723701 01-22-18 LHA For Paperwork Reduction Act Notice, see instructions.

-98,656. Form **990-T** (2017)

EOT011_2

line 32

Part I	III Tax Computation											
35	Organizations Taxable as Corporations. See instructions for tax computation.	\$600 E										
	Controlled group members (sections 1561 and 1563) check here ▶ ☐ See instructions and:											
а	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):											
	(1) \$ (2) \$ (3) \$											
b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)	i i										
	(2) Additional 3% tax (not more than \$100,000) \$											
c	Income tax on the amount on line 34	350 0.										
36	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:	****										
	Tax rate schedule or Schedule D (Form 1041)	36										
37	Proxy tax. See instructions	37										
38	Alternative minimum tax	38										
39	Tax on Non-Compliant Facility Income. See instructions	39										
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies	40 0.										
Part IV, Tax and Payments												
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 41a	25.63										
	Other credits (see instructions) 41b											
c	General business credit. Attach Form 3800	152 1										
	Credit for prior year minimum tax (attach Form 8801 or 8827) 41d											
	Total credits. Add lines 41a through 41d	41e										
42	Subtract line 41e from line 40	42 0.										
43	Other taxes, Check if from. Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)											
44	Total tax. Add lines 42 and 43	44 0.										
	Payments: A 2016 overpayment credited to 2017	865-73										
	2017 estimated tax payments											
	Tax deposited with Form 8868	- 										
	Foreign organizations: Tax paid or withheld at source (see instructions)	⊣⊁≨∣										
	Backup withholding (see instructions) 45e											
	Credit for small employer health insurance premiums (Attach Form 8941) . 45f	- LOSI										
y	Other credits and payments: Form 2439 Total Form 4136 Other Total 45g											
AC	Total payments. Add lines 45a through 45g	46										
46 47	Estimated tax penalty (see instructions). Check if Form 2220 is attached	47										
47 48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed	48 0.										
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	49 0.										
50	Enter the amount of line 49 you want: Credited to 2018 estimated tax	50										
	Statements Regarding Certain Activities and Other Information (see instructions)	1 30 1										
51	At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority	Yes No										
31	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file											
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country											
	here	X 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?	$\frac{1}{x}$										
32	If YES, see instructions for other forms the organization may have to file.	200ES. 304CSSS										
53	Enter the amount of tax-exempt interest received or accrued during the tax year >\$											
		nowledge and belief, it is true,										
Sign	Under penalties of perjury, I declare hat I have examined this return, including accompanying schedules and statements, and to the best of my k correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge											
Here	K. Kulail 11.2-18 Director	May the IRS discuss this return with										
	Signature of officer Date Title	the preparer shown below (see instructions)? X Yes No										
	Print/Type preparer's name Preparer's signature Date Check	ıf PTIN										
	Print/Type preparer's name Preparet's signature Date Check	i										
Paid	UDV MRIICE COMPANY ////// //// ///// /////////////////	P00633599										
Prepa	THE THE PROPERTY OF THE PROPER											
Use (Only PHES NAME PARK TROST COMPANY 201 SOUTH PHILLIPS AVE, STE 214	<u> </u>										
		605-271-5035										
	Trinita auditosa P DIOON TADDO, DD 3/104	Form 990-T (2017)										
		FORM 330-1 (2017)										

FORM 990-T	-	DESCRIPTION	OF	ORGANIZATION'S	PRIMARY	UNRELATED	STATEMENT	15
BUSINESS ACTIVITY								

PRIVATE EQUITY INVESTMENTS REPORTED ON FORM 1065 SCHEDULE K-1

TO FORM 990-T, PAGE 1

FORM 990-T INCOME (LOSS	S) FROM PARTNERS	FROM PARTNERSHIPS		16
PARTNERSHIP NAME	GROSS INCOME	DEDUCTIONS	NET INCOM	
HRK ENDOWMENTS LLP	-97,032.	1,624.	-98,6	56.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	-97,032.	1,624.	-98,6	56.