$\left(\begin{array}{c} C & C \\ C & C \end{array}\right)$									
960 EXTENDED TO NOV				1					
Form 990-T Exempt Organization Bus			ax Return	OMB No 1545-0687					
(and proxy tax unde	er se	ction 6033(e))		2017					
For calendar year 2017 or other tax year beginning		, and ending	- 41	<b>ZU1</b> /					
Department of the Treasury Internal Revenue Service  Do not enter SSN numbers on this form as it may				Open to Public Inspection for 501(c)(3) Organizations Only					
A Check box if Name of organization ( Check box if name ch			ĬĎε	mployer identification number					
address changed CHRISTIAN EDUCATION CH				Employees' trust, see nstructions)					
B Exempt under section Print C/O H. O. MACLELLAN, J.				23-7412895					
X 501(C)(3 () or Number, street, and room or suite no. If a P.O. box		structions.	E	Inrelated business activity codes See instructions )					
408(e) 220(e) 1ype 820 BROAD STREET, SUIT									
408A 530(a) City or town, state or province, country, and ZIP or									
529(a) CHATTANOOGA, TN 37402			9	00000					
C Book value of all assets at end of year 1924 1776	<u> </u>	77 504/ )	T 1404( ) 1	1 100					
19,184,476. G Check organization type			401(a) tru	ist Other trust					
		STATEMENT 1	4 .	Yes X No					
I During the tax year, was the corporation a subsidiary in an affiliated group or a paren If "Yes," enter the name and identifying number of the parent corporation.	IT-SUOS	idiary controlled group?	▶ ∟	Yes X No					
J The books are in care of HUGH O. MACLELLAN, JR.		Telenh	one number > 42	3/755-8142					
Part I. Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net					
1a Gross receipts or sales			JAMES A STEVEN						
b Less returns and allowances c Balance	1c								
2 Cost of goods sold (Schedule A, line 7)	2								
3 Gross profit. Subtract line 2 from line 1c -	3								
4 a Capital gain net income (attach Schedule D)	4a								
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b								
c Capital loss deduction for trusts	4c	-615.		-615.					
5 Income (loss) from partnerships and S corporations (attach statement)	5	-25,589.	STMT: 15	-25,589.					
6 Rent income (Schedule C)	6 7								
7 Unrelated debt-financed income (Schedule E)	8								
<ul> <li>8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)</li> <li>9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)</li> </ul>	9			<del></del>					
10 Exploited exempt activity income (Schedule I)	10								
11 Advertising income (Schedule J)	11								
12 Other income (See instructions; attach schedule)	12			_					
13 Total. Combine lines 3 through 12	13	-26,204.		-26,204.					
Part II Deductions Not Taken Elsewhere (See instructions for	r limita	ations on deductions)							
(Except for contributions, deductions must be directly connected	d with	the unrelated busines	s income)						
14 Compensation of officers, directors, and trustees (Schedule K)			<u> </u>	14					
15 Salaries and wages	VE		<b>⊢</b>	15					
16 Repairs and maintenance . RECEL	AF	<u>u_</u> ol	<u> </u>	16   17					
17 Bad debts 18 Interest (attach schedule)		S S	<u> </u>	18					
19 Taxes and licenses NOV 1 3	20	18 0		19					
20 Charitable contributions (See instructions for limitation rules)		1861	<u> </u>	20					
21 Depreciation (attach Form 4562) OGDE	M I								
22 Less depreciation claimed on Schedule A and elsewhere on return	٧, د	22a		2b					
23 Depletion				23					
24 Contributions to deferred compensation plans			<b></b>	24					
25 Employee benefit programs			<b> </b>	25					
26 Excess exempt expenses (Schedule I)			<b>├</b>	26					
27 Excess readership costs (Schedule J)			<b>⊢</b>	27					
28 Other deductions (attach schedule) 29 Total deductions Add least 14 through 29			<del>-</del>	28 0.					
<ul> <li>Total deductions. Add lines 14 through 28</li> <li>Unrelated business taxable income before net operating loss deduction. Subtract</li> </ul>	t line 9	9 from line 13	<b>⊢</b>	$\frac{29}{30}$ $-26,204$ .					
31 Net operating loss deduction (limited to the amount on line 30)	2		- ⊢	31					
32 Unrelated business taxable income before specific deduction. Subtract line 31 fr	om line		_	$\frac{-26,204}{}$					
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions			<u> </u>	1,000.					
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is		than line 32, enter the sr	<b></b>						



line 32

# CHRISTIAN EDUCATION CHARITABLE TRUST Form 996-T (2017) C/O H. O. MACLELLAN. JR.

Form 990-T	2017) C/O H. O. MACLELLAN, JR.	23-741	L2895	Page 2
Part II		•		
35	Organizations Taxable as Corporations. See instructions for tax computation.		74 X X	
	Controlled group members (sections 1561 and 1563) check here   See instructions and:			
a	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):		*****	
	(1) \$   (2)  \$   (3)  \$		2000	
b	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)			
	(2) Additional 3% tax (not more than \$100,000)			
c	Income tax on the amount on line 34	<b>•</b>	35c	
36	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:			
	X Tax rate schedule or Schedule D (Form 1041)	<b>•</b>	36	0.
37	Proxy tax. See instructions	<b>•</b>	37	
38	Alternative minimum tax		38	
•	Tax on Non-Compliant Facility Income, See Instructions		39	<del>"</del>
	Total Add lines 37, 38 and 39 to line 35c or 36, whichever applies		40	0.
	Tax and Payments		<del></del>	
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)  41a		多数	<del></del>
	Other credits (see instructions)			
	General business credit. Attach Form 3800			
ď	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		ttach schedule)	43	
44	Total tax, Add lines 42 and 43	taon bonoco.c,	44	0.
		50,792		
	2017 estimated tax payments 45b	,,,,_		
	Tax deposited with Form 8868			
	Foreign organizations: Tax paid or withheld at source (see instructions)  45d			
	· · · · · · · · · · · · · · · · · · ·		- 300	
				`
	,	<u>.</u>		
g	Other credits and payments: Form 2439			
40	Form 4136 Other Total ▶ 45g			50,792.
46	Total payments. Add lines 45a through 45g		46	30,132.
47	Estimated tax penalty (see instructions). Check if Form 2220 is attached		47	
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed		48	50,792.
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid		49	
50	Enter the amount of line 49 you want. Credited to 2018 estimated tax   50,792. Refu  Statements Regarding Certain Activities and Other Information (see instruc	unded >	50	0.
				I Van I Na
51	At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority	<i>!</i>		Yes No
	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
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore	eign trust?		X
	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 >\$			\$250 (A. 100 A.
Sian	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	pe De	owieoge and	o beller, it is true,
Sign Here	I Maddelle Commencer	N	lay the IRS	discuss this return with
пеге	Surfature of officer Date PRESIDENT			shown below (see
	, Carlotte and the carl		nstructions)	X Yes No
	Print/Type preparer's name Preparer's signature Date	Check	if PTIN	
Paid	1/ 1/14 - 2/54 \7/10\706 71/1 - 112\6 \6701/7 - 1	self- employed		1 505000
Prepa	rer (222 of 2230223)	- :		1525903
Use C	ply   Firm's name ► CHAMBLISS, BAHNER > STOPHEL, P.C.	Firm's EIN	62	1-1674553
	605 CHESTNUT STREET, SUITE 1700			756 2000
	Firm's address ► CHATTANOOGA, TN 37450-0019	Phone no.	(423)	756-3000
				Form 990-T (2017)

723711 01-22-18

## CHRISTIAN EDUCATION CHARITABLE TRUST

Form 990-T (2017) C/O H. O. MACLELLAN, JR.

23-7412895

Page 3

Schedule A - Cost of Good	s Sold. Enter	method of inven	itory v	aluation N/A				-	_
1 Inventory at beginning of year	1		_	Inventory at end of year	ır		6		_
2 Purchases	2		] 7	Cost of goods sold. Su	ıbtract I	ine 6			
3 Cost of labor	3			from line 5. Enter here	and in l	Part I,			
4a Additional section 263A costs			]	line 2			7		
(attach schedule)	4a		8	Do the rules of section	263A (	with respect to		Yes No	D
<ul><li>Other costs (attach schedule)</li></ul>	4b			property produced or a	acquired	for resale) apply to			
5 Total. Add lines 1 through 4b	5			the organization?				1_ <u>_</u>	_
Schedule C - Rent Income (see instructions)	(From Real	Property and	d Pe	sonal Property	Leas	ed With Real Prop	perty	y) 	
1. Description of property									
(1)									
(2)									
(3)							-	•	
(4)									
		ved or accrued				3(a) Deductions directly		stad with the income in	
` rent for personal property is more than			personal	onal property (if the percents property exceeds 50% or if ed on profit or income)	age	columns 2(a) and			
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		nter -			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<b>•</b>	0	١.
Schedule E - Unrelated De	bt-Financed	<b>i Income</b> (see	ınstru	ctions)					_
			١,	- Gross income from		<ol><li>Deductions directly conf to debt-finance</li></ol>	nected	with or allocable perty	
1. Description of debt-fi	inneed property		`	or allocable to debt-	(a)	Straight line depreciation	T	(b) Other deductions	
r. Description of dest-ii	manced property			financed property		(attach schedule)		(attach schedule)	
(1)									
(2)									
(3)									
(4)		<u> </u>							
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or debt-fina	e adjusted basis allocable to anced property th schedule)	6	. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	(	8. Allocable deductions column 6 x total of column 3(a) and 3(b))	s
(1)			1	%					
(2)	<b>†</b>		$\top$	%					
(3)			1	%			1		
(4)			1	%					
						inter here and on page 1, Part I, line 7, column (A)		Enter here and on page 1, Part I, line 7, column (B)	
Totals				•	1	0		0	١.
Total dividends-received deductions in	ncluded in colum	n 8		•		<b>•</b>	$\top$		١.
			_			-			_

		•		Exempt (	Controlled O	rganızatı	ons				
Name of controlled organizati .	an '	2. Empl identifica numb	ation		elated income instructions)	4. Tot payr	al of specified ments made ,	includ	rt of column 4 t led in the contr zation's gross i	rolling	6. Deductions directly connected with income in column 5
)			<u> </u>	<u> </u>							•
)							r				
3) .						·		1			
) )	-						1	1			
nexempt Controlled Organia	rations			_ (							
• •			. (1)	0 7-4-1	-4		10 Day of each	0.45		11 0-	
7. Taxable Income		related income e instructions)		9. Iotal	of specified pays made	ments	10. Part of colu in the control gros	ling orga is incomi	nization's	with	ductions directly connecting income in column 10
)						-			,		
2) -											
	<u> </u>							•			-
3)				<del> </del>		4					
1)				1						`	
•			,			)	Add colu Enter here an line 8,		e 1, Part 1,	Enter h	d columns 6 and 11 ere and on page 1, Part line 8, column (B)
otals .				,		▶			0.		,
chedule G - Investme		ne of a S	Section	n 501(c)(	7), (9), or	(17) Or	ganizatio	n .			
(see instr	uctions)	ne ,			2. Amount of	ıncome	3. Deduction	ected	4. Set-	asides chedule)	5. Total deduction and set-asides
· · · · · · · · · · · · · · · · · · ·		-					(attach sche	uuie)	,	,	(col 3 plus col
<u>'</u>									ļ		<u> </u>
2)		•								•	
3)					l						
1) •		· · · ·	~				y				-
				,	Enter here and Part I, line 9, co						Enter here and on page Part I, line 9, column
otals				<b>•</b>	· · · ·	0.					*
chedule I - Exploited (see instru	-	Activity	Inçon	ne, Othe	r Than Ac	vertis	ing Incom	е			, ,
, *	-				4	(1)	-				I
* **	2. Gro	oss		kpenses	4. Net inconfrom unrelated	ne (loss) d trade or	5. Gross inc	ome	6. Exp		7. Excess exemp
1. Description of	unrelated b	usiness		connected roduction	business (co minus colum	olumn 2	from activity is not unrela	that	attribut:		expenses (column 6 minus column 5
<ul> <li>exploited activity</li> </ul>	trade or bu			nrelated ss income	gain, comput	e cols 5	business inc		colur	mn 5	but not more than column 4)
٠, ٠			Dusine	SS INCOME	through	17					Coldinii 4)
1)		Î									
2)		<u> </u>									1
3)					<del>  •                                   </del>				<del>                                     </del>		<del>                                     </del>
					<del>                                     </del>	<del> </del>			<del> </del>		+
4)	Enter here	and as	Cetes	ere and on	442-4-0 2000 0000 0000	01000000000000000000000000000000000000	Ar 605 margar socious and	indectives are	SGUE OSSESSUS - NOUVERNOS	SERVICE CONTRACTOR	b Enter here and
ŕ	page 1, I			ere and on 1, Part I,							on page 1,
• • •	line 10, c	ol (A).	line 10	), col (B).							Part II, line 26
tals <b>&gt;</b>		0.		0.							<b>Ì</b> l
chedule J - Advertisi	ng Incon	ne (see in	structio	ns)							
art   Income From I					solidated	Rasis		<del></del>			
							•		,		
1. Name of periodical		2. Gross advertising income	ad	3. Direct vertising costs	or (loss) (c col 3) If a g	tising gain ol 2 minus ain, compu hrough 7			6. Reade cost		<ol> <li>Excess readershit costs (column 6 minu column 5, but not mothan column 4).</li> </ol>
1	_		$\dashv$		*********		×		<del>                                     </del>		
1)	-+				$\dashv $		≋		<del>                                     </del>		
2)		<del></del>					<b>&amp;</b> ├		<del>  '</del>		
3)							<b>%</b>		<u> </u>		
4)							**			•	
	[	,	).l `				I '				
Totals (carry to Part II, line (5))			1 . !		-1						

### CHRISTIAN EDUCATION CHARITABLE TRUST

orm 990-T (	2017) (	c/0	H.	0.	MACLELLAN,	JR.

23-7412895

Page 5

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	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)				Part II, line 27
Totals, Part II (lines 1-5)	▶ 0.	0.				0.

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

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

Form 990-T (2017)



NOL CARRYOVER AVAILABLE THIS YEAR

BUSINESS ACTIVITY  PASS THROUGH UNRELATED BUSINESS INCOME FROM PARTNERSHIPS  TO FORM 990-T, PAGE 1  FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS  AND S CORPORATIONS  DESCRIPTION  360 ENERGY OPPORTUNITY FUND, L.P 47-36522  ARRIAL BIOPHARMA, LLC - 27-4435278  ARRIVO BIOVENTURES, LLC - 30-0936594  PULCRUM GROWTH FUND III QP. LLC - 81-1481141  CGM GROSVEOR MACLELLAN INVESTMENT FUND LP - 26-0458356  KW DISCOVERY, LLC - 61-1692541  MIDNIGHT PHARMA LLC - 47-3667652  PS INSTITUTIONAL ONSHORE, LP - 45-2441838  PORTFOLIO ADVISORS SECONDARY FUND III, L.P 32-0477812  RELEVANCE CAPITAL III, LP - 46-4755264  RESOLUTE CAPITAL PARTNERS FUND IV, LP - 81-3965319  RESOURCE LAND FUND II, LLC - 37-1447054  TENTH STREET FIRMOKIAL OPPORTUNITY FUND II, LP - 32-0405144  VALOR VENTURE FUND II, L.P 98-1341717  TOTAL TO FORM 990-T, PAGE 1, LINE 5  LOSS  FORM 990-T  NET OPERATING LOSS DEDUCTION  STATEMENT  TAX YEAR LOSS SUSTAINED  LOSS  PREVIOUSLY LOSS  AVAILABLE  TAX YEAR LOSS SUSTAINED  12/31/15  6,577.  0. 6,577.  6,5						
TO FORM 990-T, PAGE 1  FORM 990-T	RM 990-T	DESCRIPTION OF			STATEMENT	14
FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS  AND S CORPORATIONS  DESCRIPTION  360 ENERGY OPPORTUNITY FUND, L.P 47-36522 -7, AERIAL BIOPHARMA, LLC - 27-4435278 -1, ARRIVO BIOVENTURES, LLC - 30-0936594 -11, DYNAMO FUND I, LP - 81-3376869 -11, DYNAMO FUND I, LP - 81-3376869 -11, CCM GROSVEOR MACLELLAN INVESTMENT FUND LP - 26-0458356 -1, KW DISCOVERY, LLC - 61-1692541 -16, MIDNIGHT PHARMA LLC - 47-3667652 -4, PS INSTITUTIONAL ONSHORE, LP - 45-2441838 -4, PORTFOLIO ADVISORS SECONDARY FUND III, L.P 32-0477812 -7, RELEVANCE CAPITAL III, LP - 46-4755264 -7, RESOURCE LAND FUND II, LLC - 37-1447054 -7, TESOURCE CAPITAL PARTNERS FUND IV, LP - 81-3965319 -7, RESOURCE LAND FUND II, LLC - 37-1447054 -7, TOTAL TO FORM 990-T, PAGE 1, LINE 5 -25,  FORM 990-T NET OPERATING LOSS DEDUCTION STATEMENT  LOSS PREVIOUSLY LOSS AVAILABLE TAX YEAR LOSS SUSTAINED APPLIED REMAINING THIS YEAR  12/31/15 6,577. 0. 6,577. 6,5			NESS INCOME FROM	PARTNERSHIPS		
AND S CORPORATIONS  DESCRIPTION  360 ENERGY OPPORTUNITY FUND, L.P 47-36522 -7, AERIAL BIOPHARMA, LLC - 27-4435278 -7, ARRIVO BIOVENTURES, LLC - 30-0936594 -11, DYNAMO FUND I, LP - 81-3376869 -11, DYNAMO FUND III QP, LLC - 81-1481141 -10, GCM GROSVEOR MACLELLAN INVESTMENT FUND LP - 26-0458356 -1, KW DISCOVERY, LLC - 61-1692541 -16, MIDNIGHT PHARMA LLC - 47-3667652 -4, PS INSTITUTIONAL ONSHORE, LP - 45-2441838 -7, PORTFOLIO ADVISORS SECONDARY FUND III, L.P 32-0477812 -1, RELEVANCE CAPITAL III, LP - 46-4755264 -7, RESOUNCE LAND FUND II, LLC - 37-1447054 -7, TENTH STREET FINANCIAL OPPORTUNITY FUND II, LP - 32-0405144 -7, TOTAL TO FORM 990-T, PAGE 1, LINE 5 -25,  FORM 990-T NET OPERATING LOSS DEDUCTION STATEMENT  LOSS PREVIOUSLY LOSS AVAILABLE TAX YEAR LOSS SUSTAINED APPLIED REMAINING THIS YEAR  12/31/15 6,577. 0. 6,577. 6,5	FORM 990-	T, PAGE 1				
360 ENERGY OPPORTUNITY FUND, L.P 47-36522  ARRIAL BIOPHARMA, LLC - 27-4435278  ARRIVO BIOVENTURES, LLC - 30-0936594  ARRIVO BIOVENTURES, LLC - 30-0936594  PULCRUM GROWTH FUND III QP, LLC - 81-1481141  GCM GROSVEOR MACLELLAN INVESTMENT FUND LP - 26-0458356  I, KW DISCOVERY, LLC - 61-1692541  MIDNIGHT PHARMA LLC - 47-3667652  PS INSTITUTIONAL ONSHORE, LP - 45-2441838  PORTFOLIO ADVISORS SECONDARY FUND III, L.P 32-0477812  RELEVANCE CAPITAL III, LP - 46-4755264  RESOLUTE CAPITAL PARTNERS FUND IV, LP - 81-3965319  RESOURCE LAND FUND II, LLC - 37-1447054  TENTH STREET FINANCIAL OPPORTUNITY FUND II, LP - 32-0405144  VALOR VENTURE FUND II, L.P 98-1341717  TOTAL TO FORM 990-T, PAGE 1, LINE 5  LOSS  PREVIOUSLY  LOSS  PREVIOUSLY  LOSS  AVAILABLE  TAX YEAR LOSS SUSTAINED  APPLIED  REMAINING  THIS YEAR  12/31/15  6,577.  0. 6,577.  6,5	RM 990-Т			HIPS	STATEMENT	15
ARRIAL BIOPHARMA, LLC - 27-4435278  ARRIVO BIOVENTURES, LLC - 30-0936594 -11, DYNAMO FUND I, LP - 81-3376869 FULCRUM GROWTH FUND III QP, LLC - 81-1481141 -10, GCM GROSVEOR MACLELLAN INVESTMENT FUND LP - 26-0458356 1, KW DISCOVERY, LLC - 61-1692541 16, MIDNIGHT PHARMA LLC - 47-3667652 -4, PS INSTITUTIONAL ONSHORE, LP - 45-2441838 PORTFOLIO ADVISORS SECONDARY FUND III, L.P 32-0477812 RELEVANCE CAPITAL III, LP - 46-4755264 RESOLUTE CAPITAL PARTNERS FUND IV, LP - 81-3965319 RESOURCE LAND FUND II, LLC - 37-1447054 TENTH STREET FINANCIAL OPPORTUNITY FUND II, LP - 32-0405144 VALOR VENTURE FUND II, L.P 98-1341717 -7, TOTAL TO FORM 990-T, PAGE 1, LINE 5 -25,  FORM 990-T NET OPERATING LOSS DEDUCTION STATEMENT LOSS PREVIOUSLY LOSS AVAILABLE TAX YEAR LOSS SUSTAINED APPLIED REMAINING THIS YEAR 12/31/15 6,577. 0. 6,577. 6,5	SCRIPTION				AMOUNT	
LOSS PREVIOUSLY TAX YEAR LOSS SUSTAINED APPLIED REMAINING THIS YEAR 12/31/15 6,577. 0. 6,577.	RIAL BIOPI RIVO BIOVI NAMO FUND LCRUM GROSVEOI DISCOVER' ONIGHT PHE INSTITUT: RTFOLIO AI LEVANCE CA SOLUTE CAI SOURCE LAI NTH STREE' LOR VENTU	HARMA, LLC - 27-44 ENTURES, LLC - 30- I, LP - 81-337686 VTH FUND III QP, I R MACLELLAN INVES C, LLC - 61-169254 ARMA LLC - 47-3667 CONAL ONSHORE, LP OVISORS SECONDARY APITAL III, LP - 42 PITAL PARTNERS FUND VD FUND II, LLC - RE FUND II, L.P RE FUND II, L.P	435278 -0936594 59 LLC - 81-1481141 STMENT FUND LP - 41 7652 - 45-2441838 FUND III, L.P 46-4755264 ND IV, LP - 81-39 37-1447054 FUNITY FUND II, LE - 98-1341717	32-0 <b>4</b> 77812 65319	-11,5 -10,1 1,9 16,1 -4,5	535. 571. 571. 152. 754. 787. 187. 187. 187. 187. 187. 187. 187. 187. 187.
TAX YEAR LOSS SUSTAINED PREVIOUSLY LOSS AVAILABLE REMAINING THIS YEAR 12/31/15 6,577. 0. 6,577. 6,5	RM 990-T	NET	OPERATING LOSS D	EDUCTION	STATEMENT	16
,,,	X YEAR	LOSS SUSTAINED	PREVIOUSLY		AVAILABLE THIS YEAR	
· · · · · · · · · · · · · · · · · · ·					6,5° 23,5°	

30,090.

30,090.

#### SCHÉDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

### **Capital Gains and Losses**

Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

► Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No. 1545-0092

2017

Employer identification number

Schedule D (Form 1041) 2017

CHRISTIAN EDUCATION CHARITABLE TRUST 23-7412895 C/O H. O. MACLELLAN, JR. Note: Form 5227 filers need to complete only Parts I and II "Part | Short-Term Capital Gains and Losses - Assets Held One Year or Less See instructions for how to figure the amounts to enter on the lines below. (h) Gain or (loss) (d) (e) (g) Adjustments Súbtract column (é) Proceeds Cost to gain or loss from from column (d) and (sales price) (or other basis) This form may be easier to complete if you round off cents to whole dollars. Form(s) 8949, Part I combine the result with column (a) line 2, column (g) 1 a 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 1 b Totals for all transactions reported on Form(s) 8949 with Box A checked Totals for all transactions reported on Form(s) 8949 with Box B checked Totals for all transactions reported on Form(s) 8949 with 3,804 3,804. Box C checked Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2016 Capital Loss 1,220.) 6 Carryover Worksheet Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, 2.584. column (3) on page 2 Part⋅II Long-Term Capital Gains and Losses - Assets Held More Than One Year See instructions for how to figure the amounts to enter on the lines below. (e) (g) Adjustments (h) Gain or (loss) (d) Subtract column (e) Proceeds Cost from column (d) and to gain or loss from (sales price) (or other basis) orm(s) 8949. Part II This form may be easier to complete if you round off cents to whole dollars. combine the result line 2, column (g) with column (g) 8 a 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 8 b Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with 10 4,583. 43. 4,540. Box F checked Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 11 11 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 12 12 13 13 Capital gain distributions 14 Gain from Form 4797, Part I 14 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2016 Capital Loss 7,739.) 15 Carryover Worksheet Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on line 18a, -3,199column (3) on page 2

710841 12-20-17 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

## CHRISTIAN EDUCATION CHARITABLE TRUST

Schedule D (Form 1041) 2017 C/O H. O. MACLELLAN, JR.			23-7412	1895 Page 2
. இPart∕III; Summary of Parts I and II	(	1) Beneficiaries'	(2) Estate's	(3) Total
Caution: Read the instructions before completing this part			or trust's	
17 Net short-term gain or (loss)	17		2,584.	2,584.
18 Net long-term gain or (loss):				
a Total for year	18a		-3,199.	-3,199.
b Unrecaptured section 1250 gain (see line 18 of the wrksht.)	18b			
c 28% rate gain	18c	_		
19 Total net gain or (loss). Combine lines 17 and 18a	▶ 19	-	-615.	-615.
Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or	Form 990-T, Pa	rt I, line 4a) If line	s 18a and 19, columr	(2), are net gains,
go to Part V, and don't complete Part IV If line 19, column (3), is a net loss, com	nplete Part IV and	d theCapital Loss C	arryover Worksheet, <i>a</i>	s necessary
Part IV: Capital Loss Limitation				
20 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 40	c, if a trust), the si	maller of:		
a The loss on line 19, column (3) or b \$3,000			20 (	615.)
Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, pag	ge 1, line 22 (or l	orm 990-T, line 3	4), is a loss, complete	theCapital
Loss Carryover Worksheet in the instructions to figure your capital loss carryover				
Part V Tax Computation Using Maximum Capital Gain	s Rates			
Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gair	ns; or an amount is	entered in Part I or	Part II and there is an e	ntry on Form 1041,
line 2b(2), and Form 1041, line 22, is more than zero.				
Caution: Skip this part and complete the Schedule D Tax Worksheet in the instruc	tions if	•		
• Either line 18b, col (2) or line 18c, col (2) is more than zero, or				•
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualifie	d dividends are inc	duded in income in l	Part I of Form 990-T, an	ı <b>d</b> Form 990-T, line
34, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the	e instructions if eitl	ner line 18b, col. (2)	or line 18c, col. (2) is m	nore than zero.
21 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	21			
22 Enter the smaller of line 18a or 19 in column (2)				
but not less than zero				
23 Enter the estate's or trust's qualified dividends from				
Form 1041, line 2b(2) (or enter the qualified dividends		•		
included in income in Part I of Form 990-T) 23				
24 Add lines 22 and 23 24				
25 If the estate or trust is filing Form 4952, enter the				
amount from line 4g; otherwise, enter -0-				
26 Subtract line 25 from line 24. If zero or less, enter -0-	26			
27 Subtract line 26 from line 21. If zero or less, enter -0-	27			
28 Enter the smaller of the amount on line 21 or \$2,550	28			
29 Enter the smaller of the amount on line 27 or line 28	29			
30 Subtract line 29 from line 28. If zero or less, enter -0 This amount is taxed at 0%	·		▶ 30	
31 Enter the smaller of line 21 or line 26	31			
32 Subtract line 30 from line 26	32		12 12 1	
33 Enter the smaller of line 21 or \$12,500	33			
<b>34</b> Add lines 27 and 30	34			
35 Subtract line 34 from line 33. If zero or less, enter -0-	35			
36 Enter the smaller of line 32 or line 35	36			
37 Multiply line 36 by 15% (0.15)		-	▶ 37	
38 Enter the amount from line 31	38	3	200 TV	
39 Add lines 30 and 36	39			
40 Subtract line 39 from line 38. If zero or less, enter -0-	40			
41 Multiply line 40 by 20% (0.20)	<del></del>		<b>▶</b> 41	
42 Figure the tax on the amount on line 27. Use the 2017 Tax Rate Schedule for Estates	s			
and Trusts (see the Schedule G instructions in the instructions for Form 1041)	42			
43 Add lines 37, 41, and 42	43	,		
44 Figure the tax on the amount on line 21. Use the 2017 Tax Rate Schedule for Estates				
and Trusts (see the Schedule G instructions in the instructions for Form 1041)	44			
45 Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form			36-35-38-11	,
G. line 1a (or Form 990-T. line 36)	, , , , , , , , , , , , , , , , , , , ,		45	1

710842 12-20-17

Schedule D (Form 1041) 2017

# 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

Attachment Sequence No. 12A

Name(s) shown on return

CHRISTIAN EDUCATION CHARITABLE TRUST

C/O H. O. MACLELLAN, JR.

Social security number or taxpayer identification no.

23-7412895

Before you check Box A, B, or C bel statement will have the same inform broker and may even tell you which	atıon as Form 10	you received an 99-B Either will	y Form(s) 1099-B show whether you	or substitute statei r basis (usually you	ment(s) fro ir cost) wa	om your broker As as reported to the	substitute IRS by your
Part I Short-Term. Transac Note: You may aggregate a codes are required Enter th	tions involving c	ctions reported on	Form(s) 1099-B show	ving basis was report	ed 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 w  (A) Short-term transactions re  (B) Short-term transactions re	ill fit on this page for o ported on Form(: ported on Form(:	one or more of the box s) 1099-B showir s) 1099-B showir	es, complete as many fo ng basis was repoi ng basis <b>wasn't</b> re	rted to the IRS (see	checked as yo	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 ve	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)
PORTFOLIO ADVISORS	·						<u> </u>
SECONDARY FUND			677				677
III, L.P.	VARIOUS	VARIOUS	677.	0.		<u></u>	677.
PS INSTITUTIONAL			2 4 2 5				2 4 0 0
ONSHORE LP	VARIOUS	VARIOUS	3,127.	0.			3,127.
	†						· -
	<b>†</b>						
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2 Totals. Add the amounts in colinegative amounts) Enter each Schedule D, line 1b (if Box A al	total here and in	clude on your			٠		

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

3,804.

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

3,804

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

CHRISTIAN EDUCATION CHARITABLE TRUST

Social security number or taxpayer identification no.

C/O H. O. MACLELLAN, JR. 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

23-7412895

statement will have the same information broker and may even tell you which I		99-B Either will	show whether you	ır basıs (usually yol	ır cost) wa	as reported to the	IRS by your
Part II Long-Term. Transact Note: You may aggregate al codes are required. Enter the	tions involving ca I long term transac	tions reported on F	orm(s) 1099-B show	ing basis was reporte	ed to the IR	S and for which no a	djustments or
You must check Box D, E, or F below. If you have more long-term transactions than will (D) Long-term transactions rep  (E) Long-term transactions rep  X (F) Long-term transactions not	Il fit on this page for or ported on Form(s ported on Form(s	ne or more of the boxe s) 1099-B showin s) 1099-B showin	s, complete as many for ig basis was repor g basis <b>wasn't</b> rej	rms with the same box c ted to the IRS (see	hecked as you	ove)	
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 you	nt, if any, to gain or ou enter an amount (g), enter a code in ). See instructions.  (g)  Amount of adjustment	
GCM GROSVENOR							
MACLELLAN							
INVESTMENT FUND LP	VARIOUS	VARIOUS	0.	20.		, and a second	<20.>
PORTFOLIO ADVISORS							
SECONDARY FUND							
III, L.P.	VARIOUS	VARIOUS	3,987.	0.			3,987.
PS INSTITUTIONAL							
ONSHORE LP	VARIOUS	VARIOUS	596.	0.			596.
RESOURCE LAND							
FUND, II, LLC	VARIOUS	VARIOUS	0.	23.			<23.>
		· · · · -				1	
	1						
		<u> </u>		1			
	<del>                                       </del>	<del>                                     </del>		· · · · · · · · · · · · · · · · · · ·	<del> </del>	<del>                                     </del>	<del> </del>

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 above is checked), or line 10 (if Box F above is checked)

4,583. 43.

4,540.

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

#### SCHEDULE D (Form 1041)

# ALTERNATIVE MINIMUM TAX Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

OMB No. 1545-0092

Department of the Treasury Internal Revenue Service

CHRISTIAN EDUCATION CHARITABLE TRUST

► Use Form 8949 to list your transactions for lines 10, 2, 3, 80, 9 and 10
► Go to www.irs.gov/F1041 for instructions and the latest information.

Employer identification number

23-7412895 C/O H. O. MACLELLAN, JR: Note: Form 5227 filers need to complete only Parts I and II Parti Short-Term Capital Gains and Losses - Assets Held One Year or Less (h) Gain or (loss) See instructions for how to figure the amounts to enter on the lines below. (d) (e) (g) Adjustments Sùbtract column (é) Proceeds Cost to gain or loss from Form(s) 8949, Part I line 2, column (g) from column (d) and (or other basis) (sales price) This form may be easier to complete if you round off cents to whole dollars. combine the result with column (g) 1 a 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 1 b Totals for all transactions reported on Form(s) 8949 with Box A checked Totals for all transactions reported on Form(s) 8949 with Box B checked Totals for all transactions reported on Form(s) 8949 with 3,804 3,804. Box C checked Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 5 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2016 Capital Loss Carryover Worksheet Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17,

	column (3) on page 2	•		<b>•</b>	7	3,804.
₹Pa	rt II Long-Term Capital Gains and Losses - Ass	sets Held More	Than One Year	•		
	orm may be easier to complete if you round off cents to whole dollars.	Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmen to gain or loss Form(s) 8949, line 2, colum	from Part II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8 a	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					
8 Ь	Totals for all transactions reported on Form(s) 8949 with  Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with  Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with  Box F checked	4,583.	43.			4,540.
11	Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, an	d 8824			11	
12	Net long-term gain or (loss) from partnerships S corporations, and other	r estates or trusts			12	
13	Capital gain distributions				13	
14	Gain from Form 4797, Part I				14	
15	Long-term capital loss carryover. Enter the amount, if any, from line 14 o Carryover Worksheet	15	()			
16	Net long-term capital gain or (loss). Combine lines 8a through 15 in col column (3) on page 2	lumn (h). Enter here and	d on line 18a,	<b>.</b>	16	4,540.
71084	1 12-20-17 LHA For Paperwork Reduction Act Notice, see the Instruction	ns for Form 1041.			Schedu	le D (Form 1041) 2017

## ALTERNATIVE MINIMUM TAX

Schedule D (Form 1041) 2017 CHRISTIAN EDUCATION CHARITAB	LE TRUST C/O F	I. O 23-7412895 Page
Part III Summary of Parts I and II	(1) Beneficiaries'	(2) Estate's (3) Total
Caution: Read the instructions before completing this part		or trust's
17 Net short-term gain or (loss)	17	3,804. /3,804.
18 Net long-term gain or (loss):		
a Total for year	18a	4,540, 4,540.
b Unrecaptured section 1250 gain (see line 18 of the wrksht.)	18b	
c 28% rate gain	18c	
19 Total net gain or (loss). Combine lines 17 and 18a	19	8,344. 8,344.
Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 9	990-T, Part I, line 4a) If line	s 18á and 19, column (2), are net gains
go to Part V, and don't complete Part IV If line 19, column (3), is a net loss, complete F	Part IV and the Capital Loss C	arryover Worksheet, as necessary
Part: IV Capital Loss Limitation	ı . /	
20 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a tru	ist), the smaller of:	
a The loss on line 19, column (3) or b \$3,000		20 (
Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, lin	ne 22 (or Form,990-T, line 3	4), is a loss, complete the Capital
Loss Carryover Worksheet in the instructions to figure your capital loss carryover		
Part V Tax Computation Using Maximum Capital Gains Rat	es /	
Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an	amount is entered in Part I or	Part II and there is an entry on Form 1041,
line 2b(2), and Form 1041, line 22, is more than zero.		
Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if		
Either line 18b, col. (2) or line 18c, col. (2) is more than zero, or	,	•
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero'	i .	<u>-</u>
Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified divide	nds are included in income in l	Part I of Form 990-T, and Form 990-T, line
34, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instruc		
21 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	21	
22 Enter the smaller of line 18a or 19 in column (2)	1268	
but not less than zero 22		
23 Enter the estate's or trust's qualified dividends from	<b>∀</b> ₩	
Form 1041, line 2b(2) (or enter the qualified dividends		
included in income in Part I of Form 990-T)		
24 Add lines 22 and 23 24 /		
25. If the estate or trust is filing Form 4952 enter the	<b>⊣</b> ?	i i
amount from line 4g; otherwise, enter -0-		
26 Subtract line 25 from line 24. If zero or less, enter -0-	26	
27 Subtract line 26 from line 21. If zero or less, enter -0-/	27	
28 Enter the smaller of the amount on line 21 or \$2,550	28	
29 Enter the smaller of the amount on line 27 or line,28	29	
30 Subtract line 29 from line 28. If zero or less, enter -0 This amount is taxed at 0%	L.72 L	30
31 Enter the smaller of line 21 or line 26	31	
32 Subtract line 30 from line 26	32	
33 Enter the smaller of line 21 or \$12,500	33	
34 Add lines 27 and 30	34	
35 Subtract line 34 from line 33. If zero or less, enter -0-	35	
36 Enter the smaller of line 32 or line 35	36	
37 Multiply line 36 by 15% (0.15)		▶ 37
38 Enter the amount from line 31	38	
39 Add lines 30 and 36	39	
40 Subtract line 39 from line 38. If zero or less, enter -0-	40	
41 Multiply line 40 by 20% (0.20)		<b>→</b> 41 .
42 Figure the tax on the amount on line 27. Use the 2017 Tax Rate Schedule for Estates	1 1	
and Trusts (see the Schedule G instructions in the instructions for Form 1041)	42	
· •	43	
43 Add lines 37, 41, and 42	***	<del> </del>
44 Figure the tax on the amount on line 21. Use the 2017 Tax Rate Schedule for Estates	] 44.]	
and Trusts (see the Schedule G instructions in the instructions for Form 1041)	Cabadula	
45 Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041,	ochedule	_ As
G, line 1a (or Form 990-T, line 36)	•	<b>▶</b>   45

710842 12-20-17

Schedule D (Form 1041) 2017

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

CHRISTIAN EDUCATION CHARITABLE TRUST

C/O H. O. MACLELLAN, JR.

Social security number or taxpayer identification no.

23-7412895

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check Part I Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2 Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a, you aren't required to report these transactions on Form 8949 (see instructions) You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box sactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or (b) (e) (h) loss. If you enter an amount Gain or (loss). Subtract column (e) Proceeds Cost or other Description of property Date acquired Date sold or in column (g), enter a code in column (f). See instructions. (sales price) basis See the (Example 100 sh XYZ Co) (Mo, day, yr) disposed of from column (d) & Note below and (Mo, day, yr) (g) see Column (e) ır combine the result Amount of adjustment Code(s) the instructions with column (g) PORTFOLIO ADVISORS SECONDARY FUND VARIOUS VARIOUS 677. 0 III, L.P. PS INSTITUTIONAL ONSHORE LP 3,127. 0 VARIOUS VARIOUS 3,127 Totals. Add the amounts in columns (d), (e), (g) and (h) (subtract negative amounts) Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

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

3,804.

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

3,804.

### ALTERNATIVE MINIMUM TAX

Form 8949 (2017)				Attachn	nent Seque	nce No 12A	Page 2
Name(s) shown on return Name and CHRISTIAN EDUC						Social secur	ity number or ntification no.
C/O H. O. MACL			INODI			1 ' '	412895
Before you check Box D, E, or F belo	w see whether	vou received an	v Form(s) 1099-B	or substitute statei	nent(s) fron		
statement will have the same information broker and may even tell you which is	ation as Form 10	99-B Either will	show whether you	ır basıs (usually yo	ur cost) was	reported to the	IRS by your
Part II Long-Term. Transact	tions involving ca	apital assets you	held more than 1	year are long term	For short	term transactions	s, see page 1
Note: You may aggregate all codes are required. Enter the	totals directly on	Schedule D, line 8	a, you aren't required	to report these tran	sactions on F	Form 8949 (see inst	ructions)
You must check Box D, E, or F below. If you have more long-term transactions than will	Check only one bo	ox. If more than one b	ox applies for your long	term transactions, comp	olete a separate	Form 8949, page 2, fo	r each applicable box
(D) Long-term transactions rep							
(E) Long-term transactions rep	•	•	•	•		,	
X (F) Long-term transactions not	•	•	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
1 (a)	<del> </del>	T	(d)	(e)	Adiustment	t, if any, to gain or	(h)
Description of property	(b) Date acquired	(c) Date sold or	Proceeds	Cost or other	loss. If you	u enter an amount	Gain or (loss).
(Example: 100 sh XYZ Co)	(Mo, day, yr)	disposed of	(sales price)	basis See the	in column (f)	g), enter a code in See instructions.	Subtract column (e)
(Example 100 Sit X12 CO)	(wo, day, yr,	(Mo, day, yr)		Note below and			from column (d) &
		(wio, day, yr,		see Column (e) ın	(f) Code(s)	(g) Amount of	combine the result
				the instructions	Code(s)	adjustment	with column (g)
GCM GROSVENOR	l						
MACLELLAN							<u> </u>
INVESTMENT FUND LP	VARIOUS	VARIOUS	0.	20.	ll		<20.
PORTFOLIO ADVISORS							
SECONDARY FUND							
III, L.P.	VARIOUS	VARIOUS	3,987.	0.			3,987.
PS INSTITUTIONAL					1		<u> </u>
ONSHORE LP	VARIOUS	VARIOUS	596.	0.	1		596.
RESOURCE LAND	VILITOOD	VILLIOOD	330.				3300
FUND, II, LLC	VARIOUS	VARIOUS	0.	23.			<23.
FUND, II, LLC	VARIOUS	VAKIOUS	U •	23.	<del>                                     </del>		(23.
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O Table Add the control of			<del>                                     </del>	+	<del>                                     </del>	_	
2 Totals. Add the amounts in colu			1	1			
negative amounts) Enter each t		=					-
Schedule D, line 8b (if Box D at	•	•		1			4 540
above is checked), or line 10 (if	Boy E above is	checked\	4.583.	1 43.	1		4,540.

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

TEMENT 1	EDULE D CAPITAL LOSS CARRYOVER WORKSHEET STA	SCH
-26,20	ENTER THE AMOUNT FROM FORM 990-T, LINE 34	1.
61	ENTER THE LOSS FROM SCHEDULE D, LINE 20, AS A POSITIVE AMT	2.
	COMBINE LINES 1 AND 2. IF ZERO OR LESS, ENTER -0	3.
	ENTER THE SMALLER OF LINE 2 OR LINE 3	4.
	NOTE: IF LINE 7 OF SCHEDULE D IS A LOSS, GO TO LINE 5; OTHERWISE, ENTER -0- ON LINE 5 AND GO TO LINE 9.	
(	ENTER THE LOSS FROM SCH D, LINE 7, AS A POSITIVE AMOUNT	5.
	ENTER ANY GAIN FROM SCHEDULE D, LINE 16 0	6.
+	ADD LINES 4 AND 6	7.
ı	SHORT-TERM CAPITAL LOSS CARRYOVER TO 2018. SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0	8.
	NOTE: IF LINE 16 OF SCHEDULE D IS A LOSS, GO TO LINE 9; OTHERWISE, SKIP LINES 9 THROUGH 13.	
3,19	ENTER THE LOSS FROM SCHEDULE D, LINE 16, AS A POSITIVE AMT	9.
	ENTER ANY GAIN FROM SCHEDULE D, LINE 7 2,584	10.
	SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0	11.
2,58	ADD LINES 10 AND 11	12.
61	LONG-TERM CAPITAL LOSS CARRYOVER TO 2018. SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0	13.