

	'EXTENDED TO NOV	EMBE	ER 15, 2	2018	293933	28	305004
′	xempt Organization Bus (and proxy tax und dar year 2017 or other tax year beginning	ler se		(e))	ax Heturr	ו	2017
Department of the Treasury	Go to www.irs.gov/Form990T for it	nstructi	ons and the late	est inform		_	Open to Public Inspection for 501(c)(3) Organizations Only
	Oo not enter SSN numbers on this form as it ma Name of organization (Check box if name				ation is a 501(c)(3).	D Emp	501(c)(3) Organizations Only loyer identification number ployees' trust, see
address changed		instr	uctions)				
	COLLEGE FUTURES FOUNDA Number, street, and room or suite no. If a P O. bo				· ·-	É Unre	04-2618667 lated business activity codes
	ONE FRONT STREET, NO.	,				(See	instructions)
	City or town, state or province, country, and ZIP of		n postal code				
	SAN FRANCISCO, CA 941 Foroup exemption number (See instructions.)	<u> 11</u>				900	000
at end of year —	6 Check organization type X 501(c) cor	poration	n 501	(c) trust	401(a) trust	Other trust
	y unrelated business activity. > INVESTM			TNER	SHIPS		
	ation a subsidiary in an affiliated group or a pare	nt-subs	idiary controlled	d group?	>	Y	es 🗓 No
If "Yes," enter the name and identify J The books are in care of ▶ PI	ying number of the parent corporation.			Toloph	one number 🕨 (1115)287-1800
	or Business Income		(A) Inco	<u>'</u>	(B) Expense		(C) Net
1 a Gross receipts or sales						,	
b Less returns and allowances	c Balance	1c					
2 Cost of goods sold (Schedule A	•	2					
3 Gross profit. Subtract line 2 from		3 4a	123	634.			423,634.
 4 a Capital gain net income (attach income) b Net gain (loss) (Form 4797, Par 	•	4a 4b	423,	034.			423,034.
c Capital loss deduction for trusts	, ,,	4c					
5 Income (loss) from partnerships	s and S corporations (attach statement)	5	-320,	185.	STMT	18	-320,185.
6 Rent income (Schedule C)		6					
7 Unrelated debt-financed income	,	7					
	d rents from controlled organizations (Sch. F) 501(c)(7), (9), or (17) organization (Schedule G)	8 9					
10 Exploited exempt activity incom		10					
11 Advertising income (Schedule J	, , ,	11					
12 Other income (See instructions,	attach schedule)	12					
13 Total. Combine lines 3 through		13		449.			103,449.
	Taken Elsewhere (See instructions forms, deductions must be directly connected						<u>,</u>
	ctors, and trustees (Schedule K) RECI	=1\/	EN			14	
15 Salaries and wages	I ILUI	_ V				15	
16 Repairs and maintenance17 Bad debts		0.00	HS-08C			16	-
18 Interest (attach schedule)	୍ଦିର	U Z	S S			18	
19 Taxes and licenses			<u></u>] <u>=</u>			19	9,494.
20 Charitable contributions (See ii	nstructions for limitation rules) $OGDE$	EN.	UT			20	
21 Depreciation (attach Form 456	2)		_	21		- -	
22 Less depreciation claimed on S23 Depletion	Schedule A and elsewhere on return		L	22a		22b 23	
24 Contributions to deferred comp	pensation plans					24	
25 Employee benefit programs	•					25	
26 Excess exempt expenses (Sche	edule I)					26	
27 Excess readership costs (Sche	•			a		_27	
28 Other deductions (attach sched	•		SEE	STAT	EMENT 19	28	6,004. 15,498.
Total deductions. Add lines 14Unrelated business taxable incident	i through 28 ome before net operating loss deduction. Subtrac	t line 20	9 from line 13			30	87,951.
	imited to the amount on line 30)	Z.		STAT	EMENT 20	31	87,951.
· · ·	ome before specific deduction. Subtract line 31 fi	rom line				32	0.
•	51,000, but see line 33 instructions for exceptions	,				33	1,000.
	come. Subtract line 33 from line 32. If line 33 is	greater	than line 32, en	iter the sn	naller of zero or	١	0.
line 32 723701 01-22-18 LHA For Paperwo	ork Reduction Act Notice, see instructions.					34	Form 990-T (2017

GIY

P	art I	II 📑	Tax Computation						
	35	Orga	inizations Taxable as Corporations. See instructions for tax computation						
		Cont	rolled group members (sections 1561 and 1563) check here 🕨 🔲 See instructions and						
	a	Enter	r your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)						
		(1)	\$ (2) \\$ (3) \\$	1					
	b		r organization's share of. (1) Additional 5% tax (not more than \$11,750)	<u> </u>					
			Additional 3% tax (not more than \$100,000)						
	c	٠.	me tax on the amount on line 34		•	35c			0.
	36		ts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on hi	ne 34 fron	m	1000			
,	00		Tax rate schedule or Schedule D (Form 1041)	110 04 1101	"	36			
	37	Prov	y tax. See instructions			37	-		
	38		native minimum tax			38			
	39		on Non-Compliant Facility Income. See instructions						
	40		•			39			0.
Б	art l		I. Add lines 37, 38 and 39 to line 35c or 36, whichever applies Tax and Payments			40			0.
-				4. [1	1		
			•	1a		┨			
	ь		· · · · · · · · · · · · · · · · · · ·	1b		-{			
	C			1c		- ∶			
	ď		•	1d		⊣ —			
			credits. Add lines 41a through 41d			41e			
	42		ract line 41e from line 40	_		42			0.
	43		r taxes. Check if from Form 4255 Form 8611 Form 8697 Form 8866 [Oth	er (attach schedule)	43			
	44		I tax Add lines 42 and 43			44			0.
	45 a	Paym	nents. A 2016 overpayment credited to 2017	5a	<u>174,871</u>	<u>-</u>			
	b	2017	estimated tax payments 45	5b		-			
	C	Tax d	deposited with Form 8868	5c		_			
	d	Forei	gn organizations Tax paid or withheld at source (see instructions)	5d		_			
	е	Backı	up withholding (see instructions) 45	5e					
	f	Credi	it for small employer health insurance premiums (Attach Form 8941)	51					
	g	Other	r credits and payments Form 2439						
			Form 4136 Other Total ▶ 45	5g					
	46	Total	payments. Add lines 45a through 45g			46	17	4,8	71.
	47	Estim	nated tax penalty (see instructions). Check if Form 2220 is attached			47			
	48	Tax d	due. If line 46 is less than the total of lines 44 and 47, enter amount owed		•	48			
	49		payment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid		•	49	17	4,8	71.
	50		the amount of line 49 you want Credited to 2018 estimated tax > 174,87	/1. F	Refunded 🕨	50			0.
Pa	art V		Statements Regarding Certain Activities and Other Information		ructions)				
	51		y time during the 2017 calendar year, did the organization have an interest in or a signature or of	·	•			Yes	No
			a financial account (bank, securities, or other) in a foreign country? If YES, the organization may		•			<u> </u>	
			N Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign					1	
		here		g 000,					Х
	52		ig the tax year, did the organization receive a distribution from, or was it the grantor of, or transfe	eror to a	loreian trust?			<u> </u>	X
1	OL.		S, see instructions for other forms the organization may have to file.	citi to, a	iorcign trost?			-	
	53		the amount of tax-exempt interest received or accrued during the tax year						
				nts. and to t	he best of my knowle	edge and b	elief. it is tru	 }.	<u> </u>
Sig	ın	co	nder penalties of perairy, I declare that have examined this return, including accompanying schedules and statemen rrect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has a	any knowled	ige		,	-1	
He	•		1/1/1/1/ 1/1/3/19 N CFO			-	S discuss this		vith
			Signature of officer Date Title				r shown belo		7 N.
		<u> </u>				nstructions		s	No
			Print/Type preparer's name Preparer's signatural Date	_		ıf PTI	N		
Pa	aid		TAMARA L.	, ,,,,,,	self- employed		00011		
	ера			.2/18	'		$\frac{00011}{1000}$		
U	se O	nly	Firm's name ▶ BPM LLP		Firm's EIN	<u>8</u>	1-423	454	2
			4200 BOHANNON DRIVE, SUITE 250			.			
			Firm's address ► MENLO PARK, CA 94025-1021		Phone no.	550 <u>-</u>	<u>855-6</u>	800	

Schedule A - Cost of Goods So	d. Enter method of I	nventory va	aluation N/A			
1 Inventory at beginning of year	1	6	Inventory at end of year	ir		6
2 Purchases	2	7	Cost of goods sold. Si	ubtract l	ine 6	
3 Cost of labor	3		from line 5. Enter here	and in F	Part I,	
4 a Additional section 263A costs		-	line 2		, , , , , , , , , , , , , , , , , , ,	7
(attach schedule)	4a	8	Do the rules of section	263A (with respect to	Yes No
b Other costs (attach schedule)	4b		property produced or a			
5 Total. Add lines 1 through 4b	5		the organization?		, , , , , ,	
Schedule C - Rent Income (From		and Pers		.ease	d With Real Prope	erty)
(see instructions)			• •		•	
1. Description of property						
(1)						
(2)						
(3)						
(4)						
2.	Rent received or accrued				0/2/0-4	
(a) From personal property (if the percentage rent for personal property is more than 10% but not more than 50%)	i of rer	nt for personal	onal property (if the percenta property exceeds 50% or if ed on profit or income)	дө	columns 2(a) and	connected with the income in d 2(b) (attach schedule)
(1)						
(2)						
(3)						
(4)						· · · · · · · · · · · · · · · · · · ·
Total	O . Total			0.		
(c) Total income. Add totals of columns 2(a) ar here and on page 1, Part I, line 6, column (A)	nd 2(b). Enter			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	• 0.
Schedule E - Unrelated Debt-Fir	nanced Income	(see instru	ctions)		, a : 1, o, ocia (e)	•
			,		3. Deductions directly conn	ected with or allocable
		2	Gross income from or allocable to debt-		to debt-finance	
 Description of debt-financed p 	property		financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)						
(2)						
(3)						
(4)						
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach 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 columns 3(a) and 3(b))
(1)			%			
(2)			%			- '
(3)			%		-	
(4)			%			· · · · · · · · · · · · · · · · · · ·
					nter here and on page 1,	Enter here and on page 1,
					Part I, line 7, column (A)	Part I, line 7, column (B)
Totals			•		0.	0.
Total dividends-received deductions included	l ın column 8					0.

			Exempt	Controlled O	ganızatı	ons				
Name of controlled organiza	identi	mployer ification mber	3. Net un (loss) (see	related income a instructions)	4. Tot payr	al of specified nents made	includ	rt of column 4 led in the contr ation's gross i	olling	6. Deductions directly connected with income in column 5
)					-					
)										
3)										
4)										
onexempt Controlled Organ	ızatıons									
7. Taxable Income	8. Net unrelated inco (see instruction		9. Total	of specified payn made	nents	10. Part of column the controlling gross	mn 9 tha ng orgai s income	nization's		ductions directly connected i income in column 10
1) ,										
2)										
3)										
4)										
						Add colun Enter here and line 8, c		1, Part I,		d columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
otals					▶			0.		0
chedule G - Investme		Section 5	501(c)(7	7), (9), or (17) Org	anization				
······································	cription of income			2. Amount of	ncome	3. Deduction		4. Set-	asides	5. Total deductions and set-asides
<u></u>						(attach sched	ule)	(attach s	chedule)	(col 3 plus col 4)
(1) (2)										+
3)				 				<u>.</u>		
4)										+
	•			Enter here and o Part I, line 9, col						Enter here and on page 1 Part I, line 9, column (B)
otals			•		0.					0.
Schedule I - Exploited (see instri	-	/ Income,	Other	Than Adv		g Income				_ -l
1 Description of exploited activity	2. Gross unrelated business income from trade or business	3, Expe directly con with prod of unrel business	nnected luction lated	4. Net incom from unrelated business (co minus columi gain, compute through	trade or umn 2 3) If a cols 5	5. Gross inco from activity t is not unrelat business inco	hat ed	6. Exp attributi colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)										
2)		ļ								
3)										
4)	Enter here and on page 1, Part I, line 10, col (A)	Enter here page 1, i line 10, c	Parti, ol(B)							Enter here and on page 1, Part II, line 26
otals ► Schedule J - Advertisi	ng Income (see	Inetri ictions	0.	<u> </u>						0
	Periodicals Rep			solidated	Basis		_			
	<u> </u>					- _r		 		
1. Name of periodical	2 Gross advertising income		. Direct tising costs	4. Adverti or (loss) (co col 3) If a ga cols 5 th	l 2 minus in, compute	5 Circulat income		6. Reade cost		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
1)										
2)				_						
3)				_						
4)										
tals (carry to Part II, line (5))	•	0.	0							0
										Form 990-T (2013

Form 990-T (2017) COLLEGE FUTURES FOUNDATION 94-26186 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	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.				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		>	0.

Form 990-T (2017)

Form 4626 Department of the Treasury

Alternative Minimum Tax - Corporations

► Attach to the corporation's tax return

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

OM8 No 1545-0123

	COLLEGE FUTURES FOUNDATION			94-2618667
	Note: See the instructions to find out if the corporation is a small corporation exempt			-
	from the alternative minimum tax (AMT) under section 55(e).			
1	Taxable income or (loss) before net operating loss deduction		1	86,951.
2	Adjustments and preferences:			
a	Depreciation of post-1986 property		2a	
b	Amortization of certified pollution control facilities		2b	
c	Amortization of mining exploration and development costs		2c	
d	Amortization of circulation expenditures (personal holding companies only)		2d	
ε	Adjusted gain or loss		2e	
f	Long-term contracts		21	
0	Merchant marine capital construction funds		2g	
ŀ	Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)		2h	
i	Tax shelter farm activities (personal service corporations only)		2i	
	Passive activities (closely held corporations and personal service corporations only)		21	
k	Loss limitations		2k	
ı	Depletion		21	
г	Tax-exempt interest income from specified private activity bonds		2m	
п	Intangible drilling costs		2n	
0	Other adjustments and preferences		20	
3	Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20		3	86,951.
4	Adjusted current earnings (ACE) adjustment:			
а	ACE from line 10 of the ACE worksheet in the instructions	4a 86,951.		
ь	Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a			
	negative amount. See instructions	4b 0.		
c	Multiply line 4b by 75% (0.75). Enter the result as a positive amount	4c		
d	Enter the excess, if any, of the corporation's total increases in AMTI from prior			
	year ACE adjustments over its total reductions in AMTI from prior year ACE	1		
	adjustments. See instructions Note You must enter an amount on line 4d			
	(even if line 4b is positive)	4d		
е	ACE adjustment			
	If line 4b is zero or more, enter the amount from line 4c	١ ا		
	• If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount)	4e	0.
5	Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT	1	5	86,951.
6	Alternative tax net operating loss deduction. See instructions	STATEMENT 21	6	78,256.
7	Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a	ı residual		
	interest in a REMIC, see instructions		_7	8,695.
8	Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on	ine 8c)		
а	Subtract \$150,000 from line 7. If completing this line for a member of a controlled			
	group, see instructions. If zero or less, enter -0-	8a 0.		
b	Multiply line 8a by 25% (0.25)	8b 0.		
C	Exemption Subtract line 8b from \$40,000 If completing this line for a member of a control	led		4.5.5.5
	group, see instructions. If zero or less, enter -0-		8c	40,000.
9	Subtract line 8c from line 7 If zero or less, enter -0-	İ	9	0.
0	Multiply line 9 by 20% (0.20)		10	0.
1	Alternative minimum tax foreign tax credit (AMTFTC) See instructions		_11_	
2	Tentative minimum tax. Subtract line 11 from line 10		12	0.
3	Regular tax liability before applying all credits except the foreign tax credit		13	
4	Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0 Enter her	j		_
	Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	1	14	0.

Adjusted Current Earnings (ACE) Worksheet ► See ACE Worksheet Instructions. 86,951. 1 Pre-adjustment AMTI. Enter the amount from line 3 of Form 4626 2 ACE depreciation adjustment: a AMT depreciation **b** ACE depreciation (1) Post-1993 property 2b(1) (2) Post-1989, pre-1994 property 2b(2) (3) Pre-1990 MACRS property 2b(3) (4) Pre-1990 original ACRS property 2b(4) (5) Property described in sections 168(f)(1) through (4) 2b(5) (6) Other property 2b(6) (7) Total ACE depreciation. Add lines 2b(1) through 2b(6) 2b(7) c ACE depreciation adjustment. Subtract line 2b(7) from line 2a 2c 3 Inclusion in ACE of items included in earnings and profits (E&P) a Tax-exempt interest income b Death benefits from life insurance contracts 3ь c All other distributions from life insurance contracts (including surrenders) 3с d Inside buildup of undistributed income in life insurance contracts 3d e Other items (see Regulations sections 1.56(g)-1(c)(6)(iii) through (ix) for a partial list) 3e f Total increase to ACE from inclusion in ACE of items included in E&P. Add lines 3a through 3e 3f Disallowance of items not deductible from E&P. a Certain dividends received b Dividends paid on certain preferred stock of public utilities that are deductible under section 247 (as 4b affected by P L 113-295, Div A, section 221(a)(41)(A), Dec 19, 2014, 128 Stat 4043) c Dividends paid to an ESOP that are deductible under section 404(k) 4c d Nonpatronage dividends that are paid and deductible under section 1382(c) 4d e Other items (see Regulations sections 1.56(g)-1(d)(3)(i) and (ii) for a partial list) f Total increase to ACE because of disallowance of items not deductible from E&P. Add lines 4a through 4e 41 5 Other adjustments based on rules for figuring E&P: a Intangible drilling costs **b** Circulation expenditures 5b c Organizational expenditures 5c d LIFO inventory adjustments 5d e Installment sales 5e f Total other E&P adjustments. Combine lines 5a through 5e 5f Disallowance of loss on exchange of debt pools 6 6 Acquisition expenses of life insurance companies for qualified foreign contracts 7 7 8 9 Basis adjustments in determining gain or loss from sale or exchange of pre-1994 property 9 Adjusted current earnings. Combine lines 1, 2c, 3f, 4f, and 5f through 9. Enter the result here and on line 4a of 86,951. Form 4626

FORM 990-T	•	SS) FROM PARTNERS S CORPORATIONS	HIPS	STATEMENT 18
DESCRIPTION	1			AMOUNT
COMMONFUND	- CAPITAL PRIVATE E	QUITY PARTNERS VI	I L.P.	-10,572.
COMMONFUND	CAPITAL INTERNATIO	ONAL PARTNERS VI,	LP	2,220.
	CAPITAL VENTURE P		319.	
	CAPITAL INTERNATION		, L.P.	-1,691
	CAPITAL VENTURE PA	· · · · · · · · · · · · · · · · · · ·		-639
	AN REAL ESTATE PAR'			-4,209
	AN REAL ESTATE PAR			1,850.
	CAPITAL NATURAL I			26,907.
	r CAPITAL NATURAL 1 r CAPITAL NATURAL 1			39,215. -928.
	OWMENT FUND II, LP		AIV, D.F.	-372,657 .
TOTAL TO FO	DRM 990-T, PAGE 1,	LINE 5		-320,185.
FORM 990-T		OTHER DEDUCTI	ONS	STATEMENT 19
DESCRIPTION	1			AMOUNT
EXPENSES FF ACCOUNTING	ROM PARTNERSHIP FEES			4. 6,000.
TOTAL TO FO	ORM 990-T, PAGE 1,	LINE 28		6,004.
FORM 990-T	NET	OPERATING LOSS D	EDUCTION	STATEMENT 20
				
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/12	153,457.	153,457.	0.	0.
12/31/13	86,715.	86,715.	Ö.	0.
12/31/14	1,650,442.	766,945.	883,497.	883,497.
12/31/15	1,013,419.	0.	1,013,419.	1,013,419.
NOL CARRYOV	VER AVAILABLE THIS	YEAR	1,896,916.	1,896,916.

FORM 4626	ALTERNAT	VE MINIMUM TAX NO	OL DEDUCTION	STATEMENT 21
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	-
12/31/12	153,457.	153,457.	0.	
12/31/13 12/31/14	86,715. 1,650,442.	86,715. 665,618.	0. 984,824.	•
12/31/15	1,013,966.	0.	1,013,966.	
AMT NOL CA	RRYOVER AVAILABLE 1	HIS YEAR	1,998,790.	

SCHEDULE D (Form 1120) Department of the Treasury Internal Revenue Service

Capital Gains and Losses

➤ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.
☐ Go to www irs.gov/Form1120 for instructions and the latest information.

2017

Name

Employer identification number

COLLEGE FUTURES FOR				94-	2618667
Part I Short-Term Capital Gai	ins and Losses - Ass	ets Held One Year	or Less	·	
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gail or loss from Form(s) 894 Part I, line 2, column (g	n 9,)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on					
Form(s) 8949 with Box A checked					
2 Totals for all transactions reported on		-			
Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked	423,634.				423,634.
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 3	7		4	
5 Short-term capital gain or (loss) from like-kini	d exchanges from Form 8824			5	
6 Unused capital loss carryover (attach computa	•			6	(
7 Net short-term capital gain or (loss). Combine	•	h		7	423,634.
Part II Long-Term Capital Gain			n One Year	\	
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gail or loss from Form(s) 894 Part II, line 2, column (g	n 9, I)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on Form(s) 8949 with Box D checked					
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					
11 Enter gain from Form 4797, line 7 or 9	,,,,,,,,,			11	
12 Long-term capital gain from installment sales	from Form 6252, line 26 or 37	7		12	
13 Long-term capital gain or (loss) from like-kind	•			13	
14 Capital gain distributions	, oxonangos nom rom coc r			14	
15 Net long-term capital gain or (loss). Combine	lines 8a through 14 in colum	n h		15	
Part III Summary of Parts I and				10	
16 Enter excess of net short-term capital gain (lin		Linss (line 15)		16	423,634.
17 Net capital gain. Enter excess of net long-term	, ,	•	e 7\	17	
18 Add lines 16 and 17. Enter here and on Form			•		-
has qualified timber gain, also complete Part I			00/ por 00.011	18	423,634.
, g,					

Note: If losses exceed gains, see Capital losses in the instructions.

JWA

Part IV Alternative Tax for Corporations with Qualified Timb	oer Gain. Complete Part	IV only if the corporation has	
qualified timber gain under section 1201(b). Skip this part if you are filing For	m 1120-RIC. See instruction	s	
19 Enter qualified timber gain (as defined in section 1201(b)(2))	19		i
20 Enter taxable income from Form 1120, page 1, line 30, or the applicable line			
of your tax return	20		
21 Enter the smallest of (a) the amount on line 19, (b) the amount on line 20, or			
(c) the amount on Part III, line 17	21		
22 Multiply line 21 by 23.8% (0.238)		22	
23 Subtract line 17 from line 20. If zero or less, enter -0-	23		
24 Enter the tax on line 23, figured using the Tax Rate Schedule (or applicable tax rate) appro	priato for	<u> </u>	Market IIIII
the return with which Schedule D (Form 1120) is being filed		24	
25 Add lines 21 and 23	25		
26 Subtract line 25 from line 20. If zero or less, enter -0-	26		
		·	
27 Multiply line 26 by 35% (0.35)		27	
28 Add lines 22, 24, and 27		28	
29 Enter the tax on line 20, figured using the Tax Rate Schedule (or applicable tax rate) appro	priate for the		
return with which Schedule D (Form 1120) is being filed		29	
30 Enter the smaller of line 28 or line 29. Also enter this amount on Form 1120, Schedule J, li	ne 2, or the		
applicable line of your tax return		30	
		Schedule D (Form	1120) 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

Social security number or taxpayer identification no.

94-2618667

Name(s) shown on return

COLLEGE FUTURES FOUNDATION

X (c) Short-term transactions not reported to you on Form 1099-B

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 if you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (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

A (C) Short-term transactions no	ot reported to you	u on Form 1099-l	3				
1 (a)	(b)	(c)	(d) .	(e)	Adjustmen	nt, if any, to gain or ou enter an amount	1 (**)
Description of property	Date acquired	Date sold or	Proceeds (sales price)	Cost or other basis See the	In column	(g), enter a code in	Gain or (loss). Subtract column (e)
(Example 100 sh XYZ Co)	(Mo, day, yr)	disposed of	(Saics price)	Note below and). See instructions.	from column (d) &
		(Mo , day, yr)		see Column (e) in	(f)	(g) Amount of	combine the result
				the instructions	Code(s)	adjustment	with column (g)
COMMONFUND CAPITAL							
PRIVATE EQUITY							
PARTNERS VII L.P.	VARIOUS	12/31/17	61,201.				61,201.
COMMONFUND CAPITAL							
INTERNATIONAL							
PARTNERS VI, LP	VARIOUS	12/31/17	3,700.				3,700.
COMMONFUND CAPITAL							
INTERNATIONAL							
PARTNERS VII, L.P.	VARIOUS	12/31/17	44.				44.
METROPOLITAN REAL							
ESTATE PARTNERS V,				1			
LP	VARIOUS	12/31/17	5,330.				5,330.
METROPOLITAN REAL							
ESTATE PARTNERS							
GLOBAL II, LP	VARIOUS	12/31/17	4,055.				4,055.
PARK STREET							
CAPITAL NATURAL							
RESOURCE FUND IV			<u> </u>				
LP	VARIOUS	12/31/17	1,164.				1,164.
PARK STREET							
CAPITAL NATURAL							
RESOURCE FUND III	1						
AIV, L.P.	VARIOUS	12/31/17	6.				6.
GLOBAL ENDOWMENT							
FUND II, LP	VARIOUS	12/31/17	348,134.				348,134.
-							
2 Totals. Add the amounts in colu	ımns (d), (e), (g) a	ind (h) (subtract					
negative amounts) Enter each to							
Schedule D, line 1b (if Box A ab	ove is checked).	line 2 (if Box B]	
above is checked), or line 3 (if I			423,634.				423,634.

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

	PRIC	OR YEAR MINIMUM TA	K CREDIT	STATEMENT 22
TAX YEAR	ORIGINAL	PREVIOUSLY APPLIED	REMAINING	AVAILABLE THIS YEAR
12/31/16	12,129.	0.	12,129.	12,129.
AVAILABLE FOR CREDIT		-	12,129.	12,129.