

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0047

		For cale	ndar year 2019 or other tax year be	ainnina 07/01	2019.	and ending 06/30	. 20 20		2019
Departme	ent of the Treasury	51 54.5	► Go to www.irs.gov/Form9						
	Revenue Service	▶ Do i	not enter SSN numbers on this for					501(c)	o Public Inspection for (3) Organizations Only
A D	heck box if ddress changed		Name of organization (box if name changed	and see	instructions)			dentification number
_	ot under section	D	YALE UNIVERSITY RETIREE	HEALTH BENEFITS	COVI	ERAGE TRUST	(Em	ployees'	trust, see instructions)
✓ 50	1(C)(Q 3)	Print	Number, street, and room or suite	no If a P O box, see if	nstructio	ons			-6414276
4 0	8(e) 220(e)	Туре	C/O YALE UNIVERSITY, P O	BOX 208239					usiness activity code
40	8A 🔲 530(a)		City or town, state or province, cou	intry, and ZIP or foreig	n posta	l code	(26)	e instruc	tions)
52	9(a)	<u> </u>	NEW HAVEN, CT 06520-8239						525990
C Book at end	value of all assets		oup exemption number (See						
	599,469,932		neck organization type 🕨 [√ 501(c) trust	<u>==</u>	a) trust	
			organization's unrelated trade						first) unrelated
			INCOME LOSS FROM PARTNERSH						
			at the end of the previous se	entence, complete	e Parts	s I and II, complet	e a Schedu	ile M f	or each additional
		·	omplete Parts III-V						
	-		e corporation a subsidiary in an			nt-subsidiary contro	olled group?	. •	☐ Yes 🛂 No
			and identifying number of the		on 🕨				(000) 100 5500
			STEPHEN MURPHY, YALE	UNIVERSITY		Telephone n			(203) 432-5530
			e or Business Income	T		(A) Income	(B) Expen	ses	(C) Net
1a	Gross receipts			1	_ ا		() () () () ()	1.5	1111
ь	Less returns a			c Balance ►	1c	0	***	/	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
2	•	•	Schedule A, line 7)	•	2	0		. , -	74, 75 <u>5.3</u> 0
3			t line 2 from line 1c		3	768,889		د ب	768,889
4a			ne (attach Schedule D)		4a	(85,906)	' -\'-		(85,906)
b			4797, Part II, line 17) (attach	FORM 4797)	4b 4c	(65,900)			(05,500)
с 5	Capital loss de		n for trusts a partnership or an S cor	noration (attach	40	/"			
3	statement)	HOIN	a partnership of all 3 cor	poration (attach	5	(218,342)		,	(218,342)
6	•	Cabadi	ilo Cl		6	0		0	(210,542)
6 7	Rent income (ced income (Schedule E)	•	7			0	0
8			s, and rents from a controlled organ	ration (Schedule F)	8	0		0	0
9			ection 501(c)(7), (9), or (17) organiz		9/	0		0	0
10			ection 30 ((c)(7), (9), or (17) organiz rivity income (Schedule I)	ation (ochedule d)	10	0		0	0
11	Advertising inc		•	•	11	0		0	. 0
12	•	•	structions, attach schedule)		12	0	. ,	,	0
13	Total. Combin	•			13	464,641		0	464,641
Part			Taken Elsewhere (See ins	structions for limi		s on deductions	(Deduction	ns mus	st be directly
			he unrelated business inco			,	`		·
14			cers, directors, and trustees					14	0
15	Salaries and w							15	0
16	Repairs and m	naintena	ance . "					16	0
17	Bad debts		. /					17	0
18	Interest (attacl	h sched	dule) (see instructions)					18	0
19	Taxes and lice	enses	. /					19	8,631
20	Depreciation (attach l	Form 4562) .			20		<u>니</u>	
21	Less deprecia	ition cla	imed on Schedule A and else	ewhere on return	_	21a	(21b	0
22	Depletion		. /		ł	RECEIV		22	0
23	Contributions	to defe	rred compensation plans		Ι.	ILCLIV		23	0
24	Employee ben		- /		<u>,</u> ∞	14437	્રાજા	24	0
25			nses (Schedule I)	•	D118	MAY 1 8 20	21 0.5	25	0
26			osts (Schedule J)		احا			26	0
27	Other deduction					OGDEN,	T =	27	79,893
28			dd lines 14 through 27					28	88,524
29			axable income before net ope					29	376,117
30		,	perating loss arising in tax	years beginning	on or	aπer January 1,	∠UIB (see		_
	instructions)			00 (30	276 117
31	Unrelated bus	iness ta	axable income. Subtract line	30 from line 29				31	376,117

For Paperwork Reduction Act Notice, see instructions.

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Form 990-T (2019)

Yale University Retiree Health Benefits Coverage Trust - 06-6414276

Form 99	0-T (2019)							Page 2
Part		otal Unrelated Business Taxable	e Income					· ago =
32		f unrelated business taxable income		des or businesses (see			
-	instruct				`]	32	3	76,117
33		ts paid for disallowed fringes				32 33		
34		ble contributions (see instructions for			Ì	34		0
35	Total u	related business taxable income be	fore pre-2018 NOLs and specific of	deduction. Subtract	line I	1		
						35	3	76,117
36		on for net operating loss arising			- [7		 -
•	instruct				6	36	3	76.117
37		unrelated business taxable income t		line 36 from line 35	·	37		0
38		deduction (Generally \$1,000, but se	•		- t	38	· · · ·	0
39		ed business taxable income. Subt				7		
11.						39		0
		x Computation						
40		zations Taxable as Corporations. N	Aultiply line 39 by 21% (0.21)			40		
41		Taxable at Trust Rates. See			_ L			
		ount on line 39 from: 📝 Tax rate sch	·		▶	41		0
42					•	42		
43		ive minimum tax (trusts only)			5	43		1,671
44		Noncompliant Facility Income. See				44		
		add lines 42, 43, and 44 to line 40 or			7	45		1,671
Part		ix and Payments			- 1			
46a		tax credit (corporations attach Form	1118: trusts attach Form 1116) .	46a				
		redits (see instructions)		46b				
		business credit. Attach Form 3800 (46c	0			
d		or prior year minimum tax (attach For		46d				
e		redits. Add lines 46a through 46d .				46e		0
47		t line 46e from line 45				47		1,671
48		es. Check if from: Form 4255 Form			-	48		0
49		x. Add lines 47 and 48 (see instruction			4	49		1,671
50		et 965 tax liability paid from Form 965			'	50		
51a		its: A 2018 overpayment credited to			2,341			
	-			51b	0			
c				51¢				
d		organizations: Tax paid or withheld		51d				
e	_	=		51e				
f	•	or small employer health insurance p		511				
g		redits, adjustments, and payments:	_					
•	☐ Forn			51g	0			
52		ayments. Add lines 51a through 51g				52		12,341
53	-	ed tax penalty (see instructions). Che		▶		53		
54	Tax du	e. If line 52 is less than the total of lin	es 49, 50, and 53, enter amount ov	ved	、▶ [54		0
55	Overpa	yment. If line 52 is larger than the to	tal of lines 49, 50, and 53, enter am	ount overpaid!.	⁾ ▶ [55		10,670
N^56	Enter the	amount of line 55 you want Credited	to 2020 estimated tax 🕨	10,670 Refunded	d ▶	56		0
Part \	VI St	atements Regarding Certain A	ctivities and Other Information	n (see instructions)				
57	At any t	ime during the 2019 calendar year, o	did the organization have an interes	t in or a signature o	r othe	r author	ıty Yes	No
		inancial account (bank, securities, or						
	FinCEN	Form 114, Report of Foreign Bank a	and Financial Accounts. If "Yes," e	nter the name of the	forei	gn coun	try	.
	here ▶		'					↓ ✓
58	During th	ne tax year, did the organization receive a	a distribution from, or was it the granto	r of, or transferor to, a	foreigr	n trust?		↓ ✓
	If "Yes,"	' see instructions for other forms the	organization may have to file.					
59	Enter th	e amount of tax-exempt interest rec	eived or accrued during the tax yea	r ▶ \$			0	$oxed{oxed}$
	Under	penalties of perjury, I declare that I have examined intect, and complete Declaration of preparer (other	this return, including accompanying schedules	and statements, and to the	e best of	f my knowl	edge and be	elief, it is
Sign	Linde, Co	Van Asans	YALE UNIVERSIT	Y AS TRUSTEE BY	М		discuss this	
Here	/ XC	Name Shannon N	, <u>, , , , , , , , , , , , , , , , , , </u>	TROLLER			oarer shown ons)? \(\text{Yes}\)	
	Signatu	re of officer	Date Title		ــــــــــــــــــــــــــــــــــــــ			
Paid	Ī	Print/Type preparer's name	Preparer's signature	Date		: 🔲 ıf	PTIN	
Prepa	arer				self-er	nployed	L	
Use (Firm's name ▶			Firm's	EIN ►	_	
	y	Firm's address ▶			Phone	no		

Form 9	90-T (2019)										F	Page 3
Sche	dule A-Cost of Goods So	l d. Er	iter method of i	nvent	ory va	aluation 🕨						
1	Inventory at beginning of year		1	0	6	Inventory a	at e	nd of year	6			0
2	Purchases .		2	0	7	-	•	ds sold. Subtract line				
3	Cost of labor	L	3	0		-	€ 5	Enter here and in Part		.]		
4a	Additional section 263A cos	sts				I, line 2			7	<u> </u>	1	0
	(attach schedule)		4a	0	8			of section 263A (with	•		Yes	No
	Other costs (attach schedule)	<u> </u>	4b	0				uced or acquired for r	esale)	apply		. '
5	Total. Add lines 1 through 4b		5	0		to the orga					J	<u> </u>
	dule C-Rent Income (From	п не	ai Property and	a Per	sonai	Property	Lea	ised with Real Prop	erty			
<u> </u>	eription of property											
	inplion of property											
(1)		-										
(3)						 -						
(4)						·						
(4)	2. Ren	t receiv	ed or accrued					- +				
	om personal property (if the percentage of personal property is more than 10% but more than 50%)		(b) From real a percentage of rent 50% or if the rent	for per	sonal pr	operty exceeds		3(a) Deductions directly of in columns 2(a) and				ne
(1)												
(2)												
(3)												
(4)							\perp				,	
Total		0	Total				0	(b) Total deductions				
	tal income. Add totals of columns and on page 1, Part I, line 6, column		d 2(b) Enter ►					Enter here and on page 1 Part I, line 6, column (B)				0
Sche	dule E-Unrelated Debt-Fi	nanc	ed Income (see	ınstrı	uctions	3)						
				2 (Gross in	come from or		Deductions directly confident debt-finance	ected v	vith or allo	ocable t	0
	Description of debt-financ	ed prop	perty	allo		debt-financed perty	(a) Straight line depreciation (attach schedule)	(b)	Other de		ıs
(1)												
(2)												
(3)												
(4)												
	acquisition debt on or	of or debt-fin	e adjusted basis allocable to anced property ch schedule)		4 d	olumn Ivided Ilumn 5	7	Gross income reportable (column 2 x column 6)		llocable on 6 × tota 3(a) and	al of coli	
(1)						%						
(2)						%						
(3)						%						
(4)						%						
								iter here and on page 1, art I, line 7, column (A)		nere and , line 7, d		
Totals						•		0				0
Total	dividends-received deductions inc	cluded	ın column 8					>				0

Form 990-T (2019) Page 4 Schedule F-Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions) **Exempt Controlled Organizations** 1 Name of controlled 2 Employer 5 Part of column 4 that is 6 Deductions directly 3 Net unrelated income 4 Total of specified organization identification number included in the controlling connected with income (loss) (see instructions) payments made organization's gross income ın column 5 (1) (2) (3) (4) Nonexempt Controlled Organizations 11 Deductions directly 10 Part of column 9 that is 8. Net unrelated income 9 Total of specified connected with income in 7. Taxable Income included in the controlling (loss) (see instructions) payments made column 10 organization's gross income (1) (2) (3) (4) Add columns 6 and 11 Add columns 5 and 10 Enter here and on page 1 Enter here and on page 1. Part I, line 8, column (A) Part I line 8, column (B) Totals Schedule G-Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) 3 Deductions Total deductions 4 Set-asides directly connected (attach schedule) 1. Description of income 2 Amount of income and set-asides (col. 3 plus col. 4) (attach schedule) (1) (2)(3) (4)Enter here and on page 1, Enter here and on page 1. Part I, line 9, column (A) Part I, line 9, column (B) Totals 0 Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 7 Excess exempt 3 Expenses 4. Net income (loss) 2. Gross directly from unrelated trade 5. Gross income expenses unrelated 6 Expenses from activity that (column 6 minus connected with or business (column attributable to 1. Description of exploited activity business income production of 2 minus column 3) is not unrelated column 5 but not column 5 from trade or unrelated If a gain, compute business income more than business column 4) business income cols 5 through 7 (1) (2) (3) (4) Enter here and Enter here and on Enter here and on page 1, Part I, line 10, col (A) page 1, Part I, line 10, col (B) on page 1, Part II, line 25 0 Totals Schedule J-Advertising Income (see instructions) Income From Periodicals Reported on a Consolidated Basis 4 Advertising Excess readership 2 Gross gain or (loss) (col costs (column 6 3 Direct 5 Circulation 6. Readership 1. Name of periodical advertising 2 minus col 3) If nınus column 5, but advertising costs income costs a gain, compute not more than income cols 5 through 7 column 4) ١ (1) (2)(3) (4)

0

Totals (carry to Part II, line (5))

0

Page 5

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns Part II 2 through 7 on a line-by-line basis) 4 Advertising 7 Excess readership gain or (loss) (col 2 minus col 3) If 2 Gross costs (column 6 3 Direct 5 Circulation 6 Readership advertising minus column 5, but 1. Name of periodical advertising costs income costs income a gain, compute not more than cols 5 through 7 column 4) (1) (2) (3) (4) 0 0 Totals from Part I 0 Enter here and on Enter here and on Enter here and on page 1, Part II, line 26 page 1, Part I, page 1, Part I, line 11, col (A) line 11, col (B) Totals, Part II (lines 1-5) 0 Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3 Percent of time devoted to business 4. Compensation attributable to 1. Name 2. Title unrelated business (1) % (2) % (3) % (4) % 0 Total. Enter here and on page 1, Part II, line 14 • Form 990-T (2019)

SCHEDULE I (Form 1041)

Alternative Minimum Tax—Estates and Trusts

OMB No 1545-0092

2019

Department of the Treasury Internal Revenue Service Name of estate or trust ► Attach to Form 1041.

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

YALE UNIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST

Employer identification number

Part	Estate's or Trust's Share of Alternative Minimum Taxable Income		
1	Adjusted total income or (loss) (from Form 1041, line 17) ESBTs, see instructions	1	0
2	Interest	2	
3	Taxes	3	8,631
4	Refund of taxes	4	()
5	Depletion (difference between regular tax and AMT)	5	3,869
6	Net operating loss deduction	6	376,117
7	Interest from specified private activity bonds exempt from the regular tax	7	
8	Qualified small business stock (see instructions)	8	
9	Exercise of incentive stock options (excess of AMT income over regular tax income)	9	
10	Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) .	10	
11	Disposition of property (difference between AMT and regular tax gain or loss)	11	(1,807)
12	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	12	1,919
13	Passive activities (difference between AMT and regular tax income or loss)	13	
14	Loss limitations (difference between AMT and regular tax income or loss)	14	
15	Circulation costs (difference between regular tax and AMT)	15	
16	Long-term contracts (difference between AMT and regular tax income)	16	
17	Mining costs (difference between regular tax and AMT)	17	
18	Research and experimental costs (difference between regular tax and AMT)	18	
19	Income from certain installment sales before January 1, 1987 .	19	()
20	Intangible drilling costs preference	20	0
21	Other adjustments, including income-based related adjustments	21	(2,929)
22	Alternative tax net operating loss deduction (See the instructions for the limitation that applies)	22	(347,220)
23	Adjusted alternative minimum taxable income. Combine lines 1 through 22	23	38,580
	Note: Complete Part II below before going to line 24		
24	Income distribution deduction from Part II, line 42 . 24 0		
25	Estate tax deduction (from Form 1041, line 19)		
26	Add lines 24 and 25	26	0
27	Estate's or trust's share of alternative minimum taxable income. Subtract line 26 from line 23	27	38,580
	If line 27 is.		

- \$25,000 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 \$25,000, but less than \$183,500, go to line 43
- \$183,500 or more, enter the amount from line 27 on line 49 and go to line 50
- ESBTs, see instructions

Par	t II Income Distribution Deduction on a Minimum Tax Basis		
28	Adjusted alternative minimum taxable income (see instructions)	28	38,580
29	Adjusted tax-exempt interest (other than amounts included on line 7)	29	
30	Total net gain from Schedule D (Form 1041), line 19, column (1) If a loss, enter -0-	30	0
31	Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable purposes (from Form 1041, Schedule A, line 4)	31	
32	Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)	32	
33	Capital gains computed on a minimum tax basis included on line 23	33 (768,889)
34	Capital losses computed on a minimum tax basis included on line 23. Enter as a positive amount	34	
35	Distributable net alternative minimum taxable income (DNAMTI) Combine lines 28 through 34 lf zero or less, enter -0-	35	0
36	Income required to be distributed currently (from Form 1041, Schedule B, line 9)	36	
37	Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)	37	
38	Total distributions Add lines 36 and 37 .	38	0
39	Tax-exempt income included on line 38 (other than amounts included on line 7)	39	
40	Tentative income distribution deduction on a minimum tax basis. Subtract line 39 from line 38	40	0

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Cat No 51517Q

Schedule I (Form 1041) 2019

Schedu	le I (Form 1041) 2019				Page 2
Part	II Income Distribution Deduction on a Minimum Tax Basis (continu	ed)			
41	Tentative income distribution deduction on a minimum tax basis. Subtract line 2 or less, enter -0-	9 fror	n line 35 If zero	41	0
42	Income distribution deduction on a minimum tax basis. Enter the smaller enter here and on line 24 .	of lin	e 40 or line 41	42	0
Part					
43	Exemption amount			43	\$25,000
44	Enter the amount from line 27	44	38,580		
45	Phase-out of exemption amount	45	\$83500	,	
46	Subtract line 45 from line 44 If zero or less, enter -0-	46	0	****	
47	Multiply line 46 by 25% (0 25)			47	0
48	Subtract line 47 from line 43 If zero or less, enter -0-			48	25,000
49	Subtract line 48 from line 44		•	49	13,580
50	Go to Part IV of Schedule I to figure line 50 if the estate or trust has qualified div on lines 18a and 19 of column (2) of Schedule D (Form 1041) (as refigured for the Otherwise, if line 49 is		•		
	• \$194,800 or less, multiply line 49 by 26% (0 26)				
	 Over \$194,800, multiply line 49 by 28% (0 28) and subtract \$3,896 from the res 	ult		50	1,671
51	Alternative minimum foreign tax credit (see instructions)			51	4 074
52	Tentative minimum tax Subtract line 51 from line 50			52	. 1,671
53	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from		·	53	
54	Alternative minimum tax. Subtract line 53 from line 52 If zero or less, enter -0 Form 1041, Schedule G, line 1c) En	iter here and on	54	1,671
Part	IV Line 50 Computation Using Maximum Capital Gains Rates				,
	on: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D To led Dividends Tax Worksheet in the Instructions for Form 1041, see the instructionart				
55	Enter the amount from line 49			55	13,580
56	Enter the amount from line 26 of Schedule D (Form 1041), 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)	56	761,381		
57	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-	57		*	
58	If you didn't complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 56 Otherwise, add lines 56 and 57 and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary)	58	761,381		
59	Enter the smaller of line 55 or line 58			59	13,580
60	Subtract line 59 from line 55		,	60	0
61	If line 60 is \$194,800 or less, multiply line 60 by 26% (0.26) Otherwise, multiply and subtract \$3,896 from the result	line 6	0 by 28% (0 28)	61	0
62	Maximum amount subject to the 0% rate .	62	\$2650		
63	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 23, if zero or less, enter -0-	63		* .	
64	Subtract line 63 from line 62 If zero or less, enter -0-	64	2,650		
65	Enter the smaller of line 55 or line 56	65	13,580		
66	Enter the smaller of line 64 or line 65. This amount is taxed at 0%.	66	2,650	ľ	
67	Subtract line 66 from line 65 .	67	10,930		

Schedule I (Form 1041) 2019

Schedi	ne i (Form 1041) 2019				Page 3
Part	IV Line 50 Computation Using Maximum Capital Gains Rates (cont	inuec	1)		
68	Maximum amount subject to rates below 20%	68	\$12,950		
69	Enter the amount from line 64	69	2,650		
70	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 23, if zero or less, enter -0-	70			
71	Add line 69 and line 70 .	71	2,650]	
72	Subtract line 71 from line 68 If zero or less, enter -0-	72	10,300]	
73	Enter the smaller of line 67 or 72 .	73	10 300]	i I
74	Multiply line 73 by 15% (0 15)			74	1,545
75	Add lines 66 and 73	75	12,950]	
	If lines 75 and 55 are the same, skip lines 76 through 80 and go to line 81. Other	vise,	go to line 76.]	1
76	Subtract line 75 from line 65 .	76	630], [i
77	Multiply line 76 by 20% (0 20)		>	77	126
	If line 57 is zero or blank, skip lines 78 through 80 and go to line 81. Otherwi	se, g	o to line 78.		· Í
78	Add lines 60, 75, and 76	78	0		
79	Subtract line 78 from line 55 .	79	0		
80	Multiply line 79 by 25% (0 25)		>	80	0
81	Add lines 61, 74, 77, and 80			81	1,671
82	If line 55 is \$194,800 or less, multiply line 55 by 26% (0 26) Otherwise, multiply	line 5	55 by 28% (0 28)		
	and subtract \$3,896 from the result		•	82	3,531
83	Enter the smaller of line 81 or line 82 here and on line 50		•	83	1,671

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

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

2019

Name of estate or trust Employer identification number YALE UNIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST 06-6414276 Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ✓ No If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss 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 (g) 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 (sales price) (or other basis) Form(s) 8949, Part I, combine the result with whole dollars. line 2, column (a) column (o) 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 0 1b Totals for all transactions reported on Form(s) 8949 with Box A checked 0 2 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 7,508 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 5 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2018 Capital Loss 6 Carryover Worksheet 6 0) 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 7 7,508 Long-Term Capital Gains and Losses – Generally Assets Held More Than One Year (see instructions) (g) Adjustments (h) Gain or (loss) See instructions for how to figure the amounts to enter on the Subtract column (e) (d) 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 (sales price) (or other basis) Form(s) 8949, Part II combine the result with whole dollars line 2, column (g) 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 9 Totals for all transactions reported on Form(s) 8949 with Box E checked 0 10 Totals for all transactions reported on Form(s) 8949 with Box F checked 0 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 11 11 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 12 761.381 12 13 13 Capital gain distributions 14 Gain from Form 4797, Part I 14 15 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2018 Capital Loss Carryover Worksheet 15 0) Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h) Enter here and on 16 line 18a, column (3) on the back 16 761,381

Part	Summary of Parts I and II Caution: Read the instructions before completing this part		(1) Beneficiaries' (see instr.)	(2) Estate's or trust's	(3) Total
17	Net short-term gain or (loss)	17		7,508	7,508
18	Net long-term gain or (loss):				
a	Total for year	18a		761,381	761,381
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	768,889	768,889

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 l	V Capital Loss Limitation			
	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	ſ	0 '

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 23 (or Form 990-T, line 39), 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 23, 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
- 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 39, 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 23 (or Form 990-T	. line 39)	21	0	•	Γ.
22	Enter the smaller of line 18a or 19 in column (2) but not				**	
	less than zero 22	761,381		\cap	,	
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		.:			:
24	Add lines 22 and 23	761,381	1." "			
25	If the estate or trust is filing Form 4952, enter the		ا. 'ا		<i>;</i>	
	amount from line 4g, otherwise, enter -0-		-		ı	
26	Subtract line 25 from line 24 If zero or less, enter -0-	·	26	761,381		
27	Subtract line 26 from line 21 If zero or less, enter -0-		27	0	1	
28	Enter the smaller of the amount on line 21 or \$2,650		28	0	1	
29	Enter the smaller of the amount on line 27 or line 28		29	0		
30	Subtract line 29 from line 28 If zero or less, enter -0- This am	nount is taxed at 0%	6	>	30	0
31	Enter the smaller of line 21 or line 26 .		31	0	٦.	
32	Subtract line 30 from line 26		32	761,381	' '	•
33	Enter the smaller of line 21 or \$12,950		33	0		
34	Add lines 27 and 30 .		34	0	``	
35	Subtract line 34 from line 33 If zero or less, enter -0-		35	0]	
36	Enter the smaller of line 32 or line 35		36	0		
37	Multiply line 36 by 15% (0 15) .			>	37	0
38	Enter the amount from line 31		38	0		,
39	Add lines 30 and 36		39	0		
40	Subtract line 39 from line 38 If zero or less, enter -0-		40	0		
41	Multiply line 40 by 20% (0 20)	•		>	41	0
42	Figure the tax on the amount on line 27 Use the 2019 Tax Rate So				, ,	
	and Trusts (see the Schedule G instructions in the instructions for	Form 1041)	42	0	• •	
43	Add lines 37, 41, and 42 .		43	0		
44	Figure the tax on the amount on line 21 Use the 2019 Tax Rate Sc				,	
	and Trusts (see the Schedule G instructions in the instructions for	Form 1041) .	44	0		
45	Tax on all taxable income. Enter the smaller of line 43 or line	ne 44 here and on	Form	1041, Schedule		
	G, Part I, line 1a (or Form 990-T, line 41)			. ▶	45	0

Form 990T Part I, Line 5

Income (loss) from Partnership and S Corporations

Name of Partnership	EIN	UBI
(1) INCOME (LOSS) FROM INVESTMENT PARTNERSHIPS		-218,342
	Tota	-218,342

Form 990T Part II, Line 19	Taxes and Licenses	
	Description	Amount
1) STATE TAX		8,631

Form 990T Part II, Line 27	Other Deductions	
	Description	Amount
1) PROFESSIONAL FEES		79.893

Form 990T Part III, Line 34 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
2014	2,461			2,461	0	
2015	1,414			1,414	0	
2016	1,626			1,626	0	
2017	2,226			2,226	•	
2018	3,327			3,327	0	
2019	3,218			3,218	0	
Totals	14,272	0	0	14,272	0	

Form 990T Part III, Line 36 Deduction for net operating loss arising in tax years beginning before January 1, 2018

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	NOL Expires
2008	875,061		142,344	€ 376,117	356,600	
2009	706,686				706,686	
2011	845,980				~ 845,980	
2012	949,584				949,584	
2014		2,461			2,461	<u> </u>
2015	528,302	1,414			529,716	
2016	26,396	1,626			28,022	
2017		2,226			2,226	
2018	148,419	3,327			151,746	
2019		3,218			3,218	
Totals	4,080,428	14,272	142,344	376,117	3,576,239	

Form 990T Part IV, Line 43 Alternative Minimum Tax
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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	347,220	124,876	
2009	581,619				581,619	
2011	770,643				770,643	
2012	780,316				780,316	
2014		2,461			2,461	
2015	416,911	1,414			418,325	
2016	9,592	1,626			11,218	
2017		2,226			2,226	
2018	76,260	3,327			79,587	
2019		3,218			3,218	
Totals	3,393,790	14,272	286,353	347,220	2,774,489	

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 Attachment Sequence No 22

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

YALE UNIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST

Identifying number 06-6414276

Part			
	(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	1,915
, 2	Passive activity credits from line 2 of all Parts III with box B checked 2		,
3	Enter the applicable passive activity credits allowed for 2019 See instructions	3	
4	Carryforward of general business credit to 2019 Enter the amount from line 2 of Part III with box C checked See instructions for statement to attach	4	24.817
5	Carryback of general business credit from 2020 Enter the amount from line 2 of Part III with box D		
	checked See instructions .	5	0
6	Add lines 1, 3, 4, and 5	6	26,732
Part	II Allowable Credit	•	
7	Regular tax before credits		
	• Individuals Enter the sum of the amounts from Form 1040 or 1040-SR, line 12a, and Schedule 2 (Form 1040 or 1040-SR), line 2, or the sum of the amounts from Form 1040-NR, 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	4. 4	
8	Alternative minimum tax		
	Individuals Enter the amount from Form 6251, line 11	:	0
	• Corporations Enter -0-	8	····
	• Estates and trusts Enter the amount from Schedule I (Form 1041), line 54		
9	Add lines 7 and 8	9	. 0
10a	Foreign tax credit 10a		
b	Certain allowable credits (see instructions)	╣	
C	Add lines 10a and 10b	10c	0
·	And third for and for .	1.00	
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-	ļ.	
13	Enter 25% (0 25) of the excess, if any, of line 12 over \$25,000. See		
13	instructions .	1.	
14	Tentative minimum tax	'' '	
1-4	Individuals Enter the amount from Form 6251, line 9		
	• Corporations Enter -0	1	
	• Estates and trusts Enter the amount from Schedule I (Form 1041),	┨ [*] ┃	
	line 52		
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 smaller of line 6 or line 16	17	
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or reorganization.		
For Pa	perwork Reduction Act Notice, see separate instructions. Cat No 12392F		Form 3800 (2019)

Page	2

Part			
Note:	If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter -	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		
24	Enter the applicable passive activity credit allowed for 2019. 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	747
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 2019 See instructions .	33	
34	Carryforward of business credit to 2019 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	883
35	Carryback of business credit from 2020 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	1,630
37	Enter the smaller 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 or 1040-SR), line 6, or Form 1040-NR, line 51 • Corporations Form 1120, Schedule J, Part I, line 5c • Estates and trusts Form 1041, Schedule G, line 2b	38	- 0
		·	Form 3800 (2010

Form 3800 (2019) Page 3 Identifying number Name(s) shown on return YALE UNIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST 06-6414276 Part III General Business Credits or Eligible Small Business Credits (see instructions) Complete a separate Part III for each box checked below See instructions A General Business Credit From a Non-Passive Activity **B** General Business Credit From a Passive Activity **F** □ Reserved **C** ☐ General Business Credit Carryforwards H Reserved D ☐ General Business Credit Carrybacks If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked Check here if this is the consolidated Part III ▶ 🗸 (c) (a) Description of credit Enter the If claiming the credit Note: On any line where the credit is from more than one source, a separate Part III is needed for each appropriate from a pass-through entity, enter the EIN amount pass-through entity 0 Investment (Form 3468, Part II only) (attach Form 3468) 1a 1a Reserved 1b b 1.915 Increasing research activities (Form 6765) 1c С 0 1d d Low-income housing (Form 8586, Part I only) 0 Disabled access (Form 8826) (see instructions for limitation) 1e Renewable electricity, refined coal, and Indian coal production (Form 8835) 1f 0 0 Indian employment (Form 8845) 1g 0 1h h Orphan drug (Form 8820) 0 New markets (Form 8874) 1i Small employer pension plan startup costs (Form 8881) (see instructions for limitation) 0 1j Employer-provided child care facilities and services (Form 8882) (see instructions 0 1k for limitation) 0 11 ı Biodiesel and renewable diesel fuels (attach Form 8864) 1m 0 m Low sulfur diesel fuel production (Form 8896) 1n 0 Distilled spirits (Form 8906) n 0 Nonconventional source fuel (carryforward only) 10 o 0 Energy efficient home (Form 8908) р 1p 0 Energy efficient appliance (carryforward only) 1q q 1r 0 Alternative motor vehicle (Form 8910) r 0 Alternative fuel vehicle refueling property (Form 8911) 1s s 0 t Enhanced oil recovery credit (Form 8830) 1t 0 Mine rescue team training (Form 8923) 1u u 1v 0 Agricultural chemicals security (carryforward only) 0 Employer differential wage payments (Form 8932) 1w w 0 Carbon oxide sequestration (Form 8933) 1x x 0 Qualified plug-in electric drive motor vehicle (Form 8936) 1y У 0 Qualified plug-in electric vehicle (carryforward only) 1z z 0 aa Employee retention (Form 5884-A) 1aa 0 General credits from an electing large partnership (carryforward only) 1bb bb Other Oil and gas production from marginal wells (Form 8904) and certain other ZZ 0 credits (see instructions) 1zz 1,915 2 2 Add lines 1a through 1zz and enter here and on the applicable line of Part I 3 Enter the amount from Form 8844 here and on the applicable line of Part II 3 0 4a Investment (Form 3468, Part III) (attach Form 3468) 4a 0 4b 0 'n Work opportunity (Form 5884) 0 C Biofuel producer (Form 6478) 4c 4d 0 d Low-income housing (Form 8586, Part II) Renewable electricity, refined coal, and Indian coal production (Form 8835) 4e 0 e 4f 747 f Employer social security and Medicare taxes paid on certain employee tips (Form 8846) 0 g Qualified railroad track maintenance (Form 8900) 4g 0 h Small employer health insurance premiums (Form 8941) 4h 4i 0 Increasing research activities (Form 6765) 0 4j Employer credit for paid family and medical leave (Form 8994) . . . z Other 4z 0 747 5 Add lines 4a through 4z and enter here and on the applicable line of Part II 5

2.662

Add lines 2, 3, and 5 and enter here and on the applicable line of Part II

24.817

Add lines 4a through 4z and enter here and on the applicable line of Part II

Add lines 2, 3, and 5 and enter here and on the applicable line of Part II

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For	m 380	0 (2019)				Page 3
Nar	ne(s) s	hown on return		10	dentifying nur	nber
ΥA	LE U	NIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST			06-	6414276
Pá	art li	General Business Credits or Eligible Small Business Credits (see inst	ructio	ons)		
Co	mple	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				
		General Business Credit Carryforwards G	ess C	redit C	arryforward	s
		General Business Credit Carrybacks H 🔲 Reserved			•	
		u are filing more than one Part III with box A or B checked, complete and attach first an a	additio	nal Pari	t III combinii	ng amounts from
•		arts III with box A or B checked Check here if this is the consolidated Part III .				▶ □
_		(a) Description of credit		<u> </u>	(b)	_ (c)
		n any line where the credit is from more than one source, a separate Part III is needed for each ough entity		Ifrom a c	ng the credit bass-through enter the EIN	Enter the appropriate amount
	1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a	jonny, o		<u> </u>
	b	Reserved	1b	 		
	C	Increasing research activities (Form 6765)	1c			
	d	Low-income housing (Form 8586, Part I only)	1d			
	e	Disabled access (Form 8826) (see instructions for limitation)	1e	 		
	f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f			
		Indian employment (Form 8845)	1g			
	g	Orphan drug (Form 8820)	1h		•	
	h :	New markets (Form 8874)	11	-		
	:	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1)			
	ì		-ر-			
	k	Employer-provided child care facilities and services (Form 8882) (see instructions	412			
		for limitation)	1k 1l	 		
	<u>.</u>	Biodiesel and renewable diesel fuels (attach Form 8864)				
	m	Low sulfur diesel fuel production (Form 8896) .	1m			
	n	Distilled spirits (Form 8906)	1n			
	0	Nonconventional source fuel (carryforward only) .	10			
	P	Energy efficient home (Form 8908)	1p			
	q	Energy efficient appliance (carryforward only)	1q			
	r	Alternative motor vehicle (Form 8910) .	1r			
	s	Alternative fuel vehicle refueling property (Form 8911)	1s			
	t	Enhanced oil recovery credit (Form 8830)	1t			
	u	Mine rescue team training (Form 8923)	1u			
	V	Agricultural chemicals security (carryforward only)	10			
	w	Employer differential wage payments (Form 8932)	1w			
	X	Carbon oxide sequestration (Form 8933)	1x			
	У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y	<u> </u>		
	Z	Qualified plug-in electric vehicle (carryforward only)	1z			
	aa	Employee retention (Form 5884-A)	1aa			
	bb	General credits from an electing large partnership (carryforward only)	1bb			
	ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1zz			<u> </u>
2	2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2			0
3	3	Enter the amount from Form 8844 here and on the applicable line of Part II	3			
4	1a	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			747
	g	Qualified railroad track maintenance (Form 8900)	4g			
	h	Small employer health insurance premiums (Form 8941)	4h			
	i	Increasing research activities (Form 6765)	4i	1	1	
	i	Employer credit for paid family and medical leave (Form 8994)	4j			
	, Z	Other	4z			
٤	5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5			747
	3	Add lines 2.3 and 5 and enter here and on the applicable line of Part II	6			747

	1 3800 (2019)		Identifung pur	Page 3
	e(s) shown on return		Identifying nur	
	LE UNIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST	tructio		5414276
	rt III General Business Credits or Eligible Small Business Credits (see ins	tructic	ons)	
Cor	mplete a separate Part III for each box checked below See instructions			
A	General Business Credit From a Non-Passive Activity E Reserved			
	General Business Credit From a Passive Activity F Reserved			_
	✓ General Business Credit Carryforwards G ☐ Eligible Small Business	ness C	redit Carrytorward	S
	☐ General Business Credit Carrybacks H☐ Reserved			
	If you are filing more than one Part III with box A or B checked, complete and attach first an all Parts III with box A or B checked. Check here if this is the consolidated Part III	additio	nal Part III combinii	ng amounts from ►
	(a) Description of credit		(b)	(c)
	e: On any line where the credit is from more than one source, a separate Part III is needed for each s-through entity		If claiming the credit from a pass-through entity, enter the EIN	Enter the appropriate amount
1	a Investment (Form 3468, Part II only) (attach Form 3468)	1a		
	b Reserved	1b		
	c Increasing research activities (Form 6765) .	1c		
	d Low-income housing (Form 8586, Part I only)	1d		
	e Disabled access (Form 8826) (see instructions for limitation)	1e		
	f Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
	g Indian employment (Form 8845) .	1g	·	
	h Orphan drug (Form 8820) .	1h		
	i New markets (Form 8874)	1i		
	j Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j		<u> </u>
	k Employer-provided child care facilities and services (Form 8882) (see instructions			
	for limitation)	1k		
	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
	m Low sulfur diesel fuel production (Form 8896)	1m		
	n Distilled spirits (Form 8906)	1n		
	Nonconventional source fuel (carryforward only)	10		
	p Energy efficient home (Form 8908) .	1p		
	Energy efficient appliance (carryforward only)	1q		
	r Alternative motor vehicle (Form 8910) .	1r		
	s Alternative fuel vehicle refueling property (Form 8911)	1s		
	t Enhanced oil recovery credit (Form 8830) .	1t		
	Mine rescue team training (Form 8923)	1u		
	Agricultural chemicals security (carryforward only)	10		
	w Employer differential wage payments (Form 8932)	1w		
	x Carbon oxide sequestration (Form 8933)	1x		
	y Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
	Qualified plug-in electric vehicle (carryforward only)	1z		
	aa Employee retention (Form 5884-A)	1aa		
	bb General credits from an electing large partnership (carryforward only)	1bb		
	zz Other. Oil and gas production from marginal wells (Form 8904) and certain other	1		
	credits (see instructions)	1zz		
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		0
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4	a Investment (Form 3468, Part III) (attach Form 3468)	4a		
ı	b Work opportunity (Form 5884)	4b		
,	c Biofuel producer (Form 6478)	4c		
	d Low-income housing (Form 8586, Part II)	4d		
(e Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
1	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f		883
(g Qualified railroad track maintenance (Form 8900)	4g		
	h Small employer health insurance premiums (Form 8941)	4h		
į	i Increasing research activities (Form 6765)	4i		
ì	Employer credit for paid family and medical leave (Form 8994).	41		
:	z Other	4z		
5		5		883
6	and the second of the second o	6		883

Form **8801**

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

Department of the Treasury
Internal Revenue Service (99)

So to www.irs.gov/Form8801 for instructions and the latest information.

Attach to Form 1040, 1040-SR, 1040-NR, or 1041.

OMB No 1545-1073

2019

Attachment Sequence No **74**

Identifying number Name(s) shown on return YALE UNIVERSITY RETIREE HEALTH BENEFITS COVERAGE TRUST **Net Minimum Tax on Exclusion Items** Part I 1 Combine lines 1 and 2e of your 2018 Form 6251. Estates and trusts, see instructions 1 2 Enter adjustments and preferences treated as exclusion items (see instructions) 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 than \$718,800 and you were married filing separately for 2018, see instructions 4 Enter: \$109,400 if married filing jointly or qualifying widow(er) for 2018; \$70,300 if single or head of 5 household for 2018; or \$54,700 if married filing separately for 2018 Estates and trusts, enter \$24,600 24,600 Enter: \$1,000,000 if married filing jointly or qualifying widow(er) for 2018, \$500,000 if single, head of 6 household, or married filing separately for 2018 Estates and trusts, enter \$81,900 . 81,900 Subtract line 6 from line 4. If zero or less, enter -0- here and on line 8 and go to line 9 7 7 0 8 8 Multiply line 7 by 25% (0 25) 9 Subtract line 8 from line 5. If zero or less, enter -0-. If under age 24 at the end of 2018, see instructions 0 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 1040-NR filers, see instructions 0 • If for 2018 you filed Form 2555 or 2555-EZ, see instructions for the amount to enter 11 • If for 2018 you reported capital gain distributions directly on Schedule 1 (Form 1040), line 13; you reported qualified dividends on Form 1040, line 3a (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 1040-NR filers, see instructions 11 • All others: If line 10 is \$191,100 or less (\$95,550 or less if married filing separately for .. : 2018), multiply line 10 by 26% (0 26) Otherwise, multiply line 10 by 28% (0 28) and subtract \$3,822 (\$1,911 if married filing separately for 2018) from the result. Form 1040-NR filers, see instructions 12 Minimum tax foreign tax credit on exclusion items (see instructions) 12 13 Tentative minimum tax on exclusion items. Subtract line 12 from line 11 13 14 Enter the amount from your 2018 Form 6251, line 10, or 2018 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-

15

Part	II Minimum Tax Credit and Carryforward to 2020		
16	Enter the amount from your 2018 Form 6251, line 11, or 2018 Form 1041, Schedule I, line 56	16	, 0
17	Enter the amount from line 15	17	0
18	Subtract line 17 from line 16 If less than zero, enter as a negative amount	18	0
19	2018 credit carryforward. Enter the amount from your 2018 Form 8801, line 26	19	6,451
20	Enter your 2018 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 2019 regular income tax liability minus allowable credits (see instructions)	22	0
23	Enter the amount from your 2019 Form 6251, line 9, or 2019 Form 1041, Schedule I, line 52	23	1,671
24	Subtract line 23 from line 22. If zero or less, enter -0-	24	0
25	Minimum tax credit. Enter the smaller of line 21 or line 24. Also enter this amount on your 2019		
	Schedule 3 (Form 1040 or 1040-SR), line 6 (check box b), Form 1040-NR, line 51 (check box b), or Form 1041, Schedule G, line 2c	25	0
26	Credit carryforward to 2020. Subtract line 25 from line 21 Keep a record of this amount because	00	
	you may use it in future years	26	6 451

Form **8801** (2019)

Part	Tax Computation Using Maximum Capital Gains Rates Complete Part III only if you are required to do so by line 11 or by the Foreign Earned Income Tax Work	choot u	n the instructions
		3116611	Title instructions
	Caution: If you didn't complete the 2018 Qualified Dividends and Capital Gain Tax Worksheet, the 2018 Schedule D Tax Worksheet, or Part V of the 2018 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 2018, enter the amount from line 3 of the Foreign Earned Income Tax Worksheet in the instructions	27	0
	Caution: If for 2018 you filed Form 1040-NR, 1041, 2555, or 2555-EZ, see the instructions before completing lines 28, 29, and 30.		
28	Enter the amount from line 6 of your 2018 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 13 of your 2018 Schedule D Tax Worksheet, or the amount from line 26 of the 2018 Schedule D (Form 1041), whichever applies*	28	42,939
	If you figured your 2018 tax using the 2018 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 2018 Schedule D (Form 1040), or line 18b, column (2), of the 2018 Schedule D (Form 1041)	29	0
30	Add lines 28 and 29, and enter the smaller of that result or the amount from line 10 of your 2018 Schedule D Tax Worksheet	30	42,939
31	Enter the smaller of line 27 or line 30	31	0
32	Subtract line 31 from line 27	32	0
33	If line 32 is \$191,100 or less (\$95,550 or less if married filing separately for 2018), multiply line 32 by 26% (0 26) Otherwise, multiply line 32 by 28% (0 28) and subtract \$3,822 (\$1,911 if married filing separately for 2018 from the result. Form 1040-NR filers, see instructions	33	
34	Enter [.]	-	
	• \$77,200 if married filing jointly or qualifying widow(er) for 2018,		
	• \$38,600 if single or married filing separately for 2018,		
	• \$51,700 if head of household for 2018, or	34	2,600
	• \$2,600 for an estate or trust.		
	Form 1040-NR filers, see instructions		
35	Enter the amount from line 7 of your 2018 Qualified Dividends and Capital Gain Tax Worksheet, the amount from line 14 of your 2018 Schedule D Tax Worksheet, or the amount from line 27 of the 2018 Schedule D (Form 1041), whichever applies If you didn't complete either worksheet or Part V of the 2018	,	
	Schedule D (Form 1041), enter the amount from your 2018 Form 1040, line 10, or 2018 Form 1041, line 22, whichever applies, if zero or less, enter -0- Form 1040-NR filers, see instructions	35	
36	Subtract line 35 from line 34. If zero or less, enter -0-	36	2,600
37	Enter the smaller of line 27 or line 28	37	2,000
38	Enter the smaller of line 36 or line 37	38	0
39	Subtract line 38 from line 37	39	0
40	Enter:		
	• \$425,800 if single for 2018,		
	• \$239,500 if married filing separately for 2018,	-	
	• \$479,000 if married filing jointly or qualifying widow(er) for 2018,	40	12,700
	 \$452,400 if head of household for 2018, or \$12,700 for an estate or trust 	<u> </u>	
	Form 1040-NR filers, see instructions] [
41	Enter the amount from line 36	41	2,600
42	Form 1040 filers, enter the amount from line 7 of your 2018 Qualified Dividends and Capital Gain Tax	-	
-	Worksheet or the amount from line 19 of your 2018 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		
	2018 Schedule D (Form 1041) or line 18 of your 2018 Schedule D Tax Worksheet, whichever applies If you		
	didn't complete either the worksheet or Part V of the 2018 Schedule D (Form 1041), enter the amount from your 2018 Form 1041, line 22; if zero or less, enter -0- Form 1040-NR filers, see instructions	42	0
	your 2010 Form 1041, line 22, it 2010 or 1033, critici 0 1 01111 1040-1411 line13, 300 instructions		U

^{*} The 2018 Qualified Dividends and Capital Gain Tax Worksheet is in the 2018 Instructions for Form 1040. The 2018 Schedule D Tax Worksheet is in the 2018 Instructions for Schedule D (Form 1040) (or the 2018 Instructions for Schedule D (Form 1041))

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Part	III Tax Computation Using Maximum Capital Gains Rates (continued)		
43	Add lines 41 and 42	43	2,600
44	Subtract line 43 from line 40. If zero or less, enter -0-	44	10,100
45	Enter the smaller 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 \$191,100 or less (\$95,550 or less if married filing separately for 2018), multiply line 27 by 26% (0.26). Otherwise, multiply line 27 by 28% (0.28) and subtract \$3,822 (\$1,911 if married filing separately for 2018) from the result. Form 1040-NR filers, see instructions	54	
55	Enter the smaller of line 53 or line 54 here and on line 11. If you filed Form 2555 or 2555-EZ for 2018, 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	
		<u> </u>	Form 8801 (2019)