructions)	45b					
C	General business credit. Attach Form 3800	45c			3 9		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)						
е					45e		
46	Subtract line 45e from line 44				46		0.
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 886	66	Other (attach s		47		
48	Total tax. Add lines 46 and 47 (see instructions)				48		0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2				49		0.
	Payments: A 2017 overpayment credited to 2018	50a					
	2018 estimated tax payments	50b					
c	Tax deposited with Form 8868	50c					
d	Foreign organizations: Tax paid or withheld at source (see instructions)	50d			0.1		
	Backup withholding (see instructions)	50e					
	Credit for small employer health insurance premiums (attach Form 8941)	50f					
	Other credits, adjustments, and payments: Form 2439	001					
A	Form 4136 Other Total	50g			31		
51	Total payments. Add lines 50a through 50g				51		
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached				52		
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed				53		
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid				54		
55	Enter the amount of line 54 you want; Credited to 2019 estimated tax		Refunded		55		
Part \		n (se			33		
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature					Yes	No
30	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization		_			163	140
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the f	-					
	here	oreign	country				x
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or tra	nefero	r to a foreign to	uet2			X
37	If "Yes," see instructions for other forms the organization may have to file.	alisiei U	i to, a loreigh ti	ust!			1
58	Enter the amount of tax-exempt interest received or accrued during the tax year						100
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stat	tements.	and to the best of	mv knowle	edge and beli	ef. it is true.	
Sign	correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer						
Here	Mul Yaldiy 2'14.23 Preside	nt				iscuss this return	with
	Signature of officer Date Title	11.			he preparer s nstructions)?	hown below (see	Tina I
			Obert	_		A 162	No
	Print Type preparer's name Preparer's signature Dat	(e	Check		if PTIN		
Paid	Melissa Magoon,	/00		mployed		1710040)
Prepa	Domest Dumm McNoil & Dowlson IIG	/09		- 5161 -		1712842	
Use C	only Firm's name Berry Dunn McNeil & Parker, LLC		Firm'	s EIN 🕨	- 0T	-052328	04
	2211 Congress St		D1		/ 207 \	775 020	7
00074	Firm's address ▶ Portland, ME 04102		Phor	t 110.		775-238	
823711 01	-09-19					Form 990-T	(2018)

Schedule A - Cost of Goods	s Sold. Enter	method of inver	itory valuation 🕨 N/	A		
1 Inventory at beginning of year	1		6 Inventory at end of y	ear		6
2 Purchases			7 Cost of goods sold.			
3 Cost of labor	3		from line 5. Enter he	re and in	Part I,	
4a Additional section 263A costs			line 2		L	7
(attach schedule)	4a		8 Do the rules of secti			Yes No
b Other costs (attach schedule)	4b		property produced o	r acquired	d for resale) apply to	
5 Total. Add lines 1 through 4b	5		the organization?			
Schedule C - Rent Income	(From Real F	Property and	Personal Property	Lease	d With Real Prope	rty)
(see instructions)						
1. Description of property						
(1)						
(2)						
(3)						
(4)						
	2. Rent receive	d or accrued				
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	than	of rent for	and personal property (if the percei personal property exceeds 50% or nt is based on profit or income)	ntage if	3(a) Deductions directly or columns 2(a) and	onnected with the income in 2(b) (attach schedule)
(1)						
(2)						
(3)						
(4)						
Total	0.	Total		0.		
(c) Total income. Add totals of columns here and on page 1, Part i, line 6, column	ı (A)	•		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	0.
Schedule E - Unrelated Deb	t-Financed	Income (see	instructions)			
			2. Gross income from		 Deductions directly connect to debt-finance 	
1. Description of debt-financed property					Charles to the Control of the Contro	(h) out an also decidence
1. Description of debt-fir	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
	nanced property			(a)		(attach schedule)
(1)	nanced property			(a)		(attach schedule)
(1) (2)	nanced property			(a)		(attach schedule)
(1) (2) (3)	nanced property			(a)		(attach schedule)
(1) (2)	5. Average of or all debt-finan	adjusted basis locable to ced property schedule)		(a)		(attach schedule) 8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1) (2) (3) (4) 4. Amount of everage acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average of or all debt-finan	locable to iced property	financed property financed property 6. Column 4 divided		(attach schedule) 7. Gross income reportable (column	(attach schedule) 8. Allocable deductions (column 6 x total of columns
(1) (2) (3) (4) 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1)	5. Average of or all debt-finan	locable to iced property	financed property f. Column 4 divided by column 5		(attach schedule) 7. Gross income reportable (column	(attach schedule) 8. Allocable deductions (column 6 x total of columns
(1) (2) (3) (4) 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2)	5. Average of or all debt-finan	locable to iced property	financed property 6. Column 4 divided by column 5		(attach schedule) 7. Gross income reportable (column	(attach schedule) 8. Allocable deductions (column 6 x total of columns
(1) (2) (3) (4) 4. Amount of everage acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2) (3)	5. Average of or all debt-finan	locable to iced property	financed property 6. Column 4 divided by column 5		(attach schedule) 7. Gross income reportable (column	(attach schedule) 8. Allocable deductions (column 6 x total of columns
(1) (2) (3) (4) 4. Amount of everage acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2)	5. Average of or all debt-finan	locable to iced property	financed property 6. Column 4 divided by column 5	E	(attach schedule) 7. Gross income reportable (column	(attach schedule) 8. Allocable deductions (column 6 x total of columns
(1) (2) (3) (4) 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2) (3) (4)	5. Average a of or al debt-finan (attach	locable to loced property schedule)	6. Column 4 divided by column 5	E	7. Gross income reportable (column 2 x column 6)	8, Allocable deductions (column 6 x total of columns 3(a) and 3(b)) Enter here and on page 1, Part I, line 7, column (B).
(1) (2) (3) (4) 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2) (3) (4)	5. Average of or all debt-finan (attach	locable to coed property schedule)	6. Column 4 divided by column 5	E	7. Gross income reportable (column 2 x column 5)	8, Allocable deductions (column 6 x total of columns 3(a) and 3(b))

				Exempt	Controlled O	rganizatio	ons			truction	
1. Name of controlled organization		Name of controlled organization dentification number			Net unrelated income (loss) (see instructions) 4. Tota paym		al of specified nents made 5. Part of column 4 included in the cont organization's gross		ed in the contr	olling	6. Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
(4)											
	Controlled Organia	zations									
7. Ta	exable income	Net unrelated inco (see instruction		9. Total	of specified payn made	nents	10. Part of colur in the controlli gross	nn 9 that ng organi income	is included ization's		ductions directly connected income in column 10
(1)	=										
(2)											
(3)											
(4)											
Totals						>			1, Part I,	Enter h	d columns 6 and 11. ere and on page 1, Part I, line 8, column (B).
Schedule	G - Investme	nt Income of a	Section	501(c)(7	7), (9), or (⁻	17) Org	anization				
	(see instr	ription of income			2. Amount of	income	3. Deduction directly conne	cted	4. Set-a		5. Total deductions and set-asides
(1)							(attach sched	ule)	(acaot) Si		(col. 3 plus col. 4)
(2)											
(3)								_			
(4)								_			
(-)				=	Enter here and o Part I, line 9, co						Enter here and on page Part I, line 9, column (B).
						0.					0
Schedule	e I - Exploited I (see instru	Exempt Activity actions)	/ Incom	e, Other	Than Adv	ertisin	g Income				
	Description of oited activity	2. Gross unrelated business income from trade or business	directly with p of ur	xpenses connected roduction nrelated ss income	4. Net incomfrom unrelated business (cominus column gain, compute through	trade or lumn 2 i 3). If a cols. 5	5. Gross inco from activity t is not unrelate business inco	hat ed	6. Exp attributa colum	ble to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)											
(2)											
(3)											
(4)											
		Enter here and on page 1, Part I, line 10, col. (A).	page	ere and on 1, Part I, 0, col. (B).							Enter here and on page 1, Part II, line 26.
Totals		0. ng Income (see	inetructio	0.							0
		Periodicals Rep			solidated	Basis					
1	. Name of periodical	2. Gross advertising income	ad	3. Direct vertising costs	4. Advert or (loss) (co col. 3). If a ga cols. 5 th	ol. 2 minus iin, compute	5. Circulat income		6. Reade		7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)					170						
(2)											
(3)											
(4)						-11/11					

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.		10000		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 devated to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

Form 990-T (2018)

Form 990-T Description of Organization's Primary Unrelated Statement 19
Business Activity

Passive Investment Income Activities

To Form 990-T, Page 1

Footnotes

Statement 20

The Organization is amending the 2018 Form 990-T in order to include Forms 926 which were inadvertently omitted from the originally filed return.

Form 990-T Income (Loss) from Partnerships	Statement 21
Description	Net Income or (Loss)
Borealis - Ordinary Business Income (loss)	-250.
AG Realty IX - Ordinary Business Income (loss)	8,966.
AG Realty X - Ordinary Business Income (loss)	-1,553.
GEM Realty - Ordinary Business Income (loss)	-44.
NGP Natural Resources - Ordinary Business Income (loss)	-75,300.
Legacy Venture VI - Ordinary Business Income (loss)	-63.
Legacy Venture VIII - Ordinary Business Income (loss)	-77.
RCP IX - Ordinary Business Income (loss)	-482.
RCP XI - Ordinary Business Income (loss)	-3,938.
RCP XII - Ordinary Business Income (loss)	-4,023.
Juniper Capital II - Ordinary Business Income (loss)	-339,998.
Juniper Capital III - Ordinary Business Income (loss)	-27,791.
Total Included on Form 990-T, Page 1, line 5	-444,553.

Form 990-T	Net	Operating Loss	Deduction	Statement 22
Tax Year	Loss Sustained	Loss Previously Applied	Loss Remaining	Available This Year
09/30/16	18,782.	0.	18,782.	18,782.
09/30/17	39,861.	0.	39,861.	39,861.
09/30/18	264,871.	0.	264,871.	264,871.
NOL Carryov	er Available This	Year	323,514.	323,514.
-				

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

OMB No. 1545-0026

Attachment Sequence No. 128

Name of transferor	Identifying number (see instruction
Endowment For Health, Inc.	
d le the transfer and West 4000 and Control of the	02-0512290
 1 Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation? 2 If the transferor was a corporation, complete questions 2a through 2d. a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by five or fewer domestic corporations? 	Yes X No
b Did the transferor remain in existence after the transfer?	
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. If not, list the name and employer identification number (EIN) of the parent corporation.	n? X Yes No
Name of parent corporation	EIN of parent corporation
d Have basis adjustments under section 367(a)(4) been made?	Yes X No
3 If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such unde complete questions 3a through 3d.	er section 367),
a List the name and EIN of the transferor's partnership.	
Name of partnership	EIN of partnership
b Did the partner pick up its pro rata share of gain on the transfer of partnership assets?	Yes X No
c Is the partner disposing of its entire interest in the partnership?	
d Is the partner disposing of an interest in a limited partnership that is regularly traded on an established	
securities market?	Yes X No
Part II Transferee Foreign Corporation Information (see instructions)	
Name of transferee (foreign corporation)	5a Identifying number, if any
AG Realty IX Investments, LP	98-1195882
Address (including country) 99 Bay St., Commerce Ct. W. C/O 152928 Canada Inc., Su oronto M5L 1B9 Canada	5b Reference ID number
7 Country code of country of incorporation or organization CA	
Foreign law characterization (see instructions) Corporation	
Is the transferee foreign corporation a controlled foreign corporation?	X Yes No
4531 12-04-18 LHA For Paperwork Reduction Act Notice, see separate instructions.	Form 926 (Rev. 11-2018

Form	1926 (Rev. 11-2018) Endowment For Health, Inc.	02-0512290	Page 3
b	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years? At the time of the transfer, did any of the transferred intangible property have an indefinite useful life? 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? If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) \$ 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 Yes	No No No
Sun	plemental Part III Information Required To Be Reported (see instructions)	res	NO
Pai	rt IV Additional Information Regarding Transfer of Property (see instructions)		
16 17	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before252 % (b) After248 % Type of nonrecognition transaction (see instructions) >> IRC Section 351		
18 a b c	Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F) Recapture under section 1503(d) Exchange gain under section 987	Yes Yes	X No X No X No X No
19	Did this transfer result from a change in entity classification?		X No
	Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c.	Yes	X No
b	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)	> \$	
С	Did the domestic corporation not recognize gain or loss on the distribution of property because the		
		Yes	No
21	Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation covered by section 367(e)(1)? See instructions	Yes	X No
	CONTROL OF CONTROL OF PARTY CONTROL OF CONTR		44 0040

(Rev. November 2018) Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property

to a Foreign Corporation

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.

OMB No. 1545-0026

Attachment Sequence No. 128

Name of transferor	Identifying number (see instruction
Endowment For Health, Inc.	02-0512290
 Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation. If the transferor was a corporation, complete questions 2a through 2d. 	oration? Yes X No
a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 36 five or fewer domestic corporations?	
b Did the transferor remain in existence after the transfer?	X 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 parer	nt corporation? X Yes No
If not, list the name and employer identification number (EIN) of the parent corporation.	it corporation? A fesNo
Name of parent corporation	EIN of parent corporation
d Have basis adjustments under section 367(a)(4) been made?	Yes X No
 If the transferor was a partner in a partnership that was the actual transferor (but is not treated a complete questions 3a through 3d. a List the name and EIN of the transferor's partnership. 	s such under section 367),
Name of partnership	EIN of partnership
b Did the partner pick up its pro rata share of gain on the transfer of partnership assets?	Yes X No
c Is the partner disposing of its entire interest in the partnership? d Is the partner disposing of an interest in a limited partnership that is regularly traded on an estab	Yes X No
securities market?	Yes X No
Part II Transferee Foreign Corporation Information (see instructions)	100 == 100
4 Name of transferee (foreign corporation)	5a Identifying number, if any
Nut Tree Offshore Fund, LTD.	
6 Address (including country) Taples Corporate Services Limited, Ugland House, So Frand Cayman KY1-1104 Cayman Islands	5b Reference ID number uth NUTTOF
7 Country code of country of incorporation or organization	1
8 Foreign law characterization (see instructions) Corporation	
9 Is the transferee foreign corporation a controlled foreign corporation? 24531 12-04-18 LHA For Paperwork Reduction Act Notice, see separate instructions.	Yes X No Form 926 (Rev. 11-201

Form 926 (Rev. 11-2018) Part III Information	Endowment For	Health, Inc.	instructions)	02-0	512290 Page 2
Section A - Cash	i negaranig iransi	er or Property (See	instructionsj		
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	09/30/2019		1,000,000.		
	nainder of Part III and go				X Yes No
Section B - Other Pro Type of	(a)		(c)	(d)	(e)
property	Date of transfer	(b) Description of property	Fair market value on date of transfer	Cost or other basis	Gain recògnized on transfer
Stock and securities					
Inventory					
Other property (not listed under another category)					
Property with built-in loss					
Totals					
(including a branch the lif "Yes," continue to learn the transferee foreign could lif "Yes," continue to learn the transferred lif "Did the transferor transferor transfer lift".	domestic corporation that is a foreign disregardaline 12c. If "No," skip line transfer, was the domes rporation?	at transferred substantially ed entity) to a specified 10 as 12c and 12d, and go to stic corporation a U.S. sha 12d, and go to line 13. gross income as required in section 367(d)(4)?	all of the assets of a fore 1%-owned foreign corpora line 13. reholder with respect to t	eign branch ution?	Yes No Yes No Yes No
Section C - Intangibl	e Property Subject	to Section 367(d)			
Type of property	(a) Date of transfer	(b) Description of property	(c) (d) Useful Arm's length pondate of tran		(f) Income inclusion for year of transfer
Property described n sec. 367(d)(4)					
Totals					
				F	Form 926 (Rev. 11-2018)

Form	926 (Rev. 11-2018) Endowment For Health, Inc.	02-0512290	Page 3
b	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years? At the time of the transfer, did any of the transferred intangible property have an indefinite useful life? 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? If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) \$\infty\$\$ 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 Yes	No No No No
Sup	plemental Part III Information Required To Be Reported (see instructions)		
	1 II Additional Information Deposition Transfer of Property (accidental)		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before		
17	(a) Before000 % (b) After110 % Type of nonrecognition transaction (see instructions) > IRC Section 351		
18	Indicate whether any transfer reported in Part III is subject to any of the following.		
а	Gain recognition under section 904(f)(3)	Yes	X No
b	Gain recognition under section 904(f)(5)(F)		X No
С	Recapture under section 1503(d)		X No
d	Exchange gain under section 987		X No
19	Did this transfer result from a change in entity classification?		X No
		Yes	X No
	If "Yes," complete lines 20b and 20c.		
h	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		
		Yes	No
21	Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation		
	covered by section 367(e)(1)? See instructions	Yes	X No
	Ph./	Form 926 (Re	ev. 11-2018)

(Rev. November 2018) Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property

to a Foreign Corporation

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.

OMB No. 1545-0026

Attachment Sequence No. 128

Part I U.S. Transferor Information (see instructions)	
Name of transferor	Identifying number (see instructions)
Endowment For Health, Inc.	
	02-0512290
1 Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation?	Yes X No
2 If the transferor was a corporation, complete questions 2a through 2d.	
a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c)) by	
five or fewer domestic corporations?	Yes X No
b Did the transferor remain in existence after the transfer?	
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 corpor	ation? X Yes No
If not, list the name and employer identification number (EIN) of the parent corporation.	
Name of parent corporation	EIN of parent corporation
Hame of parent outportation	Ent of parent corporation
	- T
d Have basis adjustments under section 367(a)(4) been made?	Yes X No
3 If the transferor was a partner in a partnership that was the actual transferor (but is not treated as such u	inder section 367),
complete questions 3a through 3d.	
a List the name and EIN of the transferor's partnership.	
Name of partnership	EIN of partnership
·	
A BOUND IN THE STATE OF THE STA	
b Did the partner pick up its pro rata share of gain on the transfer of partnership assets?	
c Is the partner disposing of its entire interest in the partnership?	Yes X No
d Is the partner disposing of an interest in a limited partnership that is regularly traded on an established	
securities market? Part II Transferee Foreign Corporation Information (see instructions)	Yes X No
4 Name of transferee (foreign corporation)	5a Identifying number, if any
** 1 0 1/1 D 1	
Varde Credit Partners, Ltd.	
6 Address (including country)	5b Reference ID number
45 Market Street, Suite 3205, 2nd Fl, C/O SS&C Fund Ser	173.00000
Camana Bay, Grand Cayman KY1-9003 Cayman Islands	VARDECP
7 Country code of country of incorporation or organization	
СЈ	
8 Foreign law characterization (see instructions)	
Corporation	
9 Is the transferee foreign corporation a controlled foreign corporation?	Yes X No
824531 12-04-18 LHA For Paperwork Reduction Act Notice, see separate instructions.	Yes X No Form 926 (Rev. 11-2018)

Totals

Form 926 (Rev. 11-2018)

Form	926 (Rev. 11-2018) Endowment For Health, Inc.	02-0512290	Page 3
b	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years? At the time of the transfer, did any of the transferred intangible property have an indefinite useful life? 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? If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) \$ 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 Yes	No No No No
Sup	plemental Part III Information Required To Be Reported (see instructions)		
Pai	rt IV Additional Information Regarding Transfer of Property (see instructions)		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before		
17	Type of nonrecognition transaction (see instructions)		
18	Indicate whether any transfer reported in Part III is subject to any of the following.		
а	Gain recognition under section 904(f)(3)	Yes	X No
b	Gain recognition under section 904(f)(5)(F)	Yes	X No
C	Recapture under section 1503(d)		X No
d	Exchange gain under section 987	Yes	X No
19	Did this transfer result from a change in entity classification?	Yes	X No
20 a	Did a domestic corporation make a distribution of property covered by section 367(e)(2)? (see instructions) If "Yes," complete lines 20b and 20c.	Yes	X No
b	Enter the total amount of gain or loss recognized pursuant to Regulations section 1.367(e)-2(b)	> \$	
С	Did the domestic corporation not recognize gain or loss on the distribution of property because the	S 0	
	property was used in the conduct of U.S. trade or business under Regulations section 1.367(e)-2(b)(2)?	Yes	No
21	Did a domestic corporation make a section 355 distribution of stock in a foreign controlled corporation		
	covered by section 367(e)(1)? See instructions	Yes	X No
		Form 926 (Re	ev. 11-2018

Department of the Treasury Internal Revenue Service

Return by a U.S. Transferor of Property

to a Foreign Corporation

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Α	ttac	h te	o vour	income	tax return	for the ve	ear of the	transfer or	distribution.

Attachment Sequence No. 128

OMB No. 1545-0026

Part I U.S. Transferor Information (see instructions)	
Name of transferor	Identifying number (see instructions)
Endowment For Health, Inc.	,
·	02-0512290
1 Is the transferee a specified 10%-owned foreign corporation that is not a controlled foreign corporation	
2 If the transferor was a corporation, complete questions 2a through 2d.	100
a If the transfer was a section 361(a) or (b) transfer, was the transferor controlled (under section 368(c	s)) by
	" ·
five or fewer domestic corporations? b Did the transferor remain in existence after the transfer?	
	X 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 of	orporation? X Yes No
If not, list the name and employer identification number (EIN) of the parent corporation.	
Name of parent corporation	EIN of parent corporation
d Have basis adjustments under section 367(a)(4) been made?	Yes X No
3 If the transferor was a partner in a partnership that was the actual transferor (but is not treated as so	uch under section 367),
complete questions 3a through 3d.	
a List the name and EIN of the transferor's partnership.	
Name of partnership	EIN of partnership
ranto or paratoremp	Ent of partitorsing
2	
b Did the partner pick up its pro rata share of gain on the transfer of partnership assets?	
c Is the partner disposing of its entire interest in the partnership?	
d Is the partner disposing of an interest in a limited partnership that is regularly traded on an establish	
securities market?	Yes X No
Part II Transferee Foreign Corporation Information (see instructions)	
4 Name of transferee (foreign corporation)	5a Identifying number, if any
Maria Talkas Caribal Office Ton 1 711	
Nyes Ledge Capital Offshore Fund, Ltd.	
6 Address (including country)	5b Reference ID number
901 Elgin Avenue, George Town C/O Elian Fiduciary Svo	
Grand Cayman KY1-9007 Cayman Islands	NYESLCOF
7 Country code of country of incorporation or organization	
CJ	
8 Foreign law characterization (see instructions)	
Corporation	
	Yes X No Form 926 (Rev. 11-2018)

	n 926 (Rev. 11-2018) Endowment For Health, Inc.	02-0512290	Page 3
b	Did the transferor transfer any intangible property that, at the time of the transfer, had a useful life reasonably anticipated to exceed 20 years? At the time of the transfer, did any of the transferred intangible property have an indefinite useful life? 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? If the answer to line 14c is "Yes," enter the total estimated anticipated income or cost reduction attributable to the intangible property's, or properties', as applicable, use(s) beyond the 20-year period described in Regulations section 1.367(d)-1(c)(3)(ii) 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 Yes	No No No No No
Sup	oplemental Part III Information Required To Be Reported (see instructions)		
_			
Pa	rt IV Additional Information Regarding Transfer of Property (see instructions)		
16	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before000_% (b) After1010_%		
16 17	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before		
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before		[¥] M.
16 17 18	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before		X No
16 17 18 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before000_% (b) After1.010_% Type of nonrecognition transaction (see instructions) > IRC Section 351 Indicate whether any transfer reported in Part III is subject to any of the following. Gain recognition under section 904(f)(3) Gain recognition under section 904(f)(5)(F)	Yes	X No
16 17 18 a b	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes	X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes	X No X No X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes	X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No
16 17 18 a b c d 19 20 a	Enter the transferor's interest in the transferee foreign corporation before and after the transfer. (a) Before	Yes Yes Yes Yes Yes Yes Yes Yes	X No X No X No X No X No