Form 990-T	E	xempt Organization Bus	ines	s Income Ta	x Return		OMB No. 1545-0687	
		(and proxy tax unde			(C) (C	11	2018	
	For cal	endar year 2018 or other tax year beginning Go to www.irs.gov/Form990T for ins			1) All noi	<i>11</i> [[
Department of the Treasury Internal Revenue Service		Do not enter SSN numbers on this form as it may	be mad	e public if your organizati	on is a 501(c)(3).		pen to Public Inspection for 1(c)(3) Organizations Only	
A Check box if address changed		Name of organization (Check box if name ch	anged a	ind see instructions.)		instruct	(2)	
B Exempt under section	Print	CENTRE COUNTY COMMUNITY			NC.		5-1782197 ed business activity code	
X 501(c)(03)	or Type	Number, street, and room or suite no. If a P.O. box		tructions.	ľ		structions.)	
408(e) 220(e)	1,700	1377 RIDGE MASTER DRIV						
408A 530(a) 529(a)		City or town, state or province, country, and ZIP or STATE COLLEGE, PA 168		postal code	!	525990		
a Rook value of all assets		E Group examption number (See instructions)		504/514-1154	401/0	en et	Other trust	
46,756,0	27.	G Check organization type X 501(c) corp	oration 1	501(c) trust	e only (or first) unr		Other trust	
		ition's unrelated trades or businesses. GENERAL STATEMENT 1	т		e only (or lifst) difference only (or lifst) dif		han one.	
		ice at the end of the previous sentence, complete Pal	rts Land					
business, then complete l			ito i uno	ing complete a consecution.			~**	
During the tax year, was t	the corp	poration a subsidiary in an affiliated group or a paren	t-subsic	liary controlled group?	▶ [Yes	X No	
If "Yes," enter the name a	nd iden	tifying number of the parent corporation.						
J The books are in care of					e number ▶ (3	814)		
		de or Business Income		(A) Income	(B) Expenses	43	(C) Net	
1a Gross receipts or sale		Polones	4.			4.4		
b Less returns and allow	A CONTRACTOR	c Balance	1c 2					
		e A, line 7)rom line 1c	3					
		ch Schedule D)	4a	10,693.			10,693.	
		Part II, line 17) (attach Form 4797)	4b				-	
		sts	4c					
		ship or an S corporation (attach statement)	5	-13,716.	Stmt 2		-13,716.	
			6					
		me (Schedule E)	7					
		and rents from a controlled organization (Schedule F)	8					
		on 501(c)(7), (9), or (17) organization (Schedule G)						
		ome (Schedule I)	10			-		
		e J)	12				_	
		ns; attach schedule) ıgh 12		-3,023.			-3,023.	
Part II Deductio	ns N	ot Taken Elsewhere (See instructions fo	r limita					
(Except for a	contrib	utions, deductions must be directly connected	d with t	he unrelated business	income.)			
14 Compensation of off	ficers, d	irectors, and trustees (Schedule K)				14		
						15		
						16		
						17		
		see instructions)				18		
						19 20		
		e instructions for limitation rules)				20		
21 Depreciation (attach	Form 4	562) on Schedule A and elsewhere on return		222		22b		
22 Less depreciation cl	allileu C	JI Schedule A and eisewhere on return				23	1 N	
		ompensation plans				24		
		Simponounon puno				25	-	
26 Excess exemplexpe	Ases (S	chedule I)				26		
27 Excess readership c	osts (S	chedule J)				27		
28 Other deductions (a	Haeb so	nddule)				28	^	
		s 14 through 28			······································	29	-3,023.	
		income before net operating loss deduction. Subtrac				30	-3,043.	
31 Deduction for net op	perating	loss arising in tax years beginning on or after Janua	ary 1, 20	To (see mstructions)		32	-3,023.	
		income. Subtract line 31 from line 30				UL	Form 990-T (2018)	

		s," see instructions for other forms the organ							
58	Enter	the amount of tax-exempt interest received of	or accrued during the tax	cyear ➤ \$					
0:	Ur ço	nder penalties of perjury, I declare that I have examine rrect, and complete. Declaration of preparer (other the	ed this return, including acco an taxpayer) is based on all i	mpanying schedules nformation of which	and statements, and to preparer has any knowl	the best of my ledge.	nowle	dge and belief, it is true,	
Sign Here		Signature of officer	Date EXECUTIVE DIRECT				May the IRS discuss t		
Paid		Print/Type preparer's name JOSEPH P. FEDELI, CPA	Preparer's signature JOSEPH P. CPA	FEDELI,	Date 11/02/19	Check self- employ	if ed	PTIN P00538622	
Prepa Use C		m t Nadana Badali	1	rothers	, LLP	Firm's EIN	>	20-2000257	
	niy	2013 Sandy Firm's address > State Col.	Phone no.	81	4-237-8999				

Form 990-T (2018)

Schedule A - Cost of Goods	Sold. Enter	method of inven	tory valuation	N/A					
1 Inventory at beginning of year	1		6 Inventory at e	nd of year			6		
2 Purchases	[]		7 Cost of goods	s sold. Sub	tract line 6				
3 Cost of labor	[]		from line 5. E	nter here ar	ıd in Part I,				
4a Additional section 263A costs			line 2		,.		7		
(attach schedule)	4a		8 Do the rules of	of section 2	63A (with respect	to		Yes	No
b Other costs (attach schedule)			property prod	luced or ac	quired for resale) a	ipply to			
5 Total Add lines 1 through 4h	5		the organizati						
Schedule C - Rent Income ((see instructions)	From Real	Property and	l Personal Pro	perty L	eased With	Real Prope	erty)		
. Description of property									
(1)									
(2)									
(3)									
(4)									
	2. Rent receiv	ed or accrued			2/a) Dad	untione directly or	onnected with the i	iocome i	n
(a) From personal property (if the perc rent for personal property is more 10% but not more than 50%)	than	i or rent for p	nd personal property (if the ersonal property exceed it is based on profit or in-	S 50% OF 11	9 3(4)1340	columns 2(a) and	2(b) (attach schedu	ıle)	
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.				
c) Total income. Add totals of columns 2 nere and on page 1, Part I, line 6, column						eductions. Id on page 1, column (8)	>		0.
Schedule E - Unrelated Deb	t-Finance	l Income (see	instructions)						
				.	3. Deduction	ons directly conne to debt-financed	cted with or allocal property	ble	
1. Description of debt-fin	anced property		Gross income or allocable to c financed proper	lebt-	(a) Straight line of (attach sch	lepreciation	(b) Other deductions (attach schedule)		is
(1)									
(2)									
(3)									
(4)									
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or debt-fin	e adjusted basis allocable to anced property th schedule)	6. Column 4 div		7. Gross in reportable (c 2 x colum	olumn	8, Allocabl (column 6 x to 3(a) a		
(1)				%					
(2)				%					
(3)				%					
(4)				%					
1					Enter here and Part I, line 7, c	,	Enter here an Part I, line 7,		
Totals				⊳ İ		0.			0,
Total dividends-received deductions in								-	0.

			ļ	Exempt C	ontrolled O	rganizatio	ns	r			
1. Name of controlled organization	on	2. Emp identific numb	ation	3. Net unrel (loss) (see ii	ated income nstructions)		of specified ents made	includ	t of column 4 to ed in the contra ation's gross in	olling	Deductions directly connected with income in column 5
exempt Controlled Organiz	ations					<u> </u>					
7. Taxable Income	8. Netur	related incom		9, Total o	f specified pay	ments	0. Part of colu	mn 9 tha	t is included		uctions directly connecte
	(Se	e instructions	,		made		gros	s income			
							Add colu Enter here and line 8,		1, Parti,	Enter he	d columns 6 and 11, are and on page 1, Part I, ine 8, column (B).
als <u>.</u>						▶			0.		0
hedule G - Investme		ne of a S	Section	501(c)(7	'), (9), or	(17) Org	ganizatio	n			
1, Descr	iption of inco	me			2. Amount o	Income	3. Deduction directly connuctation (attach sche	ected	4. Set-asides (attach schedule)		5. Total deduction and set-asides (col. 3 plus col. 4)
					Enter here and	on page 1			L		Enter here and on pag
					Part I, line 9, o						Part I, line 9, column (E
als						0.					
chedule I - Exploited (see instru		Activity	Incom	e, Other	Than A	dvertisir	ng Incom	е		•	
Description of exploited activity	2. G	e from	directly of with pro of uni	penses connected oduction related is income	4. Net inco- from unrelate business (c minus colun gain, compu throug	d trade or olumn 2 nn 3), If a te cols, 5	5. Gross inc from activity is not unrel business inc	that ated	6. Exp attribut colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
)											
)											
)											
)	page 1	re and on , Part I, col. (A).	page '	ere and on 1, Part I, , col. (B).				<u> </u>		,	Enter here and on page 1, Part II, line 28.
als >	L	0.		0.							
chedule J - Advertisi	ng Inco	me (see i	nstructio	ns)	a a li d'a t'a	d Desis					
art I Income From	Periodic	als Rep	orted o	n a Con	solidated	basis					
1. Name of periodical	1	2. Gross advertising income		3. Direct vertising costs	or (loss) (col. 3). If a	rtising gain col. 2 minus gain, comput through 7.	5. Circul e incom		6. Read cos		7. Excess readershi costs (column 6 minu column 5, but not mo than column 4).
)											
)									<u> </u>		
3)											
					1 .						
)											
tals (carry to Part II, line (5))	•		0.	n							
tais (Garry to mart 11, line (3))			<u>~ • 1 </u>		<u>•</u> 1				1		Form 990-T (20

Form 990-1	(2018)	CENTRE	COUNTY	COMMUNITY	FOUNDATION,	INC.	<u> 25-17821</u>
Part II	Inco	me From F	'eriodicals	Reported on a	Separate Basis (Fo	r each periodi	cal listed in Part II, fill in

columns 2 through 7 on a line-by-line basis.) 7. Excess readership costs (column 6 minus column 5, but not more than column 4). 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. 2. Gross 6. Readership costs 3. Direct Circulation advertising income 1. Name of periodical income advertising costs (1) (2) (3) (4) 0. 0. ▶ 0. Totals from Part I Enter here and Enter here and on page 1, Part I, line 11, col. (A). Enter here and on page 1, Part I, line 11, col. (B). on page 1, Part II, line 27. 0. Totals, Part II (lines 1-5)

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)

Form 990-T	Description	of Organization's	Primary	Unrelated	Statement	1
	-	Business Activi	ty			

INVESTMENTS IN LIMITED PARTNERSHIPS

To Form 990-T, Page 1

Form 990-T Income (Loss) from Partnerships	Statement 2
Description	Net Income or (Loss)
TIFF KEYSTONE FUND - Ordinary Business Income (loss) TIFF KEYSTONE FUND - Net Rental Real Estate Income TIFF KEYSTONE FUND - Other Net Rental Income (loss) TIFF KEYSTONE FUND - Interest Income TIFF KEYSTONE FUND - Dividend Income TIFF KEYSTONE FUND - Royalties TIFF KEYSTONE FUND - Other Portfolio income (loss) TIFF KEYSTONE FUND - Other income (loss) COMMONFUND CAP. PART. V - Ordinary Business Income (loss) COMMONFUND CAP. PART. V - Dividend Income COMMONFUND CAP. PART. V - Dividend Income COMMONFUND CAP. PART. V - Other Portfolio income (loss) COMMONFUND CAP. PART. V - Other income (loss) COMMONFUND CAP. PART. V - Other income (loss) COMMONFUND CAP. PART. VI - Ordinary Business Income (loss) COMMONFUND CAP. PART. VI - Net Rental Real Estate Income COMMONFUND CAP. PART. VI - Other Net Rental Income (loss) COMMONFUND CAP. PART. VI - Interest Income COMMONFUND CAP. PART. VI - Dividend Income COMMONFUND CAP. PART. VI - Other Portfolio income (loss) COMMONFUND CAP. PART. VI - Other Portfolio income (loss) COMMONFUND CAP. PART. VI - Other income (loss) COMMONFUND CAP. PART. VI - Other income (loss) COMMONFUND CAP. PART. VI - Other income (loss)	-1,5432,0498,128. 148. 115. 27. 612591,020. 147. 34. 4. 9. 5402,676. 245. 47. 74. 94. 315.
(loss) COMMONFUND CAP. PART. VII - Net Rental Real Estate Income	33. 2.
Total Included on Form 990-T, Page 1, line 5	-13,716.

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.

Name

Employer identification number

CENTRE COUNTY COMMI		25-1782197			
Part I Short-Term Capital Gai	ns and Losses (See	instructions.)		<u></u> .	T
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost (or other basis)	(g) Adjustments to gai or loss from Form(s) 894 Part I, line 2, column (g	n 9, \	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(Or Other Dasis)	7 at 1, mie 2, column (g	·/	CONTRACTOR AND TODAY WHEN CONTRACTOR (S)
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					107.
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 3	37		4	
5 Short-term capital gain or (loss) from like-kind				5	
6 Unused capital loss carryover (attach computa				6	()
7 Net short-term capital gain or (loss). Combine				7	107.
Part II Long-Term Capital Gain					
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(0) Adjustments to ga or loss from Form(s) 894	in In	(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 II, line 2, column (9)	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					9,069.
				11	1,517.
12 Long-term capital gain from installment sales	from Form 6252, line 26 or	37	***************************************	12	
13 Long-term capital gain or (loss) from like-kind	l exchanges from Form 8824	1		13	
14 Capital gain distributions			***************************************	14	
15 Net long-term capital gain or (loss). Combine		<u>nn h</u>		15	10,586.
Part III Summary of Parts I and		tal laga (line 45)		16	107.
16 Enter excess of net short-term capital gain (lir				17	10,586.
17 Net capital gain. Enter excess of net long-term				18	10,693.
18 Add lines 16 and 17. Enter here and on Form Note: If losses exceed gains, see Capital loss		noper and on other retains.		_ 10	107033.

JWA

Department of the Treasury Internal Revenue Service

Sales and Other Dispositions of Capital Assets

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

OMB No. 1545-0074

Name(s) shown on return

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 no.

25-<u>1782197</u> CENTRE COUNTY COMMUNITY FOUNDATION, Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check. Part I Short-Term. Transactions involving capital assets you held 1 year or less are 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) (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, if you enter an amount (h) (d) (e) Gain or (loss). Proceeds Cost or other Date acquired Date sold or Description of property in column (g), enter a code in Subtract column (e) (sales price) basis. See the disposed of (Example: 100 sh. XYZ Co.) (Mo., day, yr.) column (f). See instructions. from column (d) & Note below and (Mo., day, yr.) (g) Amount of combine the result see Column (e) in Code(s) with column (g) the instructions adjustment COMMONFUND CAPITAL PARTNERS V, 151. LP-COMMON COMMONFUND CAPITAL PARTNERS VI, LP-COMMO 2 Totals, Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked)

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 page 1

X (F) Long-term transactions not reported to you on Form 1099-B

Social security number or taxpayer identification no.

CENTRE	COUNTY	COMMUNITY	FOUNDATION,	INC.		<u> 25-1782197</u>
you check Ro	vD F or Fhe	low see whether you	received any Form(s)	1099-B or sub	stitute statement(s) from yo is (usually your cost) was re	our broker. A substitute ported to the IRS by your

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

	(Mo., day, yr.)	Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see Column (e) in the instructions	l in column	t, if any, to gain or ou enter an amount (g), enter a code in . See instructions. (g) Amount of adjustment	(h) Gain or (loss). Subtract column (e) from column (d) & combine the result with column (g)
TTER KRYGGOVE						adjustmont	
TIFF KEYSTONE							
FUND, LP-TIFF							128.
KEYSTONE FUN							
COMMONFUND CAPITAL	/						
PARTNERS V,							6,002.
LP-COMMON					ļ		
COMMONFUND CAPITAL	1						
PARTNERS VI,							2,936.
LP-COMMO							
COMMONFUND CAPITAL	1						
PARTNERS VII,							3.
LP-COMM							
					 		
					İ		
					 		
					-		
					-		
	<u> </u>						
	<u> </u>				 		
					-	<u> </u>	
						<u> </u>	
	 	 					
					 		
2 Totals. Add the amounts in colunegative amounts). Enter each to Schedule D, line 8b (if Box D above is checked), or line 10 (if	otal here and inc oove is checked),	lude on your line 9 (if Box E					9,069.

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.

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

Attach to your tax return.

Attachment Sequence No. 27

Department of the Treasury Internal Revenue Service Name(s) shown on return

➤ Go to www.irs.gov/Form4797 for instructions and the latest information.

Identifying number

¬EN	TRE COUNTY COMMUNI			25-17821 <u>97</u>				
	er the gross proceeds from sales or				099-B or 1099-S			
	substitute statement) that you are it	ncluding on line 2	2. 10. or 20				1	
Par	Sales or Exchanges	of Property	Used in a Tr	ade or Busine	ss and Involui	ntary Con	versi	ons From
	Other Than Casualty	or Theft-Mo	ost Property	Held More Th	i an 1 Year (see	instructions)		
2	(a) Description of property			(d) Gross sales price	(6) Depreciation allowed or allowable since acquisition	(f) Cost or of basis, plu improvements expense of	s and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
See	Statement 3		<u> </u>			<u> </u>	r——	1,517.
	Gain, if any, from Form 4684, line 39						3	
	Section 1231 gain from installment						4	
	Section 1231 gain or (loss) from like						5	
	Gain, if any, from line 32, from other						6	4 548
7	Combine lines 2 through 6. Enter th	e gain or (loss) h	ere and on the a	appropriate line as	follows		7	1,517.
	Partnerships and S corporations. line 10, or Form 1120S, Schedule K	Report the gain	or (ioss) followin s 8, 9, 11, and 1	g the instructions 2 below.	for Form 1065, Sc	hedule K,		: .
	Individuals, partners, S corporation				a loss, enter the a	mount		
	from line 7 on line 11 below and ski 1231 losses, or they were recapture the Schedule D filed with your retur	p lines 8 and 9. I ed in an earlier ye	f line 7 is a gain ear, enter the ga	and you didn't hav in from line 7 as a	∕e any prior year s	ection		
	Nonrecaptured net section 1231 lo						8	
8	Subtract line 8 from line 7. If zero o	sses irom phor y	tino O io zoro o	otor the gain from	line 7 on line 19 he	alow If		· · · · · · · · · · · · · · · · · · ·
9	line 9 is more than zero, enter the a	mount from line	g on line 12 held	nter the gain hom w and enter the σ	ain from line 9 as a	long-term		
	capital gain on the Schedule D filed						9	1,517.
Par	t II Ordinary Gains and	Losses (see in	structions)					
10	Ordinary gains and losses not inclu	ded on lines 11 t	hrough 16 (inclu	ide property held	i year or less):			
							.	
11	Loss, if any, from line 7				**************************		11	()
12	Gain, if any, from line 7 or amount f	rom line 8, if app	licable		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		12	·
13	Gain, if any, from line 31						13	
14	Net gain or (loss) from Form 4684,	lines 31 and 38a		,	***************************************		14	
15	Ordinary gain from installment sale						15	
16	Ordinary gain or (loss) from like-kind						16	
17	Combine lines 10 through 16						17	
18	For all except individual returns, en	ter the amount f	rom line 17 on th	ne appropriate line	of your return and	l skip lines		
,0	a and b below. For individual return						1	
а	If the loss on line 11 includes a los	s from Form 468	4, lìne 35, colum	n (b)(ii), enter that	part of the loss he	re. Enter		
u	the loss from income-producing pro-	operty on Sched	ule A (Form 104	0), line 16. (Do not	include any loss o	n property		1
	used as an employee.) Identify as f	rom "Form 4797	, line 18a." See i	nstructions	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		18a	
b	Redetermine the gain or (loss) on li	ne 17 excluding	the loss, if any,	on line 18a. Enter l	here and on			
~	Schedule 1 (Form 1040), line 14						18b	<u> </u>
	F Developed Deduction Act							Form 4797 (2018)

LHA For Paperwork Reduction Act Notice, see separate instructions.

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 13							(c) Date sold
9 (a) Description of section 1245, 1250, 1252, 1254, o		(b) Date acquir (mo., day, yr.		(mo., day, yr.)			
A							
В							
C							
D							
These columns relate to the properties on lines 19A through 19D.	>	Property A	Property E	3	Property	С	Property D
O Gross sales price (Note: See line 1 before completing.)	20						
Cost or other basis plus expense of sale	21						
Depreciation (or depletion) allowed or allowable	22						
3 Adjusted basis. Subtract line 22 from line 21	23						
4 Total gain. Subtract line 23 from line 20	24						
5 If section 1245 property:							
a Depreciation allowed or allowable from line 22	25a						
b Enter the smaller of line 24 or 25a	25b						
If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.				ļ			
a Additional depreciation after 1975. See instructions	26a						
b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b						
c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
d Additional depreciation after 1969 and before 1976	26d						
e Enter the smaller of line 26c or 26d	26e						
f Section 291 amount (corporations only)	26f		<u> </u>				
g Add lines 26b, 26e, and 26f	26g						
27 If section 1252 property; Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.							
a Soil, water, and land clearing expenses	27a						
b Line 27a multiplied by applicable percentage	27b						
c Enter the smaller of line 24 or 27b	27c						
28 If section 1254 property: a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
b Enter the smaller of line 24 or 28a	28b						
29 If section 1255 property: a Applicable percentage of payments excluded from income under section 126. See instructions	200						
from income under section 126. See instructions	29a						
b Enter the smaller of line 24 or 29a. See instructions	29b					£.	
Summary of Part III Gains. Complete property	columns	A through D through	h line 29b before	going	to line 30.		
30 Total gains for all properties. Add property columns	s Δ thro	uch D. line 24				30	
Total gains for all properties. Add property columns	371110	ugn o,			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
31 Add property columns A through D, lines 25b, 26g	. 27c. 28	3b. and 29b. Enter h	ere and on line 1:	3		31	
32 Subtract line 31 from line 30. Enter the portion from	n casua	ity or theft on Form	4684, line 33. Ent	er the p	portion		
a di di la la la la la la la Carra 4707 lin	~ C					32	
Part IV Recapture Amounts Under Secti	ons 17	79 and 280F(b)(2	2) When Busi	ness	Use Drops	to 50%	6 or Less
(see instructions)							
					(a) Section	on	(b) Section
					179		280F(b)(2)
33 Section 179 expense deduction or depreciation all	33 34						
34 Recomputed depreciation. See instructions	34 Recomputed depreciation, See instructions						
5 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report							- 4707 (or

Form 4797	Proj	perty Hel	.d More tha	n One Year	Statement 3		
Description	Date Acquired	Date Sold	Sales Price	Depr.	Cost or Basis	Gain or Loss	
TIFF KEYSTONE FUND, LP-TIFF KEYSTONE FUN COMMONFUND						1,385.	
CAPITAL PARTNERS V, LP-COMMON COMMONFUND						-36.	
CAPITAL PARTNERS VI, LP-COMMO						168.	
Total to 4797, Pa	rt I, line	2				1,517.	