		990-T	Ex	cempt Organization		No 1545-0687	_					
	Form	330-1	For cale	(and proxy ta) ndar year 2018 or other tax year begin					$\sum_{20} \underline{O}_{9}$	2	@18	
	Depart	tment of the Treasury		► Go to www.irs.gov/Form990								
		I Revenue Service	▶ Do	not enter SSN numbers on this form	as it ma	ay be made public if	your orga	inization is a 501(c)(3)	Open to F 501(c)(3)	Public Inspection for Organizations Only	
	A	Check box if address changed		Name of organization (Check b	ox if na	me changed and see i	nstruction	s)			cation number ee instructions)	-
	ВЕхе	empt under section	1	BRANDEIS UNIVERSITY								
	Х	501(CJU3		103552		_`						
		408(e) 220(e)	or Type					1		lated busine	ess activity code	
		408A530(a)	.,,,,,	PO BOX 9110					,366,	nstructions /		
	\perp	529(a)		City or town, state or province, countr	•	ZIP or foreign postal co	ode					
		ok value of all assets and of year		WALTHAM, MA 02454-9	110				5300	00		_
		•		up exemption number (See instruct			- ₁	·				- 4
		1588160821.		ck organization type ► X 501			501(c)	trust	401(a)	trust	Other trust	ـ لـ
				nization's unrelated trades or busine	esses					y (or first) u		
				ITAL OF REAL PROPERTY				complete Parts I			, describe the	
				end of the previous sentence, co	mplete	Parts I and II, com	plete a So	chedule M for ea	ch additio	nal		
		ade or business, the			-11-						Yes X No	-
				corporation a subsidiary in an affil			osidiary c	controlled group?	• • • •	▶∟	Yes^_ NO	
20				identifying number of the parent co			Telenhon	e number ▶ 78	11-736	-2000		-
202				or Business Income	- 110	(A) Income		(B) Exper		1	(C) Net	•
က		Gross receipts or s				(A) IIIcome		(b) Exper	1363	- 	1	Ī
0				c Balance ▶	1c	271.	553.					İ
ပ္	2	Less returns and allowa		ule A, line 7)	2						i	İ
DEC	3	•	-	2 from line 1c	3	271,	553.			+	271,553.	
_				ttach Schedule D)	4a					<u> </u>		-
皿	b			Part II, line 17) (attach Form 4797)	4b			· - · ·				•
Z	c			rusts	4c							•
₹	5			an S corporation (attach statement)	5					1		•
SCANNED	6				6	894,	137.	-			894,137.	•
U)	7	·	•	come (Schedule E)	7							_
	8	Interest, annuities, roya	alties, and re	nts from a controlled organization (Schedule F)	8				_			_
	9	Investment income of a	section 50	1(c)(7), (9), or (17) organization (Schedule G)	9							_
	10	Exploited exempt	activity in	ncome (Schedule I)	10							_
	11	Advertising incom	ne (Sched	lule J)	11				_			_
_	12	Other income (Se	ee instruc	tions, attach schedule)	12							_
707	13			ough 12	13	1,165,					1,165,690.	
7	Par			Taken Elsewhere (See inst					Except	for contri	butions,	
7		deduction	<u>is must</u>	be directly connected with t	he ur	rrelated busine	es inco	me)	- I			-
7	14	Compensation of	officers,	directors, and trustees (Schedule K)				INFD	1 14	'' -	201 102	-
>	15	Salaries and wage	es					O	. 15	_	201,183.	-
_	16	Repairs and main	tenance			. ໄຊ້ໄ າ ເ	L 23	2020	. 16			-
rengo (i	17	Bad debts				[?]	÷. ÷ 9		17			-
5	18	Interest (attach s	chedule) (-	(see instructions)		00	, DC	<u></u>	18		78,434.	-
2	19	Chartable sector	S	See instructions for limitation rules)			DEV	1, UT · ·	19		70,131.	-
3	20		-	4562)		1			20	-		-
	21 22			on Schedule A and elsewhere on re					221	-		
1	23	•										-
	24			compensation plans								-
	25			S								-
	26			Schedule I)								-
	27			chedule J)						"		-
	28	•		chedule)					· · —	_	210,052.	-
	29			s 14 through 28					13 29		489,669.	-
	30			le income before net operating				-			676,021.	- 0
	31	Deduction for net	operatin	g loss arising in tax years beginni	ng on o	or after January 1, 2	2018 (see	instructions) .	31			ĺ,
	32	Unrelated busines	ss taxable	e income Subtract line 31 from line	<u>30</u> .	<u> </u>	<u></u> .		$\sqrt{1.}$ $\sqrt{3}$ 2		676,021.	_
		Paperwork Reduct	ion Act N	lotice, see instructions.					,	Fo	orm 990-T (2018)	
	8X274	° ¹ 7873LT ^{JS} Y59	92		V 1	8-8.4F	2	2150887	-		PAGE	92

Form	990-T (2							Page 2
Par	t III	Total Unrelated Business Taxab	le Income					
33	Total	of unrelated business taxable income co	omputed from all ur	related trade	es or businesses (see		
		uons)	•		•	I I	960	,441.
34	Amoun	ts paid for disallowed fringes				. 34		
		ion for net operating loss arising in						
35							201	1,340.
		nons)						1,340.
36		of unrelated business taxable income before	•			1 1		
	of lines	33 and 34			· · · · · · · · · · · · · · · · · · ·	36		5,101.
37	Specific	deduction (Generally \$1,000, but see line 3	7 instructions for excepti	ons)		>. [™] . 3 7	1	1,000.
38	Unrelat	ed business taxable income. Subtract lin	e 37 from line 36	If line 37 is	greater than line_	36.		
	enter th	ne smaller of zero or line 36				ا ₃₈ ا	665	5,101.
Par		Tax Computation			. =-	. 1 4- 1		
		zations Taxable as Corporations. Multiply line	20 hv 249/ (0.24)		117).▶ 39	139	671.
39					• • • • • • • • • • • • • • • • • • • •	1 T		
40	Trusts		nstructions for tax	•				
		ount on line 38 from Tax rate schedule						
41	Proxy t	ax See instructions				. ▶ 41		
42	Alterna	tive minimum tax (trusts only)- · · · · · · ·				42		
43	Tax on	Noncompliant Facility Income. See instruction	ns			43		
44		dd lines 41, 42, and 43 to line 39 or 40, which					139	671.
Par	t V	Tax and Payments	· · · · · · · · · · · · · · · · · · ·	•		I		
		tax credit (corporations attach Form 1118, tr	uete attach Form 1116)	45	a			
		redits (see instructions)						
С	Genera	I business credit Attach Form 3800 (see instru	ictions)	43	<u>. </u>	\dashv \vdash		
d	Credit f	or prior year minimum tax (attach Form 8801	or 8827)	45	<u>a </u>	— - -		
е		redits Add lines 45a through 45d				1 1 1	1.26	
46		t line 45e from line 44					139	671.
47	Other ta	xes Check if from Form 4255 Form 86°	1 Form 8697	Form 8866 L	Other (attach schedu	ıle) 47		
48	Total ta	x. Add lines 46 and 47 (see instructions)	. 	. .		JA 48 L	139	671.
49		et 965 tax liability paid from Form 965-A or Fo						
		nts A 2017 overpayment credited to 2018 .						,
		stimated tax payments			b			
_	Z010 E	posited with Form 8868				00.		
C .	ı ax dep	oosited with Form 8868		7 1 O. 130	۵۰,۰			
d	Foreign	organizations Tax paid or withheld at source	(see instructions)		<u>u</u>			
е	Backup	withholding (see instructions)		50	e			
f	Credit f	or small employer health insurance premiums	(attach Form 8941)	50	<u>f </u>			
g			2439					
	F	orm 4136 Other		Total ▶ 50	g			
51	Total p	ayments. Add lines 50a through 50g		۱ ا		5h	260	0,000.
52	Estimat	ed tax penalty (see instructions) Check if For	m 2220 is attached			_5 ¹ 2		
53	Tax due	e. If line 51 is less than the total of lines 48, 4	9, and 52, enter amoun	towed		▶ 53		
54		yment. If line 51 is larger than the total of line			<i>C1</i>		120	,329.
.55 ⁻		e amount of line 54 you want			Refunde		··	<u> </u>
		Statements Regarding Certain						
Par							authority Ye	es No
56		time during the 2018 calendar year, di	•		-			-3 140
		financial account (bank, securities, or o	-	-	-	=	I	
	FinCEN	Form 114, Report of Foreign Bank and	d Financial Accounts	If "Yes," e	enter the name of	the foreign	country	
	here 🕨							<u> </u>
57	During	the tax year, did the organization receive a di	stribution from, or was	it the grantor	of, or transferor to, a	foreign trust?	∟	X
	_	see instructions for other forms the organizati		=		-		
58		ne amount of tax-exempt interest received or		ear ▶ \$155	,657.			1 1
	U	nder penalties of penjury, I declare that I have examined	this return, including accor	mpanying schedul	es and statements, and to	the best of my	knowledge and	belief, it is
Sia-	1 to	ue, correct, and complete Declaration of preparer (other than	taxpayer) is based on all inform	nation of which pr	reparer has any knowledge	_	-	
Sign		414	107/13/2020	CEO (TREASURER		RS discuss this	
Her		ruef Solomon (Jul L3, 2020 t* 10 E017)		<u> </u>	TVEWOUVEK		reparer shown	
	s	ignature of officer	Date	Title	Ta	(see instruction		No
Dela		Print/Type preparer's name	Preparer's signature		Date	Check if	PTIN	
Paid		SHY JOSEPH	1		7/10/2020	self-employed	P01085	
	arer	Firm's name ► KPMG LLP					13-55652	
use	Only	Firm's address ▶ 60 SOUTH STREET,	BOSTON, MA 02	111		Phone no 61	7-988-100	00
	-		·		<u></u>	"	Form 990-	

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JSA

Form 990-T (2018)								Page 3
Schedule A - Cost of G	oods Sold. Er	iter method	d of invento	ry valuation	>			
1 Inventory at beginning of	year 1			6 Inventory	at end of yea	ar	6	
2 Purchases	2					ld Subtract line		•
3 Cost of labor				6 from	line 5 En	ter here and in		
4a Additional section 263A c				Part I, line	2		7	
(attach schedule)	4a			8 Do the	rules of	section 263A (w	vith respect to	O Yes No
b Other costs (attach schedu	1 1			property	produced	or acquired for	resale) appl	y
5 Total Add lines 1 through				to the orga	anization?	<u> </u>		
Schedule C - Rent Income	e (From Real P	roperty a	nd Person	al Property	Leased V	Vith Real Proper	rty)	
(see instructions)	•					•		
Description of property	<u>-</u>		-					
(1) RENTAL INCOME F	ROM THE UNI	VERSITY	OFFICE	PARK		·		
(2)	·							
(3)								
(4)	<u>.</u> .							_
	2 Rent recei	ved or accrue	ed			-		
(a) From personal property (if the	percentage of rent	(b) F	rom real and p	ersonal property	(if the	3(a) Deductions di	rectly connected w	nth the income
for personal property is more th				personal property		ın columns 2(a	a) and 2(b) (attach	schedule)
more than 50%) 50% or if the rent i				ased on profit or	income)			
(1)			894	,137.				
(2)								
(3)								_
(4)							-	
Total		Total	894	,137.				
(c) Total income Add totals of c	olumns 2(a) and 2(b) Enter				(b) Total deduction Enter here and on		
here and on page 1, Part I, line 6			894,3	137.		Part I, line 6, colun		
Schedule E - Unrelated D	ebt-Financed I	ncome (se	e instructio	ns)			· -	
			2 Gross in	come from or	3 🗓	eductions directly con		cable to
 Description of del 	bt-financed property	•	allocable to	debt-financed	(a) Straigh	debt-finance	(b) Other de	eductions
			pro	perty		ch schedule)	(attach sc	
(1)								
(2)								
(3)				!				
(4)								
4 Amount of average	5 Average adjus		6.0	olumn			8 Allocable	deductions
acquisition debt on or allocable to debt-financed	of or allocal debt-financed		4 d	4 divided / Gross		ncome reportable 1 2 x column 6)	(column 6 x tot	al of columns
property (attach schedule) '	(attach sche		by co	olumn 5	(00/2////		3(a) and	· 3(b))
(1)				%				
(2)				%				
(3)				%				
(4)				%				
						e and on page 1,	Enter here and	
					Part I, lin	e 7, column (A)	Part I, line 7,	column (B)
				_				

Form 990-T (2018)

Total dividends-received deductions included in column 8

Form 990-T (2018)	BRANDEIS			•						103552 <u>Page</u>
Schedule F-Interest, Ann	uities, Royalties	, and Ren	ts Fro	om Contro	lled Or	ganiza	tions (see	nstructio	ns)	
		Exen	npt Co	ontrolled Org	ganizati	ons				
Name of controlled organization	2 Employer identification number	E1		lated income instructions)	l .	of specified ents made	included	f column 4 th in the contro ion's gross inc	lling	6 Deductions directly connected with income in column 5
(1)						_				
(2)										
(3)										
(4)	<u> </u>									
Nonexempt Controlled Organi	zations									
7 Taxable Income	8 Net unrelated in (loss) (see instruct			Total of specific payments made		includ	art of column led in the co zation's gros	ntrolling		Deductions directly nected with income in column 10
(1)										 -
(2)										
(3)										
(4)	-									
						Enter	columns 5 a here and on I, line 8, colu	page 1,	Ent	dd columns 6 and 11 ler here and on page 1, irt I, line 8, column (B)
Totals	<u> </u>	<u></u>			<u>▶</u>	L				
Schedule G-Investment In	come of a Sec	tion 501(c	: <u>)(7),</u>			<u>nizatior</u>	n (see inst	tructions)	 r	
1 Description of income	2 Amount of	income		3 Deduction directly con (attach sch	nected		4 Set-asides (attach schedule)		5 Total deductions and set-asides (col. 3 plus col. 4)	
(1)										
(2)			<u> </u>			•				
(3)										
(4)										 ,
	Enter here and o Part I, line 9, co			·						Enter here and on page Part I, line 9, column (B
Totals ▶										
Schedule I-Exploited Exe	mpt Activity Inc	come, Oth	er Th	an Adverti	sing Ir	come (see instru	ctions)		
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expens directly connected production unrelate business in	/ with n of ed	4 Net incon from unrelat or business 2 minus col If a gain, α cols 5 thro	ed trade (column umn 3) ompute	from a	ss income ctivity that unrelated ss income	6 Exper attributat columi	ble to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)										
(2)	1			 						
(3)										
(4)							·· -			
	Enter here and on page 1, Part I, line 10, col (A)	Enter here a page 1, Pa line 10, col	artl,							Enter here and on page 1. Part II, line 26
Totals ▶ Schedule J- Advertising Ir	come (see instri	intions)		<u> </u>						
Part I Income From Per			onsol	idated Rac	e i e				_	
Fait Income From Fer	louicais Report	eu on a Ci	511501	luateu Das	913				-	
1 Name of periodical	2 Gross advertising income	3 Direc advertising		4 Advert gain or (los 2 minus co a gain, coi cols 5 thro	s) (col ol 3) If mpute		culation come	6 Reade costs	•	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)										
(2)	 			1						7
(3)	<u> </u>			1						7
(4)				1						
Totals (carry to Part II, line (5))	<u> </u>			<u> </u>			-	<u></u>		5om 990-T (201

Form **990-T** (2018)

)

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)						
(2)						
(3)						
(4)						
Totals from Part I ▶						
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (8)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶					1	

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

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

Form 990-T (2018)

JSA

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V 18-8.4F

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

Department of the Treasury Internal Revenue Service

For calendar year 2018 or other tax year beginning $\frac{07/01}{}$, 2018, and ending

► Go to www irs gov/Form990T for instructions and the latest information ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only

	ANDEIS UNIVERSITY					2103552		
	Unrelated business activity code (see instructions) ▶ 71,000	00	···	19.				
	Describe the unrelated trade or business ► HEALTH CLUB							
	tl Unrelated Trade or Business Income		(A) Income	(B) Expen	ses	(C) Net		
1a	Gross receipts or sales 3,000.							
b	Less returns and allowances c Balance ▶	1c	3,000.	- 				
2	Cost of goods sold (Schedule A, line 7)	2						
3	Gross profit Subtract line 2 from line 1c	3	3,000.			3,000.		
4 a	Capital gain net income (attach Schedule D)	4a				· · · · · · · · · · · · · · · · · · ·		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b						
С	Capital loss deduction for trusts	4c						
5	Income (loss) from a partnership or an S corporation (attach							
	statement)	5_						
6	Rent income (Schedule C)	6						
7	Unrelated debt-financed income (Schedule E)	7						
8	Interest, annuities, royalties, and rents from a controlled							
	organization (Schedule F)	8		•				
9	Investment income of a section 501(c)(7), (9), or (17)							
	organization (Schedule G)	9	<u></u>		_			
10	Exploited exempt activity income (Schedule I)	10			-			
11	Advertising income (Schedule J)	11						
12	Other income (See instructions, attach schedule)	12	2 222			2 000		
13	Total Combine lines 3 through 12	13	3,000.			3,000.		
Pai	Deductions Not Taken Elsewhere (See instruction deductions must be directly connected with the un			ns) (Except fo	r contribu	tions,		
14	Compensation of officers, directors, and trustees (Schedule K)				14			
15	Salaries and wages				15			
16	Repairs and maintenance				16	31,826.		
17	Bad debts				17	•		
18	Interest (attach schedule) (see instructions)				18			
19	Taxes and licenses							
20	Charitable contributions (See instructions for limitation rules)		1 1		20			
21	Depreciation (attach Form 4562)							
22	Less depreciation claimed on Schedule A and elsewhere on re	eturn	<u>22a</u>		22b			
23	Depletion							
24	Contributions to deferred compensation plans							
25	Employee benefit programs							
26	Excess exempt expenses (Schedule I)							
27	Excess readership costs (Schedule J)					44 020		
28	Other deductions (attach schedule)					44,828. 76,654.		
29	Total deductions Add lines 14 through 28							
30	Unrelated business taxable income before net operating					-73,654.		
31	Deduction for net operating loss arising in tax years	begin	ining on or after Janua	ry 1, 2018 (s	ee			

For Paperwork Reduction Act Notice, see instructions

Unrelated business taxable income Subtract line 31 from line 30

Schedule M (Form 990-T) 2018

-73,654.

31

32

2150887

Unrelated Business Taxable Income for **Unrelated Trade or Business**

OMB No 1545-0687

Department of the Treasury

For calendar year 2018 or other tax year beginning $\frac{07/01}{}$, 2018, and ending 06/30 .20 19

04-2103552

Internal Revenue Service Name of organization

BRANDEIS UNIVERSITY

► Go to www irs.gov/Form990T for instructions and the latest information ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only Employer identification number

	Unrelated business activity code (see instructions) ▶ 11000 Describe the unrelated trade or business ▶ ANIMAL CARE					
Par	Unrelated Trade or Business Income		(A) Income	(B) Expenses		(C) Net
1a	Gross receipts or sales 122,641.	Τ				
b	Less returns and allowances	1 c	122,641.			
2	Cost of goods sold (Schedule A, line 7)	2				
3	Gross profit Subtract line 2 from line 1c	3	122,641.	- '		122,641.
4a	Capital gain net income (attach Schedule D)	4a				
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5				
6	Rent income (Schedule C)					
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)					
	organization (Schedule G)	9				
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)					
12	Other income (See instructions, attach schedule)	12				
13	Total Combine lines 3 through 12	13	122,641.			122,641.
Par	Deductions Not Taken Elsewhere (See instruction deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K	nrelat	ed business income)	···	ntribu 14	utions,
15	Salaries and wages				15	104,038.
16	Repairs and maintenance				16	
17	Bad debts.				17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses				19	
20	Charitable contributions (See instructions for limitation rules)				20	
21	Depreciation (attach Form 4562)			15,039.	20	
22	Less depreciation claimed on Schedule A and elsewhere on r				22b	15,039.
23	•				23	
23 24	Depletion				24	
25					25	
25 26	Excess exempt expenses (Schedule I)				26	
26 27	Excess exempl expenses (Schedule I)				27	
28	Other deductions (attach schedule)				28	83,958.

Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see

V 18-8.4F

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2018

30

203,035.

-80,394.

-80,394.

29

30

Unrelated Business Taxable Income for **Unrelated Trade or Business**

OMB No 1545-0687

2018

Department of the Treasury Internal Revenue Service Name of organization

06/30 .2019 For calendar year 2018 or other tax year beginning 07/01, 2018, and ending

▶ Go to www irs gov/Form990T for instructions and the latest information Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only

Employer identification number

BRANDEIS UNIVERSITY 04-2103552 Unrelated business activity code (see instructions) ▶ 520000 Describe the unrelated trade or business ► INVESTMENTS IN LIMITED PARTNERSHIPS Part I Unrelated Trade or Business Income (C) Net (A) Income (B) Expenses 1a Gross receipts or sales b Less returns and allowances Cost of goods sold (Schedule A, line 7)...... 2 Gross profit Subtract line 2 from line 1c 3 883,357. 883,357. 4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797). . 4b Income (loss) from a partnership or an S corporation (attach -804,813. -804,813 statement) ATCH 5 . 6 Unrelated debt-financed income (Schedule E). 7 Interest, annuities, royalties, and rents from a controlled Investment income of a section 501(c)(7), (9), or (17) 10 Exploited exempt activity income (Schedule I) 10 Advertising income (Schedule J)........ 11 12 Other income (See instructions, attach schedule) 78,544. 78,544. Total Combine lines 3 through 12..... 13 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income) 14 14 Compensation of officers, directors, and trustees (Schedule K)

15	Salaries and wages	15	
16	Repairs and maintenance		
17	Bad debts		
18	Interest (attach schedule) (see instructions)	18	21,867
19	Taxes and licenses	19	4,424
20	Charitable contributions (See instructions for limitation rules)		
21	Depreciation (attach Form 4562)		
22	Less depreciation claimed on Schedule A and elsewhere on return	22b	
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	I .	
28	Other deductions (attach schedule)		98,667
29	Total deductions. Add lines 14 through 28		124,958
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-46,414
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	31	
32	Unrelated business taxable income Subtract line 31 from line 30	32	-46,414

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2018

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

Department of the Treasury

BRANDEIS UNIVERSITY

For calendar year 2018 or other tax year beginning = 07/01 , 2018, and ending 06/30 .2019

▶ Go to www irs gov/Form990T for instructions and the latest information. Internal Revenue Service Name of organization

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only

Employer identification number

04-2103552

Unrelated business activity code (see instructions) ▶ 520000 Describe the unrelated trade or business ► INVESTMENT IN LIMITED PARTNERSHIP Part I Unrelated Trade or Business Income (C) Net (A) Income (B) Expenses 1a Gross receipts or sales b Less returns and allowances Cost of goods sold (Schedule A, line 7)...... 2 Gross profit Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797). . Income (loss) from a partnership or an S corporation (attach 300,392. 300,392 statement) ATCH 8 . 6 6 Unrelated debt-financed income (Schedule E). Interest, annuities, royalties, and rents from a controlled Investment income of a section 501(c)(7), (9), or (17) 10 Exploited exempt activity income (Schedule I) 10 Advertising income (Schedule J) 11 Other income (See instructions, attach schedule) 12 12 300,392. 300,392. Total Combine lines 3 through 12..... Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions,

deductions must be directly connected with the unrelated business income)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	I	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	1	
19	Taxes and licenses		12,681.
20	Charitable contributions (See instructions for limitation rules)	20	
21	Depreciation (attach Form 4562)		
22	Less depreciation claimed on Schedule A and elsewhere on return	22b	
23	Depletion	23	
24	Contributions to deferred compensation plans		
25	Employee benefit programs		
26	Excess exempt expenses (Schedule I)	I	
27	Excess readership costs (Schedule J)	1	
28	Other deductions (attach schedule)	1	3,291.
29	Total deductions. Add lines 14 through 28	Г	15,972.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	284,420.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	31	
32	Unrelated business taxable income Subtract line 31 from line 30	32	284,420.

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2018

SCHEDULE D (Form 1120)

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

OMB No 1545-0123

2018

Internal Revenue Service

Department of the Treasury

► Go to www.irs.gov/Form1120 for instructions and the latest information Employer identification number

04-2103552 BRANDEIS UNIVERSITY Part I Short-Term Capital Gains and Losses (See instructions) (g) Adjustments to gain (h) Gain or (loss) See instructions for how to figure the amounts to enter on (e) or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part I, line 2, column (d) and combine This form may be easier to complete if you round off cents to (sates price) (or other basis) the result with column (q) column (g) whole dollars 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However if you choose to report all these transactions on Form 8949 leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 2 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 with Box C checked 1,702. 1,702. 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 6 Unused capital loss carryover (attach computation) 1,702. 7 Net short-term capital gain or (loss) Combine lines 1a through 6 in column h. Part II Long-Term Capital Gains and Losses (See instructions (g) Adjustments to gain (h) Gain or (loss) See instructions for how to figure the amounts to enter on Subtract column (e) from or loss from Form(s) the lines below Proceeds Cost 8949. Part II. line 2. column (d) and combine This form may be easier to complete if you round off cents to (sales price) (or other basis) column (a) the result with column (a) whole dollars 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 702,086. 702,086. 11 Enter gain from Form 4797, line 7 or 9 179,569. 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 14 Capital gain distributions (see instructions) 15 Net long-term capital gain or (loss) Combine lines 8a through 14 in column h 15 881,655. Part III Summary of Parts I and II 1,702. 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 16 17 Net capital gain Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7).... 17 881,655. 883,357. 18 Add lines 16 and 17 Enter here and on Form 1120, page 1, line 8, or the proper line on other returns 18 Note If losses exceed gains, see Capital losses in the instructions

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

Schedule D (Form 1120) 2018

Form 8949

Sales and Other Dispositions of Capital Assets

OMB NO 1343-0074

2018

Attachment 12

Department of the Treasury Internal Revenue Service ► Go to www irs.gov/Form8949 for instructions and the latest information

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

Name(s) shown on return

BRANDEIS UNIVERSITY

Social security number or taxpayer identification number

04-2103552

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 For	m 1099-B						
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, if any, to gain or loss if you enter an amount in column (g), enter a code in column (f) See the separate 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	(g) Amount of adjustment	from column (d) and combine the result with column (g)		
PARTNERSHIP FLOW THROUGH ST VARIOUS VARIOUS			1,702				1,702		
			<u></u>						
			_						
2 Totals Add the amounts in columns negative amounts) Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C al	I here and inc is checked), lin	lude on your e 2 (if Box B	1,702				1,702		

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

For Paperwork Reduction Act Notice, see your tax return instructions

Form 8949 (2018)

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

BRANDEIS UNIVERSITY

Social security number or taxpayer identification number

04-2103552

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

(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, if If you enter an a enter a co See the sepa	(h) Gain or (loss) Subtract column (e) from column (d) an		
(Example 100 sh XYZ Co)	(Mo , day, yr)	(Mo , day, yr)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the resul with column (g)	
PARTNERSHIP FLOW THROUGH LT	VARIOUS	VARIOUS	702,086				702,086	
				_				
							_	
						-		
							,	
Totals Add the amounts in columns in negative amounts) Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box D above is checked).	here and inclusion the here and inclusion the here.	ude on your 9 (if Box E	702,086				702', 086	

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

Form 8949 (2018)

JSA 8X2616 1 000

Form **4562**

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return

► Go to www.irs gov/Form4562 for instructions and the latest information

OMB No 1545-0172

Attachment Sequence No 179

Name(s) shown on return BRANDEIS UNIVERSITY Identifying number 04-2103552

Busi	ness or activity to which this form relates	3							<u> </u>
G	ENERAL DEPRECIATI	ON							
.Pa	Note: If you have any				vou comp	lete Part I			
1	Maximum amount (see instruction		 		<u> </u>			1	
2	Total cost of section 179 property							2	
3	Threshold cost of section 179 pro							3	
4 5	Reduction in limitation Subtract I Dollar limitation for tax year Subtract line 4 separately, see instructions	4							
		on of property	· · · · · · · ·		siness use only	(c) Elect		5	1
	(-,			(,					
									
7	Listed property Enter the amount								
8	Total elected cost of section 179							8	
9	Tentative deduction Enter the small		9						
10	Carryover of disallowed deduction		10	<u> </u>					
11	Business income limitation Enter		11	<u> </u>					
12	Section 179 expense deduction A	• • •	12	<u> </u>					
13	Carryover of disallowed deduction		•		▶ 13				
Note						linted proper	tu Co.		sustano l
	rt II Special Depreciation		·	•				2 11151	Tuctions)
14	Special depreciation allowance								
	during the tax year. See instruction							14	
	Property subject to section 168(f)							15	15,039.
						· · · · · · · · · · · · · · · · · · ·	· · · ·	16	13,033.
Fa	rt MACRS Depreciation	T (DOI) E INClude listed	<u> </u>	tion A	uons)	-			
17 18 ——	MACRS deductions for assets pla If you are electing to group an asset accounts, check here	y assets placed in ser	vice during t	he tax yea	ar into one	or more gener	al	17	,
	Section B - Asse	ets Placed in Service			r Using the	General Dep	reciat	ion S	ystem
(a) Classification of property placed in (busi		(c) Basis for (business/inv only - see in	estment use	(d) Recovery period			ethod	(g) Depreciation deduction	
19a	3-year property			·					
b	5-year property				-				`
С	7-year property								
d	10-year property								
е	15-year property						<u> </u>		
f	20-year property								<u></u>
g	g 25-year property				25 yrs		S	/L	
h	Residential rental				27 5 yrs	MM	S	/L	
	property				27 5 yrs	MM		/L	
1	Nonresidential real			··	39 yrs	ММ	S	/L	
	property			_	<u> </u>	ММ	S	/L	
	Section C - Asset	s Placed in Service D	uring 2018	Tax Year	Using the	Alternative De	preci	ation	System
20a	a Class life						S	/L	
b	b 12-year				12 yrs	-		/L	
c	30-year		30 yrs	MM	S/L				
d	I 40-year				40 yrs	ММ	S	<u>/L</u>	
Pa	rt IV Summary (See instru	ictions)							
	Listed property Enter amount from							21	
22	Total Add amounts from line 1						nter		
23	here and on the appropriate lines of For assets shown above and placetion of the basis attributable to	of your return Partnershi laced in service during section 263A costs	ps and S corp the current	orations - s t year, ent	ee instructior er the 23	 	• • •	22	15,039.

Forn	n 4562 (2018)												-2103		Page 2	
Pa		operty (Include ent, recreation, o			certa	n oth	er ve	hicles	, certa	ın aır	craft,	and	proper	rty use	ed for	
	24b, column	ny vehicle for wh s (a) through (c) of	Section A,	all of S	Section	B, and S	Section	C if ap	plicable						ly 24a,	
		Depreciation and														
248	Do you have evidence			nent use	claimed	? <u> </u>	es (a)	No 2	24b f "\			1		Yes	No No	
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment us percentage	se Cost	(d) or other b		(e) sis for depr siness/inve use only	estment	(f) Recovery period	Met	g) hod/ ention	Depre	(h) eciation uction	Elected se		
25	Special depreciation	n allowance for		sted pr	operty	placed			ırına	l				 		
_	the tax year and us										. 25				1	
26	Property used more	e than 50% in a qi	ialified busi	ness us	е	γ										
				%									_	 		
_				%		_						_	_	 		
27	Property used 50%	or less in a qualifi	<u>' </u>					l.		<u> </u>				<u> </u>		
	· · · · · · · · · · · · · · · · · · ·			%					S						Ī	
				%					S/L -]		
				%						S/L -]	,	
28		lumn (h), lines 25	through 27	Enter	here ar	nd on lir	ne 21, p	age 1.			. 28	1		 		
29	Add amounts in col	iumn (I), line 26 E									<u></u>	<u></u>	. 29	Ь		
Con	nplete this section for	r vehicles used by			Inform partner					r." or r	elated r	person	lf vou c	rovided	vehicles	
	our employees, first ans															
	-				a)		(b)		(c)		(d)		(e)		(f)	
30	Total business/investment miles driven during the year (don't include commuting miles)			Vehicle 1		Veh	Vehicle 2		Vehicle 3		Vehicle 4		Vehicle 5		Vehicle 6	
31	Total commuting m	iles driven during	the year .													
32	•	ersonal (nonco	0,								Ĭ					
	miles driven													<u> </u>		
33	Total miles driver															
34	lines 30 through 32 Was the vehicle			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
04	use during off-duty		•													
35	Was the vehicle i															
	than 5% owner or re	elated person?													<u></u>	
36			•													
	use?				18/h-	D	de Mal	.: -!	fortlas	b. Th						
۸ n.c	Sec swer these questions	ction C - Questic												whoa	ran't	
	re than 5% owners o				eption i	o com	pieting	Section	11 6 101	verilcie:	s useu	by em	pioyees	will al	GIIL	
37	Do you maintain a	a written policy s	tatement t	hat pro	ohibits	all pers	sonal u	se of	vehicles	ncluc	ding co	mmutir	ng, by	Yes	No	
	your employees?														<u> </u>	
38	Do you maintain a	that prohibits personal use of vehicles, except co ed by corporate officers, directors, or 1% or more own							commu							
39		e instructions for \	enicies use	ed by co	orporati	e office	rs, aired	ctors, c	or 1% or	more o	wners					
40	Do you provide m	ore than five vel	nicles to v	our en	nplovee	 s. obta	 ın ınfoı	 matioi	n from	 vour er	nolove	s abo	ut the			
	use of the vehicles,		=													
41	Do you meet the re				omobile	e demo	nstratio	n use?	See ins	truction	s					
	Note: If your answe		0, or 41 is	"Yes," c	don't co	mplete	Section	B for	the cove	red vel	ncles			<u></u>		
Pa	rt VI Amortizati	on						- 1			1 .	. T	-			
	(a) Description of	(a) (b) Date amino beg		rtization Amortiz		(c) nortizable	(c) able amount		(d) Code section		(e) Amortization period or percentage		(f) ` Amortization for this year		ııs year	
42	Amortization of cos	its that begins duri	ng your 20	18 tax	year (se	e instri	uctions)	<u> </u>			Perce	aye				
			J , = = 1 = 0		1 (30							T				
_																
43		ts that began befo	ore your 20	18 tax y	year .							43				
44	Total. Add amount	s in column (f) Se	e the instr	uctions	for whe	ere to re	port .				<u></u>	44		150		
JSA							•						Fo	orm 4562	4 (2018)	
8X23	7673LT 1592	2			V 1	8-8.4	F		2150	887				PAC	SE 119	