b	Form	990-T	Ex	empt Organization (and proxy tax					(P)	OM	B No 1545-0047
	,		For cale	ndar year 2019 or other tax year begin			•	• • • • • • • • • • • • • • • • • • • •		· ·	ഉത4മ
	Dagar	Iment of the Treasury	, or care	► Go to www.irs.gov/Form990	_					4	20 IJ
		al Revenue Service	<b>▶</b> Do	not enter SSN numbers on this form					c)(3).	Open to 501(c)(	o Public Inspection for (3) Organizations Only
	A _	Check box if address changed				ime changed and s			D Emp	loyer ideni	tification number , see instructions )
	B Exe	empt under section	1.	HOFSTRA UNIVERSITY							
		501( C)(3-)	Print	Number, street, and room or suite no	lf a P C	box, see instruct	ons		11-1	63090	6
		408(e) 220(e)	or Type								iness activity code
		408A530(a)		128 HOFSTRA UNIVERS	ITY,	PHILLIPS	HALL		(See i	nstructions)	
		529(a)	•	City or town, state or province, counti	ry, and	ZIP or foreign post	al code				
		ok value of all assets and of year		HEMPSTEAD, NY 11549	-128	30			5313	90	
				up exemption number (See instruc			<del>,</del>				
		1293010236.		eck organization type 🕨 🕺 501			501(c	trust	401(a)	trust	Other trust
			_	inization's unrelated trades or busine	esses	<u>4</u>		Describe	the only	y (or first)	) unrelated
			· —	CILITY USAGE				complete Parts I			ne, describe the
		•		end of the previous sentence, co	mplete	e Parts I and II, c	omplete a S	Schedule M for ea	ch additio	nal	
		ade or business, th									
				corporation a subsidiary in an affil identifying number of the parent co			-subsidiary	controlled group?		}	Yes X No
				FFICE OF FINANCIAL AF			Telephor	ne number ▶ 51	6-463	-6820	
				or Business Income		(A) inc		(B) Expen		T	(C) Net
	1a	Gross receipts or s		127,995.	1	( , ,		(=) = (=)		1	(0,1.0.
	ь	Less returns and allowa		c Balance ▶	1c	12	27,995.				
	2	Cost of goods sol	d (Sched	ule A, line 7)	2						
	3	Gross profit Sub	tract line	2 from line 1c	3	12	7,995.			7	127,995.
	4a	Capital gain net ii	ncome (a	ittach Schedule D)	4a						
	b	Net gain (loss) (Fo	rm 4797,	Part II, line 17) (attach Fonn 4797)	4b						
	C	Capital loss dedu	ction for t	rusts	4c					<u> </u>	
202	5		-	r an S corporation (attach statement),		<b>_</b>				<del></del>	
	6				6	<u> </u>	_/_			-	
<del>_</del>	7 8			come (Schedule E)	7 8	<del> </del>				+	
<u></u>	9			ints from a controlled organization (Schedule F) 1(c)(7), (9), or (17) organization (Schedule G)	′ <del> </del>	<del>                                     </del>		<u> </u>		+	<del></del>
AUG	10			ncome (Schedule I)	10		·			<u> </u>	
⋖.	11			lule J)	14	1				1	
2	12			tions, attach schedule)	12		4,772.	ATCH 1		1	4,772.
y	13			ough 12			12,767.			J	132,767.
	Par			Taken Elsewhere (See inst ne unrelated business incom		ons for limita	tions on c	leductions ) (I	Deducti	ons mu	ist be directly
)	14	Compensation of	officers,	directors, and trustees (Schedule K)	)				. 14		
,	15	Salaries and wage	s	········RECE	IVF	D			15		62,290.
	16	Repairs and main	tenance ,	/ .	• • •	၂မွ			. 16		
	17	Bad debts	•	···/··   \$  ···nn·s·	กับก	34 - 181 - 1		amour o	17	<b>-</b>	1 004
	18	Interest (attach so	, ,	. N. KOL	a .Zy	101	• • • • •	ATCH 2	.   18	+	1,224.
	19	Taxes and licenses		,	<u></u>	···J∰·¦		24,009	. 19	<del> </del>	<del></del>
	20 21	Depreciation (atta		on Schedule A and elsewhere on re	N. I	᠃ᡰ᠃ᡶ	20   21a	24,003			24,009.
	22	Depletion							21b	<del>`</del>	21,005.
	23			compensation plans						+	
	24										16,178.
	25			Schedule I)						<u> </u>	
	26			chedule J)					26		
	27	Other deductions	(attach s	chedule)				ATCH. 3.	. 27		53,607.
	28	,		s 14 through 27					. 28	<u> </u>	157,308.
	29	/		le income before net operating							-24,541.
	30	<b>/</b>	•	g loss arising in tax years beginning	-	-	•		_	1	04 547
	31 /			e income Subtract line 30 from line lotice, see instructions.	29 .	<u> </u>		<del> </del>	. 31	<u>.</u>	-24,541.
		-Permoin Neoucti	OII ACLIN	otioo, aco matructions.					(	<b>7</b>	orm 990-T (2019)

	Total Unrelated Business Taxable Income			
instruc	of unrelated business taxable income computed from all unrelated trades or businesses (	see		
	nons)	32		10,3
33 Amoun	is paid for disallowed fringes			
	ble contributions (see instructions for limitation rules) ATCH. 4			1,0
	inrelated business taxable income before pre-2018 NOLs and specific deduction Subtract I	` —	<u> </u>	<del></del>
	· · · · · · · · · · · · · · · · · · ·	/		9,3
	the sum of lines 32 and 33	<b>ク</b> 3 章	+	7,3
36 Deduct	on for net operating loss arising in tax years beginning before January 1, 2018 (	see		
instruc	ions)		_	
37 Total of	unrelated business taxable income before specific deduction. Subtract line 36 from line 35	<u> </u>		9,3
38 Specifi	deduction (Generally \$1,000, but see line 38 instructions for exceptions)	<b>└</b> ∕┐ <u></u> ┇8		1,0
39 Unrelat	ed business taxable income. Subtract line 38 from line 37 If line 38 is greater than line	3X 🗇		
enter th	e smaller of zero or line 37	e		8,3
	Tax Computation	4 1 22	<del></del>	
0 organi	cations Taxable as Corporations. Multiply line 39 by 21% (0 21)	1 11	<del></del>	1,7
10 Cryam 11 Trusts	Taxable at Trust Rates. See instructions for tax computation Income tax	) - <del>  -  </del>	<del></del>	
	ount on line 39 from: Tax rate schedule or Schedule D (Form 1041), ,		<del></del>	
-	ax. See instructions			
	tive minimum tax (trusts only)			
4. Tax on	Noncompliant Facility Income. See Instructions	ે. <u>4</u> 4		
5 Total. A	dd lines 42, 43, and 44 to line 40 or 41, whichever applies	. 45		1,7
Part V	Tax and Payments			
	tax credit (corporations attach Form 1118, trusts attach Form 1116) 46a			
	redits (see instructions)			
	business credit. Attach Form 3800 (see instructions)			
	or prior year minimum tax (attach Form 8801 or 8827)	ـ ا		
	redits. Add lines 46a through 46d		<u> </u>	
	t line 46e from line 45			1,7
8 Other ta	xes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedu	ie 48		
9 Total ta	x. Add lines 47 and 48 (see instructions)	49	J	1,7
<b>0</b> 2019 n	et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	. do		
1a Pavme	its. A 2018 overpayment credited to 2019			
h 2019 e	nts A 2018 overpayment credited to 2019	00.	1	
	osited with Form 8868			
	organizations Tax paid or withheld at source (see instructions)			
	withholding (see instructions)		1	
f Credit f	or small employer health insurance premiums (attach Form 8941)			
f Credit f	redits, adjustments, and payments: Form 2439			
f Credit f		72.		
f Credit f g Other c X F	redits, adjustments, and payments Porm 2439 Total Form 2439 Total Form 2439			36,5
f Credit f g Other c X F 52 Total p	redits, adjustments, and payments Form 2439 orm 4136 12,572. Other Total 51g 12,5	52		36,5
f Credit f g Other c X F 52 Total p 53 Estimat	redits, adjustments, and payments or 12,572. Other Total 51g 12,57  ayments. Add lines 51a through 51g. ed tax penalty (see instructions) Check if Form 2220 is attached.	<u>52</u> <del>5</del> 3		36,5
f Credit f g Other c X F 62 Total p 63 Estimat	redits, adjustments, and payments  Form 2439  Other  Total   5 ig   12,57  12,57  Other  Total   5 ig   12,55  12,55  Total   5 ig   12,55	52 53 .► 54		
f Credit f g Other c X F 2 Total p 3 Estimat 4 Tax due 5 Overpa	redits, adjustments, and payments:  orm 4136  12,572.  Other  Total  5ig  12,55  12,55  12,55  12,55  12,55  12,55  12,55  12,55  12,55  12,55  12,55  12,55  12,55  12,55  12,55  13,55  14,55  15,56  16,16	52 ▶ 54 ▶ 55		34,8
f Credit f g Other c X F 2 Total p 3 Estimat 4 Tax du 6 Overpa 6 Enter th	redits, adjustments, and payments:  Other  Total  T	52 ▶ 54 ▶ 55 1 ▶ 66		
f Credit f g Otherc X F 2 Total p 3 Estimat 4 Tax due 5 Overpa 6 Enter th	redits, adjustments, and payments:  orm 4136  12,572.  Other  Total  51g  12,55  12,55  ayments. Add lines 51a through 51g.  ed tax penalty (see instructions) Check if Form 2220 is attached.  If line 52 is less than the total of lines 49, 50, and 53, enter amount owed  yment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid  amount of line 55 you went. Credited to 2020 estimated tax  Statements Regarding Certain Activities and Other Information (see instructions)	52 53 54 55 d 56 ctions)		34,8
f Credit f g Otherc X F 2 Total p 3 Estimat 4 Tax due 5 Overpa 6 Enter th Part VI	redits, adjustments, and payments:  orm 4136  12,572.  Other  Total  51g  12,55  12,55  ayments. Add lines 51a through 51g.  ed tax penalty (see instructions) Check if Form 2220 is attached.  If line 52 is less than the total of lines 49, 50, and 53, enter amount owed.  yment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid.  amount of line 55 you want. Credited to 2020 estimated tax  Statements Regarding Certain Activities and Other Information (see instructions) time during the 2019 calendar year, did the organization have an interest in or a signature.	52 53 .▶ 54 .▶ 56 ctions)	er authority	34,8
f Credit f g Otherc X F 62 Total p 63 Estimat 64 Tax due 65 Overpa 66 Enter th Part VI 67 At any	redits, adjustments, and payments:  orm 4136  12,572.  Other  Total  51g  12,55  12,55  ayments. Add lines 51a through 51g.  ed tax penalty (see instructions) Check if Form 2220 is attached.  If line 52 is less than the total of lines 49, 50, and 53, enter amount owed  yment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid  amount of line 55 you went. Credited to 2020 estimated tax  Statements Regarding Certain Activities and Other Information (see instructions)	52 53 .▶ 54 .▶ 56 ctions)	er authority	34,8
f Credit f g Otherc X F 2 Total p 3 Estimat 4 Tax due 5 Overpa 6 Enter th Part VI 7 At any over a	redits, adjustments, and payments:  orm 4136  12,572.  Other  Total  51g  12,55  12,55  ayments. Add lines 51a through 51g.  ed tax penalty (see instructions) Check if Form 2220 is attached.  If line 52 is less than the total of lines 49, 50, and 53, enter amount owed.  yment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid.  amount of line 55 you want. Credited to 2020 estimated tax  Statements Regarding Certain Activities and Other Information (see instructions) time during the 2019 calendar year, did the organization have an interest in or a signature.	52 53 .▶ 54 .▶ 55 d ▶ 66 ctions) e or other	er authority	34,8
f Credit f g Otherc X F 62 Total p 63 Estimat 64 Tax due 65 Overpa 66 Enter th Part VI 67 At any over a	redits, adjustments, and payments:  Other  Total  Total  12,572.  Other  Total  12,57  Total  13,57  Total  14,57  Total  15,57  Total  16,57	52 53 .▶ 54 .▶ 55 d ▶ 66 ctions) e or other	er authority	34,8
f Credit f g Otherc X F 2 Total p 3 Estimat 4 Tax due 5 Overpa 6 Enter th Part VI 67 At any over a FinCEN here	redits, adjustments, and payments:  orm 4136  12,572.  Other  Total   51g  12,57  12,57  Other  Total   51g  Total   Figure   Total   T	52 54 55 d ▶ 56 ctions) e or other n may h the forei	er authority ave to file gn country	34,8 34,8
f Credit f g Otherc X F 2 Total p 3 Estimat 4 Tax due 5 Overpa 6 Enter th Part VI 7 At any over a FinCEN here > 8 During	redits, adjustments, and payments:  Other  Total  T	52 54 55 d ▶ 56 ctions) e or other n may h the forei	er authority ave to file gn country	34,8 34,8 Yes
f Credit f g Other c X F 2 Total p 3 Estimat 4 Tax du 6 Overpa 6 Enter th Part VI 7 At any over a FinCEN here ▶ During If "Yes,"	redits, adjustments, and payments:  orm 4136  12,572.  Other  Total  Total  12,57  Other  Total  12,57  Other  Total  12,57  Other  Total  12,57  Total  12,	52 54 55 d ▶ 56 ctions) e or other n may h the forei	er authority ave to file gn country	34,8 34,8 Yes
f Credit f g Other c	redits, adjustments, and payments.  Other  Total  Total  12,572.  Other  Total  12,572.  Other  Total  12,573.  If line 52 is less than the total of lines 49, 50, and 53, enter amount owed  If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid  It ments the statements Regarding Certain Activities and Other Information (see instructions during the 2019 calendar year, did the organization have an interest in or a signature financial account (bank, securities, or other) in a foreign country? If "Yes," the organization Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a see instructions for other forms the organization may have to file.	52 54 55 56 56 56 56 56 56 56 56 56	er authority ave to file gn country	34,8 34,8 Yes
f Credit f g Other c X F 2 Total p 3 Estimat 4 Tax du 6 Overpa 6 Enter th Part VI 7 At any over a FinCEN here  B During if "Yes," 9 Enter th	redits, adjustments, and payments.  Other  Total  Total  12,572.  Other  Total  12,572.  Other  Total  12,573.  If line 52 is less than the total of lines 49, 50, and 53, enter amount owed  If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid  It ments the statements Regarding Certain Activities and Other Information (see instructions during the 2019 calendar year, did the organization have an interest in or a signature financial account (bank, securities, or other) in a foreign country? If "Yes," the organization Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a see instructions for other forms the organization may have to file.	52 54 55 56 56 56 56 56 56 56 56 56	er authority ave to file gn country	34,8 34,8 Yes
f Credit f g Other c X F 62 Total p 63 Estimat 64 Tax due 65 Overpa 66 Enter th Part VI 67 At any over a FinCEN here ▶ 68 During If "Yes," 69 Enter th	redits, adjustments, and payments:  Other  Total  Total  12,572.  Other  Total  12,572.  Other  Total  12,572.  Other  Total  12,552.  Other  Total  12,553.	52 53 54 556 56 ctions) e or other may he foreign to	er authority ave to file gn country ist?	34,8 34,8 Yes
f Credit f g Other c X F 62 Total p 63 Estimat 64 Tax du 65 Overpa 66 Enter th 67 At any over a FinCEN here 68 During 16 "Yes," 69 Enter th	redits, adjustments, and payments:  orm 4136  12,572.  Other  Total  12,5  12,5  12,5  ayments. Add lines 51a through 51g.  ed tax penalty (see instructions) Check if Form 2220 is attached.  If line 52 is less than the total of lines 49, 50, and 53, enter amount owed.  yment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid.  amount of line 55 you want. Credited to 2020 estimated tax  Refunder  Statements Regarding Certain Activities and Other Information (see instructions during the 2019 calendar year, did the organization have an interest in or a signature financial account (bank, securities, or other) in a foreign country? If "Yes," the organization Form 114, Report of Foreign Bank and Financial Accounts if "Yes," enter the name of the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a see instructions for other forms the organization may have to file.  The amount of tax-exempt interest received or accrued during the tax year  Adar pepalities of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the certain organization before the preparer (other than texpayer) is based on all information organization in the statements of perjury of preparer (other than texpayer) is based on all information organization in the statements of perjury.  Senior Vice President for the part of the preparer	52 53 .► 55 1 ► 56 ctions) e or other n may have the best of	er authority ave to file gn country ust?	34,8 34,8 Yes
f Credit f g Other c X F 62 Total p 63 Estimat 64 Tax du 65 Overpa 66 Enter th 67 At any over a FinCEN here 68 During 16 "Yes," 69 Enter th	redits, adjustments, and payments.  Other  Total  Total  12,572.  Other  Total  12,572.  Other  Total  12,573.  If line 52 is less than the total of lines 49, 50, and 53, enter amount owed  If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid  It ments the statements Regarding Certain Activities and Other Information (see instructions during the 2019 calendar year, did the organization have an interest in or a signature financial account (bank, securities, or other) in a foreign country? If "Yes," the organization Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a see instructions for other forms the organization may have to file.	52 53 54 556 56 ctions) e or other may he foreign to	er authority ave to file gn country ust?  my knowledge	34,8 34,8 Yes
f Credit f g Other c X F 62 Total p 63 Estimat 64 Tax due 65 Overpa 66 Enter th Part VI 67 At any over a FinCEN here 68 During if "Yes," 69 Enter th	redits, adjustments, and payments:  Other  Total  Total  12,572.  Other  Total  12,572.  Other  Total  12,573.  Other  Total  12,575.  Other  Total  12,575.  Other  Total  12,575.  In June 52 is larger than the total of lines 49, 50, and 53, enter amount owerd.  In June 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid.  In June 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid.  Statements Regarding Certain Activities and Other Information (see instruction during the 2019 calendar year, did the organization have an interest in or a signature financial account (bank, securities, or other) in a foreign country? If "Yes," the organization Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a see instructions for other forms the organization may have to file.  In amount of tax-exempt interest received or accrued during the tax year.  Statements and statements, and to the popular, I declare that I have examined this return, including accompanying schedules and statements, and to the corrections of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the corrections of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the popular of perjury of preparer (other than taxpayer) is based on all information of the performance of the part of performance of the performance	52 53 .► 55 1 ► 56 ctions) e or other n may have the best of	er authority ave to file gn country ust?	34,8 34,8 Yes
f Credit f g Other c X F 62 Total p 63 Estimat 64 Tax dut 65 Overpa 66 Enter th Part VI 67 At any over a FinCEN here 68 During 16 "Yes," 69 Enter th Sign lere	redits, adjustments, and payments:  form 4136  12,572.  Other  Total  Total  12,572.  Other  Total  12,572.  Other  Total  12,55  Total  12,55	52 53 54 55 56 56 ctions) e or other n may h the forei foreign the	my knowledge  ctions)?  TY	34,8 34,8 Yes
f Credit if g Other c X F 52 Total p 53 Estimat 54 Tax due 55 Overpa 56 Enter th Part VI 57 At any over a FinCEN here b 58 During if "Yes," 59 Enter th Sign Here S	redits, adjustments, and payments:  form 4136  12,572.  Other  Total  12,572.  Other  Total  12,572.  Other  Total  12,572.  Other  Total  12,573.  Total  12,575.  Total  12,	52 53 54 556 56 ctions) e or other n may h the forei foreign the	my knowledge  stions)?  PTIN ed P005	34,8 34,8 Yes
f Credit f g Other c X F 52 Total p 53 Estimat 54 Tax dut 55 Overpa 56 Enter th Part VI 57 At any over a FinCEN here 58 During if "Yes," 59 Enter th	redits, adjustments, and payments:  form 4136	52 53 54 56 ctions) e or other n may h the foreign to the best of Mays the (see instru Check self-employ	my knowledge  stions)?  PTIN ed P005	34,8 34,8 Yes and belief

HOFSTRA UNIVERSITY

11-1630906

Page 2

Form 990-T (2019)										_	Page 3
Schedule A - Cost of C	Goods Sold. E	nter method	d of invent	tory v	aluation	<u> </u>					
1 Inventory at beginning of	year, 1		-,	6	Inventory	at end of yea	ar	6			
2 Purchases							ld. Subtract line				
3 Cost of labor	3			]	6 from li	ne 5. Enter	here and in Part		1		
4a Additional section 263A					I, line 2			7_			
(attach schedule)	4a			8	Do the	rules of	section 263A (w	ith r	espect to	Yes	No
b Other costs (attach sched	dule) . 4b			Ì	property	produced	or acquired for	resa	de) apply		
5 Total. Add lines 1 throug	h 4b . 5				to the org	anization?	<u> </u>				Х
Schedule C - Rent Incom	ne (From Real F	roperty a	nd Perso	nal F	roperty	Leased V	Vith Real Proper	ty)			
(see instructions)											
1. Description of property											
(1)											
(2)								_			
(3)											
(4)											
	2. Rent rece	ved or accru	ed								
(a) From personal property (if the for personal property is more more than 50%	than 10% but not	percent	rom real and age of rent for if the rent is	or pers	onal property	exceeds	3(a) Deductions du In columns 2(a				emc
(1)											
(2)											
(3)											
(4)											
Total		Total									
(c) Total income. Add totals of	columns 2(a) and 2	b) Enter					(b) Total deduction Enter here and on		Ì		
here and on page 1, Part I, line	6, column (A)	▶					Part I, line 6, colum				
Schedule E - Unrelated I	Debt-Financed I	ncome (se	e instruct	ions)							
1 Description of de	ebt-financed property				e from or t-financed		Deductions directly con debt-finance	d prop	erty		
			F	propert	у		nt line depreciation ch schedule)	(	b) Other dedu (altach sched		
(1)						_ ·- ·		_	·		
(2)											
(3)											
(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	Colum divide colum	d		income reportable 1 2 x column 6)		Allocable ded imn 6 x total o 3(a) and 3(i	of colum	
(1)					%						
(2)					%						
(3)					%						
(4)					%						
						Enter her Part I, in	e and on page 1, e 7, column (A)		r here and o		
Totals					<b>⊳</b> ∣ 						

Form 990-T (2019)

Schedule F - Interest, Ann	iaides, Royalds	<del></del>		ontrolled Or			Luc	0113 (36)	o matraca	01137	
Name of controlled organization	2. Employer identification numb	, CH		lated income instructions)	4. Total payme	of spec		5. Part of column 4 the included in the control organization's gross inc		olling	6. Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
(4)					<u> </u>					_	
Nonexempt Controlled Organi	zations	<del></del>							0.0 -1.1	-	4.5-4-41
7. Taxable Income	8. Net unrelated to (loss) (see instruc			Total of specific payments made		ไกเ	clude	t of column d in the co atlon's gross	ntrolling		Deductions directly nnected with income in column 10
(1)										ļ	
(2)						L					
(3)						ļ				<u> </u>	
(4)						ļ				ļ	
Totals	ncome of a Sec		 (c)(7),	(9), or (17	▶ ') Orga	Er Pi	nter h art I,	olumns 5 a ere and on line 8, colur (see inst	page 1, mn (A)	En	dd columns 6 and 11 Iter here and on page 1, art I, line 8, column (B)
1. Description of income	2. Amount of	fincome		3. Deduc directly cor (attach sch	inected				l-asides schedule)		Total deductions and set-asides (col. 3 plus col. 4)
(1)											
(2)											
(3)											
(4)											
Totals ▶ Schedule I-Exploited Exe	Enter here and Parl I, line 9, c empt Activity In	olumn (A)	her Th	an Adverti	sing Ir	com	e (s	ee instru	ctions)		Enter here and on page 1. Part I, line 9, column (B)
1. Description of exploited activity	2. Gross unrelated business income from trade or business	direct connecte product unrela	directly or bused of duction of the properties o		ne (loss) ed trade (column umn 3). empute eugh 7	fron Is r	n acti not ur	Income ivity that prelated income	6 Expe attribute colum	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(2)				1							
(3)											
(4)											
	Enter here and on page 1, Part I, line 10, col. (A)	Enter here page 1, I line 10, c	Part I,			-					Enter here and on page 1, Part II, line 25
Totals ▶ Schedule J- Advertising Ir	ncome (see instru	uctions)		<u> </u>				<del></del>			
Part I Income From Per			Oneol	idated Ras	is						·· · · · · · · · · · · · · · · · · · ·
MCOING FIONI FOR	Iodicais Report	eu on a C	, U1 13 U1	iuaicu Dds	113					-	
1. Name of periodical	2. Gross advertising Income	3. Din advertisin		4. Advert gain or (los 2 minus co a galn, cor cols 5 thro	s) (col ol. 3) If mpute	5,	Circi Inco	ulation me	6. Reade cost		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)											
(2)											
(3)											
(4)											
Totals (carry to Part II, line (5))	<u>                                     </u>		<del></del>	<u></u>							Form <b>990-T</b> (2019)

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 ) 4. Advertising 7. Excess readership 2. Gross advertising gain or (loss) (col costs (column 6 3. Direct 5 Circulation 6. Readership 2 minus col 3) If minus column 5, but 1. Name of periodical advertising costs income costs a gain, compute not more than Income cols. 5 through 7 column 4) (1) (2) (3) (4) Totals from Part I. Enter here and on Enter here and on Enter here and page 1, Part I. on page 1, Part II, line 26. page 1, Part I, line 11, col (A) line 11, col (B). Totals, Part II (lines 1-5) . . . . . Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

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

Form 990-T (2019)

### SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

**Capital Gains and Losses** 

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

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

OMB No. 1545-0123

2019

Nam	9			E	mployer Ide	entification number
	STRA UNIVERSITY					11-1630908
	the corporation dispose of any investment(s) in a qual					► 🗌 Yes 🔲 No
	Yes," attach Form 8949 and see its Instructions for add			your gain o	r loss.	
	Short-Term Capital Gains and Losses (	See instructions	<u> </u>	1		Taxa .
	See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustm or loss from	ents to gain Form(s)	(h) Gain or (loss) Subtract column (e) from
	This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	8949, Part I column (g)	, line 2,	column (d) and combine the result with column (d)
1.	a 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					are result with column (g)
11	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					(6,954)
4	Short-term capital gain from Installment sales from Fore	m 6252, line 26 or 3	37		. 4	
5	Short-term capital gain or (loss) from like-kind exchange	es from Form 8824			. 5	
6	Unused capital loss carryover (attach computation) .				. 6	()
7	Net short-term capital gain or (toss). Combine lines 1a t	brough 6 in column	. h		. 7	(2.07.1)
	rt II Long-Term Capital Gains and Losses (S			<del></del>	<u> </u>	(6,954)
	See instructions for how to figure the amounts to enter on	(d)	(e)	(g) Adjustm	ents to gain	(h) Gain or (loss)
	the lines below.  This form may be easier to complete if you round off cents to whole dollars.	Proceeds (sales price)	Cost (or other basis)	or loss from 8949, Part II column (g)	Form(s) I, line 2,	Subtract column (e) from column (d) and combine the result with column (g)
86	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					
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 Box E checked					
10	Totals for all transactions reported on Form(s) 8949					
	with Box F checked			<u> </u>		74,985
11	Enter gain from Form 4797, line 7 or 9				. 11	590
12	Long-term capital gain from installment sales from Form	n 6252, line 26 or 3	7		. 12	
13	Long-term capital gain or (loss) from like-kind exchange	s from Form 8824			. 13	
14	Capital gain distributions (see instructions)				. 14	
	Net long-term capital gain or (loss). Combine lines 8a th	rough 14 in column	nh	<u> </u>	. 15	75,575
16		net long-term canit	al loss (line 15)		. 16	<u> </u>
17		- ,	• •	tal loss (line		68,621
	Add lines 16 and 17. Enter here and on Form 1120, pag	•	•	•	· -	68,621
	Note: If losses exceed gains, see Capital Losses in ti	-	-			/

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

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization For calendar year 2019 or other tax year beginning 09/01, 2019, and ending 08/31 .20 20

► 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 to 501(c)(3) Organizations Only

HOFSTRA UNIVERSITY Unrelated Business Activity Code (see instructions) ► 523000 11-1630906

Employer Identification number

Describe the unrelated trade or business ► INVESTMENTS Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales 1 c b Less returns and allowances 2 Cost of goods sold (Schedule A, line 7)..... 2 3 Gross profit. Subtract line 2 from line 1c . . . . . . . . . . . . 3 68,621 68,621. 4a Capital gain net income (attach Schedule D) . . . . . . . 4a b Net gain (loss) (Form 4797, Part II, fine 17) (attach Form 4797). . 4b 4c Income (loss) from a partnership or an S corporation (attach statement) . . . . . . . . . . ATCH 5 . -156,309-156,309. 5 6 Unrelated debt-financed income (Schedule E), . . . . . . Interest, annuities, royalties, and rents from a controlled 8 investment income of a section 501(c)(7), (9), or (17) 9 Exploited exempt activity income (Schedule I) . . . . . . 10 11 Advertising income (Schedule J) . . . . . . . . . . . . . . . . . . 11 279 279. Other income (See instructions, attach schedule) ATCH, 6. 12 12 -87,409. -87,409. 13 Total Combine lines 3 through 12......

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	6,848.
16	Repairs and maintenance		
17	Bad debts , ,	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule)	27	5,501.
28	Total deductions. Add lines 14 through 27	28	12,349.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-99,758.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	
31	Unrelated business taxable income Subtract line 30 from line 29	31	-99,758.

For Paperwork Reduction Act Notice, see Instructions.

Schedule M (Form 990-T) 2019

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

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning  $\frac{09/01}{}$  , 2019, and ending  $_{-}$ 

► Go to www.irs.gov/Form990T for instructions and the latest information.

(A) Income

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

(C) Net

Name of the organization HOFSTRA UNIVERSITY

Part I Unrelated Trade or Business Income

Employer Identification number 11-1630906

(B) Expenses

Unrelated Business Activity Code (see instructions) ▶ 519100 Describe the unrelated trade or business ► SPONSORSHIP/ADVERTISING

1a	Gross receipts or sales 1,250.					
	Less returns and allowances	1c	1,250.			
2	Cost of goods sold (Schedule A, line 7)	2				
3	Gross profit. Subtract line 2 from line 1c	3	1,250.			1,250.
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)	7				
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Schedule F)	8				
9	investment income of a section 501(c)(7), (9), or (17)					
	organization (Schedule G)					
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11	110			110
12	Other income (See instructions; attach schedule) ATCH, 8.		110.			110.
13	Total. Combine lines 3 through 12	13	1,360.			1,360.
Pai	til Deductions Not Taken Elsewhere (See instructio connected with the unrelated business income)				nust b	e directly
14	Compensation of officers, directors, and trustees (Schedule K)				14	
15	Salaries and wages					2,258.
16	Repairs and maintenance					
17	Bad debts				17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses		1 (		19	
20	Depreciation (attach Form 4562)				1	
21	Less depreciation claimed on Schedule A and elsewhere on re-		<u> </u>		21b	
22	Depletion					
23					23	
	Contributions to deferred compensation plans				<del></del>	
24	Employee benefit programs				24	
25	Employee benefit programs				24 25	
25 26	Employee benefit programs		• • • • • • • • • • • • • •		24 25 26	452
25	Employee benefit programs			ATCH.9	24 25 26	453. 2,711.

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

-1,351.

-1,351.

29

31

29

30

Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13

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

Unrelated business taxable income Subtract line 30 from line 29 . . . . . . . . . . . .

### SCHEDULE M (Form 990-T)

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

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service For calendar year 2019 or other tax year beginning  $\frac{09/01}{}$  , 2019, and ending  $\frac{08/31}{}$  , 20  $\frac{20}{}$ 

► Go to www.irs.gov/Form9907 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(cV3) Omenications Only

Name of the organization HOFSTRA UNIVERSITY Employer Identification number 11-1630906

Unrelated Business Activity Code (see instructions) ► 722320

Describe the unrelated trade or business ► CATERING

Pai	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales 14,559.				
b	Less returns and allowances c Balance	1 c	14,559.		
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit. Subtract line 2 from line 1c	3	14,559.		14,559.
4a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, ilne 17) (attach Form 4797)	4b			
С	Capital loss deduction for trusts	4c			-
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E),	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17)				
	organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11			
12	Other income (See instructions; attach schedule) ATCH, 10	12	2,386.		2,386.
13	Total Combine lines 3 through 12	13	16,945.		16,945.

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	1,129.
16	Repairs and maintenance	16	
17	Bad debts,	17	
18	Interest (attach schedule) (see instructions).	18	
19	Taxes and licenses	19	5,000.
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	
22	Depletion	22	-
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)		
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule)		453.
28	Total deductions. Add lines 14 through 27	28	6,582.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	10,363.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	
31	Unrelated business taxable income Subtract line 30 from line 29	31	10,363.

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

HOFSTRA UNIVERSITY

11-1630906

ATTACHMENT 1

PART I - LINE 12 - OTHER INCOME

STATE TAX REFUND

4,772.

PART I - LINE 12 - OTHER INCOME

4,772.

	ATTACHMENT 2
FORM 990T - PART II - LINE 18 - INTEREST	
INTEREST ALLOCATION TO FINANCE BUILDING USED IN UNRELATED BUSINESS ACTIVITIES	1,224.
PART II - LINE 18 - INTEREST	1,224.

ATTACHMENT	3	

FORM 990T - PART II - LINE 27 - TOTAL OTH	R DEDUCTIONS
---	--------------

SUPPLIES AND OTHER EXPENSES	2,860.
UTILITIES	29,510.
EQUIPMENT EXPENSES	1,211.
PLANT EXPENSES	15,929.
TRAVEL	19.
TAX REVIEW FEES	4,078.

53,607. PART II - LINE 27 - OTHER DEDUCTIONS

CHARITABLE CONTRIBUTION

ATTACHMENT 4

FORM 990T - PART III LINE 34 - CHARITABLE CONTRIBUTIONS	
UNRELATED TRADE OR BUSINESS INCOME	132,767.
UNRELATED TRADE OR BUSINESS INCOME (SCHEDULES M)	-69,104.
ADD: DOMESTIC PRODUCTION ACTIVITIES DEDUCTION	0.
DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (SCHEDULES M)	
LESS: DEDUCTIONS W/O CHARITABLE CONTRIBUTIONS & DPAD	157,308.
DED W/O CHARITABLE CONTRIBUTIONS & DPAD (SCH M)	21,642.
	* 10%
CHARITABLE CONTRIBUTION LIMITATION (10%)	1,036.

CHARITABLE CONTRIBUTION DEDUCTION (SMALLER OF THE ABOVE TWO)

11,201.

1,036.

HOFSTRA UNIVERSITY

ATTACHMENT 5

INVESTMENTS

SCHEDULE M - INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

INCOME (LOSS) FROM PARTNERSHIPS

-156,309.

INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

-156,309.

HOFSTRA	UNIVER	SITY
---------	--------	------

ATTACHMENT 6

SCHEDULE M - OTHER INCOME

STATE TAX REFUND

279.

TOTAL

279.

# , HOFSTRA UNIVERSITY

	ATTACHMENT 7
FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS	
TAX REVIEW FEES ALLOCATION OF INVESTMENT FEES	4,078. 1,423.
DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD)	
PART II - LINE 27 - OTHER DEDUCTIONS	5,501.

HOFSTRA UNIVERS	TRA	UNII	/ F. R.S	1 'I' Y
-----------------	-----	------	----------	---------

	ATTACHMENT 8	
SCHEDULE M - OTHER INCOME		
STATE TAX REFUND		110.
	TOTAL.	110

-	ATTACHMENT 9
FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS	
TAX REVIEW FEES	453.
DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD)	
PART II - LINE 27 - OTHER DEDUCTIONS	453.

ur	FSTR	7	LINI	T776	יס פי	TT	rν
n	/C 21 C	. ~	UN.	T A E	כתי		Ll

ATTACHMENT 10

SCHEDULE M - OTHER INCOME

STATE TAX REFUND

2,386.

TOTAL

2,386.

MOECLEY P	INTUERSTTY

	ATTACHMENT 11
FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS	
TAX REVIEW FEES	453.
DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD)	
PART II - LINE 27 - OTHER DEDUCTIO	200

56019N 832Y

V 19-8.2F 832Y

# Form **4136**

### **Credit for Federal Tax Paid on Fuels**

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

OMB No. 1545-0162

20**19** 

Attachment Sequence No 23

Internal Revenue Service (99)

Name (as shown on your income tax return)

**Hofstra University** 

Texpayer identification number 11-1630906

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 certificate.

1	Nontaxable Use of Gasoline			Note	: CRN is credit referenc	e number
		T.,			1	1
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of credit	(e) CRN
а	Off-highway business use	374,754,000	\$.183	1		
b	Use on a farm for farming purposes	7, 1, 1, 5, 5, 7, 1, 1	.183	}		362
C	Other nontaxable use (see Caution above line 1)	13	.183	45,925	\$ 8,404	
đ	Exported		.184			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)	7 344 7 3	\$.15		\$	354
b	Other nontaxable use (see Caution above line 1)		.193			324
C	Exported	15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	.194			412
d	LUST tax on aviation fuels used in foreign trade	1. 1. 2. N. T.	001			433
	Exception. If any of the diesel fuel included in this cla	(a) Type of use	(b) Rate	(o) Gallons	(d) Amount of credit	► [
а	Al desired	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	` ,		''	1.7
_	Nontavanie lise	13	\$ 243	16.381 )		<del>                                     </del>
D	Nontaxable use Use on a ferm for farming purposes	13 7577 5583	\$.243 .243	16,381	\$ 3.981	360
b	Use on a farm for farming purposes	1000 000	.243	16,381	\$ 3,981	360 353
			.243 .243	16,381	\$ 3,981	353
C	Use on a farm for farming purposes Use in trains Use in certain intercity and local buses (see Caution	1000 000	.243	16,381	\$ 3,981	-
c d	Use on a farm for farming purposes Use in trains Use in certain intercity and local buses (see Caution above line 1)	Than Kerosene Us	.243 .243 .17 .244 sed in Avia	tion)		353 350 413
c d	Use on a farm for farming purposes Use in trains Use in certain intercity and local buses (see Caution above line 1) Exported Nontaxable Use of Undyed Kerosene (Other 1) Claimant certifies that the kerosene did not contain vis	Than Kerosene Us	.243 .243 .17 .244 sed in Avia	tion)		353 350
c d	Use on a farm for farming purposes Use in trains Use in certain intercity and local buses (see Caution above line 1) Exported Nontaxable Use of Undyed Kerosene (Other 1) Claimant certifies that the kerosene did not contain vis	Than Kerosene Us	.243 .243 .17 .244 sed in Avia	tion) dye, attach an expl	anation and check here	353 350 413
c d e	Use on a farm for farming purposes Use in trains Use in certain intercity and local buses (see Caution above line 1) Exported Nontaxable Use of Undyed Kerosene (Other 1 Claimant certifies that the kerosene did not contain vis Exception. If any of the kerosene included in this claim	Than Kerosene Us lible evidence of dye. n did contain visible (a) Type of use	.243 .243 .17 .244 sed in Avia	tion) dye, attach an expl	anation and check here	353 350 413
c d e	Use on a farm for farming purposes Use in trains Use in certain intercity and local buses (see Caution above line 1) Exported Nontaxable Use of Undyed Kerosene (Other 1) Claimant certifies that the kerosene did not contain vis Exception. If any of the kerosene included in this claim	Than Kerosene Usible evidence of dyen did contain visible (a) Type of use	.243 .243 .17 .244 sed in Avia evidence of (b) Rate \$.243	tion) dye, attach an expl	anation and check here  (d) Amount of credit	353 350 413 ▶ [ (e) CRN
c d e	Use on a farm for farming purposes Use in trains Use in certain intercity and local buses (see Caution above line 1) Exported Nontaxable Use of Undyed Kerosene (Other 1 Claimant certifies that the kerosene did not contain vis Exception. If any of the kerosene included in this claim Nontaxable use taxed at \$.244 Use on a farm for farming purposes Use in certain intercity and local buses (see Caution	Than Kerosene Usible evidence of dyen did contain visible (a) Type of use	.243 .243 .17 .244 sed in Avia evidence of (b) Rate \$.243 .243	tion) dye, attach an expl	anation and check here  (d) Amount of credit	353 350 413 ▶ [ (e) CRN
c d e 4	Use on a farm for farming purposes Use in trains Use in certain intercity and local buses (see Caution above line 1)  Exported  Nontaxable Use of Undyed Kerosene (Other 1)  Claimant certifies that the kerosene did not contain vise Exception. If any of the kerosene included in this claim  Nontaxable use taxed at \$.244  Use on a farm for farming purposes  Use in certain intercity and local buses (see Caution above line 1)	Than Kerosene Us lible evidence of dye. n did contain visible (a) Type of use	.243 .243 .17 .244 sed in Avia evidence of (b) Rate \$.243 .243	tion) dye, attach an expl	anation and check here  (d) Amount of credit	353 350 413 ▶ [ (e) CRN 346

Nontaxable use taxed at \$.219

.218

5	Kerosene	Used in	Aviation	(see Cau	ıtion 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
C	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

### Sales by Registered Ultimate Vendors of Undyed Diesel Fuel

### Registration No.

Claimant certifles 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 ca	edit	(e) CRN	
a	Use by a state or local government	\$ .243		\$	Τ	360	
b	Use in certain intercity and local buses	.17			T	350	

### 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.

Exception. If any of the kerosene 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
а	Use by a state or local government	\$.243	ì		
b	Sales from a blocked pump	.243	}	\$	346
C	Use in certain intercity and local buses	.17			347

### 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		\$.175		\$	355
b	Use in commercial aviation (other than foreign trade) taxed at \$.244		.200			417
C	Nonexempt use in noncommercial aviation		.025			418
d	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 (2019)

### 9 Reserved for future use

### Registration No. ▶

		(b) Rate	(c) Gallons of alcohol	(d) Amount of credit	(e) CRN
а	Reserved for future use	, _	1 12 1 6	\$	1 -5-5-
b	Reserved for future use	1	7 - 1 64 7 1 8 2 13		25 - 14

### 10 Biodiesel or Renewable Diesel Mixture Credit

### Registration No. ▶

Biodiesel mixtures. Claimant produced a mixture by mixing biodiesel with classel fuel. The biodiesel used to produce the mixture met ASTM D6751 and met EPA's registration requirements for fuels and fuel additives. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, the Statement of Biodiesel Reseller. Renewable diesel mixtures. Claimant produced a mixture by mixing renewable diesel with liquid fuel (other than renewable diesel). The renewable diesel used to produce the renewable diesel intiture was derived from blomass, met EPA's registration requirements for fuels and fuel additives, and met ASTM D975, D396, or other equivalent standard approved by the IRS. The mixture was sold by the claimant to any person for use as a fuel or was used as a fuel by the claimant. Claimant has attached the Certificate for Biodiesel and, if applicable, Statement of Biodiesel Reseller, both of which have been edited as discussed in the instructions for line 10. See the instructions for line 10 for information about renewable diesel used in aviation.

		(b) Rate	(c) Gallons of biodiesel or renewable diesel	(d) Amount of credit	(e) CRN
а	Blodlesel (other than agri-biodiesel) mixtures	\$1.00		\$	388
b	Agri-blodiesel mixtures	1 00			390
C	Renewable diesel mixtures	1.00			307

### 11 Nontaxable Use of Alternative Fuel

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, or gasoline or diesel gallon equivalents	(d) Amount of credit	(e) CRN
а	Liquefled petroleum gas (LPG) (see Instructions)		\$.183		\$	419
b	"P Series" fuels		.183			420
C	Compressed natural gas (CNG) (see instructions)	13	.183	1,023	187	421
d	Liquefied hydrogen		.183			422
е	Flscher-Tropsch process liquid fuel from coal (including peat)		.243			423
f	Liquid fuel derived from blomass		.243			424
g	Liquefied natural gas (LNG) (see instructions)		.243			425
h	Liquefied gas derived from biomass		.183			435

### 12 Alternative Fuel Credit

### Registration No. ▶

		(b) Rate	(c) Gallons, or gasoline or diesel gallon equivalents	(d) Amount of credi	(e) CRN
а	Liquefied petroleum gas (LPG) (see instructions)	\$.50		\$	426
b	"P Series" fuels	.50			427
C	Compressed natural gas (CNG) (see instructions)	.50		i	428
d	Liquefied hydrogen	.50			429
е	Fischer-Tropsch process liquid fuel from coal (including peat)	.50			430
f	Liquid fuel derived from biomass	.50			431
g	Liquefled natural gas (LNG) (see instructions)	.50			432
h	Liquefled gas derived from biomass	.50			436
i	Compressed gas derived from blomass	.50			437

Form 4136 (2019)

13	Registered Credit Card Issuers		-	Registration No	o. ►	
			(b) Rate	(c) Gallons	(d) Amount of cre	dit (e) CRN
а	Diesel fuel sold for the exclusive use of a state or local of	government	\$.243		\$	360
þ	Kerosene sold for the exclusive use of a state or local gr	overnment	.243			346
C	Kerosene for use in aviation sold for the exclusive use of a state or local government taxed at \$.219		.218			369
14	Nontaxable Use of a Diesel-Water Fuel Emulsion	on	4			
	Caution: There is a reduced credit rate for use in	certain intercity a	and local bu	ises (type of use	5). See instructions.	
		(a) Type of use	(b) Rate	(c) Gallons	(d) Amount of cre	dit (e) CRN
а	Nontaxable use		\$.197		\$	309
<u>b</u>	Exported	ـ - تر	.198			306
15	Diesel-Water Fuel Emulsion Blending		1	Registration No.		
			(b) Rate	(c) Gallons	(d) Amount of cre	dit (e) CRN
	Blender credit		\$.046		\$	310
16	Exported Dyed Fuels and Exported Gasoline Bi	lendstocks				
			(b) Rate	(c) Gallons	(d) Amount of cre-	dit (e) CRN
а	Exported dyed diesel fuel and exported gasoline blends: at \$.001	tocks taxed	\$ .001		s	415
ь	Exported dyed kerosene	*	.001			416
17	Exported dyed kerosene  Total income tax credit claimed. Add lines 1 through 16, column (d). Enter here and on Schedule 3 (Form 1040 or 1040-SR), line 12; Form 1120, Schedule J, line 20b; Form 1120-S, line 23c; Form 1041, Schedule G, line 16b; or the proper line of other returns					

Form 4136 (2019)

# Form 4562

Department of the Treasury Internal Revanue Service (99)

Name(s) shown on return

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

► Attach to your tax return.

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

OMB No. 1545-0172

Attachment Sequence No 179

HOFSTRA UNIVERSITY Business or activity to which this form relates identifying number 11-1630906

G.	ENERAL DEPRECIATION	J							
Pai	rt I Election To Expense C Note: If you have any lis				you comp	olete Part I.			
1	Maximum amount (see instructions).							1	
2	Total cost of section 179 property pla	aced in service (see in	nstructions)					2	
	Threshold cost of section 179 proper							3	
4	Reduction in limitation. Subtract line Dollar limitation for tax year Subtract line 4 from separately, see instructions	3 from line 2 If zero o	or less, enter -0-					<b>4</b> 5	
6	(a) Description		<del></del> 1	(b) Cost (bu	siness use onl	v) (c) Elect	ed cost		
	(1,000,000,000,000,000,000,000,000,000,0		+	(5) 5551 (25		(0) 2.00			1
			<u>†</u>						<b>†</b>
7	Listed property Enter the amount fro	m line 29			7				
	Total elected cost of section 179 pro							8	
	Tentative deduction Enter the smalle							9	
10	Carryover of disallowed deduction from	om line 13 of your 20	18 Form 4562				```	10	
	Business income limitation Enter the							11	<del></del>
	Section 179 expense deduction Add							12	
	. Carryover of disallowed deduction to								
	: Don't use Part II or Part III below fo								
Pai	t II Special Depreciation A	llowance and Ot	her Depreci	ation (D	on't include	listed proper	ty See	inst	ructions )
14	Special depreciation allowance for								
	during the tax year See instructions							14	
	Property subject to section 168(f)(1)							15	
	Other depreciation (including ACRS)							16	
	t III MACRS Depreciation (								
			Secti	on A		<u> </u>			
17	MACRS deductions for assets placed	in service in tax yea	rs beginning be	fore 2019			[	17	24,005
	If you are electing to group any a asset accounts, check here	•	-	•		- ,	al		
	Section B - Assets						reciati	on Sv	vstem
		(b) Month and year	(c) Basis for de				T		
40-	(a) Classification of property	placed in service	(business/inves only - see inst	stment use	period	(e) Convention	(f) Me	thod	(g) Depreciation deduction
19a		DETAIL					<del> </del>		
	5-year property	DETAIL				<u></u>			
	7-year property 10-year property								
							<del> </del>		
	15-year property 20-year property			<del></del>		<del></del>	<del> </del>		
	25-year property				25 yrs	<del> </del>	S/		
	<del></del>		<del>-</del>		25 yrs	MM	S/		
	Residential rental				27 5 yrs		ļ		
	property	VAR	2/	,250.	27 5 yrs	MM	S/		4.
	Nonresidential real	VAL			39 yrs	MM	S/		4.
	property Section C. Assets B	least in Samilas D		ov Voor	Holon Abo				Suntam
202	Section C - Assets P Class life	laced in Service D	uring zors i	ax rear	Using the A	Alternative De	S/		System
	12-year				12 100		S/		
	30-year				12 yrs	MM	SI		
	<del></del>				30 yrs	MM	SI	_	
	411-\rear								
	40-year	one )			40 yrs	IVIIVI	0/		
	t IV Summary (See instruction	· <del>-</del> · · · · · · · · · · · · · · · · · · ·			40 yrs	101101			
21		e 28	7 Hans 40				]	21	

11-1630906 Form 4562 (2019) Page 2 Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used Part V 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 X No 24b If "Yes," is the evidence written? Yes X No (e) (c) **(f)** (i) (a) (b) (a) (d) Business/ Basis for depreciation Type of property (Est Elected section 179 Date placed Recovery Method/ Depreciation Cost or other basis investment use (business/investment vehicles first) Convention déduction 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. See instructions 26 Property used more than 50% in a qualified business use % 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, . . . . . . . 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 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 (b) (f) (a) (c) (d) Vehicle 1 Vehicle 3 Vehicle 2 Vehicle 4 Vehicle 5 Vehicle 6 Total business/investment miles driven during the year (don't include commuting miles) . . . 31 Total commuting miles driven during the year. 32 Total other personal (noncommuting) 33 Total miles driven during the year. Add lines 30 through 32 . . . . . . . . . . . . . . . . No 34 Was the vehicle available for personal No No Yes Yes No use during off-duty hours?....... 35 Was the vehicle used primarily by a more than 5% owner or related person?..... 36 is another vehicle available for personal 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. See instructions. No 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 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 39 Do you treat all use of vehicles by employees as personal use? 40 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? 41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions 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 (e) (b) Amortization (c) (d) Date amortization Description of costs Amortizable amount Code section period or Amortization for this year begins percentage 42 Amortization of costs that begins during your 2019 tax year (see instructions).

Form 4562 (2019)

43

44

43 Amortization of costs that began before your 2019 tax year

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

## **8949**

### Sales and Other Dispositions of Capital Assets

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

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

OMB No. 1645-0074

2019 Attachment

Sequence No. 12A

( acritical	(a) allowil	Officer	

Department of the Treasury

Internal Revenue Service

Social security number or taxpaver identification number

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.

**HOFSTRA UNIVERSITY** 11-1630906 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 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 Adjustment, if any, to gain or loss. 1 If you enter an amount in column (g), (e) enter a code in column (f). (c) Date sold or Cost or other basis See the Note below Gain or (loss). See the separate instructions Proceeds Subtract column (e) Description of property Date acquired disposed of (sales price) and see Column (e) from column (d) and (Example: 100 sh. XYZ Co ) (Mo., day, yr.) (Mo., day, yr.) (see instructions) in the separate combine the result Code(s) from Instructions Amount of adjustment with column (g) instructions

LOSS FROM LP INVESTMENTS (6,954)2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked) ▶

(6,954)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.

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

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.

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.

<ul><li>□ (D) Long-term transactions</li><li>□ (E) Long-term transactions</li><li>□ (F) Long-term transactions</li></ul>	reported on	Form(s) 1099	-B showing bas	-			)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below	If you enter an enter a co See the sep	ment, if any, to gain or loss. Inter an amount in column (g), Inter a code in column (f). Gain or Subtract of	
(Example: 100 sh. XYZ Co.)	(Mo , day, yr.)	disposed of (Mo., day, yr.)	v. vr.) (see instructions) In the separate	(f) Code(s) from Instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)	
GAIN FROM LP INVESTMENTS							74,985
			-				
						<del> </del>	
			·				
		:					
					r		
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line &b (if Box D above above is checked), or line 10 (if Box	i here and inci is checked), lin	ude on your e 9 (if Box E				:	74 985

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.

74,985