•		(839)						29888	132	804117
	.4	, OOO T		EXTENDED TO NO					_	OMB No 1545-0687
	Form	990-1		Exempt Organization Book (and proxy tax u				ax Return	'	UMB NO 1343-0087
		•*	For cal	lender year 2017 or other tax year beginning	iiuei se	end e.	- **			2017
	_		, 0, 00,	► Go to www.irs.gov/Form990T fo	or instructi		-	nation.	_ [
		tment of the Treasury al Revenue Service	•	Do not enter SSN numbers on this form as it						Open to Public Inspection for 501(c)(3) Organizations Only
	A [Check box if address changed	box if Name of organization () theck box it hame changed and see instructions.)							oyer identification number oyees' trust, see ctions)
	B E	xempt under section	Print	CDV5 FOUNDATION					3	8-3035978
] 501(c)(3 ()	or	Number, street, and room or suite no. If a P.O.	. box, see i	nstructions.				ated business activity codes
] 408(e)220(e)	Туре	126 OTTAWA AVENUE NW,	, SUI	TE 500			<u> </u>	·
		408A530(a)		City or town, state or province, country, and Z	•	gn postal code			C C 1	110
		529(a) ok value of all assets		GRAND RAPIDS, MI 495					551	112
	G at	61,584,1	32.	F Group exemption number (See instructions. G Check organization type ► X 501(c)		n 50	1(c) trust	401(a)	trust	Other trust
	H De			ary unrelated business activity. UBTI						
				poration a subsidiary in an affiliated group or a p				▶ [Ye	
				tifying number of the parent corporation.						
		e books are in care of	▶ F	ROBERT H. SCHIERBEEK			Teleph	none number 🕨 (616)643-4700
	Pa	rt I Unrelated	Trac	te or Business Income		(A) Inc	ome	(B) Expenses	3	(C) Net
		Gross receipts or sale						20 mg . 40	ايمد. د د	当,是理解,对
		Less returns and allow		c Balance	1 <u>c</u>			-m	/	A The State of the
	2	Cost of goods sold (S		•	3	<u> </u>				144. 1- 144.4
	3	Gross profit. Subtract Capital gain net incom			4a	1		3. 6	ų	
	b	· -	•	art II, line 17) (attach Form 4797)	4b	···			- 79	
	C	Capital loss deduction	•	, , ,	4c			-	*	
	5	Income (loss) from partnerships and S corporations (attach statement)				46	,765.	STMT	13 🕹	46,765.
	6	Rent income (Schedul	ne (Schedule C)							
	7	Unrelated debt-finance		•	7					
	8		•	and rents from controlled organizations (Sch. F)		<u> </u>				
	9			on 501(c)(7), (9), or (17) organization (Schedule		 				
6	10 11	Exploited exempt active Advertising income (S	•	,	10			 		
2018	12	Other income (See ins		•	12	<u> </u>			, <u>.</u> , ,	
-5	13	Total. Combine lines		•	13	46	,765.			46,765.
-	·Pa	rt II Deduction	ns No	ot Taken Elsewhere (See instruction	s for limit	tations on dec	ductions)			
ب		(Except for c	ontribu	utions, deductions must be directly connec	cted with	the unrelated	business	s income)		
E	14	•	cers, dir	rectors, and trustees (Schedule K)			•		14	
SCANNED	15	Salaries and wages		I RE	CEIV	/ED			15	
当	16	Repairs and maintenance Bad debts	ance						16 17	
Ź	17	Interest (attach sche	dule)	В мо	V 2 0	2018 S102			18	
5	ı 19	Taxes and licenses	00.0,	<u> </u>		R			19	
Ŭ,	20	Charitable contribution	ons (See	e instructions for limitation rules)	DEN				20	4,414.
	21	Depreciation (attach	Form 45	562)	DEIN	<u> </u>	21		\$	
	22		umed or	n Schedule A and elsewhere on return			228		22b	
	23	Depletion							23	<u> </u>
	24	Contributions to defe		mpensation plans					24	
	25 26	Employee benefit pro Excess exempt exper	-	shedule I)					26	·
	27	Excess readership co		· ·					27	
	28	Other deductions (at	•	·		SEE	STA	TEMENT 14	28	4,905.
	29	Total deductions A		·					29	9,319.
	30			ncome before net operating loss deduction. Sub	tract line 2		. ~		30	37,446.
	31			(limited to the amount on line 30)			STA!	TEMENT 15	31	294.
	32			ncome before specific deduction. Subtract line 3		e 30			32	37,152.
	33 34			y \$1,000, but see line 33 instructions for except income. Subtract line 33 from line 32. If line 3.		r than line 32 (enter the c	maller of zero or	33	2,000.
	7	line 32	LANGUIU	mounte. Outstact file to from file 52. If file 5	o io yi cale	, anun mio 02, (1115 3		34	36,152.
	72370		r Paper	work Reduction Act Notice, see instructions.						Form 990-T (2017)

Form 990-1	(2017) CDV5 FOUNDATION			38-303	5978	Page 2
Part I	· · · · · · · · · · · · · · · · · · ·					
35	Organizations Taxable as Corporations. See instructions	for tax computation.				
	Controlled group members (sections 1561 and 1563) cher		and.			
а	Enter your share of the \$50,000, \$25,000, and \$9,925,000				1 1	
	(1) \$ (2) \$	(3) [\$	· I			
b	Enter organization's share of: (1) Additional 5% tax (not r					
_	(2) Additional 3% tax (not more than \$100,000)	\$				
c	Income tax on the amount on line 34			•	35c	5,423.
36	Trusts Taxable at Trust Rates. See instructions for tax co	moutation. Income tax on the amou	int on line 34 from:			
	Tax rate schedule or Schedule D (Form 104	•		•	36	
37	Proxy tax. See instructions	,			37	
38	Alternative minimum tax				38	
39	Tax on Non-Compliant Facility Income. See Instructions				39	
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whicheve				40	5,423.
Part I					1 1	<u> </u>
	Foreign tax credit (corporations attach Form 1118, trusts a	attach Form 1116)	41a	•		
41.a	Other credits (see instructions)		41b		1	
	General business credit. Attach Form 3800		41c		1	
4	Credit for prior year minimum tax (attach Form 8801 or 88	827)	41d		1	
	Total credits. Add lines 41a through 41d	.,			41e	
42	Subtract line 41e from line 40				42	5,423.
43		8611 Form 8697 Form	8866 Other	(attach schedule)	43	
44	Total tax. Add lines 42 and 43			,,	44	5,423.
	Payments: A 2016 overpayment credited to 2017		45a	5,000.	$\overline{}$	
	2017 estimated tax payments		45b		1	
	Tax deposited with Form 8868		45c	20,000.	1	
	Foreign organizations: Tax paid or withheld at source (see	instructions)	45d	20/0000	1	
	Backup withholding (see instructions)	mod delicho)	45e		1	
	Credit for small employer health insurance premiums (Atta	ach Form 8941)	45f		1	
a		•	-101	-	1	
y	Form 4136 Other	Total	▶ 45g			
46	Total payments. Add lines 45a through 45g	10001	408		46	25,000.
47	Estimated tax penalty (see instructions). Check if Form 22	20 is attached			47	20/0020
48	Tax due. If line 46 is less than the total of lines 44 and 47,	· —		•	48	-
49	Overpayment. If line 46 is larger than the total of lines 44				49	19,577.
50	Enter the amount of line 49 you want: Credited to 2018 es		9,577. Re	funded	50	0.
Part \					1 00 1	
51	At any time during the 2017 calendar year, did the organiz					Yes No
٠.	over a financial account (bank, securities, or other) in a fo	•		-		100 110
	FinCEN Form 114, Report of Foreign Bank and Financial A	- · · · · · · · · · · · · · · · · · · ·				
	here	oodanta. n 120, onto the name of the	no rorongir occinicy			X,
52	During the tax year, did the organization receive a distribu	tion from or was it the grantor of o	r transferor to a fo	reian triist?		$-\frac{1}{x}$
32	If YES, see instructions for other forms the organization in			.org/i trubt		, ,
53	Enter the amount of tax-exempt interest received or accrui	•				
			statements, and to the	best of my knowle	dge and belief	, it is true,
Sign	Under penalties of penury, I declare that I have examined this out correct, and complete Declaration of propagation of propagations of propagations.	er) is based on all information of which prep	parer has any knowledg			
Here		11.12.18 \ Tr	easurer		•	cuss this return with own below (see
	Signature of officer 7.	Date Title	eu societ			X Yes No
	Print/Type preparer's name Preparer	arer's signature	Date	_	IF PTIN	21 100 100
		,	Date	self- employed	II FIIIN	
Paid	TODD P. COOK	odd B. Cook	11-7-18	Sen- employed	Pnn	540130
Prepa	arer 1000 IV COOK			Eurmin EIN		1065772
Use C	Only Firm's name ► DELOITTE TAX LL	VE SW, SUITE 600	\	Firm's EIN	00-	2003114
	Firm's address GRAND RAPIDS,		•	Phone no. (61612	36-7900
	THIRS ADDIESS - GRAIND RAPIDS,	WY 43707_4T##		T HOHE HO.		orm 990-T (2017)
					۲	onn 330,21 (2017)
						1/
						√ 4

Schedule A - Cost of Goods	s Sold. Enter	method of inven	tory va	luation N/A				
1 Inventory at beginning of year	1		6	Inventory at end of year			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 F	Part I,	······································	
4a Additional section 263A costs			7	line 2			7	
(attach schedule)	4a		8	Do the rules of section	263A (with respect to	Ye	s No
b Other costs (attach schedule)	4b			property produced or a	cquired	for resale) apply to		
5 Total. Add lines 1 through 4b	5			the organization?		- <u> </u>		X
Schedule C - Rent Income ((see instructions)	(From Real I	Property and	Pers	onal Property L	ease	d With Real Prope	erty) 	
1. Description of property								
(1)		-				•		
(2)					•			
(3)							***	
(4)		·						
	2. Rent receive	ed or accrued						
(a) From personal property (if the per- rent for personal property is more 10% but not more than 50%)	centage of than	of rent for p	personal	inal property (if the percentag property exceeds 50% or if id on profit or income)	ge	3(a) Deductions directly of columns 2(a) and	d 2(b) (attach schedule)	3 IN
(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	n (A)	•			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<u> </u>	0.
Schedule E - Unrelated Deb	t-Financed	Income (see	ınstru	ctions)		 		
			2	. Gross income from		Deductions directly connected to debt-finance		
1. Description of debt-fir	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (ettach schedule)	(b) Other deduct (attach schedu	ions le)
(1)								
(2)								
(3)						. <u> </u>		
(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)	8. Allocable dedu (column 6 x total of 3(a) and 3(b	columns
(1)				%				
(2)				%				
(3)				%				
(4)				%				
						inter here and on page 1, Part I, line 7, column (A)	Enter here and on p Part I, line 7, colum	
Totals					ŀ	0.		0.
Total dividends-received deductions	ncluded in column	n 8				•		0.
								

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) 1. Description of income 2. Amount of income 2. Amount of income directly connected (sittech schedule) (1) (2) (3) (4) Finite have and on page 1 Part I, line 9, column (A) (1) (2) (3) (4) Finite have and on page 1 Part I, line 9, column (A) (5) (6) (6) (7) (8) (8) 1. Description of some instructions) 1. Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 4. Nat recone (fosts) from reflected business attributeble to column 5 but not invested to due or business (column 2 gain, computes cols 5 business (column 2 gain, computes cols 5 business income business income strongers (column 5 but not invested to business income laburation or business (column 2 gain, computes cols 5 business income laburation income (see instructions) (1) (2) (3) (4) Enter here and on page 1 Part I, line 9, column (B gain, computes cols 5 business (column 2 gain, computes cols 5 business income laburation income (see instructions) Finite here and on page 1 Part I, line 9, column (B gain, computes cols 5 business income laburation or	-			Exempt	Controlled O	rganızat	ions					
Account Stand Standard Stan	Name of controlled organizat		dentification	3. Net unr (loss) (see	related income e instructions)				included in the controlling		connected with income	
Add columns 2 and 15 Column 6 and a metabolic received receive	(1)		<u>-</u>									
Add columns (and page in Part Controlled Corganizations 10 Part of column (and page in the controlled of c	(2)											
Add columns (and page in Part Controlled Corganizations 10 Part of column (and page in the controlled of c						-						
Nonexempt Controlled Organizations 7. Taxable income 8. Not available organizations 9. Total of specified payments made in included (see instructional) (1) (2) (3) (4) Add columns 5 and 10 Enter here and on page 1, Part 1, Income (see instructions) 1. Description of income 1. Description of income 2. Amount of income 3. Description of income 1. Description of income 2. Amount of income 3. Description of income 3. Description of income 4. Spin-audito, girtsch schedula) (1) (2) (3) (4) (4) (5) (6) (7) (8) (9) (1) (9) (1) (9) (1) (9) (1) (9) (1) (9) (1) (1			_									
(t)		zations						•		<u> </u>		
(4) Add columns 8 and 10 Enter have and on page 1, Part 1, Inne 8, column (A) Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) 1. Description of income 2. Anount of income (inter-condensity) (inter-conden	7. Taxeble income			9. Total		nents	in the controlli	ng organ	ization's	11. Dec with	ductions directly connected income in column 10	
(4) Add columns 6 and 10 Enter hive and on page 1, Part 1, Ince 8, column (A) Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) 1. Description of income (see instructions) 1. Description of section from the search on page 1, Part 1, Ince 8, column (B) (2) (3) (4) 1. Description of section from the search on page 1, Part 1, Ince 8, column (B) (see instructions) 1. Description of section from the search on page 1, Part 1, Ince 8, column (B) (see instructions) 1. Description of section from the search on page 1, Part 1, Ince 8, column (B) (see instructions) 2. Amount of income (see instructions) (see instructions) 1. Description of section from the search on page 1, Part 1, Ince 8, column (B) (see instructions) 2. Coses search of supplicities devively income from the search on page 1, Part 1, Ince 8, column (B) (see instructions) 2. Coses search of supplicities devively income from the search on page 1, Part 1, Ince 8, column (B) (see instructions) 2. Coses search of supplicities devively income from the search on page 1, Part 1, Ince 8, column (B) (see instructions) 2. Coses search of supplicities devively income from the search on page 1, Part 1, Ince 8, column (B) (see instructions) 4. Not recome (seed) (see instructions) 5. Coses months in search on page 1, Part 1, Ince 8, column (B) (seed and ructions) (see instructions) (see instructions) (see instructions) 2. Coses search on page 1, Part 1, Ince 8, column (B) (see instructions) (see instructions) 2. Coses search on page 1, Part 1, Ince 8, column (B) (see instructions) (see instructions) (see instructions) 3. Expenses (column 6) 6. Expenses and on page 1, Part 1, Ince 8, column (B) (see instructions) (see instructions) (see instructions) (see instructions) (see instructions) 3. Expenses (column 6) 6. Expenses (column 6) 6	(1)											
(ges instructions) Totals To		_					-					
Add columns 5 and 10 Enter here and on page 1. Part 1, line 8, column (6) Totals Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) 1. Description of income 2. Amount of income 2. Amount of income 3. Deductions of (attach acheeule) (it) (2) (3) (4) Enter here and on page 1. Part 1, line 8, column (6) Part 1, line 9, column (7) Part 1, line 9, column (7) (see instructions) 7. Encese seempt activity Income, Other Than Advertising Income (see instructions) 4. Natincome (loser business income business income business (column 3 business income business (column 6) (it) (it												
Add columns and on page 1, Part I, line 8, column (A) Column (A) 1. Description of income 2. Amount of income 2. Amount of income 3. Deductions (gitter) schedule (I)		-	-									
Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) 1. Description of income 1. Description of income 2. Amount of income 2. Amount of income 3. Deductions drietly connected (stituch schedule) (10) (2) (3) (4) Part I, Inve 9, column (A) Part I, Inve 9, column (A) Part I, Inve 9, column (A) Part I, Inve 9, column (B) Part				·			Enter here and	on page	1, Part I, \(\)	Enter h	ere and on page 1, Part I, line 8, column (B)	
(See instructions) 1. Description of income 2. Amount of income directly commercial (attach achadula) (2) (3) (4) Totals Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (See instructions) 1. Description of activity income, Other Than Advertising Income (See instructions) 1. Description of activity income, Other Than Advertising Income (See instructions) 1. Description of activity income, Other Than Advertising Income (See instructions) 5. Gross income from budio or business income 4. Set-asides (attach achadula) (col 3 plus col 4) First I, line 8, column (8) First I, line 8, column (9) First I, line 9, column (9) For I activity income, Other Than Advertising Income (see instructions) 7. Excess exempt activity in an activity in a new redeated business income (1) (2) (3) (4) Enter here and on page 1, Pert 1, Income page						<u> </u>			0.		0.	
1. Description of income 2. Amount of income 3. Distactures district connected (attach schedulie) (1) (2) (3) (4) Enter here and on page 1 Pert 1, line 9, column (A) Enter here and on page 1 Pert 1, line 9, column (A) Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1. Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 4. Net income foos from unrelated school or surprised school or su			a Section	1 501(c)(7	7), (9), or (⁻	17) Org	ganization					
(cal 3 plus col 4) (cal 5 plus col 6) (cal 6)	·	,			2 Amount of	ıncome					5. Total deductions and set-asides	
(3) (4) Chita have and on page 1, Fert 1, line 9, column (A) Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income 1. Description of exploited sctivity 2. Gross uncertained business income 2. Gross uncertained business income 4. Net income (loss) from unrelated business from activity that gent activity tha		<u> </u>			ļ				(attach so	chedule)	(col 3 plus col 4)	
(3) (4) Enter here and on page 1, Part I, line 9, column (A) Totals Consume (A) 1. Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 3. Expanses descript occurred by income from trade or business income from trade or business income business income business income from trade or business income b											 	
Totals					.						<u> </u>	
Totals Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1. Description of exploited activity 2. Gross income from translated trade or business foolium 3. Description of exploited activity into activ	_(3)				ļ							
Totals Part I, line 9, column (A) O . Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1. Description of exploited activity under the form of the product of the prod	(4)				<u> </u>						<u> </u>	
(see instructions) 2. Gross unrelated business income for trade or business income frade or business income for trade or business income frade or business income from business income from business income from business income frade or business income from business income frade or business income from busines	Totals			•		lumn (A)			Ageletanes Charletanes Charletanes		Enter here and on page 1 Part I, line 9, column (B)	
1. Description of exploited activity realised business income from trade or business (activation trade or business income from activity that so not urrelated business from urrelated feater or must oction and activity that so not urrelated business income from activity that so not urrelated business from unrelated read or page 1. 7. Excess readership cost of urrelated from activity that so not urrelated business from urrelated feater from activity that so not urrelated business from urrelated feater from activity that so not urrelated f	· ·	•	vity Incom	e, Other	Than Adv	ertisir	ng Income					
(2) (3) (4) Enter here and on page 1, Part 1, line 10, col (A) Totals O Corporation 1. Name of periodical 2. Gross advertising income 2. Gross advertising income 3. Direct advertising costs advertising costs 1. Name of periodical (1) (2) (3) (4)	1. Description of	2. Gross unrelated busines income from	s directly with p of u	connected roduction nrelated	from unrelated business (co minus colum gain, compute	trade or lumn 2 n 3) If a e cols 5	from activity t is not unrelat	hat ed	attribute	able to	expenses (column 6 minus column 5, but not more than	
(3) (4) Enter here and on page 1, Part 1, line 10, col (A) Totals O. O. Chedule J - Advertising Income (see instructions) Part I 2 Income From Periodicals Reported on a Consolidated Basis 1. Name of periodical 2. Gross advertising entermine advertising costs of 3 if a gain, compute cols 5 through 7 (1) (2) (3) (4)	(1)											
(3) (4) Enter here and on page 1, Part 1, line 10, col (A) Totals O. O. Chedule J - Advertising Income (see instructions) Part I 2 Income From Periodicals Reported on a Consolidated Basis 1. Name of periodical 2. Gross advertising entermine advertising costs of 3 if a gain, compute cols 5 through 7 (1) (2) (3) (4)									-			
Enter here and on page 1, Part 1, Inne 10, col (A) Enter here and on page 1, Part 1, Inne 10, col (B) Inne 10, col (B) O					1							
Enter here and on page 1, Part 1, line 10, col (A) Totals O O Schedule J - Advertising Income (see instructions) Part I Income From Periodicals Reported on a Consolidated Basis 1. Name of periodical 2. Gross advertising income 1. Name of periodical 2. Gross advertising costs advertising costs 1. Name of periodical (1) (2) (3) (4)					 							
Schedule J - Advertising Income (see instructions) Part I Income From Periodicals Reported on a Consolidated Basis 1. Name of periodical 2. Gross advertising income 3. Direct advertising costs column 6 minus column 5, but not more than column 4) (1) (2) (3) (4)		page 1, Part I, line 10, col (A)	page line 16	1, Part I, 0, col (B)							Enter here and on page 1, Part II, line 26	
Part I Income From Periodicals Reported on a Consolidated Basis 2. Gross advertising income 3. Direct advertising costs col 2 minus col 3) If a gain, compute cols 5 through 7 (1) (2) (3) (4) Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 (5) Circulation income 6. Readership costs (column 5, but not more than column 4) (6) (7) Costs (column 6 minus column 4)					 				······································			
1. Name of periodical advertising costs advertising costs advertising costs advertising costs advertising costs advertising costs of through 7 (1) (2) (3) (4)	Part is Income From I	Periodicals F	Reported o	n a Con	solidated	Basis						
	1. Name of periodical	adverti	sing		or (loss) (co	ol 2 minus ain, compu					costs (column 6 minus column 5, but not more	
	<u></u>	 			Mary Constitution	المراج المساحة	**					
			 			100	g					
											物表演生態語	
				<u>-</u>	— 學生是後	人用語	<u>si</u>		<u>.</u>		THE REAL PROPERTY.	
Totals (carry to Part II, line (5))	(4)			<u>.</u>	1.00	· AREA	24		ļ		にはなる。 ではない。 では、 では、 では、 では、 では、 では、 では、 では、	
	Totals (carry to Part II, line (5))	•	0.	0							0 . Form 990-T (201	

Total. Enter here and on page 1, Part II, line 14

Form 990-T (2017) CDV5 FOUN						-303597	8 Page
Part II Income From Perio columns 2 through 7 on a	•	on a Separ	ate Basis (For ea	ch perio	dical listed in F	art II, fill in	
1. Name of periodical	2. Gross	3. Direct divertising costs	Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7		rculation 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.	कार हा अपने हैं है।	2.2	1. T. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	1	0.
	page 1, Part I,	iter here and on page 1, Part I, ne 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	of Officers, Dire	ctors, and	Trustees (see in	structio	ns)		
1. Name			2. Title		3. Percent of time devoted to business		ensation attributable related business
(1)					9	6	
(2)			" 		9	6	
(3)					9	6	
			•			T	

Form 990-T (2017)

FORM · 990-T		SS) FROM PARTNERS S CORPORATIONS	SHIPS	STATEMENT 13					
DESCRIPTION	1			AMOUNT					
	COMMONFUND CAPITA		PARTNERS IV, LP	<28.> 46,793.					
TOTAL TO FO	TOTAL TO FORM 990-T, PAGE 1, LINE 5								
FORM 990-T		OTHER DEDUCT	IONS	STATEMENT 14					
DESCRIPTION	1			AMOUNT					
ACCOUNTING	- FEES			289.					
MANAGEMENT DOMESTIC PR	FEES RODUCTION ACTIVITI	ES DEDUCTION		1,040. 3,576.					
TOTAL TO FO	ORM 990-T, PAGE 1,	LINE 28		4,905.					
FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 15					
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR					
12/31/14 12/31/16	83. 211.	0.	83. 211.	83. 211.					
NOL CARRYO	VER AVAILABLE THIS	YEAR	294.	294.					

CDV5 FOUNDATION

EIN: 38-3035978

FORM 990	-T			NOL CARRYOVER	·		
YEAR	EXPIRES	AMOUNT GENERATED	CONVERTED CONTRIBUTIONS	AMOUNT PREVIOUSLY UTILIZED	AMOUNT AVAILABLE	TOTAL AMOUNT UTILIZED	CARRYOVER
2014	2034	-	83	-	83	83	-
2015	2035	-	•	-	-	-	-
2016	2036	211	•	-	211	211	-
2017	2037	-	29	-	29	-	29
TOTAL	:	211	112	-	323	294	29
TOTAL CA	DDIED EODW	ARD TO 2018		,			29