Form 990-T	(2018) Museum, Inc.	<u> 51-0066</u>	<u> 5038</u>		Page
Part I	II Total Unrelated Business Taxable Income				
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		33	775,6	62.
34	Amounts paid for disallowed fringes		34		
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)		35		
		-	33		
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of	0		775 6	560
	lines 33 and 34	240	36	775,6	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	"	37	<u> </u>	000
38	Unrelated business taxable income Subtract line 37 from line 36. If line 37 is greater than line 36,	39	1		
	enter the smaller of zero or line 36	<u> </u>	38	774,6	<u> 62</u>
Part I	V Tax Computation	140			
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0.21)	$\sim$	39	162,6	579
40	Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 38 from		11	•	
	Tax rate schedule or Schedule D (Form 1041)	<b>.</b>	40		
41	Proxy tax See instructions		41		
		-	7		
42	Alternative minimum tax (trusts only)		72 -		
43	Tax on Noncompliant Facility Income See instructions	1xC	43	1.60	
44	Total Add lines 41, 42, and 43 to line 39 or 40, whichever applies	,0(5)	44	162,6	79.
Part \	/ Tax and Payments	· · · · · · · · · · · · · · · · · · ·	1		
45 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)  45a				
b	Other credits (see instructions)				
С	General business credit. Attach Form 3800				
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	7,649.			
	Total credits Add lines 45a through 45d	yol	45e	7.6	549
46	Subtract line 45e from line 44	7,4 -	46	155,0	
47		ittach schedule)	47	<u> </u>	,,,,,,
		49	48	155,0	130
48	Total tax Add lines 46 and 47 (see instructions)	٧ ١	<u> </u>	133,0	
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	-	49		0.
	Payments A 2017 overpayment credited to 2018				
b	2018 estimated tax payments 50b 2	06,000.			
C	Tax deposited with Form 8868				
d	Foreign organizations: Tax paid or withheld at source (see instructions) 50d				
е	Backup withholding (see instructions) 50e				
	Credit for small employer health insurance premiums (attach Form 8941) 50f				
	Other credits, adjustments, and payments: Form 2439				
9	Form 4136 Other Total <b>50g</b>				
E 4	Total payments. Add lines 50a through 50g		<u>\$</u> 1	206,0	٥٥٥
51	<del></del>	43	52		557
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached	77	<del></del>		) ) / .
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	16	53	- F O - 1	112
\n^54	Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	55▶	54	50,3	
V55		unded 🕨 📗	<u> 5</u> 5		0
Part \	/I Statements Regarding Certain Activities and Other Information (see instruc	tions)	•	<u>,                                      </u>	
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authorit	y		Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file			ļ	İ
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country				
	here >				X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a for	eian trust?			X
0,	If "Yes," see instructions for other forms the organization may have to file.	g σοι			† <u></u>
58	Enter the amount of tax-exempt interest received or accrued during the tax year >\$				
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the	a heet of my knowl	ledge and hel	ief it is true	<u> </u>
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled	ge		iei, ii is iiue,	
Here	Controller and	ASST May	the IRS disc	uss this return	with
. 1616	Treasurer Date			vn below (see	<b>-</b> 7
	Signature of officer Date Title	inst	ructions)?	Yes	No
	Print/Type preparer's name Preparer's signature Date	Check if	PTIN		
Paid	1 Tuil 1	self- employed			
Prepa	Peter Kennedy Peter Kennedy 07/14/20		P00!	571422	2
•	S. Harris C. Donnikom D. A.	Fırm's EIN ▶		023247	
Use C	2711 Centerville Road, Suite 100				
	Firm's address ► Wilmington, DE 19808	Phone no. (	3021	656-66	530
922711 01				rm 990-T	

## The Henry Francis du Pont Winterthur Form 990-T (2018) Museum, Inc.

51-0066038

Page 3

Schedule A - Cost of Good	s Sold. Enter	method of invento	ry valuation	Lower	of Cost or I	Market
1 Inventory at beginning of year	1	8,964.	6 Inventory at end			6
2 Purchases	2		7 Cost of goods s	old Subtract	line 6	_
3 Cost of labor	3		from line 5. Enti	er here and in	Part I,	
4a Additional section 263A costs			line 2			7 8,964.
(attach schedule)	4a		8 Do the rules of	section 263A	(with respect to	Yes No
<b>b</b> Other costs (attach schedule)	4b		property produc	ed or acquire	ed for resale) apply to	
5 Total Add lines 1 through 4b	5	8,964.	the organization			X
Schedule C - Rent Income	(From Real	Property and	Personal Prop	erty Leas	sed With Real Pro	perty)
(see instructions)						
1 Description of property						
(1)						
(2)						<del></del>
(3)				<u> </u>		
(4)						
		ed or accrued			3/3) Deductions directly	connected with the income in
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	e than	of rent for per	d personal property (if the sonal property exceeds 5 s based on profit or incon	0% or⊪f		d 2(b) (attach schedule)
(1)						
(2)						
(3)						
(4)						
Total	0.	Total		0.		
(c) Total income Add totals of columns here and on page 1, Part I, line 6, column	ı (A)	<b></b>		0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	<b>&gt;</b> 0.
Schedule E - Unrelated Del	ot-Financed	I Income (see in	structions)			
			2 Gross income fro	_	3 Deductions directly con to debt-finance	
1 Description of debt-fit	nanced property		or allocable to deb	- (a	Straight line depreciation	(b) Other deductions
·			аоод р.оро,		(attach schedule)	(attach schedule)
(1)						<del></del>
(2)						
(3)						
(4)						
4. Amount of average acquisition	5 Average	e adjusted basis	6 Column 4 divide	,	7 Gross income	Allocable deductions
debt on or allocable to debt-financed property (attach schedule)	of or a	allocable to	by column 5	1	reportable (column	(column 6 x total of columns 3(a) and 3(b))
	(-44)	nced property h schedule)			2 x column 6)	S(a) and S(b))
(1)	(-44)	L L _ J _ J _ J _ J		%	2 x column by	S(a) and S(b))
(1) (2)	(-44)	L L _ J _ J _ J _ J		%	2 x column b)	Stal and Stoll
<del>"</del>	(-44)	L L _ J _ J _ J _ J		- 1	2 x column b)	S(a) and S(d))
(2)	(-44)	L L _ J _ J _ J _ J		%	2 x column 6)	S(a) and S(d))
(2) (3)	(-44)	L L _ J _ J _ J _ J		%	Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
(2) (3)	(-44)	L L _ J _ J _ J _ J		%	Enter here and on page 1,	Enter here and on page 1, Part I, line 7, column (B)
(2) (3) (4)	(attac	h schedule)		%	Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)

4

Form 990-T (2018) Museum Schedule F - Interest,	, Īnc				s From Co		ad Organi:	zatio	51-00			Page
Schedule F - Interest,	Annuiue	is, noyali						Zaliu	i i S (see ins	Structio	ons)	
Name of controlled organization		2 Employer 3				tal of specified 5 in		5 Part of column 4 that is included in the controlling organization's gross income		6 Deductions directly connected with income in column 5		
(1)	<u></u>					<b></b> -						
(1)	<u> </u>					-						
(2)						<del></del>						•
(3)						<del></del>						
(4)			L			]		ــــــــــــــــــــــــــــــــــــــ		i		
Nonexempt Controlled Organi 7. Taxable Income	8 Net u	inrelated income see instructions)		9 Total	of specified pay made	ments	10 Part of colu in the controll gros		ınızatıon's			tions directly connecte
(4)												
(1)							<u> </u>					
(2)												
(3)												
_(4)							Add colui Enter here and line 8,		je 1, Part I,		r here	olumns 6 and 11 and on page 1, Part I, 8, column (B)
Totals						<b>▶</b>			0.			0
Schedule G - Investme	nt Inco	me of a S	Section 5	01(c)(	7) (9) or	(17) Or	ganizatio	<u> </u>				
(see inst		0. 4 0		J 1 (J)(	.,, (0,, 0.	(.,, 0.	gamzanoi	•				
	ription of inco	ome			2. Amount of	income	3 Deduction directly connected (attach scheme)	ected	4 Set-	asides schedule	)	5 Total deductions and set-asides (col 3 plus col 4)
(1)												
(2)												
(3)												
(4)					İ							
					Enter here and Part I, line 9, co				1			Enter here and on page Part I, line 9, column (B
Totals				•		0.						0
Schedule I - Exploited (see instru	-	Activity	Income,	Othe	r Than Ac	lvertisi	ng Incom	е	1			
1 Description of exploited activity	unrelated incom	Gross I business ne from business	3 Expens directly conn with produc of unrelate business inc	ected tion ed	4 Net inconfrom unrelated business (cominus colum gain, comput through	d trade or olumn 2 in 3) If a e cols 5	5 Gross inc from activity is not unrela business inc	that ited	attribut	penses table to mn 5		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)												
(2)					1							
(3)												
(4)					1							
	page '	re and on 1, Part I, , col (A)	Enter here ar page 1, Pa line 10, col	rt I,					•			Enter here and on page 1, Part II, line 26
Totals <b>•</b>		0.		0.								0
Schedule J - Advertisi												
Part I Income From	Periodio	cals Repo	orted on a	a Con	nsolidated	l Basis						
1 Name of periodical		2 Gross advertising income		Direct ing costs	or (loss) (c col 3) If a g	tising gain ol 2 minus ain, comput hrough 7	5 Circula te income		6 Read cos			7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)		-										
(2)												
(3)			_								7	
(4)		~~					-	-	1		_	

0 . Form **990-T** (2018)

1

0.

0.

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

		4	 	 	 		
1 990-T (2018) <b>Mus</b> e	eum.	Inc.				51-0066038	Page 5
· /			 	 	 	 <u> </u>	

Form 990-T (2018) Museum,		51-006603
Part II Income From Pe	eriodicals Reported on a Separate	Basis (For each periodical listed in Part II, fill in
columns 2 through 7	on a line-by-line basis)	_

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)					_	
(3)						
(4)						
Totals from Part I	<b>0.</b>	0.				0.
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

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

Form 990-T (2018)

Form 990-T Income (Loss) from Partnerships	Statement 1
Description	Net Income or (Loss)
Commonfund Capital Private Equity Ptrs V, LP - Ordinary Business Income (los	3,750.
Commonfund Capital Private Equity Ptrs VII, LP - Ordinary Business Income (1 Commonfund Capital Venture Ptrs VIII, LP - Ordinary	22,799.
Business Income (loss) Commonfund Capital Natural Resources Ptrs VII, L -	-44.
Ordinary Business Income Commonfund Capital Natural Resources Ptrs VIII, - Ordinary	22,955.
Business Income ( Crow Holdings Realty Ptrs V, LP - Ordinary Business Income	-24,516.
(loss) Crow Holdings Realty Ptrs IV, LP - Ordinary Business Income (loss)	-4,117. -16,070.
Venture Investment Associates VI, LP - Ordinary Business Income (loss)	-10,070. -4,793.
BPG Investment Ptrshp VIII, LP - Ordinary Business Income (loss)	211,415.
BPG Investment Ptrshp VII, LP - Ordinary Business Income (loss) Pantheon USA Fund IV, LP - Ordinary Business Income (loss) Commonfund Capital Venture Ptrs IX, LP - Ordinary Business	756,181. -77.
Income (loss) LEGP III AIV, LP - Ordinary Business Income (loss)	-3,236. -14,485.
Davidson Kempner Institutional Ptrs, LP - Ordinary Business Income (loss)	-810.
CenterGate Capital Partners I, L.P Ordinary Business Income (loss)	-14,338.
Total Included on Form 990-T, Page 1, line 5	934,614.
Form 990-T Other Deductions	Statement 2
Description	Amount
Other Expenses Telephone	600. 1,500. 74,987.
Investment Advisory Fees  Total to Form 990-T, Page 1, line 28	77,087.
rocar to rorm 550 r, rage r, rrne 20	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

## Form **8827**

**Credit for Prior Year Minimum Tax - Corporations** 

OMB No. 1545-0123

2018

Department of the Treasury Internal Revenue Service ► Attach to the corporation's tax return

► Go to www irs gov/Form8827 for the latest information

ame The Henry Francis du Pont Winterthur		Employer identification number			
Museum, Inc.		51-0066038			
1 Alternative minimum tax (AMT) for 2017. Enter the amount from line 14 of the 2017 Form 4626	1				
2 Minimum tax credit carryforward from 2017 Enter the amount from line 9 of the 2017 Form 8827	2	7,649.			
3 Enter any 2017 unallowed qualified electric vehicle credit (see instructions)	3				
4 Add lines 1, 2, and 3	4	7,649.			
5 Enter the corporation's 2018 regular income tax liability minus allowable tax credits (see instructions)	5	162,679.			
6 Enter the refundable minimum tax credit (see instructions)	6	0.			
7 Add lines 5 and 6	7	162,679.			
8a Enter the smaller of line 4 or line 7. If the corporation had a post-1986 ownership change or has pre-acquisition excess credits, see instructions	<u>8a</u>				
b Current year minimum tax credit. Enter the smaller of line 4 or line 5 here and on Form 1120, Schedule J, Part I, line 5d (or the applicable line of your return) If the corporation had a post-1986 ownership change or has pre-acquisition					
excess credits, see instructions. If you made an entry on line 6, go to line 8c. Otherwise, skip line 8c.	8b	7,649.			
c Subtract line 8b from line 8a. This is the current year refundable minimum tax credit. Include this	8c				
amount on Form 1120, Schedule J, Part II, line 20c (or the applicable line of your return)  9 Minimum tax credit carryforward to 2019. Subtract line 8a from line 4. Keep a record of this	00				
amount to carry forward and use in future years	9	7,649.			