Form 990-T	Exempt Organization Bus	sine	ess Income T	ax Returi	arrho $_{ot}$	OMB No 1545-0687
	(and proxy tax und	der se	ection 6033(e))			2047
	For calendar year 2017 or other tax year beginning JUL 1, 20	017	, and ending JUN	30, 2018		201/
Department of the Treasury	● Go to www.irs gov/Form990T for i ● Do not enter SSN numbers on this form as it ma				্ৰ তুন	en to Public Inspection
Internal Revenue Service	<u> </u>			ation is a so i(c)(s)		1(c)(3) Organizations On r identification number
A Check box if address changed	Name of organization (Check box if name of CHOATE ROSEMARY HALL FOUNDATION,	cnanged	and see instructions.)			ees trust, see
B Exempt under section	Print INCORPORATED				06-	0910420
x 501(c)(3 0)	or Number, street, and room or suite no. If a P.O. bo	X, S66 II	nstructions			d business activity code ructions }
408(e)220(e)	Type 333 CHRISTIAN STREET]	·
408A 530(a)	City or town, state or province, country, and ZIP of	or foreig	n postal code			
529(a)	WALLINGFORD, CT 06492-3818				900002	523000
C Book value of all assets at end of year	F Group exemption number (See instructions.)	<u> </u>	-	401/0	\	Othertwiet
	, 486.			401(a	•	Other trust
	the corporation a subsidiary in an affiliated group or a pare			▶	Yas	X No
	and identifying number of the parent corporation.	iii bubu	ratary contributed greap			
	HEATHER LAFONTAINE		Telepho	one number 🕨 2	03-697-	2676
	d Trade or Business Income		(A) Income	(B) Expense		(C) Net
1a Gross receipts or sale	os .					
b Less returns and allow	wances c Balance	1c				
2 Cost of goods sold (S	Schedule A, line 7)	2				
3 Gross profit Subtract	line 2 from line 1c	3				
4a Capital gain net incom	ne (attach Schedule D)	4a	279,606.		ŀ	279,606
b Not gain (loss) (Form	4797, Part II, lino 17) (attach Form 4797)	4b				
 Capital loss deduction 	ı for trusts	4c				
, , ,	artnerships and S corporations (attach statement)	5	-751,916	STMT 1		-751,916
6 Rent income (Schedu	·	6				
	ed income (Schedule E)	7			-	
	yalties, and rents from controlled organizations (Sch. F)	8 9			-	
	f a section 501(c)(7), (9), or (17) organization (Schedule G)	10				
10 Exploited exempt activities11 Advertising income (S	vity income (Schedule I)	11				
• .	STRUCTIONS, attach schedule) SEE STATEMENT 2	12	248,311.			248,311
13 Total. Combine lines		13	-223,999.			-223,999
	ns Not Taken Elsewhere (See instructions fo	oi limita	ations on deductions)		•	
(Except for d	contributions, deductions must be directly connecte	d with	the unrelated business	s income)	_	
14 Compensation of offi	icers, directors, and trustees (Schedule K)				14	
15 Salaries and wages	·		\neg		15	95,261
16 Repairs and mainten	ance	ED			16	- •
17 Bad debts	RECEIVE		78 <u> </u>		17	
18 Interest (attach sche	dule)	Pinc	/ <i>Ö</i> /		18	1,428
19 Taxes and licenses	dule) ons (See instructions for limitation rules) MAY 20 Form 4562)	Zuis	IRS-OSC		19 20	1,420
20 Charitable contribution	ons (See instructions for infiltation (ens.)		T 21	83,824.	20	-
21 Depreciation (attach 22 Locs depreciation old	Form 4562) aimod on Schodulo A and olcowhoro on roturn GDE	N, U	22a		22h	83,824
23 Depletion	Willog on actioning valle dicoming all total 2007.		22.1		23	
24 Contributions to defe	erred compensation plans				24	
25 Employee benefit pro					25	
26 Excess exempt exper	-				26	
27 Excess readership co					27	
28 Other deductions (at	•		SEE STATEMENT	r 3	28	79,473
•	dd lines 14 through 28				29	259,986
30 Unrelated business to	axable income before net operating loss deduction. Subtrac	ct line 29	9 from line 13		30	-483,985
31 Net operating loss de	eduction (limited to the amount on line 30)		SEE STATEMENT	r 4	31	
	axable income before specific deduction. Subtract line 31 fr		30		32	-483,985
	Generally \$1,000, but see line 33 instructions for exceptions				33	1,000
	taxable income. Subtract line 33 from line 32. If line 33 is	greater	than line 32, enter the sm	aller of zero or	34	402 00=
line 32					34	-483,985

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

Form **990-T** (2017)

Form 990-T (2017)

06-1009205

Use Only

Firm's name BLUM, SHAPIRO & COMPANY, P.C.

Firm's address BOSTON, MA 02110

ONE INTERNATIONAL PLACE, 16TH FL

Firm's EIN

Phone no 617-717-0831

Form 990-T (2017) INCORPORATED

Schedule A - Cost of Goods Sold. En	ter method of invei	ntory valuation N/A					
1 Inventory at beginning of year 1		6 Inventory at end of year	ar		6		
2 Purchases 2		7 Cost of goods sold S	ubtract li	пе 6			
3 Cost of labor 3		from line 5. Enter here and in Part I,			ŀ	1	,
4a Additional section 263A costs					7		
(attach schedule) 4a		8 Do the rules of section	263A (v	vith respect to		Yes	No
b Other costs (attach schedule) 4b		property produced or a	acquired	for resale) apply to			
5 Total. Add lines 1 through 4b 5		the organization?					
Schedule C - Rent Income (From Re (see instructions)	al Property an	d Personal Property	Lease	ed With Real Pro	pert	y)	
1. Description of property	_				_		
(1)							
(2)							1
(3)	•			- -			
(4)							
2. Rent red	eived or accrued			2/a) D-d			
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	of rent for p	and personal property (if the percent personal property exceeds 50% or if nt is based on profit or income)		3(a) Deductions directly columns 2(a) a	nd 2(b) (attach schedule)	ın
(1)							
(2)							
(3)		<u> </u>					
(4)				· ·			
Total 0	Total	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	0.				
(c) Total income Add totals of columns 2(a) and 2(b) here and on page 1, Part I, line 6, column (A)		-	0.	(b) Total deductions Enter here and on page 1 Part I, line 6 column (B)	>		0.
Schedule E - Unrelated Debt-Finance	ed Income (see	instructions)					
		2 Gross income from		 Deductions directly conto debt-finance 	nected	with or allocable	
Description of debt-financed property		or allocable to debt-	(a) s	Straight line depreciation	1	(b) Other deduction	
Description of debt-financed property		financed property	, ,	(attach schedule)		(attach schedule)	
(1)							
(2)							
(3)							
(4)							
debt on or allocable to debt-financed of opening property (attach schedule) debt-f	ige adjusted basis or allocable to inanced property ach schedule)	6 Calumn 4 divided by calumn 5		7 Gross income reportable (column 2 x column 6)	(4	8 Allocable deduct column 6 x total of co 3(a) and 3(b))	
(1)		%			7		
(2)		%			1		
(3)		%					
(4)		%			Î		
<u> </u>				ter here and on page 1, art I line 7, column (A)		nter here and on pag Part I line 7, column	
Totals		>		0			٥.
Total dividends-received deductions included in colu	mn 8			>			0.

	[Exempt	Controlled O	rganızatı	ons				
1. Name of controlled organiza	ident	mployer ification mber	3 Net unr (loss) (see	related income e instructions)		at of specified ments made	includ	t of column 4 ed in the cont ation's gross	trolling	Deductions directly connected with income in column 5
(1)			 						-	
(2)										
(3)										
(4)										
Nonexempt Controlled Organ	nizations									
7. Taxable Income	8. Net unrelated inco (see instructio		9. Total	of specified payr made	nents	10 Part of colur in the controlli gross		ization s		ductions directly connecte i income in column 10
(1)			1			•				
(2)			Ì							
(3)										
(4)		_	I							
						Add colum Enter here and line 8, c		1 Parti,	Enter h	ld columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
Totals					<u> </u>			٥.		
Schedule G - Investme		Section	1 501(c)(7), (9), or ((17) Or	ganization	1			
(see inst	tructions)					_				
1 Desc	cription of income			2. Amount of	ncome	3 Deduction directly connect (attach sched	cted	4 Set-a (attach s		5 Total deductions and set-asides (col 3 plus col 4)
(1)										
(2)										
(3)										
(4)										
				Enter here and o Part I line 9, col	umn (A)					Enter here and on page Part I line 9, column (B)
otals Schedule I - Exploited (see instru	-	y Incom	e, Othe	r Than Ad	0. vertisi	ng Income				
Description of exploited activity	2 Gross unrelated business income from trade or business	directly of with pro of uni	penses connected oduction related s income	4. Net incomfrom unrelated business (col minus column gain compute through	trade or umn 2 3) If a cols 5	5. Gross inco from activity If is not unrelate business incol	nat ed	6 Exp attributa colun	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)										
(2)										
(3)										
(4)										
<u> </u>	Enter here and on page 1, Part I, line 10 col (A)	Enter hei page † line 10					1			Enter here and on page 1, Part II, line 26
	1		0.							
otals	0.									-
		L. instruction	ns)							
Schedule J - Advertisi				solidated	Basis					
Schedule J - Advertisi Part I Income From I	ng Income (see Periodicals Rep 2 Gross	oorted o	n a Cons	4 Advertis	sing gain I 2 minus	5 Circulati	оп	6 Reade		7 Excess readership costs (column 6 minus
Schedule J - Advertisi Part I Income From 1 Name of periodical	ng Income (see Periodicals Rep	oorted o	n a Con	4 Advertis	sing gain I 2 minus in, compute		on	6 Reade costs		
Schedule J - Advertisi Part I Income From 1 Name of periodical	ng Income (see Periodicals Rep 2 Gross advertising	oorted o	n a Cons	4 Advertis or (loss) (co col 3) If a gal	sing gain I 2 minus in, compute		on			costs (column 6 minus column 5 but not more
Schedule J - Advertisi Part I Income From 1 Name of periodical (1)	ng Income (see Periodicals Rep 2 Gross advertising	oorted o	n a Cons	4 Advertis or (loss) (co col 3) If a gal	sing gain I 2 minus in, compute		ОП			costs (column 6 minus column 5 but not more
Schedule J - Advertisi Part I Income From 1 Name of periodical (1) (2) (3)	ng Income (see Periodicals Rep 2 Gross advertising	oorted o	n a Cons	4 Advertis or (loss) (co col 3) If a gal	sing gain I 2 minus in, compute		on			costs (column 6 minus column 5 but not more
Schedule J - Advertisi Part I Income From 1 Name of periodical (1) (2) (3)	ng Income (see Periodicals Rep 2 Gross advertising	oorted o	n a Cons	4 Advertis or (loss) (co col 3) If a gal	sing gain I 2 minus in, compute		on			costs (column 6 minus column 5 but not more
	ng Income (see Periodicals Rep 2 Gross advertising	oorted o	n a Cons	4 Advertir or (loss) (co col 3) If a ga cols 5 the	sing gain I 2 minus in, compute		on			costs (column 6 minus column 5 but not more

	(2011) INCOME GIGHTED	06-0910420
Part II	Income From Periodicals Reported on a Separate Basis (For each periodical liste	d 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.				0.
	Enter here and on page 1, Part I line 11, col (A)	Enter here and on page 1, Part I, (ine 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	n of Officers,	Directors, and	Trustees (see in:	structions)		

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		' %	
(4)		%	
otal Enter here and on page 1, Part II, line 14		•	

Form 990-T (2017)

Alternative Minimum Tax - Corporations

Attach to the corporation's tax return

▶ Go to www.irs gov/Form4626 for instructions and the latest information.

OMB No 1545-0123

Name	CHOATE ROSEMARY HALL FOUNDATION,			Employer identification number
	INCORPORATED			06-0910420
	Note: See the instructions to find out if the corporation is a small corporation exempt			
	from the alternative minimum tax (AMT) under section 55(e).		1	
			1.	
1	Taxable income or (loss) before net operating loss deduction		1	-483,985.
2	Adjustments and preferences:			<u> </u>
а	Depreciation of post-1986 property		2a	2,385.
b	Amortization of certified pollution control facilities		2b	
c	Amortization of mining exploration and development costs		20	
d	Amortization of circulation expenditures (personal holding companies only)		2d	
е	Adjusted gain or loss		2e	-1,466.
f	Long-term contracts .		21	
g	Merchant marine capital construction funds		2g	
h	Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)		2h	
1	Tax shelter farm activities (personal service corporations only)		21	
i	Passive activities (closely held corporations and personal service corporations only)		2)	
k	Loss limitations		2k	
- 1	Depletion		21	
n	Tax-exempt interest income from specified private activity bonds		2m	
n	Intangible drilling costs		2n	197,001.
0	Other adjustments and preferences	SEE STATEMENT 6	20	303,213.
3	Pre-adjustment alternative minimum taxable income (AMTI) Combine lines 1 through 20		3	17,148.
4	Adjusted current earnings (ACE) adjustment:			·
a	ACE from line 10 of the ACE worksheet in the instructions	4a 17,148	.]	
ь	Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a		1 1	
	negative amount. See instructions	4b 0	.	
c		4c	1	
d	Enter the excess, if any, of the corporation's total increases in AMTI from prior		1	
	year ACE adjustments over its total reductions in AMTI from prior year ACE	1 1		
	adjustments. See instructions. Note : You must enter an amount on line 4d	1 1		
	(even if line 4b is positive)	44		
8	ACE adjustment	1 1	┪	
	If line 4b is zero or more, enter the amount from line 4c	3		
	If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount	\	4e	0.
5	Combine lines 3 and 4e If zero or less, stop here; the corporation does not owe any AMT	J	5	17,148.
6	Alternative tax net operating loss deduction. See instructions	SEE STATEMENT 7	8	15,433.
7	Alternative minimum taxable income Subtract line 6 from line 5. If the corporation held a	residual	 	,
•	interest in a REMIC, see instructions		7	1,715.
8	Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on l	ine 8c)		
	Subtract \$150,000 from line 7 If completing this line for a member of a controlled			
_	group, see instructions. If zero or less, enter -0-	8a 0		
h	Multiply line 8a by 25% (0 25)	8b 0	4	
	Exemption. Subtract line 8b from \$40,000. If completing this line for a member of a control	 	1	
·	group, see instructions If zero or less, enter -0-		8c	40,000.
9	Subtract line 8c from line 7. If zero or less, enter -0-		9	0.
10	Multiply line 9 by 20% (0 20)		10	0.
11	Alternative minimum tax foreign tax credit (AMTFTC) See instructions		11	
12	Tentative minimum tax Toreign tax credit (AMTETO) See instructions Tentative minimum tax. Subtract line 11 from line 10		12	0.
13			13	
14	Regular tax liability before applying all credits except the foreign tax credit Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0- Enter here	and on	"	· · · · · · · · · · · · · · · · · · ·
. ~	Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return		14	0.
IVA/A	For Paperwork Reduction Act Notice, see separate instructions	·	1 17	Form 4826 (2017)

A	djusted Current Earnings (· · · · · · · · · · · · · · · · · · ·		
	DUO HOE VVOINGHOUTHIST			
1 Pre-adjustment AMTI. Enter the amount from lin	1	17,148.		
2 ACE depreciation adjustment:		1 - 1		
a AMT depreciation		2a		
b ACE depreciation.		→		
(1) Post-1993 property	2b(1)			
(2) Post-1989, pre-1994 property	2b(2)			
(3) Pre-1990 MACRS property	2b(3)	⊣		
(4) Pre-1990 original ACRS property	2b(4)			
(5) Property described in sections	1 1			
168(f)(1) through (4)	2b(5)			
(6) Other property	2b(6)	_		
(7) Total ACE depreciation Add lines 2b(1) to	arough 2b(6)	2b(7)		
c ACE depreciation adjustment. Subtract line 2b(7	•		2c	
3 Inclusion in ACE of items included in earnings a	nd profits (E&P).	1 1		
a Tax-exempt interest income		3a		
b Death benefits from life insurance contracts		3b		
c All other distributions from life insurance contra	, -	3c		
d Inside buildup of undistributed income in life ins	urance contracts	3d	\ \ \	
e Other Items (see Regulations sections 1.56(g)-1	(c)(6)(III) through (IX)			
for a partial list)		36		
f Total increase to ACE from inclusion in ACE of it	gh 3e	3f		
4 Disallowance of items not deductible from E&P:		1 1		
a Certain dividends received		48		
b Dividends paid on certain preferred stock of public utilities	es that are deductible under section 247 (as			
affected by P.L. 113-295 Div. A. section 221(a)(41)(A). De	ec 19, 2014 128 Stat 4043)	4b		
c Dividends paid to an ESOP that are deductible u	nder section 404(k)	4c		
d Nonpatronage dividends that are paid and deduc	ctible under section	1 1		
1382(c)		4d		
e Other Items (see Regulations sections 1 56(g)-1	(d)(3)(ı) and (ıı) for a			-
partial list)		4e		
.f. Total increase to ACE-because of disallowance of	f.items.not.deductible.from.E&P. Add.lin	es 4a through 4e	<u>_4</u> f	
5 Other adjustments based on rules for figuring E&	&P.	1 1		
a Intangible drilling costs		5a		
b Circulation expenditures		5b		
c Organizational expenditures		5c		
d LIFO inventory adjustments		5d	l	
e Installment sales		5e		
f Total other E&P adjustments Combine lines 5a t	through 5e		51	
6 Disallowance of loss on exchange of debt pools			6	
7 Acquisition expenses of life insurance companie	s for qualified foreign contracts		7	
8 Depletion			8	
9 Basis adjustments in determining gain or loss from			9	
10 Adjusted current earnings Combine lines 1, 2c	, 31, 41, and 51 through 9 Enter the result	t here and on line 4a of	[[
Form 4626			10	17,148.

FORM 990-1	•	OSS) FROM PARTNERS S CORPORATIONS	SHIPS	STATEMENT
DESCRIPTIO	DN		^	AMOUNT
SEE STMT	1			-751,916
TOTAL TO F	FORM 990-T, PAGE 1	, LINE 5		-751,916
FORM 990-1	1	OTHER INCOME		STATEMENT 2
DESCRIPTIO) DN			AMOUNT
ICE RINK RATHLETICS PRIVATE PA BUSINESS R WEDDINGS	RENTALS ARTY RENTALS	,		157,263 53,862 2,705 10,757 23,724
TOTAL TO F	ORM 990-T, PAGE 1,	, LINE 12		248,311
FORM 990-T		OTHER DEDUCT	IONS	STATEMENT 3
DESCRIPTIO	N			AMOUNT
LEGAL AND MISCELLANE SUPPLIES UTILITIES JANITORIAL				605 439 37,107 34,239 7,083
TOTAL TO F	ORM 990-T, PAGE 1,	LINE 28	,	79,473
FORM 990-T	NET	OPERATING LOSS I	DEDUCTION	STATEMENT 4
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/99 06/30/04 06/30/06 06/30/07 06/30/08	3,795,258. 10,050. 45,879. 119,049. 3,530.	52,103. 0. 0. 0.	3,743,155. 10,050. 45,879. 119,049. 3,530.	3,743,155. 10,050. 45,879. 119,049. 3,530.

CHOATE ROSEMA	ARY HALL FOUNDATI	ON, INCORPO	t	06-0910	420
06/30/09	45,876.	0.	45,876.	45,87	76.
06/30/10	133,668.	0.	133,668.	133,66	68.
06/30/12	253,263.	0.	253,263.	253,26	
06/30/13	185,651.	0.	185,651.	185,65	51.
06/30/14	309,354.	0.	309,354.	309,35	54.
06/30/15	533,721.	0.	533,721.	533,72	21.
06/30/16	443,341.	0.	443,341.	443,34	41.
NOL CARRYOVER A	AVAILABLE THIS YE	AR	5,826,537.	5,826,53	37.
					,
FORM 990-T		REIGN COUNTRY IN HAS FINANCIAL		STATEMENT	5
SPAIN FRANCE			\		•
- ·	ОТН	ER AMT ADJUSTME		STATEMENT	6
FORM 4626	OTH	ER AMT ADJUSTME		STATEMENT	6
FORM 4626	OTH	ER AMT ADJUSTME		e eu variante frontesta e	
FORM 4626 DESCRIPTION		ER AMT ADJUSTME		AMOUNT	213.
FORM 4626 DESCRIPTION		ER AMT ADJUSTME		AMOUNT	213.
FRANCE FORM 4626 DESCRIPTION TOTAL TO FORM 4	626, LINE 20	ER AMT ADJUSTME	ENTS	AMOUNT	213.
FORM 4626 DESCRIPTION TOTAL TO FORM 4 FORM 4626	626, LINE 20 ALTERNATIVE	MINIMUM TAX NO	ENTS DL DEDUCTION LOSS	AMOUNT 303,:	213.
FORM 4626 DESCRIPTION TOTAL TO FORM 4 FORM 4626	626, LINE 20 ALTERNATIVE	MINIMUM TAX NO	ENTS DL DEDUCTION	AMOUNT 303,:	213.

388,838.

AMT NOL CARRYOVER AVAILABLE THIS YEAR

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

CHOATE ROSEMARY HALL FOUNDATION, INCORPORATED

Employer identification number

06-0910420

Part I Short-Term Capital Ga	ains and Losses - As	sets Held One Year	or Less		
See instructions for how to figure the amounts to enter on the lines below	(d) Proceeds	(e) Cost	(g) Adjustments to gain or loss from Form(s) 8949,		(h) Gain or (loss) Subtract
This form may be easier to complete if you round off cents to whole dollars	(sales price)	(or other basis)	Part I, line 2, column (g)		column (e) from column (d) and combine the result with column (g)
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				$\neg \uparrow$	
Form(s) 8949 with Box A checked				-	
2 Totals for all transactions reported on				ヿ	
Form(s) 8949 with Box B checked		,			
3 Totals for all transactions reported on				\neg	
Form(s) 8949 with Box C checked		3,418.		ĺ	-3,418.
4 Short-term capital gain from installment sale:	from Form 6252, line 26 or 3	7	Ĭ.	4	
5 Short-term capital gain or (loss) from like-kir	d exchanges from Form 8824			5	
6 Unused capital loss carryover (attach compu	tation)			8	()
7 Not short torm capital gain or (loss) Combin	io linos 1a through 6 in column	ı h		7	-3,418.
Part II Long-Term Capital Ga	ins and Losses - Ass	ets Held More Than	One Year		
See instructions for how to figure the amounts to enter on the lines below	(d)	(e)	(g) Adjustments to gain	\Box	(h) Gain or (loss) Subtract
This form may be easier to complete if you round off cents to whole dollars	Proceeds (sales price)	Cost (or other basis)	or loss from Form(s) 8949, Part II line 2, column (g)	c	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 transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked				\dashv	
9 Totals for all transactions reported on				- 1	
Form(s) 8949 with Box E checked				-	
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked	209,010.			_	209,010.
11 Enter gain from Form 4797, line 7 or 9			⊢	11	74,014.
12 Long-term capital gain from installment sales	·	7	⊢	12	
13 Long-term capital gain or (loss) from like-kin	d exchanges from Form 8824		⊢	13	
14 Capital gain distributions			—	14	
15 Net long-term capital gain or (loss). Combin		n h		15	283,024.
Part III Summary of Parts I an					
16 Enter excess of net short-term capital gain (III	, , , , ,	, ,		16	
17 Net capital gain Enter excess of net long-term		· ·	′ ⊢	17	279,606.
18 Add lines 16 and 17 Enter here and on Form		oper line on other returns. If th		_	
has qualified timber gain, also complete Part				18	279,606.
Note if losses exceed gains, see Capital loss	es in the instructions				

JWA For Paperwork Reduction Act Notice, see the Instructions for Form 1120 Schedule D (Form 1120) 2017

Schedule D (Form 1120) 2017 INCORPORATED		06-0910420	Page 2
Part IV Alternative Tax for Corporations with Qualified 1			
qualified timber gain under section 1201(b) Skip this part if you are filing	Form 1120-RIC See instruct	ions	
19 Enter qualified timber gain (as defined in section 1201(b)(2))	19		
20 Enter taxable income from Form 1120, page 1, line 30, or the applicable line			
of your tax return	20		
21 Enter the smallest of: (a) the amount on line 19, (b) the amount on line 20; or			
(c) the amount on Part III, line 17	. 21		
22 Multiply line 21 by 23 8% (0 238)		22	
23 Subtract line 17 from line 20. If zero or less, enter -0-	23		
24 Enter the tax on line 23, figured using the Tax Rate Schedule (or applicable tax rate) a	opropriate for		
the return with which Schedule D (Form 1120) is being filed	, ,	24	
25 Add lines 21 and 23	25		
26 Subtract line 25 from line 20 If zero or less, enter -0-	26		
27 Multiply line 26 by 35% (0.35)		27	
28 Add lines 22, 24, and 27		28	
29 Enter the tax on line 20, figured using the Tax Rate Schedule (or applicable tax rate) at	oroonate for the		
return with which Schedule D (Form 1120) is being filled	propriate for the	29	
OD Enter the smaller of line 28 or line 20. Also enter this amount on Form 1129, Schedule	Line 2 or the		
applicable line of your tax return	-1 1) W	30	
approad in or you an rotati			orm 1120) 2017

Department of the Treasur 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

Name(s) shown on return

CHOATE ROSEMARY HALL FOUNDATION,

INCORPORATED

Social security number or taxpayer identification no.

06-0910420

Before you check Box A, B, or C below, see whether you receiv	ved any Form(s) 1	1099-B or substitute statement(s):	from your broker A substitute
statement will have the same information as Form 1099-B. Eith	er will show whet	ther your basis (usually your cost) i	was reported to the IRS by your
proker and may even tell you which box to check			

statement will have the same inform broker and may even tell you which	nation as Form 10						
Part I Short-Term. Transac Note: You may aggregate a codes are required. Enter the	ctions involving o	ctions reported on	Form(s) 1099-B show	wing basis was repor	ted to the If	RS and for which no	adjustments or
You must check Box A, B, or C below. If you have more short-term transactions than we (A) Short-term transactions re (B) Short-term transactions re (C) Short-term transactions n	vill fit on this page for e eported on Form(eported on Form(one or more of the books s) 1099-B shows s) 1099-B shows	kes, complete as many fo ng basis was repo ng basis wasn't re	orms with the same box inted to the IRS (se	checked as y	ou need	for each applicable box
1 (a) Description of property (Example 100 sh. XYZ Co)	(b) Date acquired (Mo day, yr)	(c) Date sold or disposed of (Mo , day, yr)	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and see Column (e) in the instructions	loss. If your column	nt, if any, to gain or ou enter an amount (g), enter a code in). See instructions (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
SEE STMT	VARIOUS	VARIOUS	0.	3,418.			<3,418.
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2 Totals. Add the amounts in colunegative amounts) Enter each t Schedule D, line 1b (if Box A ab	otal here and inc	lude on your					
above is checked), or line 3 (if f	Box C above is c	hecked) 🕨		3,418.	ļ		<3,418,>

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

723011 11-02-17 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2017)

Attachment Sequence No. 12A Form 8949 (2017) 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. CHOATE ROSEMARY HALL FOUNDATION, 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 long term. 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 (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or (h) (b) (c) (d) (a) loss. If you enter an amount Proceeds Date acquired Date sold or Cost or other Gain or (loss). Description of property in column (g), enter a code in column (f). See instructions (sales price) basis See the Subtract column (e) (Example 100 sh XYZ Co.) (Mo, day, yr) disposed of Note below and from column (d) & (Mo., day, yr.) (g) Amount of combine the result see *Column (e)* ın Code(s) the instructions with column (g) adjustment 209,010. SEE STMT VARIOUS VARIOUS 209,010 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 8b (if Box D above is checked), line 9 (if Box E 209,010 209,010. above is checked), or line 10 (if Box F above is checked) 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

ALTERNATIVE MINIMUM TAX

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

CHOATE ROSEMARY HALL FOUNDATION,

INCORPORATED

Employer identification number

06-0910420

Part I	Short-Term Capital Ga	ains and Losses - As	sets Held One Year	or Less		
	ons for how to figure the amounts ne lines below	(d) Proceeds	(e)	(g) Adjustments to ga	n	(h) Gain or (loss) Subtract
This form ma round off cer	y be easier to complete if you ts to whole dollars	Proceeds (sales price)	(e) Cost (or other basis)	or loss from Form(s) 894 Part I, line 2, column (s	19.	column (e) from column (d) and combine the result with column (g)
reported was repo have no However transacti	r all short-term transactions on Form 1099-B for which basis orted to the IRS and for which you adjustments (see instructions), if you choose to report all these ons on Form 8949, leave this line d go to line 1b					
1b Totals fo	r all transactions reported on					
Form(s)	8949 with Box A checked					
2 Totals fo	r all transactions reported on					
Form(s)	8949 with Box B checked					
3 Totals fo	r all transactions reported on					
Form(s)	8949 with Box C checked		3,418.			-3,418.
4 Short ter	m capital gain from installment sales	from Form 6252, line 26 or 37	7 .	,	4	
5 Short-ter	m capital gain or (loss) from like-kin	d exchanges from Form 8824			5	
6 Unused o	apital loss carryover (attach comput	ation)		ľ	6	(`)
7 Net short	-term capital gain or (loss) Combin	e lines 1a through 6 in column	h		7	-3,418.
Part II	Long-Term Capital Gai	ins and Losses - Ass	ets Held More Than	One Year		
to enter on th	ons for how to figure the amounts e lines below. y be easier to complete if you	(d) Proceeds (sales price)	(6) Cost (or other basis)	(g) Adjustments to gail or loss from Form(s) 894 Part II, line 2, column (c	9,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
round off cen	s to whole dollars.	(Saids pride)	(or other ouslay	r art ii, iiile 2, coluliiis (g	,	combine the result with column (g)
on Form reported no adjust if you cho	all long-term transactions reported 1099-B for which basis was to the IRS and for which you have ments (see instructions) However, pose to report all these transactions 8949, leave this line blank and go to					
8b Totals for	all transactions reported on					
Form(s) 8	3949 with Box D checked					
9 Totals for	all transactions reported on					
Form(s) 8	3949 with Box E checked					
10 Totals for	all transactions reported on					
	1949 with Box F checked	209,010.		·		209,010.
-	n from Form 4797, line 7 or 9			ļ	11	74,014.
_	n capital gain from installment sales	•	7		12	
-	n capital gain or (loss) from like kind	d oxchanges from Form 8824]	13	
	ain distributions				14	
	torm capital gain or (loss). Combine		1 h		15	283,024
Part III	Summary of Parts I and	d II				
	ess of net short-term capital gain (lin	,	` '		18	
•	il gain. Enter excess of not long term	, , ,		′	17	279,606.
	16 and 17 Enter here and on Form		oper line on other returns. If th	e corporation		,
	lied timber gain, also complete Part I sses exceed gains, see Capital loss			Ĺ	18	279,606.
11010 1110	cood oncood game, ood oupital loss.	oo iii aas iiisa aattotto				

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For Paperwork Reduction Act Notice, see the Instructions for Form 1120

Schedule D (Form 1120) 2017

ALTERNATIVE MINIMUM TAX

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 **2017**

Attachment Sequence No 12A

Name(s) shown on return

CHOATE ROSEMARY HALL FOUNDATION,

INCORPORATED

Social security number or taxpayer identification no.

06-0910420

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 yo	ur
proker and may even tell you which box to check	
TOKO CITIC TITAL YOU WHICH DON'TO CHOOK	_

You must check Box A, B, or C below If you have more short-term transactions than v	Check only one b	ox, if more than one to	oox applies for your sho ses, complete as many fo	rt-term transactions con orms with the same box	plete a separ checked as yo	ate Form 8949, page 1 ou need	for each applicable box
(A) Short-term transactions re	ported on Form(s) 1099-B showi	ng basis was repo	rted to the IRS (se	e Note ab	ove)	
(B) Short-term transactions re	•	•	•	ported to the IRS			
(C) Short-term transactions n				· · · · · · · ·	Adjustme	nt, if any, to gain or	T (1)
Description of property (Example, 100 sh XYZ Co)	(b) Date acquired (Mo day, yr)	(c) Date sold or disposed of (Mo , day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and see Column (e) in the instructions	loss. If you	ou enter an amount (g), enter a code in See instructions (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
SEE STMT	VARIOUS	VARIOUS	0.	3,418.		aujustinent	<3,418.>
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2 Totals. Add the amounts in colunegative amounts) Enter each I Schedule D, line 1b (if Box A at above is checked) or line 3 (if	total here and inc pove is checked),	lude on your line 2 (If Box B		3,418.			<3.418.>

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.

723011 11-02-17 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2017)

Form 8949 (2017)					nent Seque	nce No 12A	Page 2
Name(3) shown on return Name ar CHOATE ROSEMARY HALL		er identification	no not required if	shown on page 1			rity number or entification no.
INCORPORATED						06-091	
Before you check Box D, E, or F be statement will have the same inforn broker and may even tell you which	nation as Form 10	you received an 199-B Either will	y Form(s) 1099-B show whether you	or substitute statei ur basis (usually yo	ment(s) fron ur cost) was	n your broker As s reported to the	substitute IRS by your
Part II Long-Term. Transac Note: You may aggregate a codes are required. Enter the	ctions involving c all long-term transac	ctions reported on	Form(s) 1099-B show	ving basis was report	ed to the IRS	and for which no a	adjustments or
You must check Box D, E, or F below.						· · · · · · · · · · · · · · · · · · ·	
If you have more long-term transactions than w	vill fit on this page for o eported on Form(:	ne or more of the box s) 1099-B showii	es complete as many fo ng basis was repo	rms with the same box o rted to the IRS (se	hecked as you	need	or each applicable box
(E) Long-term transactions re		•	•	parted to the IRS			
(F) Long-term transactions no	(b)	(c)	(d) ·	(e)	Adjustment	t, if any, to gain or	(h)
Description of property (Example: 100 sh. XYZ Co.)	Date acquired (Mo day, yr.)	Date sold or disposed of (Mo., day, yr)	Proceeds (sales price)	Cost or other basis See the Note below and	loss If you in column (u enter an amount g), enter a code in See instructions (g)	Gain or (loss). Subtract column (e) from column (d) &
	1	(,,, ,, ,		see <i>Column (e)</i> in the instructions	Code(s)	Amount of adjustment	combine the result with column (g)
SEE STMT	VARIOUS	VARIOUS	209,010.	0.			209,010.
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2 Totals. Add the amounts in columegative amounts) Enter each							
Schedule D, line 8b (if Box D at above is checked), or line 10 (if	oove is checked),	line 9 (If Box E	209,010.				209,010.

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

Form **8949** (2017)

Attachment Line 5, Form 990T			
Choate Rosemary Hall Foundation, Inc. (EIN 06-0910420)	Gross	Deductions	Total
FYE 6/30/18	Income		UBI
K-1 Analysis - For Income Other Than Cap Gains			
ABRAMS CAPITAL PARTNERS I, LP	(23,246)	(6)	(23,252)
ADAMAS OPPORTUNITIES, LP	(5,889)	(32)	(5,921)
ADAMAS PARTNERS, LP	7,989	(4)	7,985
COLISEUM CAPITAL PARTNERS, LP	(39,014)		(39,014)
DENHAM COMMODITY PARTNERS FUND V LP	(190,650)	(1)	(190,651)
DENHAM COMMODITY PARTNERS FUND VI LP	(169,129)	(42)	(169,171)
LUMINATE CAPITAL PARTNERS, LP	(76,152)	(144)	(76,296)
NORTHWOOD REAL ESTATE PARTNERS (AIV 5) FEEDER LP	8,321		8,321
NORTHWOOD REAL ESTATE PARTNERS (AIV 1) FEEDER LP	(37,765)	(66)	(37,831)
NORTHWOOD REAL ESTATE PARTNERS TE (AIV 2) FEEDER LP	(629)		(629)
NORTHWOOD REAL ESTATE PARTNERS TE (AIV 4) FEEDER LP	8,050		8,050
NORTHWOOD REAL ESTATE PARTNERS TE AIV BCP HOTEL FEEDER L	5,959	·	5,959
NORTHWOOD REAL ESTATE PARTNERS TE (HOTEL AIV) FEEDER LP	(32,420)	(17)	(32,437)
NORTHWOOD REAL ESTATE PARTNERS TE LP	3,567	(20)	3,547
NORTHWOOD REAL ESTATE PARTNERS TE (NR AIV) FEEDER LP	3,360		3,360
RIVA CAPITAL PARTNERS IV, LP	(2,533)		(2,533)
SSC IV, LP	44		44
STOCKBRIDGE FUND, LP	(157,512)	(41)	(157,553)
COMMONFUND CAPITAL INTERNATIONAL PARTNERS IV LP	791		791
COMMONFUND CAPITAL INTERNATIONAL PARTNERS V LP	584		584
COMMONFUND CAPITAL INTERNATIONAL PARTNERS VI LP	292		292
COMMONFUND CAPITAL INTERNATIONAL PARTNERS VII LP	159		159
COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VI LP	(4,683)	(8)	(4,691)
COMMONFUND CAPITAL VENTURE PARTNERS VI LP	(240)	-	(240)
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS V LP	(3,390)	(8)	(3,398)
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VI LP	2,210	(27)	2,183
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VII LP	916	(222)	694
COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VII LP	3,715	(7)	3,708
COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VIII LP	4,903	(73)	4,830
COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS IX LP	(58,707)	(50)	(58,757)
COMMONFUND CAPITAL VENTURE PARTNERS VII LP	(50)		(50)
<u> </u>	(751,148)	(768)	(751,916)

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Attachment to Form 990-T, Schedule D					
Choate Rosemary Hall Foundation, Inc. (EIN 06-0910420) FYE 6/30/18	1256 Gain (Loss)	1231 Gain (Loss)	ST Gain (Loss)	LT Gain (Loss)	Total Gain (Loss)
2018 K-1 Analysis - Capital Gains/(Losses)	7		/222	70000	(550-1)
ABRAMS CAPITAL PARTNERS I, LP	2,574	(10,669)	(11)	18,718	10,606
ADAMAS OPPORTUNITIES, LP	(13,801)	(1,587)	(757)	138,162	122,017
'ADAMAS PARTNERS, LP	(26,747)	7,991	(591)	35,338	15,991
COLISEUM CAPITAL PARTNERS, LP	•				•
DENHAM COMMODITY PARTNERS FUND V LP					,
DEINHAM COMMODITY PARTNERS FUND VI LP		891			168
LUMINATE CAPITAL PARTNERS, LP					
NOSTHWOOD REAL ESTATE PARTNERS (AIV 5) FEEDER LP					•
NORTHWOOD REAL ESTATE PARTNERS (AIV 1) FEEDER LP					•
NORTHWOOD REAL ESTATE PARTNERS TE (AIV 2) FEEDER LP					•
NORTHWOOD REAL ESTATE PARTNERS TE (AIV 4) FEEDER LP					r
NORTHWOOD REAL ESTATE PARTNERS TE ÀIV BCP HOTEL FEEDER LP					•
NORTHWOOD REAL ESTATE PARTNERS TE (HOTEL AIV) FEEDER LP					•
					•
NORTHWOOD REAL ESTATE PARTNERS TE (NR AIV) FEEDER LP					•
RIVA CAPITAL PARTNERS IV, LP		8,019			8.019
SSC IV, LP					•
STOCKBRIDGE FUND, LP					•
COMMONFUND CAPITAL INTERNATIONAL PARTNERS IV LP					•
COMMONFUND CAPITAL INTERNATIONAL PARTNERS V LP					
COMMONFUND CAPITAL INTERNATIONAL PARTNERS VI LP		-		991	991
COMMONFUND CAPITAL INTERNATIONAL PARTNERS VII LP					•
COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VI LP		31,450	25	(1,065)	30,436
COMMONFUND CAPITAL VENTURE PARTNERS VI LP		-		, ,	7
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS V LP		(5,286)		4	(2,290)
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VI LP		(242)	(17)	12,541	12,279
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VII LP		8	34	23,861	23,989
COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VII LP		26.654	12.990	5.083	44.727
COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS VIII LP		1.971		(199)	1.772
COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS IX LP		15 453	78	(1 636)	13 895
COMMONFUND CAPITAL VENTURE PARTNERS VII LP			2	(000'1)	900
	(37,974)	74,014	11,771	231,795	279,606