



OMB No 1545-0687 **Exempt Organization Business Income Tax Return** Form **990-T** (and proxy tax under section 6033(e)) For calendar year 2018 or other tax year beginning 07/01 , 2018, and ending 06/30 ► Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service A Check box if address changed D Employer identification number (Employees' trust, see instructions) YALE UNIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST B Exempt under section **Print** Number, street, and room or suite no If a P O box, see instructions 06-6414276 ✓ 501( C )**10**3) or E Unrelated business activity code C/O YALE UNIVERSITY, P O BOX 208239 408(e) 220(e) Type (See instructions) ☐ 408A 530(a) City or town, state or province, country, and ZIP or foreign postal code 529(a) NEW HAVEN, CT 06520-8239 525990 C Book value of all assets F Group exemption number (See instructions ) ▶ ☐ 401(a) trust 531,184,479 **G** Check organization type ► ☐ 501(c) corporation √ 501(c) trust ☐ Other trust H Enter the number of the organization's unrelated trades or businesses ▶ Describe the only (or first) unrelated trade or business here ▶ INCOME LOSS FROM PARTNERSHIPS AND LLCS If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? . ▶ ☐ Yes 🗹 No If "Yes," enter the name and identifying number of the parent corporation The books are in care of ▶ STEPHEN MURPHY, YALE UNIVERSITY (203) 432-5530 Telephone number ▶ (C) Net Unrelated Trade or Business Income (A) Income (B) Expenses Gross receipts or sales 0 Less returns and allowances c Balance ▶ 1c Cost of goods sold (Schedule A, line 7) 2 0 2 Gross profit Subtract line 2 from line 1c 3 0 3 42,939 4a Capital gain net income (attach Schedule D) 4a 42,939 Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b (34,306)(34.306)b 4c 0 Capital loss deduction for trusts (41,437)(41,437)Income (loss) from a partnership or an S corporation (attach statement) 5 5 0 6 6 Rent income (Schedule C) 0 0 0 7 7 Unrelated debt-financed income (Schedule E) 0 0 8 0 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 9 0 0 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 0 0 n 10 10 Exploited exempt activity income (Schedule I) 0 0 0 11 Advertising income (Schedule J) 11 12 0 0 12 Other income (See instructions, attach schedule) 13 Total. Combine lines 3 through 12 13 (32,804)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.) 0 14 Compensation of officers, directors, and trustees (Schedule K) 14 RECEIVED 0 15 15 Salaries and wages 0 16 16 Repairs and maintenance S-0S( 0 17 JUL 2 1 2020 17 Bad debts 18 0 18 Interest (attach schedule) (see instructions) 19 39,875 19 Taxes and licenses OGDEN, UT Charitable contributions (See instructions for limitation rules) 20 0 20 21 Depreciation (attach Form 4562) 22b 0 22 Less depreciation claimed on Schedule A and elsewhere on return 23 0 23 Depletion . 24 0 24 Contributions to deferred compensation plans 25 0 25 Employee benefit programs 26 0 26 Excess exempt expenses (Schedule I) 27 0 27 Excess readership costs (Schedule J) 75,740 -28 28 Other deductions (attach schedule) 29 115,615 29 Total deductions. Add lines 14 through 28

32 Unrelated business taxable income. Subtract line 31 from line 30 For Paperwork Reduction Act Notice, see instructions.

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(148,419)

(148.419)

30

31 2

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Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)

Page	2
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10111100	0 1 (2010)	<u></u>					· age =
Part		otal Unrelated Business Taxable Income					
33		f unrelated business taxable income computed from all unrelated trades		ee			1
	ınstruc	tions)		3	3	(148,419)	
34		its paid for disallowed fringes		3	4		1
35		tion for net operating loss arising in tax years beginning before Janu					1
00			•		_	0	
		tions)		_	5	0	<del> </del>
36		f unrelated business taxable income before specific deduction. Subtract lin	ie 35 from the su	- 1			
	of lines	: 33 and 34		3	6	(148,419)	
37	Specifi	c deduction (Generally \$1,000, but see line 37 instructions for exceptions)		3	7	0	
38	Unrela	ted business taxable income. Subtract line 37 from line 36. If line 37 is g	reater than line 3	6, 🦳	7		
	enter th	ne smaller of zero or line 36	. 2	9 3	<b>.</b>	(148,419)	
Part	V T	ax Computation		<del>\                                    </del>	, <del>-</del>	<u>, , , , , , , , , , , , , , , , , , , </u>	1
		izations Taxable as Corporations. Multiply line 38 by 21% (0 21)		<b>3</b>	9		Г
39					9		<del> </del>
40		Taxable at Trust Rates. See instructions for tax computation.			<u>-</u> -		
		ount on line 38 from: ☐ Tax rate schedule or ☑ Schedule D (Form 1041)		<b>▶</b>   4	0	0	ļ
41	Proxy '	tax. See instructions	. 1	<b>►</b> _4	1		
42	Alterna	tive minimum tax (trusts only)		4	2		1
43	Tax on	Noncompliant Facility Income. See instructions		4	3		
44		Add lines 41, 42, and 43 to line 39 or 40, whichever applies		4	4	0	
Part		ax and Payments			<u> </u>		
45a		tax credit (corporations attach Form 1118, trusts attach Form 1116) . 45	:al	-	I		1
				$\dashv$	ł		
b		credits (see instructions)					
С		Il business credit. Attach Form 3800 (see instructions) 45			i		
ď	Credit 1	for prior year minimum tax (attach Form 8801 or 8827)	id	<u></u>			
е	Total c	redits. Add lines 45a through 45d		4	5e	0	<u>.</u>
46	Subtrac	ct line 45e from line 44		4	6	0	
47	Other ta	xes. Check if from 🔲 Form 4255 🔲 Form 8611 🔲 Form 8697 🔲 Form 8866 🔲 Othe	r (attach schedule)	4	7	0	İ
48		ax. Add lines 46 and 47 (see instructions)	(undon concuercy )		8	0	
49		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k),	lino 2	<u> </u>	9		$\vdash$
				<u>                                   </u>	9		<del>                                     </del>
50a		· · · · · · · · · · · · · · · · · · ·		—			]
b		stimated tax payments					1
C	Tax de	posited with Form 8868	)c				1
d	Foreign	organizations. Tax paid or withheld at source (see instructions) 50	)d				İ
е	Backup	withholding (see instructions)	e	Ì			
f	Credit 1	for small employer health insurance premiums (attach Form 8941) 50	)f				
g		eredits, adjustments, and payments: Form 2439					
9	Forn		0				
E4			9 1	┵	<u>-</u>	12,341	
51 50						12,341	<del>                                     </del>
52		ted tax penalty (see instructions) Check if Form 2220 is attached			2		<del> </del>
53		e. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	~ ~		3	0	<u> </u>
54	Overpa	<b>syment.</b> If line 51 is larger than the total of lines 48, 49, and 52, enter amo <sub>u</sub>	nt overpaid フラ		4	12,341	<u> </u>
55		e amount of line 54 you want	Refunded	<b>▶</b>   5	5	0	
Part \	∕I S	tatements Regarding Certain Activities and Other Information (s	ee instructions)				
56	At anv	time during the 2018 calendar year, did the organization have an interest in	or a signature o	r othe	r author	itv Yes	No
		financial account (bank, securities, or other) in a foreign country? If "Yes,"					
		Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter					
	here ▶	· · · · · · · · · · · · · · · · · · ·			,	"   <del></del>	
<b>67</b>			or transforer to	fara.a.			-
57	-	he tax year, did the organization receive a distribution from, or was it the grantor of,	o nansiero to, a	oreigi	itiustr		<del>                                     </del>
		" see instructions for other forms the organization may have to file.	•			_	
_58		ne amount of tax-exempt interest received or accrued during the tax year			4,6		لبا
0:		penalties of perjury, I declare that I have examined this return, including accompanying schedules and orrect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which pi			my knowl	eage and be	iiet, it is
Sign	L "ue, C	YALE UNIVERSITY		M		discuss this	
Here	PX.	() MAMMAL A SMITH 5/5/2020 UNIVERSITY CON				parer shown	
_	· —	re of officer Date Title		(Se	e mstructi	ons)? <b>Yes</b>	
Da:		Print/Type preparer's name Preparer's signature	Date	٥.		PTIN	
Paid			[		ıf ployed		
Prepa	arer					L	
Haa (	) nlu	Firm's name		Firm's			
Use (	וווע וווע	Firm's address ►		Phone			

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Sche	dule A-Cost of Goods	Sold. Er	nter m	ethod of ir	nvento	ry va	luation ►		<u> </u>		*,	-			
1	Inventory at beginning of		1	0	, ,	6		at e	end of year	6		0			
2	Purchases	′.	2	0		7			ods sold. Subtract						
3	Cost of labor .	-	3	0					ne 5 Enter here and						
_	Additional section 263A	costs					ın Part I, lır	ιе	2	7	1	o			
	(attach schedule) .		4a	0		8	Do the rul	les	of section 263A (wit	h res	pect to	Yes	No		
h	Other costs (attach sched	-	4b	0		•			duced or acquired for						
5	Total. Add lines 1 through	· /  -	5	0			to the orga								
	dule C-Rent Income (I	From Re		perty and	Pers	onal	Property I	Le	ased With Real Pro	perty	<i>(</i> )				
	instructions)									-					
1. Desci	aption of property			-											
(1)															
(2)			•				,								
(3)									-						
(4)															
	2	Rent receiv	ved or ac	crued											
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)  (b) From real percentage of rent percentage of r					for perso	onal pro	perty exceeds		3(a) Deductions directly in columns 2(a) and				9		
(1)															
(2)	144 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	***************************************													
(3)			I												
(4)															
Total		0	Total					0	(b) Total deductions.						
(c) Tot	al income. Add totals of colur	nns 2(a) an	nd 2(b)	Enter					Enter here and on page 1,						
here ar	d on page 1, Part I, line 6, colu	umn (A)		<b>•</b>				0	Part I, line 6, column (B)	<u> </u>			0		
Sche	dule E—Unrelated Deb	t-Financ	ed Inc	come (see	instruc	ctions	)	_							
	Description of debt-fi	inanced prog	perty		2. Gross income from or allocable to debt-financed		L	3. Deductions directly condebt-finance	ed pro						
	·				<u> </u>	prop	perty —-	Ľ	a) Straight line depreciation (attach schedule)	<u>'</u>	(attach sch				
(1)	***************************************				ļ			ļ							
(2)					ļ			ļ	·····						
(3)								ļ							
(4)								L	<del> </del>						
	Amount of average acquisition debt on or locable to debt-financed roperty (attach schedule)	debt-fir	ge adjust r allocabl nanced p och sched	e to roperty		4 dr	olumn vided lumn 5		7. Gross income reportable (column 2 × column 6)		Allocable de imn 6 × total 3(a) and 3	of colu			
(1)							%	L	<u> </u>						
(2)							%	L							
(3)							%	L		<u> </u>					
(4)					İ		%	<u> </u>							
									nter here and on page 1, Part I, line 7, column (A)		r here and t I, line 7, co				
Totals							•	L	0	ļ			0		
Total c	lividends-received deduction	ns included	l ın colu	mn 8					<u> </u>				0		
											Form 9	90-T	(2018)		

Sche	dule F-Interest, Ann	uities,	Royalties,	and Re	nts From	Controlled Org	janizations (se	e instruc	ctions)	
				Exempt	Controlled	Organizations				
	Name of controlled organization		Employer ication number		elated income instructions)		5 Part of column included in the corganization's gri	controlling	conne	eductions directly ected with income in column 5
(1)										
(2)										
(3)							<u> </u>			
(4)										<del></del>
None	xempt Controlled Organi	zations				<u>.                                      </u>	<del>- •</del>			
	7. Taxable Income		Net unrelated incoss) (see instructi		1	otal of specified yments made	10. Part of column included in the coorganization's great street organization organization.	controlling	connec	eductions directly sted with income in column 10
(1)										
(2)									<u> </u>	
(3)									ļ	
(4)										
							Add columns 5 Enter here and c Part I, line 8, co	on page 1, olumn (A)	Enter h Part I,	columns 6 and 11 here and on page 1, line 8, column (B)
Totals	dule G-Investment		Ct	FO1	(-)(7) (0)	or (17) Organi	zotion /acc unci	tructions		0
Scne	Description of income	incom	2. Amount of		3 dire	Deductions ctly connected	4. Set-aside	s	5. To and s	otal deductions et-asides (col. 3 olus col. 4)
(4)		-			(att	ach schedule)				pids coi 4/
(1)	<del></del>		<del></del>		<del></del>					
(2)				·	<del>,   .</del>	<del></del>				
(4)	···									
Totals			Enter here and Part I, line 9, c				<u> </u>			re and on page 1, ne 9, column (B)
	dule I-Exploited Exe	empt /	Activity Inco	nme. Ot		Advertising Ir	come (see inst	tructions	)	
	Description of exploited activ		2. Gross unrelated business incor from trade o business	me con	Expenses directly nected with oduction of unrelated ness income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Exp	penses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)								<u> </u>		
(2)										
(3)	······									
(4) Totals			Enter here and page 1, Part line 10, col (A	I, pa	r here and on ge 1, Part I, 10, col (B)		<u> </u>			Enter here and on page 1, Part II, line 26
	dule J-Advertising I	ncom	e (see instru		· · · · · · · ·	1				I
Par					a Consoli	dated Basis				
	1. Name of penodical		2. Gross advertising income		3. Direct ertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income		dership sts	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)			<del>                                     </del>	1	<del></del>			1		
(2)		_	····			1				1
(3)			<u> </u>			1				1
(4)			<u> </u>	<del>-  </del> -		1 '				1
<u></u>			<del>                                     </del>	$\neg + \neg$						
Totals	(carry to Part II, line (5))	<u> </u>		0	0	0			F	0 Form <b>990-T</b> (2018)

Form 990-T (2018)						Page 5
Part II Income From Periodi 2 through 7 on a line-to-		on a Separat	e Basis (For ea	ach periodical	listed in Part I	, fill in columns
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)						<del> </del>
(4)						<del> </del>
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
Schedule K—Compensation of	Officers, Direct	ctors, and True	<b>stees</b> (see instri	uctions)		
1. Name		2	2. Title	3. Percent of time devoted business	_   4. Compensa	tion attributable to ed business
(1)					%	
(2)			-		%	
(3)	_				%	
(4)					%	
Total. Enter here and on page 1, Part II, lii	ne 14				<u> </u>	0

Form **990-T** (2018)

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## SCHEDULE I (Form 1041)

## **Alternative Minimum Tax—Estates and Trusts**

OMB No 1545-0092

2018

Department of the Treasury Internal Revenue Service ► Attach to Form 1041.

► Go to www.irs.gov/Form1041 for instructions and the latest information.

Employer identification number Name of estate or trust YALE UNIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST 06-6414276 Estate's or Trust's Share of Alternative Minimum Taxable Income (148,419) Adjusted total income or (loss) (from Form 1041, line 17) 2 2 Interest 39,875 3 3 Taxes Reserved for future use 4 4 5 5 Refund of taxes 1,790 6 6 Depletion (difference between regular tax and AMT) . 7 7 Net operating loss deduction Enter as a positive amount . 8 8 Interest from specified private activity bonds exempt from the regular tax. 9 9 Qualified small business stock (see instructions) Exercise of incentive stock options (excess of AMT income over regular tax income) 10 10 11 11 Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6) . 12 12 (535)Disposition of property (difference between AMT and regular tax gain or loss) . . . 13 13 1,283 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 14 14 Passive activities (difference between AMT and regular tax income or loss) . • 15 15 16 16 Loss limitations (difference between AMT and regular tax income or loss) . 17 17 Circulation costs (difference between regular tax and AMT) 18 Long-term contracts (difference between AMT and regular tax income) 18 19 19 Mining costs (difference between regular tax and AMT) 20 20 Research and experimental costs (difference between regular tax and AMT) . 21 Income from certain installment sales before January 1, 1987 21 28,983 22 22 Intangible drilling costs preference Other adjustments, including income-based related adjustments 23 763 23 Alternative tax net operating loss deduction (See the instructions for the limitation that applies) 24 24 **2**5 (76.260)Adjusted alternative minimum taxable income. Combine lines 1 through 24 25 Note: Complete Part II below before going to line 26 n 26 Income distribution deduction from Part II, line 44 26 27 Estate tax deduction (from Form 1041, line 19) 28 Add lines 26 and 27 . . 28 29 (76,260) 29 Estate's or trust's share of alternative minimum taxable income Subtract line 28 from line 25 If line 29 is • \$24,600 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c. The estate or trust isn't liable for the alternative minimum tax Over \$24,600, but less than \$180,300, go to line 45 • \$180,300 or more, enter the amount from line 29 on line 51 and go to line 52 Part II Income Distribution Deduction on a Minimum Tax Basis 30 30 Adjusted alternative minimum taxable income (see instructions) 31 31 Adjusted tax-exempt interest (other than amounts included on line 8) 32 0 32 Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable 33 purposes (from Form 1041, Schedule A, line 4) . . . 33 Capital gains paid or permanently set aside for charitable purposes from gross income (see 34 34 instructions) . . 35 35 Capital gains computed on a minimum tax basis included on line 25 36 Capital losses computed on a minimum tax basis included on line 25. Enter as a positive amount 36 37 Distributable net alternative minimum taxable income (DNAMTI). Combine lines 30 through 36 37 If zero or less, enter -0-Income required to be distributed currently (from Form 1041, Schedule B, line 9) 38 38 Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B. line 10) 39 39 40 40 Total distributions Add lines 38 and 39 . 41 41 Tax-exempt income included on line 40 (other than amounts included on line 8)

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Cat No 51517Q

Schedule I (Form 1041) (2018)

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42

Tentative income distribution deduction on a minimum tax basis. Subtract line 41 from line 40

Schedu	le I (Form 1041) (2018)						Page 2
Part	II Income Distribution Deduction on a Minimum Tax Basis (c	contir	nued)	-	_		
43	Tentative income distribution deduction on a minimum tax basis. Subtribution or less, enter -0	ract li	ne 31 from line	37	43	0	
44	Income distribution deduction on a minimum tax basis. Enter the smearer here and on line 26	aller o	of line 42 or line	43	44	′ 0	
Part	III Alternative Minimum Tax			_			
45	Exemption amount	_			45	\$24,600	00
46	Enter the amount from line 29	46	(76,260)				
47	Phase-out of exemption amount	47	\$81,900	00			
48	Subtract line 47 from line 46. If zero or less, enter -0-	48	0				
49	Multiply line 48 by 25% (0 25) .		•		49	0	
50	Subtract line 49 from line 45 If zero or less, enter -0-	•		•	50	24,600	
51	Subtract line 50 from line 46				51	(100,860)	
52	Go to Part IV of Schedule I to figure line 52 if the estate or trust has quagain on lines 18a and 19 of column (2) of Schedule D (Form 1041) (as necessary) Otherwise, if line 51 is—						
	• \$191,100 or less, multiply line 51 by 26% (0 26)						
	• Over \$191,100, multiply line 51 by 28% (0 28) and subtract \$3,822 from	the re	esult .	•	52	(26,224)	
53	Alternative minimum foreign tax credit (see instructions)				53	(26.224)	
54 55	Tentative minimum tax. Subtract line 53 from line 52	· from	 Sabadula C. lina	20)	54 55	(26,224)	
56	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit Alternative minimum tax. Subtract line 55 from line 54. If zero or less, 6				33		
30	on Form 1041, Schedule G, line 1c	enter	-0- Enternere	anu	56	0	
Part		 }					
	Caution: If you didn't complete Part V of Schedule D (Form 1041), the Sci or the Qualified Dividends Tax Worksheet in the Instructions for Form 10 before completing this part.				,		
57	Enter the amount from line 51				57	(100,860)	
58	Enter the amount from Schedule D (Form 1041), line 26, line 13 of the Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as refigured for the AMT, if necessary)	58					
59	Enter the amount from Schedule D (Form 1041), line 18b, column (2) (as refigured for the AMT, if necessary) If you didn't complete Schedule D for the regular tax or the AMT, enter -0-	59					
60	If you didn't complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 58 Otherwise, add lines 58 and 59 and enter the <b>smaller</b> of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary)	60					
61	Enter the <b>smaller</b> of line 57 or line 60 .				61	(100,860)	
62	Subtract line 61 from line 57				62	0	
63	If line 62 is \$191,100 or less, multiply line 62 by 26% (0 26). Otherwise, (0 28) and subtract \$3,822 from the result	multi	ply line 62 by 2	.8% ►	63	0	
64	Maximum amount subject to the 0% rate	64	\$2,600	00			
65	Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as figured for the regular tax) If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 22; if zero or less, enter -0	65					
66	Subtract line 65 from line 64 If zero or less, enter -0-	66	2,600				
67	Enter the <b>smaller</b> of line 57 or line 58	67	(100,860)				
68	Enter the <b>smaller</b> of line 66 or line 67 This amount is taxed at 0%.	68	(100,860)				
69	Subtract line 68 from line 67	69	0				

Schedule I (Form 1041) (2018)

Par	IV Line 52 Computation Using Maximum Capital Gains Rates	: (con	itinued)		-	
70	Maximum amount subject to rates below 20%	70	\$12,700	00		
71	Enter the amount from line 66	71	2,600			
72	Enter the amount from line 27 of Schedule D (Form 1041), line 18 of the Schedule D Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet, whichever applies (as figured for the regular tax). If you didn't complete Schedule D or either worksheet for the regular tax, enter the amount from Form 1041, line 22; if zero or less, enter -0	72				
73	Add line 71 and line 72	73	2,600	l		
74	Subtract line 73 from line 70 lf zero or less, enter -0-	74	10,100			
75	Enter the <b>smaller</b> of line 69 or 74	75	0			
76	Multiply line 75 by 15% (0 15)		•	<b>•</b>	76	0
77	Add lines 68 and 75	77	(100,860)			
	If lines 77 and 57 are the same, skip lines 78 through 82 and go to line 83.	Other	wise, go to line	78.		
78	Subtract line 77 from line 67	78	0			
79	Multiply line 78 by 20% (0 20)			<b>•</b>	79	0
	If line 59 is zero or blank, skip lines 80 through 82 and go to line 83. O	therv	vise, go to line	30. <b> </b> ∎		
80	Add lines 62, 77, and 78	80	0			
81	Subtract line 80 from line 57	81	0			
82	Multiply line 81 by 25% (0 25)	-		<b>•</b>	82	0
83	Add lines 63, 76, 79, and 82			. [	83	0
84	If line 57 is \$191,100 or less, multiply line 57 by 26% (0.26). Otherwise, (0.28) and subtract \$3,822 from the result	multı	ply line 57 by 2 		84	(26,224)
85	Enter the <b>smaller</b> of line 83 or line 84 here and on line 52	•			85	(26,224)

Schedule I (Form 1041) (2018)

#### SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

▶ Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

► Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No 1545-0092

2018

Department of the Treasury Internal Revenue Service Name of estate or trust Employer identification number YALE UNIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST 06-6414276 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) (h) Gain or (loss) See instructions for how to figure the amounts to enter on the Adjustments Subtract column (e) lines below Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to Form(s) 8949, Part I, (sales price) (or other basis) combine the result with whole dollars line 2, column (a) column (a) 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 Form(s) 8949 with Box A checked 0 Totals for all transactions reported on Form(s) 8949 with Box B checked 0 Totals for all transactions reported on Form(s) 8949 with Box C checked 0 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824. 4 5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts. 5 (34)Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2017 Capital Loss 6 6 0) Carryover Worksheet Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on the back (34)Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions) Part II (h) Gain or (loss) See instructions for how to figure the amounts to enter on the (g) Adjustments Subtract column (e) (d) lines below (e) Proceeds Cost to gain or loss from from column (d) and This form may be easier to complete if you round off cents to (sales price) (or other basis) Form(s) 8949, Part II, combine the result with column (q) whole dollars line 2. column (a) 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 line 8b 0 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 0 Totals for all transactions reported on Form(s) 8949 with 0 Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked 0 11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824. 11 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 12 42,973 12 Capital gain distributions 13 13 Gain from Form 4797, Part I 14 14 15 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2017 Capital Loss 15 0) Carryover Worksheet . . . . \_ 16 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h) Enter here and on 42,973 line 18a, column (3) on the back

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Cat No 11376V

Schedule D (Form 1041) 2018

Page 2
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Part	III Summary of Parts I and II		(1) Beneficiarie	s' (2) Estate's	(3) Total	
	Caution: Read the instructions before completing this part	t	(see ınstr )	or trust's	(3) Total	
17	Net short-term gain or (loss)	17		(34)	(34)	_
18	Net long-term gain or (loss):	-				
а	Total for year	18a		42,973	42,973	_
b	Unrecaptured section 1250 gain (see line 18 of the worksheet.)	18b			0	_
С	28% rate gain	18c			0	_
19	Total net gain or (loss). Combine lines 17 and 18a .	19	0	42,939	42,939	

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 18a and 19, column (2), are net gains, go to Part V, and don't complete Part IV If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary

Part	IV Capital Loss Limitation			
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of			
а	The loss on line 19, column (3) or b \$3,000	20	(	0

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 38), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover

### Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 2c, is more than zero

Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if

• Either line 18b, col (2) or line 18c, col (2) is more than zero, or

Schedule D (Form 1041) 2018

• Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero

Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 38, is more than zero. Skip this part and complete the **Schedule D Tax Worksheet** in the instructions if either line 18b, col. (2) or line. 18c, col. (2) is more than zero.

21	Enter taxable income from Form 1041, line 22 (or Fo	rm 99	90-T, line 38)	. L	21	(148,419)			٠	1
22	Enter the <b>smaller</b> of line 18a or 19 in column (2) but not less than zero	22	42,939							
23	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	23							L.	,
24	Add lines 22 and 23	24	42,939							j
25	If the estate or trust is filing Form 4952, enter the									ļ
	amount from line 4g; otherwise, enter -0	25								1
26	Subtract line 25 from line 24. If zero or less, enter -0				26	42,939				
27	Subtract line 26 from line 21. If zero or less, enter -0			Γ	27	0		)	,	
28	Enter the smaller of the amount on line 21 or \$2,600	)			28	(148,419)		]		
29	Enter the smaller of the amount on line 27 or line 28				29	(148,419)				
30	Subtract line 29 from line 28. If zero or less, enter -0	Thi	s amount is tax	ed at	0%		<b>•</b>	30		)
31	Enter the smaller of line 21 or line 26		•	. L	31	(148,419)				
32	Subtract line 30 from line 26				32	42,939				
33	Enter the <b>smaller</b> of line 21 or \$12,700 .				33	(148,419)				
34	Add lines 27 and 30			L	34	0				
35	Subtract line 34 from line 33 If zero or less, enter -0			·  _	35	0				
36	Enter the <b>smaller</b> of line 32 or line 35			L	36	0				
37	Multiply line 36 by 15% (0 15)							37	(	<u> </u>
38	Enter the amount from line 31				38	(148,419)				
39	Add lines 30 and 36				39	0		ŀ		
40	Subtract line 39 from line 38 If zero or less, enter -0	-		L	40	0		<u> </u>		
41	Multiply line 40 by 20% (0 20)				i			41		<u> </u>
42	Figure the tax on the amount on line 27. Use the 2018 Tax	Rate :	Schedule for Esta	ites						1
	and Trusts (see the Schedule G instructions in the instruction	ons fo	r Form 1041)		42	0				
43	Add lines 37, 41, and 42			· <u> </u>	43	0				1
44	Figure the tax on the amount on line 21. Use the 2018 Tax	Rate:	Schedule for Esta	ites						
	and Trusts (see the Schedule G instructions in the instructi			· L	44	0				
. 45	Tax on all taxable income. Enter the smaller of line	e 43 c	or line 44 here a	ınd on	For	m 1041, Schec	lule			
	G, line 1a (or Form 990-T, line 40)				·		<b>&gt;</b>	45		<u> </u>

Schedule D (Form 1041) 2018



Income (loss) from Partnership and S Corporations

Name of Partnership	EIN	UBI
(1) INCOME (LOSS) FROM INVESTMENT PARTNERSHIPS		-41,437
	Total for Part I, Line 5	41,437

Form 990T Part II, Line 19	Taxes and Licenses	
	Description	Amount
(1) STATE TAX		39,875

Form 990T Part II. Line 20	Charitable Contributions

Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Converted to NOL	Amount Remaining	Contribution Carryover Expires
2013	1,253				1,253	
2014	2,461				2,461	
2015	1,414				1,414	
2016	1,626				1,626	
2017	2,226				2,226	
2018	3,327				3,327	
Totals	12,307	0	0	0	12,307	

Form 990T Part II, Line 28	Other Deductions	
	Description	Amount
(1) PROFESSIONAL FEES		75.740



# Form 990T Part III, Line 35 Deduction for net operating loss arising in tax years beginning before January 1, 2018

Year Generated	Amount Generated	Converted Contributions	Amount Used in Pnor Years	Amount Used in Current Year	Amount Remaining	NOL Expires
2008	875,061		142,344		732,717	
2009	706,686				706,686	
2011	845,980				845,980	
2012	949,584				949,584	
2015	528,302				528,302	
2016	26,396				26,396	
Totals	3,932,009	0	142,344	0	3,789,665	

## Form 990T Part IV, Line 42

Alternative Minimum Tax

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	AMT NOL Expires
2008	758,449		286,353		472,096	
2009	581,619				581,619	
2011	770,643				770,643	
2012	780,316 780,3		780,316			
2015	416,911				416,911	
2016	9,592				9,592	
Totals	3,317,530	0	286,353	0	3,031,177	

**General Business Credit** 

▶ Go to www.irs.gov/Form3800 for instructions and the latest information. ▶ You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return. OMB No 1545-0895

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

Attachment Sequence No 22 Identifying number

YALE	UNIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST		06-6414276	
Par	Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (T	MT)		
	(See instructions and complete Part(s) III before Parts I and II.)			
1	General business credit from line 2 of all Parts III with box A checked	1	1,674	
2	Passive activity credits from line 2 of all Parts III with box B checked 2 0			
3	Enter the applicable passive activity credits allowed for 2018 See instructions	3		
4	Carryforward of general business credit to 2018 Enter the amount from line 2 of Part III with			
	box C checked See instructions for statement to attach	4	23,143	
5	Carryback of general business credit from 2019 Enter the amount from line 2 of Part III with box D checked See instructions	5	00	
6	Add lines 1, 3, 4, and 5	6	24,817	
Part	II Allowable Credit			
7	Regular tax before credits:			
	• Individuals Enter the sum of the amounts from Form 1040, line 11a, and Schedule 2 (Form 1040), line 46, or the sum of the amounts from Form 1040NR, lines 42 and 44			
	Corporations Enter the amount from Form 1120, Schedule J, Part I, line 2; or the			
	applicable line of your return.	7	0	
	• Estates and trusts Enter the sum of the amounts from Form 1041, Schedule G,			
_	lines 1a and 1b, or the amount from the applicable line of your return .			
8	Alternative minimum tax			
	• Individuals Enter the amount from Form 6251, line 11			
	• Corporations Enter -0	8	0	
	• Estates and trusts Enter the amount from Schedule I (Form 1041), line 56.			
0	Add lines 7 and 0	9	. 0	
9	Add lines 7 and 8	3		
10a	Foreign tax credit			
b	Certain allowable credits (see instructions)			
c	Add lines 10a and 10b	10c	0	
•				
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	0	
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0-	-		
13	Enter 25% (0 25) of the excess, if any, of line 12 over \$25,000 See			
13	instructions			
14	Tentative minimum tax:		,	
	Individuals. Enter the amount from Form 6251, line 9			
	• Corporations. Enter -0			
	• Estates and trusts Enter the amount from Schedule I			
	(Form 1041), line 54			
15	Enter the greater of line 13 or line 14	15		
16	Subtract line 15 from line 11. If zero or less, enter -0	16	0	
17	Enter the <b>smaller</b> of line 6 or line 16	17	0	
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition,			
	or reorganization			

Par			
Note	: If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and e	nter -	0- on line 26
18	Multiply line 14 by 75% (0 75) See instructions	18	0
19	Enter the greater of line 13 or line 18	19	0
20	Subtract line 19 from line 11. If zero or less, enter -0-	20	0
21	Subtract line 17 from line 20 If zero or less, enter -0	21	0,
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	0
23	Passive activity credit from line 3 of all Parts III with box B checked 23 0	<u> </u>	
24	Enter the applicable passive activity credit allowed for 2018. See instructions	24	
25	Add lines 22 and 24	25	0
· 26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0
27	Subtract line 13 from line 11. If zero or less, enter -0	27	0
28	Add lines 17 and 26	28	0
29	Subtract line 28 from line 27. If zero or less, enter -0-	29	0
30	Enter the general business credit from line 5 of all Parts III with box A checked .	30	883
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked 32 0		
33	Enter the applicable passive activity credits allowed for 2018 See instructions	33	
34	Carryforward of business credit to 2018 Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked See instructions for statement to attach.	34	0
35	Carryback of business credit from 2019. Enter the amount from line 5 of Part III with box D checked See instructions	35	0
36	Add lines 30, 33, 34, and 35	36	883
37	Enter the <b>smaller</b> of line 29 or line 36	37	0
38	Credit allowed for the current year. Add lines 28 and 37		
	Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return		
	• Individuals Schedule 3 (Form 1040), line 54, or Form 1040NR, line 51		
	Corporations Form 1120, Schedule J, Part I, line 5c		
	Estates and trusts. Form 1041, Schedule G, line 2b	38	0

Form **3800** (2018)

2

For	Form 3800 (2018) Page <b>3</b>						
Nar	ne(s) s	nown on return		Ident	ıfyıng number		
		NIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST			06-6414276		
P	art III	General Business Credits or Eligible Small Business Credits (see	e inst	ructions)	·-·-		
Co	mple	te a separate Part III for each box checked below See instructions.					
Α	☑ (	General Business Credit From a Non-Passive Activity <b>E</b> Reserved					
В		General Business Credit From a Passive Activity F 🔲 Reserved					
С		General Business Credit Carryforwards G 🔲 Eligible Small	Busın	ess Credit Carry	forwards		
D		General Business Credit Carrybacks H Reserved					
ı	If you	are filing more than one Part III with box A or B checked, complete and attach firs	t an a	dditional Part III	combining amounts fr	rom	
	all Pa	arts III with box A or B checked Check here if this is the consolidated Part III.			<u> </u>	<u> </u>	
		(a) Description of credit		(b)	(c)		
No	te: On	any line where the credit is from more than one source, a separate Part III is needed for e	ach	If claiming the cred from a pass-through	Inter the appropria	ate	
		ough entity		entity, enter the El			
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a		0		
	b	Reserved	1b				
	С	Increasing research activities (Form 6765)	1c		1,674		
	d	Low-income housing (Form 8586, Part I only)	1d		0		
	е	Disabled access (Form 8826) (see instructions for limitation)	1e	• •	0		
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		0		
	g	Indian employment (Form 8845)	1g		0		
	h	Orphan drug (Form 8820)	1h		0		
	i	New markets (Form 8874)	1i		0		
	i	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j		0		
	k	Employer-provided child care facilities and services (Form 8882) (see	٠,				
	Α	Instructions for limitation)	1k	1			
	ı	Biodiesel and renewable diesel fuels (attach Form 8864)	11		0		
	m	Low sulfur diesel fuel production (Form 8896)	1m		0		
	n	Distilled spirits (Form 8906)	1n		0		
	0	Nonconventional source fuel (carryforward only)	10	• • •	0		
		Energy efficient home (Form 8908)	1p		0		
	p ~		1q				
	q		1r		0		
	r	Alternative motor vehicle (Form 8910)	1s		0		
	S	Alternative fuel vehicle refueling property (Form 8911)	1t				
	t	Enhanced oil recovery credit (Form 8830)			- 0		
	u	Mine rescue team training (Form 8923)	1u		- 0		
	V	Agricultural chemicals security (carryforward only)	1v				
	w	Employer differential wage payments (Form 8932)	1w	<del></del>			
	X	Carbon oxide sequestration (Form 8933)	1x		<del> </del>		
	У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		0		
	Z	Qualified plug-in electric vehicle (carryforward only)	1z		0		
	aa	Employee retention (Form 5884-A)	1aa		0		
	bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb		0		
	ZZ	Other Oil and gas production from marginal wells (Form 8904) and certain					
	_	other credits (see instructions)	1zz		0		
	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		1,674		
3	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		0		
4	4a	Investment (Form 3468, Part III) (attach Form 3468)	4a		0		
	b	Work opportunity (Form 5884)	4b		0		
	С	Biofuel producer (Form 6478)	4c		0		
	d	Low-income housing (Form 8586, Part II)	4d		0		
	е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		0		
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	,	883		
	g	Qualified railroad track maintenance (Form 8900)	4g		0		
	h	Small employer health insurance premiums (Form 8941)	4h		0		
	i	Increasing research activities (Form 6765)	4i		0		
	j	Employer credit for paid family and medical leave (Form 8994)	4j		0		
	z	Other	4z		0		
	5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		883		
(	6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		2,557		

	m 3800	<u>-inin</u>				Page 3
	• •	hown on return		Ide	entifying number	
		NIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST			06-6414276 	
	art III		e inst	ructions)		
		te a separate Part III for each box checked below See instructions.				
		General Business Credit From a Non-Passive Activity E Reserved				
		General Business Credit From a Passive Activity F Reserved				
		<del>_</del> -	Busin	ess Credit Car	ryforwards	
		General Business Credit Carrybacks H Reserved				
ı		u are filing more than one Part III with box A or B checked, complete and attach firs	st an a	additional Part II	II combining amounts	from
	all Pa	arts III with box A or B checked Check here if this is the consolidated Part III.	• •	·		
		(a) Description of credit		(b) If claiming the cr	edit Enter the appropr	nata
		any line where the credit is from more than one source, a separate Part III is needed for e	ach	from a pass-thro	ugh amount	late
_		ough entity		entity, enter the	EIN	
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a			1
	b	Reserved	1b		23,143	<del> !</del>
	C	Increasing research activities (Form 6765)	1c 1d		23,143	-
	d	Low-income housing (Form 8586, Part I only)	$\vdash$			
	e	Disabled access (Form 8826) (see instructions for limitation)	1e 1f			
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	$\vdash$			_
	g	Indian employment (Form 8845)	1g 1h			$\vdash$
	h :	Orphan drug (Form 8820)	1ii	-		
	! :	New markets (Form 8874)	_			<del></del>
	J ,	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1 <u>j</u>			<del>                                     </del>
	k	Employer-provided child care facilities and services (Form 8882) (see	1k			
		Instructions for limitation)  Biodiesel and renewable diesel fuels (attach Form 8864)	11			_
	ı Т	Low sulfur diesel fuel production (Form 8896)	1m			-
	m	·	1n		<del></del>	$\vdash$
	n	Distilled spirits (Form 8906)	10			
	0	, ,	1p		<del></del>	_
	p	Energy efficient home (Form 8908)	1q			_
	q r	Alternative motor vehicle (Form 8910)	1r		-	
	s	Alternative fuel vehicle refueling property (Form 8911)	1s			
	t	Enhanced oil recovery credit (Form 8830)	1t		<del></del>	
	u	Mine rescue team training (Form 8923)	1u			
	v	Agricultural chemicals security (carryforward only)	10			_
	w	Employer differential wage payments (Form 8932)	1w			
	x	Carbon oxide sequestration (Form 8933)	1x		-	
	ŷ	Qualified plug-in electric drive motor vehicle (Form 8936)	1y			
	z	Qualified plug-in electric vehicle (carryforward only)	1z			
	aa	Employee retention (Form 5884-A)	1aa			_
	bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb			$\overline{}$
	ZZ	Other Oil and gas production from marginal wells (Form 8904) and certain				
		other credits (see instructions)	1zz			
:	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		23,143	
	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3			
	4a	Investment (Form 3468, Part III) (attach Form 3468)	4a			
	b	Work opportunity (Form 5884)	4b			
	С	Biofuel producer (Form 6478)	4c			
	d	Low-income housing (Form 8586, Part II)	4d			
	е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e			
	f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f			
	g	Qualified railroad track maintenance (Form 8900)	4g			
	h	Small employer health insurance premiums (Form 8941)	4h			
	i	Increasing research activities (Form 6765)	4i			
	j	Employer credit for paid family and medical leave (Form 8994)	4j			
	z	Other	4z			
	5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		0	
	6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		23,143	
_						

# Form **8801**

## Credit for Prior Year Minimum Tax— Individuals, Estates, and Trusts

Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on return

OMB No 1545-1073

2018

Attachment Sequence No **74** 

YALE UNIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST 06-6414276 **Net Minimum Tax on Exclusion Items** Part I Combine lines 1, 6, and 10 of your 2017 Form 6251 Estates and trusts, see instructions. 1 1 Enter adjustments and preferences treated as exclusion items (see instructions) 2 3 3 Minimum tax credit net operating loss deduction (see instructions) Combine lines 1, 2, and 3 If zero or less, enter -0- here and on line 15 and go to Part II. If more 4 than \$249.450 and you were married filing separately for 2017, see instructions Enter \$84,500 if married filing jointly or qualifying widow(er) for 2017, \$54,300 if single or head of 5 household for 2017, or \$42,250 if married filing separately for 2017. Estates and trusts, enter \$24,100 24.100 Enter: \$160,900 if married filing jointly or qualifying widow(er) for 2017, \$120,700 if single or head of household for 2017; or \$80,450 if married filing separately for 2017. Estates and trusts, enter 6 \$80,450 . . ~ 80,450 . Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9. 7 7 8 Multiply line 7 by 25% (0 25) 8 Subtract line 8 from line 5. If zero or less, enter -0-. If under age 24 at the end of 2017, see instructions 9 9 24,100 10 Subtract line 9 from line 4. If zero or less, enter -0- here and on line 15 and go to Part II. Form 10 1040NR filers, see instructions • If for 2017 you filed Form 2555 or 2555-EZ, see instructions for the amount to enter 11 • If for 2017 you reported capital gain distributions directly on Form 1040, line 13, you reported qualified dividends on Form 1040, line 9b (Form 1041, line 2b(2)), or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (lines 18a and 19, column (2), of Schedule D (Form 1041)), complete Part III of Form 8801 and enter the amount from line 55 here Form 1040NR filers, see instructions \ 11 • All others: If line 10 is \$187,800 or less (\$93,900 or less if married filing separately for 2017), multiply line 10 by 26% (0.26) Otherwise, multiply line 10 by 28% (0.28) and subtract \$3.756 (\$1.878 if married filing separately for 2017) from the result Form 1040NR filers, see instructions 12 12 Minimum tax foreign tax credit on exclusion items (see instructions) 13 13 Tentative minimum tax on exclusion items. Subtract line 12 from line 11 . . . 14 Enter the amount from your 2017 Form 6251, line 34, or 2017 Form 1041, Schedule I, line 55 14

Net minimum tax on exclusion items. Subtract line 14 from line 13. If zero or less, enter -0-

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Part	II Minimum Tax Credit and Carryforward to 2019		
16	Enter the amount from your 2017 Form 6251, line 35, or 2017 Form 1041, Schedule I, line 56 .	16	
17	Enter the amount from line 15	17	
18	Subtract line 17 from line 16. If less than zero, enter as a negative amount	18	
19	2017 credit carryforward. Enter the amount from your 2017 Form 8801, line 26	19	6,451
20	Enter your 2017 unallowed qualified electric vehicle credit (see instructions)	20	
21	Combine lines 18 through 20. If zero or less, stop here and see the instructions	21	6,451
22	Enter your 2018 regular income tax liability minus allowable credits (see instructions) .	22	
23	Enter the amount from your 2018 Form 6251, line 9, or 2018 Form 1041, Schedule I, line 54	23	
24	Subtract line 23 from line 22 If zero or less, enter -0-	24	
25	Minimum tax credit. Enter the smaller of line 21 or line 24 Also enter this amount on your 2018 Schedule 3 (Form 1040), line 54 (check box b), Form 1040NR, line 51 (check box b), or Form 1041, Schedule G, line 2c	25	
26	Credit carryforward to 2019. Subtract line 25 from line 21. Keep a record of this amount because you may use it in future years	26	6,451
			Form <b>8801</b> (2018)

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	Complete Part III only if you are required to do so by line 11 or by the Foreign Earned Income Tax W	Torksnee	in the instructions	٥.
	Caution: If you didn't complete the 2017 Qualified Dividends and Capital Gain Tax Worksheet, the 2017 Schedule D Tax Worksheet, or Part V of the 2017 Schedule D (Form 1041), see the instructions before completing this part *			
27	Enter the amount from Form 8801, line 10 If you filed Form 2555 or 2555-EZ for 2017, enter the amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions Caution: If for 2017 you filed Form 1040NR, 1041, 2555, or 2555-EZ, see the instructions before	27		
	completing lines 28, 29, and 30.			
28	Enter the amount from line 6 of your 2017 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 13 of your 2017 Schedule D Tax Worksheet, or the amount from line 26 of the 2017 Schedule D (Form 1041), whichever applies*	28	70,356	
`	If you figured your 2017 tax using the 2017 Qualified Dividends and Capital Gain Tax Worksheet, skip line 29 and enter the amount from line 28 on line 30. Otherwise, go to line 29.			
29	Enter the amount from line 19 of your 2017 Schedule D (Form 1040), or line 18b, column (2), of the 2017 Schedule D (Form 1041)	29		
30	Add lines 28 and 29, and enter the <b>smaller</b> of that result or the amount from line 10 of your 2017 Schedule D Tax Worksheet	30	70,356	
31	Enter the smaller of line 27 or line 30	31	70,356	_
32	Subtract line 31 from line 27	32		_
33	If line 32 is \$187,800 or less (\$93,900 or less if married filing separately for 2017), multiply line 32 by 26% (0.26) Otherwise, multiply line 32 by 28% (0.28) and subtract \$3,756 (\$1,878 if married filing separately for 2017) from the result. Form 1040NR filers, see instructions	33		
34	Enter			
<b>.</b> .	<ul> <li>\$75,900 if married filing jointly or qualifying widow(er) for 2017,</li> <li>\$37,950 if single or married filing separately for 2017,</li> </ul>			
	\$50,800 if head of household for 2017, or     \$2,550 for an estate or trust.  Form 1040NR filers, see instructions	34	2,550	_
35	Enter the amount from line 7 of your 2017 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 14 of your 2017 Schedule D Tax Worksheet, or the amount from line 27 of the 2017 Schedule D (Form 1041), whichever applies. If you didn't complete either worksheet or Part V of the 2017 Schedule D (Form 1041), enter the amount from your 2017 Form 1040, line 43, or 2017 Form			
36	1041, line 22, whichever applies; if zero or less, enter -0 Form 1040NR filers, see instructions Subtract line 35 from line 34. If zero or less, enter -0-	35	2,550	_
37	Enter the smaller of line 27 or line 28	37	2,550	_
38	Enter the <b>smaller</b> of line 36 or line 37	38		
39	Subtract line 38 from line 37	39		_
40	Enter:			
	<ul> <li>\$418,400 if single for 2017,</li> <li>\$235,350 if married filing separately for 2017,</li> </ul>			
	• \$470,700 if married filing jointly or qualifying widow(er) for 2017,	40	12,500	_
	<ul> <li>\$444,550 if head of household for 2017, or</li> <li>\$12,500 for an estate or trust.</li> </ul>			
	Form 1040NR filers, see instructions			
41	Enter the amount from line 36	41	2,550	
42	Form 1040 filers, enter the amount from line 7 of your 2017 Qualified Dividends and Capital Gain Tax			
	Worksheet or the amount from line 19 of your 2017 Schedule D Tax Worksheet, whichever applies. If you didn't complete either worksheet, see instructions. Form 1041 filers, enter the amount from line 27 of your			
,	didn't complete either worksheet, see instructions Form 1041 filers, enter the amount from line 27 of your 2017 Schedule D (Form 1041) or line 18 of your 2017 Schedule D Tax Worksheet, whichever applies. If			`
	you didn't complete either the worksheet or Part V of the 2017 Schedule D (Form 1041), enter the amount			
	from your 2017 Form 1041, line 22, if zero or less, enter -0 Form 1040NR filers, see instructions	42		_

<sup>\*</sup> The 2017 Qualified Dividends and Capital Gain Tax Worksheet is in the 2017 Instructions for Form 1040. The 2017 Schedule D Tax Worksheet is in the 2017 Instructions for Schedule D (Form 1040) (or the 2017 Instructions for Schedule D (Form 1041))

Part III Tax Computation Using Maximum Capital Gains Rates (continued)					
43	Add lines 41 and 42	43	2,550		
44	Subtract line 43 from line 40. If zero or less, enter -0	44	9,950		
45	Enter the <b>smaller</b> of line 39 or line 44	45		_	
46	Multiply line 45 by 15% (0 15)	46			
47	Add lines 38 and 45	47			
	If lines 47 and 27 are the same, skip lines 48 through 52 and go to line 53. Otherwise, go to line 48.				
48	Subtract line 47 from line 37	48			
49	Multiply line 48 by 20% (0.20)	49			
	If line 29 is zero or blank, skip lines 50 through 52 and go to line 53. Otherwise, go to line 50.				
50	Add lines 32, 47, and 48	50			
51	Subtract line 50 from line 27	51		_	
52	Multiply line 51 by 25% (0.25)	52		_	
53	Add lines 33, 46, 49, and 52	53			
54	If line 27 is \$187,800 or less (\$93,900 or less if married filing separately for 2017), multiply line 27 by 26% (0 26) Otherwise, multiply line 27 by 28% (0 28) and subtract \$3,756 (\$1,878 if married				
	filing separately for 2017) from the result Form 1040NR filers, see instructions.	54		_	
55	Enter the <b>smaller</b> of line 53 or line 54 here and on line 11. If you filed Form 2555 or 2555-EZ for 2017, don't enter this amount on line 11. Instead, enter it on line 4 of the Foreign Earned Income				
	Tax Worksheet in the instructions for line 11	55			
			Form <b>8801</b> (201	8)	