Form 990-T	Exempt Organization Bu				<u>,</u> L	OMB No 1545-0687
- P	(and proxy tax und			190		2018
%	For calendar year 2018 or other tax year beginning JUL 1				9	2010
Department of the Treasury Internal Revenue Service	► Go to www irs gov/Form990T for ► Do not enter SSN numbers on this form as it ma				. 5	pen to Public Inspection for 01(c)(3) Organizations Only
A Check box if address changed	Name of organization (Check box if name	changed	and see instructions.)		D Emplo	yer identification number
B Exempt under section	Print NEW ENGLAND INSTITUTE	OF '	TECHNOLOGY		0 !	5-0312747
X 501(c)(/3)	Number, street, and room or suite no. If a P.O. b	ox, see in	structions.		E Unrela	led business activity code structions)
408(e)220(e)	ONE NEW ENGLAND TECH	BOUL	EVARD		(000	Sit dotto/13 /
408A 530(a) 529(a)	City or town, state or province, country, and ZIP EAST GREENWICH, RI 0	or foreigi 2818	n postal code		9000	000
C Book value of all assets at end of year	F Group exemption number (See instructions.)	>			•	
405,521,2	35. G Check organization type ► X 501(c) co	rporation	501(c) trust	401(a)	trust	Other trust
	organization's unrelated trades or businesses.	1	Describe	the only (or first) un	related	
	SEE STATEMENT 1			complete Parts I-V.		
	ank space at the end of the previous sentence, complete F	Parts I an	d II, complete a Schedul	e M for each addition	al trade	or
business, then complete				<u>, </u>		
	the corporation a subsidiary in an affiliated group or a par	ent-subsi	idiary controlled group?	▶ 1	Yes	X No
	nd identifying number of the parent corporation. ► NEW ENGLAND INSTITUTE	<u> </u>	ECUNOT OCTalanh	one number > /	401) 467-7744
	d Trade or Business Income	OF I	(A) Income	(B) Expenses		(C) Net
1 a Gross receipts or sale	· · · · · · · · · · · · · · · · · · ·	\neg	(///	DETERMINE	?	
b Less returns and allow		1c				
2 Cost of goods sold (S		2		Will talk softs	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	R.GENERAL
3 Gross profit. Subtract	•	3			1,72	2 26 26 27 27 28 2 mile m 13 Ac -
4 a Capital gain net incon	e (attach Schedule D)	4a		RETT	VIE I	
	4797, Part II, line 17) (attach Form 4797)	4b		के वर्ष के दिख्या		70
c Capital loss deduction	for trusts	4c			F.	S
5 Income (loss) from a	partnership or an S corporation (attach statement)	5		2 JUL 2 7	: <u>:</u> ZU20	
6 Rent income (Schedu	•	6		<u> </u>		8
	ed income (Schedule E)	7		OG	i, U	
	valties, and rents from a controlled organization (Schedule F	· —				
	a section 501(c)(7), (9), or (17) organization (Schedule 6		_			
	/ity income (Schedule I)	10				
11 Advertising income (S	structions; attach schedule) STATEMENT 2	11	21 242	ATT THE HE	(-E-(-)	21,242.
13 Total. Combine lines	•	13	21,242.	18 25 - 1 5 5 5 m - 1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	writery ,	21,242.
	ns Not Taken Elsewhere (See instructions					41,442.
	contributions, deductions must be directly connect					
14 Compensation of off	cers, directors, and trustees (Schedule K)				14	
15 Salaries and wages					15	
16 Repairs and mainten	ance				16	
17 Bad debts					17	
· ·	dule) (see instructions)				18	
19 Taxes and licenses					19	•
	ons (See instructions for limitation rules)		ايما		20	
21 Depreciation (attach22 Less depreciation cli	rum 4562) limed on Schedule A and elsewhere on return		21	· · · · · · · · · · · · · · · · · · ·	17 32 100 10	
23 Depletion	and eisewhere on return		22a		22b	
•	erred compensation plans				23	
25 Employee benefit pro					25	
26 Excess exempt expe					26	
27 Excess readership or	•				27	
28 Other deductions (at	· · · · · · · · · · · · · · · · · · ·		SEE STAT	EMENT 3	28	42,171.
	dd lines 14 through 28			Zb	29	42,171.
	axable income before net operating loss deduction. Subtra	act line 2	9 from line 13	~ ~	30	-20,929.
31 Deduction for net op	erating loss arising in tax years beginning on or after Janu	iary 1, 20	18 (see instructions)	21	31	公園中学生工活版
32 Unrelated business t	axable income. Subtract line 31 from line 30		· · · · · · · · · · · · · · · · · · ·	3	32	-20,929.
823701 01-09-19 LHA FC	r Paperwork Reduction Act Notice, see instructions.				1	Form 990-T (2018)

						- 0
Part I		NEW ENGLAND INSTITUTE OF TECHNOLOGY 05- otal Unrelated Business Taxable Income	031	<u> 2747</u>	 	Page 2
		of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		22	-20,9	220
33 34		nts paid for disallowed fringes		33	-20,3	223.
35		tion for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)		35		
36		of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of		35 -		
30		is and 34		36	-20,9	220
27		ic deduction (Generally \$1,000, but see line 37 instructions for exceptions)	38	37		000.
37				37	<u> </u>	<u> </u>
38		the smaller of zero or line 36	39	38	-20,9	220
Part I	_	ax Computation		3,6	-20,	249.
				00		0.
39		izations Taxable as Corporations Multiply line 38 by 21% (0.21)		39		
40	_	Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from: Tax rate schedule or Schedule D (Form 1041)		40		
				40	,	
41	-	tax. See instructions		41		
42		ative minimum tax (trusts only)		42		
43		n Noncompliant Facility Income. See instructions		43	<u> </u>	
44		Add lines 41, 42, and 43 to line 39 or 40, whichever applies		44		0.
Part \		ax and Payments		. r	_	
	_	n tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a		}		
		credits (see instructions) 45b		, ,		
		al business credit. Attach Form 3800		ł. I		
		for prior year minimum tax (attach Form 8801 or 8827)		 -		
		credits. Add lines 45a through 45d		45e	_	
46		act line 45e from line 44		46		0.
47		taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach sch	edule)	47		
48		tax. Add lines 46 and 47 (see instructions)		48		0.
49		net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2		49		<u> </u>
			05.	1 1		
		estimated tax payments 50b				
		eposited with Form 8868 50c		ŀ		
		in organizations: Tax paid or withheld at source (see instructions) 50d				
		p withholding (see instructions) 50e		.~		
		for small employer health insurance premiums (attach Form 8941) 5bf				
g		credits, adjustments, and payments: Form 2439		1		
		Form 4136 Other Total ▶ <u>50g</u>				
51		payments. Add lines 50a through 50g		51	2,	<u>505.</u>
52		ated tax penalty (see instructions). Check if Form 2220 is attached 🕨 📖		52		
53		ue. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	∠▶	53	<u> </u>	
ر ⁵⁴ ما.	•	ayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	→	54	2,	<u>505.</u>
74,55		the amount of line 54 you want: Credited to 2019 estimated tax 2,505. Refunded	<u> </u>	55		0.
Part \		Statements Regarding Certain Activities and Other Information (see instructions)				
56	_	time during the 2018 calendar year, did the organization have an interest in or a signature or other authority			Yes	No .
		Infinancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file				•
		N Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country				_ !
	here			_		X
57		g the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign true	st?			X
		," see instructions for other forms the organization may have to file.				
58_		the amount of tax-exempt interest received or accrued during the tax year > \$				
Cian	Un	der penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of rect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	my knov	wledge and	belief, it is true,	
Sign Here		VICE PRESIDENT OF	м	ay the IRS o	discuss this retur	n with
1016		Superture of officer Date Title			shown below (see	
		Signature of officer Date Title	<u> in:</u>	structions)?	XYes	No
		Print/Type preparer's name Preparel's signature		f PTIN		
Paid		JACQUELINE B. GAIPO JACQUELINE B. self-em	ployed			_
Prepa	arer	CPA (GAIPO, CPA 03/31/20			125315	
Use (Firm's name ► DISANTO, PRIEST & CO. Firm's	<u>EIN</u> ▶	<u>57</u>	<u>-11398</u>	64
		117 METRO CENTER BOILEVARD #3000				

823711 01-09-19

Phone no. (401)921-2000 Form **990-T** (2018)

Schedule A - Cost of Good	s Sold. Enter	method of inven	tory v	aluation ► N/A					
1 Inventory at beginning of year	1		6	Inventory at end of year	r		6		
2 Purchases	2		7	Cost of goods sold. Su	btract li	ine 6			
3 Cost of labor	3			from line 5. Enter here a	and in F	Part I,			
4 a Additional section 263A costs				line 2			7	<u> </u>	
(attach schedule)	4a		8	Do the rules of section :	263A (v	with respect to		Yes	No
b Other costs (attach schedule)	4b]	property produced or a	cquired	for resale) apply to			1
5 Total Add lines 1 through 4b	5]	the organization?	•	,,		[-	~ -
Schedule C - Rent Income	(From Real	Property and	d Pei	rsonal Property I	Lease	ed With Real Pro	pert	ty)	
(see instructions)								·	
1 Description of property									
(1)									
(2)		<u></u>							
(3)									
(4)									
	2. Rent receiv	ed or accrued				3(a) Deductions directly		nated with the income	
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	than than	of rent for p	personal	sonal property (if the percenta property exceeds 50% or if sed on profit or income)	ige			(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		ter 			0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	>		0.
Schedule E - Unrelated Del	ot-Financed	Income (see	ınstru	ictions)					
			2	2. Gross income from		Deductions directly co to debt-finar			
1. Description of debt-fi	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule	
(1)			+				_		
(2)			\top				_ -		
(3)			1						
(4)				· · · · · · · · · · · · · · · · · · ·			- . .		
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property a schedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deduction (column 6 x total of column 3(a) and 3(b))	columns
(1)				%					
(2)				%					
(3)				%				 -	
(4)				%					
						inter here and on page 1, Part I, line 7, column (A)		Enter here and on pa Part I, line 7, column	
Totals				>).		0.
Total dividends-received deductions in	ncluded in columi	18					_		0.
								Form 990 -	T (2018)

Ξ.

3			Exempt (Controlled O	ganızatı	ons					
1. Name of controlled organiza	lae	Employer ntification number	3. Net unr (loss) (see			al of specified nents made	5 Part of column 4 that is included in the controlling organization's gross income		lling	Deductions directly connected with income in column 5	
(1)											
(2)											
(3)											
(4)			<u> </u>								
Ionexempt Controlled Organ	izations										
7 Taxable Income	8. Net unrelated in (see instruct		9 Total	of specified payr made	nents	10. Part of column in the controllingross	in 9 that is ig organizat income	ncluded ion's		ductions directly connecte income in column 10	
(1)											
(2)											
(3)											
(4)											
						Add colum Enter here and line 8, co			Enter he	d columns 6 and 11 ere and on page 1, Part I, line 8, column (8)	
Totals					>			0.		0	
Schedule G - Investm	ent Income of	a Sectio	n 501(c)(7), (9), or	(17) Or	ganization					
(see inst	tructions)										
1 . Des	cription of income			2. Amount of	ıncome	3 Deduction directly connect (attach schedule)	ted	4 Set-as (attach sc		5. Total deductions and set-asides (col 3 plus col 4)	
(1)									-		
(2)											
(3)											
(4)											
				Enter here and Part I, line 9, co			,		•	Enter here and on page Part I, line 9, column (B	
otals					0.	,				0	
Schedule I - Exploited (see instr		ity Incor	ne, Othe	r Than Ad	vertisi	ng Income					
1 Description of exploited activity	2 Gross unrelated business income from trade or business	directly	xpenses	4. Net incom	Т		hat attributable to				
		of u	connected production nrelated ess income	from unrelated business (co minus colum gain, computi through	trade or lumn 2 n 3) If a e cols 5	5. Gross incor from activity the is not unrelated business incor	nat ed	attributal	ole to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)		of u	connected production prelated	from unrelated business (co minus colum gain, compute	trade or lumn 2 n 3) If a e cols 5	from activity the is not unrelated	nat ed	attributal	ole to	expenses (column 6 minus column 5, but not more than	
		of u	connected production prelated	from unrelated business (co minus colum gain, compute	trade or lumn 2 n 3) If a e cols 5	from activity the is not unrelated	nat ed	attributal	ole to	expenses (column 6 minus column 5, but not more than	
(2)		of u	connected production prelated	from unrelated business (co minus colum gain, compute	trade or lumn 2 n 3) If a e cols 5	from activity the is not unrelated	nat ed	attributal	ole to	expenses (column 6 minus column 5, but not more than	
(1) (2) (3) (4)		of u	connected production prelated	from unrelated business (co minus colum gain, compute	trade or lumn 2 n 3) If a e cols 5	from activity the is not unrelated	nat ed	attributal	ole to	expenses (column 6 minus column 5, but not more than	
(2)	Enter here and on page 1, Part I, line 10, col (A)	of u busine	connected production prelated	from unrelated business (co minus colum gain, compute	trade or lumn 2 n 3) If a e cols 5	from activity the is not unrelated	nat ed	attributal	ole to	expenses (column 6 minus column 5, but not more than	
(2) (3) (4)	Enter here and on page 1, Part I, line 10, col (A)	Enter h	connected roduction nrelated uses income	from unrelated business (co minus colum gain, compute	trade or lumn 2 n 3) If a e cols 5	from activity the is not unrelated	nat ed	attributal	ole to	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1,	
(2) (3) (4) Totals Schedule J - Advertis	Enter here and on page 1, Part I, line 10, col (A)	Enter h page line 1	reconnected reduction nrelated ass income series and on 1, Part I, 0, col (B)	from unrelated business (cominus colum gain, compute through	trade or lumn 2 n 3) If a e cols 5 7	from activity the is not unrelated	nat ed	attributal	ole to	expenses (column 5, but not more than column 4) Enter here and on page 1, Part II, line 26	
(2) (3) (4) Totals Schedule J - Advertis Part I Income From	Enter here and on page 1, Part I, line 10, col (A) ing Income (see Periodicals Real 2. Gros	Enter h page line 1 e instruction	rennected production related production related production production production for the	from unrelated business (cominus colum gain, compute through	trade or lumn 2 n 3) If a e cols 5 7	from activity it is not unrelate business incor	at ded ded ded ded ded ded ded ded ded de	attributat column	ship	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26 7. Excess readership costs (column 6 minus	
(2) (3) (4) Totals Schedule J - Advertis Part I Income From 1 Name of periodical	Enter here and on page 1, Part I, line 10, col (A) ing Income (se	Enter h page line 1	rennected production related production related production product	from unrelated business (cominus colum gain, compute through	Basis Basis Jan 20 Ja	from activity it is not unrelate business incor	at ded ded ded ded ded ded ded ded ded de	attributat	ship	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26	
(2) (3) (4) Totals Schedule J - Advertis Part I Income From 1 Name of periodical (1)	Enter here and on page 1, Part I, line 10, col (A) ing Income (see Periodicals Real 2. Gros advertising the page 1)	Enter h page line 1	rennected production related production related production production production for the	solidated 4. Advertor (loss) (ccolos) if a gi	Basis Basis Jan 20 Ja	from activity it is not unrelate business incor	at ded ded ded ded ded ded ded ded ded de	attributat column	ship	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26 7. Excess readership costs (column 6 minus column 5, but not more	
(2) (3) (4) Totals Schedule J - Advertis Part I Income From 1 Name of periodical (1) (2)	Enter here and on page 1, Part I, line 10, col (A) ing Income (see Periodicals Real 2. Gros advertising the page 1)	Enter h page line 1	rennected production related production related production production production for the	solidated 4. Advertor (loss) (ccolos) if a gi	Basis Basis Jan 20 Ja	from activity it is not unrelate business incor	at ded ded ded ded ded ded ded ded ded de	attributat column	ship	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26 7. Excess readership costs (column 6 minus column 5, but not more	
(2) (3) (4) Totals Schedule J - Advertis Part I Income From 1 Name of periodical (1) (2) (3)	Enter here and on page 1, Part I, line 10, col (A) ing Income (see Periodicals Real 2. Gros advertising the page 1)	Enter h page line 1	rennected production related production related production production for the production	solidated 4. Advertor (loss) (ccolos) if a gi	Basis Basis Jan 20 Ja	from activity it is not unrelate business incor	at ded ded ded ded ded ded ded ded ded de	attributat column	ship	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26 7. Excess readership costs (column 6 minus column 5, but not more	
(2) (3) (4) Fotals Schedule J - Advertis Part I Income From	Enter here and on page 1, Part I, line 10, col (A) ing Income (see Periodicals Real 2. Gros advertising the page 1)	Enter h page line 1	rennected production related production related production production for the production	solidated 4. Advertor (loss) (ccolos) if a gi	Basis Basis Jan 20 Ja	from activity it is not unrelate business incor	at ded ded ded ded ded ded ded ded ded de	attributat column	ship	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26 7. Excess readership costs (column 6 minus column 5, but not more	
(2) (3) (4) Totals Schedule J - Advertis Part I Income From 1 Name of periodical (1) (2) (3)	Enter here and on page 1, Part I, line 10, col (A) ing Income (see Periodicals Real 2. Gros advertising the page 1)	Enter h page line 1	rennected production related production related production production for the production	solidated 4. Advertor (loss) (ccol 3) If a gcols 5 th	Basis Basis Jan 20 Ja	from activity it is not unrelate business incor	at ded ded ded ded ded ded ded ded ded de	attributat column	ship	expenses (column 6 minus column 5, but not more than column 4) Enter here and on page 1, Part II, line 26 7. Excess readership costs (column 6 minus column 5, but not more	

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

Form 990-T (2018)

FORM 990-T	DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED	STATEMENT	1
ĉ.	BUSINESS ACTIVITY		

INVESTMENT IN LIMITED PARTNERSHIPS THAT DISTRIBUTE DEBT-FINANCED INCOME

TO FORM 990-T, PAGE 1

FORM 990-T	OTHER INCOME	STATEMENT 2	
DESCRIPTION		AMOUNT	
GREENLIGHT MASTERS QUATHE PSG FUND, LLC TACONIC OPPORTUNITY F YORK SPECIAL OPPORTUN	UND, L.P.	22,001. 37,654. 14,522. -52,935.	
TOTAL TO FORM 990-T,	PAGE 1, LINE 12	21,242.	
FORM 990-T	OTHER DEDUCTIONS	STATEMENT 3	
DESCRIPTION	AMOUNT		
INVESTMENT FEES	42,171		
	42,171		