Form 990			PETH HALL SO					62	<u>-0501</u>	916	Page 2
Part	<u> </u>	Total Unrelat	ted Business Taxa	ble Income							
321	Total of	unrelated busines	s taxable income computed	d from all unrelated trade	s or businesses (see instructions)	}	32	_11	<u>5,2</u>	<u>43.</u>
33	Amount	ts paid for disallow	ed fringes		JOON			33			
34	Charitat	ble contributions (s	see instructions for limitation	on rules)	4		u	34			0.
35	Total ur	related business t	axable income before pre-2	018 NOLs and specific o	deduction Subtract	t line 34 from the sum o	of lines 32 and 33	35	-11	5,2	<u>43.</u>
36	Deducti	on for net operatin	ig loss arising in tax years t	peginning before January	/ 1, 2018 (see ins	tructions) S	STMT 4	36			0.
37	Total of	unrelated busines	s taxable income before sp	ecific deduction. Subtrac	t line 36 from line	35	~	37	-11	5,2	43.
38	Specific	deduction (Genera	ally \$1,000, but see line 38	instructions for exception	ons)		•	$\sqrt{38}$		1,0	00.
39	Unrelat	ed business taxab	ole income Subtract line 3	8 from line 37. If line 38	is greater than line	e 37,					
	enter th	e smaller of zero o	r line 37				· · · · · · · · · · · · · · · · · · ·	39	<u>-11</u>	5,2	<u>43.</u>
Part	<u> </u>	Tax Computa	ation								
40	Organiz	ations Taxable as	Corporations. Multiply lin	e 39 by 21% (0.21)			>	40			0.
41	Trusts 1	Taxable at Trust R	ates See instructions for to	ax computation. Income	tax on the amoun	it on line 39 from:					
	Ta	ax rate schedule or	Schedule D (Form	1041)			•	41			
42	Proxy ta	ax. See instruction	S				•	42			
43	Alternat	tive minimum tax (f	trusts only)					43			
44	Tax on	Noncompliant Fac	cility Income See instruction	ons				44			
45	Total. A	ldd lines 42, 43, an	nd 44 to line 40 or 41, which	hever applies				45			0.
Part	V 1	Tax and Payı	ments								
46 a	Foreign	tax credit (corpora	ations attach Form 1118; tr	usts attach Form 1116)		46a					
b	Other co	redits (see instruct	ions)			46b			ļ		
C	General	business credit. A	ttach Form 3800			46c					
d	Credit fo	or prior year minim	num tax (attach Form 8801	or 8827)		46d					
е	Total cr	redits Add lines 46	6a through 46d					46e			
47	Subtrac	t line 46e from line	e 45					47			0.
48	Other ta	exes. Check if from	: Form 4255 🔲	Form 8611 Form	8697 Form	n 8866 🔲 Other	(attach schedule) 48	<u> </u>		
49	Total ta	x. Add lines 47 an	d 48 (see instructions)					49			0.
50	2019 ne	et 965 tax liability p	oald from Form 965-A or Fo	orm 965-B, Part II, colum	ın (k), line 3			50			0.
51 a	Paymer	nts: A 2018 overpa	ayment credited to 2019			51a					
		stimated tax payme				51b					
C	Tax dep	osited with Form 8	3868			51c			ļ		
d	Foreign	organizations: Tax	k paid or withheld at source	(see instructions)		51d	•		}		
е	Backup	withholding (see ii	nstructions)			51e					
f	Credit fo	or small employer	health insurance premiums	(attach Form 8941)		51f					
g	Other ci	redits, adjustments	s, and payments: E	orm 2439							
	Fc	orm 4136	□ ∘	ther	Total	▶ 51g		┛	1		
52	Total pa	ayments. Add lines	s 51a through 51g					52			
53	Estimat	ed tax penalty (see	instructions). Check if For	m 2220 is attached 🕨				53			
54	Tax due	e. If line 52 is less t	than the total of lines 49, 50), and 53, enter amount (owed		•	54			
55	Overpa	yment. If line 52 is	larger than the total of line	s 49, 50, and 53, enter a	mount overpaid		•	55			
			5 you want: Credited to 20				funded	► 56	<u> </u>		
Part	VI S	Statements I	Regarding Certain	Activities and O	ther Inform	ation (see instru	ictions)				,
57	At any t	time during the 201	19 calendar year, did the or	ganization have an intere	ist in or a signatui	re or other authority				Yes	No
	over a f	inancial account (b	oank, securities, or other) in	a foreign country? If "Yo	es," the organizati	on may have to file					'
	FinCEN	Form 114, Report	of Foreign Bank and Finance	cial Accounts. If "Yes," en	ter the name of th	ne foreign country					
	here										<u>X</u>
	_		e organization receive a dis		the grantor of, or	transferor to, a fore	ign trust?				X
	If "Yes,"	see instructions fo	or other forms the organiza	tion may have to file.							
59			xempt interest received or a						_		L
O:	Ur	nder penalties of perju prect, and complete. I	ry, I declare that I have examine Declaration of preparer (other tha	d this return, including accon in taxpayer) is based on all in	formation of which p	reparer has anv knowle	dae	nowledge a	and belief, it is	true,	
Sign		10-		11/6/2 2:	DIREC	TOR OF F	NANCE	May the IR	S discuss this	return v	with
Here				115/104	AND O	PERATIONS	<u> </u>	the prepar	er shown belo	w (see	٦ ا
		Signature of office	cer O	Date	✓ Title	,		instruction	s)? X Ye	S	No
		Print/Type prepa	rer's name	Preparer's signature		Date	Check	ıf PTI	IN		
Paid							self- employe				
	arer		E. LEAHY	FRANCES E.	LEAHY	12/17/20			00713		
•	Only	Firm's name	KRAFTCPAS PI				Firm's EIN I	<u>► 6</u>	2-071	<u> 325</u>	<u>U</u>
	•			CIRCLE ROAL	ס		 	.	. =	<u> </u>	
		Firm's address	► NASHVILLE,	TN 37228			Phone no	615-	242-7		
923711	01-27-20								Form 99	30-T ((2019)

Schedule A - Cost of Good	s Sold. Enter	method of inver	ntory v	aluation N/A				
1 Inventory at beginning of year	1		6	Inventory at end of yea	r		6	
2 Purchases	2		7	Cost of goods sold Su	ıbtract I	ine 6		
3 Cost of labor	3			from line 5. Enter here	and in F	Part I,		
4 a Additional section 263A costs]	line 2			7	
(attach schedule)	4a		8	Do the rules of section	263A (v	with respect to		Yes No
b Other costs (attach schedule)	4b		7	property produced or a				
5 Total Add lines 1 through 4b	5		l	the organization?				
Schedule C - Rent Income	(From Real	Property and	d Pe	rsonal Property	Leas	ed With Real Prop	perty)	
(see instructions)								
1. Description of property								
(1)								
(2)								
(3)								
(4)				 			<u> </u>	
		ed or accrued				2/2) Deductions directly	connected w	ith the income in
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	than	of rent for p	personal	onal property (if the percenta property exceeds 50% or if ed on profit or income)	age	3(a) Deductions directly columns 2(a) an		
(1)								
(2)								
(3)								
(4)								
Total	0.	Total			0.			
(c) Total income Add totals of columns there and on page 1, Part I, line 6, column		ter >			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>	0.
Schedule E - Unrelated Deb	t-Financed	Income (see	ınstru	ctions)				
			2	Gross income from		Deductions directly conf to debt-finance		allocable
1. Description of debt-fir	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		Other deductions each schedule)
(1)							 	
(2)			1				—	
(3)								
(4)							 	
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis flocable to nced property ischedule)	6	Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)	(column	locable deductions n 6 x total of columns 3(a) and 3(b))
(1)				%				
(2)				%				
(3)				%				
(4)				%				
						nter here and on page 1, art I, line 7, column (A)		ere and on page 1, line 7, column (B)
Totals				▶		0.	,	0.
Total dividends-received deductions in	cluded in column	8				>		0.
						-		Form 990-T (2019)

Schedule F - Interest,	Annuitie	s, Roya	lties, ar	nd Rent	s From C	ontroll	ed Organiz	zatio	ns (see in:	structio	ns)
				·	Controlled O						· · · · · · · · · · · · · · · · · · ·
1 Name of controlled organize	ation	2 Em identif num	cation		related income e instructions)		al of specified ments made	includ	t of column 4 led in the cont ation's gross	trolling	Deductions directly connected with income in column 5
(1)								 		-	
(1)		l		 		 		 			
(2)				 				 			
(3)				-		-		 		-	
(4)		l	 	!		L		<u> </u>			
Nonexempt Controlled Organ											
7 Taxable Income		nrelated incor ee instruction		9. Total	of specified pay made	ments	10. Part of column the controll gross	mn 9 tha ing orgar s income	nization's	11. D	eductions directly connected th income in column 10
(1)				_							
(2)	1										
(3)	-			-							
•						-					
							Add colun Enter here and line 8, c		1, Part I,	l	dd columns 6 and 11 here and on page 1, Part I, line 8, column (B)
Totals									0.		0.
Schedule G - Investme	ent Inco	me of a	Section	501(c)(7). (9). or	(17) Or	ganization)			
	tructions)				.,, (-,, -,	(,	3	-			
1 . Des	cription of inco	me			2. Amount of	income	3. Deductio directly conne (attach sched	cted	4 Set- (attach s	asides schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1)											
(2)											
(3)			•	•						•	
(4)											
					Enter here and	on page 1.		_			Enter here and on page 1,
Tatala				_	Part I, line 9, co	olumn (A)					Part I, line 9, column (B)
Totals Cobodials Evaluated		A akirik	. 1	- O4ba	. Thou Ac	0.	I				0.
Schedule I - Exploited (see instr	-	ACTIVITY	mcom	e, Otne	r inan Ac	ivertisi	ng income	,			
Description of exploited activity	2 g unrelated incom	iross business e from business	directly of with pro of unr	penses connected oduction related s income	4. Net incon from unrelated business (co minus colum gain, comput through	trade or olumn 2 n 3) If a e cols 5	5. Gross inco from activity t is not unrelat business inco	hat ed	6. Exp attribut colur		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(2)											
(3)	· ·									<u> </u>	
(4)		-			-						
	Enter her page 1 line 10,	col (A)					•		l		Enter here and on page 1, Part II, line 25
Totals	<u>.l</u>	0.		0.							0.
Schedule J - Advertis									<u></u>		
Part I Income From	Periodic	als Rep	orted o	n a Con	solidated	Basis					
1. Name of periodical		2. Gross advertising income		3 Direct ertising costs	or (loss) (c		5. Circulat income		6 Reade		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)											-
(2)					\neg						1
(3)											1
(4)	- -				7					_	i
• • • • • • • • • • • • • • • • • • • •	- -				-		 				
Totals (carry to Part II, line (5))	•		0.	0							0 . Form 990-T (2019)

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 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	▶	0.	0.	<u>.</u>			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 26
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		▶	0.

Form 990-T (2019)

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1 BUSINESS ACTIVITY

HARPETH HALL IS AN INDEPENDENT, COLLEGE PREPARATORY SCHOOL FOR GIRLS AND YOUNG WOMEN IN GRADES FIVE THROUGH TWELVE.

TO FORM 990-T, PAGE 1

FORM 990-T INCO	RM 990-T INCOME (LOSS) FROM PARTNERSHIPS				
DESCRIPTION				INCOMI	
MA REAL ASSETS FUND 2, LP - (LOSS) MA REAL ASSETS FUND 2, LP - DRUM SPECIAL SITUATION PARTN BUSINESS INCOME (LOSS) DRUM SPECIAL SITUATION PARTN (LOSS) RCP DIRECT III LP - ORDINARY RCP FUND XIII, LP - ORDINARY RCP FUND XIII, LP - ORDINARY RCB REAL ESTATE VII, LP - OR KCB REAL ESTATE VII, LP - NE	NET RENTAL REAL E OTHER NET RENTAL INTEREST INCOME DIVIDEND INCOME ROYALTIES OTHER INCOME (LOS ERS IV-C LP - OTH BUSINESS INCOME BUSINESS INCOME DINARY BUSINESS I T RENTAL REAL EST	STATE INCOME INCOME (LOSS) SS) INARY ER INCOME (LOSS) (LOSS) NCOME (LOSS)		4; -32,88 -13,43	21. 23. 27. 1. 25. 87. 30. 75. 87. 42. 86.
FORM 990-T NET	OPERATING LOSS D	EDUCTION	STATE	MENT	3
TAX YEAR LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAIL THIS		
06/30/19 18,556.	0.	18,556.		18,556	5.
NOL CARRYOVER AVAILABLE THIS	YEAR	18,556.		18,556	<u> </u>

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/13	12,109.	0.	12,109.	12,109.
06/30/14	12,860.	0.	12,860.	12,860.
06/30/15	104,486.	0.	104,486.	104,486.
06/30/16	41,567.	0.	41,567.	41,567.
06/30/17	30,668.	0.	30,668.	30,668.
06/30/18	44,483.	0.	44,483.	44,483.
NOL CARRYO	VER AVAILABLE THIS	YEAR	246,173.	246,173.

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

▶ Go to www.irs gov/Form1120 for instructions and the latest information.

OMB No 1545-0123

Name

Employer identification number

THE HARPETH HALL	SCHOOL			62-	0501916
Did the corporation dispose of any investment		unity fund during the tax			Yes X No
If "Yes," attach Form 8949 and see its inst					/ \\ \tag{2.10}
Part I Short-Term Capital G			ar gam or 1000		
See instructions for how to figure the amounts		T			
to enter on the lines below. This form may be easier to complete if you	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gair or loss from Form(s) 894 Part I, line 2, column (g)	1 9, 1	(f) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
round off cents to whole dollars. 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked					-9.
4 Short-term capital gain from installment sal	es from Form 6252, line 26 or 3	37		4	
5 Short-term capital gain or (loss) from like-k	and exchanges from Form 8824			5	
6 Unused capital loss carryover (attach comp	utation)			6	()
7 Net short-term capital gain or (loss). Comb	ine lines 1a through 6 in colum	n h		7	-9.
Part II Long-Term Capital G	ains and Losses (See	instructions.)			
See instructions for how to figure the amounts	(4)	(a)	(0)		(h) a
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gair or loss from Form(s) 894t Part II, line 2, column (g	9,	(ħ) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
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 transaction on Form 8949, leave this line blank and go line 8b	, , s				
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on					
Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked	<u> </u>				7,476.
11 Enter gain from Form 4797, line 7 or 9				11	
12 Long-term capital gain from installment sal			-	12	
13 Long-term capital gain or (loss) from like-k	and exchanges from Form 8824			13	
14 Capital gain distributions				14	
15 Net long-term capital gain or (loss). Comb	-	<u>in h</u>		15	7,476.
Part III Summary of Parts I a					
16 Enter excess of net short-term capital gain				16_	
17 Net capital gain. Enter excess of net long-te			e 7)	17_	7,467.
18 Add lines 16 and 17. Enter here and on For		roper line on other returns		18_	7,467.
Note: If losses exceed gains, see Capital L	osses in the instructions.				
LHA For Paperwork Reduction Act Notic	e, see the Instructions for Forn	n 1120.		s	chedule D (Form 1120) 2019

Form **8949**

Department of the Treasury Internal Revenue Service

Sales and Other Dispositions of Capital Assets

► Go to www.irs.gov/Form8949 for instructions and the latest information.
File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D

OMB No 1545-0074

2019

Attachment Sequence No 12A

Name(s) shown on return

Social security number or taxpaver identification no.

<u>62-050</u>1916 THE HARPETH HALL SCHOOL Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check. Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short term (see instructions). For long-term transactions, see page 2 Note: You may aggregate all short term transactions reported on Form(s) 1099 B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a, you aren't required to report these transactions on Form 8949 (see instructions) You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box if you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or (a) (b) (c) (d) (e) loss If you enter an amount Proceeds Cost or other Gain or (loss). Description of property Date sold or Date acquired in column (g), enter a code in (sales price) basis See the Subtract column (e) (Example 100 sh XYZ Co) (Mo., day, yr.) disposed of column (f). See instructions. Note below and from column (d) & (Mo, day, yr.) (f) (g) Amount of see Column (e) ın combine the result Code(s) the instructions with column (g) adjustment MA REAL ASSETS FUND 2, LP <9.3 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

923011 12-11-19 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form **8949** (2019)

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an

adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

above is checked), or line 3 (if Box C above is checked)

Name(s) shown on return Name and SSN or taxpayer identification no. not required if shown on page 1

Social security number or taxpayer identification no.

THE	HARPETI	I HALL	SCHOOL
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62-0501916

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute
statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your
broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short term transactions, see page 1

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a, you aren't required to report these transactions on Form 8949 (see instructions)

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box if you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

X (F) Long-term transactions not reported to you on Form	1099-B
--	--------

1 (a) Description of property (Example 100 sh XYZ Co)	Date acquired Date sold or (Mo, day, yr) disposed of	disposed of	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and	loss. If your column column (f	nt, if any, to gain or ou enter an amount (g), enter a code in). See instructions	(h) Gain or (loss). Subtract column (e) from column (d) &
		(Mo., day, yr)		see Column (e) in the instructions	(f) Code(s)	(g) Amount of adjustment	combine the result with column (g)
MA REAL ASSETS							
FUND 2, LP							7,476.
							•
SERVICE SERVIC							
				-			l
				-			
	-						
	<u> </u>						
	 			-	• • • • • • • • • • • • • • • • • • • •		
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			1				
					•••		
						17777	
						 	
· · · · · · · · · · · · · · · · · · ·							
	 				_		
	 						
O Tatala Add the empress a sale			<u> </u>				
2 Totals. Add the amounts in colu							
negative amounts) Enter each to		-					
Schedule D, line 8b (if Box D ab							7 456
above is checked), or line 10 (if	Box F above is ch	necked)		<u> </u>			7,476.

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

923012 12-11-19

Form 8949 (2019)