Form **990-T** 

# Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No. 1545-0687

		For cale	ndar year 2016 or other tax year begi	nning _	, 20	16, aı	nd endii	ng06/30	, 20 <u> </u>		2(0) <b>16</b>
	rtment of the Treasury		formation about Form 990-T and					•	- 1	Onen t	o Public Inspection for
nterr	nal Revenue Service	<b>▶</b> Do	not enter SSN numbers on this form		· · · ·				`,'`	501(c)(	3) Organizations Only tification number
<b>A</b> L	Check box if address changed		Name of organization ( Check I	oox if nar	ne changed and	see ins	struction	S.)			see instructions.)
R F	cempt under section		CALIFORNIA ACADEMY	OF S	CIENCES						
_	501( C )( 3 )	Print	Number, street, and room or suite no.			tions.			→   94-1	15625	8
	408(e) 220(e)	or			,				E Unre	lated busi	ness activity codes
	408A 530(a)	Туре	55 MUSIC CONCOURSE	DRIV	E				(See i	nstructions.)	
	529(a)		City or town, state or province, count	try, and Z	IP or foreign post	tal cod	le				
	ook value of all assets		SAN FRANCISCO, CA 9	4118					5259	90	
at	end of year	<b>F</b> Gro	up exemption number (See instruc	tions.)	>						
	17,491,395.		eck organization type 🕨 🛛 🗓 50				501(c		401(a)	trust	Other trust
			rimary unrelated business activity.								
	-		corporation a subsidiary in an aff	-		t-subs	sidiary o	controlled grou	p?	▶	Yes X No
			identifying number of the parent of	orporation	on. 🕨				415 250	F120	
	he books are in care				(4) 1		elephon	e number >		-5139 T	(0) 11 (
			or Business Income		(A) Inc	ome		(B) Exp	enses		(C) Net
	Gross receipts or		a Dalamaa N								
b			c Balance								
2			ule A, line 7)								
3			2 from line 1c attach Schedule D)		7	78,3	71.				78,371.
4a b			Part II, line 17) (attach Form 4797)	- 1	,	0,5	, ,				70,371.
с 5			rusts ps and S corporations (attach statement		-10	)5,5	27.	ATCH	1		-105,527.
6	, ,		ps and 3 corporations (attach statement	′ <del>                                      </del>		, , , ,		AICII			100,01.
7			come (Schedule E)								
8			nts from controlled organizations (Schedule F								
9			1(c)(7), (9), or (17) organization (Schedule G	· .							
10			ncome (Schedule I)	′ <del>-</del>							
11			dule J)								
12			ctions; attach schedule)								
13			ough 12	$\overline{}$	-2	27,1	56.				-27,156.
			Taken Elsewhere (See ins		ns for limita	ation	s on d	eductions.)	(Except	for con	tributions,
			be directly connected with					,	` '		,
14			directors, and trustees (Schedule k						14		
15	Salaries and wage	es							15		
16	Repairs and main	tenance							16		
17											
18	Interest (attach so	chedule)							18		
19	Taxes and license	s							19		777.
20			See instructions for limitation rules)			ı			20		
21			4562)								
22			on Schedule A and elsewhere on				•		22k	)	
23											
24			compensation plans								
25			s								
26			Schedule I)								
27	Excess readership	costs (S	chedule J)						27		0 100
28			schedule)								8,100.
29			s 14 through 28								8,877.
30			ole income before net operating								-36,033.
31			on (limited to the amount on line 3								-36,033.
32			e income before specific deduction								-30,033.
33			ally \$1,000, but see line 33 instru								
34	enter the smaller		ble income. Subtract line 33 f	iom IIr	ie 3∠. IT line	<b>33</b>	is grea	iler inan line	32,		-36,033.
	emerine smaller	പാലവാന	WIE 37						1.31	1	20,022.

## Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

# Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

	cts, for which an extension request must be sent to this form, visit www.irs.gov/efile, click on Charities						electronic				
Autom	natic 6-Month Extension of Time. Only subn	nit origina	l (no copies neede	ed).							
	porations required to file an income tax return othe se Form 7004 to request an extension of time to fil			120-C filers), partners  Enter filer's identifying							
Typo o	Name of exempt organization or other filer, see in	structions.		Employer identification							
Type o print	CALIFORNIA ACADEMY OF SCIENCES			94-1156258							
	Number, street, and room or suite no. If a P.O. bo		uctions.	Social security number	(SSN)	)					
File by the due date											
filing you		a foreign a	ddress, see instruction	S.							
return. Se nstructio	ee										
Enter th	ne Return Code for the return that this application i	is for (file a	separate application	n for each return) .			07				
Applic Is For		Return Code	Application Is For				Return Code				
	990 or Form 990-EZ	01	Form 990-T (corpo	ration)			07				
	990-BL	02	Form 1041-A	rationy			08				
	4720 (individual)	03	Form 4720 (other than individual)				09				
	990-PF	04	Form 5227		10						
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11				
	990-T (trust other than above)	06	Form 8870				12				
If the If this for the	hone No. ► (415) 379-5139  organization does not have an office or place of but is for a Group Return, enter the organization's fout whole group, check this box ► □ . If it ith the names and EINs of all members the extensions.	usiness in ir digit Gro it is for par	the United States, ch up Exemption Numb	er (GEN)		 If thi	is is				
			MAY 15 20	10 to file the exemp	t orac	nization	roturn				
	I request an automatic 6-month extension of time for the organization named above. The extension i				t orga	ariizatiori	returri				
	<ul> <li>Calendar year 20 or</li> <li>X tax year beginning JULY 1</li> <li>If the tax year entered in line 1 is for less than 12 n</li> <li>Change in accounting period</li> </ul>	, 20	16, and ending	JUNE 30		, 20	<u>17</u>				
	If this application is for Forms 990-BL, 990-PF, 9	990-T, 472	0, or 6069, enter the	e tentative tax, less							
	any nonrefundable credits. See instructions.				За	\$	NONE				
	If this application is for Forms 990-PF, 990-T, a estimated tax payments made. Include any prior y				3b	\$	NONE				
	· FETDO (FL. ) · F. J. J.T. D										
				200 Form 9452 FO ====		\$ 9970 EO	NONE				
nstructi	u: If you are going to make an electronic funds withdrawa ons.	ii (direct deb	ny with this Form 8868.	, see roiii o455-eO and	rorm	1 00/ 9-EU	ioi payment				

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2017)

Page 2

Par	t III	Fax Computation			
35	Organi	ations Taxable as Corporations. See instructions for tax computation. Controlled group			
	member	(sections 1561 and 1563) check here ▶ See instructions and:			
а	Enter yo	ur share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):			
	(1) \$	(2) \$ (3) \$			
b	Enter or	panization's share of: (1) Additional 5% tax (not more than \$11,750)			
		onal 3% tax (not more than \$100,000)			
С	Income	ax on the amount on line 34	ic		
36	Trusts	Taxable at Trust Rates. See instructions for tax computation. Income tax on			
	the amo	int on line 34 from: Tax rate schedule or Schedule D (Form 1041)	8		
37	Proxy ta	c. See instructions	7		
38	Alternat	ve minimum tax	8		
39		lon-Compliant Facility Income. See instructions	9		
40		d lines 37, 38 and 39 to line 35c or 36, whichever applies	0		
		Tax and Payments			
	•	ax credit (corporations attach Form 1118; trusts attach Form 1116).			
		edits (see instructions)			
С	General	business credit. Attach Form 3800 (see instructions)			
		r prior year minimum tax (attach Form 8801 or 8827)			
		dits. Add lines 41a through 41d			
42		line 41e from line 40			
43		s. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule) .			0.
44		Add lines 42 and 43	4		<u> </u>
		s: A 2015 overpayment credited to 2016			
		imated tax payments			
		sited with Form 8868			
	•	The second secon			
	-	vithholding (see instructions)			
		Communication ( manufacture )			
9		edits and payments:			
46		/ments. Add lines 45a through 45g	6		
47		d tax penalty (see instructions). Check if Form 2220 is attached.			
48		If line 46 is less than the total of lines 44 and 47, enter amount owed	8		
49		ment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	9		
50		amount of line 49 you want: Credited to 2017 estimated tax   Refunded 5	0		
Par	t V	Statements Regarding Certain Activities and Other Information (see instructions)			
51	At any	time during the 2016 calendar year, did the organization have an interest in or a signature or oth	ner 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 fore	eign country		
	here 🕨	MADAGASCAR		X	
52	During t	e tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign t	trust?		Х
	If YES, s	e instructions for other forms the organization may have to file.			
53		e amount of tax-exempt interest received or accrued during the tax year ▶ \$			
	tru	er penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	of my knowledge	and bel	lief, it is
Sig	ו ו	May t	he IRS discuss	this	return
Her			the preparer sh		_
	Si		tructions)? X Ye	es	No
Paid	1	Print/Type preparer's name  Preparer's signature  Date  Check  MATTHEW PETROSKT  05/08/2018 self-employers	if PTIN	F 2 4 2	
	arer	Self-emplo			5 4
	Only	A TURNE TARREST CONTENT CAN EDITION OF A 1111	<b>13-4008</b>		10
		Firm's address ▶ THREE EMBARCEDERO CENTER,, SAN FRANCISCO, CA 94111   Phone no.	415-498	-500	ı U

Form	990-T (2016)								Page 3
Sch	edule A - Cost of Go	ods Sold	. Enter method	d of invent	ory valuation	<b>&gt;</b>			
1	Inventory at beginning of y						ar	6	
2	Purchases						ld. Subtract line		
3	Cost of labor						iter here and in		
4 a	Additional section 263A co				Part I, line	2		7	
	(attach schedule)	4a					section 263A (w		Yes No
b	Other costs (attach schedu	· · · <del>                                </del>					or acquired for	•	
	Total. Add lines 1 through	· · -							N/A
	edule C - Rent Income ee instructions)	(From Re	al Property a	nd Perso	nal Property	Leased V	Vith Real Prope	rty)	
1. De	scription of property								
(1)									
(2)									
(3)									
(4)									
,		2. Rent i	eceived or accru	ed					
	From personal property (if the for personal property is more th more than 50%)		percent	age of rent fo	personal property or personal property based on profit or	y exceeds		irectly connected with (a) and 2(b) (attach sch	
(1)									
(2)									
(3)									
(4)									
Total			Total				(h) Total doductio		
	otal income. Add totals of co and on page 1, Part I, line 6	` ,	` '				(b) Total deduction Enter here and or Part I, line 6, colur	n page 1,	
Sch	edule E - Unrelated De	ebt-Financ	ed Income (se	e instructi	ons)				
	1. Description of deb	ot-financed prope	erty	1	income from or to debt-financed		Deductions directly cor debt-finance	ced property	
				р	roperty		nt line depreciation ach schedule)	(b) Other dedu (attach sched	
(1)									
(2)									
(3)									
(4)									
	Amount of average     acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	e adjusted basis allocable to nced property n schedule)	4	Column divided column 5		income reportable n 2 x column 6)	8. Allocable ded (column 6 x total c 3(a) and 3(l	of columns
(1)					%				
(2)					%				
(3)					%				
(4)					%				
							e and on page 1, e 7, column (A).	Enter here and of Part I, line 7, co	
Total Total	s dividends-received deduct	ions included	in column 8		<u>.</u>	<u> </u>			

Page 4

Schedule F - Interest, Annu	uities, Royalties				m Contro ntrolled Or			ons (see	instruction	ons)	
Name of controlled organization	2. Employer identification numb		3. Net unrelated income (loss) (see instructions)		4. Total	of specified ents made	included	f column 4 the in the control	olling	6. Deductions directly connected with income in column 5	
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organi	zations										
7. Taxable Income	8. Net unrelated in (loss) (see instruc				otal of specifi ayments made		include	t of column ed in the co ation's gros	ntrolling		Deductions directly nnected with income in column 10
(1)											
(2)											
(3)											
(4)											
Totals		tion !	501(c	)(7).	 (9). or (17	<u>►</u>	Enter I Part I	columns 5 a nere and on line 8, colu	page 1, mn (A).	En	dd columns 6 and 11. ter here and on page 1, art I, line 8, column (B).
1. Description of income	2. Amount of			,,- ,,-	3. Deduction directly contact (attach sci	ctions nnected		<b>4.</b> Se	t-asides schedule)		5. Total deductions and set-asides (col. 3 plus col. 4)
(1)											
(2)											
(3)											
(4)											
Totals .	Enter here and Part I, line 9, c										Enter here and on page 1 Part I, line 9, column (B)
Schedule I - Exploited Exc	amnt Activity In	come	Othe	r Th	an Advert	isina Ir	come (s	oo instru	ections)		
Schedule 1 - Exploited Ex	empt Activity in		Expense		4. Net incor	me (loss)		ee mstru	Clions)		7. Excess exempt
1. Description of exploited activity	2. Gross unrelated business income from trade or business	conr pro u	directly nected valuetion nrelated ness inco	vith of	from unrela or business 2 minus co If a gain, c cols. 5 thre	(column lumn 3). ompute	from ac	s income tivity that inrelated s income	6. Expe attributa colum	able to	expenses (column 6 minus column 5, but not more than column 4).
(1)											
(2)											
(3)											
(4)											
Totals	Enter here and on page 1, Part I, line 10, col. (A).	pag	here an e 1, Par 10, col.	t I,			ı				Enter here and on page 1, Part II, line 26.
Schedule J - Advertising In	ncome (see instr	uctions	;)								
Part I Income From Per				nsoli	dated Ba	sis					
incomo i rom i ci		.ou o	<u>u 00</u>			0.0					
1. Name of periodical	2. Gross advertising income		. Direct rtising c		4. Adver gain or (los 2 minus c a gain, co cols. 5 three	ss) (col. ol. 3). If empute	1	culation ome	6. Reade		7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)											
(2)											
(3)											
(4)											
Totals (carry to Part II, line (5))											

### 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.)

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

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			

Name

Department of the Treasury Internal Revenue Service

**Alternative Minimum Tax—Corporations** 

► Attach to the corporation's tax return.

▶ Information about Form 4626 and its separate instructions is at www.irs.gov/form4626.

OMB No. 1545-0123

Employer identification number CALIFORNIA ACADEMY OF SCIENCES 94-1156258 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). 1 1 (36,033)2 Adjustments and preferences: 2a 29 2b 2c Amortization of circulation expenditures (personal holding companies only) . . . . 2d 2e 2f f 2g Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only) . . . 2h Tax shelter farm activities (personal service corporations only) . . . . . . . . . . . . . . . . . . 2i i i Passive activities (closely held corporations and personal service corporations only) . . . . . . 2i 2k 21 Tax-exempt interest income from specified private activity bonds . . . . . . . . . . . . . . . . . . 2m 2n 52 20 (35,952)3 Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20 . . . . Adjusted current earnings (ACE) adjustment: ACE from line 10 of the ACE worksheet in the instructions . . . . . . . . . . . . (35,952)Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a 4b 0 Multiply line 4b by 75% (0.75). Enter the result as a positive amount. . . . . 0 4c Enter the excess, if any, of the corporation's total increases in AMTI from prior year ACE adjustments over its total reductions in AMTI from prior year ACE adjustments. See instructions. Note: You must enter an amount on line 4d 4d ACE adjustment. • If line 4b is zero or more, enter the amount from line 4c 4e 0 • If line 4b is less than zero, enter the **smaller** of line 4c or line 4d as a negative amount Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT . . . . (35,952)5 5 6 6 7 Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a residual 7 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- . . . . . . . . . Exemption. Subtract line 8b from \$40,000 (if completing this line for a member of a controlled group, 8c 9 9 10 10 Alternative minimum tax foreign tax credit (AMTFTC). See instructions . . . . . . . . . . . . . . . 11 11 12 12 Regular tax liability before applying all credits except the foreign tax credit . . . . . . . . . . . . . . . . 13 13 14 Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0-. Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return . . . 14

### **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.

▶ Information about Schedule D (Form 1120) and its separate instructions is at www.irs.gov/form1120.

OMB No. 1545-0123

Employer identification number CALIFORNIA ACADEMY OF SCIENCES 94-1156258

Short-Term Capital Gains and Losses - Assets Held One Year or Less

rait	Short-Term Capital Gains and Losses	s - Assets Held Ol	ie rear or Less			
	See instructions for how to figure the amounts to enter on the lines below.  This form may be easier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to or loss from Form 8949, Part I, line	(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine
	whole dollars.	(Sales price)	(Or Other basis)	column (g)		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					
1 b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked					
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					4,334.
						· ·
4	Short-term capital gain from installment sales from	Form 6252, line 26 or 3	7		4	
5	Short-term capital gain or (loss) from like-kind excha	nges from Form 8824			5	
6	Unused capital loss carryover (attach computation)				6	( )
-	Net about town and tall asia as (leas). Combine line	4 - th	L		_	4,334.
	Net short-term capital gain or (loss). Combine lines	1a through 6 in column	n		7	4,334.
Part	·	s - Assets Heid ivid	ore Than One Yea			(h) O-in -n (l)
	See instructions for how to figure the amounts to enter on the lines below.	<b>(d)</b> Proceeds	(e) Cost	(g) Adjustments to or loss from Form		(h) Gain or (loss) Subtract column (e) from
	This form may be easier to complete if you round off cents to whole dollars.	2,	column (d) and combine the result with column (g)			
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for 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					
	Totals for all transactions reported on Form(s) 8949					
	with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949					
	with Box F checked					62,704.
11	Enter gain from Form 4797, line 7 or 9				11	11,333.
12	Long-term capital gain from installment sales from F	Form 6252, line 26 or 3	7		12	
13	Long-term capital gain or (loss) from like-kind exchar	nges from Form 8824			13	
14	Capital gain distributions (see instructions)				14	
15	Net long-term capital gain or (loss). Combine lines 8	15	74,037.			
Part		a tin bugit i i in bolumi	···			1 2 7 2 2
ı arı	Janimary or Farts Faria II					
16	Enter excess of net short-term capital gain (line 7) of	16	4,334.			
4-	Not conitel gain. Enter evenes of anti-service	tal gain (line 45)	ot abort tarm a==!t=!	o (line 7)		7/ 027
17	Net capital gain. Enter excess of net long-term capi				17	74,037.
18	Add lines 16 and 17. Enter here and on Form 1120 the corporation has qualified timber gain, also complete.				18	78,371.
	Note: If losses exceed gains, see Capital losses in the	e instructions.				
For Pa	aperwork Reduction Act Notice, see the Instruction	s for Form 1120				Schedule D (Form 1120) 2016

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

Schedule D (Form 1120) 2016

### Sales and Other Dispositions of Capital Assets

▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. 12A

OMB No. 1545-0074

Name(s) shown on return CALIFORNIA ACADEMY OF SCIENCES Social security number or taxpayer identification number

94-1156258

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 short term. 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 r	not reported t	o you on For	m 1099-B				
(a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> below	If you enter an a enter a co	any, to gain or loss. amount in column (g), de in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
FROM SCHEDULE K-1 (FORM 1065)							2,874
FORM 6781, PART I							1,460
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 1b (if Box A above above is checked) or line 3 (if Box C ab	here and incl is checked), <b>line</b>	ude on your e 2 (if Box B					4,334

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.

Form 8949 (2016)

Form 8949 (2016) Attachment Sequence No. 12A Page 2

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side

CALIFORNIA ACADEMY OF SCIENCES

Social security number or taxpayer identification number

94-1156258

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 <b>Note</b> above)
	(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
X	(F) Long-term transactions not reported to you on Form 1099-B

(a)  Description of property	(b) Date acquired	(c) Date sold or disposed	(d) Proceeds (sales price)	(e) Cost or other basis. See the Note below and see Column (e)	Adjustment, if a If you enter an a enter a co See the sepa	(h) Gain or (loss). Subtract column (e) from column (d) and	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	(Mo., day, yr.)	(see instructions)	in the separate instructions	(f) (g) Code(s) from Amount of adjustment		combine the result with column (g)
FROM SCHEDULE K-1 (FORM 1065)							60,513.
FORM 6781, PART I							2,191.
_							
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 Box	here and including the second in the second	de on your 9 (if Box E					62,704.

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.

JSA 6X2616 2.000 Form **8949** (2016)

Form **4797** 

### Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

► Attach to your tax return.

OMB No. 1545-0184

Attachment Sequence No. **27** 

Department of the Treasury Internal Revenue Service ► Information about Form 4797 and its separate instructions is at www.irs.gov/form4797.

Name(s) shown on return

CALIFORNIA ACADEMY OF SCIENCES

Identifying number
94-1156258

### Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year (see instructions) (e) Depreciation (f) Cost or other (a) Gain or (loss) 2 (b) Date acquired (c) Date sold allowed or basis, plus Subtract (f) from the of property (mo., day, yr.) sales price allowable since improvements and sum of (d) and (e) acquisition expense of sale 11,333. ATTACHMENT 3 4 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 5 11,333. 7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: . . . . Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): Loss, if any, from line 7............. 11 12 12 13 13 14 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 15 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below: a If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a." 18a 18b b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 14

For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2016)

94-1156258 Form 4797 (2016) Page 2

Pa	Gain From Disposition of Property (see instructions)	/ Un	der Sections 124	5, 1250, 1252,	12	54, and 1255		
19	(a) Description of section 1245, 1250, 1252, 1254,	or 12	55 property:			(b) Date acquired		(c) Date sold (mo.,
	A					(mo., day, yr.)	-	day, yr.)
	В						_	
	C						_	
	D						$\neg$	
	These columns relate to the properties on lines 19A through 19I	D. <b>&gt;</b>	Property A	Property B		Property C		Property D
20	Gross sales price (Note: See line 1 before completing.)	20						
21	Cost or other basis plus expense of sale	21						
	Depreciation (or depletion) allowed or allowable	22						
23	Adjusted basis. Subtract line 22 from line 21.	23						
	•							
24	Total gain. Subtract line 23 from line 20	24						
25	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.							
	a Additional depreciation after 1975. See instructions	26a						
	b Applicable percentage multiplied by the <b>smaller</b> 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						
	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 (other than an electing large partnership).							
		27a						
	b Line 27a multiplied by applicable percentage. See instructions	27b						
	c Enter the smaller of line 24 or 27b	27c						
	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							
	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	29a						
	b Enter the smaller of line 24 or 29a. See instructions.							
Su	mmary of Part III Gains. Complete propert	ty cc	lumns A through	D through line	29b	before going to	<u>line د</u>	30.
	Total gains for all properties. Add property columns A						30	
	Add property columns A through D, lines 25b, 26g, 2						31	
32	Subtract line 31 from line 30. Enter the portion from		•	•				
	other than casualty or theft on Form 4797, line 6			<u> </u>		<u> </u>	32	
Pa	Recapture Amounts Under Section (see instructions)	าร 17	79 and 280F(b)(2)	When Busine	ss l	Jse Drops to 50	)% o	r Less
						(a) Section	T	(b) Section
						179		280F(b)(2)
33	Section 179 expense deduction or depreciation allow	vable	in prior years		33			
34	Recomputed depreciation. See instructions				34			
	Recapture amount. Subtract line 34 from line 33. Se				35			
								Form <b>4797</b> (2016)

Description	Date Acquired	Date Sold	Gross Sales Price	Depreciation Allowed or Allowable	Cost or Other Basis	Gain or (Loss) for entire year
						11 222
Totals						11,333.

### Gains and Losses From Section 1256 Contracts and Straddles

Department of the Treasury

▶ Information about Form 6781 and its instructions is at www.irs.gov/form6781.

OMB No. 1545-0644

Attachment

Internal Revenue Service ► Attach to your tax return. Sequence No. 82 Identifying number Name(s) shown on tax return CALIFORNIA ACADEMY OF SCIENCES 94-1156258 A Mixed straddle election C Mixed straddle account election Check all applicable boxes (see instructions). **B** Straddle-by-straddle identification election **D** Net section 1256 contracts loss election **Section 1256 Contracts Marked to Market** Part I (a) Identification of account (b) (Loss) (c) Gain 3,651 1 FROM SCHEDULE K-1 (FORM 1065) Add the amounts on line 1 in columns (b) and (c). Net gain or (loss). Combine line 2, columns (b) and (c) . . . . 3,651 3 3 Form 1099-B adjustments. See instructions and attach statement . . . 4 4 5 3,651 Note: If line 5 shows a net gain, skip line 6 and enter the gain on line 7. Partnerships and S corporations, see instructions. If you have a net section 1256 contracts loss and checked box D above, enter the amount of loss to be 6 carried back. Enter the loss as a positive number. If you didn't check box D, enter -0- . . . . . . 6 7 7 3,651 Short-term capital gain or (loss). Multiply line 7 by 40% (0.40). Enter here and include on line 4 of Schedule 1,460 Long-term capital gain or (loss). Multiply line 7 by 60% (0.60). Enter here and include on line 11 of Schedule 2,191 9 Part II Gains and Losses From Straddles. Attach a separate statement listing each straddle and its components. Section A—Losses From Straddles (f) Loss. (e) Cost or If column (e) (g) (h) Recognized loss. (b) Date (c) Date other basis is more than Unrecognized If column (f) is more entered (d) Gross (a) Description of property closed out plus (d), enter gain on than (g), enter into or sales price difference. offsetting difference. or sold expense of acquired Otherwise, Otherwise, enter -0positions sale enter -0-10 Enter the short-term portion of losses from line 10, column (h), here and include on line 4 of Schedule D or on Form 8949 (see instructions) 11a Enter the long-term portion of losses from line 10, column (h), here and include on line 11 of Schedule D or on Form 8949 (see instructions) Section B—Gains From Straddles (b) Date (f) Gain. If column (c) Date (e) Cost or other entered (d) Gross (d) is more than (e), (a) Description of property closed out basis plus enter difference. into or sales price or sold expense of sale acquired Otherwise, enter -0-12 Enter the short-term portion of gains from line 12, column (f), here and include on line 4 of Schedule D or on 13a Enter the long-term portion of gains from line 12, column (f), here and include on line 11 of Schedule D or on Form 8949 (see instructions) Part III Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo Entry Only (see instructions) (e) Unrecognized gain. (c) Fair market value on last (d) Cost or other basis

(b) Date

acquired

business day of tax year

(a) Description of property

If column (c) is more

than (d), enter difference.

Otherwise, enter -0-

as adjusted

14

ATTACHMENT 1

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

INCOME (LOSS) FROM PARTNERSHIPS

-105,527.

INCOME (LOSS) FROM PARTNERSHIPS

-105,527.

ATTACHMENT 2

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

INCOME TAX PREPARATION FEES

8,100.

PART II - LINE 28 - OTHER DEDUCTIONS

8,100.

### FORM 990-T, NET OPERATING LOSS DEDUCTION

	INITIAL	NOL	NOL	NOL CARRYFORWARDED
FYE	LOSS	AVAILABLE	UTILIZED	TO NEXT YEAR
6/30/2016	(23,147)	(23,147)	-	(23,147)
6/30/2017	(36,033)	(36,033)	-	(36,033)
TOTAL	(59,180)	(59,180)	-	(59,180)
	NOL CARRY F	ORWARD AVAILABLE	AT 6/30/2017	(59,180)

FEIN: 94-1156258