	990-T	Ex	cempt Organization	Bus	iness inc	come	ו a) (ב)	Ketur ()()(n l	OMB No	1545-0047
Form	330-1		(and proxy tax					<i>//</i> \(\times \)		<u>എ</u>	11
		For cale	ndar year 2019 or other tax year begin ►Go to www.irs.gov/Form990						" <u>~</u>	4 (913
	nent of the Treasury Revenue Service	▶ Do	not enter SSN numbers on this form a)(3).	Open to Pu 501(c)(3) O	blic Inspection for rganizations Only
A	Check box if				ne changed and se			Ì	D Empl	oyer identific	ation number
	address changed								(Empi	oyees' Irust, see	instructions)
В Ехеп	npt under section] .	TEACHERS COLLEGE, CO	DLUM	BIA UNIVER	SITY					
X 5	ر <u>کل (</u> 5 ₀₁ (C	Print									
<u> </u>	108(e) 220(e)	Туре	Type								
4	108A530(a)		525 WEST 120TH STREET - BOX 30								
	29(a)	City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10027 525990									
	value of all assets of of year	- O	NEW YORK, NY 10027	\		-			3233		
72	9,022,052		up exemption number (See instruction eck organization type X 501			501/	c) trus	.,	401(a)	truet	Other trust
			inization's unrelated trades or busine			[50 1]	c) iius			y (or first) un	
	ter the number of de or business he			3363		only one	com			re than one,	
			e end of the previous sentence, cor	nolete							
	de or business, th										
			corporation a subsidiary in an affili	ated g	roup or a parent-	subsidiary	contro	olled group?		▶ 🔽	Yes X No
If "	Yes," enter the n	ame and	identifying number of the parent co							_	
			LISHA RODRIGUEZ			Telepho	ne nu	mber ▶ 21	2-678	-3016	
Part	Unrelated	Trade (or Business Income		(A) Inco	me		(B) Expens	ses		C) Net
1 a	Gross receipts or	sales		ļ						ر ا	/ :
	Less returns and allow		c Balance							+	
	-	-	lule A, line 7)	2		.				+	
			2 from line 1c	3	45	3,794			_/	+	453,794
			ettach Schedule D)	4a 4b	13.	-589				+	-589
			trusts	4c			+			+	
	•		or an S corporation (attach statement).	5	4.	3,029	1	ATCH 2	-		43,029
				6							
	•		ncome (Schedule E)	7			-				
/ა ⁸	Interest, annuities, roy	alties, and re	ents from a controlled organization (Schedule F)	8				RE	CEI)	/ED	
	Investment income of	a section 50	01(c)(7), (9), or (17) organization (Schedule G)	9							
<u> </u>	Exploited exempt	activity	ncome (Schedule I)	10				الكا الكا	282	1021 19	
	•	-	dule J)	11				S JAN		المالية المالية	
12	Other income (S	ee instrud	ctions, attach schedule)	12	10	6,234	+1	OG	12 m 13 s	. UT	496,234
Y 3	Total. Combine l	nes 3 thr	rough 12	13							
	Connecte	ns Not	he unrelated business incom	ruciii e)	nis ioi iiniitat	ions on	ueuu	ictions.) (L	Jeuuci	ions musi	be directly
			directors, and trustees (Schedule K)						. 14	T .	
43	•										
FE (FE)	Repairs and mail	ntenance							. 16		
<u> </u>											-
			(see instructions)								106,381.
			./						19		1,675
			1 4562)			- 1		_	<u> </u>		
21	· ·		d on Schedule A and elsewhere on re						211		7 012
22											7,912
23			compensation plans								
24			s								
25 26			Schedule J)								
26 27			schedule)								372,976
28	/		es 14 through 27								488,944.
29			ble income before net operating							_	7,290
	,		ng loss arising in tax years beginni							- †	
31	Unrelated busine	ess taxab	le income Subtract line 30 from line	_							7,290
For/P	aperwork Reduc	tion Act	Notice, see instructions							For	m 990-T (2019)

Par	t Bi	Total Unrelated Business Taxable	eIncome						
		f unrelated business taxable income com		trades or busine	sses (see,			-	
	•	ons)			T .	32		7,2	290.
33		s paid for disallowed fringes			•	33			
34	Charitable contributions (see instructions for limitation rules)								
35		nrelated business taxable income before							
		the sum of lines 32 and 33			· · · · · ·	35		7,2	290.
36		on for net operating loss arising in t			-	1		2 * -	
		ons)		36		7,2	290.		
37		unrelated business taxable income before spe							
38		deduction (Generally \$1,000, but see line 38				 -			
39	-	d business taxable income. Subtract line				1			
33		e smaller of zero or line 37		-		39			0.
Par		Tax Computation				1 40 1			
40		ations Taxable as Corporations. Multiply line 3	39 by 21% (0.21)			40			
41			tructions for tax compl						
7.		unt on line 39 from Tax rate schedule or				41			
42		x. See instructions		•					
43	•	ve minimum tax (trusts only)							
44		Noncompliant Facility Income. See instructions					_		
45		dd lines 42, 43, and 44 to line 40 or 41, which					 		
		Tax and Payments	ever applies		<u> </u>	1 40 1			
		tax credit (corporations attach Form 1118, trus	ets attach Form 1116)	46a		П			
	_					1			
	b Other credits (see instructions)								
	c General business credit Attach Form 3800 (see instructions)								
	d Credit for prior year minimum tax (attach Form 8801 or 8827)								
47									
48						-			-
49	3.1.0							0.	
50	Total Lax. And lines 47 and 40 (see manufactors)								
		ts A 2018 overpayment credited to 2019							
		timated tax payments				1 1			
C		osited with Form 8868				1 1			
d		organizations Tax paid or withheld at source (s				1			
u	_	withholding (see instructions)			· · · · · · · · · · · · · · · · · · ·	1			
f	-	or small employer health insurance premiums (a				1			
			439			1			
9		orm 4136 Other	Total >	510					
52		yments. Add lines 51a through 51g				52			
53	-	ed tax penalty (see instructions) Check if Form				53			
54		. If line 52 is less than the total of lines 49, 50				54			
55		ment If line 52 is larger than the total of lines				55			
56		amount of line 55 you want		•	efunded >	56			
		Statements Regarding Certain A							
57		time during the 2019 calendar year, did	*				authority	Yes	No
	•	financial account (bank, securities, or oth	-		_		-		Γ.
		Form 114, Report of Foreign Bank and		•		-			
		CANADA, CAYMAN ISLANDS						X	
58		he tax year, did the organization receive a dist	ribution from, or was it the dra	antor of, or transfer	or to. a fore	ign trust	?		X
	•	see instructions for other forms the organization		,	,	J - 23.	• •		
59	-	e amount of tax-exempt interest received or ac							,
	Ur	der penalties of редигу, I declare that I have examined	this return, including accompanying s			pest of m	y knowledge	and beli	ef, it is
Sig	n I.	e, correct, and complete Declaration of preparer (other than to		• •		av +h-	IRS discuss	this	ot
Her		tenry <u>Perkowski</u> my exonak laec 1,2020 11 36 Ez. T	12/7/2020 VP F	inance and Ope	rations w	•	IRS discuss preparer sh		
	Sı	gnature of officer	Date Title		(se	e instructi	ons)?X Ye	es	No
		Print/Type preparer's name	Preparer's signature	Date	Chec	k∐if	PTIN		
	Paid DANIEL ROMANO , PARTNER 12/07/2020 self-employed P00504182								
	Only	Firm's name ► GRANT THORNTON LLE					36-605		
use	Only	Firm's address ▶ 757 THIRD AVENUE, 3	RD FLOOR, NEW YORK,	NY 10017-201	3 Phon	e no 21	12-599-0	0100	

r Form 990-T (2019)	TEACHE	RS COLL	EGE, COL	JUMBIA UNI	VERSITY		13-16	524202	Page 3
Schedule A - Cost of G	oods Sold. En	ter metho	d of invento	ry valuation	<u> </u>				
1 Inventory at beginning of y						ar	6		
2 Purchases	2					Id Subtract line			
3 Cost of labor				6 from lir	ne 5 Enter	here and in Part			
4a Additional section 263A co				I, line 2			7		
(attach schedule)	4a						(with respect to Yes No		
b Other costs (attach schedu	· · · - - - - - - - - - 					or acquired fo			
5 Total. Add lines 1 through	····				<u> </u>	,		x ,	
Schedule C - Rent Income		roperty a	nd Persor	nal Property	Leased V	Vith Real Prope	rty)		
(see instructions)	`					•	•		
1. Description of property	· - -						_		
(1)		<u>-</u>	· <u>-</u>			_	_		
(2)							_		
(3)							_		
(4)				_			_		
	2. Rent recei	ved or accru	ed			1	-		
(a) From personal property (if the	nercentage of rent	(b) F	rom real and	nersonal property	(if the	3(a) Deductions d	lirectly conn	ected with the in	ncome
for personal property is more than 10% but not percen							n columns 2(a) and 2(b) (attach schedule)		
(1)				<u> </u>					
(2)									
(3)									
(4)									
Total	-	Total							
(c) Total income. Add totals of c	olumns 2(a) and 2(b) Enter		(b) Total deduce					
here and on page 1, Part I, line 6	i, column (A)	<u></u> ▶				Part I, line 6, column (B)			
Schedule E - Unrelated D	ebt-Financed I	ncome (s	ee instructio	ons)					
1 Description of del	nt-financed property			ncome from or o debt-financed	3 [Deductions directly connected with or allocable to debt-financed property			
1 Description of des	ot-imanoca property			operty		ht line depreciation ich schedule)	(b) Other deductions (attach schedule)		s
(1)	<u> </u>	-							
(2)	<u>—</u> .	-		<u> </u>					
(3)		_							
(4)	_		<u> </u>						
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)		4 0	Column divided column 5				ocable deduction 6 x total of colu		
(1)				%		-			
(2)				%					
(3)				%					
(4)				%					
						re and on page 1, ne 7, column (A)		ere and on pa line 7, column	
				_	ł	1			

Form **990-T** (2019)

Total dividends-received deductions included in column 8

Schedule F-Interest, Ann	uities, Royaltie	s, and Re	nts Fr	om Contro	lled O	rganiza	tions (se	e instructi	ions)	<u> </u>	
,		Exe	mpt Co	ontrolled Org	ganizatio	ons				-	
1 Name of controlled organization	2 Employer identification numb	ן ישי		ated income instructions)		of specified	Included	of column 4 to In the control	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 specific payments made		includ	ort of column led in the co zation's gros	ntrolling		Deductions directly nected with income in column 10	
(1)											
(2)											
(3)	-										
(4)											
Totals			 (c)(7),		▶) Orga	Enter Part	columns 5 a here and on I, line 8, colu 1 (see Ins	page 1, mn (A)	En	dd columns 6 and 11 ter here and on page 1, ort I, line 8, column (B)	
1 Description of income	2 Amount of income			3 Deduction directly cortain (attach sch	ctions onnected		4 Se	4 Set-asides (attach schedule)		5 Total deductions and set-asides (col 3 plus col 4)	
(1)											
(2)					_						
(3)							_				
(4)	Enter here and									Enter here and on page 1	
Totals ▶ Schedule I – Exploited Exe	Part I, line 9, c		her Th	nan Adverti	sing In	icome (see instru	ictions)		Part I, line 9, column (B)	
. 1 Description of exploited activity	2. Gross unrelated business income from trade or business	3 Experimental directornecter production unrelable business in the control of the	lly d with on of led	y or business (collaborated to the state of		5 Gross income from activity that is not unrelated		6 Expenses attributable to column 5		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)											
(2)	<u> </u>									·	
(3)				-							
(4)											
	Enter here and on page 1, Part I, line 10, col (A)	Enter here page 1, f line 10, c	Part I,			<u> </u>				Enter here and on page 1, Part II, line 25	
Schedule J – Advertising Ir				Lidated Dec							
Part I Income From Per	louicais Repon	leu on a C	OUSO	iluated Bas	15						
1. Name of periodical	2 Gross advertising income	3 Diri advertisin	-	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)	 							 		<u> </u>	
· · · · · · · · · · · · · · · · · · ·				†		-		T			
Totals (carry to Part II, line (5))							<u></u>			Form 990-T (2019	

Part I 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)							
<u>Totals</u>	from Part I						
		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 26
Totals	, Part II (lines 1-5) ▶						

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

1. Name	ne 2 Title		4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
3)		%	
4)		%	
otal Enter here and on page 1, Part II, lin			

Form **990-T** (2019)

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service For calendar year 2019 or other tax year beginning $\underline{-09/01}$, 2019, and ending $\underline{-08/31}$, 20 $\underline{20}$

► 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

Name of the organization	
--------------------------	--

TEACHERS COLLEGE, COLUMBIA UNIVERSITY

Other income (See instructions, attach schedule)

Total. Combine lines 3 through 12......

Employer identification number

13-1624202

Unrelated Business Activity Code (see instructions) ▶ 525990 Describe the unrelated trade or business ▶ INVESTMENT IN LIMITED PARTNERSHIP (NON-QPI #1) Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net Gross receipts or sales c Balance 1c Less returns and allowances Cost of goods sold (Schedule A, line 7)...... 2 2 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 4c Income (loss) from a partnership or an S corporation (attach 19 19 statement) ATCH 6 . 5 6 6 7 Unrelated debt-financed income (Schedule E). 7 Interest, annuities, royalties, and rents from a controlled 8 8 Investment income of a section 501(c)(7), (9), or (17) q Exploited exempt activity income (Schedule I) 10 10 11 Advertising income (Schedule J).......

19

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income)

	,		
14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	
20	Depreciation (attach Form 4562),] <u> </u>	
21	Less depreciation claimed on Schedule A and elsewhere on return	21b	
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule)	27	65
28	Total deductions. Add lines 14 through 27	28	65
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-46
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	
31	Unrelated business taxable income Subtract line 30 from line 29	31	-46
	•	•	

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

12

13

19

ORGANIZATION'S FIRST UNRELATED TRADE OR BUSINESS ACTIVITY

INVESTMENTS IN LIMITED PARTNERSHIPS (QPI'S)

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

ORDINARY INCOME FROM LP INVESTMENTS PORTFOLIO INCOME FROM LP INVESTMENTS

-25,181. 68,210.

INCOME (LOSS) FROM PARTNERSHIPS

43,029.

አጥ	ת א	CHMENT	2
$A \perp$	1 🖰	CHILLINI	٠.٦

FORM 990T - PART II - LINE 18 - INTEREST

INTEREST EXPENSE FROM LP INVESTMENTS

PART II - LINE 18 - INTEREST

106,381.

106,381.

FORM 990T - PART II - LINE 27 - TOTAL OTHER DEDUCTIONS

EXPENSES FROM LP INVESTMENTS 206,099.
TAX PREPARATION FEES 37,003.
INVESTMENT ADVISORY FEES 129,874.

PART II - LINE 27 - OTHER DEDUCTIONS 372,976.

TEACHERS COLLEGE EIN#: 13-1624202 FYE: 08/31/2020 FORM 990-T

NET OPERATING LOSS CARRYOVER SCHEDULE

NET OPERATING LOSS - PRIOR TO 1/1/2018

TAX YEAR ENDING		GEI	NOL GENERATED		NOL UTILIZED IN PRIOR YEAR		NOL UTILIZED IN CURRENT YEAR		NOL CARRYOVER	
_	8/31/2016	\$	(51,380)	\$	42,178	\$	7,290	\$	(1,912)	
	8/31/2017	\$	-	\$	-	\$	-	\$	-	
	8/31/2018	\$		\$		\$	<u> </u>	\$	-	
Total		\$	(51,380)	\$	42,178	\$	7,290	\$	(1,912)	
			NOL AVAI	LABLE FOR U	JSE IN 08/31/202	21			(1,912)	
NET OP	ERATING LOSS - POST TAX YEAR ENDING	•	QPI LPS NOL NERATED	UTILIZE	NOL ED IN PRIOR YEAR		NOL LIZED IN EENT YEAR	CA	NOL RRYOVER	
	8/31/2019 8/31/2020		(172,506)		<u>-</u>		-	\$	(172,506) -	
Total			(172,506)		<u>-</u>		-		(172,506)	
			NOL AVAI	LABLE FOR U	JSE IN 08/31/202	21			(172,506)	
NET OP	ERATING LOSS - POST TAX YEAR ENDING		ION-QPI LP #1 NOL NERATED		NOL ED IN PRIOR	UTI	NOL LIZED IN	CA	NOL RRYOVER	

	TAX YEAR ENDING	NOL GENERATED	NOL UTILIZED IN PRIOR YEAR	NOL UTILIZED IN CURRENT YEAR	NOL CARRYOVER	
	8/31/2019	(115)	-	-	\$	(115)
	8/31/2020	(46)			\$	(46)
Total		(161)		-		(161)
		NOL AVAIL	ABLE FOR USE IN 08/31/202	21		(161)

NOL AVAILABLE FOR USE IN 08/31/2021

CAPITA	LOSS - POST 1/1/2018 - F TAX YEAR ENDING	18 - NON-QPI LP #1 NOL GENERATED	NOL UTILIZED IN PRIOR YEAR	NOL UTILIZED IN CURRENT YEAR		NOL RYOVER
	8/31/2019 8/31/2020	- (175)	-	-	\$	- (175)
Total	8/31/2020	(175)	-	-	-	(175)

NOL AVAILABLE FOR USE IN 08/31/2021

(175)

TEACHERS COLLEGE EIN#: 13-1624202

FYE: 08/31/2020 FORM 990-T

CHARITABLE CONTRIBUTION CARRY FORWARD SCHEDULE:

YEAR	FEDERAL	UTILIZED	AVAILABLE
2018	(228)	_	(228)
2019	(8,151)	-	(8,151)
AMOUNT CARRIED-FORWARD TO	08/31/2021		(8,379)

·	
INVESTMENT IN LIMITED PARTNERSHIP (NON-Q	
SCHEDULE M - INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATI	ONS
ORDINARY INCOME FROM LP INVESTMENTS	19.
INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS	19.

FEACHERS COLLEGE, COLUMBIA UNIVERSITY	ATTACHMENT 7
FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS	
TAX PREPARATION FEES INVESTMENT ADVISORY FEES .	12. 53.
DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD)	
PART II - LINE 27 - OTHER DEDUCTIO	NS65

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.

OMB No 1545-0123

2019

Employer identification number TEACHERS COLLEGE, COLUMBIA UNIVERSITY 13-1624202 Yes X No Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss Short-Term Capital Gains and Losses (See instructions.) (a) Adjustments to gain (h) Gain or (loss) See instructions for how to figure the amounts to enter on (e) (d) or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part I, line 2, column (d) and combine This form may be easier to complete if you round off cents to (sales price) (or other basis) column (g) the result with column (g) whole dollars 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 17,445 2 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Short-term capital gain from installment sales from Form 6252, line 26 or 37 4 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 Unused capital loss carryover (attach computation) 6 17,445 7 Net short-term capital gain or (loss) Combine lines 1a through 6 in column h. Part II Long-Term Capital Gains and Losses (See instructions. (g) Adjustments to gain (h) Gain or (loss) See instructions for how to figure the amounts to enter on (e) (d) or loss from Form(s) Subtract column (e) from the lines below Proceeds Cost 8949. Part II. line 2. column (d) and combine This form may be easier to complete if you round off cents to (sales price) (or other basis) the result with column (g) column (q) whole dollars 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 436,174 Totals for all transactions reported on Form(s) 8949 10 Totals for all transactions reported on Form(s) 8949 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 12 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 13 Capital gain distributions (see instructions) 14 15 436,174 15 Net long-term capital gain or (loss) Combine lines 8a through 14 in column h Part III Summary of Parts I and II Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 17,445 16 436,174 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) Add lines 16 and 17 Enter here and on Form 1120, page 1, line 8, or the proper line on other returns 453,619 18 Note: If losses exceed gains, see Capital Losses in the instructions

Sales and Other Dispositions of Capital Assets

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

OMB No 1545-0074

Denartment 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 ref

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 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)

1	(a) Description of property (Example 100 sh XYZ Co)	Date acquired Date s	(c) Date sold or	old or Proceeds ed of (sales price)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions			
			disposed of (Mo , day, ут)			(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
T CAPITAL GA	IN FROM LP'S-QPI'S	VAR	VAR					17,395
T 1256 GAIN	FROM LP'S-QPI'S	VAR	VAR					50
								••••
	•							
	"							
2 Totals. Ad-	d the amounts in columns	i (d), (e), (q), and	d (h) (subtract					
negative a	mounts) Enter each tota), line 1b (if Box A above	al here and inc	lude on your e 2 (if Box B					17,445

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

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

You must check Box D. E. or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-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

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
 - (F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property	(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	l .		(h) Gain or (loss) Subtract column (e) from column (d) and
(Example 100 sh XYZ Co)					(f) Code(s) from instructions	(g) Amount of adjustment .	combine the result with column (g)
LT CAPITAL GAIN FROM LP'S-QPI'S	VAR	VAR					436,273
LT 1256 GAIN FROM LP'S-QPI'S	VAR	VAR					76
LT CAPITAL LOSS FROM NON-QPI	VAR	VAR					-175
						• • • • • • • • • • • • • • • • • • • •	
		_					
•							
^							
2 Totals Add the amounts in columns negative amounts) Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Bo	here and inclusion here and inclusion here.	ude on your e 9 (if Box E					436,174

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