Form 990-T	F	Exempt Organization B			ax Return	ı L	OMB No 1545-0687
Form 550-1	'	(and proxy tax u			16	M	2047
	For ca	lendar year 2017 or other tax year beginning $\begin{array}{cc} \text{OCT} & 1 \end{array}$,		, and ending SEP		M	ZU 17
Department of the Treasury Internal Revenue Service	<u> </u>	► Go to www.irs gov/Form990T fo Do not enter SSN numbers on this form as it n	nay be ma	de public if your organiz		. 5	open to Public Inspection for 01(c)(3) Organizations Only
A Check box if address changed		Name of organization (Check box if nam	e changed	and see instructions.)			yer identification number yees' trust, see itions)
B Exempt under section	Print	Educational Testing Service					-0634479
X 501(c <u>103</u>)	Type	Number, street, and room or suite no. If a P.O.	box, see in	structions.			ted business activity codes structions)
408(e) 220(e)	'	Rosedale Road MS 20-J					
408A530(a)		City or town, state or province, country, and ZII	P or foreigr	n postal code		61171	0 721000
529(a) C Book value of all assets	<u> </u>	Princeton, NJ 08541				61171	721000
at end of year	070	F Group exemption number (See instructions.) G Check organization type ► x 501(c) or		501(c) trust	401(a)	trust	Other trust
		ary unrelated business activity.		atement 1	10 1(a)	11001	0.000
		poration a subsidiary in an affiliated group or a pa			•	Yes	x No
		tifying number of the parent corporation.	210111 00001	alary controlled group			
		Michael J. Freddo, Vice President	t	Teleph	one number 🕨 6	09-921	-9000
Part I Unrelate	d Trac	de or Business Income		(A) Income	(B) Expense:	; <u> </u>	(C) Net
1a Gross receipts or sal	es	13,082,205.					T1 1
b Less returns and allo	wances	c Balance	► 1c	13,082,205.		·	.0 ' '
2 Cost of goods sold (Schedule	A, line 7)	2				•
3 Gross profit. Subtract	t line 2 fi	rom line 1c	3	13,082,205.	-	·	13,082,205.
4a Capital gain net incoi		•	4a				
		art II, line 17) (attach Form 4797)	4b				
c Capital loss deductio			4c				
	•	ips and S corporations (attach statement)	5		*	-	· · · · · · · · · · · · · · · · · · ·
6 Rent income (Schedi		ma (Cabadula E)	7	1,546,553.	1,240	401	306,152.
7 Unrelated debt-finant 8 Interest, annuities, ro		ne (Schedule E) and rents from controlled organizations (Sch. F)	8	1,340,333.	1,210	, =01.	
	•	on 501(c)(7), (9), or (17) organization (Schedule					. -
10 Exploited exempt act			10				** ** ***
11 Advertising income (-	·	11				-
		ns; attach schedule) See Statement 3	12	511,375.			511,375.
13 Total. Combine line	s 3 throu	gh 12	13	15,140,133.	1,240	,401.	13,899,732.
Part II Deduction	ons No	ot Taken Elsewhere (See instructions	s for limita	tions on deductions)			
		utions, deductions must be directly connec	cted with t	the unrelated business	s income)		
14 Compensation of of	ficers, di	rectors, and trustees (Schedule K)				14	60,322.
15 Salaries and wages			M	MIA		15	2,231,933.
16 Repairs and mainte	nance		Vt	00 11 F		16 17	
17 Bad debts	اداداد					18	
18 Interest (attach school19 Taxes and licenses	eaute)					19	365,228.
	ions (Se	e instructions for limitation rules)				20	
21 Depreciation (attach	•	•		21	1,147,328.	P 1	
		n Schedule A and elsewhere on return		22a		22b	1,147,328.
23 Depletion						23	
24 Contributions to def	erred co	mpensation plans				24	
25 Employee benefit pr	ograms					25	660,631.
26 Excess exempt expe	enses (S	chedule I)				26	
27 Excess readership of	•	•				27	
28 Other deductions (a				See Statemen	t 4	28	17,748,073.
29 Total deductions. A) 6 10		29	22,213,515.
		ncome before net operating loss deduction. Subt	tract line 29		- ⊏	30	-8,313,783.
		(limited to the amount on line 30)	1 from la-	See Statemen	LJ	31	-8,313,783.
		ncome before specific deduction. Subtract line 3		ა 		33	1,000.
33 Specific deduction (34 Unrelated business	denerali	y \$1,000, but see line 33 instructions for exceptions for exceptions. Subtract line 33 from line 32. If line 33	urio) Is arester t	than line 32 enter the em	naller of zero or		1,000.
line 32	· candult	income. Subtract line 33 from line 32. If line 33	is greater	02, 61161 116 311	55	34	-8,313,783.
		work Reduction Act Notice, see instructions.				1	Form 990-T (2017)

Part I	Tax Computation			_		
35	Organizations Taxable as Corporations. See instructions for tax computation.					
	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) \$	1				
b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)					
	(2) Additional 3% tax (not more than \$100,000)	<u> </u>		*		
c	Income tax on the amount on line 34	-	■ 35c			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	<u> </u>		
38	Alternative minimum tax	,	38			
39	Tax on Non-Compliant Facility Income. See instructions		39	<u> </u>		
40	Total Add lines 37, 38 and 39 to line 35c or 36, whichever applies		40			0.
	/ Tax and Payments	4,4,4				
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 41a	1				
	Other credits (see instructions) 41b	· · · · · · · · · · · · · · · · · · ·				
c	General business credit. Attach Form 3800 41c	· · · · · · · · · · · · · · · · · · ·				
	Credit for prior year minimum tax (attach Form 8801 or 8827) 41d					
	Total credits. Add lines 41a through 41d	<u> </u>	41e	1		
42	Subtract line 41e from line 40		42	1		0.
43	Other taxes. Check if from, Form 4255 Form 8611 Form 8697 Form 8866	Other (attach schedu				
44	Total tax. Add lines 42 and 43		44			0.
	Payments: A 2016 overpayment credited to 2017 45a	1				
	2017 estimated tax payments 45b	1	\neg			
	Tax deposited with Form 8868 45c	 -				
	Foreign organizations; Tax paid or withheld at source (see instructions) 45d	-				
	Backup withholding (see instructions) 45e					
	Credit for small employer health insurance premiums (Attach Form 8941) 45f					
	Other credits and payments: Form 2439					
9	Form 4136 Other Total 45g					
46	Total payments. Add lines 45a through 45g		46	•		
47	Estimated tax penalty (see instructions). Check if Form 2220 is attached		47	<u> </u>		
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	Refunded	50			
Part V						
	At any time during the 2017 calendar year, did the organization have an interest in or a signature or oth				Yes	No
٠.	over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may h					- 1
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign					
	here See Statement 6	•				x
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transfero	or to, a foreign trust?				х
-	If YES, see instructions for other forms the organization may have to file.	, -				
53	Enter the amount of tax-exempt interest received or accrued during the tax year > \$	0.				
	Under penalties of periury. I declare that I have examined this return, including accompanying schedules and stateme.	nts, and to the best of my	knowledge	and belief, it is	true,	
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has a SVP & Chief Fin	any knowledge nancial				. 1
Here	[] [] [] [] [] [] Officer			RS discuss this rer shown belo		with
	Signature of officer Date Title	. =	instruction] No
	Print/Type preparer's name Preparer's signature Date	Check	ıf PT	IN		
ъ		/10 self- employ	ved			
Paid	Christine Kawecki Ut Kawecki 7/24	7 18 7		00743140		
Prepa	Territorius & Poloitto May IIP	Fırm's EIN	▶ 8	6-106577	2	
Use C	2 Jericho Plaza					
	Firm's address Jericho, NY 11753	Phone no,	516-9:	18-7000		
				Form 99	90-T	(2017)
						,

Schedule A - Cost of Goods	s Sold. Enter	method of invent	tory val	uation N/A				
1 Inventory at beginning of year	1		6 1	nventory at end of year	r		6	
2 Purchases	2	_	7 (Cost of goods sold. Su	btract li	ine 6		
3 Cost of labor	3	-] f	rom line 5. Enter here a	and in F	Part I,		
4 a Additional section 263A costs			1 1	ine 2			7	
(attach schedule)	4a		8 (Oo the rules of section :	263A (v	with respect to		Yes No
b Other costs (attach schedule)	4b		1	property produced or a	•	•		
5 Total. Add lines 1 through 4b	5		1 '	he organization?				
Schedule C - Rent Income		Property and			Lease	ed With Real Pro	perty	<u> </u>
(see instructions)	('		•
Description of property								
(1)								
(2)						· · · · · · · · · · · · · · · · · · ·		
(3)		·					-	
(4)	·				•			
	2. Rent receiv	ed or accrued						
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	than	` 'of rent for pe	ersonal pr	nal property (if the percenta roperty exceeds 50% or if if on profit or income)	ge	3(a) Deductions directly columns 2(a) an	connect d 2(b) (a	ted with the income in track schedule)
(1)								
(2)								
(3)								-
(4)				_				
Total	0.	Total			0.			
(c) Total income. Add totals of columns 2	2(a) and 2(b). En	ter				(b) Total deductions.		
here and on page 1, Part I, line 6, column	(A)	•			0.	Enter here and on page 1, Part I, line 6, column (B)		0.
Schedule E - Unrelated Deb	t-Financed	Income (see ir	nstruct	tions)				
	-		,	O t		Deductions directly control to debt-finance		
4			0.	Gross income from r allocable to debt-	(a)	Straight line depreciation	1	(b) Other deductions
1. Description of debt-fin	anced property		'	financed property	\ <i>\</i>	(attach schedule)		(attach schedule)
							See	Statement 7
(1) Questar Acquisition Indel	btedness			1,546,553.				1,240,401.
(2)								
(3)								-
(4)								
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or a debt-fina	adjusted basis illocable to nced property n schedule)	6.	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	(c	8. Allocable deductions clumn 6 x total of columns 3(a) and 3(b))
(1) 124,443,000.		79,900,000.		100.00%		1,546,553		1,240,401.
(2)				%				
(3)				%				
(4)				%			1	
						nter here and on page 1, Part I, line 7, column (A)		nter here and on page 1, Part I, line 7, column (B)
Totals				▶		1,546,553		1,240,401.
Total dividends-received deductions inc	cluded in column	18		- 1		>		0.
				* **				E 000 T (0047)

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Schedule F - Interest,			,		Controlled O				1200		· ,
1. Name of controlled organiza	ition	2. Em Identifi num	cation	3. Net uni	related income e instructions)	4 . To	tal of specified ments made	includ	rt of column 4 ded in the cont zation's gross	trolling	6. Deductions directly connected with income in column 5
(1)											-
(2)	-										
(3)								<u> </u>			*
(4)		_									•
Nonexempt Controlled Organ	ızatıons	•				•	· -	•			
7. Taxable Income		inrelated inconsee instructions		9. Total	of specified pay made	ments	10. Part of column the controll gross	mn 9 tha ing orga s income	nızatıon's	11. Ded with	luctions directly connected income in column 10
(1)											
(2)	Ì						,				
(3)										-	
(4)	•										
-							Add colum Enter here and line 8, c		e 1, Part I,	Enter he	d columns 6 and 11 tre and on page 1, Part I, tne 8, column (B)
Totals						>			0.		0 .
Schedule G - Investme		me of a	Section	501(c)((7), (9), or	(17) Oı	ganization	1			
(see inst	ructions)				1						T -
1. Desc	cription of inco	ome			2. Amount of	income	 Deduction directly connected (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 Part I, line 9, co		, ,		(\$ an 18 ; ncmin 19	ا المعاد الم	Enter here and on page 1 Part I, line 9, column (B)
Totals				>		0.				de i	0.
Schedule I - Exploited (see instru	•	Activity	Incom	e, Othe	r Than Ac	lvertisi	ing Income)			
			3		4 Net incon	ne (toss)	_				7. Excess exempt
1. Description of exploited activity	unrelated incom	aross business le from business	directly of with pro of uni	censes connected oduction related s income	from unrelated business (co minus colum gain, comput through	olumn 2 n 3) If a e cols 5	5. Gross inco from activity to is not unrelate business inco	hat ed	attribut	penses able to mn 5	expenses (column 6 minus column 5, but not more than column 4)
(1)								_			
(2)										•	
(3)											
(4)							-				
		re and on , Part I, col (A)	page 1	re and on , Part I, col (B)	, **. * *§				7.4	, , , , , ,	Enter here and on page 1, Part II, line 26
Totals -		0.		0.	, a same		S. 18 10				0.
Schedule J - Advertisi	ng Inco	me (see	nstruction	ns)							
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. Circulate income		6. Read		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)					1 1.		1	_			-
(2)					3	, '*	,				
(3)											
(4)			1			Angeria de La Calcalante	2		1		
<u></u>					.,	=	1		1		
Totals (carry to Part II, line (5))	•		٥.	1	o.						0.

Part III 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.				0.
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	0.	0.	54 Tax 1 200 2			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) See Statement 8		%	
Total. Enter here and on page 1, Part II, line 14	60,322.		

Form 990-T (2017)

Form 990-T Description of Organization's Primary Unrelated Statement 1
Business Activity

The unrelated business taxable income is generated from assessments and assessment related services that are sold to business, professional and other non-educational organizations.

To Form 990-T, Page 1

Footnotes

Statement

2

Net Operating Loss:

The net operating loss carryforward has been updated to reflect an additional loss of approximately \$1.1 Million from 2017 unrelated business activities that were not originally reported on the respective Form 990-T. The original Net Operating Loss for 2017 was 12.8M and the revised amount is 13.9M.

Form 990-7	r 	Other Income		Statement	
Descriptio	on			Amount	
Employee I	511,3				
Total to I	511,	375			
Form 990-7	r	Other Deducti	ons	Statement	
 Description	on			Amount	
-				<u> </u>	
Temporary	labor terials and suppli	A 5		332, 6	044 369
Telephone	ceriais and suppir	CS		•	668
	nd shipping			713,	
Occupancy	ia biiippiiig			1,163,	
	rental and mainte	nance		131,	
	and publications			927,	184
Travel & n				61,	920
	fessionals and sub			1,470,	959
maar admi.	2,578,	290			
	nistrators and con				
Chauncey (Conference Center	operating expenses		4,178,	604
Chauncey (Miscellane	Conference Center eous & cost center	operating expenses		4,178, 5,436,	604 935
Chauncey (Miscellane	Conference Center eous & cost center	operating expenses		4,178,	604 935
Chauncey (Miscellane Advertisin	Conference Center eous & cost center	operating expenses charges	•	4,178, 5,436,	604 935 319
Chauncey (Miscellane Advertisir Total to E	Conference Center eous & cost center ng Form 990-T, Page 1	operating expenses charges	•	4,178, 5,436, 745,	604 935 319 073
Chauncey (Miscellane Advertisin	Conference Center eous & cost center ng Form 990-T, Page 1	operating expenses charges , line 28	•	4,178, 5,436, 745, 17,748,	604 935 319
Chauncey (Miscellane Advertisin Total to F Form 990-1	Conference Center eous & cost center ng Form 990-T, Page 1 Ne Loss Sustained	charges , line 28 t Operating Loss D Loss Previously Applied	eduction Loss Remaining	4,178, 5,436, 745, 17,748, Statement Available	604 935 319 073
Chauncey (Miscellane Advertisin Total to F Form 990-1 Tax Year	Conference Center eous & cost center ng Form 990-T, Page 1 Ne Loss Sustained 274,089.	operating expenses charges , line 28 t Operating Loss D Loss Previously	eduction Loss	4,178, 5,436, 745, 17,748, Statement Available This Year	604 935 319 073
Chauncey Comiscellane Advertising Total to Form 990-7 Tax Year 12/31/05	Conference Center eous & cost center ng Form 990-T, Page 1 Loss Sustained 274,089. 295,764.	operating expenses charges , line 28 t Operating Loss D Loss Previously Applied 0.	Loss Remaining	4,178, 5,436, 745, 17,748, Statement Available This Year	604 935 319 073
Chauncey (Miscellane Advertising Total to Figure 12/31/05 12/31/06 12/31/07	Conference Center eous & cost center ng Form 990-T, Page 1 Ne Loss Sustained 274,089.	operating expenses charges , line 28 t Operating Loss D Loss Previously Applied 0. 0.	Loss Remaining 274,089. 295,764.	4,178, 5,436, 745, 17,748, Statement Available This Year 274,08 295,76	604 935 319 073
Chauncey (Miscellane Advertising Total to Final Total to Final Total to Final Tax Year 12/31/05 12/31/06 12/31/07 12/31/08	Conference Center eous & cost center ng Form 990-T, Page 1 Loss Sustained 274,089. 295,764. 2,047,153.	operating expenses charges , line 28 t Operating Loss D Loss Previously Applied 0. 0. 0.	eduction Loss Remaining 274,089. 295,764. 2,047,153.	4,178, 5,436, 745, 17,748, Statement Available This Year 274,08 295,76 2,047,15	604 935 319 073 89. 64. 53.
Chauncey (Miscellane Advertising Total to Final Total to Final Total to Final Total to Final Total Total to Final Total	Conference Center eous & cost center ng Form 990-T, Page 1 Loss Sustained 274,089. 295,764. 2,047,153. 2,702,430.	operating expenses charges , line 28 t Operating Loss D Loss Previously Applied 0. 0. 0. 0.	eduction Loss Remaining 274,089. 295,764. 2,047,153. 2,702,430.	4,178, 5,436, 745, 17,748, 17,748, Statement Available This Year 274,08 295,76 2,047,18 2,702,43 4,876,59 4,073,27	604 935 319 073 89. 64. 53. 30. 96. 70.
Chauncey (Miscellane Advertising Total to Final Total to Final Total to Final Tax Year 12/31/05 12/31/06 12/31/08 12/31/09 12/31/10	Conference Center eous & cost center ng Form 990-T, Page 1 Loss Sustained 274,089. 295,764. 2,047,153. 2,702,430. 4,876,596.	charges , line 28 t Operating Loss D Loss Previously Applied 0. 0. 0. 0. 0. 0.	Loss Remaining 274,089. 295,764. 2,047,153. 2,702,430. 4,876,596. 4,073,270. 1,532,585.	4,178, 5,436, 745, 17,748, 17,748, Statement Available This Year 274,08 295,76 2,047,15 2,702,43 4,876,55 4,073,27 1,532,58	604 935 319 073 89. 64. 53. 30. 96. 70.
Chauncey (Miscellane Advertising Total to Final Total to Final Total to Final Total to Final Total Total to Final Total to Final Total Tot	Conference Center eous & cost center ng Form 990-T, Page 1 Loss Sustained 274,089. 295,764. 2,047,153. 2,702,430. 4,876,596. 4,073,270. 1,532,585. 7,533,497.	charges , line 28 t Operating Loss D Loss Previously Applied 0. 0. 0. 0. 0. 0. 0.	Loss Remaining 274,089. 295,764. 2,047,153. 2,702,430. 4,876,596. 4,073,270. 1,532,585. 7,533,497.	4,178, 5,436, 745, 17,748, 17,748, Statement Available This Year 274,08 295,76 2,047,15 2,702,43 4,876,59 4,073,27 1,532,58 7,533,49	604 935 319 073 89. 64. 53. 30. 96. 70. 85.
Chauncey (Miscellane Advertising Total to Final Total Tot	Conference Center eous & cost center ng Form 990-T, Page 1 Loss Sustained 274,089. 295,764. 2,047,153. 2,702,430. 4,876,596. 4,073,270. 1,532,585. 7,533,497. 9,652,457.	operating expenses charges , line 28 t Operating Loss D Loss Previously Applied 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	Loss Remaining 274,089. 295,764. 2,047,153. 2,702,430. 4,876,596. 4,073,270. 1,532,585. 7,533,497. 9,652,457.	4,178, 5,436, 745, 17,748, Statement Available This Year 274,08 295,76 2,047,15 2,702,43 4,876,55 4,073,27 1,532,58 7,533,43 9,652,45	604 935 319 073 89. 64. 53. 30. 96. 70. 85. 97.
Chauncey Comiscellane Advertising Total to Form 990-Total Tax Year 12/31/05 12/31/06 12/31/07 12/31/08 12/31/10 12/31/11 12/31/12 12/31/13 12/31/14	Conference Center eous & cost center ng Form 990-T, Page 1 Loss Sustained 274,089. 295,764. 2,047,153. 2,702,430. 4,876,596. 4,073,270. 1,532,585. 7,533,497. 9,652,457. 11,648,720.	operating expenses charges , line 28 t Operating Loss D Loss Previously Applied 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	Eduction Loss Remaining 274,089. 295,764. 2,047,153. 2,702,430. 4,876,596. 4,073,270. 1,532,585. 7,533,497. 9,652,457. 11,648,720.	4,178, 5,436, 745, 17,748, 17,748, Statement Available This Year 274,08 295,76 2,047,15 2,702,43 4,876,59 4,073,27 1,532,58 7,533,49 9,652,45 11,648,72	604 935 319 073 89. 64. 53. 30. 96. 70. 85.
Chauncey Comiscellane Advertising Total to Form 990-7 Tax Year 12/31/05 12/31/06 12/31/07 12/31/10 12/31/11 12/31/11 12/31/12 12/31/14 09/30/15	Conference Center eous & cost center ng Form 990-T, Page 1 Loss Sustained 274,089. 295,764. 2,047,153. 2,702,430. 4,876,596. 4,073,270. 1,532,585. 7,533,497. 9,652,457. 11,648,720. 11,166,951.	operating expenses charges , line 28 t Operating Loss D Loss Previously Applied 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	Eduction Loss Remaining 274,089. 295,764. 2,047,153. 2,702,430. 4,876,596. 4,073,270. 1,532,585. 7,533,497. 9,652,457. 11,648,720. 11,166,951.	4,178, 5,436, 745, 17,748, 17,748, Statement Available This Year 274,08 295,78 2,047,15 2,702,43 4,876,59 4,073,27 1,532,58 7,533,49 9,652,45 11,648,72 11,166,95	604 935 319 073 89. 64. 53. 30. 96. 70. 85. 97. 57. 20.
Chauncey (Miscellane Advertisin Total to F	Conference Center eous & cost center ng Form 990-T, Page 1 Loss Sustained 274,089. 295,764. 2,047,153. 2,702,430. 4,876,596. 4,073,270. 1,532,585. 7,533,497. 9,652,457. 11,648,720.	operating expenses charges , line 28 t Operating Loss D Loss Previously Applied 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	Eduction Loss Remaining 274,089. 295,764. 2,047,153. 2,702,430. 4,876,596. 4,073,270. 1,532,585. 7,533,497. 9,652,457. 11,648,720.	4,178, 5,436, 745, 17,748, 17,748, Statement Available This Year 274,08 295,76 2,047,15 2,702,43 4,876,59 4,073,27 1,532,58 7,533,49 9,652,45 11,648,72	604 935 319 073 89. 64. 53. 30. 96. 70. 85. 97. 57. 20. 51.

Form 990-T	Name of Foreign Country in Which	Statement	6
	Organization has Financial Interest		

Name of Country

Australia Belgium Canada China France India Ireland Israel Italy Japan Jordan Korea (South) Luxembourg Malaysia Malta Netherlands Poland Singapore South Africa Switzerland Turkey United Arab Emirates United Kingdom

Form 990-T	Schedule E - Other	Deductions		Statement	7
Description		Activity Number	Amount	Total	
Interest Expense	- SubTotal -	- 1	1,240,401.	1,240,	401.
Total of Form 990-T,	Schedule E, Column	3(b)		1,240,	401.

Form 990-T Schedule K - Contractor	Statement		
Name	Title	Percent	Compensation
Basehore, John	VP & Treasurer		4,107.
Donado, Yvette	SVP & Chief Admin		•
	Officer		1,885.
Freddo, Michael J.	VP & Controller		4,107.
Hayon, Jack	SVP & CFO		4,107.
Hernandez, Sandra	VP Finance		4,107.
Hobson, David	VP & Corporate		·
	Secretary		4,107.
Hunt, David	Excecutive VP &		·
	C00		4,107.
Johnson-Gregory, Sheree L.	VP Assoc. Gen		,
	Counsel & CDO		4,107.
Lawrence, Ida	SVP Research &		,
24,120,100, 244	Development		4,107.
MacDonald, Walter B.	President		4,107.
Nelson, Scott F.	SVP & Chief		·
	Marketing Officer		4,107.
Pote, Stephen K.	VP & Chief Quality		,
root, propiler in	Officer		4,106.
Robinson, Deirdre G.	VP & CLO SWS		943.
Schroeder, Glenn C.	SVP & General		
Doi:100d01, 010:::: 01	Counsel		4,106.
Weaver, Scott V.	VP & Chief		,
	Strategy Officer		4,106.
Williamson, David	VP New Product		, .
TITITUM DOM, DUVIU	Development		4,106.
Total to Form 990-T, Schedule K			60,322.

4562

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

Sequence No 179

Educational Testing Service Form 990-T Page 1 Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 510,000. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,030,000. 3 3 Threshold cost of section 179 property before reduction in limitation 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 10 Carryover of disallowed deduction from line 13 of your 2016 Form 4562 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2018 Add lines 9 and 10, less line 12 13 Note: Don't use Part II or Part III below for listed property Instead, use Part V Special Depreciation Allowance and Other Depreciation (Don't include listed property) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 14 15 15 Property subject to section 168(f)(1) election 16 1,147,328. 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Don't include listed property) (See instructions) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2017 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2017 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use only - see instructions) (b) Month and (d) Recovery period (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction 19a 3-year property b 5-year property 7 year property C 10-year property d 15-year property е 20-year property f 25-year property 25 yrs S/L. g 27.5 yrs ММ S/I h Residential rental property MM 27 5 yrs S/L MM 39 yrs i Nonresidential real property MM Section C - Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System Z TYN 20a S/L Class life S/L 12-year 12 yrs 40 yrs MM S/L 40-year Part IV. Summary (See instructions) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 1,147,328 Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

21-0634479 Educational Testing Service Form 4562 (2017) Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment. recreation, or amusement) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) 24a Do you have evidence to support the business/investment use claimed? No 24b If "Yes," is the evidence written? Yes No Yes (b) Date (c) (e) (a) Type of property (d) Elected Rusinessi Basis for depreciation Method/ Depreciation Recovery section 179 placed in (business/investment investment period Convention deduction (list vehicles first) other basis use only) use percentage cost service 25 Special depreciation allowance for qualified listed property placed in service during the tax year and 25 used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L S/L % S/L · % 28 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) (e) (f) Vehicle Vehicle Vehicle Vehicle Vehicle 30 Total business/investment miles driven during the Vehicle year (don't include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 Yes Yes No Yes Yes No Yes Nο No No 34 Was the vehicle available for personal use Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes Nο employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles Part VI Amortization (d) Code section (f) (e) (a) Description of costs (b) (c) Amortization for this year amount period or percentage beains 42 Amortization of costs that begins during your 2017 tax year 43 43 Amortization of costs that began before your 2017 tax year 44 44 Total. Add amounts in column (f) See the instructions for where to report