

Form **990-T**

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

OMB No. 1545-0687

For calendar year 2017 or other tax year beginning 07/01, 2017, and ending 06/30, 2018.

# 2017

Department of the Treasury  
Internal Revenue Service

▶ Go to [www.irs.gov/Form990T](http://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

<p><b>A</b> <input type="checkbox"/> Check box if address changed</p> <p><b>B</b> Exempt under section</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10px;"><input checked="" type="checkbox"/></td> <td style="width: 10px;">501(C)(3)</td> <td style="width: 10px;"><input type="checkbox"/></td> <td style="width: 10px;">408(e)</td> <td style="width: 10px;"><input type="checkbox"/></td> <td style="width: 10px;">220(e)</td> </tr> <tr> <td><input type="checkbox"/></td> <td>408A</td> <td><input type="checkbox"/></td> <td>530(a)</td> <td><input type="checkbox"/></td> <td>529(a)</td> </tr> </table> <p><b>C</b> Book value of all assets at end of year</p> <p style="text-align: right;">212,334,459.</p>	<input checked="" type="checkbox"/>	501(C)(3)	<input type="checkbox"/>	408(e)	<input type="checkbox"/>	220(e)	<input type="checkbox"/>	408A	<input type="checkbox"/>	530(a)	<input type="checkbox"/>	529(a)	<p><b>Print or Type</b></p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.)</p> <p style="text-align: center;">DUCKS UNLIMITED, INC.</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions.</p> <p style="text-align: center;">ONE WATERFOWL WAY</p> <p>City or town, state or province, country, and ZIP or foreign postal code</p> <p style="text-align: center;">MEMPHIS, TN 38120</p>	<p><b>D</b> Employer identification number (Employees' trust, see instructions.)</p> <p style="text-align: center;">13-5643799</p> <p><b>E</b> Unrelated business activity codes (See instructions.)</p> <p style="text-align: center;">511120</p>
<input checked="" type="checkbox"/>	501(C)(3)	<input type="checkbox"/>	408(e)	<input type="checkbox"/>	220(e)										
<input type="checkbox"/>	408A	<input type="checkbox"/>	530(a)	<input type="checkbox"/>	529(a)										
<p><b>F</b> Group exemption number (See instructions.) ▶</p>		<p><b>G</b> Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p>													

**H** Describe the organization's primary unrelated business activity. ▶ MAGAZINE ADVERTISING

**I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? . . . . . ▶  Yes  No  
If "Yes," enter the name and identifying number of the parent corporation. ▶

**J** The books are in care of ▶ EARL H. GROCHAU Telephone number ▶ 901-758-3825

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
<b>1a</b> Gross receipts or sales			
<b>b</b> Less returns and allowances			
<b>c</b> Balance ▶	<b>1c</b>		
<b>2</b> Cost of goods sold (Schedule A, line 7)			
<b>3</b> Gross profit. Subtract line 2 from line 1c			
<b>4a</b> Capital gain net income (attach Schedule D)			
<b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
<b>c</b> Capital loss deduction for trusts			
<b>5</b> Income (loss) from partnerships and S corporations (attach statement)	439.	ATCH 1	439.
<b>6</b> Rent income (Schedule C)			
<b>7</b> Unrelated debt-financed income (Schedule E)			
<b>8</b> Interest, annuities, royalties, and rents from controlled organizations (Schedule F)			
<b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			
<b>10</b> Exploited exempt activity income (Schedule I)			
<b>11</b> Advertising income (Schedule J)	2,500,501.	1,707,057.	793,444.
<b>12</b> Other income (See instructions; attach schedule)	6,264.	ATCH 2	6,264.
<b>13</b> Total. Combine lines 3 through 12	2,507,204.	1,707,057.	800,147.

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

<b>14</b> Compensation of officers, directors, and trustees (Schedule K)		<b>14</b>	
<b>15</b> Salaries and wages		<b>15</b>	
<b>16</b> Repairs and maintenance		<b>16</b>	
<b>17</b> Bad debts		<b>17</b>	
<b>18</b> Interest (attach schedule)		<b>18</b>	
<b>19</b> Taxes and licenses		<b>19</b>	
<b>20</b> Charitable contributions (See instructions for limitation rules) ATTACHMENT 3		<b>20</b>	11.
<b>21</b> Depreciation (attach Form 4562)	<b>21</b>		
<b>22</b> Less depreciation claimed on Schedule A and elsewhere on return	<b>22a</b>	<b>22b</b>	
<b>23</b> Depletion		<b>23</b>	
<b>24</b> Contributions to deferred compensation plans		<b>24</b>	
<b>25</b> Employee benefit programs		<b>25</b>	
<b>26</b> Excess exempt expenses (Schedule I)		<b>26</b>	
<b>27</b> Excess readership costs (Schedule J)		<b>27</b>	793,444.
<b>28</b> Other deductions (attach schedule) ATTACHMENT 4		<b>28</b>	1,920.
<b>29</b> Total deductions. Add lines 14 through 28		<b>29</b>	795,375.
<b>30</b> Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13		<b>30</b>	4,772.
<b>31</b> Net operating loss deduction (limited to the amount on line 30)		<b>31</b>	
<b>32</b> Unrelated business taxable income before specific deduction. Subtract line 31 from line 30		<b>32</b>	4,772.
<b>33</b> Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)		<b>33</b>	1,000.
<b>34</b> Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32		<b>34</b>	3,772.

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

(Rev. January 2017)

OMB No. 1545-1709

Department of the Treasury  
Internal Revenue Service

► **File a separate application for each return.**  
► **Information about Form 8868 and its instructions is at [www.irs.gov/form8868](http://www.irs.gov/form8868).**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile), click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

**Automatic 6-Month Extension of Time.** Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Enter filer's identifying number, see instructions	
	Name of exempt organization or other filer, see instructions. <u>Ducks Unlimited, Inc.</u>	Employer identification number (EIN) or <u>13-5643799</u>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <u>One Waterfowl Way</u>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <u>Memphis, TN 38120</u>	

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

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of ► Earl H. Grochau

Telephone No. ► 901-758-3825 Fax No. ► 901-758-3824

- If the organization does not have an office or place of business in the United States, check this box . . . . .
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box . . . . .  . If it is for part of the group, check this box . . . . .  and attach a list with the names and EINs of all members the extension is for.

**1** I request an automatic 6-month extension of time until 05/15, 20 19, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

►  calendar year 20 \_\_\_\_ or

►  tax year beginning 07/01, 20 17, and ending 06/30, 20 18.

**2** If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

<b>3a</b> If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$
<b>b</b> If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$ <u>0</u>

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

Part III Tax Computation

Table with 3 columns: Description, Line Number, Amount. Includes rows for Organizations Taxable as Corporations (35), Trusts Taxable at Trust Rates (36), Proxy tax (37), Alternative minimum tax (38), Tax on Non-Compliant Facility Income (39), and Total (40).

Part IV Tax and Payments

Table with 3 columns: Description, Line Number, Amount. Includes rows for Foreign tax credit (41a-d), Total credits (41e), Subtract line 41e (42), Other taxes (43), Total tax (44), Payments (45a-f), Total payments (46), Estimated tax penalty (47), Tax due (48), Overpayment (49), and Refunded (50).

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

Table with 3 columns: Question, Yes, No. Includes questions 51, 52, and 53 regarding foreign interests, distributions, and tax-exempt interest.

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

Signature and Preparer Information section. Includes fields for Sign Here (Earl Grochau), Preparer's name (Shawn M. Hutchinson), Date (2/15/19), Title (CFO/CAO), and Preparer's contact information (KPMG LLP).

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

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

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

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

1. Description of property

(1)
(2)
(3)
(4)

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)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	

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

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

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

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

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

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

**Nonexempt Controlled Organizations**

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

Totals . . . . . ▶

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

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

Totals . . . . . ▶

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

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

Totals . . . . . ▶

**Schedule J - Advertising Income** (see instructions)

**Part I Income From Periodicals Reported on a Consolidated Basis**

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

Totals (carry to Part II, line (5)) . . . ▶

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

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) DUCKS UNLIMITED MAGAZINE	2,500,501.	1,707,057.	793,444.	539,725.	5,587,516.	793,444.
(2)						
(3)						
(4)						
<b>Totals from Part I.</b> . . . . . ▶						
	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.
<b>Totals, Part II (lines 1-5)</b> . . . . . ▶	2,500,501.	1,707,057.				793,444.

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

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

**IRC 965 Transition Tax Statement**

<b>Taxpayer Name:</b>	<b>SSN/FEIN:</b>
<u>DUCKS UNLIMITED, INC.</u>	<u>13-5643799</u>

<b>Item</b>	<b>Amount</b>
-------------	---------------

Total amount required to be included in income by reason of section 965(a). Line 1 \$ 0.

Aggregate foreign cash position, if applicable. Line 2 \$ 0.

Total deduction under section 965(c). Line 3 \$ 0.

Total deemed paid foreign taxes associated with the total amount required to be included in income by reason of section 965(a). Line 4a \$ \_\_\_\_\_

Total deemed paid foreign taxes disallowed pursuant to IRC 965(g)(1). Line 4b \$ \_\_\_\_\_

Total net tax liability under section 965 (as determined under section 965(h)(6), without regard to whether such paragraph is applicable), if applicable, which will be assessed. Line 5 \$ \* SEE NOTE BELOW

Amount of the net tax liability under section 965 to be paid in installment under section 965(h), if applicable. Line 6 \$ \_\_\_\_\_

Amount of the net tax liability under section 965, the payment of which has been deferred, under section 965(i), if applicable. Line 7 \$ \_\_\_\_\_

Listing of applicable elections under section 965 or the election provided for in Notice 2018-13 that the taxpayer has made, if applicable.

Provision Under Which Election is Made	Title	Attached (Y or N)
Section 965(h)(1)	Election to Pay Net Tax Liability Under Section 965 in Installments under Section 965(h)(1)	Y
Section 965(i)(1)	S Corporation Shareholder Election to Defer Payment of Net Tax Liability Under Section 965 Under Section 965(i)(1)	N
Section 965(m)(1)(B)	Statement for Real Estate Investment Trusts Electing Deferred Inclusions Under Section 951(a)(1) By Reason of Section 965 Under Section 965(m)(1)(B)	N
Section 965(n)	Election Not to Apply Net Operating Loss Deduction under section 965(n)	N
Notice 2018-13, Section 3.02	Election Under Section 3.02 of Notice 2018-13 to Use Alternative Method to Compute Post-1986 Earnings and Profits	N

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

\_\_\_\_\_  
Signature of Taxpayer and/or Officer

\* Ducks Unlimited, Inc. is a tax exempt organization under IRC Section 501(c)(3). None of the Sec 965(a) inclusion amounts or 965(c) deduction amounts were related to debt-financed or unrelated business taxable income. Therefore, there is no net tax liability under section 965.

Taxpayer Name: DUCKS UNLIMITED, INC.  
Taxpayer ID Number: 13-5643799

STATEMENT ATTACHED TO AND MADE PART OF  
FORM: 990-T  
Taxpayer Tax Form: EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN

ELECTION TO PAY NET TAX LIABILITY UNDER SECTION 965 IN INSTALLMENTS UNDER  
SECTION 965(h)(1)

DUCKS UNLIMITED, INC. elects to pay the Net 965 Tax Liability eligible for installments (as defined herein), for the taxable year ended 06/30/2018 in 8 installments.

TAXPAYER'S NET 965 TAX LIABILITY ELIGIBLE FOR INSTALLMENTS:

- (a) Taxpayer's net tax liability for the taxable year with all 965 related amounts \_\_\_\_\_
- (b) Taxpayer's net tax liability for the taxable year without 965 related amounts \_\_\_\_\_
- (c) Net 965 Tax Liability (excess of (a) over (b)) \_\_\_\_\_
- (d) If applicable, S Corporation shareholder deferred Net 965 Tax Liability for the taxable year, otherwise zero \_\_\_\_\_
- (e) Net 965 Tax Liability eligible for installment payments (excess of (c) over (d)) \_\_\_\_\_

ANTICIPATED INSTALLMENT PAYMENT SCHEDULE:

- 1. Current tax year (8% of amount on line (e)) \_\_\_\_\_
- 2. Second tax year (8% of amount on line (e)) \_\_\_\_\_
- 3. Third tax year (8% of amount on line (e)) \_\_\_\_\_
- 4. Fourth tax year (8% of amount on line (e)) \_\_\_\_\_
- 5. Fifth tax year (8% of amount on line (e)) \_\_\_\_\_
- 6. Sixth tax year (15% of amount on line (e)) \_\_\_\_\_
- 7. Seventh tax year (20% of amount on line (e)) \_\_\_\_\_
- 8. Eighth tax year (25% of amount on line (e)) \_\_\_\_\_



ATTACHMENT 1

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

STARION BANCORPORATION	530.
TPLP TRIUMPH PRODUCTION LP	-91.
INCOME (LOSS) FROM PARTNERSHIPS	<u>439.</u>

ATTACHMENT 2

PART I - LINE 12 - OTHER INCOME

UBTI FROM QUALIFIED PARKING FRINGE BENEFITS

6,264.

PART I - LINE 12 - OTHER INCOME

6,264.

FORM 990T - PART II - LINE 20 - CHARITABLE CONTRIBUTIONS

UNRELATED TRADE OR BUSINESS INCOME	800,147.
ADD: DOMESTIC PRODUCTION ACTIVITIES DEDUCTION	0.
LESS: DEDUCTIONS WITHOUT CHARITABLE CONTRIBUTIONS AND DPAD	<u>795,364.</u>
	* 10%
CHARITABLE CONTRIBUTION LIMITATION (10%)	478.
CHARITABLE CONTRIBUTION	11.
<u>CHARITABLE CONTRIBUTION DEDUCTION (SMALLER OF THE ABOVE TWO)</u>	<u>11.</u>

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

TAX PREPARATION FEE

1,920.

PART II - LINE 28 - OTHER DEDUCTIONS

1,920.

FORM 990-T: FISCAL YEAR CORPORATION TAX COMPUTATION APPLYING BLENDED TAX RATE

1 UNRELATED BUSINESS TAXABLE INCOME (PAGE1, PART II, LINE 34).	3,772.
2 TAX ON LINE 1 FIGURED USING THE TAX RATE SCHEDULE OR TAX COMPUTATION WORKSHEET FOR MEMBERS OF A CONTROLLED GROUP.....	566.
3 TAX ON LINE 1 FIGURED USING THE 21% RATE.....	792.
4 MULTIPLY LINE 2 BY THE NUMBER OF DAYS 184 IN THE CORPORATION'S TAX YEAR BEFORE 01/01/2018.....	104,144.
5 MULTIPLY LINE 3 BY THE NUMBER OF DAYS 181 IN THE CORPORATION'S TAX YEAR AFTER 12/31/2017.....	143,352.
6 DIVIDE LINE 4 BY THE TOTAL NUMBER OF DAYS 365 IN THE CORPORATION'S TAX YEAR.....	285.
7 DIVIDE LINE 5 BY THE TOTAL NUMBER OF DAYS 365 IN THE CORPORATION'S TAX YEAR.....	393.
8 ADD LINES 6 AND 7: THE TOTAL TAX FOR THE FISCAL YEAR.....	678.