EXTENDED TO NOV.  EXTENDED TO NOV.  (and proxy tax und	sine	ss Income T	ax Returr	<b>,</b>	OMB No 1545-0687					
For calendar year 2017 or other tax year beginning		, and ending		— İ	2017					
Department of the Treasury Internal Revenue Service  Department of the Treasury Internal Revenue Service  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 Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Solic(x) Organization Only A Check box if Name of organization ( Check box if name changed and see instructions.)  Descriptory dentification number (Employees' trust, see										
<del></del>	ALEXANDER FOUNDATION INC									
	O RUANE CUNNIFF & GOLDFARB, INC									
X 501(c)(3 ) or Number, street, and room or suite no. If a P.O. bo	umber, street, and room or suite no. If a P.O. box, see instructions.									
408(e) 220(e) Type 9 WEST 57TH STREET, SUITE 5000										
,,, _ , , , , , , , , , , , , , ,	408A 530(a) City or town, state or province, country, and ZIP or foreign postal code									
529(a) NEW YORK, NY 10019-27	01			900	000					
G Book value of all assets at end of year P G C 1 2 4	<u> </u>	501/a) Aa	401/2	\ 4=a4	Other trust					
75,860,124. G Check organization type ► X 501(c) cor  H Describe the organization's primary unrelated business activity. ► INVESTM				) trust ਆਸਲ	Other trust					
During the tax year, was the corporation a subsidiary in an affiliated group or a pare			JOGH ENTI	Ye						
If "Yes," enter the name and identifying number of the parent corporation.	111-2002	diary controlled group.			3 <u>21</u> NU					
J The books are in care of ► GREGORY ALEXANDER		Teleph	one number 🕨 2	12-	832-5280					
Part I Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net					
1a Gross receipts or sales										
b Less returns and allowances c B	1c									
2 Cost of goods sold (Schedule A, line 7)	2									
3 Gross profit. Subtract line 2 from line 1c	3			_						
4a Capital gain net income (attach Schedule D)	48									
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b 4c									
c Capital loss deduction for trusts 5 Income (loss) from partnerships and S corporations (attach statement)	5	86,335.			86,335.					
6 Rent income (Schedule C)	6	00,3331			00/0001					
7 Unrelated debt-financed income (Schedule E)	7									
8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)	8									
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9									
10 Exploited exempt activity income (Schedule I)	10									
11 Advertising income (Schedule J)	11									
12 Other income (See instructions; attach schedule)		86,335.								
13 Total. Combine lines 3 through 12 13 86, 335.  Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions)										
(Except for contributions, deductions must be directly connected			income)							
14 Compensation of officers, directors, and trustees (Schedule K)				14						
15 Salaries and wages				15						
46 Burnardan da sana	-			16						
17 Bad debts / RE	C.			17						
18 Interest (attach schedule)	YE	VED		18	05.000					
16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) 19 Taxes and licenses 20 Charitable contributions (See instructions for limitation rules) 21 Depreciation (attach Form 4562) 22 Less depreciation claimed on Schedule A and elsewhere on leturn OGDI 23 Depletion	Δ`·			19	26,293.					
Charitable contributions (See instructions for limitation rules)	20	2010 181		20						
<ul> <li>Depreciation (attach Form 4562)</li> <li>Less depreciation claimed on Schedule A and elsewhere on return OGDs</li> </ul>	_	S 22a	"	22b						
<ul><li>Less depreciation claimed on Schedule A and elsewhere on feturn</li><li>Depletion</li></ul>	EN.	UT E		23						
24 Contributions to deferred compensation plans				24						
25 Employee benefit programs		THE PROPERTY OF THE PROPERTY O		25						
26 Excess exempt expenses (Schedule I)				26						
27 Excess readership costs (Schedule J)	27									
28 Other deductions (attach schedule)				28						
29 Total deductions. Add lines 14 through 28	29	26,293.								
Unrelated business taxable income before net operating loss deduction. Subtract	t line 29	9 from line 13		30	60,042.					
Net operating loss deduction (limited to the amount on line 30)	om !:=:	20		31	60,042.					
Unrelated business taxable income before specific deduction. Subtract line 31 fr		3U		32	1,000.					
<ul> <li>Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions</li> <li>Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is</li> </ul>		than line 32 enter the em	naller of zero or	33	1,000.					
line 32	yı calcı	and i mic 32, critic the SH	101101 01 2610 01	34	59,042.					
723701 01-22-18 LHA For Paperwork Reduction Act Notice, see instructions.		·			Form <b>990-T</b> (2017)					

art	Statements Regarding Certain Activities and Other Information (see instructions)		
51	At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority	Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file		İ
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country		
	here >		X
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		X
	If YES, see instructions for other forms the organization may have to file.		
53	Enter the amount of tax/exempt interest received or accrued during the tax year	i l	İ

nave examined this return including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, Sign May the IRS discuss this return with 2018 Here OFFICER the preparer shown below (see enstructions)? X Yes Signature of of Print/Type preparel's name Preparer's signature Date Check self- employed Paid P01589203 TAMNENBAUM ISRAEL **Preparer** 13-1459550 MAZARS USA LLP Firm's EIN ▶

135 WEST 50TH STREET

Firm's address ► NEW YORK, NY 10020-0002

Form 990-T (2017)

(212) 812-7000

**Use Only** 

Phone no.

Firm's name

# ALEXANDER FOUNDATION INC Form 990-T (2017) C/O RUANE CUNNIFF & GOLDFARB, INC 20-3985244 Page 3

Schedule A - Cost of Goods	s Sold. Enter	method of invent	tory va	lluation ► N/A	_	·			
1 Inventory at beginning of year	1		_	Inventory at end of yea	r		6		
2 Purchases	2		7 Cost of goods sold. Subtract line 6						
3 Cost of labor	3		from line 5. Enter here and in Part I,					_	
4a Additional section 263A costs			1	line 2			7		
(attach schedule)	4a		8	Do the rules of section	with respect to		Yes	No	
b Other costs (attach schedule)	4b		property produced or acquired for resale) apply to						
5 Total. Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income ( (see instructions)	(From Real	Property and	Pers	ional Property L	ease	d With Real Prop	erty	') 	
1. Description of property									
(1)	·	<del></del>				10 10			
(2)									
(3)			•						
(4)		· -							
	2. Rent receiv	ed or accrued							
(a) From personal property (if the per- rent for personal property is more 10% but not more than 50%)	centage of than	of rent for p	ersonal	nal property (if the percentagoroperty exceeds 50% or if d on profit or income)	дө	3(a) Deductions directly columns 2(a) a	y conne nd 2(b)	cted with the income in (attach schedule)	1
(1)	-								
(2)	-								
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		iter -			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<b>•</b>		0.
Schedule E - Unrelated Deb	t-Financed	Income (see	ınstruc	ctions)					
				. Gross income from		3. Deductions directly con to debt-finance			
1. Description of debt-fir	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	s
(1)									
(2)							$\neg$		
(3)									
(4)					_		$\top$		
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a	edjusted basis allocable to nced property h schedule)	6.	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deducti (column 6 x total of col 3(a) and 3(b))	
(1)				%					
(2)				%					
(3)				%					
(4)				%			1.		
						nter here and on page 1, Part I, line 7, column (A)		Enter here and on page Part I, line 7, column (	
Totals				<b>▶</b>		0			0.
Total dividends-received deductions in	ncluded in columi	18					•		0.
	_							Form <b>990-T</b>	(2017)

Form 990-T (2017) C/O RUANE CUNNIFF & GOLDFARB, INC

		•		Exempt C	ontrolled O	rganızatı	ons					
Name of controlled organiza	tion	2. Emplication	tion		lated income nstructions)	4. Tot payr	tal of specified ments made	5. Part of column 4 that is included in the controlling organization's gross income		iling	6. Deductions directly connected with income in column 5	
(1)			1 1									
(2)												
(3)												
(4)												
Nonexempt Controlled Organ	zations	,										
7. Taxable Income		nrelated income ee instructions)	(loss)	9. Total o	f specified payr made	nents	10. Part of colur in the controlli gross	nn 9 that i ng organiz i income	s included ation's		uctions directly connected ncome in column 10	
(1)												
(2)			Ī									
(3)			Ī				+					
(4)		•	Î	·								
					•		Add colum Enter here and line 8, c		, Part I,	Enter he	columns 6 and 11 re and on page 1, Part I, ne 8, column (B)	
Totals					(0)	<u> </u>			0.[		0.	
Schedule G - Investme	ent Incon ructions)	ne of a Se	ection (	501(c)(7)	, (9), or (	17) Org	ganization				,	
	cription of incoi	ne			2. Amount of	ıncome	3. Deduction directly conne (attach sched	cted	4. Set-as		5. Total deductions and set-asides (col 3 plus col 4)	
(1)			·				,	-		-	(00: 0 piles cor 1)	
(2)	_		,									
(3)				Ì								
(4)				Î	,							
Totals	,			<b>•</b>	Enter hero and o Part I, line 9, co	0 •	. 121 151 XX X X X X	Manual dispon	an de propaga en la como de la co		Entor hore and on page 1, Part I, line 9, column (B)	
Schedule I - Exploited (see instri		Activity I	ncome	, Other	Than Adv	ertisin	ig Income				•	
Description of exploited activity	2. G unrelated income trade or t	business e from	3. Explored directly consults produced with produced of urreleases	nnected duction lated	4. Net incomfrom unrelated business (cominus columi gain, compute through	trade or lumn 2 n 3) If a cols 5	5. Gross inco from activity to is not unrelate business inco	hat ed	6. Experator de la columna de	ole to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)	1						•• ••				,	
(2)												
(3)	Ì											
(4)	<u> </u>			İ					_		. *	
	Enter her page 1 line 10,	Part I, col (A)	Enter here page 1, line 10, c	Parti, col (B)							Part II, line 26	
Totals ► Schedule J - Advertisi	na Incon	0.  ne /see.in	structions	0.]:	FR (5-38/567)	14.00 ASS	A. 3. C. 10. (4)	<u> </u>	1 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	8 12 871	0.	
Rart  Income From					olidated	Basis						
1 Name of payadical		2. Gross advertising		, Direct	4. Advert	of 2 minus	5. Circulat		6. Readers		7. Excess readership costs (column 6 minus	
1. Name of periodical		income	adver	tising costs	col 3) If a ga cols 5 th		e income		costs		column 5, but not more than column 4)	
(1)										3.		
(2)												
(3)		-			7				•			
(4)									,	į,		
Totals (carry to Part II, line (5))	<u> </u>	0	<u>.  </u>	0.	<u>J</u>				<del></del>		0. 5 000 T cost	
		7					,	•			Form <b>990-T</b> (2017	

Form 990-T (2017) C/O RUANE CUNNIFF & GOLDFARB, INC 20-39852

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1. Name of periodical		2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation 6.	Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)							
(2)							
(3)							<u>-</u>
(4)			,				
Totals from Part I	•	0.	0.	1 1	11. 11.	335	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.		song/income		0.
Schedule K - Compen	satior	of Officers, I	Directors, and	Trustees (see in	structions)		
1.	Name			2. Title	3. Percent of time devoted to business		ensation attributable elated business

Form 990-T (2017)

0.

723732 01-22-18

(2) (3) (4)

Total. Enter here and on page 1, Part II, line 14

## **Alternative Minimum Tax - Corporations**

► Attach to the corporation's tax return.

▶ Go to www.irs.gov/Form4626 for instructions and the latest information.

OMB No 1545-0123

Na	me	ALEXANDER FOUNDATION INC			Employer identification number
		C/O RUANE CUNNIFF & GOLDFARB, INC			20-3985244
	•	Note: See the instructions to find out if the corporation is a small corporation exempt			•
		from the alternative minimum tax (AMT) under section 55(e).	•		•
1		Taxable income or (loss) before net operating loss deduction		1	59,042.
2		Adjustments and preferences:			
	a	Depreciation of post-1986 property		2a	
	b	Amortization of certified pollution control facilities		2b	
	C	Amortization of mining exploration and development costs	•	2c	
	d	Amortization of circulation expenditures (personal holding companies only)		2d	
	е	Adjusted gain or loss		2e	
•	f	Long-term contracts		2f	
	g	Merchant marine capital construction funds		2g	
	_	Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)		2h	
	i	Tax shelter farm activities (personal service corporations only)		2i	_
	i	Passive activities (closely held corporations and personal service corporations only)		2j	
	k	Loss limitations		2k	
	ı	Depletion		21	
	m	Tax-exempt interest income from specified private activity bonds		2m	
	n.	Intangible drilling costs		2n	
	0	Other adjustments and preferences		20	
3		Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20		3	59,042.
4		Adjusted current earnings (ACE) adjustment:			
	a	ACE from line 10 of the ACE worksheet in the instructions	4a 59,042.		
	b	Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a			
		negative amount. See instructions	4b 0.		
	C	Multiply line 4b by 75% (0.75). Enter the result as a positive amount	4c		
	d	Enter the excess, if any, of the corporation's total increases in AMTI from prior			
		year ACE adjustments over its total reductions in AMTI from prior year ACE			
		adjustments. See instructions. Note: You must enter an amount on line 4d			
		(even if line 4b is positive)	4d		
	е	ACE adjustment.			
		<ul> <li>If line 4b is zero or more, enter the amount from line 4c</li> </ul>	٦		
		• If line 4b is less than zero, enter the <b>smaller</b> of line 4c or line 4d as a negative amount	}	4e	0.
5		Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT		5	59,042.
6		Alternative tax net operating loss deduction. See instructions		6	
7		Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a	residual		
		interest in a REMIC, see instructions		. 7	59,042.
8		Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on li	ine 8c):		
	a	Subtract \$150,000 from line 7. If completing this line for a member of a controlled			
		group, see instructions. If zero or less, enter -0-	8a 0.		
	b	Multiply line 8a by 25% (0.25)	8b 0.		
	C	Exemption. Subtract line 8b from \$40,000. If completing this line for a member of a controll	led		
		group, see instructions. If zero or less, enter -0-		8c	40,000.
9		Subtract line 8c from line 7. If zero or less, enter -0-	,	9	19,042.
10		Multiply line 9 by 20% (0.20)		10	3,808.
11		Alternative minimum tax foreign tax credit (AMTFTC). See instructions		11	2 2 2 2
12		Tentative minimum tax. Subtract line 11 from line 10		12	3,808.
13		Regular tax liability before applying all credits except the foreign tax credit		13	9,761.
14		Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0 Enter here			_
_		Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return		14	0.
JW	Δ	For Paperwork Reduction Act Notice, see separate instructions.			Form <b>4626</b> (2017)

### **Adjusted Current Earnings (ACE) Worksheet**

► See ACE Worksheet Instructions. 59,042. 1 Pre-adjustment AMTI. Enter the amount from line 3 of Form 4626 2 ACE depreciation adjustment; a AMT depreciation **b** ACE depreciation: 2b(1) (1) Post-1993 property (2) Post-1989, pre-1994 property 2b(2) (3) Pre-1990 MACRS property 2b(3) (4) Pre-1990 original ACRS property 2b(4) (5) Property described in sections 168(f)(1) through (4) (6) Other property (7) Total ACE depreciation. Add lines 2b(1) through 2b(6) 2b(7) 2c c ACE depreciation adjustment. Subtract line 2b(7) from line 2a 3 Inclusion in ACE of items included in earnings and profits (E&P): a Tax-exempt interest income 3a b Death benefits from life insurance contracts 3Ь c All other distributions from life insurance contracts (including surrenders) 3с d Inside buildup of undistributed income in life insurance contracts 3d e Other items (see Regulations sections 1.56(g)-1(c)(6)(iii) through (ix) for a partial list) f Total increase to ACE from inclusion in ACE of items included in E&P. Add lines 3a through 3e 3f Disallowance of items not deductible from E&P: a Certain dividends received b Dividends paid on certain preferred stock of public utilities that are deductible under section 247 (as 4b affected by P L 113-295, Div A, section 221(a)(41)(A), Dec 19, 2014, 128 Stat 4043) c Dividends paid to an ESOP that are deductible under section 404(k) 4c d Nonpatronage dividends that are paid and deductible under section 1382(c) Δd e Other items (see Regulations sections 1.56(g)-1(d)(3)(i) and (ii) for a 4f f Total increase to ACE because of disallowance of items not deductible from E&P. Add lines 4a through 4e Other adjustments based on rules for figuring E&P. a Intangible drilling costs 5a **b** Circulation expenditures 5b c Organizational expenditures 5c d LIFO inventory adjustments 5d e Installment sales f Total other E&P adjustments. Combine lines 5a through 5e 5f 6 Disallowance of loss on exchange of debt pools Acquisition expenses of life insurance companies for qualified foreign contracts 7 Depletion 8 9 Basis adjustments in determining gain or loss from sale or exchange of pre-1994 property Adjusted current earnings. Combine lines 1, 2c, 3f, 4f, and 5f through 9. Enter the result here and on line 4a of 59,042. Form 4626

FORM 990-T INCOME (LOSS)	FROM PARTNERS	STATEMENT 11		
PARTNERSHIP NAME	GROSS INCOME	DEDUCTIONS	NET INCOME OR (LOSS)	
EAST ROCK FOCUS FUND LP (EIN 20-3523640) ABRAMS CAPITAL PARTNERS II LP (EIN	15,121.	0.	15,121.	
04-3455023 ACACIA PARTNERS LP (EIN 13-3882866)	75,753. -4,539.	0. 0.	75,753. -4,539.	
TOTAL TO FORM 990-T, PAGE 1, LINE 5	86,335.	0.	86,335.	