Exempt Organization Business Income Tax Return (and proxy tax under section 603(e))    Compartment of the Treesury Internative Services   Donot not tax year beginning 30L 1, 2017   Sea of the Services   Donot not tent in Services   Donot not tent in Services   Donot not tent in Services   Donot not not tent in Services   Donot not not in Services   Donot not not in Services   Donot n
For celender year 2017 or other tax year beginning JUL 1 2017   and ending JUN 30 , 2018   Page 10
Department of the Treasury Internal Powerines Services   December 1998   Dec
Describe the organization of servers   Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).   Control Public improvement of the province of t
Name of organization   Context dox in name changed and see instructions.   1
B   Exempt under section
Number, street, and room or suite no. If a P 0. box, see instructions.   City or town, state or province, country, and ZIP or foreign postal code   LAKEVILLE, CT 06039-0800   900001 713910
A08(e)   220(e)   220(e)   1   1   1   1   1   1   1   1   1
408A   530(a)   City or town, state or province, country, and ZIP or foreign postal code   900001   713910
Seg(a)   LAKEVILLE   CT 06039-0800   90001 713910
H Describe the organization's primary unrelated business activity. ► INVESTMENTS IN LIMITED PARTNERSHIPS    During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?
Describe the organization's primary unrelated business activity.   INVESTMENTS IN LIMITED PARTNERSHIPS
During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?
If Yes, enter the name and identifying number of the parent corporation.  J The books are in care of MELISSA WOODIN  Telephone number M860-435-3166  Part I Unrelated Trade or Business Income  (A) Income (B) Expenses (C) Net  1a Gross receipts or sales 116, 459.  b Less returns and allowances c Cost of goods sold (Schedule A, line 7) 3 Gross profit. Subtract line 2 from line 1c 4 Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part.II, line-17) (Tatach Form 4797) c Capital loss deduction for trusts Corporations (attach statement) c Rent income (Schedule C) c Unrelated debt-financed income (Schedule E) linterest, annuties, royalties, and rents from controlled organization (Schedule G) Investment income of a section 50 (to) (3) (5) (17) organization (Schedule G) Exploited exempt activity income. (Schedule J) 10 Cher income (See instructions, attach schedule) STATEMENT 1 12 9,050.  9 9,050. 13 Total. Combine lines 3 through 12 15 Income (Income (See instructions, attach schedule)) 15 (C) Part. (A) Income (See instructions, attach schedule) 16 (A) Income (B) Expenses (C) Net 16 (A) Income (B) Expenses (C) Net 116, 459.  116, 459.  12 116, 459.  13 116, 459.  14 116, 459.  16 116, 459.  17 116, 459.  18 116, 459.  19 116, 459.  10 116, 459.  116,
Telephone number   860-435-3166     Part   Unrelated Trade or Business Income   (A) Income   (B) Expenses   (C) Net     1a Gross receipts or sales   116,459.     b Less returns and allowances   c Balance   1c   116,459.     2 Cost of goods sold (Schedule A, line 7)   2   3   116,459.     4a Capital gain net income (attach Schedule D)   4a Capital gosin net income (attach Schedule D)   4a (loss) (Form 4797, Part,II, line-17) (attach Form 4797)   4b   4c   176,147.     5 Income (loss) from partnerships and Scorporations (attach statement)   5   -244,203.   -244,203.     6 Rent income (Schedule C)   C   C   C   C   C   C   C   C   C
Part   Unrelated Trade or Business Income   (A) Income   (B) Expenses   (C) Net
b Less returns and allowances  c Balance  1 c 116,459.  Cost of goods sold (Schedule A, line 7)  Gross profit. Subtract line 2 from line 1c  a Capital gain net income (attach Schedule D)  b Net gain (loss) (Form 4797, Part.II, line-17) (attach Form 4797)  c Capital loss deduction for trusts (Capital loss) from partnerships and Scorporations (attach statement)  Rent income (Schedule C)  Unrelated debt-financed income (Schedule E)  Interest, annuities, royalties, and rents from controlled organization (Schedule G)  Investment income of a section 501(0) (1) (9) (1) (1) roddinization (Schedule G)  Exploited exempt activity income (Schedule J)  Other income (See instructions, attach schedule)  STATEMENT 1  12 9,050. • 9,050.  13 57,453.
2 Cost of goods sold (Schedule A, line 7) 3 Gross profit. Subtract line 2 from line 1c 4 Capital gain net income (attach Schedule D) 4 Net gain (loss) (Form 4797, Part, II, line-17) (attach Form 4797) 6 Capital loss deduction for, trusts 2
3
4a Capital gain net income (attach Schedule D)  b Net gain (loss) (Form 4797, Part,II, Inne-17) (attach Form 4/97)  c Capital loss deduction for trusts 2 4c  5 Income (loss) from partnerships-and S corporations (attach statement)  6 Rent income (Schedule C)  7 Unrelated debt-financed income (Schedule E)  8 Interest, annuities, royalities, and rents from controlled organizations (Sch. F)  9 Investment income of a section 501(0)(7),(9),(0),(0),(1/2) organization-(Schedule G)  10 Exploited exempt activity income (Schedule J)  11 Advertising income (Schedule J)  12 Other income (See instructions, attach schedule)  13 Total. Combine lines 3 through 12  14
b Net gain (loss) (Form 4797, Part, II, Line-17) (attach Form 4797) c Capital loss deduction for trusts 2 4c  5 Income (loss) from partnerships and S corporations (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalities, and rents from controlled organizations Sch. F) 9 Investment income of a section 501(0)(7), (9), (0) (17) organization-(Schedule G) 10 Exploited exempt activity income. (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions, attach schedule) 13 Total. Combine lines 3 through 12 15 Total. Combine lines 3 through 12 16 Total Schedule II
c Capital loss deduction for trusts 2
Income (loss) from partnerships and S corporations (attach statement)  Rent income (Schedule C)  Unrelated debt-financed income (Schedule E)  Interest, annuities, royalties, and rents from controlled organizations (Sch. F)  Investment income of a section 504(0)(2), (9), (0), (17) organization-(Schedule G)  Exploited exempt activity income. (Schedule I)  Advertising income (Schedule J)  Other income (See instructions, attach schedule)  Total. Combine lines 3 through 12  -244, 203.
Rent income (Schedule C)  7 Unrelated debt-financed income (Schedule E)  8 Interest, annuities, royalities, and rents from controlled organizations (Sch. F)  9 Investment income of a section 504(0)(7), (9), (5), (17) rordanization (Schedule G)  10 Exploited exempt activity income (Schedule T)  11 Advertising income (Schedule J)  12 Other income (See instructions, attach schedule)  13 Total. Combine lines 3 through 12  14 2019  6 7  7  15 10  16 17  7  18 10  19 9  10 11  11 12  12 9,050. > 9,050.
Total. Combine lines 3 through 12  Unrelated debt-financed income (Schedule E)  Interest, annuities, royalities, and rents from controlled organizations (Sch. F)  Investment income of a section 504(0)(7), (9), (7) (17) royalanization-(Schedule G)  Exploited exempt activity income. (Schedule I)  10  11  12  9,050. →  9,050.  13  57,453.
9 Investment income of a section 504(b) (c) (c) (g) (c) (r) rordalization (Schedule G)  10 Exploited exempt activity income (Schedule T)  11 Advertising income (Schedule J)  12 Other income (See instructions, attach schedule)  13 Total. Combine lines 3 through 12  14 13 57, 453.
10       Exploited exempt activity income.(Schedule I)       10         11       Advertising income (Schedule J)       11         12       Other income (See instructions, attach schedule)       STATEMENT 1       12       9,050. □       9,050.         13       Total. Combine lines 3 through 12       13       57,453.       57,453.
11 Advertising income (Schedule J)       11         12 Other income (See instructions, attach schedule)       STATEMENT 1       12       9,050. ⋄       9,050.         13 Total. Combine lines 3 through 12       13       57,453.       57,453.
12 Other income (See instructions, attach schedule)       STATEMENT 1       12       9,050. →       9,050.         13 Total. Combine lines 3 through 12       13       57,453.       57,453.
13 <b>Total.</b> Combine lines 3 through 12 13 57, 453. 57, 453.
10 Total: Combine mice of micegin 12
The die in the deductions for taken bisewifere (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
15 Salaries and wages 162,634.
16 Repairs and maintenance 16 7,155.
17 Bad debts 18 Interest (attach schedule) 18
18 Interest (attach schedule)  19 Taxes and licenses  19 11,172.
20 Charitable contributions (See instructions for limitation rules)
21 Depreciation (attach Form 4562)
22 Less depreciation claimed on Schedule A and elsewhere on return 22a 22b 8,214.
23 Depletion
24 Contributions to deferred compensation plans 25 Employee benefit programs 26 78,984.
27 Excess readership costs (Schedule J) 27
27 Excess readership costs (Schedule J) 27
Excess readership costs (Schedule J)  Other deductions (attach schedule)  Total deductions. Add lines 14 through 28  Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13  Excess readership costs (Schedule J)  27  28  1,226,216.  29  1,494,375.  30  -1,436,922.
Excess readership costs (Schedule J)  Other deductions (attach schedule)  Total deductions. Add lines 14 through 28  Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13  Net operating loss deduction (limited to the amount on line 30)  Excess readership costs (Schedule J)  27  28  1, 226, 216.  29  1, 494, 375.  30  -1, 436, 922.  31
Excess readership costs (Schedule J)  Other deductions (attach schedule)  Total deductions. Add lines 14 through 28  Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13  Net operating loss deduction (limited to the amount on line 30)  Unrelated business taxable income before specific deduction. Subtract line 31 from line 30  Unrelated business taxable income before specific deduction. Subtract line 31 from line 30  32  32  33  34  35  36  37  38  39  39  30  30  31  30  31  30  31  30  31  31
Excess readership costs (Schedule J)  Other deductions (attach schedule)  Total deductions. Add lines 14 through 28  Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13  Net operating loss deduction (limited to the amount on line 30)  Excess readership costs (Schedule J)  28  1,226,216.  29  1,494,375.  30  -1,436,922.  31

723701 01-22-18 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-T (2017)

1	1									
Form 990-1	(2017)	THE HOTCHKISS SCHOOL				06-0647	010			Page 2
Part I		ax Computation		<del></del>	<del></del> -	00-0047	010			rago <u>r</u>
35		izations Taxable as Corporations. See ins	structions for tay computat	ion			Т	T		
	-	olled group members (sections 1561 and 1	· · · · · · · · · · · · · · · · · · ·	See instruction:	s and					
а		your share of the \$50,000, \$25,000, and \$9	•	-						
_		\$ (2) [\$		(3) [\$						
ь		organization's share of: (1) Additional 5%	tax (not more than \$11,75				ľ	1		
		dditional 3% tax (not more than \$100,000)	•	\$				_		
С		ne tax on the amount on line 34				<b>•</b>	35c			0.
36	Trusts	Taxable at Trust Rates. See instructions	for tax computation. Incon	ne tax on the amo	unt on line 34 from:	:				
		Tax rate schedule or Schedule D (I	Form 1041)			<b>&gt;</b>	36			
37	Proxy	tax. See instructions				<b>&gt;</b>	37			
38	Altern	ative minimum tax					3.8			
39	Tax o	n Non-Compliant Facility Income. See ins	tructions			. 44	39		_	
40		Add lines 37, 38 and 39 to line 35c or 36,	whichever applies			40	40	<u> </u>		0.
Part I		ax and Payments	<del></del>	<del></del>	<del></del> -		·	1		
		n tax credit (corporations attach Form 111	8; trusts attach Form 1116	)	41a		4	Í		
b		credits (see instructions)			41b		4	į		
C		al business credit. Attach Form 3800			41c		┨			
đ		for prior year minimum tax (attach Form 8	801 or 8827)		41d			-		
		credits Add lines 41a through 41d				46	41e			0.
42		act line 41e from line 40 taxes. Check if from; Form 4255	] carm 0011	8697  Form	n 8866 🗔 Other	. ,		<del> </del>		<del></del>
43		taxes. Check if from; Form 4255 tax. Add lines 42 and 43	Form 8611 Form	0097 F0111	1 0000 L Other	(attach schedule)	43	<del> </del>		0.
44 45 o		ents: A 2016 overpayment credited to 2017	,	50		6,019.	4.	<del> </del>		<del></del>
	-	estimated tax payments		Si	45b	0,020.	1			
		eposited with Form 8868			45c		1			
		n organizations. Tax paid or withheld at soi	irce (see instructions)		45d		1			
		p withholding (see instructions)	2, 00 (000 mon 00.10110)		45e		1			
		for small employer health insurance premi	ums (Attach Form 8941)	,	45f		1			
			Form 2439							
•		Form 4136	Other	Total	▶ 45g					
46	Total	payments. Add lines 45a through 45g	<del></del>	<del></del>		61	46		6,	019.
47	Estima	ated tax penalty (see instructions). Check if	Form 2220 is attached 🕨	· 🗀		•	47			
48	Tax di	ie. If line 46 is less than the total of lines 4	4 and 47, enter amount ow	red		⊸ ںسے	48			
49		ayment. If line 46 is larger than the total of	•	ount overpaid	1	67_▶	49		6,	019.
50	- 1 -	the amount of line 49 you want. Credited to		<u> </u>		efunded 50 >	50			0.
Part V		statements Regarding Certain								
51	-	time during the 2017 calendar year, did th	•	•		•			Yes	No
		financial account (bank, securities, or othe	, ,		•					
		N Form 114, Report of Foreign Bank and Fir  OTHER COUNTRY	nancial Accounts. If YES, e	nter the name of t	ne toreign country				<u></u>	
50		<del></del>	dut history from a super	t the seaster of a	- tt to a t-	raign triint?	-			x
52		the tax year, did the organization receive a	·	it the grantor of, t	or transferor to, a fo	reign uustz				<u> </u>
53		, see instructions for other forms the organ the amount of tax-exempt interest received	•	war 🕨 ¢						
		der penalties of perjury, I declare that I have examine			d statements, and to the	best of my knowle	dge and	belief, it is true	<b>┴</b> ┘ 8,	
Sign		rect, and complete Declaration of preparer (other th		rmation of which pre		ie IAL -				
Here			15/13/19	OFFICER		м		RS discuss this rer shown belo		rith
		Signature of officer	Date	Title				ns)? X Y		No
		Print/Type preparer's name	Preparer's signature		Date		f PT			
Paid		Abs Brisby S. S. Harris				self- employed	' '			
Prepa	rer	JOHN TOSCANO	JOHN TOSCANO		05/10/19		P	00358542	!	
Use C		Firm's name ► COHNREZNICK LLP				Firm's EIN ▶		22-1478	099	

Form 990-T (2017)

Phone no. 959-200-7000

350 CHURCH STREET, 12TH FLOOR

Firm's address 

HARTFORD, CT 06103

Form 990-T (2017) THE HOTCHKISS	SCHOOL					06-06470	18		Page 3
Colored Coods	- 0-1-1		_						
Schedule A - Cost of Goods	S SOIG. Enter	method of inven	Τ.				_	1	
1 Inventory at beginning of year	1 1	<del></del>	7	Inventory at end of year		•	6		
2 Purchases	2	·	- <sup>7</sup>	Cost of goods sold. Su					
3 Cost of labor	3		-	from line 5. Enter here a	and in F	art I,		-	
4a Additional section 263A costs				line 2			7	I Van	LNa
(attach schedule)	4a		8	Do the rules of section	•	•		Yes	l No
b Other costs (attach schedule)	4b		4	property produced or a	cquired	for resale) apply to			.
5 Total Add lines 1 through 4b	5		<u> </u>	the organization?		IMEN D. I.D.		<del>,</del>	Ь
Schedule C - Rent Income (	(From Real	Property and	Pers	ional Property L	ease	d with Real Prop	еπу	")	
(see instructions)									
1. Description of property									
(1)									
(2)									
(3)				<del></del>					
(4)									
	2. Rent receiv	ed or accrued				0/2) 0-4		ated with the increase in	
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	centage of than	of rent for p	ersonal ;	nal property (if the percentag property exceeds 50% or if d on profit or income)	je	3(a) Deductions directly columns 2(a) ar	nd 2(b)	(attach schedule)	
(1)									
(2)							-		
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns	2(a) and 2(b). En	ter				(b) Total deductions.			
here and on page 1, Part I, line 6, column		<b>&gt;</b>			0.	Enter here and on page 1, Part I, line 6, column (B)	<b></b>		0.
Schedule E - Unrelated Deb	t-Financed	Income (see	instruc	ctions)					
			2	. Gross income from		<ol><li>Deductions directly control to debt-finance</li></ol>			
1. Description of debt-fir	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation		(b) Other deduction	
, <u> </u>				indicou proparty		(attach schedule)		' (attach schedule)	
(1)		·					+		
(2)							$\top$		
(3)	- <del></del>						1	······································	
(4)							$\top$		
4. Amount of average acquisition	5 Average	adjusted basis	6	Column 4 divided		7. Gross income	1	8. Allocable deduct	ions
debt on or allocable to debt-financed property (attach schedule)	of or a	allocable to nced property n schedule)		by column 5		reportable (column 2 x column 6)		(column 6 x total of co 3(a) and 3(b))	
(1)				%					
(2)				%					
(3)				%					
(4)				%					
						nter here and on page 1, Part I, line 7, column (A)		Enter here and on pag Part I, line 7, column	
Totals				▶		0	.		0.
Total dividends-received deductions in	ncluded in column	n 8				<b>-</b>	•		0.

Form 990-T (2017)

Schedule F - Interest, F	- Intuities	o, noyali	all		Controlled O				. 1268 IUZ	tructions	2)
Name of controlled organizate	ion	2. Emp identific num	cation	3, Net unr	elated income a instructions)	4. Tota	al of specified nents made	includ	t of column 4 t ed in the contr ation's gross i	olling	6. Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organia	zations			<u> </u>							
7. Taxable Income		nrelated incom		9. Total	of specified payr made	nents	10. Part of column in the controllingross	mn 9 tha ing orgar s income	nzation's		fuctions directly connected income in column 10
(1)		<del>.</del>		<u> </u>							
(2)				-						•	
(3)				<u> </u>							
(4)											
				-			Add colun Enter here and line 8, c		1, Part I,	Enter h	d columns 6 and 11 are and on page 1, Part I, line 8, column (B)
Totals						▶			0.		0
Schedule G - Investme (see instr		ne of a S	ection	501(c)(7	'), (9), or (	17) Org				_	
1. Desc	ription of incor	ne			2. Amount of	income	<ol> <li>Deduction directly connected (attach schedule)</li> </ol>	cted	4. Set-		5. Total deductions and set-asides (col 3 plus col 4)
(1)											_
(2)											<u> </u>
(3)		·				1					
(4)											
Totals				<b>•</b>	Enter here and Part I, line 9, co						Enter here and on page 1 Part I, line 9, column (B)
Schedule I - Exploited (see instru	-	Activity	Income	e, Other	Than Adv	ertisin	g Income				
Description of exploited activity	2. G unrelated income trade or b	business a from	directly of with pro of unr	penses connected oduction elated s income	4. Net inconfrom unrelated business (cominus cotum gain, comput through	I trade or olumn 2 n 3) If a e cols 5	5. Gross inco from activity to is not unrelate business inco	hat ed	6. Exp attributi colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)							•				
(2)	İ					İ		•	l		
(3)	<u> </u>									-	
(4)	Enter her page 1, line 10,	Part I,		re and on I, Part I, col (B)							Enter here and on page 1, Part II, line 26
Totals	<u> </u>	0.	<u>.</u>	0.	<u> </u>						0
Schedule J - Advertisir Part I Income From I					solidated	Basis					
1. Name of periodical		2. Gross advertising income		3. Direct ertising costs	or (loss) (c		5. Circula:		6. Read		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)				•							
(2)		<del></del>			7				<b></b>		
(3)			$\dashv$		-	•					
(4)			<del></del>		_			-	<del> </del>		
(7)			+		+		+		<b>-</b>		
Totals (carry to Part II, line (5))	<b>•</b>		0.	(	<u>.</u>						0 Form <b>990-T</b> (201

### 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 ) Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. 7. Excess readership 2. Gross 6. Readership costs costs (column 6 minus column 5, but not more 3. Direct 5. Circulation advertising income 1. Name of periodical advertising costs than column 4) (1) (2) (3) (4) 0. ▶ 0. Totals from Part I Enter here and on page 1, Part I, line 11, col (B) Enter here and Enter here and on on page 1, Part II, line 27 0. Totals, Part II (lines 1-5) Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of 4. Compensation attributable

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

Form 990-T (2017)

FORM 990-T	OTHER INCOME	STATEMENT 1
DESCRIPTION		AMOUNT
DISALLOWED PARKING FRIN	GE BENEFITS	9,050.
TOTAL TO FORM 990-T, PA	GE 1, LINE 12	9,050.
FORM 990-T	OTHER DEDUCTIONS	STATEMENT 2
DESCRIPTION		AMOUNT
INVESTMENT MANAGEMENT F SUPPLIES OCCUPANCY PRINTING & PUBLICATIONS DUES & SUBSCRIPTIONS OTHER ALLOCATED EXPENSE OTHER ALLOCATED EXPENSE	S - INVESTMENTS	684,288. 14,026. 1,378. 419. 790. 291,993. 233,322.
		1,226,216.

FORM 990-T	NET	OPERATING LOSS D	TING LOSS DEDUCTION		
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR	
06/30/09	551,580.	551,580.	0.	0.	
06/30/10	1,068,715.	1,068,715.	0.	0.	
06/30/11	295,656.	295,656.	0.	0.	
06/30/12	2,674,778.	2,514,480.	160,298.	160,298.	
06/30/13	1,574,733.	0.	1,574,733.	1,574,733.	
06/30/14	447.	0.	447.	447.	
06/30/17	554,675.	0.	554,675.	554,675.	
NOL CARRYO	VER AVAILABLE THIS	YEAR	2,290,153.	2,290,153.	

FORM 990-T INCOME	(LOSS) FROM PARTNERS	HIPS	STATEMENT 4
PARTNERSHIP NAME	GROSS INCOME	DEDUCTIONS	NET INCOME OR (LOSS)
AG REALTY FUND VI, L.P C/O ANG	ELO,		
GORDON & CO, LP	-7,722.	0.	-7,722
AG REALTY FUND VII (TE), LP.	-2,902.	414.	-3,316,
BERKSHIRE FUND IX, L.P.	2,589.	96,536.	-93,947.
CARLYLE/ RIVERSTONE GLOBAL ENE	RGY		
AND POWER FUND III, LP	-32,881.	4,722.	-37,603.
COMMONFUND CV IX	-621.	1,517.	-2,138,
COMMONFUND CV X	-2,490.	2,492.	-4,982.
COMMONFUND CV XI	-34.	6,389.	-6,423,
DUNE PARALLEL AIV II	-14,929.	0.	-14,929.
DUNE PARALLEL AIV LP	-12,172.	0.	-12,172,
DUNE REAL ESTATE PARALLEL FUND	II		
LP	430.	0.	430,
DUNE REAL ESTATE PARALLEL FUND ENDOWMENT PRIVATE EQUITY PARTN		0.	57,034.
IV	-1,317.	158.	-1,475
ENDOWMENT VENTURE PARTNERS V	-17.	0.	-17
GS CAPITAL PARTNERS VI PARALLE	L, LP -10.	19.	-29
HIGHFIELDS CAPITAL IV	-762.	0.	-762,
JC FLOWERS II L.P.	-19.	8,692.	-8,711.
JCF II AIV-K LP	6,902.	1,792.	5,110.
NATURAL GAS PARTNERS IX, LP	737.	303.	434,
NATURAL GAS PARTNERS VIII, LP.	8,685.	9,100.	-415.
THE HSH AIV 1 TRUST	0.	23,763.	-23,763,
WHITEHALL 2001	-1,406.	0.	-1,406.
WHITEHALL PARALLEL GLOBAL REAL			
ESTATE LP 2007	5,219.	16.	5,203,
YORKTOWN ENERGY PARTNERS VI	-999.	197.	-1,196.
YORKTOWN ENERGY PARTNERS VII	96,574.	145,747.	-49,173.
YORKTOWN ENERGY PARTNERS VIII	65,711.	107,946.	-42,235.
TOTAL TO FORM 990-T, PAGE 1, L	INE 5 165,600.	409,803.	-244,203.

## SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

THE HOTCHKISS SCHOOL

Form(s) 8949 with Box E checked

10 Totals for all transactions reported on

Capital Gains and Losses

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. 
■ Go to www.irs.gov/Form1120 for instructions and the latest information.

2017

Name

Employer identification number

06-0647018

Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I See instructions for how to figure the amounts (d) Proceeds (sales price) (e) Cost (or other basis) (g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g) (h) Gain or (loss) Subtract to enter on the lines below. column (e) from column (d) and ombine the result with column (g) This form may be easier to complete if you round off cents to whole dollars 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1b Totals for all transactions reported on 218,996. 219,176. 180 Form(s) 8949 with Box A checked 2 Totals for all transactions reported on Form(s) 8949 with Box B checked 3 Totals for all transactions reported on Form(s) 8949 with Box C checked 4 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 5 6 6 Unused capital loss carryover (attach computation) 218 996. 7 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h Long-Term Capital Gains and Losses - Assets Held More Than One Year See instructions for how to figure the amounts to enter on the lines below. (d) (g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g) (h) Gain or (loss) Subtract column (e) from column (d) and ombine the result with column (g) This form may be easier to complete if you (sales price) (or other basis) round off cents to whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to 8b Totals for all transactions reported on 13,055 55,904 -42,849. Form(s) 8949 with Box D checked Totals for all transactions reported on

	Form(s) 0949 with bux F checked		
11	Enter gain from Form 4797, line 7 or 9	11	
12	Long-term capital gain from installment sales from Form 6252, line 26 or 37	12	
13	Long-term capital gain or (loss) from like-kind exchanges from Form 8824	13	
1.4	Canital nain distributions	14	/

14 Capital gain distributions

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h

16 Part III Summary of Parts I and II

16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)

17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)

18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns If the corporation

18 176,147.

has qualified timber gain, also complete Part IV

Note: If losses exceed gains, see Capital losses in the instructions.

Schedule D (Form 1120) 2017

JWA

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule Q (Form 1120) 2017 THE HOTCHKISS SCHOOL		06-064/016	Page_2
Part IV Alternative Tax for Corporations with Qualifie	d Timber Gain. Complete Pa	art IV only if the corporation has	
qualified timber gain under section 1201(b). Skip this part if you are	e filing Form 1120-RIC. See instruction	ons.	
19 Enter qualified timber gain (as defined in section 1201(b)(2))	19		
20 Enter taxable income from Form 1120, page 1, line 30, or the applicable line			•
of your tax return	20		
21 Enter the smallest of: (a) the amount on line 19; (b) the amount on line 20, or	1 1	,	
(c) the amount on Part III, line 17	21		
		·	
22 Multiply line 21 by 23.8% (0.238)	1 1	22	
23 Subtract line 17 from line 20. If zero or less, enter -0-	23	<u></u>	
24 Enter the tax on line 23, figured using the Tax Rate Schedule (or applicable tax r.	ate) appropriate for	,	
the return with which Schedule D (Form 1120) is being filed	1 1	24_	
•			,
25 Add lines 21 and 23	25	<u> </u>	
26 Subtract line 25 from line 20. If zero or less, enter -0-	26		
27 Multiply line 26 by 35% (0.35)		27	
		00	
28 Add lines 22, 24, and 27		28	
29 Enter the tax on line 20, figured using the Tax Rate Schedule (or applicable tax r	ate) appropriate for the		
return with which Schedule D (Form 1120) is being filed	hadula I lina O or tha	29	
30 Enter the smaller of line 28 or line 29. Also enter this amount on Form 1120, Sci	neavie J, line Z, or the	30	
applicable line of your tax return		Schedule D (Form	1120\ 2017

Internal Revenue Service

## **Sales and Other Dispositions of Capital Assets**

► Go to www.irs.gov/Form8949 for instructions and the latest information. File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. OMB No. 1545-0074

Name(s) shown on return

Social security number or taxpayer identification no.

06-0647018

THE HOTCHKISS SCHOOL	06-0647018
Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was report broker and may even tell you which box to check.	broker A substitute ted to the IRS by your
Part I Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term trans Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for codes are required. Enter the totals directly on Schedule D, line 1a, you aren't required to report these transactions on Form 89	r which no adjustments or

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box if you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(C) Short-term transactions no	t reported to you	on Form 1099-	3	,	·		
1 (a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo , day, yr )	(c) Date sold or disposed of (Mo., day, yr)	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and see Column (e) in the instructions	loss. If you	at, if any, to gain or ou enter an amount (g), enter a code in See instructions.  (g)  Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
SHORT TERM CAPITAL GAIN							
CARLYLE/RIVERSTONE III			2,083.	0.			2,083.
LONG TERM CAPITAL LOSS							1
ENDOWMENT VENTURE PARTNERS							
v				180.			<180.>
SHORT TERM CAPITAL GAIN							
KENSICO ASSOCIATE LP			45,689.				45,689.
SEC 1231 GAIN DUNE REAL							
ESTATE PARALLE FUND II LP			170,886.				170,886.
SEC 1231 GAIN ENDOWMENT							
PRIVATE EQUITY PARTNERS IV			151.				151.
SEC 1231 GAIN ENDOWMENT							
VENTURE PARTNERS V			1.			-	1.
SEC 1231 GAIN YORKTOWN							
ENERGY PARTNERS VII			291.				291.
SEC 231 GAIN YORKTOWN		-					
ENERGY PARTNERS VIII			75.				75.
						-	
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					<del> </del>		
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	<del>                                     </del>			-			
	( ) ( ) ( )	10.77		-			
2 Totals. Add the amounts in colu							
negative amounts) Enter each to		•					
Schedule D, line 1b (if Box A ab	•		210 176	1			210 006
above is checked), or line 3 (if I	Box C above is c	hecked)	219,176.	180.	L		218,996.

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

723011 11-02-17 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2017)

01544251

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on page 1

Social security number or taxpayer identification no.

THE HOTCHKISS SCHOOL

06-0647018

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a, you aren't required to report these transactions on Form 8949 (see instructions)

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss. If you enter an amount (d) (a) (b) (c) (e) Proceeds Gain or (loss). Cost or other Description of property Date acquired Date sold or ın column (g), enter a code ın (sales price) Subtract column (e) basis See the (Example 100 sh XYZ Co.) disposed of (Mo., day, yr) column (f). See instructions. Note below and from column (d) & (Mo, day, yr) (g) combine the result see Column (e) Ir Amount of Code(s) with column (g) the instructions adjustment LONG TERM CAPITAL LOSS 47,834. <47,834.> CARLYLE/RIVERSTONE III 0 SHORT TERM CAPITAL GAIN 3,509 3,509. COMMONFUND CV XI LONG TERM CAPITAL GAIN 9,545. 9,545 COMMONFUND CV XI LONG TERM CAPITAL LOSS ENDOWMENT PRIVATE EQUITY 3,491. <3,491.> PARTNERS IV LONG TERM CAPITAL GAIN JCF 1. II AIV-K LP 1 SEC 1231 LOSS CARLYLE/RIVERSTONE GLOBAL <4,579.> 4,579 ENERGY Totals. Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E 13,055. 55,904 <42,849.> above is checked), or line 10 (if Box F above is checked)

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

723012 11-02-17 Form **8949** (2017)

# Form **8827**

**Credit for Prior Year Minimum Tax - Corporations** 

OMB No. 1545-0123

2017

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

Employer identification numb 06-0647018 THE HOTCHKISS SCHOOL 1 Alternative minimum tax (AMT) for 2016. Enter the amount from line 14 of the 2016 Form 4626 72,597. 2 Minimum tax credit carryforward from 2016. Enter the amount from line 9 of the 2016 Form 8827 3 Enter any 2016 unallowed qualified electric vehicle credit (see instructions) 72,597. 4 Add lines 1, 2, and 3 5 Enter the corporation's 2017 regular income tax liability minus allowable tax credits (see instructions) 6 Is the corporation a "small corporation" exempt from the AMT for 2017 (see instructions)? • Yes, Enter 25% of the excess of line 5 over \$25,000. If line 5 is \$25,000 or less, enter -0-• No. Complete Form 4626 for 2017 and enter the tentative minimum tax from line 12 0. 7<u>a</u> 7a Subtract line 6 from line 5. If zero or less, enter -0b For a corporation electing to accelerate the minimum tax credit, enter the bonus depreciation 7b amount attributable to the minimum tax credit (see instructions) 7c c Add lines 7a and 7b 8a Enter the smaller of line 4 or line 7c. If the corporation had a post-1986 ownership change 8a or has pre-acquisition excess credits, see instructions b Current year minimum tax credit. Enter the smaller of line 4 or line 7a 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 8b excess credits, see instructions. If you made an entry on line 7b, go to line 8c. Otherwise, skip line 8c c Subtract line 8b from line 8a. This is the refundable amount for a corporation electing to accelerate the minimum tax credit. Include this amount on Form 1120, Schedule J, Part II, line 19c (or the applicable line of your return) 8c 9 Minimum tax credit carryforward to 2018. Subtract line 8a from line 4. Koop a record of this 72,597. amount to carry forward and use in future years