<b>30</b> 0
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	_	990-T	F	EXTER Exempt Orga	NDED TO NOVE				x Ref	hurn			o 1545-0687
•	Form	330-1	_		nd proxy tax und				.X 110	Laiii	' ┌	_	
			For cal	lendar year 2018 or other tax yea	•		, and endin					2	018
	Departs	nent of the Treasury		► Go to www	irs.gov/Form990T for ir	nstructio	ns and the lates	t informat	ion.		_		
		Revenue Service	▶	Do not enter SSN numbe	rs on this form as it may	/ be mad	de public if your	organizat	ion is a 50°	1(c)(3).	!	501(c)(3) C	ublic Inspection for organizations Only
	A X	address changed Name of organization ( Check box if name changed and see instructions.)										oyees' trus ctions )	fication number st, see
	B Ex	Number, street, and room or suite no. If a P.O. box, see instructions.											64620
	X											ited busing structions	ess activity code s)
	$\sqsubseteq$	408(e) 220(e) Type 67-1349 ALA OHIA STREET									-		
		408A 530(a) City or town, state or province, country, and ZIP or foreign postal code KAMUELA, HI 96743											
	C Bool	k value of all assets nd of year 257,829,6	4.0	F Group exemption num		<u> </u>	च्या हरू।			1 4044 3			7 04
				G Check organization typ		poration 2		) trust		401(a)			Other trust
1			_	ation's unrelated trades or to EE STATEMENT					ne only (or complete Pa	•		than on	۵
		cribe the first in the b			<b>0</b> ,								
•		iness, then complete		-									
•	I Dur	ing the tax year, was	the corp	poration a subsidiary in an	affiliated group or a pare	nt-subsi	diary controlled (	group?		▶ [	Ye	s X	No
•				tifying number of the parer									
				NAHUA GUILLO		R RA			ne number			<u>885-</u>	
OSTANAN UAIR	Par			de or Business Inc	ome	_	(A) Incom	ie	(B) E:	xpenses	S		(C) Net
<u> </u>	-	Gross receipts or sale			c Balance	,,							
<u> </u>		Less returns and allov Cost of goods sold (S		 Δ line 7\	C Dalatice	1c 2							
ž		Gross profit. Subtract		•		3						-	
		Capital gain net incom				4a			•				
	b	Net gain (loss) (Form	4797, P	Part II, line 17) (attach Forn									
	C	Capital loss deduction	for true	sts		4c							
	5	Income (loss) from a	partners	ship or an S corporation (a	ttach statement)	5		-1.					-1.
5		Rent income (Schedu	-			6	-	260		4 6	21		1 560
2019		Unrelated debt-financ		•		7	350,3	69.	2.0	4,5 37,4	31.		$\frac{-1,562.}{62,884.}$
0	_	, ,		and rents from a controlled	-	1	350,3	556.	۷.	o / , 4	. / ᠘ •		02,004.
<b>Parent</b>		investment income of Exploited exempt acti		on 501(c)(7), (9), or (17) o	rganization (Schedule G)	10		+					
The Co		Advertising income (S	•	` '		11		1					
Ö		Other income (See in:		•		12							
Ω		Total. Combine lines				13	353,3	324.	29	92,0	03.		61,321.
Z	Par	t II Deductio	ns No	ot Taken Elsewher							-		
SCANNED		(Except for d	contribi	utions, deductions must	t be directly connected	d with t	he unrelated b	usiness i	ncome )				
S.	14	•	icers, di	rectors, and trustees (Sch	edule K)						14		
(J)	15	Salaries and wages									15_		
	16	Repairs and mainten Bad debts	ance								16		
	17 18	Interest (attach sche	dula) (s	eee instructions)							18		<del></del>
<b>&gt;</b>	19	Taxes and licenses	duic) (3	see man denona,							19		
	20		ons (Se	e instructions for limitation	rules) STATEM	ENT	3 SEE	STAT	EMENT	2	20		30,161.
M Received in	21	Depreciation (attach			,		_ 2	1		_			<del></del>
₹.	22			n Schedule A and elsewher	e on return		22	2a			22b		
₹ <b>2</b>	23	Depletion									23		
. 3	24	Contributions to defe	erred co	mpensation plans							24		
2	25	Employee benefit pro	_								25		· <del></del>
NO.	26	Excess exempt expe									26		
	27	Excess readership of	-	•							27		
ယ က	28	Other deductions (at									28	<u> </u>	30,161.
1 3 2019	29 30	Total deductions A		s 14 through 28 Income before net operatin	n loss deduction. Subtra	rt line 20	9 from line 13				30		31,160.
_	31			loss arising in tax years be				ons)			31		
	32			ncome. Subtract line 31 fro		, ., 20	2 1230 11101111111111111111111111111111	/			32		31,160.
	P22701			rwork Reduction Act Notic								Form	990-T (2018

Part I	Total Unrelated Business Taxable Income		
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	31,160.
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	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of	"	
•	lines 33 and 34	36	31 160
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	31,160.
38	Unrelated business taxable income Subtract line 37 from line 36.	3'	1,000.
30	enter the smaller of zero or line 36	,,	30,160.
Part I	Vi Tax Computation	38	30,100.
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0.21)	39	
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from:	35	
40		40	9,546.
44	· · · · · · · · · · · · · · · · · · ·	40	9,340.
41	Proxy tax See instructions  Alternative measure to (Austria calls)	41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income See Instructions	43	0 516
Part \	Total Add lines 41, 42, and 43 to line 39 or 40, whichever applies  Tax and Payments	44	9,546.
b		-	
C			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)		
	Total credits. Add lines 45a through 45d	45e	0 546
46	Subtract line 45e from line 44	46	9,546.
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	47	9,546.
48	Total tax Add lines 46 and 47 (see instructions)	48	9,546.
49 50 -	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2 Payments: A 2017 overpayment credited to 2018  14,017	49	<u></u>
	40.000	- 2	
	· · · · · · · · · · · · · · · · · · ·		
	Foreign organizations: Tax paid or withheld at source (see instructions)  Solution withheld or (see instructions)		
	Backup withholding (see instructions)  50e		
	Credit for small employer health insurance premiums (attach Form 8941)  50f	-   ,	
9	Other credits, adjustments, and payments: Form 2439		
	☐ Form 4136 ☐ Other ☐ Total ► 50g		26 517
51 50	Total payments. Add lines 50a through 50g	51	26,517.
52 52	Estimated tax penalty (see instructions) Check if Form 2220 is attached   Tay due of the Education that the total of these 48, 40, and 52, active arrows and a second seco	52	
53 54	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed  Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	53	16,971.
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax   16,971. Refunded	54 55	0.
Part N		1 20 1	<u>.</u>
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority		Yes No
00	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		163 140
	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 foreign trust?		—   X
	If "Yes." see instructions for other forms the organization may have to file		330 861
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 best of my knowle correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	edge and bel	ief, it is true,
Sign		May the IRC	discuss this return with
Here			shown below (see
	Signature of officer Date Title	nstructions)?	X Yes No
	Print/Type preparer's name Preparer's signature Date Check	ıf PTIN	
Paid	Self- employed		
Prepa	rer KIM A.T. JONES // WWW 42 4/1/64   10/15/14		0940140
Use C	INIV Firm's name ► ACCUITY LLP Firm's EIN ►	<u> 20</u>	-5325889
	999 BISHOP STREET, STE. 1900		
			31-3400
823711 01-	09-19		Form <b>990-T</b> (2018)

Schedule A - Cost of Goods	Sold. Enter	method of invento	ory valuation   N/A				
1 Inventory at beginning of year	1		6 Inventory at end of year	ır		6	
2 Purchases	2		7 Cost of goods sold Su				
3 Cost of labor	3		from line 5. Enter here a	and in Pa	art I,	<u></u>	
4a Additional section 263A costs	la Additional section 263A costs line 2						
(attach schedule)	(attach schedule) 4a 8 Do the rules of section 2						Yes No
<b>b</b> Other costs (attach schedule)	4b		property produced or a	or resale) apply to			
5 Total. Add lines 1 through 4b	5		the organization?				
Schedule C - Rent Income (	From Real	Property and I	Personal Property L	.eased	With Real Prope	erty)	
(see instructions)						<del></del>	
1. Description of property							
(1)	-						
(2)							
(3)							
(4)							
	:	ed or accrued			3(a) Deductions directly of	connected with the inc	ome in
<ul> <li>(a) From personal property (if the perorent for personal property is more 10% but not more than 50%)</li> </ul>	entage of than	` of rent for per	d personal property (if the percentag rsonal property exceeds 50% or if is based on profit or income)	ge		d 2(b) (attach schedule	
(1)							
(2)							
(3)							
(4)							
Total	0.	Total		0.			
(c) Total income Add totals of columns		iter			(b) Total deductions. Enter here and on page 1,		_
here and on page 1, Part I, line 6, column			<u> </u>	0.	Part I, line 6, column (B)	<u> </u>	0.
Schedule E - Unrelated Deb	t-Financed	income (see in	nstructions)	т -			
			2. Gross income from		<ol> <li>Deductions directly conne to debt-finance</li> </ol>		9
1. Description of debt-fin	anced property		or allocable to debt- financed property	(a) s	Straight line depreciation	(b) Other dec	
					(attach schedule)	STATEME	,
(1) DEBT-FINANCED REI	MTAI. TNC	OME FROM				SIATEME.	141 4
(2) 3RD PARTIES	MIAL INC	HOM I LINO.	2,969.				1,531.
(3)	-		2,303.	<b></b>		1	1,001.
(4)							
4 Amount of average acquisition	5 Average	adjusted basis	6. Column 4 divided		7 Gross income	8 Allocable	deductions
debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	allocable to inced property h schedule)	by column 5		reportable (column 2 x column 6)	(column 6 x tota 3(a) and	al of columns
	- lattao	Jonedaic)				-	
(1)		392,500.	100.00%	<b>_</b>	2,969.	+	1,531.
(2) 392,500.		392,500.			2,303.	<del>'</del>	£,331.
(3)			<u>%</u>	ļ		1	
(4)			%	<del> </del> -		<del> </del>	
					ter here and on page 1, art I, line 7, column (A)	Enter here and o Part I, line 7, co	
Totals			<b>&gt;</b>		2,969.	, 4	1,531.
Total dividends-received deductions in	cluded in columi	n 8	,				0.

Form 990-T (2018)

Schedule F - Interest, A	nnuitie	s, Royalt	ies, and	d Rents	From Co	ntrolle	d Organiza	itions	(see inst	tructions	s)
				Exempt C	Controlled O	rganızatı	ons			-	
Name of controlled organizate	on	2 Emp Identific numi	ation		elated income instructions)		tal of specified ments made	included	of column 4 th I in the contro ion's gross in	olling	6 Deductions directly connected with income in column 5
(1) PARKER RANCH,	INC.	99-032	22325				<u> </u>				
(2)											
(3)											
(4)								T			
Nonexempt Controlled Organia	zations	•		<del>*</del>		L.					
7 Taxable Income	8 Netu	inrelated incom see instructions		<b>9</b> . Total	of specified pays	nents	10. Part of colu in the controll gros	mn 9 that is ing organiz s income	s included ation's	with	ductions directly connected income in column 10
(1)				<u> </u>	350,	356.		350	356.	- 51	287,472.
(1)					330,	330.		330,	330.		201,112.
(2)											
(3)											<del></del>
_(4)				<u> </u>			Enter here and		1	Enter h	d columns 6 and 11 ere and on page 1, Part I,
							line 8,	column (A)			line 8, column (B)
Totals						<u> </u>		<u>350,</u>	356.		287,472.
Schedule G - Investme (see insti		me of a S	ection	501(c)(7	'), (9), or (	17) Org	ganization				
1 Desc	ription of inco	ome			2. Amount of	ıncome	3 Deduction directly connected (attach scheme)	ected	4 Set-a (attach se		5. Total deductions and set-asides (col 3 plus col 4)
(2)											
(3)											
(4)											
					Enter here and Part I, line 9, co						Enter here and on page 1, Part I, line 9, column (B)
Totals				<u> </u>		0.		-		-	0.
Schedule I - Exploited (see instru	•	Activity	Income	e, Other	Than Adv	ertisir/	ng Income				
Description of exploited activity	unrelated incom	Gross I business ne from business	directly of with pro of uni	penses connected oduction related s income	4 Net incor from unrelated business (comminus colum gain, comput through	d trade or olumn 2 n 3) If a e cols 5	5 Gross inc from activity is not unrela business inco	that ted	<b>6</b> Exp attributa colun	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(2)											
(3)											
(4)	page 1	re and on 1, Part I, , col (A)	page 1	re and on 1, Part I, , col (B)					-	······································	Enter here and on page 1, Part II, line 26
Totals		0.	-,	0.		_				-	0.
Schedule J - Advertision	ng Inco		nstruction		·				· · · · · ·		, 3.
Part I Income From					solidated	Basis				•	•
1 Name of periodical		2 Gross advertising income		3 Direct ertising costs	or (loss) (c col 3) If a g	tising gain ol 2 minus ain, compu arough 7			6. Reade costs		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)					-	7					
(2)					] .						-
(3)		-									-
(4)											
Totals (carry to Part II, line (5))	<b>&gt;</b>	(	). <u> </u>	0		. <u>.</u>			_		0 . Form <b>990-T</b> (2018)

## Form 990-T (2018) PARKER RANCH FOUNDATION TRUST 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)	Î						
(2)							
(3)							
(4)							
Totals from Part I	▶	0.	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)	<u> </u>	0.	0.				0.

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

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

Form **990-T** (2018)

		<del></del>		
FORM 990-T	DESCRIPTION OF	ORGANIZATION'S	PRIMARY UNRELATED	STATEMENT 1
	В	USINESS ACTIVIT	Y	

#### RELATED PARTY RENTS/DEBT FINANCED INCOME

TO FORM 990-T, PAGE 1

FORM 990-T	CONTRIBUTIONS	STATEMENT 2
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
NORTH HAWAII COMMUNITY	N/A	1,130,729.
HAWAII COMMUNITY FOUNDATION	N/A	471,137.
HAWAII PREPARATORY ACADEMY	N/A	376,909.
PARKER SCHOOL	N/A	376,909.
TOTAL TO FORM 990-T, PAGE 1, I	INE 20	2,355,684.

FORM 990-T	CONTRIBUTIONS SUMMARY		STATEMENT 3
CARRYOVER OF PRIOR YEA	ARS UNUSED CONTRIBUTIONS		
FOR TAX YEAR 2013 FOR TAX YEAR 2014 FOR TAX YEAR 2015 FOR TAX YEAR 2016 FOR TAX YEAR 2017	1,964,242 2,181,751 2,208,510 2,242,702 2,247,995		
TOTAL CARRYOVER TOTAL CURRENT YEAR 509	CONTRIBUTIONS	10,845,200 2,355,684	
TOTAL CONTRIBUTIONS AV		13,200,884 30,161	_
EXCESS 50% CONTRIBUTION TOTAL EXCESS CONTRIBUTE	<del></del>	13,170,723 13,170,723	
ALLOWABLE CONTRIBUTION	NS DEDUCTION		30,161
TOTAL CONTRIBUTION DE	DUCTION		30,161

FORM 990-T	SCHEDULE E - OT	HER DEDUCTIONS		STATEMENT 4
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
LEGAL FEES GENERAL & ADMINISTR PROFESSIONAL FEES TRUST OFFICE EXPENS			792. 2,764. 247. 688. 40.	
	- SUBTOTA	AL - 1		4,531.
TOTAL OF FORM 990-T	, SCHEDULE E, COLU	лмn 3(в)	-	4,531.

FORM 990-T SCHEDULE F - DEDUCTIONS OF CONTROLLED ORGANIZATIONS STATEMENT 5
DIRECTLY CONNECTED WITH COLUMN 10 INCOME

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
GENERAL & ADMINISTRATION		135,452.	
STATE INCOME TAX		2,449.	
PROFESSIONAL FEES		12,079.	
LEGAL FEES		38,776.	
ACCOUNTING FEES		8,719.	
REAL PROPERTY TAX		53,915.	
GENERAL EXCISE TAX		16,697.	
INTEREST EXPENSE		13,197.	•
TRUST OFFICE EXPENSE		6,188.	
- SUBTOTAL	- 1		287,472.
TOTAL OF FORM 990-T, SCHEDULE F, COLUMN	11		287,472.

# SCHEDULE I (Form 1041)

Name of estate or trust

### **Alternative Minimum Tax - Estates and Trusts**

➤ Attach to Form 1041

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0092

2018

Employer identification number

PA	RKER RANCH FOUNDATION TRUST	99-	6064620
Pa	rt I   Estate's or Trust's Share of Alternative Minimum Taxable Income		
1	Adjusted total income or (loss) (from Form 1041, line 17)	1	31,160.
2	Interest	2	
3	Taxes	3	
4	Reserved for future use	4	
5	Refund of taxes	5	()
6	Depletion (difference between regular tax and AMT)	6	
7	Net operating loss deduction. Enter as a positive amount	7	
8	Interest from specified private activity bonds exempt from the regular tax	8	
9	Qualified small business stock (see instructions)	9	<del></del>
10	Exercise of incentive stock options (excess of AMT income over regular tax income)	10	
11	Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	11	
12	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	12	
13	Disposition of property (difference between AMT and regular tax gain or loss)	13	
14	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT)	14	
15	Passive activities (difference between AMT and regular tax income or loss)	15	
16	Loss limitations (difference between AMT and regular tax income or loss)	16	
17	Circulation costs (difference between regular tax and AMT)	17	
18	Long-term contracts (difference between AMT and regular tax income)	18	
19	Mining costs (difference between regular tax and AMT)	19	
20	Research and experimental costs (difference between regular tax and AMT)	20	,
21	Income from certain installment sales before January 1, 1987	21	)
22	Intangible drilling costs preference	22	<u> </u>
23	Other adjustments, including income-based related adjustments	23	,
24	Alternative tax net operating loss deduction (See the instructions for the limitation that applies.)	25	31,160.
25	Adjusted alternative minimum taxable income. Combine lines 1 through 24	_23	31,100.
00	Note: Complete Part II below before going to line 26.  Income distribution deduction from Part II, line 44  N/A  26		
26	27/2	=	
27	Estate tax deduction (from Form 1041, line 19)  Add lines 26 and 27	28	
28 29	Estate's or trust's share of alternative minimum taxable income. Subtract line 28 from line 25	29	31,160.
29	If line 29 is:	_23	32/2001
	• \$24,600 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 \$24,600, but less than \$180,300, go to line 45.		
	• \$180,300 or more, enter the amount from line 29 on line 51 and go to line 52.		
IPa	art II   Income Distribution Deduction on a Minimum Tax Basis N/A		
30	Adjusted alternative minimum taxable income (see instructions)	30	
31	Adjusted tax-exempt interest (other than amounts included on line 8)	31	
32	Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-	32_	
33	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)	33	
34	Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)	34	
35	Capital gains computed on a minimum tax basis included on line 25	35	(
36	Capital losses computed on a minimum tax basis included on line 25. Enter as a positive amount	36	
37	Distributable net alternative minimum taxable income (DNAMTI). Combine lines 30 through 36. If zero or less, enter -0-	37	
38	Income required to be distributed currently (from Form 1041, Schedule B, line 9)	38	
39	Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)	39	
40	Total distributions. Add lines 38 and 39	40	
41	Tax-exempt income included on line 40 (other than amounts included on line 8)	41	
42	Tentative income distribution deduction on a minimum tax basis. Subtract line 41 from line 40	42	

Schedule I (Form 1041) (2018)

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

Sche	dule   (Form 1041) (2018) PARKER RANCH FOUNDATION TRUST			99-6	5064620	Page 2
	THE PARTY OF THE P	contir	nued)	N/A		
43	Tentative income distribution deduction on a minimum tax basis. Subtract line 31 from line 37	<u>'.                                    </u>	•			
	If zero or less, enter -0-			43		
44	Income distribution deduction on a minimum tax basis   Enter the smaller of line 42 or line 4	13.				
	Enter here and on line 26			44		
Pa	rt III   Alternative Minimum Tax					
45	Exemption amount			45	\$24,600 0	0
46	Enter the amount from line 29	46	31,160.	_		
47	Phase-out of exemption amount	47	\$81,900 00	4 1		
48	Subtract line 47 from line 46. If zero or less, enter -0-	48	0.			_
49	Multiply line 48 by 25% (0.25)			49		0.
50	Subtract line 49 from line 45. If zero or less, enter -0-			50		600.
51				51		560.
52	Go to Part IV of Schedule I to figure line 52 if the estate or trust has qualified dividends or has					
	of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary). Otherwise	, if line	51 is -			
	• \$191,100 or less, multiply line 51 by 26% (0.26).				1	706
	• Over \$191,100, multiply line 51 by 28% (0.28) and subtract \$3,822 from the result			52		706.
53	Alternative minimum foreign tax credit (see instructions)			53	1	706.
54	Tentative minimum tax. Subtract line 53 from line 52	- C I	·• 0•\	54		546.
55 50	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit from Schedul Alternative minimum tax. Subtract line 55 from line 54. If zero or less, enter -0 Enter here			55		, 340.
56	Form 1041, Schedule G, line 1c	anu on		56		0.
I Pa	rt IV   Line 52 Computation Using Maximum Capital Gains Rate			1 30 1		
<u>,</u>	Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D Tax Works			1		
	or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the instruction					
	before completing this part.					
57	Enter the amount from line 51			57		
	Enter the amount from Schedule D (Form 1041), line 26, 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)	58				
59	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-	59				
60	If you didn't complete a Schedule D Tax Worksheet for the regular tax or the					
	AMT, enter the amount from line 58. Otherwise, add lines 58 and 59 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)	60		<b>_</b>		
61	Enter the smaller of line 57 or line 60			61		
62	Subtract line 61 from line 57			62		
63	If line 62 is \$191,100 or less, multiply line 62 by 26% (0.26). Otherwise, multiply line 62 by		_			
	28% (0.28) and subtract \$3,822 from the result			63		
64	Maximum amount subject to the 0% rate	64	\$2,600 00	-		
65	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	CF				
60	from Form 1041, line 22; if zero or less, enter -0-	65		┥		
66	Subtract line 65 from line 64. If zero or less, enter -0-	66 67				
67	Enter the smaller of line 57 or line 58	68				
68 60	Enter the <b>smaller</b> of line 66 or line 67. This amount is taxed at 0% Subtract line 68 from line 67	69	<u>.                                    </u>	┥ │		
69	Subtract line 66 from line 67	UJ		Sche	dule I (Form 10	41) (2018)

Schedule I (Form 1041) (2018)

Pa	rt IV   Line 52 Computation Using Maximum Capital Gains Rate	s (co	ntınued) _		
70	Maximum amount subject to rates below 20%	70	\$12,700,00		
71	Enter the amount from line 66	71		╛	
72	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 22; if zero or less, enter -0-	72			
73	Add line 71 and line 72	73			
74	Subtract line 73 from line 70. If zero or less, enter -0-	74			
75	Enter the smaller of line 69 or 74	75		]	
76	Multiply line 75 by 15% (0.15)		<b>•</b>	76	
77	Add lines 68 and 75	77		-	
	If lines 77 and 57 are the same, skip lines 78 through 82 and go to line 83. Otherwise, go	to line	78	]	
78	Subtract line 77 from line 67	78			_
79	Multiply line 78 by 20% (0.20)		<b>•</b>	79	
	If line 59 is zero or blank, skip lines 80 through 82 and go to line 83. Otherwise, go to line	80		-	
80	Add lines 62, 77, and 78	80		•	
81	Subtract line 80 from line 57	81			
82	Multiply line 81 by 25% (0.25)		▶	82	
83	Add lines 63, 76, 79, and 82			83	
84	If line 57 is \$191,100 or less, multiply line 57 by 26% (0.26). Otherwise, multiply line 57 by 2	8% (0.2	28)		
	and subtract \$3,822 from the result			84	
85	Enter the smaller of line 83 or line 84 here and on line 52			85	

#### PARKER RANCH FOUNDATION TRUST

EIN: 99-6064620

ATTACHMENT TO FORM 990-T, PART 1, LINE 5

#### INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS

Partnership	EIN	Flow through unrelated business income
GS Capital Partners VI Parallel, L P	43-2115554	-1
Vintage VII AIV Offshore SCSP	98-1351727	0
TOTAL INCOME (LOSS)		-1