efile GRAPHIC p	rint - DO NOT PROCESS As Filed Data -	DLN	: 93393299010621
Form 990-T	Exempt Organization Business Income Tax Return	n	OMB No. 1545-0047
Form 990-1	(and proxy tax under section 6033(e))		2020
	For calendar year 2020 or other tax year beginning 01-01-2020 and ending 12-31-2020)	2020
Department of the Treasury	► Go to www.irs.gov/Form990T for instructions and the latest information.		Open to Public
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).	Inspection for 501(c)(3) Organizations Only
A Check box if address changed	Name of organization (Check box if name changed and see instructions.) THE STANLEY H DURWOOD FOUNDATION CO THE GREATER KC COMMUNITY FOUNDATION		nployer identification number 28087
B Exempt under section ✓ 501(c3)	n or Type Number, street, and room or suite no. If a P.O. box, see instructions. 1055 BROADWAY BLVD Suite 130	1	oup exemption number e instructions)
☐ 408(e) ☐ 220(e ☐ 408A ☐ 530(a	City and the comment of the comment	F 🗆	Check box if an
☐ 529(a) ☐ 529A	C Book value of all assets at end of year ▶ 62,969,316		amended return.
G Check organization		icable r	reinsurance entity
H Check if filing only			,
I Check if a 501(c)(3	B) organization filing a consolidated return with a $501(c)(2)$ titleholding corporation		▶ 🗌
J Enter the number	of attached Schedules A (Form 990-T) 🐒		
K During the tax year	r, 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 ▶		
L The books are in c	are of ► KATIE GRAY Telephol 1055 BROADWAY 130	ne num	ber ► (816) 842-0944
	KANSAS CITY, MO 64105		
	Inrelated Business Taxable Income		
1 Total of unrelat instructions) .	ed business taxable income computed from all unrelated trades or businesses (see	1	77,861
2 Reserved .		2	
3 Add lines 1 and	2	3	77,861
4 Charitable cont	ributions (see instructions for limitation rules) 🕏	4	77,861
5 Total unrelated	business taxable income before net operating losses. Subtract line 4 from line 3	5	
	et operating loss. See instructions	6	
7 Total of unrelat Subtract line 6	ed business taxable income before specific deduction and section 199A deduction.	7	
	on (generally \$1,000, but see instructions for exceptions)	8	
	199A deduction. See instructions	9	
	ns. Add lines 8 and 9	10	
	iness taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter		
zero		11	0
Part II Tax Co	mputation		
-	taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	0
2 Trusts taxable Part I, line 11 f	e at trust rates. See instructions for tax computation. Income tax on the amount on rom: \square Tax rate schedule or \square Schedule D (Form 1041) \square · · · · · · · · · · · · ·	2	0
3 Proxy tax. See		3	
4 Other tax amou	nts. See instructions	4	
5 Alternative min	mum tax (trusts only)	5	
	npliant facility income. See instructions	6	
	3 through 6 to line 1 or 2, whichever applies	7	0
For Paperwork Reducti	on Act Notice, see instructions. Cat. No. 11291J		Form 990-T (2020)

orm	990-T (2	020)								F	Page 2
Part		Tax and Payments									
1a	Foreign	tax credit (corporations attach Form 1118	3; trusts attach Fo	rm 1116)	1a						
b	Other c	edits (see instructions)			1 b						
c	General	business credit. Attach Form 3800 (see in	nstructions)		1c						
d	Credit f	or prior year minimum tax (attach Form 8	801 or 8827) .		1 d						
е		redits. Add lines 1a through 1d						1e			
2		line 1e from Part II, line 7	<u>.</u>					2			0
3	Other ta	xes. Check if from:		Form 869	7 L • •	」Form 8866 • • • • •		3			
4	Total ta	x. Add lines 2 and 3 (see instructions). [1294. Enter the tax amount here	Check if include	es tax previ	ously (deferred unde	r 	4			0
5	2020 ne	t 965 tax liability paid from Form 965-A o	r Form 965-B, Pai	t II, colum	n (k),	line 4		5			
6a	Paymen	ts: A 2019 overpayment credited to 2020			6a		2,240				
b	2020 es	timated tax payments. Check if section 64	43(g) election app	lies ▶ 🗌	6b						
C	Tax dep	osited with Form 8868			6 c						
d	Foreign	organizations: Tax paid or withheld at sou	ırce (see instructio	ons) .	6d						
е	Backup	withholding (see instructions)			6e						
f		or small employer health insurance premiu	•	•	6f						
g	_	edits, adjustments, and payments:	orm 2439	 Total ▶	6g						
7	Total p	ayments. Add lines 6a through 6g						7			2,240
8	Estimat	ed tax penalty (see instructions). Check if	Form 2220 is atta	ched			. ▶□	8			
9	Tax du	e. If line 7 is smaller than the total of line	s 4, 5, and 8, ente	er amount o	wed		>	9			
10	Overpa	yment. If line 7 is larger than the total of	lines 4, 5, and 8,	enter amo	unt ov	erpaid	>	10			2,240
11	Enter th	e amount of line 10 you want: Credited t	to 2021 estimate	ed tax▶		2,240 R	efunded▶	11			
Par	t IV	Statements Regarding Certain Ac	tivities and Ot	her Infoi	rmati	on (see inst	ructions)				
1		ime during the 2020 calendar year, did th								Yes	No
	financia Penort	account (bank, securities, or other) in a of Foreign Bank and Financial Accounts. If	foreign country? I "Yes " enter the r	f "Yes," the	organ	ization may h	ave to file Fi	nCEN F	orm 114,		
				iaine or the	ioreig	country men					No
2	During 1	he tax year, did the organization receive	a distribution from	, or was it	the ar	antor of, or tr	ansferor to,	a foreic	ın trust?		No
	_	see instructions for other forms the orga		•		,	,	-			
3	Enter th	e amount of tax-exempt interest received	or accrued during	the tax ye	ear		▶ \$				
4a	Did the	organization change its method of accoun	ting? (see instruct	ions) .							No
4b	If 4a is	'Yes," has the organization described the	change on Form 9	90, 990-EZ	z, 990-	PF, or Form 1	128? If "No,	" expla	n in Part V		
Par	t V	Supplemental Information									
Provid	de the ex	planation required by Part IV, line 4b. Als	o provide any othe	er addtiona	l inforr	nation. See in	structions.				
	beli	er penalties of perjury, I declare that I have examels, it is true, correct, and complete. Declaration o									e and
Sig	n		1				ı	•			
He	re 👠	DWIGHT ARN	2021-11-15	TRUSTEE					e IRS discuss thi		
			└						e preparer show structions)? 🗹		๊ _{No} [
		Signature of officer	Date	Title		In.	 				
	_	Print/Type preparer's name Michael J Engle	Preparer's signature			Date	Check 🔲 if	F PTIN	I 182834		
Paid							self-employe	d			
	parer	Firm's name BKD LLP					Firm's EIN 🟲	44-016	U26U		
Use	Only	Firm's address ▶ 1201 Walnut Suite 1700					Phone no. (8	16) 221	-6300		
		Kansas City, MO 641062	2246]	-			
		Ranbas City, Filo 041002					1		Form 9	on_T ((2020)

GREATER KC COMMUNITY FOUNDATION **EIN:** 43-6828087

DLN: 93393299010621

Contribution Description: MISCELLANEOUS CONTRIBUTIONS

As Filed Data -

Cash contributions paid during the **year:** 77,861

Cash contributions by accrual basis taxpayer:

Contributions carried forward prior year:

efile GRAPHIC print - DO NOT PROCESS

Total charitable contributions: 77,861

TY 2020 IncomeLossPartnershipSCorpSch

Name: THE STANLEY H DURWOOD FOUNDATION CO THE

GREATER KC COMMUNITY FOUNDATION

EIN: 43-6828087

Total gross receipts

Partnership or S Corporation name	Share of gross income	Share of deductions	Gain or loss
COMMONFUND CAPITAL PARTNERS V LP	1,599		1,599
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VII LP	11,110		11,110
COMMONFUND CAPITAL STRATEGIC SOLUTIONS GLOBAL FUND	20,726		20,726
CFUND CAPITAL STRATEGIC SOLUTIONS GLOBAL FUND III	765		765
COMMONFUND GLOBAL PRIVATE EQUITY FUND II LP	24,684		24,684
COMMONFUND INTERNATIONAL PARTNERS VI LP	1,731		1,731
COMMONFUND NATURAL RESOURCES PARTNERS VIII LP	11,491		11,491
COMMONFUND NATURAL RESOURCES PARTNERS IX LP	46,292		46,292
COMMONFUND STRATEGIC SOLUTIONS RE OP FUND	114		114
COMMONFUND STRATEGIC SOLUTIONS RE OPPORTUNITY FUND	11,108		11,108
COMMONFUND VENTURE PARTNERS XI LP	3,182		3,182

Total share of gross income: -20,828

Total share of deductions: 153,630

Total gain or loss: -20,828

efil	e GRAPHIC print	- DO NOT PROCESS	As Filed [Data -						DLN:	93393299010621
SC	HEDULE A	Unrela	ated Bus	sines	s Ta	axable Ir	ncon	ne			OMB No. 1545-0047
(Fo	orm 990-T)					de or Bu			4 :		2020
	tment of the Treasury al Revenue Service	►Go to <i>www.irs.g</i> e ►Do not enter SSN number								(3).	Open to Public Inspection for 501(c)(3) Organizations Only
THE	Name of the organiza STANLEY H DURWOO ATER KC COMMUNITY	DD FOUNDATION CO THE						nployer i 28087	dentific	ation	number
c (Jnrelated business ac	ctivity code (see instructions) ► 525990	D Seq	uence	:	1		of		1
E [Describe the unrelate	d trade or business ▶ 0									
Pa	rt I Unrelated	Trade or Business Inc	ome			(A) Income	•	(B) I	Expense	es	(C) Net
1a	Gross receipts or sa	ales									
b			c Balanc	e ▶ 10	,						
2		(Part III, line 8)		_	_						
3	-	act line 2 from line 1c			_						
	Capital gain net inc	ome (attach Sch D (Form 10	041 or Form			9.	8,777				98,777
b		m 4797) (attach Form 4797		-	,						
С	Capital loss deducti	on for trusts		40							
5	, ,	a partnership or an S corpo	•		9	-2	0,828				-20,828
6	Rent income (Part I	(V)		. 6							
7	Unrelated debt-fina	nced income (Part V)		. 7							
8		royalties, and rents from a /I)		. 8							
9		of section 501(c)(7), (9), o VII)		. 9							
10	Exploited exempt a	ctivity income (Part VIII) .		. 10)						
11	Advertising income	(Part IX)		. 11	L L						
12	,	instructions; attach stateme	•		2						
13	Total. Combine line	es 3 through 12		. 13	3	7	7,949			0	77,949
Pai	connected	ns Not Taken Elsewher with the unrelated busin	ess income							ons m	ust be directly
1	•	ficers, directors, and trustee	es (Part X) .		•					1	
2	Salaries and wages				•					2	
3	Repairs and mainte				•					3	
4	Bad debts				•					4	
5	•	tement) (see instructions)			•					5	
6		h			•	 7				6	88
7		h Form 4562) (see instruction	-		•	—				8b	
8 9		laimed in Part III and elsewh			•	8a	<u> </u>			9	
10		ferred compensation plans .								10	
11		rograms					• •			11	
12		enses (Part VIII)					• •		•	12	
13		costs (Part IX)								13	
14	Other deductions (a	` '								14	
15										15	88
		-								$\overline{}$	

16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) 16

77,861 17 Deduction for net operating loss (see instructions) 17

	ule A (Form 990-T) 2020									Page 3
Par	VI Interest, Annui	ties, Roya	ities, and Re	ents froi	m Control			•		
			_				•	ed Organizations		T
	1. Name of controlled organization		2. Employer identification number			4. Total of specified payments made		5. Part of column of that is included in the controlling organization's gross income		6. Deductions directly connected with income in column 5
(1)								_		
(2)										
(3)										
(4)										
			Non	exempt C	ontrolled Or	ganization	s			
	7. Taxable income	inco	et unrelated ome (loss) instructions)		Total of spe payments m		that is in controlling	of column 9 cluded in the organization's s income		L. Deductions directly connected with ncome in column 10
(1)										
(2)										
(3)										
(4)										
otal Part	VII Investment Inc 1. Description of income				3. Deduction	7) Organ tions directed statement	tly 4	ee instructions Set-asides ach statement))	5. Total deductions and set-asides add columns 3 and 4)
(1)					(accacii	Statement	' 			add coldiniis 5 dila 1)
(2)										
(3)										
(4)										
1	_		Add amounts in o Enter here and o line 9, colum	on Part I,						add amounts in column 5. Enter here and on Part I, line 9, column (B)
otal			tu. Incomo (246 a Th		tining To		· inchurchione)	<u> </u>	
	VIII Exploited Exer	-	ty Income, (Juier II	iaii Auver	using Ir	icome (see	instructions)		
	Description of exploited act	·							_	
2 3	Gross unrelated business in Expenses directly connected						•	` ′ -	2	
4	column (B)								3	
•	lines 5 through 7							·	4	
5	Gross income from activity								5	
6	Expenses attributable to in							<u>.</u>	6	
7	Excess exempt expenses. Shere and on Part II. line 12								7	

efile	GRAPHIC	orint - DO NOT PROCESS As I	Filed Data -		D	LN:	93393299010621	
SCH	EDULE D	Comit	al Caina and	d I			OMB No. 1545-0092	
(Form	1041)	Саріт	al Gains and	Losses			_	
	ŕ	► Attach to Fo	orm 1041. Form 52	27, or Form 990-T.			2020	
Departn	ent of the Treasury	▶ Use Form 8949 to list y	our transactions f	or lines 1b, 2, 3, 8b, 9,			2020	
Internal	Revenue Service	► Go to www.irs.gov/F1	041 for instruction	s and the lastest infor	mation.			
Name	of estate or tr	ust			Employer	iden	tification number	
					43-682808	37		
Not	e: Form 522	27 filers need to complete only	Parts I and II		1 10 00000			
		any investment(s) in a qualified opport		tax vear?				
		, , , , , , , , , , , , , , , , , , , ,		' ∟ Yes				
		n 8949 and see its instructions for addi Term Capital Gains and Loss				ruct	ions)	
		how to figure the amounts to enter on	C3—A33Ct3 Hei	One rear or Le.	(g)	uct	(h) Gain or (loss)	
	nes below.	now to rigure the amounts to enter on	_ (d)	(e)	Adjustments to	gain	Subtract column (e)	
			Proceeds (sales price)	Cost (or other basis)	or loss from Fo	rm(s)	from column (d) and	
	orm may be ea ole dollars.	sier to complete if you round off cents	(sales price)	(Or other basis)	8949, Part I, lii column (g)		combine the result with column (g)	
	ole dollars.				column (g)	,	with column (g)	
1a	Totals for all s	hort-term transactions reported						
		-B for which basis was reported						
		for which you have no see instructions). However, if						
		report all these transactions						
		, leave this line blank and go						
	to line 1b							
1 b	Totals for all twith Box A ch	ransactions reported on Form(s) 8949 necked						
2	Totals for all t	ransactions reported on Form(s) 8949 ecked						
3	Totals for all t with Box C ch	ransactions reported on Form(s) 8949 ecked						
4	Short-term ca	pital gain or (loss) from Forms 4684, 62	252, 6781, and 8824			4		
5	Net short-tern	n gain or (loss) from partnerships, S coi	porations, and other	estates or trusts		5	1,587	
6	Short-term ca	pital loss carryover. Enter the amount,	if any, from line 9 of	the 2019 Capital Loss				
	Carryover Wo	rksheet				6	()	
7		m capital gain or (loss). Combine lin			id on line			
	17, column (3) on the back			· · •	7	1,587	
Part	Ⅲ Long-T	erm Capital Gains and Losse	es—Assets Held	d More Than One	Year (see ii	ıstrı	uctions)	
		how to figure the amounts to enter on	(d)	(e)	(g)		(h) Gain or (loss)	
the li	nes below.		Proceeds	Cost	Adjustments to or loss from Fo			
This f	orm may be ea	sier to complete if you round off cents	(sales price)	(or other basis)	8949, Part II, li		combine the result	
to wh	ole dollars.				column (g))	with column (g)	
	Totals for all li	ong-term transactions reported						
Oa		-B for which basis was reported						
		for which you have no						
		see instructions). However, if report all these transactions						
		, leave this line blank and go						
	to line 8b							
8b	Totals for all t	ransactions reported on Form(s) 8949 necked						
9	Totals for all t	ransactions reported on Form(s) 8949 ecked						
10	Totals for all t	ransactions reported on Form(s) 8949 ecked						
11	Long-term car	oital gain or (loss) from Forms 2439, 46	84, 6252, 6781, and	8824		11		
12		gain or (loss) from partnerships, S corp				12	47,021	
13	Capital gain di					13	,	
14	Gain from Fori					14	50,169	
15		oital loss carryover. Enter the amount, i					1,	
	Carryover Wo					15	()	
16	Net long-teri	n capital gain or (loss). Combine line	es 8a through 15 in c	olumn (h). Enter here ar	nd on line			
	18a, column (3) on the back			•	16	97,190	
Eor Da	manuant Dadua	tion Act Notice, see the Instructions for F	1041	Cat No. 11376V		Calaad	ule D (Form 1041) 2020	

The Stanley H. Durwood Foundation C/O The Greater KC Community Foundation

EIN: 43-6828087 12/31/2020

FORM 990-T - CHARITABLE CONTRIBUTIONS CARRYFORWARD

YEAR ENDING	ORIGINAL CONTRIBUTIONS	UTILIZED	REMAINING
12/31/2019 12/31/2020	298 99,424	298 77,563	- 21,861
CHARITABLE CONTRIBUTION	IS CARRYFORWARD AVAIL	 ABLE FOR 2021	21,861

SCHEDULE I (Form 1041)

Alternative Minimum Tax - Estates and Trusts

OMB No. 1545-0092

2020

Department of the Treasury Internal Revenue Service

► Attach to Form 1041.

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

Name of estate or trust

THE STANLEY H. DURWOOD FOUNDATION C/O THE

43-6828087

Part L Estate's or Trust's Share of Alternative Minimum Taxable Income

Pa	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		NONE
2	Interest	2		
3	Taxes	3		
4	Refund of taxes	4	()
5	Depletion (difference between regular tax and AMT)	5		
6	Net operating loss deduction. Enter as a positive amount	6		
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		
12	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	12		
13	Passive activities (difference between AMT and regular tax income or loss)	13		18,663.
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		
21	Other adjustments, including income-based related adjustments	21		
22	Alternative tax net operating loss deduction (See the instructions for the limitation that applies.)	22	()
23	Adjusted alternative minimum taxable income. Combine lines 1 through 22	23		18,663.
	Note: Complete Part II below before going to line 24.			
24	Income distribution deduction from Part II, line 42			
25	Estate tax deduction (from Form 1041, line 19)			
26	Add lines 24 and 25	26		
27	Estate's or trust's share of alternative minimum taxable income. Subtract line 26 from line 23	27		18,663.
	If line 27 is:			

- \$25,400 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 \$25,400, but less than \$186,400, go to line 43.
- \$186,400 or more, enter the amount from line 27 on line 49 and go to line 50.
- ESBTs, see instructions.

Pai	t II Income Distribution Deduction on a Minimum Tax Basis		
28	Adjusted alternative minimum taxable income (see instructions)	28	18,663.
29	Adjusted tax-exempt interest (other than amounts included on line 7)	29	NONE
30	Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0	30	
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	()
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. If zero		
	or less, enter -0	35	18,663.
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	
39	Tax-exempt income included on line 38 (other than amounts included on line 7)		NONE
40	Tentative income distribution deduction on a minimum tax basis. Subtract line 39 from line 38	40	
<u> </u>	D. J. C. B. J. M. C. B. J. M. C. B. J. M. C. B. J. M.		L - 1 - 1 - 1 /F 10 11 0000

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

Schedule I (Form 1041) 2020

JSA

Schedule | (Form 1041) 2020 43-6828087 Page **2**

	rt II Income Distribution Deduction on a Minimum Tax Basis (continued)	5 0	1020007 rage 2
41	Tentative income distribution deduction on a minimum tax basis. Subtract line 29 from line 35. If zero		
	or less, enter -0	41	18,663.
42	Income distribution deduction on a minimum tax basis. Enter the smaller of line 40 or line 41.		
	Enter here and on line 24	42	
Pa	t III Alternative Minimum Tax		
43	Exemption amount	43	\$25,400
44	Enter the amount from line 27		
45	Phase-out of exemption amount		
46	Subtract line 45 from line 44. If zero or less, enter -0		
47	Multiply line 46 by 25% (0.25)	47	
48	Subtract line 47 from line 43. If zero or less, enter -0	48	
49	Subtract line 48 from line 44	49	
50	Go to Part IV of Schedule I to figure line 50 if the estate or trust has qualified dividends or has a gain		
	on lines 18a and 19 of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary).		
	Otherwise, if line 49 is:		
	• \$197,900 or less, multiply line 49 by 26% (0.26).		
	• Over \$197,900, multiply line 49 by 28% (0.28) and subtract \$3,958 from the result		
51	Alternative minimum foreign tax credit (see instructions)	51	
52	Tentative minimum tax. Subtract line 51 from line 50	52	
53	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedule G, line 2a)	53	
54	Alternative minimum tax. Subtract line 53 from line 52. If zero or less, enter -0 Enter here and on		
-	Form 1041, Schedule G, line 1c	54	
	Line 50 Computation Using Maximum Capital Gains Rates	1	
Qua	tion: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D Tax Worksheet, or the lified Dividends Tax Worksheet in the Instructions for Form 1041, see the instructions before completing		
this	·	55	
55 56	Enter the amount from line 49	35	
30	Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, whichever applies (as		
	Worksheet in the Instructions for Form 1041, whichever applies (as refigured for the AMT, if necessary)		
57	Enter the amount from Schedule D (Form 1041), line 18b, column (2) (as	1	
٠.	refigured for the AMT, if necessary). If you didn't complete Schedule D		
	for the regular tax or the AMT, enter -0		
58	If you didn't complete a Schedule D Tax Worksheet for the regular tax or	1	
	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		
59	Enter the smaller of line 55 or line 58	59	
60	Subtract line 59 from line 55	60	
61	If line 60 is \$197,900 or less, multiply line 60 by 26% (0.26). Otherwise, multiply line 60 by 28%		
	(0.28) and subtract \$3,958 from the result	61	
62	Maximum amount subject to the 0% rate		
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	_	
64	Subtract line 63 from line 62. If zero or less, enter -0		
65	Enter the smaller of line 55 or line 56		
66	Enter the smaller of line 64 or line 65. This amount is taxed at 0% 66		
67	Subtract line 66 from line 65		

43-6828087 Page **3** Schedule I (Form 1041) 2020

Pai	t IV Line 50 Computation Using Maximum Capital Gains Rates ((conti	inued)		
68	Maximum amount subject to rates below 20%	68	\$13,150		
69	Enter the amount from line 64	69			
70 71	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 Add line 69 and line 70				
72	Subtract line 71 from line 68. If zero or less, enter -0	72			
73	Enter the smaller of line 67 or 72	73			
74	Multiply line 73 by 15% (0.15)			74	
75	Add lines 66 and 73	75			
	If lines 75 and 55 are the same, skip lines 76 through 80 and go to line 81. O				
76	Subtract line 75 from line 65	76			
77	Multiply line 76 by 20% (0.20)			77	
	If line 57 is zero or blank, skip lines 78 through 80 and go to line 81. Other				
78	Add lines 60, 75, and 76	1			
79	Subtract line 78 from line 55				
80	Multiply line 79 by 25% (0.25)			80	
81	Add lines 61, 74, 77, and 80			81	
82	If line 55 is \$197,900 or less, multiply line 55 by 26% (0.26). Otherwise, multiply				
	and subtract \$3,958 from the result		• \ '	82	
83	Enter the smaller of line 81 or line 82 here and on line 50			83	

SCHEDULE I, LINE 13 ______

ACTIVITY NAME:	INCOME <loss> REGULAR TAX</loss>	INCOME <loss> ALT. MIN. TAX</loss>
COMMONFUND CAPITAL PARTNERS V LP COMMONFUND CAPITAL PRIVATE EQUITY PARTNE COMMONFUND CAPITAL STRATEGIC SOLUTIONS G COMMONFUND GLOBAL DISTRESSED INVESTORS COMMONFUND GLOBAL PRIVATE EQUITY FUND II COMMONFUND NATURAL RESOURCES PARTNERS VI COMMONFUND NATURAL RESOURCES PARTNERS VI COMMONFUND NATURAL RESOURCES PARTNERS IX COMMONFUND NATURAL RESOURCES PARTNERS XI COMMONFUND VENTURE PARTNERS VIII LP COMMONFUND VENTURE PARTNERS XII LP	1,488. 11,110. 20,726. -3. 24,684. -1,093. 8,828. 35,577. -32,127. -7. -3,741.	1,560. 11,106. 20,7242. 24,6871,114. 11,421. 43,69224,26263,701.
	65,442.	84,105.
TOTAL NET ADJUSTMENTS (PASSIVE & PTP'S)		18,663. =======