SCANNED MAR 1 7 2020

1: 1	Tiptions Knio	1111	AMENI	טבט טבשנוטאי		SECTION 512(71 /71	DEDEAT	10	0	
	. — . 000 T	Ex	cempt Orga	nization	Bus	siness Inco	ome '	Tax Retui	n	OMB No	1545-0687
Forn	, 990- <u>T</u>	For sele				der section (09/01 , 2018,			, 1 9 F	 ର(<u></u>
_	<i>-</i>	roi calei							·* <u></u> -		ווע
	rtment of the Treasury al Revenue Service	▶ Do		~		nstructions and that by be made public if			-)/3)	Open to Pub	olic Inspection for ganizations Only
Δ T	Check box if	P 00	Name of organization			me changed and see i					tion number
^ L	address changed		, reality of organization	(555 5		Gilding or all a cool		-,	(Employ	yees' trust, see	nstructions)
	empt under section	}	TEACHERS (OLLEGE. C	MILTC	BIA UNIVERS	ΤΤΥ				
	501(C)(3)	Print				box, see instructions			13-16	524202	
^	1 —	or	Number, street, and	100m or sake no	101 0	box, see instructions					s activity code
	408(e) 220(e)	Туре	525 WEST 1	20TH STRE	r-m-	DOX 30				structions)	
-	408A530(a)					ZIP or foreign postal co					
	529(a)		NEW YORK,	•	y, and z	zir di loreign postal co	Jue		52599	20	
	ok value of all assets end of year		L			<u> </u>			32393		
713	,323,732		up exemption num	<u> </u>			7-544	I	1 .0.() .		
	•		ck organization typ		• •		501(c	trust	401(a) t		Other trust
	nter the number of	•		I trades or busine	sses				-	(or first) unr	
	ade or business her			-			•	complete Parts I			escribe the
	rst in the blank spa			us sentence, coi	nplete	Parts I and II, com	plete a S	chedule M for each	ch addition	ıal	
	ade or business, th										r
	uring the tax year,						bsidiary o	controlled group?		▶∟	Yes X No
	"Yes," enter the na				rporati	on ▶		21	2 670	2016	
_	he books are in care					T		ne number ▶ 21		_	
Pa	rt Unrelated		or Business Inc	come	_	(A) Income	<u> </u>	(B) Expen	ses	(1	C) Net
1 a	Gross receipts or	sales								'	j
b				c Balance ▶	$\overline{}$			<u>'</u>			
2	-		ule A, line 7)		2_			<u> </u>		,	1
3			2 from line 1c	1 / \	3	3.5					-260 000
4a			ittach Schedule D)		4a		880.				360,880.
b	Net gain (loss) (Fo	rm 4797,	Part II, line 17) (attac	ch Form 4797)	4b	15,	641.	'			15,641.
С	Capital loss dedu	ction for t	rusts		4c			L			
5	Income (loss) from a p	artnership o	r an S corporation (attach	statement)	5	155,	560.	ATCH 2			155,560.
6	Rent income (Sch	edule C)			6					<u> </u>	
7	Unrelated debt-fir	nanced in	come (Schedule E)		7						
8	Interest, annuities, roya	ilties, and re	nts from a controlled orga	anization (Schedule F)	8						
9	Investment income of a	section 50	1(c)(7), (9), or (17) organ	nization (Schedule G)	9						
10	Exploited exempt	activity ii	ncome (Schedule I)		10						
11	Advertising incom	ne (Sched	lule J)		11						
12	Other income (Se	e instruc	tions, attach sched	ule)	12						
13		nes 3 thr	ough 12	<u> </u>	13		081.	<u> </u>		<u> </u>	532,081.
Pa						ons for limitatio			Except for	or contrib	utions,
	deduction	s must	be directly cor	nected with t	he ur	nrelated busine	ss inco	me)		1	
14	Compensation of	officers,	directors, and trust	ees (Schedule K)	٧F	$D \cdots \cdots$			14		
15					•	8 · · · ·			15		
16	Repairs and main	tenance	206		• • • • • •				16		
17	Bad debts		ଝି	FEB 1.4							
18			(see instructions)🚥		<u> </u>	إبيرلسي		. АТСН 3	18		126,238.
19	Taxes and license	s			N. 1	ا ۲			19		1,960.
20									20		
21	Depreciation (atta	ach Form	4562)			21					
22	Less depreciation	claimed	on Schedule A and	d elsewhere on re	eturn	22	a		22b	ļ	
23	Depletion								23	ļ	3,707.
24	Contributions to	deferred	compensation plans	3					24	ļ	
25	Employee benefit	program	s						25		
26	Excess exempt ex	penses (Schedule I),						26		
27	-	•									
28	Other deductions	(attach s	schedule)					. ATCH. 4	28		572,682.
29											704,587.
30						deduction Subtra					-172,506.
31						or after January 1, 2					
32	Unrelated busine	ss taxabl	e income Subtrac	t line 31 from line	<u>30</u> .		<u></u> ,	<u> </u>	32		- 172,506.
_	Paperwork Reduct									-	n 990-T (2018)

	990-T (2018)		Page 2
Pai	t III Total Unrelated Business Taxable Income		
33	Total, of unrelated business taxable income computed from all unrelated trades or businesses (see		
	instructions)		
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		
	instructions),	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum		
	of lines 33 and 34	 	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,		0
	enter the smaller of zero or line 36	38	0.
	t IV Tax Computation		
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0 21)	39	
40	Trusts Taxable at Trust Rates See instructions for tax computation Income tax on		
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041)		
41	Proxy tax See instructions		
42	Alternative minimum tax (trusts only)		
43	Tax on Noncompliant Facility Income. See instructions		·-
44	Total Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	
	Tax and Payments	П	
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a	1	
	Other credits (see instructions)	1 1	
C	General business credit Attach Form 3800 (see instructions)	1	
a	Credit for prior year minimum tax (attach Form 8801 or 8827)	45e	
	Total credits Add lines 45a through 45d	46	
46 47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Other (attach schedule).	-	
	Total tax. Add lines 46 and 47 (see instructions)		0.
48 49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	
	Payments A 2017 overpayment credited to 2018	10	. <u>-</u>
	2018 estimated tax payments	1	
	20 to estimated tax payments	1	
G	Foreign organizations Tax paid or withheld at source (see instructions) 50d	1	
	Backup withholding (see instructions)	1 1	
f	Credit for small employer health insurance premiums (attach Form 8941) 50f	1	
a.	Other credits, adjustments, and payments Form 2439	1	
9	Form 4136		
51	Total payments Add lines 50a through 50g	51	120,000.
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached	52	-
53	Tax due If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	
54	Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54_	120,000.
55	Enter the amount of line 54 you want	55	120,000.
Par	Statements Regarding Certain Activities and Other Information (see instruction	s)	
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or	other	authority Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization m		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	foreign	country
	here ▶		X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore	ign trust?	· X
	If "Yes," see instructions for other forms the organization may have to file		
58	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		
	Under paratises of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the three-paratises of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the three-paratises of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the	est of my	knowledge and belief, it is
Sig	n \setminus n	ay the I	RS discuss this return
Her			preparer shown below
		e instructio	11111111111111
Paic	Print/Type preparer's name Preparer's signature Date Chec Chec DANIEL ROMANO PARTNER DANIEL ROMANO PARTNER		PTIN
	DANIBL ROMANO, LARINER	employed	P00504182
-	Firm's name GNANT THORNTON DEL	2.1	36-6055558
	Firm's address ► 757 THIRD AVENUE, 4TH FLOOR, NEW YORK, NY 10017-2013	eno ∠⊥	2-599-0100

Form 990-T (2018)

Part I, line 7, column (B)

Total dividends-received deductions included in column 8 Part I, line 7, column (A)

Page 4

Schedule F-Interest, Annu	intes, Royantes			ntrolled Org			ations (see	mstructio	0115)		
Name of controlled organization	2 Employer identification numb	er 3 N	et unrela	ated income nstructions)	4 Total		ied included	of column 4 to in the control ion's gross in	olling	6 Deductions directly connected with income in column 5	
(1)											
(2)											
(3)								_			
(4)	_										
Nonexempt Controlled Organiz	zations				_						
7 Taxable Income	8 Net unrelated in (loss) (see instruc			Total of specified payments made		ıncl	Part of column luded in the co inization's gros	ntrolling	11 Deductions directly connected with income in column 10		
(1)											
(2)											
(3)											
(4)											
Totals	come of a Sec	tion 501(c)(7),	(9), or (17	▶) Orga	Pa	er here and on it I, line 8, colu on (see ins	mn (A)		er here and on page 1, rt I, line 8, column (B) 5 Total deductions	
1 Description of income	2 Amount of	income		directly cor (attach sch	nected		4 Set-asides (attach schedule)			and set-asides (col 3 plus col 4)	
(1)											
(2)							·				
(3)			ļ								
(4)	Enter here and Part I, line 9, c		-							Enter here and on page 1 Part I, line 9, column (B)	
Totals ▶ Schedule I-Exploited Exe	empt Activity In	come, Oth	er Th	an Advert	sing Ir	come	(see instru	ictions)			
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expen directl connected productio unrelate business in	y I with in of ed	4 Net incor from unrelal or business 2 minus col If a gain, o cols 5 thro	ed tradé (column umn 3) ompute	from IS D	ross income activity that ot unrelated ness income	6 Expo attribut colun	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)				-			-				
(2)						· ·		1		-	
(3)						-	 -				
(4)											
	Enter here and on page 1, Part I, line 10, col (A)	Enter here a page 1, P line 10, co	art I,	-		l <u> </u>		1		Enter here and on page 1, Part II, line 26	
Totals ▶ Schedule J- Advertising Ir	ncome (coo inch	uctions\		1				<u>:</u> _		<u> </u>	
			onsol	idated Bar	eie						
Part I Income From Per	lodicals Report	eu on a C	OHSOI	luateu bas	515			1		Т	
1 Name of periodical	2 Gross advertising income	sing advertising of		4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7					lership sts	7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)									-		
(2)				٦٠						□;	
(3)				7,						,	
(4)				1		_				7	
											
Totals (carry to Part II, line (5))										7 000 T (20)	

(2)

(3)

(4)

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

Form 990-T (2018) 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) 4 Advertising 7 Excess readership costs (column 6 gain or (loss) (col 2 Gross 3 Direct 5 Circulation 6 Readership minus column 5, but 2 minus col 3) If 1 Name of periodical advertising advertising costs income costs not more than income a gain, compute column 4) cols 5 through 7 (1) (2) (3) (4) Totals from Part I. Enter here and Enter here and on Enter here and on page 1, Part I, page 1, Part I, on page 1, Part II, line 27 line 11, col (A) line 11, ∞l (B) Totals, Part II (lines 1-5) ▶ Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 4 Compensation attributable to unrelated business time devoted to business 2 Title (1) %

Form 990-T (2018)

JSA

%

% %

 \blacktriangleright

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

(C) Net

For calendar year 2018 or other tax year beginning $\underline{-09/01}$, 2018, and ending $\underline{-}$

(A) Income

► Go to www.irs gov/Form990T for instructions and the latest information ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service Name of organization

1a Gross receipts or sales

TEACHERS COLLEGE, COLUMBIA UNIVERSITY

Employer identification number

13-1624202

(B) Expenses

Unrelated business activity code (see instructions) $\triangleright 5\overline{2}5990$

Describe the unrelated trade or business ► NON QPI

Part I Unrelated Trade or Business Income

b	Less returns and allowances c Balance ▶	_1c				
2	Cost of goods sold (Schedule A, line 7)	2				<u> </u>
3	Gross profit Subtract line 2 from line 1c	3				
4a	Capital gain net income (attach Schedule D)	4a		-		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
С	Capital loss deduction for trusts	4c		•		
5	Income (loss) from a partnership or an S corporation (attach			ſ		
	statement)	5	19.			19.
6	Rent income (Schedule C)	6				<u> </u>
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)					
	organization (Schedule G)	9	<u> </u>			
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11		,		
12	Other income (See instructions, attach schedule)	12	10			1.0
13	Total. Combine lines 3 through 12	13	19.			19.
Pai				/ (G/100pt 15)		•
	deductions must be directly connected with the un	nrelat	ed business income)			<u> </u>
14	deductions must be directly connected with the un Compensation of officers, directors, and trustees (Schedule K)	nrelat	ed business income)		14	
14 15	deductions must be directly connected with the un Compensation of officers, directors, and trustees (Schedule K) Salaries and wages	nrelate	ed business income)		14 15	
14 15 16	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages	nrelate	ed business income)		14 15 16	
14 15 16 17	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages Repairs and maintenance Bad debts	nrelate	ed business income)		14 15 16 17	
14 15 16 17	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages	nrelate	ed business income)		14 15 16 17 18	46.
14 15 16 17 18	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages		ed business income)		14 15 16 17 18 19	
14 15 16 17 18 19 20	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages	nrelate	ed business income)		14 15 16 17 18	
14 15 16 17 18	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages	nrelate	ed business income)		14 15 16 17 18 19	
14 15 16 17 18 19 20 21	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules) Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on recompensations.	nrelate	ed business income)		14 15 16 17 18 19 20	
14 15 16 17 18 19 20 21	deductions must be directly connected with the un Compensation of officers, directors, and trustees (Schedule K) Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules) Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on red	nrelate	ed business income)		14 15 16 17 18 19 20 	
14 15 16 17 18 19 20 21 22 23	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules) Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on recompensations.	nrelate	ed business income)		14 15 16 17 18 19 20 	
14 15 16 17 18 19 20 21 22 23 24	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages	nrelate	ed business income)		14 15 16 17 18 19 20 	
14 15 16 17 18 19 20 21 22 23 24 25	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules) Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on reductions to deferred compensation plans Employee benefit programs	eturn	ed business income)		14 15 16 17 18 19 20 22b 23 24 25	46.
14 15 16 17 18 19 20 21 22 23 24 25 26	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules) Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on reconstributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I)	nrelate	ed business income) 21 22a		14 15 16 17 18 19 20 22b 23 24 25 26	46.
14 15 16 17 18 19 20 21 22 23 24 25 26 27	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules) Depreciation (attach Form 4562). Less depreciation claimed on Schedule A and elsewhere on reconstributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I). Excess readership costs (Schedule J). Other deductions (attach schedule) Total deductions Add lines 14 through 28.	nrelati	ed business income) 21 22a	ATCH 6	14 15 16 17 18 19 20 	88. 134.
14 15 16 17 18 19 20 21 22 23 24 25 26 27 28	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules) Depreciation (attach Form 4562). Less depreciation claimed on Schedule A and elsewhere on reductions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I). Excess readership costs (Schedule J). Other deductions (attach schedule)	nrelati	ed business income) 21 22a	ATCH 6	14 15 16 17 18 19 20 	46.
14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29	deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K) Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Charitable contributions (See instructions for limitation rules) Depreciation (attach Form 4562). Less depreciation claimed on Schedule A and elsewhere on reconstributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I). Excess readership costs (Schedule J). Other deductions (attach schedule) Total deductions Add lines 14 through 28.	nrelati	deduction Subtract line	ATCH 6	14 15 16 17 18 19 20	88. 134.

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2018

32

ATTACHMENT 2

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS OR S CORPORATIONS

ORDINARY INCOME FROM LP INVESTMENTS PORTFOLIO INCOME FROM LP INVESTMENTS 74,747. 80,813.

INCOME (LOSS) FROM PARTNERSHIPS

155,560.

13-1624202

ATTACHMENT 3

FORM 990T - PART II - LINE 18 - INTEREST

INTEREST EXPENSE FROM LP INVESTMENTS

PART II - LINE 18 - INTEREST

126,238.

126,238.

ATTACHMENT 4

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

EXPENSES FROM LP INVESTMENTS TAX PREPARATION FEES INVESTMENT ADVISORY FEES

238,544. 33,496.

300,642.

PART II - LINE 28 - OTHER DEDUCTIONS

572,682.

13-1624202 ATTACHMENT 5

NON QPI '

SCHEDULE	<u> M</u>	LINE	5	-INCOM	ME (LOSS)	FROM	PARTNE	RSHIPS	AND/OR	S	CORPORATIONS	
ORDINARY	IN	ICOME	FR	OM LP	INVESTMEN	ITS						19.
INC	COME	E (LOS	SS)	FROM	PARTNERS	HIPS	AND/OR	S CORP	ORATION:	S		19.

13-1624202

ATTACHMENT 6

SCHEDULE M - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

TAX PREPARATION FEES INVESTMENT ADVISORY FEES 4.

84.

PART II - LINE 28 - OTHER DEDUCTIONS

88.

NET OPERATING LOSS SCHEDULE:

YEAR	FEDERAL	UTILIZED	AVAILABLE
2011	(60,036)	60,036	-
2012	-	-	-
2013	(149,744)	149,744	_
2014	-	_	_
2015	(51,380)	42,178	9,202
2016	_	_	-
2017	_	_	_
NOL CARRIED-FORWARD TO 20	19		9,202

Teachers College EIN: `13-1624202

TAX - NET OPERATING LOSS CARRYFORWARD SCHEDULE

FOR THE YEAR ENDED 8/31/2019

FORM 990-T PART III, LINE 31

DEDUCTION FOR NOL ARISING IN TAX YEARS BEGINNING ON OR AFTER 1/1/2018

ACTIVITY			AMOUNT
QPI K-1s	NOL GENERATED	8/31/2019	172,506
Non-QPI - 13. E Street Fun	d, INOL GENERATED	8/31/2019	115
	TOTAL	CARRYOVER TO 2020	172,621

CHARITABLE CONTRIBUTION CARRY FORWARD SCHEDULE:

YEAR	FEDERAL	UTILIZED	AVAILABLE	
2013	(39)	39	-	
2014	(43)	43	-	
2015	(73)	73	-	
2016	(33)	33	-	
2017	(515)	515	-	
2018	(228)	-	(228)	
AMOUNT CARRIED-FORWARD TO	2019	_	(228)	

SCHEDULE D (Form 1120)

Name

Capital Gains and Losses

OMB No 1545-0123

Department of the Treasury Internal Revenue Service

► 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

Employer identification number

TEAG	CHERS COLLEGE, COLUMBIA UNIVERSIT	.'Y			J	13-1624202
Part	Short-Term Capital Gains and Losses	(See instructions)			
	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	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments or loss from Forr 8949, Part I, line column (g)	n(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	whole dollars 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			column (g)		the result was essentially
16	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					23,877.
4	Short-term capital gain from installment sales from F	Form 6252, line 26 or 3	7		4	
5	Short-term capital gain or (loss) from like-kind exchar	nges from Form 8824			5	
6	Unused capital loss carryover (attach computation)				6	()
	Net short-term capital gain or (loss) Combine lines 1			· · · · · · · · · · · · · · · · · · ·	7	23,877.
Part		(See instructions)	1		1 4 2 4 1
	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	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments or loss from Forr 8949, Part II, In	n(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine
8a	whole dollars 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			column (g)		the result with column (g)
8 b	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				1	337,003.
11	Enter gain from Form 4797, line 7 or 9				11	15,641.
12	Long-term capital gain from installment sales from F	Form 6252, line 26 or 3	7		12	
13	Long-term capital gain or (loss) from like-kind exchar	nges from Form 8824			13	
14	Capital gain distributions (see instructions)				14	
15	Net long-term capital gain or (loss) Combine lines 8	a through 14 in column	nh	<u>.</u>	15	352,644.
Part	Summary of Parts I and II				T	
16	Enter excess of net short-term capital gain (line 7) o	ver net long-term capita	al loss (line 15)		16	23,877.
17 18	Net capital gain Enter excess of net long-term capit Add lines 16 and 17 Enter here and on Form 1120,				17	352,644. 376,521.
10	Note: If losses exceed gains, see Capital losses in the		proper mic on other re			

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

Schedule D (Form 1120) 2018

Sales and Other Dispositions of Capital Assets

▶ Go to www irs gov/Form8949 for instructions and the latest information

OMB No 1545-0074

Department of the Treasury Internal Revenue Service

TEACHERS COLLEGE, COLUMBIA UNIVERSITY

► File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D

Social security number or taxpayer identification number Name(s) shown on return

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

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions) 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 X (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss 1 If you enter an amount in column (g), enter a code in column (f) Cost or other basis Gain or (loss) (a) See the separate instructions See the Note below Date sold or Proceeds Subtract column (e) Description of property Date acquired and see Column (e) disposed of (sales nace) from column (d) and

(Example 100 sh XYZ Co)	(Mo , day, yr)	(Mo , day, yr)	(see instructions)	in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
ST CAPITAL GAIN FROM LP'S	VAR	VAR					10,958
ST 1256 GAIN FROM LP'S	VAR	VAR					12,919
						<u>.</u>	
						·	
					!		
2 Totals Add the amounts in columnegative amounts) Enter each to Schedule D, line 1b (if Box A ababove is checked), or line 3 (if Box C	otal here and inc ove is checked), lin	clude on your ie 2 (if Box B					23,877

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

11:23:39 AM V 18-7.6F

For Paperwork Reduction Act Notice, see your tax return instructions

Form 8949 (2018)

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side
TEACHERS COLLEGE, COLUMBIA UNIVERSITY

Social security number or taxpayer identification number

13-1624202

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a, you aren't required to report these transactions on Form 8949 (see instructions)

oa, you arent requi	rea to report	ulese ualis	actions on roi	111 0343 (366	ii isti uctions)	
You must check Box D, E, or F Is a separate Form 8949, page 2, formore of the boxes, complete as m (D) Long-term transactions (E) Long-term transactions (F) Long-term transactions	or each applic nany forms wit reported on F reported on F	able box If y th the same b orm(s) 1099- orm(s) 1099-	ou have more lo oox checked as y -B showing basis B showing basis	ong-term transa ou need was reported to	o the IRS (see	vill fit on this pa	
1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales pnce)	(e) Cost or other basis See the Note below and see Column (e)	If you enter an a enter a co	any, to gain or loss amount in column (g), de in column (f) arate instructions	(h) Gain or (loss) Subtract column (e) from column (d) an
(Example 100 sh XYZ Co)	(Mo , day, yr)	(Mo , day, yr)	(see instructions)	in the separate	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
IM CARIMAL CATA FROM LINE	VAD	VAD					317 624

				Instructions	instructions	adjustment	107
LT CAPITAL GAIN FROM LP'S	VAR	VAR	:				317,624
LT 1256 GAIN FROM LP'S	VAR	VAR					19,379
				-		· -	
	-						
•							-
					-		-
2 Totals Add the amounts in columns negative amounts) Enter each tota Schedule D, line 8b (if Box D above	I here and inc is checked), lin	lude on your e 9 (ıf Box E					337,003

above is checked), or line 10 (if Box F above is checked)
Note If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2018)

JSA 8X2616 1 000

AMENDED RETURN

PURSUANT TO IRS GUIDANCE ISSUED JANUARY 21, 2020, TEACHERS COLLEGE, COLUMBIA UNIVERSITY HAS AMENDED ITS 2018 FORM 990-T TO REFLECT THE RETROACTIVE REPEAL OF IRC SECTION 512(A)(7). THE AMOUNT PREVIOUSLY INCLUDED ON LINE 34 ASSOCIATED WITH IRC SECTION 512(A)(7) HAS BEEN ADJUSTED TO ZERO.

_	990-T	E	cempt Organization					'n	OMB N	lo 1545-0687	
Form	330-1	F1	(and proxy tax ndar year 2018 or other tax year begin					.19	മ	@ 40	
_		For cale						<u> </u>			
•	ment of the Treasury I Revenue Service	▶ Do	► Go to www irs gov/Form9907 not enter SSN numbers on this form a					3(3)	Open to P	ublic Inspection for Organizations Only	
Ā	Check box if address changed	7 20			ne changed and see			D Emp	D Employer (dentification number (Employees' trust, see instructions)		
B Exe	mpt under section	1	TEACHERS COLLEGE, CO	OLUM	BIA UNIVERS	ITY					
X	501(C)(3)	Print	Number, street, and room or suite no	faPO	box, see instructions	_ ;		13-1	624202		
	408(e) 220(e)	Type							elated busine	ss activity code	
	408A530(a)		525 WEST 120TH STREE	ET-	вох 30			(366	instructions)		
	529(a)	ļ	City or town, state or province, country	, and Z	IP or foreign postal of	ode		5056			
	k value of all assets nd of year		NEW YORK, NY 10027					5259	990		
_	323,732		up exemption number (See instructi			T-5443	T	1.04/			
	· · · · · · · · · · · · · · · · · · ·	•	eck organization type X 501			501(c)		401(a		Other trust	
			inization's unrelated trades or busine:	sses		nly one	Describe complete Parts I-		y (or first) ui		
	ide or business her		e end of the previous sentence, cor	nnlete		•	•			describe trie	
	ade or business, the			iipiete	Tarts Fand II, Com	ipicio a oc	streame in for each	or addition	Jilai		
			corporation a subsidiary in an affili	ated g	roup or a parent-su	ibsidiary c	ontrolled group?		▶	Yes X No	
			identifying number of the parent cor		on >						
J Tr	e books are in care	e of ▶HE	ENRY PERKOWSKI			Telephon	e number ▶ 21	2-678	-3016	47.2	
Par	Unrelated	Trade o	or Business Income		(A) Incom	е _	(B) Expen	ses		(C) Net	
1 a	Gross receipts or s	sales								•	
b	Less returns and allowa		c Balance ▶	-							
2	_		ule A, line 7)	2					 	1	
3	· ·		2 from line 1c	3	360	,880.				360,880.	
4a			attach Schedule D)	4a		,641.			_	15,641.	
b	•		Part II, line 17) (attach Form 4797).	4b	15,	, 041.				13,041.	
С 5			r an S corporation (attach statement)	4c 5	155	,560.	ATCH 2		 	155,560.	
6	, , ,	-	ran S corporation (attach statement)	6		,	711011 2	•	_		
7	•		come (Schedule E)	7			· <u>-</u> .			· — —	
8			ents from a controlled organization (Schedule F)								
9	Investment income of a	section 50	1(c)(7), (9), or (17) organization (Schedule G)	9							
10			ncome (Schedule I)	10							
11	Advertising incom	ne (Sched	dule J)	11							
12	Other income (Se	ee instruc	ctions, attach schedule)	12							
13			ough 12			,081.				532,081.	
Par			Taken Elsewhere (See instr					Except	for contri	butions,	
			be directly connected with t					<u> </u>			
14			directors, and trustees (Schedule K)							 .	
15 16											
17											
18	Interest (attach s	chedule)	(see instructions)				ATCH 3			126,238.	
19										1,960.	
20			See instructions for limitation rules)								
21			4562)		i i						
22			on Schedule A and elsewhere on re					22	ь		
23	Depletion							23	:	3,707.	
24	Contributions to d	deferred	compensation plans					24	1		
25	Employee benefit	program	s								
26	Excess exempt ex	φenses (Schedule I)								
27			ichedule J)							572,682.	
28			schedule)							704,587.	
29			es 14 through 28							-172,506.	
30			ole income before net operating							1,2,300.	
31 32			ig loss arising in tax years beginnir e income Subtract line 31 from line	-						-172,506.	
For F	aperwork Reduct	ion Act i	Notice, see instructions	. 50 .			<u> </u>	34		rm 990-T (2018)	
	^{о 1} 93457н ^{JS} 700			V 1	8-7.5F	(0167620-00	012	. •	PAGE	

TEACHERS COLLEGE, COLUMBIA UNIVERSITY 13-1624202

Form	990-T (2018)		Page 2
Pa	t III Total Unrelated Business Taxable Income		
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see		
	instructions)	33	
34	Amounts paid for disallowed fringes	34	735,250
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		
00	instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum	133	
30	of lines 33 and 34	1 00 1	735,250
		36	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,	1 1	724 050
	enter the smaller of zero or line 36	38	734,250
	t IV Tax Computation		
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39	154,193.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on		
	the amount on line 38 from: Tax rate schedule or Schedule D (Form 1041) ▶	40	
41	Proxy tax. See instructions	41	
42	Allernative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See Instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	154,193.
Par		<u> </u>	
45 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a		****
	Other credits (see instructions),	1 1	
	General business credit. Attach Form 3800 (see instructions)	1	
	Credit for prior year minimum tex (attach Form 8801 or 8827)		
		450	
46	· · · · · · · · · · · · · · · · · · ·	45e	154,193.
	Subtract line 45e from line 44	46	134,193.
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule).		164 109
48	Total tax. Add lines 48 and 47 (see instructions)		154,193.
49	2018 net 966 tax liability paid from Form 965-A or Form 985-B, Part II, column (k), line 2	49	· · · · · · · · · · · · · · · · · · ·
	Payments: A 2017 overpayment credited to 2018	, ;	
	2018 ostimated tax payments		
	Tex deposited with Form 8868	h I	
d	Foreign organizations: Tax paid or withheld at source (see instructions)		
е	Backup withholding (see instructions)	131	
	Credit for small employer health insurance premiums (attach Form 8941) 501	13,1	
g	Other crodits, adjustments, and payments: Form 2439	. (
	Form 4136 Other Total ▶ 50g		
51	Total payments. Add lines 50a through 50g	51	120,000.
52	Estimated tax penalty (see Instructions). Check if Form 2220 is attached	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	34,193
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	
55	Enter the amount of line 64 you want: Credited to 2019 estimated tax		
Pari			
·	At any time during the 2018 calendar year, did the organization have an interest in or a signature or		authority Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization ma		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the		
	here >	. J. J. 911	Country X
	During the lax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign to the contract of the contract o	gn Irusi7	·····
	If "Yes," see instructions for other forms the organization may have to file		
58	Enter the amount of tax-exempt interest received or accrued during the tax year > \$ Upder penalties—of perjury I declary/that I have examined this return including accompanying schedules and statements, and to the bit		handada and balat in
Ci~	like, correct and donabletor Declaration of preparer (other than taxpaver) is based on all information of which proparer has any knowledge	ascol my	knowledge and bellet, it is
Sign		y the IF	RS discuss this return
Here			preparer shown below
		instruction	
Paid	Print/Type preparer's name Preparer's signature Date Check	ي ليا:	PTIN
Prep		nployed	P00504182
Use	Prim's name GRANT TROUNTON LEP Firm's	EIN 🕨	36-6055558
	Firm's address > 757 THIRD AVENUE, 4TH FLOOR, NEW YORK, NY 10017-2013 Phone	no 21:	2-599-0100
JSA			Form 990-T (2018)

AS ORIGINALLY FILED TEACHERS COLLEGE, COLUMBIA UNIVERSITY

Form 990-T (2018)								F	Page 3
Schedule A - Cost of Go	oods Sold. En	ter method	of invento	ry valuation I	<u> </u>	<u> </u>			
1 Inventory at beginning of y	ear 1			6 Inventory	at end of yea	ar	6		
2 Purchases	2			7 Cost of	goods so	ld Subtract line			
3 Cost of labor	3			6 from I	ine 5 En	ter here and in			
4a Additional section 263A co	osts			Part I, line	2		7		
(attach schedule)	4a					section 263A (v		Yes	No
b Other costs (attach schedu	1 1			property	produced	or acquired for	r resale) apply		
5 Total. Add lines 1 through				to the orga	inization?	<u> </u>	<u>.</u>	,	Х
Schedule C - Rent Income	(From Real P	roperty a	nd Person	al Property	Leased V	Vith Real Prope	rty)	-	
(see instructions)	•								
1 Description of property									
(1)									
(2)	•								
(3)			_				<u></u>		
(4)							<u> </u>		
	2 Rent receiv	ved or accru	ed						
(a) From personal property (if the	percentage of rent	(b) F	rom real and p	personal property	(if the	3(a) Deductions d	lirectly connected with	h the inco	ome
for personal property is more th				personal property		in columns 2(a) and 2(b) (attach schedule)			
more than 50%)		50% 0	r if the rent is t	ased on profit or	income)				
(1)									
(2)			_	·					
(3)			_		,				
(4)									
Total		Total							
(c) Total income Add totals of co	olumns 2(a) and 2(b) Enter				(b) Total deduction Enter here and or			
here and on page 1, Part I, line 6	, column (A)	▶				Part I, line 6, colu			
Schedule E - Unrelated De	ebt-Financed li	ncome (se	ee instructio	ns)					
			2 Gross in	ncome from or	3 [Deductions directly co	nnected with or alloca ced property	ible to	
1 Description of deb	t-financed property			debt-financed	(a) Straigi	ht line depreciation	(b) Other ded	ductions	—
			pro	perty	(attach schedule)		(attach schedule)		
(1)									
(2)									
(3)									
(4)				-,-					
4 Amount of average	5 Average adju		6.0	Column			8 Allocable de	eductions	3
acquisition debt on or allocable to debt-financed	of or alloca debt-financed		4 d	ivided		ncome reportable n 2 x column 6)	(column 6 x total		nns
property (attach schedule)	(attach sche		by co	olumn 5	(++		3(a) and 3	3(b)) 	
(1)				%			*******		
(2)				%					
(3)				%					
(4)				%			· · · · · · · · · · · · · · · · · · ·		
	· · · · · · · · · · · · · · · · · · ·				Enter her	re and on page 1, ne 7, column (A)	Enter here and Part I, line 7, co		
					Part I, lir	ie /, column (A)	Parti, line /, co	Juliin (t	-)
Totals				▶					
Total dividends-received deduct					<u> </u>	<u></u> .▶			

13-1624202 Page 4

Schedule F-Interest, Annu	lities, Royalties						ions (see	Instruction	ons)	<u> </u>	
d Name of sectority	2 5	Exem	ipi C0	ntrolled Org	jai iizali(0112	5 Post -	f column 4 4	nat in	6 Deductions directly	
1 Name of controlled organization	2 Employer identification number	₹!		ated income nstructions)		of specified ints made	included	f column 4 the control on's gross in	olling	ng connected with income	
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organiz	zations										
7 Taxable Income	8 Net unrelated in (loss) (see instruct	1		Total of specific ayments made	ed	includ	art of column ded in the co zation's gros	ntrolling		Deductions directly nected with income in column 10	
(1)											
(2)										<u> </u>	
(3)											
(4)											
Totals				(9), or (17		Enter Part	columns 5 a here and on I, line 8, colui	page 1, mn (A)	Ent	Id columns 6 and 11 er here and on page 1, rt I, line 8, column (B)	
1 Description of income	2 Amount of	ıncome		3 Deduction directly contact (attach sch	nected	4 Set-asides (attach schedule)			5 Total deductions and set-asides (col 3 plus col 4)		
(1)											
(2)			_				_				
(3)			_								
(4)	Enter here and o									Enter here and on page 1,	
Totals	2 Gross unrelated business income	3 Expendirected connected production	ses y I with	4 Net incon from unrelat or business 2 minus col	ne (loss) ed trade (column umn 3)	5 Gro from a	see instru	6 Expe	able to	7 Excess exempt expenses (column 6 minus column 5, but not	
	from trade or business	unrelate business in	ed	If a gain, co	ompute ough 7	busine	ss income	Colum		more than column 4)	
(1)						<u> </u>					
(2)								<u> </u>			
(3)											
(4)											
Totals	Enter here and on page 1, Part I, line 10, col (A)	Enter here a page 1, P line 10, co	art I,							Enter here and on page 1, Part II, line 26	
Schedule J- Advertising In	come (see instri	ictions)		<u> </u>			-				
Part I Income From Per			onsol	idated Bas	sis						
income i rom i er		ou on a o	011001	Tuatou Bus							
1 Name of periodical	2 Gross advertising income	3 Dire advertising		4 Adverting gain or (los 2 minus co a gain, co cols 5 thro	s) (col ol 3) If mpute	1	rculation come	6 Read cos		7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)	 					 				1	
(2)	 			1						7	
(3)	 			1						┪	
(4)	 			1				1	-	┪	
<u> </u>	 			†		 -		1			
Totals (carry to Part II, line (5))								<u> </u>			

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 ▶],		1	
•	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)			-	1 -	<u> </u>	

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

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

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

Department of the Treasury Internal Revenue Service

For calendar year 2018 or other tax year beginning $\frac{-09/01}{}$, 2018, and ending

(A) Income

▶ Go to www irs gov/Form990T for instructions and the latest information Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only

(C) Net

Name of organization TEACHERS COLLEGE, COLUMBIA UNIVERSITY

Part I Unrelated Trade or Business Income

Employer identification number

Unrelated business activity code (see instructions) ▶ 525990

13-1624202

(B) Expenses

Describe the unrelated trade or business ► NON QPI

				1			
1a	Gross receipts or sales						
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				
4a	Capital gain net income (attach Schedule D)		4a				
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form	4797)	4b				_
С	Capital loss deduction for trusts		4c				
5	Income (loss) from a partnership or an S corporation	ı (attach					
	statement)	CH 5.	5	19.		1:	9.
6	Rent income (Schedule C)		6				
7	Unrelated debt-financed income (Schedule E)		7				
8	Interest, annuities, royalties, and rents from a contro	olled					
	organization (Schedule F)		8				
9	Investment income of a section 501(c)(7), (9), or (17)	7)					
	organization (Schedule G)		9				
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	19.		1:	9.
	Deductions Not Taken Elsewhere (See adductions must be directly connected w	ith the un	relat	ed business income)		- 1	
14	Compensation of officers, directors, and trustees (So	•			- · · · · · · · · · · · · · · · · · · ·	4	_
15	Salaries and wages					5	_
16	Repairs and maintenance					6	
17	Bad debts					7	
18	Interest (attach schedule) (see instructions)					8	6.
19	Taxes and licenses					3	
20	Charitable contributions (See instructions for limitat			1 1		0	_
21	Depreciation (attach Form 4562)						
22	Less depreciation claimed on Schedule A and elsev			· · · · · · · · · · · · · · · · · · ·		2b	
23	Depletion					3	_
24	Contributions to deferred compensation plans						_
25	Employee benefit programs					25	
26	Excess exempt expenses (Schedule I)						_
27	Excess readership costs (Schedule J)				2	27	

Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2018

28

29

30

31

32

JSA

28

29

30 31 88.

134.

-115.

-115.

Unrelated business taxable income Subtract line 31 from line 30

TEACHERS COLLEGE, COLUMBIA UNIVERSITY

13-1624202

ATTACHMENT 2

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS OR S CORPORATIONS

ORDINARY INCOME FROM LP INVESTMENTS PORTFOLIO INCOME FROM LP INVESTMENTS 74,747. 80,813.

INCOME (LOSS) FROM PARTNERSHIPS

155,560.

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ATTACHMENT 3

FORM 990T - PART II - LINE 18 - INTEREST

INTEREST EXPENSE FROM LP INVESTMENTS

126,238.

PART II - LINE 18 - INTEREST

126,238.

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ATTACHMENT 4	

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

EXPENSES FROM LP INVESTMENTS TAX PREPARATION FEES INVESTMENT ADVISORY FEES 238,544. 33,496. 300,642.

PART II - LINE 28 - OTHER DEDUCTIONS

572,682.

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ATTACHMENT 5

NON QPI '

SCHEDULE M LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS ORDINARY INCOME FROM LP INVESTMENTS

INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

19.

19.

TEACHERS COLLEGE, COLUMBIA UNIVERSITY

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ATTACHMENT 6

SCHEDULE M - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

TAX PREPARATION FEES INVESTMENT ADVISORY FEES

4. 84.

PART II - LINE 28 - OTHER DEDUCTIONS

88.

Teachers College EIN: '13-1624202

TAX - NET OPERATING LOSS CARRYFORWARD SCHEDULE

FOR THE YEAR ENDED 8/31/2019

FORM 990-T PART III, LINE 31

DEDUCTION FOR NOL ARISING IN TAX YEARS BEGINNING ON OR AFTER 1/1/2018

ACTIVITY				AMOUNT
QPI K-1s	NOL	GENERATED	8/31/2019	172,506
Non-QPI - 13. E Street	Fund, INOL	GENERATED	8/31/2019	115
		TOTA	L CARRYOVER TO 2020	172,621

AS ORIGINALLY FILED TEACHERS COLLEGE, COLUMBIA UNIVERSITY FORM 990-T

CHARITABLE CONTRIBUTION CARRY FORWARD SCHEDULE:

YEAR	FEDERAL	UTILIZED	AVAILABLE
2013	(39)	39	-
2014	(43)	43	-
2015	(73)	73	-
2016	(33)	33	-
2017	(515)	515	-
2018	(228)	-	(228)
		_	
AMOUNT CARRIED-FORWARD	TO 2019		(228)

SCHEDULE D (Form 1120)

Capital Gains and Losses

OMB No 1545-0123

Department of the Treasury Internal Revenue Service

► 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

Employer identification number

TEAG	CHERS COLLEGE, COLUMBIA UNIVERSIT	Ϋ́			1	.3-1624202
Part	Short-Term Capital Gains and Losses	(See instructions)			
	See instructions for how to figure the amounts to enter on	(d)	(e)	(g) Adjustments to or loss from Form		(h) Gain or (loss) Subtract column (e) from
	the lines below This form may be easier to complete if you round off cents to	Proceeds (sales price)	Cost (or other basis)	8949, Part I, line	` '	column (d) and combine
	whole dollars	(sales price)	(or other basis)	column (g)		the result with column (g)
18	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			-		
11.	o 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			1		
	Totals for all transactions reported on Form(s) 8949					
	with Box C checked					23,877.
4	Short-term capital gain from installment sales from F	Form 6252, line 26 or 3	37		4	
5	Short-term capital gain or (loss) from like-kind exchain	nges from Form 8824			5	
6	Unused capital loss carryover (attach computation)				6	()
						22 077
	Net short-term capital gain or (loss) Combine lines			<u></u>	7	23,877.
Pari	Long-Term Capital Gains and Losses See instructions for how to figure the amounts to enter on	(See instructions		(g) Adjustments t	0 0310	(h) Gain or (loss)
	the lines below	(d) Proceeds	(e) Cost	or loss from Form	(s)	Subtract column (e) from
	This form may be easier to complete if you round off cents to whole dollars	(sales price)	(or other basis)	8949, Part II, line column (g)	2,	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			Josephin (g)		(3)
	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 t	o 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	<u> </u>				
10	Totals for all transactions reported on Form(s) 8949					
	with Box F checked		<u> </u>	<u> </u>	r	337,003.
	5 1 2 2 5 2 5 2 5 2 5 2 5 2 5 2 5 2 5 2				۱.,	15,641.
11	Enter gain from Form 4797, line 7 or 9				11	13,041.
12	Long-term capital gain from installment sales from F	Form 6252 June 26 or 3	7		12	
'-	Long-term capital gain from matalinent sales from t	O(111 0202, 111 0 20 01 0			<u> </u>	
13	Long-term capital gain or (loss) from like-kind exchar	nges from Form 8824			13	
14	Capital gain distributions (see instructions)				14	
15	Net long-term capital gain or (loss) Combine lines 8	a through 14 in columi	nh		15	352,644.
Par	Summary of Parts I and II		_			
						00.007
16	Enter excess of net short-term capital gain (line 7) of	over net long-term capit	al loss (line 15)		16	23,877.
				// 7		252 644
17	Net capital gain Enter excess of net long-term capi				17	352,644. 376,521.
18	Add lines 16 and 17 Enter here and on Form 1120.		proper line on other re	turns	18	3/0,321.
	Note. If losses exceed gains, see Capital losses in the	e mstructions				

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

Schedule D (Form 1120) 2018

8949

Sales and Other Dispositions of Capital Assets

► Go to www.irs.gov/Form8949 for instructions and the latest information

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D

Name(s) shown on return

TEACHERS COLLEGE, COLUMBIA UNIVERSITY

Social security number or taxpayer identification number

13-1624202

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

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions) For long-term transactions, see page 2

(B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

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)

X (C) Short-term transactions	not reported	to you on For	m 1099-B				
1 (a) Description of property	(b) Date acquired	(c) Date sold or	Proceeds	(e) Cost or other basis See the Note below and see Column (e)	Adjustment, if a lift you enter a consequence of the separate	(h) Gain or (loss) Subtract column (e)	
(Example 100 sh XYZ Co)	(Mo , day, yr)	disposed of (Mo , day, yr)	(sales pnce) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
ST CAPITAL GAIN FROM LP'S	VAR	VAR					10,958
ST 1256 GAIN FROM LP'S	VAR	VAR					12,919
							_
			-				
					-		
		- "					
2 Totals Add the amounts in columns							
negative amounts) Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C a	e is checked), lin	e 2 (if Box B					23,877

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

V 18-7.5F

For Paperwork Reduction Act Notice, see your tax return instructions

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Form 8949 (2018)

Form 8949 (2018)					At	tachment Sequence No	12A Page 2
Name(s) shown on return Name and SSN or taxp	ayer identification n	o not required if she	own on other side	Social sec	urity number or	taxpayer identificat	on number
TEACHERS COLLEGE, COLU		-				13-1624202	
Before you check Box D, E, or F below, statement will have the same informati broker and may even tell you which box	on as Form 10						
Part II Long-Term. Transac instructions) For sho	tions involvi ort-term tran	ing capital a	assets you held ee page 1	more than 1	year are ge	enerally long-te	rm (see
Note : You may aggi to the IRS and for w 8a, you aren't require	hich no ad	justments o	r codes are rec	quired Enter	the totals d	irectly on Sche	
You must check Box D, E, or F b a separate Form 8949, page 2, for more of the boxes, complete as ma (D) Long-term transactions re (E) Long-term transactions re (F) Long-term transactions no	r each applic any forms wit eported on F eported on F	able box if y th the same b orm(s) 1099- orm(s) 1099-	ou have more lo oox checked as y -B showing basis B showing basis	ing-term transa ou need was reported to	o the IRS (see	will fit on this pa	
(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) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f) See the separate instructions		(h) Gain or (loss) Subtract column (e) from column (d) and
					(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
LT CAPITAL GAIN FROM LP'S	VAR	VAR					317,624
LT 1256 GAIN FROM LP'S	VAR	VAR			_		19,379
	:						
					-		
				-			
	-		_		.		
			_				
						_	
2 Totals Add the amounts in columns negative amounts) Enter each total							

above is checked), or line 10 (if Box F above is checked) ▶ Note If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form **8949** (2018)

337,003

Schedule D, line 8b (if Box D above is checked), line 9 (if Box E