Form 990-T	Exempt Organization Bu	sine	ss Income T	ax Retur	n	OMB No 1545-0687		
*	(and proxy tax un			N 20 201		2018		
	For calendar year 2018 or other tax year beginning JUL 1				<u>.9</u>	20 10		
Department of the Treasury Internal Revenue Service	► Go to www.irs.gov/Form990T for instructions and the latest information. 1906 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).							
A Check box if address changed	Name of organization (Check box if name	Name of organization (Check box if name changed and see instructions.) Demployer identification number (Employees' trust, see instructions)						
B Exempt under section	Print Idaho State University	y Fo	undation, I	nc.		2-6013543		
X 501(c)(3)	Number, street, and room or suite no. If a P.O. b					lated business activity code Instructions)		
408(e) 220(e)	Type 921 South 8th Avenue,				╛			
408A 530(a) 529(a)	City or town, state or province, country, and ZIP or foreign postal code Pocatello, ID 83209 900099							
C Book value of all assets	F Group exemption number (See instructions.) G Check organization type ▶ X 501(c) co	•						
81,068,6	63. G Check organization type ► X 501(c) co	rporatio	n 501(c) trust	401(a) trust	Other trust		
H Enter the number of the	organization's unrelated trades or businesses.	1	Describe	the only (or first) ur	related			
	Passthrough income			complete Parts I-V		•		
	lank space at the end of the previous sentence, complete I	Parts I ar	nd II, complete a Schedule	M for each addition	nal trad	e or		
business, then complete						- 1 1		
	the corporation a subsidiary in an affiliated group or a par	ent-subs	idiary controlled group?	▶ l	Y	es X No		
	nd identifying number of the parent corporation.					000 2480		
	► Shauna Croft			one number > 2				
L	Trade or Business Income	_	(A) Income	(B) Expense	8	(C) Net		
1 a Gross receipts or sale		1.		3 ²	, ,	_		
b Less returns and allow		1c		* ,	•	ļ		
2 Cost of goods sold (S	•	2				<u>'</u>		
3 Gross profit Subtract		3		•		<u> </u>		
	ne (attach Schedule D)	48						
- , ,,	4797, Part II, line 17) (attach Form 4797)	4b				ļ		
c Capital loss deduction		4c	17,099.	Stmt 5	·)	17,099.		
	partnership or an S corporation (attach statement)	5	17,099.	Stmt. 2	4 ,,	17,099.		
6 Rent income (Schedu7 Unrelated debt-financ	•	6						
_	ed income (Schedule E)	<u> </u>			-	<u> </u>		
	eties, and rents from a controlled organization (Schedule F a section 501(c)(7), (9), or (17) organization (Schedule G	·				<u> </u>		
	vity income (Schedule I)	10						
11 Advertising income (S	, ,	11				<u> </u>		
,	structions; attach schedule)	12						
13 Total, Combine lines	•	13	17,099.			17,099.		
	ns Not Taken Elsewhere (See instructions		•					
(Except for d	contributions, deductions must be directly connect	ed with	the unrelated business	s income)				
14 Compensation of off	icers, directors, and trustees (Schedule K)				14			
15 Salaries and wages	, , , ,				15			
16 Repairs and mainten	ance				16			
17 Bad debts					17			
18 Interest (attach sche	dule) (see instructions)				18	,		
19 Taxes and licenses					19	186.		
20 Charitable contributi	ons (See instructions for limitation rules) Stateme	ent	4 See State	ement 3	20	1,427.		
21 Depreciation (attach	Form 4562)		21		·			
22 Less depreciation cla	aimed on Schedule A and elsewhere on return		22a		22b			
23 Depletion					23			
24 Contributions to defe	erred compensation plans	- 1	RECEIVE)]	24			
25 Employee benefit pro	ograms			 3 ()	25			
26 Excess exempt expe	nses (Schedule I)	C286	***** * * * * * * * * * * * * * * * *		26			
27 Excess readership co	•	2	MAY 1 5 2020	IRS-OS(27			
28 Other deductions (at		1		一 三 二	28	4 5 4 5		
	dd lines 14 through 28	į	OGDEN, U			1,613.		
	axable income before net operating loss deduction. Subtra		9-Trom-line-13	<u> </u>	30	15,486.		
•	erating loss arising in tax years beginning on or after Janu	ary 1, 20	018 (see instructions)	3 .	31	15 406		
	axable income. Subtract line 31 from line 30			31	-32	15,486.		
823701 01-09-19 LHA FO	r Paperwork Reduction Act Notice, see instructions.					Form 990-T (2018)		

Form 990-		1-00T	.3343	Page Z
Part I			,	
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		33	15,486.
34	Amounts paid for disallowed fringes		34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) Stmt	5	35	1,647.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of			
	lines 33 and 34		36	13,839.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	38	3ĵ7	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,			
	enter the smaller of zero or line 36	39	38	12,839.
Part	V Tax Computation			
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0.21)	▶4	039	2,696.
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	Alternative 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	45	$\overline{}$	2,696.
Part		- 1	1	
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a		1 1	
	Other credits (see instructions) 45b	· · · · · · · · · · · · · · · · · · ·	1]	
	General business credit, Attach Form 3800 45c		1	
-			┨	
			450	
	Total credits. Add lines 45a through 45d		45e	2,696.
46	Subtract line 45e from line 44 Other taxes. Check if from. Form 4255 Form 8611 Form 8697 Form 8866 Other (ettach)		47	2,030.
47			48	2,696.
48	Total tax. Add lines 46 and 47 (see instructions)	49	_	2,030.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	300.	49	<u> </u>
		300.	1	
	2018 estimated tax payments 50b		-	
	Tax deposited with Form 8868 50c		-	
	Foreign organizations. Tax paid or withheld at source (see instructions) 50d		- 1	
	Backup withholding (see instructions) 50e		1	
	Credit for small employer health insurance premiums (attach Form 8941)		4	
9	Other credits, adjustments, and payments. Form 2439			
	Form 4136 Other Total ▶ 50g		↓	0 200
51	Total payments. Add lines 50a through 50g	_	51	2,300.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached	5:	52	8.
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	. ₹5	14-53	404.
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 54 you want, Credited to 2019 estimated tax		55	
Part \		.)		
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 may have to file			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country			,,
	here ►			X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign to	ust?		Х
	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 ▶\$	 		
C:	Under paralities of Delury, recognization of page area (other than taxpayer) is based on all information of which preparer has any knowledge	of my kno	wiedge and b	pelief, it is true,
Sign				scuss this return with
Here	Jul 20 Treasurer			nown below (see
	Signature of officer Date / Title		structions)?	X Yes No
	Print/Type preparer's name Preparer's signature Date Check	r	f PTIN	
Paid		mployed		
Prepa	orer Kim Hunwardsen, CPA CPA 05/07/20)484560
Use (Only Firm's name ► EIDE BAILLY LLP Firm'	s EIN 🕨	45-	-0250958
	877 W. MAIN ST. STE. 800			
	Firm's address ► BOISE, ID 83702 Phor	е по. 2		14-7150
823711 0	-09-19		F	orm 990-T (2018)

Schedule A - Cost of Good	s Sold. Enter	method of invei	ntory v	aluation N/A				•
1 Inventory at beginning of year	1	•	6	Inventory at end of year	r		6	
2 Purchases	2] 7	Cost of goods sold. Su	btract I	ine 6		
3 Cost of labor	3			from line 5. Enter here	and in F	Part I,		
4a Additional section 263A costs				line 2			7	<u> </u>
(attach schedule)	48		8	Do the rules of section	263A (1	with respect to		Yes No
Other costs (attach schedule)	4b		_	property produced or a	cquired	l for resale) apply to		
5 Total. Add lines 1 through 4b	5		<u> </u>	the organization?				
Schedule C - Rent Income (see instructions)	(From Real	Property an	d Pe	rsonal Property	Leas	ed With Real Pro	per	ty)
1. Description of property								
(1)								
(2)				-				
(3)								
(4)								
		ed or accrued				3(a) Deductions directly	v conne	acted with the income in
(a) From personal property (if the per rent for personal property is mor 10% but not more than 50%	e than	of rent for	personal	sonal property (if the percental property exceeds 50% or if sed on profit or income)	ige	columns 2(a) a	nd 2(b)	(attach schedule)
(1)								
(2)								
(3)								
(4)								
Total	0.	Total			0.			
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)	>			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>	0.
Schedule E - Unrelated Del	bt-Financed	l Income (see	ınstru	ictions)				
			2	2 Gross income from or allocable to debt-	(0)	3. Deductions directly cor to debt-finance		perty
1. Description of debt-fi	nanced property			financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)
(1)			+				+-	
(2)			†					
(3)							1	
(4)								
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property a schedule)	-	5. 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)		· · · · · · · · · · · · · · · · · · ·	1	%				
(2)	L		L	%				
(3)				%				
(4)				%				
						nter here and on page 1, Part I, line 7, column (A)		Enter here and on page 1, Part I, line 7, column (B)
Totals				▶		0		0.
Total dividends-received deductions in	ncluded in column	n 8		- 1			<u> </u>	0.

Schedule F - Interest,	Annuities, Roya	lties, an		s From C Controlled C			zatio	ns (see in:	structio	ns)
1	9 5-	nployer	<u> </u>	related income		tal of specified	5 Pa	rt of column 4	that is	6. Deductions directly
Name of controlled organiza	identif	rproyer fication nber		e instructions)		ments made	includ	ded in the con zation's gross	trolling	connected with income in column 5
(1)					 		┼			
(1)							 			
							 			
(3)									\neg	
(4) Nonexempt Controlled Organ	ızatıone							· · · -		
7. Taxable Income	8. Net unrelated inco	me (loss)	Q Total	of specified pay	ments	10. Part of colu	mn 9 th:	at is included	11 0	leductions directly connected
7. Taxable income	(see instruction		3. 10m	made	men us	in the control	ing orga	nization's		th income in column 10
(1)										
(2)										
(3)							-			
(4)										
						Add colur Enter here and		e 1, Part I,		Add columns 6 and 11 here and on page 1, Part I, line 8, column (8)
T-A-1-										_
Totals		<u> </u>	5044 1	(7) (0)	<u> </u>	• ••		0.	<u> </u>	0.
Schedule G - Investme		Section	501(0)	(7), (9), or	(17) (1	rganizatior	1			
(288 1120	ructions)			1		3. Deductio	ne.	T		5. Total deductions
1. Desc	cription of income			2. Amount of	Income	directly conne	cted	4 Set-	asides schedule)	and set-asides
				1		(attach sched	Jule)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		(col 3 plus col 4)
(1)										
(2)				ļ						
(3)										
(4)								<u> </u>		
				Enter here and Part I, line 9, co				• .	+,	Enter here and on page 1 Part I, line 9, cotumn (B)
							-			
Totals				<u> </u>	0.					0.
Schedule I - Exploited (see instri	-	y Incom	e, Othe	er Than Ac	lvertis	ing Income	9			
	T			4. Net incor	ne (loss)			Ι		7 -
1. Description of	2. Gross unrelated business	directly of	oenses onnected	from unrelated business (co	d trade or	5 Gross inco		6 Exp	oenses	7 Excess exempt expenses (column
exploited activity	income from	with pro	duction elated	minus colum	n 3). If a	is not unrelat	ted	attribut	table to mn 5	6 minus column 5, but not more than
	trade or business	business		gain, comput through		business inco	ome			column 4)
(1)				<u> </u>						
										
(2)		1	-	 				-	-	1
(3)										
(4)	Enter here and on	Enter her	a and an	-				<u>. </u>		Enter here and
	page 1, Part I,	page 1,	, Part I,	- 1			14		41	on page 1, Part II, line 26
	line 10, col (A)	line 10,			' '	* *				
Totals	0.	<u> </u>	0.	** *				· '		0.
Schedule J - Advertisi										
Part I Income From	Periodicals Rep	orted or	n a Cor	isolidated	Basis					
-	2. Gross		9	4. Adver	tising gain	5.0.4		.		7. Excess readership
1. Name of periodical	advertising income		3. Direct rtising costs	col3) lfág	ol 2 minus ain, comput hrough 7			6 Read		costs (column 6 minus column 5, but not more than column 4)
(1)					-	+		 		
(2)				- "						1 .
(3)				\dashv	•			 		┤ .
				 '· ·	'ı			 		1
(4)						' 		 		-
Totals (carry to Part II, line (5))	•	0.	0	.				1		0.
		-								Form 990-T (2018

Form 990-T (2018) Idaho State University Foundation, Inc. 82-6013543 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.)

Name of periodical		2. Gross advertising Income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation Income	6. Readership costs	Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)							
(2)							
(3)							
(4)				Ĭ			
Totals from Part I	>	0.	0.	4 - 3	2 ⁴⁴	. *	0.
		Enter here and on page 1, Part I, tine 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)	- (- rm + 4) ; ;		A Secretary	Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	▶	0.	0.	·	the state of the s	No. 19.5	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 (2018)

21. /		
	Footnotes	Statement 1

Section 1.263(a)-1(f) De Minimis Safe Harbor Election The organization is making the de minimis safe harbor election under Reg. Sec. 1.263(a)-1(f).

Form 990-T Income	e (Loss) from Partnerships	State	ement	2
Description			Income (Loss)	
CommonFund Capital Partners IV	-		7,07	72.
CommonFund Capital Internation Business Income (lo	_		- 9	93.
CommonFund Capital Natural Res Ordinary Business Income			-21,14	43.
CommonFund Capital Natural Res Business Income (_		-20,56	64.
CommonFund Capital Strategic S Ordinary Business Income			3,31	13.
CommonFund Capital Strategic & Ordinary Business Income			7,23	31.
CommonFund Capital Venture Par Income (loss)	-		-37	78.
CommonFund Capital Venture Par Business Income (loss) CommonFund Capital Private Equ	_		-41	19.
Commonfund Capital Filvate Equ Business Income (CommonFund Capital Secondary D			2	96.
Business Income (loss) CommonFund Strategic Solutions	_		34,65	53.
Ordinary Business Income CommonFund Capital Venture Par	_		4,24	43.
Income (loss) CommonFund Global Distressed 1			3,17	74.
Income (loss) CommonFund Strategic Solutions	-		-	-2.
Ordinary Business Income CommonFund Global Distressed I			18	82.
Ordinary Business Incom			-26	56.
Total Included on Form 990-T,	Page 1, line 5		17,09	99. —
Form 990-T	Contributions	State	ment	3
Description/Kind of Property	Method Used to Determine FMV	An	nount	
Idaho State University	N/A	9,	443,59	
Total to Form 990-T, Page 1,]	9,443,591.			

Form 990-T	Contributions Summary		Statement	4
Qualified Con	tributions Subject to 100% Limit			
Carryover of For Tax Yea:	r 2014 r 2015 r 2016			
Total Carryov Total Current	er Year 10% Contributions	3,696,591 9,443,591		
	utions Available e Limitation as Adjusted	13,140,182		
Excess 10% Co Excess 100% Co Total Excess	ontributions	13,138,755 0 13,138,755		
Allowable Con	tributions Deduction		1,4	427
Total Contrib	ution Deduction		1,4	427

Form 990-T	Statement 5			
Tax Year	Loss Sustained	Loss Previously Applied	Loss Remaining	Available This Year
06/30/16	17,162.	15,515.	1,647.	1,647.
NOL Carryo	ver Available This	Year	1,647.	1,647.