

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

401	500	,	0000(0))		10
07	/01	2017	and ending	06/30	2018

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calendar year 2017 or other tax year beginning	0//01	2017, and ending_	06/30	20 L 8

OMB No 1545-0687

ера	artment of the Treasury	Go to www.ns.gov/ o/msso/ for instructions and the latest information.								
nteri	nal Revenue Service	▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c	:)(3)							
П	Check box if	Name of organization (Check box if name changed and see instructions)	D							

Open to Public Inspection for

			, ,	(-/(-/	o organizations orni	
A Check box if address changed		Name of organization (Check box if name changed and se	D Employer identification number (Employees' trust, see instructions)			
B Exempt under section						
X 501(C)(23)	Print	Number, street, and room or suite no. If a P.O. box, see instruction	05-025893	05-0258932		
408(e) 220(e)	or		E Unrelated business activity codes			
408A 530(a)	1 y p c	ONE CUNNINGHAM SQUARE	(See instructions))		
529(a)		City or town, state or province, country, and ZIP or foreign posta	l code			
C Book value of all assets]	PROVIDENCE, RI 02918		713990	525990	
at end of year	F Gro	up exemption number (See instructions) ▶	N/A			
745,242,649.	G Che	eck organization type X 501(c) corporation	501(c) trust	401(a) trust	Other trust	
H Describe the organiz	zation's p	rimary unrelated business activity AT	TACHMENT 1			
I During the tax year.	was the	corporation a subsidiary in an affiliated group or a parent-	subsidiary controlled group?		Yes X No	

If "Yes," enter the name and identifying number of the parent corporation The books are in care of ▶ JOHN SWEENEY, SVP FINANCE/CF Telephone number ▶ 401-865-2281 Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales 348,033. c Balance ▶ Less returns and allowances 2 . Cost of goods sold (Schedule A, line 7). 348,033. 348,033. 3 Gross profit Subtract line 2 from line 1c . Capital gain net income (attach Schedule D) 67,788. 67,788. 4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b -116,085. ATCH 2 -116,085. Income (loss) from partnerships and S corporations (attach statement) Rent income (Schedule C) 455. 95,285 -94,830. Unrelated debt-financed income (Schedule E) Я Interest, annuities, royalties, and rents from controlled organizations (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) 10 10 11 Advertising income (Schedule J) 59,092. ATCH 59,092. Other income (See instructions, attach schedule) 12

95,285. 13 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)

359,283.

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	208,085.
16	Repairs and maintenance	1 1	2,718.
17		1 1	
18	Interest (attach schedule)	18	
19	Taxes and licenses	19	3,092.
20	Charitable contributions (See instructions for limitation rules)	20	
21	Depreciation (attach Form 4562)		_
22	Less depreciation claimed on Schedule and elsewhere of return . 22a	22b	3,574.
23	Depletion	23	
24	Contributions to deferred compensation plans		
25	Contributions to deferred compensation plans Employee benefit programs MAY 2 2 2019	25	
26	Excess exempt expenses (Schedule 🖟	26	
27	Excess readership costs (Schedule OGDEN. U. ATTACHMENT. 4.	27	
28	Other deductions (attach schedule) ATTACHMENT. 4	28	154,912.
29	Total deductions Add lines 14 through 28	29	372,381.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-108,383.
31	Net operating loss deduction (limited to the amount on line 30)	31	
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	-108,383.

enter the smaller of zero or line 32 For Paperwork Reduction Act Notice, see instructions. 7X2740 2,000 180 JSA 1592

Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)

Unrelated business taxable income. Subtract line 33 from line 32 If line 33 is greater than line

56303

-108,383. Form 990₀T (2017)

1,000.

263,998.

Par	\$ 111	Tax Computation			·			
35	Organi	zations Taxable as Corporations. See ins	ructions for tax comput	tation Controlled grou	ıp.			
	nembe	s (sections 1561 and 1563) check here $ ightharpoonup$ Sc	ee instructions and					
а	Enter y	our share of the \$50,000, \$25,000, and \$9,925,	000 taxable income brac	kets (in that order)				
	(1) \$	(2)\$	(3) \$					
b	Enter o	ganization's share of (1) Additional 5% tax (not more	than \$11,750)	. \$				
	(2) Add	tional 3% tax (not more than \$100,000)		. (\$				
С		tax on the amount on line 34			▶ 35c			
36	Trusts	Taxable at Trust Rates. See instruction	ons for tax computa	ition Income tax	on			
	the amo	unt on line 34 from Tax rate schedule or	Schedule D (Form 104)	1)	▶ 36			
37		x. See instructions						
38		ve minimum tax						
39	Tax on	Non-Compliant Facility Income. See instructions			. 39			
40	Total. A	dd lines 37, 38 and 39 to line 35c or 36, whichever a	pplies	<u> </u>	. 40			
Par	t IV	Tax and Payments						
41 a	Foreign	tax credit (corporations attach Form 1118, trusts atta	ch Form 1116), 4	1a				
		edits (see instructions)						
		business credit Attach Form 3800 (see instructions)						
d	Credit f	or prior year minimum tax (attach Form 8801 or 8827)	4	1d				
		edits. Add lines 41a through 41d			. 41e			
42	Subtrac	line 41e from <u>line 40 </u>	<u></u>	<u></u>	. 42			
43	Other tax	es Check if from Form 4255 Form 8611	Form 8697 Form 8866	Other (attach schedule) . 43			
44	Total ta	x. Add lines 42 and 43		,	44			0.
45 a	Paymer	ts A 2016 overpayment credited to 2017	4:	5a				
		timated tax payments						
С	Tax dep	osited with Form 8868	<u>[4</u> :	5c				
		organizations Tax paid or withheld at source (see inst						
		withholding (see instructions)						
f	Credit f	or small employer health insurance premiums (Attach	Form 8941) <u>4</u>	5f				
g		edits and payments Form 2439						
	F	orm 4136 Other	Total ► 4	5g				
46	Total pa	yments Add lines 45a through 45g	.		46			
47	Estimat	ed tax penalty (see instructions) Check if Form 2220 i	s attached	▶Ĺ	_ 47			
48	Tax due	. If line 46 is less than the total of lines 44 and 47, er	iter amount owed		▶ 48			
49	Overpa	ment. If line 46 is larger than the total of lines 44 an	d 47, enter amount overpaid	1	▶ 49			
50		amount of line 49 you want		Refunded				
Par		Statements Regarding Certain Activit						
51	•	time during the 2017 calendar year, did the c	_	_			Yes	No
		financial account (bank, securities, or other) in						
		Form 114, Report of Foreign Bank and Finar	icial Accounts If YES,	enter the name of the	ne foreig	n country	-	-,,
	here >						 	X
52	During t	he tax year, did the organization receive a distribution	n from, or was it the granto	or of, or transferor to, a f	oreign trus	st?	$\vdash \vdash \vdash$	X
		ee instructions for other forms the organization may he						'
<u>53</u>		e amount of tax-exempt interest received or accrued of der penalties of perjury. I declare that I have examined this retu	<u> </u>	lides and statements and to the		nu kanuladan		1 1
C:	l tru	e, corresp, and complete, Declaration of preparer (other than taxpayer)			ne pest of a	ny knowleage	and bei	er, it is
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			rer's signature	Date	(366 413/100	hons)? X Ye	S	No
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	arer	JACOB K JOHNSON	Jacor Jamson	L :	elf-employe			<u> </u>
	Only	Firm's name	ON, MA 02111			13-5565 617-988		<u></u>
		Firm's address > 00 30010 31KEE1, BUSIC	M, PM UZIII	Į Pi	none no	01/-308	. TOO	

Form 990-T (2017)

Schedule A - Cost of Goods Sold. Enter method of inventory valuation Part Inventory at end of year 6	Form 990-T (2017)	- d - C - l d - E						Р	age 3
2 Purchases			iter method			 	T	-	
3 Cest of labor	, , , , , ,	· · · · · · · · · · · · · · · · · · ·					6		
### Additional section 283A costs (attach schedule)					•				
4a 8 Bo the rules of section 283.4 (with respect to Version Note of Station 283.4 (with respect to Version 283.4 (· ·							
b Other costs (attach schedule) . 4b		1 1						11	
Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions) 1 Description of property (1) 22. Rent received or accrued (a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) (1) (2) (3) (4) (4) (5) (6) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (6) (7) (7) (8) (8) (9) (9) (9) (1) (1) (1) (1) (2) (3) (4) (4) (5) (6) (7) (7) (8) (8) (9) (9) (9) (1) (1) (1) (1) (2) (3) (4) (4) (5) (6) (7) (7) (8) (8) (9) (9) (9) (1) (1) (1) (1) (2) (3) (4) (4) (5) (5) (6) (6) (7) (7) (7) (8) (8) (8) (9) (9) (9) (10) (11) (12) (12) (13) (14) (15) (16) (17) (17) (18) (18) (18) (19) (19) (10) (10) (10) (10) (10) (11) (11) (12) (12) (13) (14) (15) (16) (17) (17) (18)								Yes	No
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Column 2 x column 6 3(a) and 3(b)	acquisition debt on or	of or alloca	ble to						16
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(4) Enter here and on page 1, Part i, line 7, column (A) Page 1, Part i, line 7, column (B) 455. 95,285.									
Enter here and on page 1, Part I, line 7, column (A) Totals Enter here and on page 1, Part I, line 7, column (B) 95,285.					 				
Totals	1			1 76	Enter her		Enter here and o	on page lumn (B)	1,)
Totals			•			455.	95 285	·	
	Total dividends received deduction	one included in co					30,200	•	

Form **990-T** (2017)

Form 990-T (2017)		CE COLLE									258932 Page 4
Schedule F - Interest, Ann	uities, Royalties	·					atio	ons (see	instructio	ns)	
1 Name of controlled organization	2 Employer identification numb	er 3. Ne	t unrel	antrolled Orgated income instructions)	4 Total			ıncluded	f column 4 the in the control on's gross in	olling	6. Deductions directly connected with income in column 5
(1)											
(2)											·
(3)											
(4) Nonexempt Controlled Organ	rations										
Nonexempt Controlled Organ	8 Net unrelated in			Total of appendi		10	Part	of column	9 that is	1	1 Deductions directly
7 Taxable Income	(loss) (see instruc			Total of specific ayments made		inc	lude	d in the co	ntrolling		nnected with income in column 10
(1)											
(2)											
(4)											
\		, , <u>, , , , , , , , , , , , , , , , , </u>				En	ter h	olumns 5 a ere and on line 8, colu	page 1,	En	dd columns 6 and 11 ter here and on page 1, art I, line 8, column (B)
Totals	· · · · · · · · · · · · · · · · · · ·		· · · ·	(0) (47	<u></u> ▶	<u></u>					
Schedule G - Investment I	ncome of a Sec	tion 501(c)(7),	(9), or (17 3 Deduc		nızatı	on	(see inst	tructions)	- 1	5 Total deductions
1 Description of income	2 Amount of	income		directly cor (attach sch	nected				Set-asides th schedule)		and set-asides (col 3 plus col 4)
(1)			ļ								
(2)			 	-							
(3)											
(4)	Enter here and on page Part I, line 9, column (A						•			Enter here and on page 1, Part I, line 9, column (B)	
Totals ▶								•	-		
Schedule I - Exploited Ex	empt Activity In	come, Othe	er Th	an Adverti	sing In	come) (se	ee instru	ctions)		
Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expense directly connected very production unrelated business inc	with of	4 Net incon from unrelat or business 2 minus col If a gain, cc cols 5 thro	ed tradé (column umn 3) ompute	from is n	ot un	income vity that irelated income	6 Experatributa colum	ble to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(2)						_					
(3)										·	
(4)											
Totala	Enter here and on page 1, Part I, line 10, col (A)	Enter here an page 1, Par line 10, col	rt I,								Enter here and on page 1, Part II, line 26
Totals ▶ Schedule J - Advertising I	come (see instri	uctions)		-							
Part I Income From Per			nsol	idated Bas	is						
1 Name of periodical	2 Gross advertising	3 Direct		4 Advert	ising s) (col	5	Circu	ulation	6 Reade	ership	7 Excess readership costs (column 6
- Name of periodical	income	advertising c	osts	2 minus co a gain, cor cols 5 thro	npute		inco	me	cost	s	minus column 5, but not more than column 4)
(1)	<u> </u>			1							-
(2)				1							
(3)				-							
(4)				-							<u></u>
Totals (carry to Part II, line (5))									-		000 T
				1							Form 990-T (2017)

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

Name of periodical	2. Gross advertising income	3. Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	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 (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶			4			

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)			%	
(4)			%	····
Total. Enter here	and on page 1, Part II, line 14			

Form **990-T** (2017)

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.

Employer identification number

OMB No 1545-0123

Department of the Treasury Internal Revenue Service

► Go to www irs gov/Form1120 for instructions and the latest information

05-0258932 PROVIDENCE COLLEGE Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I (g) Adjustments to gain (h) Gain or (loss) See instructions for how to figure the amounts to enter on 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 (sales price) (or other basis) column (g) the result with 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 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 -11,505. 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 6 Unused capital loss carryover (attach computation) 6 -11,505.7 Net short-term capital gain or (loss) Combine lines 1a through 6 in column h Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (g) Adjustments to gain (h) Gain or (loss) See instructions for how to figure the amounts to enter on or loss from Form(s) Subtract column (e) from 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 (g) the result with column (g) 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 56,741. Enter gain from Form 4797, line 7 or 9 22,552. 11 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 exchanges from Form 8824 Capital gain distributions (see instructions) Net long-term capital gain or (loss) Combine lines 8a through 14 in column h 79,293. Part III Summary of Parts I and II Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 16 67,788. Net capital gain Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) 17 17 Add lines 16 and 17 Enter here and on Form 1120, page 1, line 8, or the proper line on other returns If the corporation has qualified timber gain, also complete Part IV 67,788. 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) 2017

Form **8949**

Sales and Other Dispositions of Capital Assets

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

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.

vame(s) snown on return				Social se	curity number of	taxpayer identificat	ion number
PROVIDENCE COLLEGE					05-	0258932	
Before you check Box A, B, or C below,	see whether y	ou received an	y Form(s) 1099-B c	r substitute state	ement(s) from y	our broker A subst	itute
statement will have the same informations or oker and may even tell you which box		99-B Either wii	ll show whether you	ır basıs (usually	your cost) was i	reported to the IRS	by your
Part I. Short-Term. Transac transactions, see page		ng capital a	ssets you held	1 year or less	s are short te	erm For long-te	erm
Note: You may aggre	egate all sho						
reported to the IRS a Schedule D, line 1a,							
You must check Box A, B, or C belomplete a separate Form 8949, por one or more of the boxes, com	page 1, for e	ach applicab	le box If you ha	ve more short	-term transac		
(A) Short-term transactions r	-	-				e Note above)	
(B) Short-term transactions r	eported on F	orm(s) 1099	-B showing basis			e Note above)	
X (C) Short-term transactions r	ot reported i	o you on For	m 1099-B		Adjustment if	any, to gain or loss	I
1 (a)	(b)	(c)	\-,	(e) Cost or other basis See the Note below	If you enter an enter a co	amount in column (g), de in column (f) arate instructions	Gain or (loss)
Description of property ' (Example 100 sh XYZ Co)	Date acquired (Mo, day, yr)	Date sold or disposed of (Mo, day, yr)	(sales price) (see instructions)	and see Column (e) in the separate instructions		(g) Amount of	Subtract column (e) from column (d) and combine the result with column (g)
					instructions	adjustment	with column (g)
FROM SCH K-1 (1065)					_		-11,505
	·						·
	<u> </u>						
		- <u>-</u> -					
	·						
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 above is checked).	here and incl is checked), line	lude on your e 2 (if Box B					-11,505

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 (2017)

Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term

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

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.

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

transactions, see page 1

1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed	(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			
(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 result with column (g)	
FROM SCH K-1 (1065)					·		56,741	
	_							
	` -							
					•			
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 Britans and the second	here and include is checked), line	de on your e 9 (if Box E					56,741	

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** (2017)

Part II

4562

Department of the Treasury

Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

OMB No 1545-0172

Attachment

Name(s) shown on return

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

Sequence No Identifying number

05-0258932 PROVIDENCE COLLEGE Business or activity to which this form relates GENERAL DEPRECIATION **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 2 Total cost of section 179 property placed in service (see instructions). 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter-0- If marned filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property Enter the amount from line 29......... 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 10 Carryover of disallowed deduction from line 13 of your 2016 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11... 12 Carryover of disallowed deduction to 2018 Add lines 9 and 10, less line 12 . . . 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Don't include listed property) Special depreciation allowance for qualified property (other than listed property) placed in service Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property) (See instructions) Section A 3,574 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . . Section B - Assets Placed in Service During 2017 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period only - see instructions) 3-year property 19a b 5-year property 7-year property d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs 27 5 yrs MM S/L h Residential rental 27 5 yrs MM S/L property MM S/L 39 yrs Nonresidential real MM S/L property Section C - Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/L c 40-year 40 yrs Part IV. Summary (See instructions 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 3,574 here and on the appropriate lines of your return. Partnerships and S corporations - see instructions 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

$\overline{}$	n 4562 (2017)	de la de la de	to an a bula			41	و د امر طور		4				-0258		Page 2
Pa	used for en	perty (Include a tertainment, recr	eation, or	amuse	ement))						•			
	24b, columns	ny vehicle for whi s (a) through (c) of	Section A,	all of S	Section	tandan B, and	Section	ge rat Cıfa _l	e or dec pplicable	ucting	lease (expense	e, comp	nete on	ily 24a
	Section A - I	Depreciation and	Other Info	rmatio	n (Cauti	on: Se	e the in	struct	ions for I	ımıts fo	r passe	enger au	itomobil	es)	
24a	Do you have evidence	e to support the bus	ness/investm	nent use	claimed	? \	res	No	24b f "\	res," is t	he evide	nce writt	en?	Yes	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) asis for depri usiness/inve use only	estment	(f) Recovery period	Met	g) hod/ ention	Depre	h) eciation uction	Elected s	i) ection 179 ost
25	Special depreciation										. 25				
26	Property used more	e than 50% in a qu	alified busir	ness us	se										
				%											
			-	%											
	D 1 150%	1		%]			
21	Property used 50%	or less in a qualifi							·	S/L -		1		T	
				% %		_				S/L -				1	
				%						S/L -		 		-	
28	Add amounts in col	ump (h) lines 25 i			here ar	nd on l	ne 21 n	age 1			28			1	
	Add amounts in col												. 29		
=-		(7),					on Use			<u></u>	<u></u>	• • • •	.		
	nplete this section for our employees, first ans		a sole prop	rietor,	partner,	or oth	er "more	than	5% owne					rovided	vehicle
<u> </u>		·	-		(a)		(b)		(c)		d)	1 .	e)	(f)
30	Total business/inve			Veh	ricle 1	Ve	hicle 2	Ve	ehicle 3	Veh	icle 4	Veh	icle 5	Vehi	cle 6
31	Total commuting m														
	-	ersonal (nonco	mmuting)						-						
33	Total miles driver lines 30 through 32														
34	Was the vehicle			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use during off-duty	hours?										ļ			
35	Was the vehicle u	used primarily by	a more												
	than 5% owner or re	•					 					-			
36	Is another vehicle		' 1									}			
	use ⁷				1000	Ļ	<u> </u>	<u> </u>	<u> </u>			<u> </u>		<u></u>	
	swer these questions		you meet a	an exc										who a	ren't
	re than 5% owners o													Yes	No
37											ing co	mmutin	g, by		
38	your employees? Do you maintain a	a written policy s	 tatement t	hat pr	ohibits	person	nal use	of ve	hicles e	xcept o	ommu	ting, by	your		
	employees? See the	•		•		•				-			-		
39	Do you treat all use	of vehicles by em	ployees as	person	al use?										
40	Do you provide m	ore than five vel	nicles to y	our en	nployee	s, obt	ain infor	matio	n from	your er	nploye	es abou	ut the		
	use of the vehicles,														
	Do you meet the re- Note: If your answe	er to 37, 38, 39, 4													
Pa	rt VI Amortizati	on	-						<u>.</u> .		1				
	(a) Description of	fcosts	(b) Date amort begins		An	(c nortizabl) le amount		(d) Code se		Amorti peric perce	zation od or	Amortiza	(f) ation for th	nis year
42	Amortization of cos	ts that begins duri	ng your 20	17 tax	year (se	ee instr	uctions)				1 20106				
		<u>_</u>			Ĭ ,										
43	Amortization of cos											43			
44	Total. Add amount	s in column (f) Se	e the instri	uctions	for whe	ere to r	eport .		. <u></u>	<u></u>	<u></u>	44			
JSA													Fo	rm 456	2 (2017)

ATTACHMENT 2
A LUAU DIVISIO /

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

INCOME (LOSS) FROM PARTNERSHIPS

-116,085.

INCOME (LOSS) FROM PARTNERSHIPS

-116,085.

PROVIDENCE COLLEGE EIN:05-0258932

FORM 990-T, PART II, LINE 20

CHARITABLE CONTRIBUTIONS CARRYOVER

TAX YEAR	CONTRIBUTIONS	AMOUNT DEDUCTED	CARRYOVER AVAILABLE
06/30/2012	(26)		(26)
06/30/2013	(35)		(35)
06/30/2014	(22)		(22)
06/30/2015	(29)	((29)
06/30/2016	(2,016)	·	(2,016)
06/30/2017	(133,867)		(133,867)
06/30/2018	(65,663)		(65,663)
TOTAL	(201,658)	-	(201,658)

154,912.

ATTACHMENT 4

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

DOMESTIC PRODUCTION ACTIVITIES DEDUCTION UNDER SECTION 199

UTILITIES - SCHNEIDER ARENA	76,032.
SUPPLIES	 15,974.
OTHER EXPENSES - SCHNEIDER ARENA	6,931.
TAX PROFESSIONAL FEES	43,661.
SERVICE CONTRACTS	1,848.
INVESTMENT MANAGEMENT FEES	10,466.

PART II - LINE 28 - OTHER DEDUCTIONS

PROVIDENCE COLLEGE FOR THE YEAR ENDED 06/30/2018 EIN: 05-0258932

ATTACHMENT TO 990-T, PART IV, LINE 43 - IRC SECTION 965 TRANSITION TAX

PROVIDENCE COLLEGE HAS MADE INVESTMENTS IN A NUMBER OF LIMITED PARTNERSHIPS WHICH HAVE DISCLOSED 965 TRANSITION TAX INCOME AND DEDUCTION AMOUNTS. THE TOTALS OF THE AMOUNTS REPORTED BY THESE PARTNERSHIPS TO PROVIDENCE COLLEGE ARE REPORTED ON THE ATTACHED IRC 965 TRANSITION TAX STATEMENT. 965 INCLUSION AMOUNTS CONSIDERED UNRELATED BUSINESS ARE PRESENTED BELOW FOR THE PURPOSES OF CALCULATING PROVIDENCE COLEGE'S 965 TRANSITION TAX. THIS TAX IS REPORTED ON THE COLLEGE'S 990-T, PART VI, LINE 43.

<u>ITEM</u>	<u>AMOUNT</u>
AMOUNT OF 965(A) INCOME CONSIDERED UNRELATED BUSINESS INCOME	10
AMOUNT OF 965(C) DEDUCTIONS ATTRIBUTABLE TO 965(A) UBI	4
NET 965 UNRELATED BUSINESS INCOME	6
CURRENT YEAR LOSS:	(6)
NET 965 UBI AFTER NOL:	0
965 TRANSITION TAX:	0

PROVIDENCE COLLEGE 05-0258932

FORM 990T - PART II - LINE 31 - NET OPERATING LOSS CARRY FORWARD

	AMOUNT	AMOUNT	AMOUNT	AMOUNT
YEAR	GENERATED	UTILIZED	EXPIRED	REMAINING
JUNE 30, 1999	21,407			21,407
JUNE 30, 2000	96,098			96,098
JUNE 30, 2002	43,400			43,400
JUNE 30, 2003	94,790			94,790
JUNE 30, 2004	12,481			12,481
JUNE 30, 2008	29,095			29,095
JUNE 30, 2009	14,308			14,308
JUNE 30, 2010	37,224			37,224
JUNE 30, 2011	19,522			19,522
JUNE 30, 2012	135,808			135,808
JUNE 30, 2013	46,599			46,599
JUNE 30, 2014	144,044			144,044
JUNE 30, 2015	185,835			185,835
JUNE 30, 2016	65,082			65,082
JUNE 30, 2017	80,046			80,046
JUNE 30, 2018	108,383	6		108,377
TOTALS	1,134,122	6	-	1,134,116

^{*} Current year utilization includes \$6 utilized against Section 965 unrelated business income. See attachment 6