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Form 990-T

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

OMB No 1545-0047

2019

For calendar year 2019 or other tax year beginning JUL 1, 2019, and ending JUN 30, 2020

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

Department of the Treasury  
Internal Revenue ServiceA ☐ Check box if address changed

B Exempt under section

☒ 501(c)(3) 03☐ 408(e) ☐ 220(e)☐ 408A ☐ 530(a)☐ 529(a)

Print or Type

Name of organization ( ☐ Check box if name changed and see instructions.)

JOHNSON &amp; WALES UNIVERSITY

Number, street, and room or suite no. If a P.O. box, see instructions.

8 ABBOTT PARK PLACE

City or town, state or province, country, and ZIP or foreign postal code

PROVIDENCE, RI 02903

D Employer identification number (Employees' trust, see instructions)

05-0306206

E Unrelated business activity code (See instructions)

523000

C Book value of all assets at end of year

913,541,997.

F Group exemption number (See instructions.)

G Check organization type ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust

H Enter the number of the organization's unrelated trades or businesses.

4

Describe the only (or first) unrelated

trade or business here SEE STATEMENT 1

If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?

☐ Yes ☒ No

If "Yes," enter the name and identifying number of the parent corporation.

The books are in care of MARIA RIX

Telephone number (401) 598-2964

## Part I Unrelated Trade or Business Income

	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales 6,836,056.			
b Less returns and allowances - Balance	1c 6,836,056.		
2 Cost of goods sold (Schedule A, line 7)	2 226,978.		
3 Gross profit. Subtract line 2 from line 1c	3 6,609,078.		6,609,078.
4a Capital gain net income (attach Schedule D)	4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c 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		
Unrelated debt-financed income (Schedule E)	7		
Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8		
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)	11		
12 Other income (See instructions; attach schedule)	12		
13 Total. Combine lines 3 through 12	13 6,609,078.		6,609,078.

## Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions)

(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	1,936,251.
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule) (see instructions)	18	109,014.
19 Taxes and licenses	19	472,886.
20 Depreciation (attach Form 4562)	20	315,478.
21 Less depreciation claimed on Schedule A and elsewhere on return	21a	315,478.
22 Depletion	22	
23 Contributions to deferred compensation plans	23	60,949.
24 Employee benefit programs	24	406,311.
25 Excess exempt expenses (Schedule I)	25	
26 Excess readership costs (Schedule J)	26	
27 Other deductions (attach schedule)	27	2,401,958.
28 Total deductions. Add lines 14 through 27	28	5,702,847.
29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	906,231.
30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	30	0.
31 Unrelated business taxable income. Subtract line 30 from line 29	31	906,231.

SEE STATEMENT 2

SEE STATEMENT 3

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SEP 16 2021

OGDEN, UTAH

**Part III Total Unrelated Business Taxable Income**

32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	32	1,641,654.
33	Amounts paid for disallowed fringes		33	
34	Charitable contributions (see instructions for limitation rules) STMT 4 STMT 5	4	34	45,492.
35	Total unrelated business taxable income before pre 2018 NOLs and specific deduction Subtract line 34 from the sum of lines 32 and 33	5	35	1,596,162.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)		36	
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	7	37	1,596,162.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	8	38	1,000.
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37, enter the smaller of zero or line 37	11	39	1,595,162.

**Part IV Tax Computation**

40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	1	40	334,984.
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)		41	
42	Proxy tax. See instructions		42	
43	Alternative minimum tax (trusts only)		43	
44	Tax on Noncompliant Facility Income. See instructions		44	
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	7	45	334,984.

**Part V Tax and Payments**

46a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	46a	
b	Other credits (see instructions)	46b	
c	General business credit. Attach Form 3800	46c	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	46d	
e	Total credits. Add lines 46a through 46d	46e	
47	Subtract line 46e from line 45	47	334,984.
48	Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	48	
49	Total tax. Add lines 47 and 48 (see instructions)	49	334,984.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	0.
51a	Payments: A 2018 overpayment credited to 2019	51a	198,773.
b	2019 estimated tax payments	51b	300,000.
c	Tax deposited with Form 8868	51c	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	51d	2,595.
e	Backup withholding (see instructions)	51e	
f	Credit for small employer health insurance premiums (attach Form 8941)	51f	
g	Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other	51g	
52	Total payments. Add lines 51a through 51g	52	501,368.
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	53	
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	166,384.
56	Enter the amount of line 55 you want: Credited to 2020 estimated tax 166,384. Refunded	56	0.

**Part VI Statements Regarding Certain Activities and Other Information** (see instructions)

57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority 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 foreign country here	Yes	No
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
59	Enter the amount of tax-exempt interest received or accrued during the tax year \$		

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer [Signature] Date 8/31/21 Title TREASURER & VICE CHANCELLOR

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
LYNNE JOHNSON	<u>[Signature]</u>	5/11/2021		P00757336
Firm's name	Firm's EIN			
RSM US LLP	42-0714325			
Firm's address	Phone no.			
80 CITY SQUARE BOSTON, MA 02129-3742	617-912-9000			

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation **COST**

1	Inventory at beginning of year	1	17,117.	6	Inventory at end of year	6	14,048.
2	Purchases	2	223,909.	7	Cost of goods sold Subtract line 6 from line 5. Enter here and in Part I, line 2	7	226,978.
3	Cost of labor	3		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a	Additional section 263A costs (attach schedule)	4a					
b	Other costs (attach schedule)	4b					X
5	Total Add lines 1 through 4b	5	241,026.				

**Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

**1** Description of property

(1)	
(2)	
(3)	
(4)	

**2** 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%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total 0.	Total 0.	

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)

**(b) Total deductions**

Enter here and on page 1, Part I, line 6, column (B)

0.

0.

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A) 0.	Enter here and on page 1, Part I, line 7, column (B) 0.
Total dividends-received deductions included in column 8			0.	0.

Form 990-T (2019)

**Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1 Name of controlled organization		Exempt Controlled Organizations			
2 Employer identification number	3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5 Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5	
(1)					
(2)					
(3)					
(4)					

  

Nonexempt Controlled Organizations				
7 Taxable income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)
<b>Totals</b>			0.	0.

**Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A)	Enter here and on page 1, Part I, line 9, column (B)	
<b>Totals</b>		0.	0.	

**Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)	Enter here and on page 1, Part II, line 25		
<b>Totals</b>		0.	0.	0.		

**Schedule J - Advertising Income** (see instructions)**Part I Income From Periodicals Reported on a Consolidated 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)						
<b>Totals (carry to Part II, line (5))</b>		0.	0.			0.

**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)						
<b>Totals from Part I</b>	0.	0.				0.
<b>Totals, Part II (lines 1-5)</b>	Enter here and on page 1, Part I, line 11, col (A) 0.	Enter here and on page 1, Part I, line 11, col (B) 0.				Enter here and on page 1, Part II, line 26 0.

**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)		%	
<b>Total</b> Enter here and on page 1, Part II, line 14			0.

Form 990-T, Line 51d - Foreign Tax Withholding

Foreign Taxes Withheld

Dover Street VIII Cayman Fund L P	1,922
SHC Holdings LTD	673

2,595

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FORM 990-T	DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY	STATEMENT 1
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THE UNIVERSITY HAS A HOTEL AND ITS OPERATIONS GENERATE UNRELATED BUSINESS INCOME.

TO FORM 990-T, PAGE 1

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 3
DESCRIPTION		AMOUNT
ADVERTISING		429,745.
MANAGER EXPENSE		33,216.
CONTRACTED SERVICES		167,845.
SUPPLIES		19,673.
TRAVEL		15,856.
STAFF TRAINING		609.
OFFICE EXPENSES		105,723.
EQUIPMENT RENTAL		6,029.
OPERATING SUPPLIES		89,802.
BANK FEES		211,212.
RESERVATION FEES		24,744.
LEGAL FEES		600.
CONSULTING		78,972.
MANAGEMENT		259,759.
ACCOUNTING		57,742.
ROYALTIES		142,189.
PROFESSIONAL DUES		9,144.
INSURANCE		57,048.
MAINTENANCE & SUPPLIES		471,749.
UTILITIES		201,142.
OCCUPANCY		19,159.
TOTAL TO FORM 990-T, PAGE 1, LINE 27		2,401,958.

## FORM 990-T

## CONTRIBUTIONS

## STATEMENT 4

DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
CASH CONTRIBUTIONS (50%) FROM SCH. K-1S	N/A	20.
UNITED STATES CHALLENGE CUP	N/A	2,500.
FLORIDA RESTAURANT & LODGING ASSOCIATION EDUCATIONAL FOUNDATION	N/A	11,000.
CHARLOTTE FIREFIGHTER'S ASSOCIATION	N/A	350.
GREATER HOSPITALITY & TOURISM ALLIANCE	N/A	480.
CHARLOTTE MECKLENBURG LIBRARY FOUNDATION	N/A	450.
GREATER HOSPITALITY & TOURISM ALLIANCE	N/A	600.
CHARLOTTE REGIONAL BUSINESS ALLIANCE	N/A	792.
RI PUBLIC EXPENDITURE COUNCIL	N/A	4,299.
UNITED WAY ( CHECKS PAID FROM A/P)	N/A	25,000.
CASH CONTRIBUTIONS (30%) FROM SCH. K-1S	N/A	1.
TOTAL TO FORM 990-T, PAGE 2, LINE 34		45,492.



## FORM 990-T

## CONTRIBUTIONS SUMMARY

## STATEMENT 5

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT  
QUALIFIED CONTRIBUTIONS SUBJECT TO 25% LIMIT

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS  
FOR TAX YEAR 2014  
FOR TAX YEAR 2015  
FOR TAX YEAR 2016  
FOR TAX YEAR 2017  
FOR TAX YEAR 2018

TOTAL CARRYOVER

TOTAL CURRENT YEAR 10% CONTRIBUTIONS

45,492

TOTAL CONTRIBUTIONS AVAILABLE

45,492

TAXABLE INCOME LIMITATION AS ADJUSTED

164,065

EXCESS CONTRIBUTIONS

0

EXCESS 100% CONTRIBUTIONS

0

TOTAL EXCESS CONTRIBUTIONS

0

ALLOWABLE CONTRIBUTIONS DEDUCTION

45,492

TOTAL CONTRIBUTION DEDUCTION

45,492

**SCHEDULE M  
(Form 990-T)**

**Unrelated Business Taxable Income from an  
Unrelated Trade or Business**

ENTITY

1

OMB No 1545-0047

**2019**

Department of the Treasury  
Internal Revenue Service

For calendar year 2019 or other tax year beginning JUL 1, 2019 and ending JUN 30, 2020

▶ Go to [www.irs.gov/Form990T](http://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

Name of the organization

JOHNSON & WALES UNIVERSITY

Employer identification number

05-0306206

Unrelated Business Activity Code (see instructions) ▶ 52

Describe the unrelated trade or business ▶ UBTI FROM QUALIFYING PARTNERSHIP INTERESTS

<b>Part I Unrelated Trade or Business Income</b>		(A) Income	(B) Expenses	(C) Net
<b>1 a</b> Gross receipts or sales				
<b>b</b> Less returns and allowances				
<b>c Balance ▶</b>	<b>1c</b>			
<b>2</b> Cost of goods sold (Schedule A, line 7)	<b>2</b>			
<b>3</b> Gross profit Subtract line 2 from line 1c	<b>3</b>			
<b>4 a</b> Capital gain net income (attach Schedule D)	<b>4a</b>	18,249.		18,249.
<b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4b</b>	-2,279.		-2,279.
<b>c</b> Capital loss deduction for trusts	<b>4c</b>			
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement) <u>STATEMENT 6</u>	<b>5</b>	60,066.		60,066.
<b>6</b> Rent income (Schedule C)	<b>6</b>			
<b>7</b> Unrelated debt-financed income (Schedule E)	<b>7</b>			
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	<b>8</b>			
<b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>			
<b>10</b> Exploited exempt activity income (Schedule I)	<b>10</b>			
<b>11</b> Advertising income (Schedule J)	<b>11</b>			
<b>12</b> Other income (See instructions, attach schedule)	<b>12</b>			
<b>13 Total.</b> Combine lines 3 through 12	<b>13</b>	76,036.		76,036.

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)

<b>14</b> Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>	
<b>15</b> Salaries and wages	<b>15</b>	
<b>16</b> Repairs and maintenance	<b>16</b>	
<b>17</b> Bad debts	<b>17</b>	
<b>18</b> Interest (attach schedule) (see instructions)	<b>18</b>	
<b>19</b> Taxes and licenses	<b>19</b>	4,966.
<b>20</b> Depreciation (attach Form 4562)	<b>20</b>	
<b>21</b> Less depreciation claimed on Schedule A and elsewhere on return	<b>21a</b>	
<b>22</b> Depletion	<b>22</b>	
<b>23</b> Contributions to deferred compensation plans	<b>23</b>	
<b>24</b> Employee benefit programs	<b>24</b>	
<b>25</b> Excess exempt expenses (Schedule I)	<b>25</b>	
<b>26</b> Excess readership costs (Schedule J)	<b>26</b>	
<b>27</b> Other deductions (attach schedule)	<b>27</b>	
<b>28 Total deductions.</b> Add lines 14 through 27	<b>28</b>	4,966.
<b>29</b> Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13	<b>29</b>	71,070.
<b>30</b> Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	<b>30</b>	0.
<b>31</b> Unrelated business taxable income Subtract line 30 from line 29	<b>31</b>	71,070.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

## FORM 990-T (M)

## INCOME (LOSS) FROM PARTNERSHIPS

## STATEMENT 6

DESCRIPTION	NET INCOME OR (LOSS)
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VI, LP - ORDINARY BUSINESS INCOME	-4,158.
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VI, LP - NET RENTAL REAL ESTATE I	-87.
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VI, LP - INTEREST INCOME	1,485.
COMMONFUND CAPITAL PRIVATE EQUITY PARTNERS VI, LP - OTHER INCOME (LOSS)	2,519.
COMMONFUND CAPITAL VENTURE PARTNERS VII, LP - OTHER INCOME (LOSS)	-20.
COMMONFUND CAPITAL VENTURE PARTNERS VIII, LP - OTHER INCOME (LOSS)	-8.
COMMONFUND CAPITAL VENTURE PARTNERS IX, LP - ORDINARY BUSINESS INCOME (LOSS)	306.
COMMONFUND CAPITAL VENTURE PARTNERS IX, LP - NET RENTAL REAL ESTATE INCOME	4.
COMMONFUND CAPITAL VENTURE PARTNERS IX, LP - OTHER INCOME (LOSS)	-289.
PARK STREET CAPITAL NATURAL RESOURCE FUND II, LP - ORDINARY BUSINESS INCOME	434.
PARK STREET CAPITAL NATURAL RESOURCE FUND II, LP - NET RENTAL REAL ESTATE IN	1.
PARK STREET CAPITAL NATURAL RESOURCE FUND II, LP - INTEREST INCOME	4.
PARK STREET CAPITAL NATURAL RESOURCE FUND II, LP - ROYALTIES	128.
PARK STREET CAPITAL NATURAL RESOURCE FUND II, LP - OTHER INCOME (LOSS)	-919.
PARK STREET CAPITAL NATURAL RESOURCE FUND III, LP - ORDINARY BUSINESS INCOME	11,346.
PARK STREET CAPITAL NATURAL RESOURCE FUND IV - ORDINARY BUSINESS INCOME (LOS	23,809.
PARK STREET CAPITAL NATURAL RESOURCE FUND IV - NET RENTAL REAL ESTATE INCOME	2.
PARK STREET CAPITAL NATURAL RESOURCE FUND IV - INTEREST INCOME	13.
PARK STREET CAPITAL NATURAL RESOURCE FUND IV - ROYALTIES	430.
PARK STREET CAPITAL NATURAL RESOURCE FUND IV - OTHER INCOME (LOSS)	-12,901.
PARK STREET CAPITAL NATURAL RESOURCES FUND V, LP - ORDINARY BUSINESS INCOME	12,386.
PARK STREET CAPITAL NATURAL RESOURCES FUND V, LP - NET RENTAL REAL ESTATE IN	2.
PARK STREET CAPITAL NATURAL RESOURCES FUND V, LP - INTEREST INCOME	21.
PARK STREET CAPITAL NATURAL RESOURCES FUND V, LP - ROYALTIES	386.
PARK STREET CAPITAL NATURAL RESOURCES FUND V, LP - OTHER INCOME (LOSS)	-32,876.
PARK STREET CAPITAL PRIVATE EQUITY FUND V, LP - ORDINARY BUSINESS INCOME (LO	49.

## JOHNSON &amp; WALES UNIVERSITY

05-0306206

PARK STREET CAPITAL PRIVATE EQUITY FUND VI, LP - ORDINARY BUSINESS INCOME (L	-622.
PARK STREET CAPITAL PRIVATE EQUITY FUND VI, LP - OTHER INCOME (LOSS)	-12.
PARK STREET CAPITAL PRIVATE EQUITY FUND VIII, LP - ORDINARY BUSINESS INCOME	16,702.
PARK STREET CAPITAL PRIVATE EQUITY FUND VIII, LP - NET RENTAL REAL ESTATE IN	-33.
PARK STREET CAPITAL PRIVATE EQUITY FUND VIII, LP - INTEREST INCOME	14.
PARK STREET CAPITAL PRIVATE EQUITY FUND VIII, LP - DIVIDEND INCOME	85.
PARK STREET CAPITAL PRIVATE EQUITY FUND VIII, LP - ROYALTIES	403.
PARK STREET CAPITAL PRIVATE EQUITY FUND VIII, LP - OTHER PORTFOLIO INCOME (L	-3,546.
PARK STREET CAPITAL PRIVATE EQUITY FUND IX, LP - ORDINARY BUSINESS INCOME (L	51,786.
PARK STREET CAPITAL PRIVATE EQUITY FUND IX, LP - NET RENTAL REAL ESTATE INCO	22.
PARK STREET CAPITAL PRIVATE EQUITY FUND IX, LP - OTHER NET RENTAL INCOME (LO	2.
PARK STREET CAPITAL PRIVATE EQUITY FUND IX, LP - INTEREST INCOME	54.
PARK STREET CAPITAL PRIVATE EQUITY FUND IX, LP - DIVIDEND INCOME	214.
PARK STREET CAPITAL PRIVATE EQUITY FUND IX, LP - ROYALTIES	318.
PARK STREET CAPITAL PRIVATE EQUITY FUND IX, LP - OTHER PORTFOLIO INCOME (LOS	10.
PARK STREET CAPITAL PRIVATE EQUITY FUND IX, LP - OTHER INCOME (LOSS)	-7,768.
SIGULER GUFF DISTRESSED OPPORTUNITIES FUND III, LP - ORDINARY BUSINESS INCOM	-5.
SIGULER GUFF DISTRESSED OPPORTUNITIES FUND III, LP - DIVIDEND INCOME	4.
SIGULER GUFF DISTRESSED OPPORTUNITIES FUND III, LP - OTHER INCOME (LOSS)	-4.
SIGULER GUFF DISTRESSED OPPORTUNITIES FUND IV, LP - ORDINARY BUSINESS INCOME	91.
SIGULER GUFF DISTRESSED OPPORTUNITIES FUND IV, LP - DIVIDEND INCOME	4.
SIGULER GUFF DISTRESSED OPPORTUNITIES FUND IV, LP - OTHER INCOME (LOSS)	-5.
TRUEBRIDGE-KAUFFMAN FELLOWS ENDOWMENT - ORDINARY BUSINESS INCOME (LOSS)	210.
TRUEBRIDGE-KAUFFMAN FELLOWS ENDOWMENT - INTEREST INCOME	90.
TRUEBRIDGE-KAUFFMAN FELLOWS ENDOWMENT - DIVIDEND INCOME	11.
TRUEBRIDGE-KAUFFMAN FELLOWS ENDOWMENT - OTHER INCOME (LOSS)	-26.

TOTAL INCLUDED ON SCHEDULE M, PART I, LINE 5

60,066.

**SCHEDULE M**  
**(Form 990-T)**

**Unrelated Business Taxable Income from an**  
**Unrelated Trade or Business**

ENTITY

2

OMB No. 1545-0047

**2019**

Department of the Treasury  
Internal Revenue Service

For calendar year 2019 or other tax year beginning JUL 1, 2019, and ending JUN 30, 2020

► Go to [www.irs.gov/Form990T](http://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

Name of the organization

JOHNSON & WALES UNIVERSITY

Employer identification number

05-0306206

Unrelated Business Activity Code (see instructions) ► 81

Describe the unrelated trade or business ► PARKING OPERATIONS AT NC GARAGE AND LOT

<b>Part I Unrelated Trade or Business Income</b>		<b>(A) Income</b>	<b>(B) Expenses</b>	<b>(C) Net</b>
<b>1a</b> Gross receipts or sales				
<b>b</b> Less returns and allowances				
<b>c</b> Balance ►	<b>1c</b>			
<b>2</b> Cost of goods sold (Schedule A, line 7)	<b>2</b>			
<b>3</b> Gross profit Subtract line 2 from line 1c	<b>3</b>			
<b>4a</b> Capital gain net income (attach Schedule D)	<b>4a</b>			
<b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4b</b>			
<b>c</b> Capital loss deduction for trusts	<b>4c</b>			
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement)	<b>5</b>			
<b>6</b> Rent income (Schedule C)	<b>6</b>			
<b>7</b> Unrelated debt-financed income (Schedule E)	<b>7</b>			
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	<b>8</b>			
<b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>			
<b>10</b> Exploited exempt activity income (Schedule I)	<b>10</b>			
<b>11</b> Advertising income (Schedule J)	<b>11</b>			
<b>12</b> Other income (See instructions, attach schedule) <b>STMT 7</b>	<b>12</b>	1,237,436.		1,237,436.
<b>13</b> Total. Combine lines 3 through 12	<b>13</b>	1,237,436.		1,237,436.

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)

<b>14</b> Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>	
<b>15</b> Salaries and wages	<b>15</b>	92,328.
<b>16</b> Repairs and maintenance	<b>16</b>	45,559.
<b>17</b> Bad debts	<b>17</b>	
<b>18</b> Interest (attach schedule) (see instructions)	<b>18</b>	
<b>19</b> Taxes and licenses	<b>19</b>	18,138.
<b>20</b> Depreciation (attach Form 4562)	<b>20</b>	153,728.
<b>21</b> Less depreciation claimed on Schedule A and elsewhere on return	<b>21a</b>	
<b>22</b> Depletion	<b>22</b>	
<b>23</b> Contributions to deferred compensation plans	<b>23</b>	
<b>24</b> Employee benefit programs	<b>24</b>	18,036.
<b>25</b> Excess exempt expenses (Schedule I)	<b>25</b>	
<b>26</b> Excess readership costs (Schedule J)	<b>26</b>	
<b>27</b> Other deductions (attach schedule) <b>SEE STATEMENT 8</b>	<b>27</b>	251,410.
<b>28</b> Total deductions. Add lines 14 through 27	<b>28</b>	579,199.
<b>29</b> Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13	<b>29</b>	658,237.
<b>30</b> Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	<b>30</b>	0.
<b>31</b> Unrelated business taxable income Subtract line 30 from line 29	<b>31</b>	658,237.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

## FORM 990-T (M)

## OTHER INCOME

## STATEMENT 7

## DESCRIPTION

## AMOUNT

PARKING OPERATIONS INCOME

1,237,436.

TOTAL TO SCHEDULE M, PART I, LINE 12

1,237,436.

## FORM 990-T (M)

## OTHER DEDUCTIONS

## STATEMENT 8

## DESCRIPTION

## AMOUNT

PROMO-GENERAL

504.

UNIFORMS

842.

TRAVEL-GENERAL

49.

OFFICE SUPPLIES

2,023.

PRINTING

403.

TELEPHONE

16,619.

OPERATING SUPPLIES

2,488.

BANK/ATM FEES

29,526.

PROPERTY TAX

111,001.

MANAGEMENT FEES

19,424.

INSURANCE EXPENSE

32,435.

MISCELLANEOUS EXPENSE

-15,226.

GROUNDS GENERAL

1,842.

UTILITIES

25,679.

ELEVATORS

237.

LIFE SAFETY

23,564.

TOTAL TO SCHEDULE M, PART II, LINE 27

251,410.

**SCHEDULE M**  
**(Form 990-T)**

**Unrelated Business Taxable Income from an**  
**Unrelated Trade or Business**

ENTITY

3

OMB No 1545-0047

**2019**

Department of the Treasury  
Internal Revenue Service

For calendar year 2019 or other tax year beginning JUL 1, 2019, and ending JUN 30, 2020

► Go to [www.irs.gov/Form990T](http://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

Name of the organization

JOHNSON & WALES UNIVERSITY

Employer identification number

05-0306206

Unrelated Business Activity Code (see instructions) ► 53

Describe the unrelated trade or business ► FACILITY RENTALS WITH SERVICES

<b>Part I</b> Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
<b>1 a</b> Gross receipts or sales				
<b>b</b> Less returns and allowances				
<b>c</b> Balance	<b>1c</b>			
<b>2</b> Cost of goods sold (Schedule A, line 7)	<b>2</b>			
<b>3</b> Gross profit Subtract line 2 from line 1c	<b>3</b>			
<b>4 a</b> Capital gain net income (attach Schedule D)	<b>4a</b>			
<b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4b</b>			
<b>c</b> Capital loss deduction for trusts	<b>4c</b>			
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement)	<b>5</b>			
<b>6</b> Rent income (Schedule C)	<b>6</b>			
<b>7</b> Unrelated debt-financed income (Schedule E)	<b>7</b>			
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	<b>8</b>			
<b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>			
<b>10</b> Exploited exempt activity income (Schedule I)	<b>10</b>			
<b>11</b> Advertising income (Schedule J)	<b>11</b>			
<b>12</b> Other income (See instructions, attach schedule) <b>STMT 9</b>	<b>12</b>	6,368.		6,368.
<b>13</b> Total. Combine lines 3 through 12	<b>13</b>	6,368.		6,368.

**Part II** Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)

<b>14</b> Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>	
<b>15</b> Salaries and wages	<b>15</b>	
<b>16</b> Repairs and maintenance	<b>16</b>	
<b>17</b> Bad debts	<b>17</b>	
<b>18</b> Interest (attach schedule) (see instructions)	<b>18</b>	
<b>19</b> Taxes and licenses	<b>19</b>	252.
<b>20</b> Depreciation (attach Form 4562)	<b>20</b>	
<b>21</b> Less depreciation claimed on Schedule A and elsewhere on return	<b>21a</b>	
<b>22</b> Depletion	<b>22</b>	
<b>23</b> Contributions to deferred compensation plans	<b>23</b>	
<b>24</b> Employee benefit programs	<b>24</b>	
<b>25</b> Excess exempt expenses (Schedule I)	<b>25</b>	
<b>26</b> Excess readership costs (Schedule J)	<b>26</b>	
<b>27</b> Other deductions (attach schedule)	<b>27</b>	
<b>28</b> Total deductions. Add lines 14 through 27	<b>28</b>	252.
<b>29</b> Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13	<b>29</b>	6,116.
<b>30</b> Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	<b>30</b>	0.
<b>31</b> Unrelated business taxable income Subtract line 30 from line 29	<b>31</b>	6,116.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

FORM 990-T (M)

OTHER INCOME

STATEMENT 9

DESCRIPTIONAMOUNT

FACILITY RENTAL WITH SERVICES

6,368.

TOTAL TO SCHEDULE M, PART I, LINE 12

6,368.



**Capital Gains and Losses**  
▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L,  
1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.  
▶ Go to [www.irs.gov/Form1120](http://www.irs.gov/Form1120) for instructions and the latest information

OMB No. 1545-0123

**2019**

Name **JOHNSON & WALES UNIVERSITY** Employer identification number **05-0306206**

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ☐ Yes ☒ No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss

**Part I Short-Term Capital Gains and Losses** (See instructions.)

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 whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
<b>1a</b> 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				
<b>1b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked				
<b>2</b> Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked				
<b>3</b> Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked				850.
<b>4</b> Short-term capital gain from installment sales from Form 6252, line 26 or 37				<b>4</b>
<b>5</b> Short-term capital gain or (loss) from like-kind exchanges from Form 8824				<b>5</b>
<b>6</b> Unused capital loss carryover (attach computation)				<b>6</b> ( )
<b>7</b> Net short-term capital gain or (loss). Combine lines 1a through 6 in column h				<b>7</b> 850.

**Part II Long-Term Capital Gains and Losses** (See instructions.)

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 whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g)
<b>8a</b> 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				
<b>8b</b> Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked				
<b>9</b> Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked				
<b>10</b> Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked				17,399.
<b>11</b> Enter gain from Form 4797, line 7 or 9				<b>11</b>
<b>12</b> Long-term capital gain from installment sales from Form 6252, line 26 or 37				<b>12</b>
<b>13</b> Long-term capital gain or (loss) from like-kind exchanges from Form 8824				<b>13</b>
<b>14</b> Capital gain distributions				<b>14</b>
<b>15</b> Net long-term capital gain or (loss). Combine lines 8a through 14 in column h				<b>15</b> 17,399.

**Part III Summary of Parts I and II**

<b>16</b> Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)	<b>16</b>	850.
<b>17</b> Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)	<b>17</b>	17,399.
<b>18</b> Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns	<b>18</b>	18,249.

Note: If losses exceed gains, see *Capital Losses* in the instructions.

## Sales and Other Dispositions of Capital Assets

OMB No 1545-0074

2019

Attachment Sequence No **12A**

▶ Go to [www.irs.gov/Form8949](http://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

Social security number or taxpayer identification no.

05-0306206

JOHNSON &amp; WALES UNIVERSITY

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
- ☒ (C) Short-term transactions not reported to you on Form 1099-B

[illegible]

**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 **4562****Depreciation and Amortization**  
(Including Information on Listed Property)

990-T

OMB No. 1545-0172

**2019**Attachment  
Sequence No **179**Department of the Treasury  
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

JOHNSON &amp; WALES UNIVERSITY

FORM 990-T PAGE 1

05-0306206

**Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I

1	Maximum amount (see instructions)	1	1,020,000.
2	Total cost of section 179 property placed in service (see instructions)	2	73,358.
3	Threshold cost of section 179 property before reduction in limitation	3	2,550,000.
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	0.
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	1,020,000.
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
	FURNITURE & EQUIPMENT	43,069.	43,069.
	COMPUTER EQUIPMENT	30,289.	30,289.
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	73,358.
9	Tentative deduction Enter the smaller of line 5 or line 8	9	73,358.
10	Carryover of disallowed deduction from line 13 of your 2018 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5	11	1,020,000.
12	Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11	12	73,358.
13	Carryover of disallowed deduction to 2020 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

**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	204,540.

**Part III MACRS Depreciation (Don't include listed property. See instructions.)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2019	17	37,558.
18	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 2019 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		SL	
h Residential rental property	/		27.5 yrs	MM	SL	
	/		27.5 yrs	MM	SL	
i Nonresidential real property	06 / 20	20,777.	39 yrs	MM	SL	22.
	/			MM	SL	

**Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System**

20a Class life					SL	
b 12-year			12 yrs		SL	
c 30-year	/		30 yrs	MM	SL	
d 40-year	/		40 yrs	MM	SL	

**Part IV Summary (See instructions)**

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr	22	315,478.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**Part V**

**Listed Property** (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

**Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

**24a** Do you have evidence to support the business/investment use claimed? ☐ **Yes** ☐ **No** **24b** If "Yes," is the evidence written? ☐ **Yes** ☐ **No**

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	-------------------------------------	--	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

**25** Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use **25**

**26** Property used more than 50% in a qualified business use

		%						
		%						
		%						

**27** Property used 50% or less in a qualified business use

		%				S/L		
		%				S/L		
		%				S/L		

**28** Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 **28**

**29** Add amounts in column (i), line 26. Enter here and on line 7, page 1 **29**

**Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle	(b) Vehicle	(c) Vehicle	(d) Vehicle	(e) Vehicle	(f) Vehicle
<b>30</b> Total business/investment miles driven during the year (don't include commuting miles)						
<b>31</b> Total commuting miles driven during the year						
<b>32</b> Total other personal (noncommuting) miles driven						
<b>33</b> Total miles driven during the year Add lines 30 through 32						
<b>34</b> Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person?						
<b>36</b> Is another vehicle available for personal use?						

**Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees**

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons.

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
<b>38</b> Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.		
<b>39</b> Do you treat all use of vehicles by employees as personal use?		
<b>40</b> Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use?		

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

**Part VI****Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
-----------------------------	------------------------------------	------------------------------	------------------------	---	--------------------------------------

**42** Amortization of costs that begins during your 2019 tax year


**43** Amortization of costs that began before your 2019 tax year **43**

**44** Total. Add amounts in column (f). See the instructions for where to report **44**