EXTENDED TO MAY 15, 2020

Form 990-T **Exempt Organization Business Income Tax Return** (and proxy tax under section 6033(e)) 2018 and ending JUN 30, 2019 For calendar year 2018 or other tax year beginning $JUL\ 1\,,\ 2018$ ► Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasu 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 to 501(c)(3) Organizations Only nternal Revenue Service DEmployer identification number Check box if Name of organization (Check box if name changed and see instructions.) (Employees' trust, see instructions) address changed PHEMUS CORPORATION Exempt under section C/O HARVARD MANAGEMENT COMPANY, INC. 04-2997367 **Print** x 501(c <u>)03</u>) Unrelated business activity code Number, street, and room or suite no. If a P.O. box, see instructions.]408(e) ____220(e) 600 ATLANTIC AVENUE ___530(a) City or town, state or province, country, and ZIP or foreign postal code 408A BOSTON, MA 02210-2203 529(a) 551112 C Book value of all assets F Group exemption number (See instructions.) 1,898,773,311. Other trust G Check organization type ► x 501(c) corporation 501(c) trust 401(a) trust H Enter the number of the organization's unrelated trades or businesses. Describe the only (or first) unrelated~ trade or business here > PARTNERSHIP INVESTMENTS . If only one, complete Parts I-V. If more than one, 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. I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? STMT 6 Yres 04-2103 If "Yes," enter the name and identifying number of the parent corporation. J The books are in care of F KEVIN F. SHANNON Telephone number 🕨 (617) 720-6597 Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 509,337. 1a Gross receipts or sales 509,337 b Less returns and allowances c Balance 1c 2 -151,023 2 Cost of goods sold (Schedule A, line 7) 660,360 660,360 Gross profit Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D) 4a b Net-gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b -696,059 -696,059. c Capital loss deduction for trusts -16,595,252, ₹ STMT 2 -16,595,252 Income (loss) from a partnership or an S corporation (attach statement) 5 6 Rent/income (Schedule C) Uffrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 Exploited exempt activity income (Schedule I) #dertising income (Schedule J) 11 11 12 850,870 850 870 12 Aptier income (See instructions; attach schedule) SEE STATEMENT 3 Total, Combine lines 3 through 12 -15,780,081. 780 081 Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K) 14 331,057. 15 Salaries and wages 15 16 Repairs and maintenance 16 17 17 Bad debts 85 353. SEE STATEMENT 4 18 Interest (attach schedule) (see instructions) 860,252. 193 Taxes and licenses 20 Charitable contributions (See instructions for limitation rules) SEE STATEMENT 7 20 ٥. 29 497.854 Depreciation (attach Form 4562) 21 22 Less depreciation claimed on Schedule A and elsewhere on return 22a 483,503. 14,351. 23= 23 Depletion RECEIVED Contributions to deferred compensation plans 24 111,828. 25 25 Employee benefit programs ¿26

≦ Excess exempt expenses (Schedule I) 26 JUL 15 2020 Excess readership costs (Schedule J) Other deductions (attach schedule) ESTATEMENT 5 378 268. 29 1,781,109. Total deductions. Add lines 14 through 28 30 Unrelated business taxable income before net operating loss dedu 30 -17,561,190, 31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) -17,561,190. Unrelated business taxable income. Subtract line 31 from line 30 Form **990-T** (2018) 823701 01-09-19 LHA For Paperwork Reduction Act Notice, see instructions.

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-17,561,190.

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-17 561 190

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837,390.

837,390. 837,390

any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority							
ver a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file							
nCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country							
SEE STATEMENT 8	х						
uring the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		Х					
"Yes," see instructions for other forms the organization may have to file.							
nter the amount of tax-exempt interest received or accrued during the tax year 🕨 \$		Ĺ					
Under penalties of person, 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.						

Sign Here	Signature of officer	1	SISTANT TREASURER		May the IRS discuss this return with the preparer shown below (see instructions)? Yes N				
Paid Preparer	Print/Type preparer's name	Preparer's signature	Date	Check self- employe	,	PTIN			
	Firm's name			Firm's EIN	Firm's EIN ▶				

823711 01-09-19

Firm's address

Form 990-T (2018)

Phone no.

Form 990-T (2018) C/O HARVARD MANAGEMENT COMPANY, INC.

Schedule A - Cost of Good	ds Sold. Enter	method of invent	orv v	aluation N/A				
1 Inventory at beginning of year	1 1	0.	<u> </u>	Inventory at end of year			6	788,719
2 Purchases	2			Cost of goods sold. Su		ine 6	Ť	
3 Cost of labor	3		•	from line 5. Enter here a			1	
4a Additional section 263A costs	- " -			line 2	u	u ,	7	-151,023,
(attach schedule)	4a		8	Do the rules of section :	263A (with respect to	<u> </u>	Yes No
,	+ 4b	637,696.	·	property produced or a	•			
5 Total. Add lines 1 through 4b	5	637,696.		the organization?	04000	in robuit, apply to		-x
Schedule C - Rent Income			Pe		Leas	ed With Real Pro	per	tv)
(see instructions)	(, , , , , , , , , , , , , , , , , , ,							·
1. Description of property								
(1)								
(2)								
(3)								
(4)								
	Rent receive	red or accrued				0/0)0-4		
(a) From personal property (if the p rent for personal property is mo 10% but not more than 50%	re than	` of rent for pe	rsonal	conal property (if the percenta property exceeds 50% or if ed on profit or income)	ge	columns 2(a) a	y conne nd 2(b)	ected with the income in (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, columns		nter			0,	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)		0.
Schedule E - Unrelated De	` '	Income (see in	nstru	ctions)		Part I, Illie 6, Colonia (B)		
· · · · · ·				. Gross income from		3. Deductions directly cor to debt-finan-		
1. Description of debt-	financed property			or allocable to debt- financed property	(a) Straight line depreciation (attach schedule)			(b) Other deductions (attach schedule)
(4)	-			_			+	
(1)							\dashv	
(2)							+	
(3)							+	
(4)	T		-			7 -		0
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or a	e adjusted basis allocable to inced property h schedule)	t	. 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)				%			T	
						inter here and on page 1, Part I, line 7, column (A)		Enter here and on page 1, Part I, line 7, column (B)
Totals						(, [0,
Total dividends-received deductions	neludad in columi	n Ω					_	

Form 990-T (2018)

				nd Rents From Controlled Organizations (see instructions) Exempt Controlled Organizations									
1. Name of controlled organize	ation	ıdentıf	nployer ication nber		related income a instructions)	4 . To pay	tal of specified ments made	Part of column 4 that is included in the controlling organization's gross income		trolling	6. Deductions directly connected with income In column 5		
(1)													
(2)			-										
(3)									· <u>-</u>				
(4)	**										•		
Nonexempt Controlled Organ	ızatıons	·		· · · · · ·									
7. Taxable Income	7. Taxable Income 8. Net unrelated income (loss) (see instructions)		9 Total	9 Total of specified payments made		10. Part of column 9 that is in the controlling organiza gross income		ganization's with		eductions directly connected in the connected in column 10			
(1)				†									
(2)				_									
(3)					- v								
(4)	 			-									
							Add colum Enter here and line 8, c	on pag	e 1, Part I,	1	dd columns 6 and 11 nere and on page 1, Part I, line 8, column (B)		
Totals						▶			0.		. 0		
Schedule G - Investme (see inst	ent Inco	me of a	Section	n 501(c)(7), (9), or	(17) Oı	ganization)					
1. Desc	1. Description of income						3. Deductions directly connected (attach schedule) 4. Set-as (attach sc				5. Total deductions and set-asides (col 3 plus col 4)		
(1)						-							
(2)					<u> </u>								
(3)						-							
(4)													
					Enter here and Part I, line 9, co	on page 1, lumn (A)			•		Enter here and on page 1 Part I, line 9, column (B)		
Totals	_				L	0.					0		
Schedule I - Exploited (see instri	_	Activity	/ Incom	ie, Othe	r Than Ac	lvertisi	ing Income)					
1. Description of exploited activity	unrelated	e from	directly with pr of un	penses connected oduction related as 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 inco from activity t is not unrelat business inco	hat ed	attributable to		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)		
(1)													
(2)					l				<u> </u>				
(3)	1				1						1		
(4)													
Totals	Enter her page 1 line 10,	Part I,	page	ere and on 1, Part I, , col (B)					<u></u>	•	Enter here and on page 1, Part II, line 26		
Schedule J - Advertisi	na Incor	1	netruetie	-	L						0		
Part I Income From					solidated	Basis							
		2 0			4. Advert	ising gain	T · · · ·		I		7. Excess readership		
1. Name of periodical		2. Gross advertising income	adv	3. Direct ertising costs	or (loss) (co col 3) If a ga cols 5 th	ol 2 minus in, comput	5. Circulati income	on	6 Reade cost		costs (column 6 minus column 5, but not more than column 4)		
(1)				•		•							
(2)													
(3)			\neg		7								
(4)				-	,								
Totals (carry to Part II, line (5))			0.) .		-				0		
(ourry to ruit ii, iiiic (o))			_*•		<u>- •լ</u>		1		l .		0		

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

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

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

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	·
Total. Enter here and on page 1, Part II, line 14			0.

Form 990-T (2018)

•	FORM	M 990-T PARENT CORPORATION'S NAME AND IDENTIFYING NUMBER								BER STATEMENT				
	CORPORATION'S NAME									IDENTIFYING	NO			
	PRESI	IDENTS & I	FELLOWS	OF HARVARD	COL	LEGE				04-2103580				

FOOTNOTES	STATEMENT 1
REGULAR NOL CARRY FORWARD	
YEAR END	
6/30/2004 - NOL GENERATED	639,501.
6/30/2006 - NOL GENERATED	1,401,485.
6/30/2008 - NOL GENERATED	114,721.
6/30/2010 - NOL UTILIZED	-91,067.
6/30/2011 - NOL GENERATED	5,411,581.
6/30/2012 - NOL UTILIZED	-1,925,915.
6/30/2013 - NOL UTILIZED	-3,391,027.
6/30/2014 - NOL UTILIZED	-1,422,026.
6/30/2015 - NOL GENERATED	1,955,169.
6/30/2016 - NOL GENERATED	9,836,065.
6/30/2017 - NOL GENERATED	5,611,395.
6/30/2018 - NOL GENERATED	8,015,900.
6/30/2019 - NOL GENERATED	17,561,190.
REGULAR NOL CARRY FORWARD TO 6/30/2020	43,716,972.

FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 2
DESCRIPTION	NET INCOME OR (LOSS)
UBTI INCOME FROM PARTNERSHIPS - ORDINARY BUSINESS INCOM (LOSS) UBTI DEDUCTIONS FROM PARTNERSHIPS - ORDINARY BUSINESS INCOME (LOSS)	E -16,336,677 -258,575
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5	-16,595,252
FORM 990-T OTHER INCOME	STATEMENT
DESCRIPTION	AMOUNT
STATE TAX REFUND	850,870
TOTAL TO FORM 990-T, PAGE 1, LINE 12	850,870
	<u> </u>
FORM 990-T INTEREST PAID	<u> </u>
FORM 990-T INTEREST PAID DESCRIPTION	STATEMENT 4
FORM 990-T INTEREST PAID DESCRIPTION INTEREST	STATEMENT 4 AMOUNT 85,353
FORM 990-T INTEREST PAID DESCRIPTION INTEREST TOTAL TO FORM 990-T, PAGE 1, LINE 18	STATEMENT 4 AMOUNT 85,353
FORM 990-T INTEREST PAID DESCRIPTION INTEREST TOTAL TO FORM 990-T, PAGE 1, LINE 18 FORM 990-T OTHER DEDUCTIONS	STATEMENT 4 AMOUNT 85,353, 85,353
DESCRIPTION INTEREST TOTAL TO FORM 990-T, PAGE 1, LINE 18	AMOUNT 85,353. 85,353. STATEMENT 5

FORM 990-T	CONTRIBUTIONS	SUMMARY	STATEMENT	7
QUALIFIED	CONTRIBUTIONS SUBJECT TO 100%	LIMIT		
FOR TAX FOR TAX FOR TAX FOR TAX	YEAR 2015	TIONS 2 2,500 159 1,137 480		
TOTAL CAR	RYOVER RENT YEAR 10% CONTRIBUTIONS	4,278		
	TRIBUTIONS AVAILABLE NCOME LIMITATION AS ADJUSTED	4,278		
EXCESS 10	% CONTRIBUTIONS 0% CONTRIBUTIONS ESS CONTRIBUTIONS	4,278 4,278		
ALLOWABLE	CONTRIBUTIONS DEDUCTION		-	0
TOTAL CON	TRIBUTION DEDUCTION			0

FORM 990-T NAME OF FOREIGN COUNTRY IN WHICH STATEMENT 8
ORGANIZATION HAS FINANCIAL INTEREST

NAME OF COUNTRY

ARGENTINA
BRAZIL
CHILE
COLOMBIA
ECUADOR
NEW ZEALAND
NICARAGUA
PANAMA
PERU
ROMANIA
URUGUAY

FORM 990-T	OTHER CREDITS AND PAYMENTS	STATEMENT	9
DESCRIPTION		AMOUNT	
FORM 8827, LINE 8	С	190	,133.
OTAL INCLUDED ON	FORM 990-T, PAGE 2, PART V, LINE 50G	190	,133.
FORM 990-T	COST OF GOODS SOLD - OTHER COSTS	STATEMENT	10
DESCRIPTION		AMOUNT	
TFC ACQUISITION I	NVENTORY		,193. ,503.

4562

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property) 990-T

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

2018

Attachment Sequence No 179

Name(s) shown on return Business or activity to which this form relates PHEMIIS CORPORATION C/O HARVARD MANAGEMENT COMPANY, INC. FORM 990-T PAGE 1 04-2997367 Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 1,000,000. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 3 2,500,000, 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 10 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2019 Add lines 9 and 10, less line 12 ▶ 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Don't include listed property) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 Part III. MACRS Depreciation (Don't include listed property. See instructions.) Section A 139,793, 17 MACRS deductions for assets placed in service in tax years beginning before 2018 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use only - see instructions) (b) Month and (d) Recovery (a) Classification of property (e) Convention (g) Depreciation deduction year placed in service 19a 3-year property 200DB 1,790,306. 358,061. b 5-year property 7-year property C 10-year property 15-year property е 20-year property f 25-year property 25 yrs. S/L g 27.5 vrs MM S/L h Residential rental property 27.5 yrs ММ S/I 39 yrs MM S/L i Nonresidential real property Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System 20a Class life S/L S/L 12 yrs b 12-year MM S/L 30-year 30 yrs C 40 yrs ММ S/L 40-year Part IV | Summary (See instructions) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 497.854. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

				. .											
			JS CORPORATI									04.04			
_	m 4562 (2018)		LARVARD MANA									04-29	97367		Page 2
Pa	<u>art V</u> Listed Propert entertainment,				ner venic	cies, (certain a	ircraπ, ar	na propert	y usea ro	or				
	Note: For any	ehicle for w	hich you are us	ing the						e expen	se, com	plete on	ly 24a,		
	24b, columns (_									_
			on and Other I			T			ı					T., T	1
24a	Do you have evidence to s			T use ci	aimeo /	ᄂ	J Yes	No No	1					」Yes ∟	No
	(a) Type of property	(b) Date	(c) Business/		(d)			e) epreciation	(f) Recovery		g) thod/		h) :ciation		(i) cted
	(list vehicles first)	placed in service	investment	, of	Cost or ther basis			investment only)	period		ention		iction	sectio	n 179
	0 11	_	use percentage						<u> </u>	<u> </u>	т				st
25	Special depreciation allo	•	•	roperty	y piaced	ın se	rvice au	ring the t	ax year ar	ia	1 05				
	Used more than 50% in										25	l			
26	Property used more that	1 30% III a Q								1		1			
		_	% %	+		_									
_			%	+		-									
07	Bronosty used 50% or la	so in a guali						•••		l					
21	Property used 50% or le	ss in a quali				Т			T	S/L·	.	Γ			
-			<u>%</u>	+						S/L·					
				+		\dashv			!	S/L ·					
20	Add amounts in column	/b) lines 25			o and or	Lino	21 500	. 1	I	[3/L ·	28	 			
	Add amounts in column		=				z I, payı	- 1					29		
<u> </u>	Add amounts in column	(I), III 16 20 <u>L</u>					on on H	se of Vel	hiclos				1 23		
to y	our employees, first ans	wer the ques	stions in Sectio	n C to	see if yo	u me	et an ex	ception to	o completi	ng this s	ection f	or those	vehicles		
	_			-	a)		(b)	Ι.	(c)		d)		e)	(f	
30	Total business/investment		uring the	Vel	hicle	-	Vehicle	- '	/ehicle	Ven	icle	Ven	ncle	Vehicle	
	year (don't include commut	• .	F			_				 		ļ			
	Total commuting miles of		· · ·							1					
32	Total other personal (no	ncommuting) miles												
	driven		ŀ		•	\vdash		+							
33	Total miles driven during														
24	Add lines 30 through 32 Was the vehicle available		-luca	Yes	No	Ye	s N	yes	s No	Yes	No	Yes	No	Yes	No
J*+	during off-duty hours?	e for person	aruse [163	No	1	3 1	168	110	163	140	163	140	163	110
35	Was the vehicle used pr	amarıly by a	more		 	 	-+-		 						
	than 5% owner or relate		inore												
36	Is another vehicle availa	•	nal -		 	_	<u> </u>			· · · · · · ·					
	use?	Dio ioi poroc			1										
		Section C	- Questions fo	r Emp	lovers V	/ho F	Provide \	/ehicles	for Use b	v Their E	Employe	ees			
Ans	swer these questions to o			•	•					•			ren't		
	re than 5% owners or rela			•		•	J			•					
37	Do you maintain a writte	n policy stat	ement that pro	hibits a	all persor	nal us	se of veh	icles, inc	luding cor	nmuting	, by you	r		Yes	No
	employees?		·		·				_						
38	Do you maintain a writte	n policy stat	ement that pro	hibits p	personal	use	of vehicl	es, excep	ot commut	ing, by y	our				
	employees? See the ins	tructions for	vehicles used	by corp	oorate of	ficer	s, directo	ors, or 19	6 or more	owners					
39	Do you treat all use of ve														
40	Do you provide more tha	an five vehicl	les to your emp	loyees	, obtain	ınforı	mation fr	om your	employee	s about					
	the use of the vehicles,	and retain th	e information r	eceive	ქ ?										ļ
41	Do you meet the require	ments conc	erning qualified	autom	obile de	mon	stration i	use?							
	Note: If your answer to	37, 38, 39, 4	0, or 41 is "Yes	," don'	t comple	ete S	ection B	for the c	overed vel	nicles					
Pa	art VI Amortization					_									

Part VI Amortization (a) Description of costs	(b) Date amortization begins	(C) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins durin	g your 2018 tax year				
40.4	0010.4	·		43	2,500.
43 Amortization of costs that began before your 2018 tax year 44 Total. Add amounts in column (f) See the instructions for where to report					2,500.

Electing to Take 100% Refundable Credit Amount in 2018 - per CARES Act Section 2305(b)

Form **8827**

Credit for Prior Year Minimum Tax - Corporations

OMB No. 1545-0123

2018

Department of the Treasury Internal Revenue Service Attach to the corporation's tax return.
 Go to www.irs.gov/Form8827 for the latest information.

PHEMUS CORPORATION 04-2997367 C/O HARVARD MANAGEMENT COMPANY INC. 1 Alternative minimum tax (AMT) for 2017. Enter the amount from line 14 of the 2017 Form 4626 190,133. 2 Minimum tax credit carryforward from 2017. Enter the amount from line 9 of the 2017 Form 8827 2 3 Enter any 2017 unallowed qualified electric vehicle credit (see instructions) 3 4 Add lines 1, 2, and 3 4 190,133. 6 Enter the corporation's 2018 regular income tax liability minus allowable tax credits (see instructions) 190,133. 6 Enter the refundable minimum tax credit (see instructions) 6 7 190,133. 7 Add lines 5 and 6 8a Enter the smaller of line 4 or line 7. If the corporation had a post-1986 ownership change or has 190,133. pre-acquisition excess credits, see instructions 8a b Gurrent year minimum tax credit. Enter the smaller of line 4 or line 5 here and on Form 1120, Schedule J, Part I, line 5d (or the applicable line of your return). If the corporation had a post-1986 ownership change or has pre-acquisition ٥. excess credits, see instructions. If you made an entry on line 6, go to line 8c. Otherwise, skip line 8c 8b c Subtract line 8b from line 8a. This is the current year refundable minimum tax credit. Include this 190,133. amount on Form 1120, Schedule J, Part II, line 20c (or the applicable line of your return) 8c 9 Minimum tax credit carryforward to 2019. Subtract line 8a from line 4. Keep a record of this amount to carry forward and use in future years

Form **3800**

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

General Business Credit

Go to www.irs.gov/Form3800 for instructions and the latest information.
 You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

OMB No 1545-0895

2018
Attachment
Sequence No 22

Identifying number PHEMUS CORPORATION 04-2997367 Part I Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT) (See instructions and complete Part(s) III before Parts I and II) 0. General business credit from line 2 of all Parts III with box A checked Passive activity credits from line 2 of all Parts III with box B checked Enter the applicable passive activity credits allowed for 2018. See instructions 3 Carryforward of general business credit to 2018 Enter the amount from line 2 of Part III with box C checked. See instructions for statement to attach 6,805. 4 5 Carryback of general business credit from 2019 Enter the amount from line 2 of Part III with box D checked Add lines 1, 3, 4, and 5 6,805. 6 Part II Allowable Credit Regular tax before credits • Individuals Enter the sum of the amounts from Form 1040, line 11a, and Schedule 2 (Form 1040), line 46, or the sum of the amounts from Form 1040NR, lines 42 and 44 Corporations Enter the amount from Form 1120. Schedule J. Part I. line 2: or the 7 0. applicable line of your return • Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, or the amount from the applicable line of your return 8 Alternative minimum tax • Individuals Enter the amount from Form 6251, line 11 · Corporations Enter -0-8 • Estates and trusts Enter the amount from Schedule I (Form 1041), line 56 Add lines 7 and 8 9 ٥. 10a Foreign tax credit 10a b Certain allowable credits (see instructions) 10b c Add lines 10a and 10b 10c Net income tax. Subtract line 10c from line 9 If zero, skip lines 12 through 15 and enter -0- on line 16 0. 11 0 Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0-12 13 Enter 25% (0 25) of the excess, if any, of line 12 over \$25,000 See instructions 13 14 Tentative minimum tax Individuals Enter the amount from Form 6251, line 9 Corporations Enter -0-14 Estates and trusts Enter the amount from Schedule I (Form 1041), line 54 Enter the greater of line 13 or line 14 15 Subtract line 15 from line 11 If zero or less, enter -0-16 Enter the smaller of line 6 or line 16 17 C corporations: See the line 17 instructions if there has been an ownership change, acquisition.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 3800 (2018)

or reorganization

Form 3800 (2018)

0.

• Estates and trusts Form 1041, Schedule G, line 2b

)a	a	e	3

Form 3800 (2018) Name(s) shown on return Identifying number

	PHEMUS CORPORATION	04-2997367		
Pa	art III General Business Credits or Eligible Small Business Credit	t s (see	e instructions)	
Cor	pplete a separate Part III for each box checked below. See instructions			
A	General Business Credit From a Non-Passive Activity E Reserv	ed		
В	General Business Credit From a Passive Activity F Reserv			
C			Business Credit Carryforv	varde
	General Business Credit Carrytorwards General Business Credit Carrytorwards H Reserve		i business orealt carrylore	valus
D			additional Dort III combini	na amounto from all
'	If you are filing more than one Part III with box A or B checked, complete and attach fi	ırsı an	additional Part III Combini	ng amounts from all
	Parts III with box A or B checked Check here if this is the consolidated Part III (a) Description of credit		(h)	(c)
Not	e: On any line where the credit is from more than one source, a separate Part III is need	ded	(b) If claiming the credit from a pass-through entity, enter the EIN	Enter the appropriate amount
for e	each pass-through entity.		pass-through entity, enter the Eliv	Litter the appropriate amount
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		 ,
b	Reserved	1b		
С	Increasing research activities (Form 6765)	1c		6,805.
d	Low-income housing (Form 8586, Part I only)	1d		
е	Disabled access (Form 8826) (see instructions for limitation)	_1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
g	Indian employment (Form 8845)	19		
h	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i		
i	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j		
k	Employer-provided child care facilities and services (Form 8882) (see instructions			
	for limitation)	1k		
	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m		1m		
	Distilled spirits (Form 8906)	1n		
n	Nonconventional source fuel (carryforward only)	10		
0				
р	Energy efficient home (Form 8908)	1p		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
S	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u_		
٧	Agricultural chemicals security (carryforward only)	<u>1v</u>		
w	Employer differential wage payments (Form 8932)	1w		
x	Carbon oxide sequestration (Form 8933)	1x		
У	Qualified plug-in electric drive motor vehicle (Form 8936)	<u>1y</u>		
Z	Qualified plug-in electric vehicle (carryforward only)	1z		
a	Employee retention (Form 5884-A)	1aa		
b	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb		
Z	Other. Oil and gas production from marginal wells (Form 8904) and certain			
	other credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		6,805.
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		
ь	Work opportunity (Form 5884)	4b		
c	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586, Part II)	4d		
e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee	-~		
•		4f		
_	tips (Form 8846)			
g	Qualified railroad track maintenance (Form 8900)	4g	<u> </u>	
h	Small employer health insurance premiums (Form 8941)	4h		-
i	Increasing research activities (Form 6765)	4i		
j	Employer credit for paid family and medical leave (Form 8994)	<u>4j</u>	_	<u> </u>
Z	Other	4z		<u> </u>
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		6,805.

FORM	3800	CARRYOVER OF	GENERAL BU	SINESS CREDI	TS STA	TEMENT 7
YEAR	TYPE OF CREDIT		ORIGINAL CREDIT	PREVIOUSLY APPLIED	CREDIT REMAINING	AVAILABLE THIS YEAR
2008	INCREASED R & D	CREDIT	892.	0.	892.	892.
2009	INCREASED R & D	CREDIT	1,290.	0.	1,290.	1,290.
2010	INCREASED R & D	CREDIT	1,708.	0.	1,708.	1,708.
2011	INCREASED R & D	CREDIT	1,486.	0.	1,486.	1,486.
2012	INCREASED R & D	CREDIT	996.	0.	996.	996.
2013	INCREASED R & D	CREDIT	433.	0.	433.	433.
	TOTALS		6,805.	0.	6,805.	6,805.
	LESS TO FORM 425	5, LINE 12				0.
	TOTAL					6,805.