			T.	XTENDED TO	MAV	15 202	20	93830	96	2810 1
Fo	990-T	l E	Exempt Orga					• '	,	OMB No 1545-0687
			. (	and proxy tax ui	nder se	ction 6033	3(e))			2040
	· ".	For ca	lendar year 2018 or other tax						<u> 19</u>	2018
	مر , بر مر , partment of the Treasury			w irs gov/Form990T fo					,  -	Open to Public Inspection for 50 (c)(3) Organizations Only
_	ernal Revellue Service		Do not enter SSN numi	.,				ation is a 50 i(c)(.		501(c)(3) Organizations Only over identification number
Α	Check box if address changed		THE LOOMIS	Check box if nam	e changed	and see mstru	cuons )		Empt	oyees' trust, see ctions )
R	Exempt under section	Print	D/B/A THE		FEE	SCHOOL			0	6-0653119
	X 501(c√()β )	or		om or suite no If a P O					E Unrela	ated business activity code
Ē	408(e) 220(e)	Туре	BATCHELDER		•				(366 !!	isitactions j
	408A 530(a)		City or town, state or pi	rovince, country, and ZII	or foreigi	n postal code			525	990
C	Book value of all assets	L	F Group exemption nu	mher (See instructions.)	<b>&gt;</b>				.12	
,	378,936,4	66.	G Check organization to	/pe <b>X</b> 501(c) c	orporation	501	(c) trust	401(	a) trust	Other trust
HI	Enter the number of the	organiza	tion's unrelated trades o	r businesses. 🕨 🔒	5			the only (or first) t		
t	rade or business here	► INC	COME FROM L	IMITED PART	'NERS	HIPS .	only one,	complete Parts I-\	If more	than one,
(	describe the first in the b	lank spa	ce at the end of the prev	ious sentence, complete	Parts I an	d II, complete	a Schedule	M for each addition	onal trade	or
	ousiness, then complete								1 1	
			oration a subsidiary in a		rent-subsi	diary controlle	d group?	•	Ye	s X No
			tifying number of the par				Talanh	one number 🕨	<u> </u>	) 687-6226
			de or Business Ir		-	(A) Inco		(B) Expens		(C) Net
	a Gross receipts or sale		ac or business in		т	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(2) 2.200.0	+	(0,
	b Less returns and allo			c Balance	1c					. /
2	Cost of goods sold (S		A line 7)		2					<del></del>
3	Gross profit Subtract				3					6
	a Capital gain net incon				4a				-	
			art II, line 17) (attach Fo	rm 4797)	4b				4	<i></i>
	c Capital loss deduction		• •		4c					
5	Income (loss) from a	m a partnership or an S corporation (attach statement)				-19,	820.	STMT	2	-19,820.
6	- Rent income (Schedu	ile C)			6					
7	Unrelated debt-finance	anced income (Schedule E) 7								
8	·		nd rents from a controlle	*				<u>/</u>		
9			on 501(c)(7), (9), or (17)	organization (Schedule			_/_	<del> </del>		
10	Exploited exempt acti	-		•	10					
11	· ·			•	11	/_				
12	Other income (See in				12	10	820.			-19,820.
13			<sup>gn 12</sup> ot Taken Elsewho	ara (Can instructions	13					-19,020.
ַרַ			utions, deductions mu					s income )		•
14		icers, di	rectors, and trustees (Sc	hedule K)					14	
15	Salaries and wages								15	
16	•	ance							16	
17	Bad debts								17	
18	Interest (attach sche	dule) (si	ee instructions)						18	
19	Taxes and licenses	(0		,					19	0.
20			e instructions for limitation				o 1		20	<u> </u>
21	Depreciation (attach			RECI	EIVE	)   -	21 22a		22b	
22		anneu oi	n Schedule A and elsewh	1 1			224		23	<del></del>
23 24	Depletion Contributions to def	arrad cou	moneation plans	.DEC 1	5 202	RS-OS(			24	
25	Employee benefit pro		Albenisation bians		O LOL				25	
26	Excess exempt expe		chedule 1)		TAI II				26	
27	Excess readership c			OGD	<u> </u>	ᆜ .			27	
28	Other deductions (at					SEE	STAT	EMENT 3	28	750.
29	Total deductions A								29	750.
30	/		ncome before net operati	ng loss deduction Subt	act line 29	from line 13			30	-20,570.
31			oss arising in tax years b	=			tions)		31	
20.		-	ncome Subtract line 31 f					1	32	-20,570.
32 823	Otherated publicas i	unabic ii	iconie Subtract ille 31 i	rom line 30					22	Form <b>990-T</b> (2018)

-20,570. Form **990-T** (2018) **G/9** 43035\_\_2

11

Form 990-T (2018) D/B/A THE LOOMIS CHAFFEE SCHOOL

Part #	Total Unrelated Business Taxable Income				
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	11:	33 2	234,7	768.
34	Amounts paid for disallowed fringes	• ⊢	34		
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) STMT 6	_		234,7	768.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of		71-		
	lines 33 and 34		36		
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	~ -	37	1,0	000.
38	Unrelated business taxable income Subtract line 37 from line 36. If line 37 is greater than line 36,				
	enter the smaller of zero or line 36	[ :	38		0.
Part J	/ Tax Computation		i		
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0.21)		39		0.
40	Trusts 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)		4b		
41	Proxy tax See instructions	▶ [4	41		
42	Alternative minimum tax (trusts only)		42		
43.	Tax on Noncompliant Facility Income See instructions		43		
\\	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	7	44		0.
Part X	Tax and Payments				
45 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)				
b	Other credits (see instructions)				
C	General business credit Attach Form 3800 45c				
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	$\square$ .			
е	Total credits Add lines 45a through 45d		5e		
46	Subtract line 45e from line 44		46		0.
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedu	te) 4	47		
48	Total tax Add lines 46 and 47 (see instructions)		48		0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	L	19		0.
50 a	Payments: A 2017 overpayment credited to 2018	] `			
b	2018 estimated tax payments 50b 2 , 24	8.			
C	Tax deposited with Form 8868 . 50c				
d	Foreign organizations. Tax paid or withheld at source (see instructions)				
	Backup withholding (see instructions) 50e				
	Credit for small employer health insurance premiums (attach Form 8941)	_			
9	Other credits, adjustments, and payments Form 2439	_			
	Form 4136 X Other 2,247. Total 50g 2,24			4 4	٥.
	Total payments Add lines 50a through 50g SEE STATEMENT 5	1-5	511 2	4,4	95.
	Estimated tax penalty (see instructions). Check if Form 2220 is attached				
	Tax due If line 51 is less than the total of lines 48, 49, and 52, enter amount owed  Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid		4	1 1	95.
54 55	Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid  Enter the amount of line 54 you want Credited to 2019 estimated tax  Refunded	_	5		95.
Part V		-13	3	4,4	90.
	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority			Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file			163	'10
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign country			}	ļ
	here > SEE STATEMENT 4			x	
	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?			-	X
	If "Yes," see instructions for other forms the organization may have to file			-	<del> </del> -
	Enter the amount of tax-exempt interest received or accrued during the tax year > \$			ļ	1
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my correct, and complete Declaration of preparer than Jaxpayer) is based on all information of which preparer has any knowledge	knowled	ge and belief,	it is true,	
Sign	correct, and complete Declaration of preparer forfier than taxpayer) is based on all information of which preparer has any knowledge				
Here	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		ne IRS discuss eparer shown b		with
	Signature of officer Date / Title	ınstruc	trons)? X	Yes	No
	Print/Type preparer's name Preparer's signature Date Check	ıf	PTIN		
Paid	self- employ	ed			
Prepa	rer LAURA J. KENNEY LAURA J. KENNEY 06/24/20		P0020		
Use O	nly Firm's name ► BLUM, SHAPIRO & COMPANY, P.C.   Firm's EIN	<b>&gt;</b>	06-10	0920	5
- J- G- G-	ONE INTERNATIONAL PLACE, 16TH FLOOR				
	Firm's address ► BOSTON, MA 02110 Phone no	617	7-717 <u>-</u>	0831	
927711 01	20.40			QQQ_T	(0040)

Schedule A - Cost of Good	is Sold. Enter	method of invei	ntory v	aluation N/A				_
1 Inventory at beginning of year	1	/		Inventory at end of year	ar		6	
2 Purchases	2			Cost of goods sold Si		line 6	, ** ,×	
3 Cost of labor	3			from line 5 Enter here	and in I	Part I,	Î	
4 a Additional section 263A costs				line 2			7	
(attach schedule)	4a		8	Do the rules of section	263A (	with respect to	Yes 1	۷o
b Other costs (attach schedule)	4b			property produced or a	acquired	for resale) apply to	7.3	
5 Total Add lines 1 through 4b	5		1	the organization?				
Schedule C - Rent Income (see instructions)	(From Real	Property an	d Pe	rsonal Property	Leas	ed With Real Prop	perty)	
1 Description of property							<del>,</del>	
(1)								
(2)								
(3)								
(4)		<del></del>						
		ed or accrued				3(a) Deductions directly	connected with the income in	
(a) From personal property (if the property is more than 50% but not more than 50%	re than	` of rent for	personal	onal property (if the percents property exceeds 50% or if ed on profit or income)	age	columns 2(a) and	d 2(b) (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		iter -			0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	<b>▶</b> (	0.
Schedule E - Unrelated De	bt-Financed	I Income (see	ınstru	ctions)				
			] 2	Gross income from		3 Deductions directly conn to debt-finance		
1 Description of debt-f	inanced property			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-linanced property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property n 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 column 3(a) and 3(b))	
(1)				%				
(2)				%				_
(3)				%				
(4)			1	%				_
						nter 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.	,	) <b>.</b>
Total dividends-received deductions in	ncluded in columr	ı 8				<b>&gt;</b>		).

	_	_	_	_	_	_
1	6	5	ાર	7	1	ч
,	u	_		_		_

Form 9	90-T (2018) D/B/A	THE L	OOMIS	CHAF	FEE S	SCHOOL_				06-06			age 4
Sche	dule F - Interest,	Annuitie	s, Roya	Ities, a	nd Rent	s From C	ontroll	ed Organiz	ation	<b>15</b> (see ins	struction	ns)	
	•				Exempt	Controlled O	rganizati	ons					
,	Name of controlled organizat	ion					al of specified nents made 5 Part of columnic included in the organization's grid		ed in the cont	rolling	6 Deductions direct connected with incor in column 5		
(1)	<del>-</del>												
(2)	<del></del>												
(3)	<del></del>		<u> </u>		<del> </del>								
(4)			<del></del>										
	empt Controlled Organi	zatione			<u> </u>		l .						
Nonex	7 Taxable Income	8 Net u	nrelated incor		9 Total	of specified pay made	ments	10 Part of cotui			11 De	eductions directly conning income in column 10	ected
					<u> </u>								
(1)					<del>                                     </del>								
(2)	<del>_</del>				ļ								
(3)					<u> </u>								
(4)					L								
								Add colun Enter here and line 8, c		1 Part I,		dd columns 6 and 11 nere and on page 1, Par line 8, column (B)	rt I
Totals							•			0.			0.
	dule G - Investme	nt Incor	me of a	Section	501(c)	(7) (9) or	(17) Or	ganization				· <del>-</del>	
••••	(see instr		0. 0			(.,, (-,,	(,	J					
	1 Descr	iption of inco	me		•	2 Amount of	ıncome	3 Deduction directly conne (attach sched	cted	4 Set-a		5 Total deducti and set-aside (col 3 plus col	es
(1)		-											
(2)													
(3)						<del>                                     </del>							
(4)												· <del> </del>	
(7)			<u> </u>			Enter here and			1			Enter here and on p	
						Part I line 9 co	iumn (A)					Part I line 9 column	n (B)
Totals					<b>•</b>	ŀ	0.						0.
Sche	dule I - Exploited (see instru	-	Activity	Incom	e, Othe	r Than Ad	lvertisi	ng Income					
	1 Description of exploited activity	2. G unrelated income trade or b	e from	directly o with pro of unr	penses connected oduction related	4 Net incomfrom unrelated business (cominus columgain, compute	trade or lumn 2 n 3) If a	5 Gross inco from activity to is not unrelate business inco	hat ed	6 Exp attributa colun	able to	7 Excess exem expenses (column but not more than	nn 5,
				ousines	s income	through						column 4)	
(1)													
(2)													
(3)										<del></del> -			
(4)													
Totals	,	Enter her page 1, line 10,	, Part I,	Enter her page 1 line 10,	re and on , Part I, col (B)		1					Enter here and on page 1, Part II, line 26	
	dule J - Advertisir	on Incor		netruction								<del></del>	0.
Part						colidated	Pacie					<del></del>	
Fait	i income From F	enouic	ais nep	orteu o	ii a Con	Solidated	Dasis						
	1 Name of periodical		2 Gross advertising income		3 Direct ertising costs	4 Advert or (loss) (co col 3) If a ga cols 5 th	ol 2 minus iin, compute	5 Circulati	on	6 Reade		7 Excess readersh costs (column 6 min column 5, but not m	nus
						cois 5 th	Jugii /	<del> </del>				than column 4)	
(1)													
(2)									i				
(3)													
(4)													
Tatala /	norms to Dort H. June (E))			n I	Λ	1		1	- 1		- 1		Λ

Form **990-T** (2018)

# Form 990-T (2018) D/B/A THE LOOMIS CHAFFEE SCHOOL

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, col (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	4 Compensation attributable to unrelated business
(1)		%	
(2)		_ %	
(3)	,	%	
(4)		%	
Total Enter here and on page 1, Part II, line 14		<b>&gt;</b>	0.

Form 990-T (2018)

FORM 990-T. INCOME (LOSS) FROM PARTNERS	SHIPS STATEMENT 2
DESCRIPTION	NET INCOME OR (LOSS)
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS V - ORDINARY BUSINESS INCOME (LOS KKR GLOBAL INFRASTRUCTURE INVESTORS SBS - ORDINARY BUSINESS INCOME (LOSS) KKR PARTNERS III - ORDINARY BUSINESS INCOME (LOSS) KKR NATURAL RESOURCES SBS QP - ORDINARY BUSINESS INCOME (LOSS) GLENDON OPPORTUNITIES FUND - ORDINARY BUSINESS INCO (LOSS) GLENDON OPPORTUNITIES FUND - NET RENTAL REAL ESTATICOMMONFUND CAPITAL VENTURE PARTNERS VI - ORDINARY INCOME (LOSS) COMMONFUND CAPITAL VENTURE PARTNERS VI - OTHER INCO (LOSS)	19779. 13,625. NCOME -29,382. OME -4,817. 948. BUSINESS -315. OME 3.
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5	-19,820.
FORM 990-T OTHER DEDUCTIONS	STATEMENT 3
DESCRIPTION	AMOUNT
TAX PREPARATION	750.
TOTAL TO FORM 990-T, PAGE 1, LINE 28	750.
FORM 990-T  NAME OF FOREIGN COUNTRY IN WHITE ORGANIZATION HAS FINANCIAL INTE	

NAME OF COUNTRY

BERMUDA CAYMAN ISLANDS BRITISH VIRGIN IS

DESCRIPTION  FORM 8827, LINE 8C  TOTAL INCLUDED ON FORM  FORM 990-T		PAGE 2, PART V, PERATING LOSS D		AMOUNT 2,2 2,2 STATEMENT	
TOTAL INCLUDED ON FOR		PERATING LOSS D		2,2	47.
		PERATING LOSS D			
FORM 990-T	NET O		EDUCTION .	STATEMENT	6
	· · · · · · · · · · · · · · · · · · ·	LOSS			
TAX YEAR LOSS SUST	AINED	PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR	
06/30/02 47 06/30/03 136 06/30/04 119 06/30/05 193 06/30/06 112 06/30/07 225 06/30/08 235 06/30/09 141 06/30/10 210 06/30/11 91 06/30/13 72	,380. ,188. ,065. ,384. ,004. ,833. ,173. ,776. ,220. ,539. ,020. ,723.	519,535. 0. 0. 0. 0. 0. 0. 0. 0. 0.	88,845. 47,188. 136,065. 119,384. 193,004. 112,833. 225,173. 235,776. 141,220. 210,539. 91,020. 72,723. 26,025.	88,849 47,188 136,069 119,384 193,004 112,833 225,173 235,776 141,220 210,539 91,020 72,723 26,029	8. 5. 4. 3. 6. 9.

## **Unrelated Business Taxable Income for Unrelated Trade or Business**

65,706.

ENTITY

OMB No 1545-0687

1

Department of the Treasury Internal Revenue Service (99) Name of the organization For calendar year 2018 or other tax year beginning JUL~1, 2018, and ending JUN~30, 2019▶ Go to www.irs.gov/Form990T for instructions and the latest information.

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

THE LOOMIS INSTITUTE

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

65,706.

06-0653119 D/B/A THE LOOMIS CHAFFEE SCHOOL 531390 Unrelated business activity code (see instructions) ► RENTAL OF FACILITIES Describe the unrelated trade or business **Unrelated Trade or Business Income** (B) Expenses (C) Net (A) Income 1a Gross receipts or sales c Balance ▶ b Less returns and allowances Cost of goods sold (Schedule A, line 7) 2 3 3 Gross profit Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) 4a 4b b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4c c Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach 5 statement) 65,706 65,706. 6 Rent income (Schedule C) Unrelated debt-financed income (Schedule E) 7 7 Interest, annuities, royalties, and rents from a controlled 8 organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) 9 organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 10 11 Advertising income (Schedule J) 11 Other income (See instructions, attach schedule) 12 12

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.)

13

14	Compensation of officers, directors, and trustees (Schedule K)	14	·
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	1,439.
20	Charitable contributions (See instructions for limitation rules)	20	
21	Depreciation (attach Form 4562) 26,580.		
22	Less depreciation claimed on Schedule A and elsewhere on return 22a	22b	26,580.
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule) SEE STATEMENT 7	28	750.
29	Total deductions. Add lines 14 through 28	29	28,769.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	36,937.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	31	•
32	Unrelated business taxable income Subtract line 31 from line 30	32	36,937.

LHA For Paperwork Reduction Act Notice, see instructions.

Total. Combine lines 3 through 12

FORM 990-T.(M)	OTHER DEDUCTIONS	STATEMENT 7
DESCRIPTION		AMOUNT
TAX PREPARATION		750.
TOTAL TO SCHEDULE M, PART I	I, LINE 28	750.

## Unrelated Business Taxable Income for Unrelated Trade or Business

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019

N 30, 2019 **201** 

Department of the Treasury Internal Revenue Service (99) Go to www.irs.gov/Form990T for instructions and the latest information.

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

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

OMB No 1545-0687

ENTITY

Name of the organization

THE LOOMIS INSTITUTE
D/B/A THE LOOMIS CHAFFEE SCHOOL

Employer identification number 06-0653119

	Inrelated business activity code (see instructions)  72121  Describe the unrelated trade or business  USE OF FA		ITIES FOR SP	ORTS CAMPS A	ND OTHER
Pa	Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
	Gross receipts or sales Less returns and allowances  565,439.  c Balance ▶	1c	565,439.		
2 3	Cost of goods sold (Schedule A, line 7) Gross profit Subtract line 2 from line 1c	3	565,439.		565,439.
4a b		4a 4b			
с 5	Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach	_4c	,		'
6	statement) Rent income (Schedule C)	5 6			
7 8	Unrelated debt-financed income (Schedule E) Interest, annuities, royalties, and rents from a controlled	<u>7</u> 8			
9	organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)  Advertising income (Schedule J)	10			
11 12 13	Other income (See instructions, attach schedule)  Total. Combine lines 3 through 12	12	565,439.		565,439.

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.)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	147,908.
16	Repairs and maintenance	16	
17	Bad debts	17	•
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	7,240.
20	Charitable contributions (See instructions for limitation rules)	20	
21	Depreciation (attach Form 4562) 21 32,509.		
22	Less depreciation claimed on Schedule A and elsewhere on return 22a	22b	32,509.
23	Depletion	23	·
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule) SEE STATEMENT 8	28	191,958.
29	Total deductions. Add lines 14 through 28	29	379,615.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	185,824.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	31	* • •
32	Unrelated business taxable income Subtract line 31 from line 30	32	185,824.

LHA For Paperwork Reduction Act Notice, see instructions.

D/B/A THE LOOMIS CHAFFEE SCHOOL

06-0653119

D/B/A THE					10221	L 1 9	
Schedule A Cost of Good	Is Sold. Enter	r method of inver	tory valuation   N/A	·			
<ol> <li>Inventory at beginning of year</li> </ol>	1		6 Inventory at end of year	ır		6	
2 Purchases	2	_	7 Cost of goods sold Su	ubtract line 6			
3 Cost of labor	3		from line 5 Enter here	and in Part I,			
4a Additional section 263A costs			line 2			7	
(attach schedule)	4a		8 Do the rules of section	263A (with respect to		Yes	No
b Other costs (attach schedule)	4b		property produced or a	acquired for resale) apply to	D		
5 Total Add lines 1 through 4b	5		the organization?				X
Schedule C - Rent Income	(From Real	Property and	d Personal Property	Leased With Real	Prope	erty)	
(see instructions)							
1 Description of property						,	
(1)							
(2)							
(3)							
(4)							
	2 Rent receiv	ed or accrued		0/->-			
(a) From personal property (if the personal property is more 10% but not more than 50%	e than	of rent for p	and personal property (if the percent personal property exceeds 50% or if at is based on profit or income)	age I '' columno	directly cor 2(a) and 2	nnected with the income (b) (attach schedule)	i in
(1)							
(2)	-						
(3)							
(4)							
Total	0.	Total		0.			
(c) Total income Add totals of columns	2(a) and 2(b) Er	nter		(b) Total deduction			
here and on page 1, Part I, line 6, colum	n (A)	<b>&gt;</b>		O . Enter here and on page Part I, line 6, column			0.
Schedule E - Unrelated De	bt-Financed	l Income (see	instructions)		·		
			2 Gross income from		-financed p	property	
1 Description of debt-fi	inanced property		or allocable to debt- financed property	(a) Straight line depreciat (attach schedule)	ion	(b) Other deduction (attach schedule)	
(1)					_	<del></del>	
(2)						·	
(3)							
(4)							
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	e adjusted basis allocable to inced property h 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))	olumns
(1)			%	·			
(2)			%				
(3)			%		İ		
(4)		· · · · · · · · · · · · · · · · · ·	%				
	,			Enter here and on page Part I, line 7, column (A)		Enter here and on page Part I, line 7, column	
Totals					0.		0.
Total dividends-received deductions of	acluded in column	n 8		L			<del>- 0 :</del>

Form 990-T (2018)

FORM 990-T.(M) OTHER DED	CTIONS	STATEMENT	8
DESCRIPTION		AMOUNT	
SUMMER' CAMP EXPENSES TAX PREPARATION		191,20 75	08.
TOTAL TO SCHEDULE M, PART II, LINE 28		191,9	58.

### **Unrelated Business Taxable Income for Unrelated Trade or Business**

For calendar year 2018 or other tax year beginning JUL~1, 2018 and ending JUN~30, 2019

OMB No 1545-0687

3

Department of the Treasury Internal Revenue Service (99) Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

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

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

ENTITY

Name of the organization

THE LOOMIS INSTITUTE D/B/A THE LOOMIS CHAFFEE SCHOOL

Employer identification number 06-0653119

713940 Unrelated business activity code (see instructions)

Pa	2000 The difficulties trade of passings	E RI	(A) Income	(B) Expenses	(C) Net
1 a			0.450		
b	Less returns and allowances c Balance ▶	1c	9,450.		
2	Cost of goods sold (Schedule A, line 7)	2	0 450		0.450
3	Gross profit Subtract line 2 from line 1c	3	9,450.		9,450.
4 a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5		·	
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17)				
	organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11			
12	Other income (See instructions, attach schedule)	12			
13	Total. Combine lines 3 through 12	13	9,450.		9,450.

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.)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	1,053.
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	37.
20	Charitable contributions (See instructions for limitation rules)	20	
21	Depreciation (attach Form 4562) 21 3,882.		
22	Less depreciation claimed on Schedule A and elsewhere on return 22a	22b	3,882.
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule) SEE STATEMENT 9	28	3,529.
29	Total deductions. Add lines 14 through 28	29	8,501.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	949.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		_
	instructions)	31	
32	Unrelated business taxable income Subtract line 31 from line 30	32	949.

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Λ	6	_	Λ	ĸ	5	3	1	1	9
v	v		v	v	~	~	_	_	_

D/B/A THE	E LOOMIS	CHAFFEE	SCHOOL		06-0653	3119	
Schedule A - Cost of Good	ls Sold. Ente	r method of inve	ntory valuation N/A	4			
1 Inventory at beginning of year	1		6 Inventory at end of ye	ar		6	
2 Purchases	2		7 Cost of goods sold S	Subtract I	ine 6		
3 Cost of labor	3	,	from line 5. Enter here	e and in F	Part I,		
4 a Additional section 263A costs			line 2			7	
(attach schedule)	4a		8 Do the rules of section	n 263A (v	with respect to	Yes	No
b Other costs (attach schedule)	4b		property produced or	acquired	for resale) apply to		
5 Total Add lines 1 through 4b	5		the organization?				X
Schedule C - Rent Income	(From Rea	Property an	nd Personal Property	Lease	ed With Real Prop	perty)	
(see instructions)	•						
1 Description of property							
(1)							
(2)							
(3)			<u> </u>				
(4)							
		ved or accrued			3(a) Deductions directly	connected with the income in	n
(a) From personal property (if the personal property is more 10% but not more than 50%	e than	` of rent for	and personal property (if the percent personal property exceeds 50% or it ent is based on profit or income)	tage f	columns 2(a) and	d 2(b) (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, colum	` ' ' '	nter -		0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	•	0.
Schedule E - Unrelated De		d Income (see	e instructions)				
			_	Ţ	3 Deductions directly conn		
			2 Gross income from or allocable to debt-		to debt-finance	· · · · · · · · · · · · · · · · · · ·	
1 Description of debt-fi	nanced property		financed property	(4)	Straight line depreciation (attach schedule)	(D) Other deductions (attach schedule)	3
(1)							
(2)		···· · · · · · · · · · · · · · · · · ·		1			
(3)	<del></del>			<del>                                     </del>			
(4)	.,			†		· · · · · · · · · · · · · · · · · · ·	
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or debt-fina	e adjusted basis allocable to anced property th 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))	
(1)			%	<del> </del>			
(2)			%	<del>                                     </del>	<del></del>	<del> </del>	
(3)			%	<del> </del>			
(4)			%	<del>                                     </del>	<del></del>		
	1		<u></u>	Fr	nter here and on page 1,	Enter here and on page	1.
					art I, line 7, column (A)	Part I, line 7, column (E	
Totals			<b>•</b>		0.		0.
Total dividends-received deductions in	ncluded in colum	n 8			<b>•</b>		0.

FORM 990-T.(M)	OTHER DEDUCTIONS	STATEMENT 9
DESCRIPTION		AMOUNT
UTILITIES SUPPLIES REPAIRS TAX PREPARATION	,	2,060. , 83. 636. 750.
TOTAL TO SCHEDULE M, PAR	T II, LINE 28	3,529.

Department of the Treasury

Internal Revenue Service (99)

# **Unrelated Business Taxable Income for Unrelated Trade or Business**

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019

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

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

OMB No 1545-0687

ENTITY

501(c)(3) Organizations Only

Name	of the organization THE LOOMIS INSTITUTE D/B/A THE LOOMIS CHAFFE	E S	CHOOL	Employer identifica	
	Inrelated business activity code (see instructions)   90009 escribe the unrelated trade or business  CONTROLLE		NTITY INTERES	T INCOME	
Pai	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales				
b	Less returns and allowances c Balance ▶	1c			
2	Cost of goods sold (Schedule A, line 7)	2			Į.
3	Gross profit Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Schedule D)	4a		-u	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
c	Capital loss deduction for trusts	4c		<u> </u>	
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8	12,239.		12,239.
9	Investment income of a section 501(c)(7), (9), or (17)	- 0	22,2001	•	
9	organization (Schedule G)	9			
10 <sup>,</sup>	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11			
12	Other income (See instructions, attach schedule)	12			
13	Total. Combine lines 3 through 12	13	12,239.		12,239.
	· · · · · · · · · · · · · · · · · · ·				
Pai	deductions Not Taken Elsewhere (See Instruction deductions must be directly connected with the undertaken between the connected with the undertaken between the connected with the conne				tor contributions,

14	Compensation of officers, directors, and trustees (Schedule K)		14	
15	Salaries and wages		15	
16	Repairs and maintenance		16	
17	Bad debts		17	
18	Interest (attach schedule) (see instructions)		18	
19	Taxes and licenses	•	19	431.
20	Charitable contributions (See instructions for limitation rules)		20	
21	Depreciation (attach Form 4562)			
22	Less depreciation claimed on Schedule A and elsewhere on return 22a		22b	
23	Depletion		23	
24	Contributions to deferred compensation plans		24	
25	Employee benefit programs		25	
26	Excess exempt expenses (Schedule I)		26	
27	Excess readership costs (Schedule J)		27	
28	Other deductions (attach schedule) SEE STATEMENT	10	28	750.
29	Total deductions. Add lines 14 through 28		29	1,181.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13		30	11,058.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see			
	instructions)		31	• • •
32	Unrelated business taxable income Subtract line 31 from line 30		32	11,058.
				M (Farm 000 T) 0040

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Page 4

.06-0653119

Schedule F - Interest,	Annuitie	s, noya	ues, ai		Controlled O			aliu	iis (see ins	struction	is) /
1 Name of controlled organizat	tion .	2 Emp identific num	cation	3 Net unr	related income e instructions)	4 Tot	al of specified ments made	includ	rt of column 4 led in the contration's gross i	rolling	6 Deductions directly connected with income in column 5
ADC CORDORAMI	ONT										
(1) ADC CORPORATI		ļ				-					
(3) INSTITUTE	AFFEE	06-09	86152			<u> </u>		<del>                                     </del>			
<del></del>		00-03	30132							+	
(4) Nonexempt Controlled Organi	zations			<u> </u>							· · · · · · · · · · · · · · · · · · ·
		inrelated incom	na (loss)	0 Total	of specified pay	mente	10 Part of colu	mn Q tha	at is included	11 De	ductions directly connected
7 Taxable Income		see instructions		y Total	made	illenis	in the controlli	ing orga income	nization's		n income in column 10
(1)		-		_		•	,				
(2)											
(3) -17,713.		-17	,713.		12,	239.		12	,239.		0.
(4)											
							Add colum Enter here and line 8, c		e 1, Part I,		dd columns 6 and 11 here and on page 1, Part I, line 8, column (B)
Totals						▶		12	,239.		0.
Schedule G - Investme		me of a	Section	501(c)(	7), (9), or	(17) Or	ganization				
1 Desc	ription of inco	ome			2 Amount of	income	3 Deduction directly conne (attach sched	cted	4 Set-a		5 Total deductions and set-asides (col 3 plus col 4)
(1)											
(2)											
(3)											
(4)											
Tabel			•	,	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	Incom	e, Othe	r Than Ac	lvertisi	ng Income	<del>)</del>			
· · · · · · · · · · · · · · · · · · ·	<u> </u>		2 -		4 Net incon	ne (loss)					7
1 Description of exploited activity	unrelated incom	iross business e from business		elated	from unrelated business (co minus colum gain, comput through	I trade or olumn 2 n 3) If a e cols 5	5 Gross inco from activity t is not unrelat business inco	hat ed	6 Exp attributa colun	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)				_		-					•
(2)							-		<u> </u>		
(3)					1						
(4)							-				
Totals •		o and on , Part I, col (A)	Enter her page 1 line 10,		wasanan ng 1944 ta 186	्रताला ।	- 4 4 1 1				Enter here and on page 1, Part II line 26
Schedule J - Advertisi	ng Inco	me (see ir	struction	s)							
Part I Income From I	Periodic	als Repo	orted o	n a Con	solidated	Basis					
1 Name of periodical		2 Gross advertising income		3 Direct ertising costs			5 Circulat e income		6 Reade 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))	<b>•</b>										

FORM 990-T. (M)	OTHER DEDUCTIONS	STATEMENT 10
DESCRIPTION		AMOUNT
TAX PREPARATION		750.
TOTAL TO SCHEDULE M, PART II,	, LINE 28	750.