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	Form	990-T			unc	der section 6033(e	190	9		1545-0687		
			For cale	ndar year 2018 or other tax year beginn Go to www.irs.gov/Form9901	0 1 9	2	918					
	•	nent of the Treasury		Open to Pu	blic Inspection for							
	internal	Revenue Service	Do Do	not enter SSN numbers on this form a			blic Inspection for rganizations Only ation number					
	A L_	Check box if address changed]	(Employees' trust, sec								
		mpt under section	l	ST JOHN'S UNIVERSIT	'Υ,	NEW YORK						
	X	501(C <u>103</u>)	Print	Number, street, and room or suite no. If	аРО	box, see instructions	ļ		630830			
		408(e) 220(e)	Type				ĺ		lated busines nstructions)	s activity code		
		408A530(a)		8000 UTOPIA PARKWAY				,555	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	السل	529(a)		City or town, state or province, country	, and Z	IP or foreign postal code	}					
		k value of all assets nd of year	<u></u>	JAMAICA, NY 11439					523	000		
		,		up exemption number (See instruction			<u>-</u>					
	1	492505023.	G Che	ck organization type 🕨 X 5016	(c) cor	rporation 501(c)	trust	401(a)	trust	Other trust		
				nization's unrelated trades or busines			Describe	the onl	y (or first) un	related		
	tra	de or business her	re ▶ <u>LIM</u>	IITED PARTNERSHIP INVE	STM	ENTS If only one, or	complete Parts I	V If mo	re than one, o	describe the		
	firs	st in the blank spa	ice at the	end of the previous sentence, con	nplete	Parts I and II, complete a Sc	hedule M for eac	h additio	onai			
		de or business, the										
	i Du	ring the tax year,	was the	corporation a subsidiary in an affilia	ated gr	roup or a parent-subsidiary co	ontrolled group?		▶ ∟_	Yes X No		
				identifying number of the parent cor	poration	on 🕨						
				ARON HEWITT WATKINS		Telephone	e number ▶ 71		-3369			
	Par	Unrelated	Trade (or Business Income		(A) Income	(B) Expen	ses		C) Net		
	1 a	Gross receipts or	sales						1			
	b	Less returns and allowa		c Balance	1c							
	2	Cost of goods so	ld (Sched	ule A, line 7)	2_				 			
	3			2 from line 1c . /.V.]	3_							
				ttach Schedule D)	4a							
				Part II, line 17) (attach Form 4797)	4b	-2,616.				-2,616.		
	c	Capital loss dedu	iction for t	rusts	4c	000 705						
	5			r an S corporation (attach statement)	5	-236,725.	ATCH 1			-236,725.		
	6				6							
	7	Unrelated debt-fit	nanced in	come (Schedule E)	7							
•	8	Interest annuities, roy-	alties, and re	ents from a controlled organization (Schedule F).	8	<u> </u>	I_RE(EIV	ÆD -	 		
•	9			1(c)(7), (9) or (17) organization (Schedule G)			m		-10	 		
	10			ncome (Schedule I)	10_		<u> </u>	91	2020	 		
•	11			dule J)	11		101 JOL	21 (WU 13	 		
•	12	•		ctions, attach schedule)	12	-239,341.	<u> </u>		<u> </u>	-239,341.		
	13	Total Combine li	nes 3 thr	ough 12	13			EN.	#T			
	Par			be directly connected with the				xcent	TOI CONTINU			
	14	•		directors, and trustees (Schedule K)					·			
	15											
	16	•			-			_				
	17							i i				
	18	•	-	(see instructions),				_		191.		
	19	Taxes and license	es				NCHMENT.	2 19				
	20			See instructions for limitation rules)			wculurin i	<u>20 20</u>	 			
	21			4562)		1-7-						
	22	Less depreciation	n claimed	on Schedule A and elsewhere on re	eturn		VCHWEYIU.	3 22				
	23	Depletion		• • • • • • • • • • • • • • • • • • • •			vicitiriti.	3 23				
	24	Contributions to	deferred	compensation plans				24				
	25			s								
	26			Schedule I)								
	27			Schedule J)						10 626		
	28			schedule)			FTAUHMENT	C) 28		19,636.		
	29			es 14 through 28				8 29		19,827.		
	30			ole income before net operating						-259,168.		
	31			ng loss arising in tax years beginning				31		.250 160		
	32 For F			le income Subtract line 31 from line Notice, see instructions	30 .	 	<u> </u>	1. 22		-259,168.		

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	990-T (20	· · · · · · · · · · · · · · · · · · ·						Page 2
Par	t III	Total Unrelated Business Taxable Income						
33		of unrelated business taxable income computed from all unrelated trades	•	- 1	1			
	ınstructi	tions)		· • [_	33			
34	Amount	ts paid for disallowed fringes		<u>L</u>	34			
35	Deducti	ion for net operating loss arising in tax years beginning before Janua	ary 1, 2018 (se	e	ì			
	instructi	kons),	CHMENT 5		35			
36		of unrelated business taxable income before specific deduction. Subtract line		_				
• •	_	33 and 34		- 1	36			
37		c deduction (Generally \$1,000, but see line 37 instructions for exceptions)		⊢	37			
38	•			· -	5,			
30		ted business taxable income Subtract line 37 from line 36 If line 37 is group in smaller of zero or line 36			38			0.
100					30			
		Tax Computation						
39	•	zations Taxable as Corporations Multiply line 38 by 21% (0 21)		· -	39			
40	Trusts	Taxable at Trust Rates. See instructions for tax computation		- 1	1			
	the amo	ount on line 38 from Tax rate schedule or Schedule D (Form 1041)		.▶ _	40			
41		ax. See instructions		· -	41			
42		tive minimum tax (trusts only)			42			
43	Tax on	Noncompliant Facility Income. See instructions		· • L	43			
44	Total. A	Add lines 41, 42, and 43 to line 39 or 40, whichever applies	<u></u>]	44			
Par	t V	Tax and Payments						
45 a	Foreign	tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a						_
		credits (see instructions)			- 1			
		Il business credit Attach Form 3800 (see instructions)						
		for prior year minimum tax (attach Form 8801 or 8827)		\neg	ł			
		redits. Add lines 45a through 45d		\dashv	15e			
46		ct line 45e from line 44			46			
47		xes Check if from Form 4255 Form 8611 Form 8697 Form 8866			47			_
								0.
48		ax. Add lines 46 and 47 (see instructions)			48			
49		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2		· · -	49			
		nts A 2017 overpayment credited to 2018						
		stimated tax payments		_				
		posited with Form 8868 50c		—				
		n organizations Tax paid or withheld at source (see instructions)		_				
е	Backup	withholding (see instructions)						
f	Credit f	for small employer health insurance premiums (attach Form 8941) 50f	· · · · · · · · · · · · · · · · · · ·	_	1			
g		redits, adjustments, and payments Form 2439			1			
	X F	form 4136 184. Other Total > 50g	X 18	4.	Ĭ			
51	Total p	ayments. Add lines 50a through 50g	<u>.</u>]_	51			184.
52	Estimat	ted tax penalty (see instructions) Check if Form 2220 is attached	▶	$\Box \Gamma$	52			
53		e. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed			53,			
54	Overpa	lyment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	5		54			184.
55	•	e amount of line 54 you want Credited to 2019 estimated tax > 184.	Refunded		55			
Pai		Statements Regarding Certain Activities and Other Informat						
56		time during the 2018 calendar year, did the organization have an interest				thority	Yes	No
•	•	financial account (bank, securities, or other) in a foreign country? If "Yes,"	•					
		Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter	-	•			· I	
		ITALY, SPAIN, FRANCE	i the name of the	116 11	oreign c	ouriu y	X	
	_							_X
57	During	the tax year, did the organization receive a distribution from, or was it the grantor of,	or transferor to, a fo	oreigi	n trust?.	• • •	•	 ^ -
		" see instructions for other forms the organization may have to file						
<u>58</u>		he amount of tax-exempt interest received or accrued during the tax year \blacktriangleright \$ 4, 620.					ــــــــــــــــــــــــــــــــــــــ	<u> </u>
	i to	Inder penalties of perjury, I declare that I have examined this return including accompanying schedules ar the correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which prepare		he bes	st of my k	nowledge	and be	lef it is
Sig	n 📗			Mav	the IRS	discus	s this	retum
Her	e 🚩	Sharon HWatkins 7/8/2020 VP BUS AFF	RS CFO/TREA		the pre			below
	_ 5	ynature of officer Date Title		(see	nstructions)	? X	Yes	No
		Print/Type preparer's name Preparer's signature Dai	te	heck	ıf	PTIN		
Paid		DEVIN L DUNCAN demotion 7	710100		ployed	P01	24952	21
	parer	Firm's name KPMG LLP			 -	3-55	6520	7
Use	Only	Firm's address ▶ 345 PARK AVENUE, NEW YORK, NY 10154-0102			no 212			

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Form **990-T** (2018)

Form 990-T (2018)								Pá	age 3
Schedule A - Cost of Go	ods Sold. Er	ter method	of invent						
1 Inventory at beginning of ye	ear . 1			6 Inventor	y at end of ye	ar	6	N/F	4
2 Purchases	2					old. Subtract line	1		
3 Cost of labor	3			6 from	line 5 Er	nter here and in	1		
4a Additional section 263A co	sts			Part I, lin	e2		7		
(attach schedule)	4a			8 Do the	rules of	section 263A (v	vith respec	t to Yes	No
b Other costs (attach schedul	e) . 4b					or acquired for			
5 Total. Add lines 1 through				to the or	ganization?.	<u></u>	<u></u>	<u>l</u>	X
Schedule C - Rent Income	(From Real P	roperty a	nd Perso	nal Propert	y Leased \	With Real Prope	rty)	N/A	Δ
(see instructions)									
1 Description of property									
(1)		· • · · ·							
(2)									
(3)									
(4)									
	2. Rent rece	ved or accrue	ed						
for personal property is more than 10% but not percentage			age of rent fo				rectly connected with the income a) and 2(b) (attach schedule)		
(1)			 -	· · · · · · · · · · · · · · · · · · ·					
(2)									
(3)		1							
(4)									
Total		Total							
(c) Total income. Add totals of cohere and on page 1, Part I, line 6,	• •					(b) Total deduction Enter here and or Part I, line 6, colui	n page 1,		
Schedule E - Unrelated De			e instructi	ions)	·	1 411, 1110 0, 00141	(2)	N/	/A
				income from or	3	Deductions directly co			
1 Description of deb	t-financed property			to debt-financed	(-) (2)		ced property		
			l p	roperty		ht line depreciation ach schedule)	(b) Other deductions (attach schedule)		
(1)	 								
(2)									
(3)					7				
(4)									
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adju of or alloca debt-financed (attach sch	ble to property	4	Column divided column 5		income reportable in 2 x column 6)	(column 6	able deductions is x total of column a) and 3(b))	ns
(1)					6				
(2)					6				
(3)					/6				
(4)					6				
Totals						re and on page 1, ne 7, column (A)	Enter her Part I, lir	re and on page ne 7, column (B)	1,)
Total dividends-received deducti	ions included in c	olumn 8		. <u></u> .					

Form 990-T (2018)

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

			-							-	
Form 990-T (2018)	ST. JOHN									30830	Page 4
Schedule F-Interest, Annu	ities, Royalties						ions (see	ınstructio	ns)		N/A
İ		Exe	mpt Co	ntrolled Org	ganizatio	ons					
1 Name of controlled organization	2 Employer identification number	51		related income 4 Total of specified payments made payments made 5 Part of column 4 that is included in the controlling organization's gross incompanies.			olling	6 Deductions directly connected with income in column 5			
(1)					- -						
(2)											
(3)											
(4)											
Nonexempt Controlled Organiz	ations										
7 Taxable Income	8 Net unrelated in (loss) (see instruct			otal of specific		ınclud	nt of column ed in the con zation's gross	trolling		Deductions on nected with in- column 10	come in
(1)											
(2)											
(3)											
(4)					-						
Totals					•	Enter	columns 5 ar here and on p I, line 8, colun	age 1,	Ente	d columns 6 a er here and on rt I, line 8, colui	page 1,
Schedule G-Investment In				(9), or (17) Orga	nization	(see insti	ructions)		· <u> </u>	N/A
1 Description of income	2 Amount of			3 Deduction directly contact (attach sch	tions inected		4 Set-asides (attach schedule)			5 Total deductions and set-asides (col 3 plus col 4)	
(1)										·	- ·
(2)									$\overline{}$		
(3)			<u> </u>								
(4)											
	Enter here and o Part I, line 9, co									Enter here and Part I, line 9, c	
Totals							 -				
Schedule I-Exploited Exe	mpt Activity In	come, O	ther Th	an Advert	ising Ir	icome (see instru	ctions)			N/A
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expe direct connecte product unrela business	ctly ed with tion of ated	4 Net incor from unrelat or business 2 minus co If a gain, c cols 5 thre	ted tradé (column lumn 3) ompute	from a	Gross income om activity that s not unrelated usiness income 6 Expenses attributable to column 5		ble to	7 Excess exper (column column 5 more colum	nses 6 minus , but not than
(1)										T	
(2)											
(3)		-									
(4)											
	Enter here and on page 1, Part I, line 10, col (A)	Enter here page 1, line 10, c	Part I,							Enter he on pa Part II, I	ge 1.
Totals											
Schedule J-Advertising In			C	detect D							77 / 7
Part I Income From Per	iodicais Report	ed on a	Consol	idated Bas	SIS	T					N/A
1 Name of periodical	2 Gross advertising income	3 Dı advertisir		4 Adver gain or (los 2 minus c a gain, co	ss) (col ol 3) If	,	rculation come	6 Reade cost		7 Excess costs (cominus columnot mo	olumn 6 ımn 5, but

Income From Periodicals Reported on a Consolidated Basis 4 Advertising 2 Gross gain or (loss) (col 3 Direct 5 Circulation 1 Name of periodical advertising 2 minus col 3) If advertising costs income income a gain, compute cols 5 through 7 column 4) (1) (2) (3) (4)

Form 990-T (2018)

Totals (carry to Part II, line (5))

Part II Income From Per 2 through 7 on a l	riodicals Repor ine-by-line basis	ted on a Separ s)	rate Basis (For e	each periodical	listed in Part II	, fill in columns N/A
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 (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶			<u> </u>		<u> </u>	
Schedule K - Compensation	n of Officers, D	irectors, and Tr	ustees (see instr	uctions)		N/A
1 Name		2	Title	3 Percent of time devoted to business	4 Compensation unrelated	
(1)				%		
(2)				%		
(3)				%		
(4)				%		
Total Enter here and on page 1, Page 1	art if, line 14					
						- 000 T

SCHEDULE D (Form 1120)

Capital Gains and Losses

OMB No 1545-0123

Department of the Treasury Internal Revenue Service

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T

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

2018

Name					Employ	er identification number
ST.	JOHN'S UNIVERSITY, NEW YORK				1	11-1630830
Part	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 or loss from For 8949, Part I, lin column (g)	m(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
1 b	Totals for all transactions reported on Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	344.				344.
4	Short-term capital gain from installment sales from F	Form 6252, line 26 or 3	·		. 4	
5	Short-term capital gain or (loss) from like-kind exchain	nges from Form 8824			. 5_	
6	Unused capital loss carryover (attach computation)		ATT	ACHMENT 8	. 6_	(13,692.)
	Net short-term capital gain or (loss) Combine lines		1	<u></u>	. 7_	-13,348.
Par	Long-Term Capital Gains and Losses See instructions for how to figure the amounts to enter on	(See instructions)		(g) Adjustments	to gain	(h) Gain or (loss)
	the lines below This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales pnce)	(e) Cost (or other basis)	or loss from For 8949, Part II, III	m(s)	Subtract column (e) from column (d) and combine the result with column (q)
- 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.			33.31.11(3)	 	
81	Totals for all transactions reported on Form(s) 8949 with Box D checked					
9	Totals for all transactions reported on Form(s) 8949 with Sox Echecked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked	13,348.				13,348.
		10,0101				13,510.
11	Enter gain from Form 4797, line 7 or 9				. 11	
12	Long-term capital gain from installment sales from F	Form 6252, line 26 or 37			. 12	
13	Long-term capital gain or (loss) from like-kind exchar	nges from Form 8824			. 13	
14	Capital gain distributions (see instructions)	• • • • • • • • • •			. 14	
15	Net long-term capital gain or (loss) Combine lines 8	a through 14 in column	h	· · · · · · · · · · · · · · · · · · ·	. 15	13,348.
TELL	Guinmary of Falls I and II				т	Ţ
16	Enter excess of net short-term capital gain (line 7) of	over net long-term capita	l loss (line 15)		. 16	!
17	Net capital gain Enter excess of net long-term capi					
18	Add lines 16 and 17 Enter here and on Form 1120 Note. If losses exceed gains, see Capital losses in the		proper line on other re	turns	. 18	L

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

Schedule D (Form 1120) 2018

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

2018

Department of the Treasury

For calendar year 2018 or other tax year beginning $\frac{-06/01}{}$, 2018, and ending $\frac{-05/31}{}$, 20 $\frac{1}{}$

► 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 501(c)(3)

Internal Revenue Service
Name of organization

ST. JOHN'S UNIVERSITY, NEW YORK

Employer identification number 11-1630830

Unrelated business activity code (see instructions) ► 722320

Describe the unrelated trade or business CATERING

Pa	t1 Unrelated Trade or Business Income	1	(A) Income	(B) Expenses	(C) Net	
1 a	Gross receipts or sales	\Box				
b	Less returns and allowances c Balance	1c				
2	Cost of goods sold (Schedule A, line 7)	2			<u> </u>	
3	Gross profit Subtract line 2 from line 1c	3				
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)	6				
7	Unrelated debt-financed income (Schedule E)					
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				
0	Exploited exempt activity income (Schedule I)					
1	Advertising income (Schedule J)					
2	Other income (See instructions, attach schedule) ATCH . 6 .	_	4,382.		4,382	
3	Total Combine lines 3 through 12		4,382.		4,382	

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		
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses		64.
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		
25	Employee benefit programs		
26	Excess exempt expenses (Schedule I).		
27	Excess readership costs (Schedule J)		
28	Other deductions (attach schedule)		5,747.
29	Total deductions. Add lines 14 through 28		5,811.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-1,429.
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		-1,429.
			

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For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2018

PAGE 82

Sales and Other Dispositions of Capital Assets

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

OMB No 1545-0074

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No 12A

lame(s) shown on return ST. JOHN'S UNIVERSITY, NEW YORK					Social security number or taxpayer identification number 11-1630830				
Before you check Box A, B, or C below, statement will have the same informat broker and may even tell you which bo.	ion as Form 10		, ,						
Part I Short-Term. Transactinstructions) For long Note: You may aggree reported to the IRS a Schedule D, line 1a	g-term transa egate all sho and for which	actions, see ort-term tran h no adjustr	page 2 sactions report nents or codes	ed on Form(s are required	s) 1099-B sh Enter the to	nowing basis wa otals directly on	as		
You must check Box A, B, or C be complete a separate Form 8949, for one or more of the boxes, com	low. Check of page 1, for emplete as mar	only one box. ach applicab ny forms with	If more than one le box if you hat the same box ch	e box applies f ve more short- ecked as you r	or your short term transac need	term transactions tions than will fit o	3,		
(A) Short-term transactions (B) Short-term transactions (C) Short-term transactions	reported on F	orm(s) 1099	-B showing basis			e Note above)			
(a) Description of property	(b) Date acquired	(c) Date sold or	Proceeds See the and see (sales price) In the see (nstructions)	Proceeds See	(e) Cost or other basis				
(Example 100 sh XYZ Co)	(Mo , day, yr)	disposed of (Mo, day, yr)		and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	Subtract column (e) from column (d) and combine the result with column (g)		
STCG FROM PARTNERSHIPS	VARIOUS	VARIOUS	344				344		
						<u> </u>			
	 								
					-		<u> </u>		
	-				,				
	 								
					-				
				- -	 				
2 Totals Add the amounts in columns negative amounts) Enter each total Schedule D, Ilne 1b (if Box A above	l here and inc	lude on your	344				344		

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. JSA 8X2615 1 000 5375KK 1985

above is checked), or line 3 (if Box C above is checked)

Form 8949 (2018)

1 0111 0343 (2010)	, and a more designed to 1211 . age 2
Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side	Social security number or taxpayer identification number
ST. JOHN'S UNIVERSITY, NEW YORK	11-1630830

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
1

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

1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales pnce)	(e) Cost or other basis See the Note below and see Column (e)	Adjustment, if If you enter an a enter a co See the sepa	(h) Gain or (loss) Subtract column (e) from column (d) and	
(Example 100 sh XYZ Co)	(Mo, day, yr)	(Mo , day, yr)	(see instructions)	in the separate	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
LTCG FROM PARTNERSHIPS	VARIOUS	VARIOUS	13,348				13,348
		,					
2 Totals. Add the amounts in columns							
negative amounts) Enter each total Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box	is checked), line	e 9 (if Box E	13,348				13,348

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 4136

Credit for Federal Tax Paid on Fuels

OMB No 1545-0162

2018
Attachment

Department of the Treasury
Internal Revenue Service (99)

► Go to www.irs.gov/Form4136 for instructions and the latest information.

Name (as shown on your income tax return)
ST. JOHN'S UNIVERSITY, NEW YORK

Taxpayer identification number

11-1630830

Caution: Claimant has the name and address of the person who sold the fuel to the claimant and the dates of purchase. For claims on lines 1c and 2b (type of use 13 or 14), 3d, 4c, and 5, claimant has not waived the right to make the claim. For claims on lines 1c and 2b (type of use 13 or 14), claimant certifies that a certificate has not been provided to the credit card issuer.

1	Nontaxable Use of Gasoline No	ote: CRN is credit reference number						
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN		
а	Off-highway business use		\$ 183)				
b	Use on a farm for farming purposes		183			362		
C	Other nontaxable use (see Caution above line	1)	183		\$			
А	Exported		194			411		

2 Nontaxable Use of Aviation Gasoline

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Use in commercial aviation (other than foreign trade)		\$ 15		\$	354_
b	Other nontaxable use (see Caution above line 1)		193			324
С	Exported		194			412
d	LUST tax on aviation fuels used in foreign trade		001			433

3 Nontaxable Use of Undyed Diesel Fuel

_	Claimant certifies that the diesel fuel did not contain vis Exception. If any of the diesel fuel included in this claim	lye, attach an explanatio	n and check here			
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a	Nontaxable use ATTACHMENT 9	13	\$ 243	1000	<i>r</i>	
b	Use on a farm for farming purposes		243	<i></i>	\$ 184	360
С	Use in trains		243			353
d	Use in certain intercity and local buses (see Caution					[
	above line 1)		17			350
е	Exported		244			413

4 Nontaxable Use of Undyed Kerosene (Other Than Kerosene Used in Aviation)

	Claimant certifies that the kerosene did not contain vis Exception. If any of the kerosene included in this claim	•	evidence of dye	e, attach an explanatio	on and check here	Γ
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Nontaxable use taxed at \$ 244		\$ 243			
b	Use on a farm for farming purposes		243		s	346
С	Use in certain intercity and local buses (see Caution					
	above line 1)	1	_ 17			347
d	Exported		244			414
6	Nontaxable use taxed at \$ 044		043			377
f	Nontaxable use taxed at \$ 219		218			369

For Paperwork Reduction Act Notice, see the separate instructions.

Form 4136 (2018)

5 Kerosene Used in Aviation (see Caution above line 1)

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Kerosene used in commercial aviation (other than foreign trade) taxed at \$ 244		\$ 200		\$	417
b	Kerosene used in commercial aviation (other than foreign trade) taxed at \$ 219		175			355
С	Nontaxable use (other than use by state or local government) taxed at \$ 244		243			346
d	Nontaxable use (other than use by state or local government) taxed at \$ 219		218			369
е	LUST tax on aviation fuels used in foreign trade		001			433

6 Sales by Registered Ultimate Vendors of Undyed Diesel Fuel

Registration No. >

Claimant certifies that it sold the diesel fuel at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the diesel fuel did not contain visible evidence of dye

Exception. If any of the diesel fuel included in this claim did contain visible evidence of dye, attach an explanation and check here

(b) Rate (c) Gallons (d) Amount of credit (e) CRN

a Use by a state or local government \$ 243 \$ 360

b Use in certain intercity and local buses 17 350

7 Sales by Registered Ultimate Vendors of Undyed Kerosene (Other Than Kerosene For Use in Aviation)

Registration No. >

Claimant certifies that it sold the kerosene at a tax-excluded price, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. Claimant certifies that the kerosene did not contain visible evidence of dye.

8 Sales by Registered Ultimate Vendors of Kerosene For Use in Aviation

Registration No. >

Claimant sold the kerosene for use in aviation at a tax-excluded price and has not collected the amount of tax from the buyer, repaid the amount of tax to the buyer, or has obtained the written consent of the buyer to make the claim. See the instructions for additional information to be submitted.

		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Use in commercial aviation (other than foreign trade) taxed at \$ 219	-	s 175		\$	355
b	Use in commercial aviation (other than foreign trade) taxed at \$ 244	~ •	200			417
С	Nonexempt use in noncommercial aviation		025			418
ď	Other nontaxable uses taxed at \$ 244		243			346
е	Other nontaxable uses taxed at \$ 219		218			369
_f	LUST tax on aviation fuels used in foreign trade		001			433

Form 4136 (2018)

Form	4136 (2018)					Page 3
9	Reserved for future use		F	Registration No	. >	
						
			(b) Rate	(c) Gallons of alcohol	(d) Amount of credit	(e) CRN
а	Reserved for future use				\$	†
b	Reserved for future use					
4.0			_	N ! . 4 4! 8!	_	
10	Reserved for future use		F	Registration No	. ▶	
			, 			
			(b) Rate	(c) Gallons of	(d) Amount of credit	(e) CRN
				biodiesel or		
				renewable diesel		1
_	Reserved for future use	!			s	
a b	Reserved for future use					+
6					 	
	Treative and ratain ass		L	L	<u> </u>	<u> </u>
11	Nontaxable Use of Alternative Fuel					
						
	Caution: There is a reduced credit rate for use in certain	n intercity and local	buses (typ	e of use 5) (see	instructions)	_
		(a) Type of use	(b) Rate	(c) Gallons,	(d) Amount of credit	(e) CRN
		1, 7, 7,	, ,	or gasoline	, ,	1.,
				or diesel gallon		
				equivalents		
а	Liquefied petroleum gas (LPG) (see instructions)		\$ 183		\$	419
b			183			420
С	Compressed natural gas (CNG) (see instructions)		183			421
d	Liquefied hydrogen		183			422
е	Fischer-Tropsch process liquid fuel from coal (including					
	peat)		243			423
f	Liquid fuel derived from biomass		243			424
g	Liquefied natural gas (LNG) (see instructions)		243			425
h	Liquefied gas derived from biomass		183			435

12	Reserved for future use		Registration No. ▶			
		(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credit	(e) CRN	
а	Reserved for future use			\$		
b	Reserved for future use					
С	Reserved for future use					
d	Reserved for future use					
е	Reserved for future use					
f	Reserved for future use					
g	Reserved for future use				<u> </u>	
h	Reserved for future use					
<u>i</u>	Reserved for future use			<u> </u>	<u> </u>	

369

Registration No. ▶ 13 Registered Credit Card Issuers (c) Gallons (e) CRN (b) Rate (d) Amount of credit 360 a Diesel fuel sold for the exclusive use of a state or local government \$ 243 **b** Kerosene sold for the exclusive use of a state or local government 243 346 c Kerosene for use in aviation sold for the exclusive use of a state or local government taxed at \$ 219

Nontaxable Use of a Diesel-Water Fuel Emulsion

	Caution: There is a reduced credit rate for use in certain intercity and local buses (type of use 5) (see instructions)						
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN	
a	Nontaxable use		\$ 197		\$	309	
b	Exported		198			306	

Diesel-Water Fuel Emulsion Blending

Registration No. ▶

218

	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
Blender credit	\$ 046		\$	310

16 Exported Dyed Fuels and Exported Gasoline Blendstocks

	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
a Exported dyed diesel fuel and exported gasoline blendstocks taxed at \$ 001	\$ 001		\$	415
b Exported dyed kerosene	001			416

17	Total income tax credit claimed. Add lines 1 through 16, column (d) Enter here and on		,	}
	Schedule 5 (Form 1040), line 73, Form 1120, Schedule J, line 20b, Form 1120S, line 23c, Form		1	
	1041, line 25h, or the proper line of other returns	17	\$ 184	,

Form 4136 (2018)

ST. JOHN'S UNIVERSITY, NEW YORK

SUPPLEMENTAL ATTACHMENT
FOR THE YEAR ENDING MAY 31, 2019

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

PARTNERSHIP INVESTMENTS

-236,725

INCOME (LOSS) FROM PARTNERSHIPS

-236,725

11-1630830

ATTACHMENT 2

FORM 990-T - PART II, LINE 20 - CHARITABLE CONTRIBUTIONS DEDUCTION

FILING YEAR	CONT	ARITABLE TRIBUTIONS BE CARRIED TORWARD	AMOUNT USED	FILING YEAR USED IN	BAL BE	MAINING ANCE TO CARRIED ORWARD
2014	\$	285	-		\$	285
2015	\$	270	-		\$	270
2016	\$	146	-		\$	146
2017	\$	165	-		\$	165
2018	\$	229	-		\$	229
				TOTAL	\$	1,095

ST JOHN'S UNIVERSITY, NEW YORK SUPPLEMENTAL ATTACHMENT FOR THE YEAR ENDING MAY 31, 2019

ATTACHMENT 3

FORM 990-T - PART II, LINE 23 - DEPLETION DEDUCTIONS - % OF DEPLETION DEDUCTION

	용 0	F DEPLETION	FILING	REMA:	INING BALANCE			
FILING	TO	BE CARRIED	TMUOMA	YEAR	TO	BE CARRIED		
YEAR	FORWARD		FORWARD		R FORWARD USED USED IN		FORWARD	
2014	\$	105,115			\$	105,115		
2015	\$	41,297			\$	41,297		
2016	\$	76,080			\$	76,080		
2017	\$	103,217			\$	103,217		
				TOTAL	\$	325,709		

ST. JOHN'S UNIVERSITY, NEW YORK	11-1630830
SUPPLEMENTAL ATTACHMENT FOR THE YEAR ENDING MAY 31, 2019	ATTACHMENT 4
FORM 990-T, PART II, LINE 28 - OTHER DEDUCTIONS	
PROFESSIONAL FEES	19,636
OTHER DEDUCTIONS	19,636

11-1630830

ATTACHMENT 5

ST JOHN'S UNIVERSITY, NEW YORK SUPPLEMENTAL ATTACHMENT FOR THE YEAR ENDING MAY 31, 2019

FORM 990-T - PART III, LINE 35

NET OPERATING LOSSES ARISING IN TAX YEARS BEGINNING BEFORE JANUARY 1, 2018

FILING YEAR	FILING TAX YEAR NOL			AMOUNT VAILABLE	FILI	SED IN NG IN IT YEAR	CARRYOVER TO NEXT YEAR		
2013	ş	(162,224)		(104,922)		-	\$	(104,922)	
2014	\$	(303,839)		(303,839)		-	\$	(303,839)	
2016	\$	(119,327)	\$	(119,327)		-	\$	(119,327)	
2017	\$	(191,319)	\$	(191,319)		-	\$	(191,319)	* 1
	s	(776,709)	ŝ	(719,407)	Ś	_	s	(719,407)	

** THE NET OPERATING LOSS GENERATED IN YEAR ENDED 5/31/2018 HAS BEEN ADJUSTED IN ACCORDANCE WITH REVENUE RULING 81-88 THE INCREASE IN AVAILABLE NOL IS DUE TO THE *RETROACTIVE REPEAL OF IRC SECTION 512(A)(7) FOR UBTI FROM QUALIFIED TRANSPORTATION FRINGE BENEFITS

FORM 990-T - PART II, LINE 31

NET OPERATING LOSSES ARISING IN TAX YEARS BEGINNING AFTER JANUARY 1, 2018 - LIMITED PARTNERSHIP ACTIVITIES

					NO	L USED IN			
FILING	FILING TAX YEAR			AMOUNT	F	ILING IN	CARRYOVER TO		
YEAR	NOL			VAILABLE	CUF	RENT YEAR	NEXT YEAR		
2018	\$	(259,168)	\$	(259,168)		-	\$	(259,168)	
	\$	(259,168)	\$	(259,168)	\$	-	\$	(259,168)-	

FORM 990-T - PART II, LINE 31

NET OPERATING LOSSES ARISING IN TAX YEARS BEGINNING AFTER JANUARY 1. 2018 - CATERING

						NOL	USED IN		
F	ILING	FILING	TAX YEAR	Į	MOUNT	FIL	ING IN	CAR	RYOVER TO
	YEAR	1	NOL	AVAILABLE		CURRENT YEAR		NEXT YEAR	
	2018	\$	(1,429)	\$	(1,429)		-	\$	(1,429)
		\$	(1,429)	\$	(1,429)	\$		\$	(1,429)

ST. JOHN'S UNIVERSITY, NEW YORK	11-1630830
SUPPLEMENTAL ATTACHMENT FOR THE YEAR ENDING MAY 31, 2019	ATTACHMENT 6
SCHEDULE M, PART I, LINE 12 - OTHER INCOME	
CATERING	4,382
OTHER INCOME	4,382

ST. JOHN'S UNIVERSITY, NEW YORK SUPPLEMENTAL ATTACHMENT	11-1630830
FOR THE YEAR ENDING MAY 31, 2019	ATTACHMENT 7
SCHEDULE M. PART II, LINE 28 - OTHER DEDUCTIONS	
CATERING	4,714
PROFESSIONAL FEES	1,033
OTHER DEDUCTIONS	5,747

ST. JOHN'S UNIVERSITY, NEW YORK SUPPLEMENTAL ATTACHMENT FOR THE YEAR ENDING MAY 31, 2019

11-1630830

ATTACHMENT 8

SCHEDULE D - PART I, LINE 6 - CAPITAL LOSS CARRYFORWARD

AMOUNT GENERATED	(USED) IN TAX YEAR 2016	11,962
AMOUNT GENERATED	(USED) IN TAX YEAR 2017	2,885
AMOUNT GENERATED	(USED) IN TAX YEAR 2018	(13,692)
AMOUNT TO	CARRYFORWARD TO TAX YEAR 2019	1,155

ST JOHN'S UNIVERSITY, NEW YORK SUPPLEMENTAL ATTACHMENT FOR THE YEAR ENDING MAY 31 2019 11-1630830

ATTACHMENT 9

FORM 4136 - LINE 3a - NONTAXABLE USE OF UNDYED DIESEL FUEL

INVOICE DATE	NAME	DELIVERY LOCATION CITY AND COUNTY	INVOICE NUMBER	TYPE OF USE	TYPE OF	NUMBER OF GALLONS	RATE PAID PER INV	FED EXCISE TAX PAID	FED CREDIT RATE	FED CREDIT DUE
7/30/2019 MAR	ATHON ENERGY CORPORATION	JAMAICA, NEW YORK	98038	13	DIESEL	1,000 0	0 1840	184 00	0 2430	184 00
TOT	AL - DIESEL		-			1,000 0		184 00		184 00

REQUEST FOR RELIEF BASED UPON "REASONABLE CAUSE" FILED PURSUANT TO REV. PROC. 2009-41

Internal Revenue Service Center Ogden, UT 84201-0023

ELIGIBLE ENTITY: ST. JOHN'S UNIVERSITY SRL

EIN: 98-1545745

ATTACHMENT TO FORM 8832

This statement constitutes a request for relief pursuant to the provisions set forth in Rev. Proc. 2009-41, 2009-39 I.R.B. 439, for a late entity classification election by ST. JOHN'S UNIVERSITY SRL ("Entity") based upon "reasonable cause." Entity is an eligible foreign entity that is filing an election to be treated as a disregarded entity for US tax purposes, effective as of June 1, 2018.

Entity satisfies the eligibility requirements for late filing relief as set forth in Rev. Proc. 2009-41, Section 4.01, as demonstrated by the following representations:

- 1. Entity failed to obtain its desired classification as of June 1, 2018 solely because Form 8832 was not timely filed.
- 2. The consistency requirement is met. Entity has not filed federal tax or information returns that are contradictory to the intended entity classification for the years in which the election was intended.
- 3. Entity has reasonable cause for its failure to timely make the entity classification election, as explained below.
- 4. Relief is requested within-3 years and 75 days of the election's desired effective date.

ELIGIBLE ENTITY: ST. JOHN'S UNIVERSITY SRL

EIN: 98-1545745

ATTACHMENT TO FORM 8832

Page 2 of 3

REASONABLE CAUSE STATEMENT

Entity is a foreign eligible entity within the meaning of Treas. Reg. § 301.7701-3(b)(2). It has always been intended to classify Entity as a disregarded entity for US federal income tax purposes. Due to the complex nature of, and evolving regulations around, reporting for foreign disregarded entities, this request is being filed more than 75 days after the effective date of the entity's election.

Entity is not using hindsight in requesting relief. In addition, Entity is not seeking to alter a return position for which an accuracy-related penalty has been or could be imposed under Section 6662 and the new position requires or permits a regulatory election for which relief is requested. Finally, this is not a case in which Entity was fully informed in all material respects of the required election and related tax consequences, but chose not to file the election.

Any further information required in connection with your consideration of this ruling may be obtained by calling Devin Duncan (212) 954-2059.

ELIGIBLE ENTITY: ST. JOHN'S UNIVERSITY SRL

EIN: 98-1545745

ATTACHMENT TO FORM 8832

Page 3 of 3

DECLARATION

Under penalties of perjury, I declare that I have examined this election, including accompanying documents, and, to the best of my knowledge and belief, the election contains all the relevant facts relating to the election, and such facts are true, correct, and complete. I further declare that I have personal knowledge of the facts and circumstances related to the election. I further declare that the elements required in Section 4.01 of Revenue Procedure 2009-41 have been satisfied.

On behalf of ST. JOHN'S UNIVERSITY SRL

Name: SHARON HEWITT WATKINS

Title: VP BUSINESS AFFAIRS, CFO/TREASURER

6/23/2020