	G	endar year 2017 or other tax y	nd proxy tax ur		ction 6033(e))	30 201	8 _ /	20	17
tanadana of the Tours	Por Cal				ons and the latest inform		<u>4NV</u>		
lepartment of the Treasury Iternal Revenue Service	▶	Do not enter SSN number	ers on this form as it n	nay be ma	de public if your organiz	ation is a र्	· // /	Other ten income Other ten i	inizations (
Check box if address changed		Name of organization (Check box if nam	e changed	and see instructions.)		(Em	ployees' trust,	
	DA	MUE COLORADO COL	I BOB					•	0
Exempt under section X 501(c)(3)	Print	THE COLORADO COL Number, street, and room		hov cools	estruations				
408(e) 220(e)	Туре	14 E. CACHE LA P		DUX, SEE III	istructions		(Sec	instructions)	-
408A 530(a)		City or town, state or pro	vince, country, and ZII	or foreigi	n postal code				
529(a)		COLORADO SPRINGS			•		6116	500	81290
Book value of all assets at end of year		F Group exemption num	ber (See instructions.)	•					
<u></u>		G Check organization type					401(a) trust		Other tru
Describe the organization		·				ER, FITI			
		oration a subsidiary in an ifying number of the pare		irent-subsi	diary controlled group?		▶ Ы! \	reș <u>X</u>	ŊŪ
The books are in care of		<u> </u>		NC	Telepho	one number	719-3	89-6693	
		le or Business Inc			(A) Income		xpenses) Net
1a Gross receipts or sale	s	1,360,976.		\top				 	
b Less returns and allow	vances		c Balance 🐧 🕨	► 1c	1,360,976.				
2 Cost of goods sold (S	chedule	A, line 7)	1//1	2					
3 Gross profit. Subtract			/ \ \	3	1,360,976.			1	<u> </u>
4a Capital gain net incom	•	•	- 4707)	4a	107,366.				107,
c Capital loss deduction	-	art II, line 17) (attach Forn te	11 4797)	4b 4c				1	
•		ps and S corporations (at	tach statement)	5	-1,098,447.	. 	· · · · · · · · · · · · · · · · · · ·	-1	098
6 Rent income (Schedu		po una o dosporanono (as		6	, , ,				, ,
7 Unrelated debt-financ		ne (Schedule E)		7			· · · · · · · · · · · · · · · · · · ·	<u> </u>	
8 Interest, annuities, roy	/alties, a	nd rents from controlled o	organizations (Sch. F)	8					
		n 501(c)(7), (9), or (17) o	rganization (Schedule	· —				ļ	
Exploited exempt activ	-	, ,		10				<u> </u>	
 Advertising income (S Other income (See ins 		•		11				1	
3 Total. Combine lines		•		13	369,895.		-		369
		t Taken Elsewhe	re (See instructions			· · · · · · · · · · · · · · · · · · ·		1 .	
		itions, deductions mus				s income)			
4 Compensation of off	cers, dır	ectors, and trustees (Sch					14		
5 Salaries and wages		<u> </u>	RECEIV	ED			15		645,
6 Repairs and mainten	ance		TLUL!		င္တ န		16	ļ	4,
 7 Bad debts 8 Interest (attach sche 	dulo)	15		on10	IRS -0S(17		
 8 Interest (attach sche 9 Taxes and licenses 	uule)	29-607	MAY 1 6	.012 1	181		18		
	ons (Sce	। instructions for limitation	rulos)	IIT	,-1		20		
1 Depreciation (attach		1	OGUEN	_ال	21				
2 Less depreciation cla	imed on	Schedule A and elsewhei	e on return		22a		22b		
3 Depletion							23		
4 Contributions to defe		npensation plans					24	<u> </u>	50,
5 Employee benefit pro	-	hadula IV					25		98,
6 Excess exempt expert7 Excess readership or							26 27		
8 Other deductions (at		•			SEE STATEMENT	r 1	28	+	446
9 Total deductions. A		·					29	1	
O Unrelated business t	axable ın	come before net operatin	g loss deduction. Subt	ract line 29) from line 13		30		-876,
 Net operating loss de 	duction	(limited to the amount on	line 30)		SEE STATEMENT	г 2	31		
		come before specific ded			30		32		-876,
3 Specific deduction (0)		\$1,000, but see line 33 in					$\frac{33}{33}$		1,
	taxable	income. Subtract line 33	from line 32. If line 33	is greater t	than line 32, enter the sm	aller of zero			076
4 Unrelated business									
4 Unrelated business line 32	r Dance	work Reduction Act Notic	a caa instructions				/ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Form 9 9	-876, 20-T /

P00078514

Firm's EIN ▶

Phone no. 303-466-8822

41-0746749

Preparer

Use Only

AREN GRIES

Firm's name CLIFTONLARSONALLEN LL

Firm's address > BROOMFIELD, CO 80021

370 INTERLOCKEN BLVD. SUITE 500

Schedule A - Cost of Good	s Sold. Enter	method of inve	ntory v	aluation 🕨 N/A						
1 Inventory at beginning of year	1		6	Inventory at end of yea	ır	<u> </u>	6			
2 Purchases	2		7	Cost of goods sold. Su	ubtract	line 6				
3 Cost of labor	3		1	from line 5. Enter here	and in I	Part I,				
4 a Additional section 263A costs			1	line 2		•	7			
(attach schedule)	4a		8	Do the rules of section	263A (with respect to		•	Yes	No
b Other costs (attach schedule)	4b		┦ Ĭ	property produced or a						<u> </u>
5 Total. Add lines 1 through 4b	5		1	the organization?		, , , , , , , , , , , , , , , , , , , ,				
Schedule C - Rent Income		Property an	d Pe		Leas	ed With Real Pro	ner	\ <u>\</u>		
(see instructions)	(- Toporty un						·		
1. Description of property										
(1)										
(2)				·						
(3)										
(4)						•				
	Rent receiv	ed or accrued				2(2) 5-4-4-4-4				_
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	e than	` of rent for	personal	onal property (if the percenta property exceeds 50% or if ed on profit or income)	19 0	3(a) Deductions directly columns 2(a) a				n
(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	. , . , ,	nter -			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	•			0.
Schedule E - Unrelated Det	bt-Financed	Income (see	ınstru	ctions)		,				
				Gross income from		Deductions directly cor to debt-finan-			ole	
1. Description of debt-fi	nanced property			n		Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)		
(1)			1				+-			
(2)	··-·	-					+			
(3)			1				+			
(4)			1				\top	-		
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	e adjusted basis allocable to inced property h schedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable (column 6 x to 3(a) an	tal of col	
(1)				%						
(2)				%						
(3)				%						
(4)				%			T			
						nter here and on page 1, Part I, line 7, column (A)		Enter here and Part I, line 7, o		
Totals				▶		().l			0.
Total dividends-received deductions in	icluded in columi	n 8		- 1		<u> </u>		-		0.
									000 T	(2017)

orm 990-T (2017) THE COL				- F ^	A 1°	-10		84-0402		Pa
chedule F - Interest	, Annuities, Ro	yaities, a		S From Co Controlled O			zatio	ns (see ins	structio	ns)
1. Name of controlled organi	ıdı	Employer entification number		elated income instructions)		al of specified nents made	ınclud	rt of column 4 ded in the cont zation's gross	Irolling	6. Deductions directly connected with incomin column 5
1)	•			,					4 that is introlling is income 1 11. Do with the stream of the stream o	
?)			1							
3)										
4)										
onexempt Controlled Orga	inizations									
7. Taxable Income	8. Net unrelated in (see instruc		9. Total	of specified payr made	ments	10. Part of colur in the controlli gross		nization's		deductions directly connect th income in column 10
1)	- 	<u> </u>		 						
2)		·								
3)			L							
4)										
otals						Add colum Enter here and line 8, c	on pag	e 1, Part I,		Add columns 6 and 11 here and on page 1, Part line 8, column (B)
chedule G - Investn	nent Income of structions)	a Sectio	n 501(c)(7), (9), or	(17) Or	ganization	<u> </u>	0.	<u> </u>	
1. De	escription of income	_		2. Amount of	income	3. Deduction directly conne (attach sched	cted	ed 4. Set-asides		5. Total deduction and set-aside (col. 3 plus col.
1)			*							
2)										
3)										
4)										
			·	Enter here and o Part I, line 9, co						Enter here and on pa Part I, line 9, column
otals chedule I - Exploite	d Evernt Activ	ity Incor	ne Other	r Than Ad	0. Ivertisi	na Income				<u> </u>
-	tructions)	,	,							
		3 =	xpenses	4. Net incom	ie (loss)			T		7. Excess exemp
1. Description of exploited activity	2. Gross unrelated business income from trade or business	directly with p of u	ess income	from unrelated business (co minus columi gain, compute through	trade or lumn 2 n 3) If a a cols 5	5. Gross inco from activity t is not unrelat business inco	hat ed	attribut	able to	expenses (colum 6 minus column 5 but not more that column 4)
1)										
2)										
3)										
4)	Enter have and a	5-1	ore and					<u> </u>		Enter here and
	Enter here and on page 1, Part I, line 10, col (A)	page	ere and on 1, Part I, 0, col (B)							on page 1, Part II, line 26
otals I		0.	0.							
chedule J - Advertis										
Part I Income From	n Periodicals R	eported (on a Con	solidated	Basis					
1. Name of periodical	2. Gros advertisi income	ng ad	3. Direct vertising costs	4. Advert or (loss) (co col 3) If a ga cols 5 th	ol 2 minus un, computi	5. Circulat income		6. Reade		7. Excess readersh costs (column 6 min column 5, but not m than column 4)
1)										_
2)										
3)	\Box \Box									
4)	•]						
	T .									
tals (carry to Part II, line (5))	•	0.	().				L		<u> </u>
										Form 990-T (2

723731 01-22-18

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)							1
(2)				,			
(3)							
(4)		·					
Totals from Part I	▶	0.	0.			· · · · · · · · · · · · · · · · · · ·	0.
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, cot (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	>	0.	0.				0.

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

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2017)

011-1Z61

QUALIFIED UNDER SMALL CORPORATION EXEMPTION

Alternative Minimum Tax - Corporations

Attach to the corporation's tax return.

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

OMB No 1545-0123

Nan	e					Employer identification number
	THE COLORADO COLLEGE					84-0402510
	Note: See the instructions to find out if the corporation is a small corporation exempt		·			
	from the alternative minimum tax (AMT) under section 55(e).				l	
1	Taxable income or (loss) before net operating loss deduction				1	-876,397.
2	Adjustments and preferences:					
	a Depreciation of post-1986 property				2a	
	b Amortization of certified pollution control facilities				2b	
	c Amortization of mining exploration and development costs				2c	
	d Amortization of circulation expenditures (personal holding companies only)				2d	
	e Adjusted gain or loss			1	2e	
	f Long-term contracts				2f	
	Merchant marine capital construction funds				2g	
	h Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)				2h	
	Tax shelter farm activities (personal service corporations only)				2i	
	Passive activities (closely held corporations and personal service corporations only)				2j	
	C Loss limitations				2k	
	Depletion				21	
	m Tax-exempt interest income from specified private activity bonds				2m	
	n Intangible drilling costs				2n	
	Other adjustments and preferences				20	
3	Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20				3	-876,397.
4	Adjusted current earnings (ACE) adjustment:					
	ACE from line 10 of the ACE worksheet in the instructions	4a		-876,397.		
	Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a	ł				
	negative amount. See instructions	4b		0.	i	
	Multiply line 4b by 75% (0.75). Enter the result as a positive amount	4c				
	f Enter the excess, if any, of the corporation's total increases in AMTI from prior		1			
	year ACE adjustments over its total reductions in AMTI from prior year ACE	1	1			
	adjustments. See instructions. Note, You must enter an amount on line 4d	i				
	(even if line 4b is positive)	4d	<u> </u>			
	e ACE adjustment.				-	
	 It line 4b is zero or more, enter the amount from line 4c 	1				
	• If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount	Ì			4e	0.
5	Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT				5	-876,397.
6	Alternative tax net operating loss deduction. See instructions				6	
7	Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a	ı residi	ıal			
	interest in a REMIC, see instructions				7	
8	Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on	line 8c)):			
	Subtract \$150,000 from line 7. If completing this line for a member of a controlled					
	group, see instructions. If zero or less, enter -0-	8a				
	Multiply line 8a by 25% (0 25)	85				
	Exemption. Subtract line 8b from \$40,000. If completing this line for a member of a contro	lled				
	group, see instructions If zero or less, enter -0-				8c	
9	Subtract line 8c from line 7. If zero or less, enter -0-				9	
10	Multiply line 9 by 20% (0.20)				10	
11	Alternative minimum tax foreign tax credit (AMTFTC). See instructions				11	
12	Tentative minimum tax. Subtract line 11 from line 10				12	
13	Regular tax liability before applying all credits except the foreign tax credit				13	
14	Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0 Enter her	e and c	n			
	Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	n			14	
JWA	For Paperwork Reduction Act Notice, see separate instructions.					Form 4626 (2017)

Internal Revenue Service

Ad	justed Current Earnings (► See ACE Worksheet Instr			
	P CCC //CC WOINSHEET HISH	0010113.		
1 Pre-adjustment AMTI. Enter the amount from line	3 of Form 4626		1	-876,397.
2 ACE depreciation adjustment:	¢			
a AMT depreciation		2a		
b ACE depreciation:				
(1) Post-1993 property	2b(1)			
(2) Post-1989, pre-1994 property	2b(2)	\neg		
(3) Pre-1990 MACRS property	2b(3)		1 1	
(4) Pre-1990 original ACRS property	2b(4)		1 1	
(5) Property described in sections				
168(f)(1) through (4)	2b(5)			
(6) Other property	2b(6)			
(7) Total ACE depreciation. Add lines 2b(1) thr		2b(7)		
c ACE depreciation adjustment. Subtract line 2b(7)		[(-/)	2c	
3 Inclusion in ACE of items included in earnings and			 	
a Tax-exempt interest income	, p. c	3a		
b Death benefits from life insurance contracts		3b	 	
c All other distributions from life insurance contract	s (including surrenders)	3c		
d Inside buildup of undistributed income in life insui	,	3d	 	
e Other items (see Regulations sections 1.56(g)-1(c		30	 	
for a partial list)	(O)(III) till odgir (IX)	3e		•
f Total increase to ACE from inclusion in ACE of iter	ne included in ESP. Add lines 32 throi		3f	
4 Disallowance of items not deductible from E&P:	ns included in Ear. Add lines 3a tillot	igii se	3-	
a Certain dividends received		ا ما		
		4a		
Dividends paid on certain preferred stock of public utilities	·	1,1	1 1	
affected by P L 113-295, Div A, section 221(a)(41)(A), Dec		4b		
c Dividends paid to an ESOP that are deductible und	, ,	4c		
d Nonpatronage dividends that are paid and deducti	ole under section			
1382(c)		4d		
e Other items (see Regulations sections 1.56(g)-1(d)(3)(i) and (ii) for a			
partial list)		[4e]	 1	
f Total increase to ACE because of disallowance of i		nes 4a through 4e	4f	
5 Other adjustments based on rules for figuring E&F	:	1 1	i l	
a Intangible drilling costs		5a	•	
b Circulation expenditures		5b		
c Organizational expenditures	,	5c		
d LIFO inventory adjustments	·	5d		
e Installment sales		5e		
f Total other E&P adjustments. Combine lines 5a th	rough 5e		5f	
6 Disallowance of loss on exchange of debt pools			6	
7 Acquisition expenses of life insurance companies	for qualified foreign contracts		7	
8 Depletion			8	
9 Basis adjustments in determining gain or loss from	n sale or exchange of pre-1994 prope	rty	9	
O Adjusted current earnings. Combine lines 1, 2c, 3	lf, 4f, and 5f through 9. Enter the resu	It here and on line 4a of		·
Form 4626			~ 10	-876,397.

FORM 990-T		OTHER	DEDUCTIO)NS		STATEMENT	1
DESCRIPTION	r					AMOUNT	
EDUCATION	-					3	,390.
DUES & SUBS	CRIPTIONS						921.
FOOD SERVIC						441	163.
SUPPLIES						-81	,157.
PURCHASED S	ERVICES						,377.
TRAVEL						2	,518.
MINOR EQUIP	MENT					13	,551.
UTILITIES							130.
STUDENT ASS							389.
OTHER MISCE	LLANEOUS					33	,043.
TOTAL TO FO	RM 990-T, PAGE 1,	LINE 28				446	,325.
FORM 990-T	NET	OPERATIN	G LOSS DE	DUCTI	ON	STATEMENT	2
		T 0.0	<u> </u>		<u> </u>		
		LOS		т	OCC	31/3 TT 3 DT 17	
TAX YEAR	LOSS SUSTAINED	PREVIO APPL			OSS AINING	AVAILABLE THIS YEAR	
———		AFF11		KEM		THIS TEAK	
06/30/09	325,246.		288,723.		36,523.	36,5	523.
06/30/10	938,901.		0.		938,901.	938,9	901.
06/30/11	348,868.		0.		348,868.	348,8	368.
06/30/12	183,888.		0.		183,888.	183,8	
06/30/13	60,807.		0.		60,807.	60,8	
06/30/14	312,871.		0.		312,871.	312,8	
06/30/15	432,658.		0.		432,658.		558
	•				•	432,6	
06/30/17	1,805,303.		0.		1,805,303.	1,805,3	
06/30/17	•	YEAR			•	•	303.
06/30/17	1,805,303. ER AVAILABLE THIS	YEAR ME (LOSS)	0.	TNERS	1,805,303.	1,805,3	303.
NOL CARRYOV	1,805,303. ER AVAILABLE THIS		0.	TNERS	1,805,303.	1,805,3 4,119,8 STATEMENT	303.
NOL CARRYOV	1,805,303. ER AVAILABLE THIS INCOL		0.		1,805,303. 4,119,819. HIPS	1,805,3 4,119,8	303. 319. 319.
NOL CARRYOV FORM 990-T PARTNERSHIP DEERFIELD H	1,805,303. ER AVAILABLE THIS INCOM NAME EALTHCARE INNOVAT	ME (LOSS)	FROM PAR	ICOME	1,805,303. 4,119,819. HIPS DEDUCTIONS	1,805,3 4,119,8 STATEMENT NET INCOMOR (LOSS	303. 319. 319.
NOL CARRYOV FORM 990-T PARTNERSHIP DEERFIELD H FUND L.P.	1,805,303. ER AVAILABLE THIS INCOM NAME EALTHCARE INNOVAT: 47-2351736	ME (LOSS)	FROM PAR		1,805,303. 4,119,819. HIPS	1,805,3 4,119,8 STATEMENT NET INCOMOR (LOSS	303. 319. 319. 319.
PARTNERSHIP DEERFIELD H FUND L.P. DEERFIELD P L.P. 81-32	1,805,303. ER AVAILABLE THIS INCOM NAME EALTHCARE INNOVAT: 47-2351736 RIVATE DESIGN FUNI 99895	ME (LOSS)	FROM PAR GROSS IN	ICOME	1,805,303. 4,119,819. HIPS DEDUCTIONS	1,805,3 4,119,8 STATEMENT NET INCOM OR (LOSS	303. 319. 319. 319.
PARTNERSHIP DEERFIELD H FUND L.P. DEERFIELD P L.P. 81-32 EIG ENERGY	1,805,303. ER AVAILABLE THIS INCOM NAME EALTHCARE INNOVAT: 47-2351736 RIVATE DESIGN FUNI	ME (LOSS)	FROM PAR GROSS IN -2 -1	SOME	1,805,303. 4,119,819. HIPS DEDUCTIONS 0.	1,805,3 4,119,8 STATEMENT NET INCOM OR (LOSS -29 -15	303. 319. 319. 319. ,786.
PARTNERSHIP DEERFIELD H FUND L.P. DEERFIELD P L.P. 81-32 EIG ENERGY 20-8019409	1,805,303. ER AVAILABLE THIS INCOM NAME EALTHCARE INNOVAT: 47-2351736 RIVATE DESIGN FUNI 99895	ME (LOSS)	FROM PAR GROSS IN -2 -1	OME	1,805,303. 4,119,819. HIPS DEDUCTIONS 0.	1,805,3 4,119,8 STATEMENT NET INCOM OR (LOSS -29 -15	303. 319. 319. 3

THE COLORADO COLLEGE			84	-0402510
FORTRESS CREDIT OPPORTUNITIES FUND				
(B) LP 26-1701442	8,827.	0.	•	8,827.
FORTRESS CREDIT OPPORTUNITIES FUND				
II (B) LP 27-0354858	68.	0.		68.
FORTRESS CREDIT OPPORTUNITIES FUND				
III (B) LP 99-0365908	-1,768.	0.		-1,768.
HIGHFIELDS CAPITAL IV LP				
11-3841276	-5,061.	0.		-5,061.
WALTON STREET REAL ESTATE FUND				
VI-E, L.P. 26-1163727	125,837.	1,449.		124,388.
WALTON STREET REAL ESTATE FUND				
VII-E, L.P. 45-3617823	161,946.	181.		161,765.
WALTON STREET REAL ESTATE FUND				
VIII, LP 47-3810224	-25,795.	7,898.		-33,693.
YORKTOWN ENERGY PARTNERS X, L.P.				
46-2445852	5,973.	325,191.		-319,218.
YORKTOWN ENERGY PARTNERS XI, L.P.				
81-1279864	-502,871.	580,381.		-1,083,252.
ENDOWMENT VENTURE PARTNERS V, L.P.				
06-1563332	72.	0.		72.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	67,495.	1,165,942.		-1,098,447.

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

Name

Employer identification number

THE COLORADO COLLEGE				84-0	402510
Part I Short-Term Capital Ga	ins and Losses - Ass	sets Held One Yea	r or Less		
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	ain 49.	(h) Gain or (loss) Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column (combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on]
Form(s) 8949 with Box A checked			- 		
2 Totals for all transactions reported on					
Form(s) 8949 with Box B checked		_/	•		
3 Totals for all transactions reported on					
Form(s) 8949 with Box C checked			.L	T 4	
4 Short-term capital gain from installment sales		Į.		5	
5 Short-term capital gain or (loss) from like-king		SEE STAT	PEMENT A	6	(32,129.)
6 Unused capital loss carryover (attach comput			EMENI 4	7	-32,129,
7 Net short-term capital gain or (loss). Combin Part II Long-Term Capital Gai			an One Vear		-52,125.
See instructions for how to figure the amounts	IIS and LUSSES F ASS		Tone real		T
to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars. (d) Proceeds (sales price) (sales price) (or other basis) (g) Adjustments or loss from Form(Part II, line 2, coli					(ħ) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on Form(s) 8949 with Box D checked	/ /				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	139,495.				139,495.
11 Enter gain from Form 4797, line 7 or 9	/			11	
12 Long-term capital gain from installment sales	,	7		12	
13 Long-term capital gain or (loss) from like-kine	d exchanges from Form 8824			13	
14 Capital gain distributions	<i>[</i>			14	,
15 Net long-term capital gain or (loss). Combine		<u>n h</u>		15	139,495.
Part III Summary of Parts I and	+			1	
16 Enter excess of net short-term capital gain (lir	,	, ,	. 7)	16	107.366
17 Net capital gain. Enter excess of net long-term				17	107,366.
18 Add lines 16 and 17. Enter here and on Form		oper line on other returns. I	i die corporation	18	107,366.
has qualified timber gain, also complete Part Note: If losses exceed gains, see Capital loss				L 10	107,300.
BAIA For Department Deduction Act Mating	and the Instructions for Form	1100			Cohodula D /Form 1120\ 2017

Part IV Alternative Tax for Corporations with Qualified Timber Gain. Complete Part IV only	f the corporation has
qualified timber gain under section 1201(b). Skip this part if you are filing Form 1120-RIC. See instructions. 19 Enter qualified timber gain (as defined in section 1201(b)(2)) 19 19	<u> </u>
20 Enter taxable income from Form 1120, page 1, line 30, or the applicable line	\dashv
of your tax return 20	
21 Enter the smallest of: (a) the amount on line 19; (b) the amount on line 20; or	-
(c) the amount on Part III, line 17	_ /
•	
22 Multiply line 21 by 23.8% (0.238)	22"
23 Subtract line 17 from line 20. If zero or less, enter -0-	<i>y</i>
24 Enter the tax on line 23, figured using the Tax Rate Schedule (or applicable tax rate) appropriate for	7 1
the return with which Schedule D (Form 1120) is being filed	24
	•
25 Add lines 21 and 23	
26 Cubtract line 25 from line 20. If year or less order 0	
26 Subtract line 25 from line 20. If zero or less, enter -0-	- ;
27 Multiply line 26 by 35% (0.35)	27
28 Add lines 22, 24, and 27	28
29 Enter the tax on line 20, figured using the Tax Rate Schedule (or applicable tax rate) appropriate for the	
return with which Schedule D (Form 1120) is being filed	29
30 Enter the smaller of line 28 or line 29. Also enter this amount on Form 1120, Schedule J, line 2, or the / applicable line of your tax return	30
dppineasie inte or your tax reterm	Schedule D (Form 1120) 2017
, , , , , , , , , , , , , , , , , , ,	
721052 03-01-18 JWA	

Attachment Sequence No. 12A Form 8949 (2017) Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on page 1 Social security number or taxpayer identification no. 84-0402510 THE COLORADO COLLEGE 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 long term. 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 Adjustment, if any, to gain or (h) (b) (d) (e) loss. If you enter an amount Gain or (loss). Subtract column (e) Proceeds Cost or other Description of property Date acquired Date sold or in column (g), enter a code in column (f). See instructions. (sales price) basis See the (Example 100 sh XYZ Co) (Mo, day, yr) disposed of Note below and from column (d) & (Mo, day, yr) (g) Amount of combine the result see Column (e) ın Code(s) with column (g) the instructions adjustment EIG ENERGY FUND XIV-A, L.P. 20-8019409 <2,541.> <2,541. EIG ENERGY FUND XV-A, L.P. 27-2688983 <4,546 <4,546.> WALTON STREET REAL ESTATE FUND VI-E, L.P. <2,597.> 26-1163727 <2,597 WALTON STREET REAL ESTATE FUND VII-E, L.P. 45-3617823 259,373. 259,373 YORKTOWN ENERGY PARTNERS X L.P. 46-2445852 <110,221. <110,221.> YORKTOWN ENERGY PARTNERS XI, L.P. 81-1279864 27 27. Totals. Add the amounts in columns (d), (e), (g) and (h) (subtract

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

139,495.

139,495

negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E

above is checked), or line 10 (if Box F above is checked)

SCHEDULE D	C	APITAL LOSS CARRYO	VER	STATEMENT	4
•	LOSS YEAR	ORIGINAL LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	
	2012				
	2013 2014				
	2015				
	2016	32,129		32,1	29
CAPITAL LOSS C	ARRYOVER TO	CURRENT TAXABLE YEA	AR	32,1	29

Department of the Treasury Internal Revenue Service

Credit for Prior Year Minimum Tax - Corporations

Attach to the corporation's tax return.

► Go to www.irs.gov/Form8827 for the latest information

OMB No. 1545-0123

Name	Employer identification number	
THE COLORADO COLLEGE 1 Alternative minimum ta _Λ (AMT) for 2016. Enter the amount from line 14 of the 2016 Form 4G26	84-0402510	
	1	
2 Minimum tax credit carryforward from 2016. Enter the amount from line 9 of the 2016 Form 8827	2	60,363.
3 Enter any 2016 unallowed qualified electric vehicle credit (see instructions)	3	
4 Add lines 1, 2, and 3	4	60,363.
6 Enter the corporation's 2017 regular income tax liability minus allowable tax credits (see instructions)	5	0.
6 Is the corporation a "small corporation" exempt from the AMT for 2017 (see instructions)?		
 Yes. Enter 25% of the excess of line 5 over \$25,000. If line 5 is \$25,000 or less, enter -0- No. Complete Form 4626 for 2017 and enter the tentative minimum tax from line 12 	6	0.
7a Subtract line 6 from line 5 If zero or less, enter -0-	7a	0.
b For a corporation electing to accelerate the minimum tax credit, enter the bonuc depreciation		
amount attributable to the minimum tax credit (see instructions)	7b	
c Add lines 7a and 7b	7c	
8a Enter the smaller of line 4 or line 7c. If the corporation had a post-1986 ownership change		
or has pre-acquisition excess credits, see instructions	8a	
b Current year minimum tax credit. Enter the smaller of line 4 or line 7a here and on Form 1120, Schedule J, Part I, line 5d		
(or the applicable line of your return). If the corporation had a post-1986 ownership change or has pre-acquisition		•
excess credits, see instructions. If you made an entry on line 7b, go to line 8c. Otherwise, skip line 8c	8b	0.
c Subtract line 8b from line 8a. This is the refundable amount for a corporation electing to accelerate		
the minimum tax credit. Include this amount on Form 1120, Schedule J, Part II, line 19c (or the applicable line of	8c	
your return)	80	
9 Minimum tax credit carryforward to 2018. Subtract line 0a from line 4. Keep a record of this amount to carry forward and use in future years	9	60,363.