

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

OMB No. 1545-0047

2021

Department of the Treasury
Internal Revenue Service

For calendar year 2021 or other tax year beginning _____, 2021, and ending _____,

► Go to www.irs.gov/Form990T for instructions and the latest information.

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

Mize CPAs Inc.
Open to Public Inspection for
501(c)(3) Organizations OnlyA Check box if address changed.

B Exempt under section

 501(c)(3) 408(e) 220(e) 408A 530(a) 529(a) 529APrint
or
TypeTOPEKA COMMUNITY FOUNDATION
5431 SW 29TH ST. #300
TOPEKA, KS 66614-4195 Check box if name changed and see instructions.)

C Book value of all assets at end of year..... ► 100,471,763.

G Check organization type..... ► 501(c) corporation 501(c) trust 401(a) trust Other trustH Check if filing only to..... ► Claim credit from Form 8941 Claim a refund shown on Form 2439I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation..... ►

J Enter the number of attached Schedules A (Form 990-T)..... ► 1

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?.... ► Yes No

If 'Yes,' enter the name and identifying number of the parent corporation ... ►

L The books are in care of ► MARSHA L. POPE 5431 SW 29TH ST., SUITE 300 TOPEKA KS Telephone number ► 785-272-4804

Part I Total Unrelated Business Taxable Income

1	58,150.
2	
3	58,150.
4	
5	58,150.
6	
7	58,150.
8	1,000.
9	
10	1,000.
11	57,150.

Part II Tax Computation

1	12,002.
2	
3	
4	
5	
6	
7	12,002.

BAA For Paperwork Reduction Act Notice, see instructions.

Form 990-T (2021)

Part III Tax and Payments

1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116).....	1a		
b Other credits (see instructions). SEE STATEMENT 1.....	1b	3,377.	
c General business credit. Attach Form 3800 (see instructions).....	1c		
d Credit for prior year minimum tax (attach Form 8801 or 8827).....	1d		
e Total credits. Add lines 1a through 1d.....	1e	3,377.	
2 Subtract line 1e from Part II, line 7.....	2	8,625.	
3 Other amounts due. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement).....	3		
4 Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here. ►	4	8,625.	
5 Current net 965 tax liability paid from Form 965-A, Part II, column (k).....	5		
6a Payments: A 2020 overpayment credited to 2021.	6a	1,233.	
b 2021 estimated tax payments. Check if section 643(g) election applies ► <input type="checkbox"/>	6b	18,767.	
c Tax deposited with Form 8868	6c		
d Foreign organizations: Tax paid or withheld at source (see instructions).....	6d		
e Backup withholding (see instructions).....	6e		
f Credit for small employer health insurance premiums (attach Form 8941).....	6f		
g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total ►	6g		
7 Total payments. Add lines 6a through 6g.....	7	20,000.	
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached..... ► <input type="checkbox"/>	8		
9 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed ►	9		
10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid ►	10	11,375.	
11 Enter the amount of line 10 you want: Credited to 2022 estimated tax ►	11	0.	

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

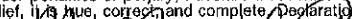
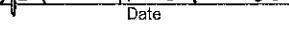
- 1 At any time during the 2021 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign country here ► _____
 - 2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?.. If "Yes," see instructions for other forms the organization may have to file.
 - 3 Enter the amount of tax-exempt interest received or accrued during the tax year: ► \$ _____ 0.
 - 4 Enter available pre-2018 NOL carryovers here ► \$ _____ Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.
 - 5 Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.

Business Activity Code	Available post-2017 NOL carryover
-----	\$ -----
-----	\$ -----
-----	\$ -----
-----	\$ -----

- 6a** Did the organization change its method of accounting? (see instructions).
b If 6a is 'Yes', has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If 'No', explain in Part V.

Part V Supplemental Information

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

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.  Marna D. Cope <u>11-29-2022</u> PRESIDENT Signature of officer Date Title					May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature	<u>YVONNE G. BROWNELL</u>	Date	Check <input type="checkbox"/> if self-employed	PTIN
				<u>Yvonne G Brownell</u>	<u>11/29/2022</u>		<u>P00129973</u>
	Firm's name	► <u>MIZE CPAS INC.</u>				Firm's EIN	<u>48-0882363</u>
	Firm's address	► <u>534 S KANSAS AVE, #400 TOPEKA, KS 66603</u>				Phone no.	<u>785-233-0536</u>

2021

FORM 990-T, PART V, SUPPLEMENTAL INFORMATION

PAGE 3

TOPEKA COMMUNITY FOUNDATION

48-0972106

**STATEMENT 1
FORM 990-T, PART III, LINE 1B
OTHER CREDITS**

FOREIGN TAX CREDIT SEE ATTACHED FORM 1118

3,377.
TOTAL \$ 3,377.

SCHEDULE A
(Form 990-T)

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

OMB No. 1545-0047

2021

Department of the Treasury
Internal Revenue Service

► Go to www.irs.gov/Form990T for instructions and the latest information.

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

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

A Name of the organization	B Employer identification number
TOPEKA COMMUNITY FOUNDATION	48-0972106
C Unrelated business activity code (see instructions) ► 900099	D Sequence: 1 of 1

E Describe the unrelated trade or business ► PASS-THROUGH PARTNERSHIP UBTI

Part I	Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances	c Balance ►		
2	Cost of goods sold (Part III, line 8).....	1c		
3	Gross profit. Subtract line 2 from line 1c.....	2		
4a	Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions.....	3		
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions.....	4a		
c	Capital loss deduction for trusts.....	4b		
5	Income (loss) from a partnership or an S corporation (attach statement)..... SEE STATEMENT 1	4c		
6	Rent income (Part IV).....	5	69,842.	69,842.
7	Unrelated debt-financed income (Part V).....	6		
8	Interest, annuities, royalties, and rents from a controlled organization (Part VI).....	7		
9	Investment income of section 501(c)(7), (9), or (17) organizations (Part VII).....	8		
10	Exploited exempt activity income (Part VIII).....	9		
11	Advertising income (Part IX).....	10		
12	Other income (see instructions; attach statement).....	11		
13	Total. Combine lines 3 through 12.....	12		
		13	69,842.	69,842.

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

1	Compensation of officers, directors, and trustees (Part X).....	1	
2	Salaries and wages	2	
3	Repairs and maintenance.....	3	
4	Bad debts.....	4	
5	Interest (attach statement). See instructions.....	5	
6	Taxes and licenses.....	6	5,072.
7	Depreciation (attach Form 4562). See instructions.....	7	
8	Less depreciation claimed in Part III and elsewhere on return	8a	
9	Depletion.....	9	
10	Contributions to deferred compensation plans.....	10	
11	Employee benefit programs.....	11	
12	Excess exempt expenses (Part VIII).....	12	
13	Excess readership costs (Part IX).....	13	
14	Other deductions (attach statement)..... SEE STATEMENT 2	14	6,620.
15	Total deductions. Add lines 1 through 14.....	15	11,692.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C).....	16	58,150.
17	Deduction for net operating loss. See instructions.....	17	
18	Unrelated business taxable income. Subtract line 17 from line 16.....	18	58,150.

BAA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2021

Part III Cost of Goods Sold Enter method of inventory valuation ►

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

9 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? Yes No

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

- 1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.**

A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>

- | | A | B | C | D |
|---------------------------------------------------------------------------------------------------------------------------------------------|---|---|---|---|
| 2 Rent received or accrued | | | | |
| a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) | | | | |
| b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) | | | | |
| c Total rents received or accrued by property
Add lines 2a and 2b, columns A through D... | | | | |
| 3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A) ... ► | | | | |
| 4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) | | | | |
| 5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B).... ► | | | | |

Part V Unrelated Debt-Financed Income (see instructions)

- 1 Description of debt-financed property (street address, city, state, ZIP code).** Check if a dual-use. See instructions.

A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>

- | | A | B | C | D |
|----------------------------------------------------------------------------------------------------------------------------|---|---|---|---|
| 2 Gross income from or allocable to debt-financed property..... | | | | |
| 3 Deductions directly connected with or allocable to debt-financed property | | | | |
| a Straight line depreciation (attach statement) | | | | |
| b Other deductions (attach statement)..... | | | | |
| c Total deductions (add lines 3a and 3b, columns A through D) | | | | |
| 4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)..... | | | | |
| 5 Average adjusted basis of or allocable to debt-financed property (attach statement) .. | | | | |
| 6 Divide line 4 by line 5 | % | % | % | % |
| 7 Gross income reportable. Multiply line 2 by line 6 | | | | |
| 8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)..... ► | | | | |
| 9 Allocable deductions. Multiply line 3c by line 6..... | | | | |
| 10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)..... ► | | | | |
| 11 Total dividends-received deductions included in line 10 | | | | |

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

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

Nonexempt Controlled Organizations

7 Taxable income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

Add columns 5 and 10. Enter here and on Part I, line 8, column (A)

Add columns 6 and 11. Enter here and on Part I, line 8, column (B)

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

1 Description of income	2 Amount of income	3 Deductions directly connected (attach statement)	4 Set-asides (attach statement)	5 Total deductions and set-asides (add columns 3 and 4)
(1)				
(2)				
(3)				
(4)				

	Add amounts in column 2. Enter here and on Part I, line 9, column (A)			Add amounts in column 5. Enter here and on Part I, line 9, column (B)
--	-----------------------------------------------------------------------	--	--	-----------------------------------------------------------------------

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

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

BAA

Schedule A (Form 990-T) 2021

Part IX Advertising Income

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

- A
 B
 C
 D

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

	A	B	C	D
2 Gross advertising income				
a Add columns A through D. Enter here and on Part I, line 11, column (A)..... ►				
3 Direct advertising costs by periodical.....				
a Add columns A through D. Enter here and on Part I, line 11, column (B)..... ►				
4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8.				
5 Readership costs.....				
6 Circulation income.....				
7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero.				
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7.				
a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13. ►				

Part X Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		%	
		%	
		%	
		%	

Total. Enter here and on Part II, line 1..... ►

Part XI Supplemental Information (see instructions)

2021

FEDERAL STATEMENTS

PAGE 1

TOPEKA COMMUNITY FOUNDATION

48-0972106

STATEMENT 1

SCHEDULE A, PART I, LINE 5

INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS

NAME	GROSS INCOME	DEDUCTIONS	INCOME (LOSS)
MORGAN CREEK II	\$ 7,441.	\$ 0.	\$ 7,441.
MORGAN CREEK III	17,428.	0.	17,428.
MORGAN CREEK IV	3,336.	0.	3,336.
MORGAN CREEK V	41,637.	0.	41,637.
TOTAL	<u>\$ 69,842.</u>	<u>\$ 0.</u>	<u>\$ 69,842.</u>

STATEMENT 2

SCHEDULE A, PART II, LINE 14

OTHER DEDUCTIONS

INVESTMENT EXPENSES ALLOCATED TO UBTI.....	\$ 6,620.
TOTAL	<u>\$ 6,620.</u>

Schedule B Foreign Tax Credit (Report all foreign tax amounts in U.S. dollars.)**Part I – Foreign Taxes Paid, Accrued, and Deemed Paid (see instructions)**

2 Foreign Taxes Paid or Accrued (attach schedule showing amounts in foreign currency and conversion rates used)

1 Credit is Claimed for Taxes (check one):		<input type="checkbox"/> Paid	<input checked="" type="checkbox"/> Accrued	Tax Withheld at Source on:			
Date Paid	Date Accrued			(a) Dividends	(b) Distributions of Previously Taxed Earnings and Profits	(c) Branch Remittances	(d) Interest
A	12/31/21						
B							
C							
Totals (add lines A through C)							25,079.

2 Foreign Taxes Paid or Accrued (attach schedule showing amounts in foreign currency and conversion rates used) (continued)

Other Foreign Taxes Paid or Accrued on:		① Total Foreign Taxes Paid or Accrued (add columns 2(a) through 2(f))				③ Tax Deemed Paid (see instructions)	
(g) Sales	(h) Services Income			(i) Other			
A						25,079.	
B							
C							
Totals							25,079.

Part II – Separate Foreign Tax Credit (Complete a separate Part II for each applicable category of income.)

- 1a Total foreign taxes paid or accrued (total from Part I, column 2①) **25,079.**
- b Foreign taxes paid or accrued by the corporation during prior tax years that were suspended due to the rules of section 909 and for which the related income is taken into account by the corporation during the current tax year (see instructions). **1b**
- 2 Total taxes deemed paid (total from Part I, column 3) **2.**
- 3 Reductions of taxes paid, accrued, or deemed paid (enter total from Schedule G, Part I) **3 ()**
- 4 Taxes reclassified under high-tax kickout **4**
- 5 Enter the sum of any carryover of foreign taxes (from Schedule K, line 3, column (xiv), and from Schedule I, Part III, line 3) plus any carrybacks to the current tax year. **5**
- 6 Total foreign taxes (combine lines 1a through 5) **10,751.3.**
- 7 Enter the amount from the applicable column of Schedule J, Part I, line 11 (see instructions). If Schedule J is not required to be completed, enter the result from the "Totals" line of column 17 of the applicable Schedule A. **7 16,082.**
- 8a Total taxable income from all sources (enter taxable income from the corporation's tax return) **8a 57,150.**
- b Adjustments to line 8a (see instructions) **8b**
- c Subtract line 8b from line 8a **8c 57,150.**
- 9 Divide line 7 by line 8c. Enter the resulting fraction as a decimal (see instructions). If line 7 is greater than line 8c, enter 1 **9 0.28149000.**
- 10 Total U.S. income tax against which credit is allowed (regular tax liability (see section 26(b)) minus any American Samoa economic development credit). **10 12,002.**
- 11 Multiply line 9 by line 10. **11 3,377.**
- 12 Increase in limitation (Section 960(c)) **12**
- 13 Credit limitation (add lines 11 and 12) (see instructions) **13 3,377.**
- 14 Separate foreign tax credit (enter the smaller of line 6 or line 13). Enter here and on the appropriate line of Part III. **14 3,377.**

Form 1118 (Rev. 12-2021)

BAA

SCHEDULE K
(Form 1118)(Rev. December 2018)
Department of the Treasury
Internal Revenue Service**Foreign Tax Carryover Reconciliation Schedule**For calendar year 2021, or other tax year beginning _____, and ending _____.

► See separate instructions.

► Attach to Form 1118.

► Go to www.irs.gov/Form1118 for instructions and the latest information.

OMB No. 1545-0123

Name of corporation

TOPEKA COMMUNITY FOUNDATION

Use a separate Schedule K (Form 1118) for each category of income (see instructions).

a Separate Category (enter code—see instructions).

b If code 901j is entered on line a, enter the country code for the sanctioned country (see instructions).

c If code RBT is entered on line a, enter the country code for the treaty country (see instructions).

Employer identification number

48-0972106

PAS

PAS

PAS

PAS

Foreign Tax Carryover Reconciliation	① 10th Preceding Tax Year	⑩ 9th Preceding Tax Year	⑪ 8th Preceding Tax Year	⑫ 7th Preceding Tax Year	⑬ 6th Preceding Tax Year	⑭ 5th Preceding Tax Year	⑮ Subtotal (add columns ① through ⑯)
1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule K (see instructions))			6,997.	7,501.	5,087.	15,662.	35,247.
2 Adjustments to line 1 (enter description – see instructions):							
a Carryback adjustment (see instructions)							
b Adjustments for section 905(c) redeterminations (see instructions)			-318.				
c USED IN 2020							-318.
d							
e							
f							
g							
3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2)		6,679.	7,501.	5,087.	15,662.	34,929.	
4 Foreign tax carryover used in current tax year (enter as a negative number)							
5 Foreign tax carryover expired unused in current tax year (enter as a negative number)							
6 Foreign tax carryover generated in current tax year							
7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)							
Combine lines 3 through 7	-0-	6,679.	7,501.	5,087.	15,662.	34,929.	

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 1118.**Schedule K (Form 1118) (Rev. 12-2018)**

Schedule K (Form 1118) (Rev. 12-2018) TOPEKA COMMUNITY FOUNDATION

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	(viii) Subtotal from page 1 (enter the amounts from column (vii) on page 1)	(ix) 4th Preceding Tax Year	(x) 3rd Preceding Tax Year	(xi) 2nd Preceding Tax Year	(xii) 1st Preceding Tax Year	(xiii) Current Tax Year	(xiv) Totals (add columns (viii) through (xiii))
1 Foreign tax carryover from the prior tax year (enter amounts from the appropriate columns of line 8 of the prior year Schedule K (see instructions))	35,247.	7,352.		10,475.	54,757.		107,831.
2 Adjustments to line 1 (enter description – see instructions):							
a Carryback adjustment (see instructions)							
b Adjustments for section 905(c) redeterminations (see instructions)							
c USED IN 2020	-318.						-318.
d							
e							
f							
g							
3 Adjusted foreign tax carryover from prior tax year (combine lines 1 and 2). Include the column (xiv) total on the current year Form 1118, Schedule B, Part II, line 5	34,929.	7,352.		10,475.	54,757.		107,513.
4 Foreign tax carryover used in current tax year (enter as a negative number)							
5 Foreign tax carryover expired unused in current tax year (enter as a negative number)							
6 Foreign tax carryover generated in current tax year							
7 Actual or estimated amount of line 6 to be carried back to prior tax year (enter as a negative number)							
8 Foreign tax carryover to the following tax year. Combine lines 3 through 7	34,929.	7,352.		10,475.	54,757.	21,702.	129,215.

Schedule K (Form 1118) (Rev. 12-2018)

2021

FEDERAL STATEMENTS

PAGE 1

TOPEKA COMMUNITY FOUNDATION

48-0972106

**STATEMENT 3
FORM 1118, SCHEDULE A, COLUMN 11
OTHER INCOME**

OC	MORGAN CREEK II K-1 ("FRGN TAX CREDIT").....	\$ 6,113.
	MORGAN CREEK III K-1 ("FRGN TAX CREDIT").....	32,107.
	MORGAN CREEK IV K-1 ("FRGN TAX CREDIT").....	2,114.
	MORGAN CREEK V K-1 ("FRGN TAX CREDIT").....	5,964.
	MORGAN CREEK BRIC PLUS K-1 ("FRGN TAX CR.....	42.

	TOTAL	\$ 46,340.
		<u>\$ 46,340.</u>

**STATEMENT 4
FORM 1118, SCHEDULE A, COLUMN 13J
OTHER ALLOCABLE DEDUCTIONS**

OC	OTHER ALLOCABLE DEDUCTIONS	\$ 30,258.

	TOTAL	\$ <u>30,258.</u>