Form 990-T (2018)

For Paperwork Reduction Act Notice, see instructions. 8X2740 170018LN L388 341

Unrelated business taxable income Subtract line 31 from line 30 . . .

Form	990-1 (2		· · · · · · · · · · · · · · · · · · ·					Page Z
Pai	t III	Total Unrelated Business Taxabl	e Income					
33		of unrelated business taxable income con	•	•				
•	ınstruc	tions)			. 33		-29,	231.
34	Amoun	ts paid for disallowed fringes			. 34			
35	Deduct	ion for net operating loss arising in	tax years beginning before J	anuary 1, 2018 (see				
	ınstruc	tions)		ATCH. 3	. 35			
36	Total (	of unrelated business taxable income befor	e specific deduction Subtract	line 35 from the sum				
	of lines	33 and 34			. 36	-	-29,	231.
37	Specifi	c deduction (Generally \$1,000, but see line 37	instructions for exceptions)	38	37		1,	000.
38	Unrela	ted business taxable income. Subtract line	37 from line 36. If line 37 is	s greater than line 36	·   <del>/ .  </del>			
		ne smaller of zero or line 36				-	29.	231.
Pai		Tax Computation			7,00			
39		zations Taxable as Corporations. Multiply line 3	38 by 21% (0.21)		39			
40	Trusts		structions for tax computation					
70		ount on line 38 from Tax rate schedule o	<u> </u>	)	1 1			
44				•	-			
41		ax. See instructions						
42								
43		Noncompliant Facility Income. See instructions						
44		Add lines 41, 42, and 43 to line 39 or 40, which	ever applies		44			
Par		Tax and Payments			<del></del>	_		
		tax credit (corporations attach Form 1118, true			-			
		redits (see instructions)			4			
С	Genera	I business credit Attach Form 3800 (see instruc	tions)	ic	4			
ď	Credit 1	or prior year minimum tax (attach Form 8801 or	· 8827)	<u>d</u>	- 1			
е		redits. Add lines 45a through 45d						
46		t line 45e from line 44						
47		xes Check if from Form 4255 Form 8611			$\overline{}$			
48	Total ta	x. Add lines 46 and 47 (see instructions)			. 48			0.
49		et 965 tax liability paid from Form 965-A or For						
50 a	Payme	nts A 2017 overpayment credited to 2018		<b>a</b> 639				
b	2018 e	stimated tax payments						
С	Tax dep	posited with Form 8868		<b>c</b> 65,000	<u>.</u>			
		organizations Tax paid or withheld at source (s		d	╛			
е	Backup	withholding (see instructions)	<u>50</u>	e	<b>」</b> │			
f	Credit f	or small employer health insuranc <u>e pr</u> emiums (a	attach Form 8941) <u>50</u>	of	_			
g	Other c	redits, adjustments, and payments Form 24	439					
	F	orm 4136 Other _	Total ▶ <u>50</u>	g	_			
51	Total p	ayments. Add lines 50a through 50g		<u></u>	51	1	.87 <b>,</b> :	139.
52	Estimat	ed tax penalty (see instructions) Check if Form	2220 is attached	▶ ∟	52			
53	Tax du	e. If line 51 is less than the total of lines 48, 49	, and 52, enter amount owed	(نیزیردییییی	53,			
54	Overpa	yment. If line 51 is larger than the total of lines	48, 49, and 52, enter amount over	oaid <u></u>	54			139.
55	Enter th	e amount of line 54 you want	mated tax ▶10,000.	5(∩ Refunded ▶	55	1	77,	139.
Par	t VI	Statements Regarding Certain A	ctivities and Other Inforn	nation (see instructio	ns)			
56	At any	time during the 2018 calendar year, did	the organization have an interest	est in or a signature o	r other	authority	Yes	No.
	over a	financial account (bank, securities, or oth	er) in a foreign country? If "Y	es," the organization r	nay have	e to file		
	FinCEN	Form 114, Report of Foreign Bank and	Financial Accounts If "Yes," e	enter the name of the	foreign	country		1
	here 🕨							Х
57	During	the tax year, did the organization receive a disti	ribution from, or was it the grantor	of, or transferor to, a for	eign trust	·	_	Х
	_	see instructions for other forms the organization		•	J			
58		ne amount of tax-exempt interest received or ac	_					
		nder penalties of perjuly, I declare that I have examined to	this return, including accompanying schedul	es and statements, and to the	best of my	/ knowledge a	and beli	ef, it is
Sigr	」、ぐ	ie, correct and complete Declaration of greparer (other than ta	. / /					
Her		- MEX	6/01/20 DNPG		•	RS discuss preparer shi		
	_ / / _	gnature of officer	Date Title			ns)? X Ye		No
		Print/Type preparer's name	Preparer's signature	Date		PTIN	_	
Paid		LAURA J PARELLO		Che		P0108	3029	5
Prep	arer	DD T OFFI BERLIA TO CO	PERS LLP		employed	13-4008		
Use	Only	Firm's name ► PRICEWATERHOUSECOC Firm's address ► 300 MADISON AVENUE			ne no 64	6-471-3	3000	
		Films address > 500 FIADISON AVENUE	, LEW TORK, NI TOOT?	Pho	те по 💆	Form 99		(2010)
JSA						rom JJ	, U - I (	(ZUIB)

Form 990-T (2018)									Page 3
Schedule A - Cost of G	oods Sold. Er	ter method	d of invento	ory valuation	<b>&gt;</b>				
1 Inventory at beginning of y	ear 1			6 Inventory	at end of yea	ır	6		
2 Purchases	2			7 Cost of	goods sol	d. Subtract line			
3 Cost of labor				6 from	line 5 En	ter here and in			
4a Additional section 263A co	osts			Part I, line	2		7		
(attach schedule)	4a					section 263A (w	ith r	espect to	Yes No
<b>b</b> Other costs (attach schedu				property	produced	or acquired for	resa	le) apply	
5 Total. Add lines 1 through						<u> </u>			N/A
Schedule C - Rent Income	(From Real P	roperty a	nd Persor	nal Property	Leased V	ith Real Proper	ty)		
(see instructions)	•								
1. Description of property		<u> </u>							
(1)									
(2)			<del>-</del> ··						
(3)		· · · · · · · · · · · · · · · · · · ·							
(4)								•	
	2. Rent recei	ved or accru	ed						
(a) From personal property (if the	percentage of rent	(b) F	rom real and	personal property	(if the	3(a) Deductions di			
for personal property is more th more than 50%)				r personal property based on profit or		in columns 2(a	a) and 2	(b) (attach sch	iedule)
(1)			-						
(2)		•							
(3)	-								
(4)									
Total		Total							
(c) Total income. Add totals of c	olumns 2(a) and 2(					(b) Total deduction Enter here and on		i	
here and on page 1, Part I, line 6		•				Part I, line 6, colum			
Schedule E - Unrelated D			e instructi	ons)				-	
	· · · · ·			income from or	3. [	eductions directly con			le to
1. Description of del	bt-financed property			o debt-financed	(a) Straigh	debt-finance		erty (b) Other dedu	ictions
			pı	roperty		ch schedule)	'	(attach sched	
(1)	-								
(2)									
(3)									
(4)						T			
4. Amount of average	5. Average adju	sted basis		Column				Allocable ded	luctions
acquisition debt on or allocable to debt-financed	of or alloca debt-financed			divided		ncome reportable 1 2 x column 6)		ımn 6 x total o	
property (attach schedule)	(attach sche		by c	column 5	(column	1 Z X column o)		3(a) and 3(	b))
(1)				%					
(2)				%					
(3)				%					
(4)				%					
						e and on page 1,		r here and o	
					Part I, lin	e 7, column (A)	Par	t I, line 7, col	umn (B)
Totals									
Total dividends-received deduct					<u>-</u> -	▶			

OCHE	edule F—Interest, Annu	anics, Noyunic			ontrolled Or			110110 (00	o monaom	31.07	
•	Name of controlled organization .	2 Employer identification numb	er		lated income instructions)	1	of specifi ints made	ed included	of column 4 to in the control tion's gross in	olling	6 Deductions directly connected with income in column 5
(1)											
(2)										_	
(3)											
(4)	<u>_</u>										<u> </u>
None:	xempt Controlled Organia	zations									
	7. Taxable Income	8. Net unrelated in (loss) (see instruc			Total of specifical payments made		ıncl	Part of column uded in the co nization's gros	ontrolling		Deductions directly nnected with income in column 10
(1)											
(2)											
(3)								<del></del>			
(4)						<del></del>		d columns 5		<u> </u>	dd columns 6 and 11
Totals Sche	dule G-Investment Ir	ncome of a Sec		I(c)(7),	(9), or (17		Pai	er here and on t i, line 8, colu on (see ins	ımn (A)		ter here and on page 1, art I, line 8, column (B)  5. Total deductions
	1 Description of income	2. Amount of	income		directly co (attach sci	nnected			et-asides i schedule)		and set-asides (col 3 plus col 4)
(1)				_							
(2)							-+				
(3) (4)							-+			-+	
		Enter here and Part I, line 9, c	olumn (A)	ther Th	nan Advert	ising Ir	come	(see instri	uctions)		Enter here and on page 1 Part I, line 9, column (B)
1 D	escription of exploited activity	2 Gross unrelated business income from trade or business	3. Exp dire connect produc unrel business	ctly ed with tion of ated	4 Net incorfrom unrelator business 2 minus colf a gain, cols 5 thre	ted trade (column lumn 3) ompute	from is no	oss income activity that at unrelated less income	6. Expe attributa colum	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)	· <u>-</u>							-			
(2)										-	
(3)											
(4)			•								
		Enter here and on page 1, Part I, line 10, col (A)	Enter her page 1, line 10,	Part I,							Enter here and on page 1, Part II, line 26
	dule J– Advertising In	como (coo instr	uctions)	<del></del>							
Part				Conso	lidated Ba	eie					
rarı	Income From Fer	louicais ixeport	eu on a	COHSO	lluateu Da	313					1
	1. Name of periodical	2. Gross advertising income	3. Di advertisii		4. Adver gain or (los 2 minus c a gain, co cols 5 three	ss) (col ol 3) If mpute	l	Circulation ncome	6. Read		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))			-							Form <b>990-T</b> (2018
											Form 99U-1 (2018

Part I Income From Pe 2 through 7 on a			rate Basis (For	each periodical	listed in Part II	, fill in columns
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) ▶						
Schedule K - Compensatio	n of Officers, D	irectors, and Tr	ustees (see insti	ructions)		
1. Name		2.	Title	3 Percent of time devoted to business	4 Compensatio unrelated	
(1)				%		
(2)				%		
(3)				%		
(4)				%		
Total. Enter here and on page 1, P	art II, line 14					

Form **990-T** (2018)

#### 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

2018

Name Employer identification number PACE UNIVERSITY 13-5562314 Short-Term Capital Gains and Losses (See instructions) (g) Adjustments to gain (h) Gain or (loss) See instructions for how to figure the amounts to enter on (d) (e) or loss from Form(s) Subtract column (e) from the lines below Proceeds Cost 8949, Part I, line 2, column (d) and combine This form may be easier to complete if you round off cents to (or other basis) (sales price) column (g) the result with column (g) whole dollars 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 372. Short-term capital gain from installment sales from Form 6252, line 26 or 37 4 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 Unused capital loss carryover (attach computation) . . . . . . . . . 6 7 Net short-term capital gain or (loss) Combine lines 1a through 6 in column h 372. Long-Term Capital Gains and Losses (See instructions Part II See instructions for how to figure the amounts to enter on (h) Gain or (loss) (g) Adjustments to gain (e) the lines below or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part II, line 2, column (d) and combine This form may be easier to complete if you round off cents to (sales price) (or other basis) column (g) the result with column (g) whole dollars 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However if you choose to report all these transactions on Form 8949 leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 Totals for all transactions reported on Form(s) 8949 with Box Echecked . . . . . . . . . . . . . . . . . Totals for all transactions reported on Form(s) 8949 33,156. Enter gain from Form 4797, line 7 or 9 11 Long-term capital gain from installment sales from Form 6252, line 26 or 37

Part III Summary of Parts I and II

Net capital gain Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) ... 17 33,156.

Add lines 16 and 17 Enter here and on Form 1120, page 1, line 8, or the proper line on other returns ... 18 33,528.

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

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

Long-term capital gain or (loss) from like-kind exchanges from Form 8824

Capital gain distributions (see instructions)

Net long-term capital gain or (loss) Combine lines 8a through 14 in column h

Schedule D (Form 1120) 2018

33,156.

13

14

# Form 8949

## 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

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

Attachmen

Internal	Reve	nue S	ervi	ce
Name	s) st	OWD	on	retur

Social security number or taxpayer identification number

13-5562314

PACE UNIVERSITY Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute

statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I 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

(a) Description of property	Date acquired Date s	(c) Date sold or	Proceeds S	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if a lif you enter a coordinate separate sepa	(h) Gain or (loss) Subtract column (e	
(Example 100 sh XYZ Co)	(Mo , day, yr )	Mo day vr) disposed of (sa	(sales price) (see instructions)		(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) an combine the result with column (g)
FROM SCHEDULE K-1 PACE UNIVERSI							
TY FUND, LP							372.
	,						
		_					
	<u> </u>		_				
<del>_</del>							
2 Totals. Add the amounts in columns negative amounts) Enter each total Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C ab	here and including checked), line	lude on your e 2 (if Box B					372

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2018)	Attachment Sequence No 12A	Page 🛭
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	
PACE UNIVERSITY,	13-5562314	
Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or	* * *	

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 Part II

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

	OD) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see <b>Note</b> above)
	(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
х	(F) Long-term transactions not reported to you on Form 1099-B

instructions). For short-term transactions, see page 1

1 (a) Description of property	(b) Date acquired	(c) (d) Cost or other basis enter a code in column (f)  Date sold or Proceeds See the Note below See the separate instruction	(d) Cost or other basis enter a code in column (f) Proceeds See the Note below See the separate instructions	(e) If you enter an amount in column (g), other basis Note below See the separate instructions				
(Example 100 sh XYZ Co)	(Mo , day, yr )	(Mo , day, yr )	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)	
FROM SCHEDULE K-1 PACE UNIVERSI								
TY FUND, LP							33,156.	
					ļ !			
				<del>                                     </del>				
<del></del>								
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				ļ				
				}				
		<del></del>					<del>_</del>	
<del></del>								
				<del></del>			<del> </del>	
2 Totals. Add the amounts in columns ( negative amounts) Enter each total Schedule D, line 8b (if Box D above a above is checked), or line 10 (if Box	here and incluis checked), line	ide on your 9 (if Box E					33.156	

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)

# Form 3800 Department of the Treasury

**General Business Credit** 

► Go to www.irs.gov/Form3800 for instructions and the latest information.

You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

OMB No 1545-0895

2018
Attachment
Sequence No 22

Name(s) shown on return

Identifying number

PACE	UNIVERSITY		-3362314
Part I	Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT (See instructions and complete Part(s) III before Parts I and II)	<b>「</b> )	
	General business credit from line 2 of all Parts III with box A checked	1	
1	<b>1</b> 1		
2		١,	
3	Enter the applicable passive activity credits allowed for 2018 See instructions	3_	
4	Carryforward of general business credit to 2018 Enter the amount from line 2 of Part III with box C checked See instructions for statement to attach	4	
_		<del>                                     </del>	
5	Carryback of general business credit from 2019 Enter the amount from line 2 of Part III with box D checked See instructions	5	
6	Add lines 1, 3, 4, and 5	6	
Part II			<u> </u>
7	Regular tax before credits		
	<ul> <li>Individuals Enter the sum of the amounts from Form 1040, line 11a, and Schedule 2</li> </ul>		
	(Form 1040), line 46, or the sum of the amounts from Form 1040NR, lines 42 and 44		
	• Corporations Enter the amount from Form 1120, Schedule J, Part I, line 2, or the	l _	
	applicable line of your return	7	
	• Estates and trusts Enter the sum of the amounts from Form 1041, Schedule G,		
	lines 1a and 1b, or the amount from the applicable line of your return $\dots$		
8	Alternative minimum tax	1	
	• Individuals Enter the amount from Form 6251, line 11		
	• Corporations Enter -0	8	
	• Estates and trusts Enter the amount from Schedule I (Form 1041), line 56		
9	Add lines 7 and 8	9	
10a	Foreign tax credit		
	Certain allowable credits (see instructions)	1	
	Add lines 10a and 10b	10c	
C	Add lilles Tod and Tob		
11	Net income tax. Subtract line 10c from line 9 If zero, skip lines 12 through 15 and enter -0- on line 16	11	
	Thet income tax. Subtract line 100 from line 3 if 2210, 3kp lines 12 through 10 and office 3 of line 10		
40	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0-		
12	Net regular tax. Subtract line 10c from line 7 If zero or less, enter -0-	1	
	T . 050( (0.05) ( )		
13	Enter 25% (0 25) of the excess, if any, of line 12 over \$25,000 See		
	instructions	1	
14	Tentative minimum tax		
	● Individuals Enter the amount from Form 6251, line 9		
	• Corporations Enter -0	4	
	Estates and trusts    Enter the amount from Schedule I		
	(Form 1041), line 54		
15	Enter the greater of line 13 or line 14	15	
16	Subtract line 15 from line 11 If zero or less, enter -0	16	,
17	Enter the smaller of line 6 or line 16 · · · · · · · · · · · · · · · · · ·	17	
••	C corporations: See the line 17 instructions if there has been an ownership change, acquisition,		
	or reorganization		

Note:	If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter	er -0- o	n line 26
18	Multiply line 14 by 75% (0 75) See instructions	18	
19	Enter the greater of line 13 or line 18	19	
20	Subtract line 19 from line 11 If zero or less, enter -0	20	
21	Subtract line 17 from line 20 If zero or less, enter -0	21	<del></del>
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	
23	Passive activity credit from line 3 of all Parts III with box B checked 23		
24	Enter the applicable passive activity credit allowed for 2018 See instructions	24	
25	Add lines 22 and 24	25	<del></del>
26	Empowerment zone and renewal community employment credit allowed Enter the smaller of line 21 or line 25	26	·
27	Subtract line 13 from line 11 If zero or less, enter -0	27	
28	Add lines 17 and 26	28	
29	Subtract line 28 from line 27 If zero or less, enter -0	29	
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	
31	Reserved	31	<del></del>
32	Passive activity credits from line 5 of all Parts III with box B checked 32	-	
33	Enter the applicable passive activity credits allowed for 2018 See instructions	33	
34	Carryforward of business credit to 2018 Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked See instructions for statement to attach	34	8.
35	Carryback of business credit from 2019 Enter the amount from line 5 of Part III with box D checked See instructions	35	
36	Add lines 30, 33, 34, and 35	36	8.
37	Enter the smaller of line 29 or line 36	37	
38	Credit allowed for the current year. Add lines 28 and 37 Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return  Individuals Schedule 3 (Form 1040), line 54, or Form 1040NR, line 51  Corporations Form 1120, Schedule J, Part I, line 5c	38	Form <b>3800</b> (2018)

Р	aq	e	3

Form 3800 (2018)

Name(s	s) shown on return		Identifying number	
DACE	UNIVERSITY		13-5562314	
Part		truction		
	elete a separate Part III for each box checked below See instructions			
A	General Business Credit From a Non-Passive Activity E Reserved			
в	General Business Credit From a Passive Activity F Reserved			
c >	<del></del>	Rusine	ess Credit Carryfon	wards
Ď	General Business Credit Carrybacks H Reserved	. Buo	oo oroun ourryror	
_	you are filing more than one Part III with box A or B checked, complete and attach first an a	additiona	I Part III combining	amounts from all Parts
	with box A or B checked Check here if this is the consolidated Part III			
	(a) Description of credit		(b)	(c)
	On any line where the credit is from more than one source, a separate Part III is needed for e hrough entity	each	If claiming the credit from a pass-through entity, enter the EIN	Enter the appropriate amount
	Investment (Form 3468, Part II only) (attach Form 3468)	1a		
	Reserved	1b		
	Increasing research activities (Form 6765)	1c		
d	Low-income housing (Form 8586, Part I only)	1d		
e	Disabled access (Form 8826) (see instructions for limitation)	1e		
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f		
g	Indian employment (Form 8845)	1g		
_	Orphan drug (Form 8820)	1h		
i	New markets (Form 8874)	1i	<u></u>	
i	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j		
k	Employer-provided child care facilities and services (Form 8882) (see	_		
	instructions for limitation)	1k		
ı	Biodiesel and renewable diesel fuels (attach Form 8864)	11		
m	Low sulfur diesel fuel production (Form 8896)	1m	<u> </u>	
n	Distilled spirits (Form 8906)	1n		
o	Nonconventional source fuel (carryforward only)	10		
р	Energy efficient home (Form 8908)	1р		
q	Energy efficient appliance (carryforward only)	1q		
r	Alternative motor vehicle (Form 8910)	1r		
s	Alternative fuel vehicle refueling property (Form 8911)	1s		
t	Enhanced oil recovery credit (Form 8830)	1t		
u	Mine rescue team training (Form 8923)	1u		
v	Agricultural chemicals security (carryforward only)	1v	· <del></del> -	
w	Employer differential wage payments (Form 8932)	1w		
x	Carbon oxide sequestration (Form 8933)	1x		
у	Qualified plug-in electric drive motor vehicle (Form 8936)	1y		
Z	Qualified plug-in electric vehicle (carryforward only)	1z _	_	
aa	Employee retention (Form 5884-A)	1aa		
bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb		
<b>ZZ</b>	Other Oil and gas production from marginal wells (Form 8904) and certain			
	other credits (see instructions)	1zz		<del></del>
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2		
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3		
4a	Investment (Form 3468, Part III) (attach Form 3468)	_4a		
b	Work opportunity (Form 5884)	4b		
С	Biofuel producer (Form 6478)	4c		
d	Low-income housing (Form 8586, Part II)	4d		
е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e		
f	Employer social security and Medicare taxes paid on certain employee tips (For的图像6)?	4f		8.
g	Qualified railroad track maintenance (Form 8900)	4g		
h	Small employer health insurance premiums (Form 8941)	4h		
İ	Increasing research activities (Form 6765)	4i		
j	Employer credit for paid family and medical leave (Form 8994)	4j		<u> </u>
Z	Other	4z		
5	Add lines 4a through 4z and enter here and on the applicable line of Part II			8.
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		8.

# Form 4562

Department of the Treasury

Internal Revenue Service

## **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

2018

Attachment Sequence No 179

Name(s) shown on return

Identifying number

13-5562314 PACE UNIVERSITY Business or activity to which this form relates PACE UNIVERSITY FUND, LP **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I 1,000,000. 1 Total cost of section 179 property placed in service (see instructions). . . . . . . . 2 2,500,000. Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If marned filing separately, see instructions 1,000,000. 5 6 (a) Description of property (b) Cost (business use only) 119 FROM SCHEDULE K-1 119. Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 R 9 119. Carryover of disallowed deduction from line 13 of your 2017 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions NONE 11 Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11... NONE 12 Carryover of disallowed deduction to 2019 Add lines 9 and 10, less line 12 . . . . 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions 14 15 Other depreciation (including ACRS) 16 MACRS Depreciation (Don't include listed property. See instructions.) Section A 17 If you are electing to group any assets placed in service during the tax year into one or more general Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (e) Convention (g) Depreciation deduction placed in (a) Classification of property (business/investment use period service only - see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L S/I 27 5 yrs MM h Residential rental 27 5 yrs MM S/L property ММ S/L 39 yrs i Nonresidential real MM property Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/I S/L c 30-year 30 yrs MM 40 yrs мм S/L d 40-year Part IV Summary (See instructions.)

here and on the appropriate lines of your return. Partnerships and S corporations - see instructions

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter

NONE

21

rom	1 4302 (2018)														
Pa		operty (Include			certain	oth	er ve	hicles	, certa	ain air	craft,	and	prope	rty us	ed fo
		ent, recreation, or iny vehicle for wi			n the st	andard	milea	ne rati	e or dea	ductina	lease	exnense	- comi	olete oi	nlv 24a
	24b, column	ns (a) through (c) o	of Section A,	all of	Section E	3, and S	Section	Cıfap	plicable	ducting	icasc	САРСПЗС	, com,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	y
_		Depreciation and	_								passe	nger au	itomobil	es)	
24a	Do you have evident						es		24b lf "					Yes	No
	(a)	(b)	(c)				(e)		(f)		g)		(h)		(i)
	Type of property (list	Date placed	Business/ investment us	Cost	(d) or other ba	1	sis for depr siness/inve		Recovery		hod/		eciation		section 179
	vehicles first)	in service	percentage			,50	use only		period	Conv	rention	ded	uction	c	cost
25	Special depreciati	on allowance for	qualified lis	sted pi	roperty p	olaced	ın serv	vice di	uring						
	the tax year and us	sed more than 50°	% in a qualifi	ed bus	iness us	e See	instruc	tions	<u>.</u>	<u></u>	. 25				
26	Property used mo	re than 50% in a c	qualified busi	ness us	se										
				%								ļ		<u>.</u>	
				%											
				%								L			
27	Property used 50°	% or less in a qual	ified busines:	suse											
				%						S/L -				1	
				%						S/L -		ļ			
				%						S/L -				1	
	Add amounts in co														
29	Add amounts in co	olumn (ı), line 26	Enter here a	nd on	line 7, pa	ige 1 <u>.</u>	<u></u>		<u></u>		<u></u>		. 29	<u> </u>	
					Informa										
Con	nplete this section for	or vehicles used by	y a sole prop	orietor,	partner,	or othe	r "more	than	5% own	er," or r	elated	person	If you p	rovided	vehicle
to y	our employees, first ar	swer the questions	in Section C to	see If	you meet	an exce	eption to	compl	eting this			т			
				I	(a) nicle 1		<b>b)</b> ıcle 2	\ \/e	(c) hicle 3		d) ıcle 4		( <b>e)</b> ncle 5		(f) nicle 6
30	Total business/inv			"	iicie i	Ven	ICIE Z	"	sincie 3	1	1010 4	***		''	
	the year (don't inc	lude commuting r	miles)							<del> </del>		<del> </del>		-	
31	Total commuting r		-	_						<u> </u>		<del> </del>		-	
32	•	personal (nonc	•												
	miles driven							-				-		-	
33	Total miles drive		•												
	lines 30 through 3			V	1 84-	V		V	No	Vac	No.	Vac	No	Yes	T No.
34	Was the vehicl		•	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	res	No
	use during off-duty				<del> </del>			-				<del> </del>	+		<del> </del>
35	Was the vehicle		=												
••	than 5% owner or	•			<del>                                     </del>				<b></b>		<del>                                     </del>	+			1
36	Is another vehicuse?	cie avaliable for	personal												
		etien C. Overti	iono for Em		L M/ha	Drovi	ida Val	hiolog	for Ho	by Th	oir En	nlovo	J	1	
		ection C - Questi								-				who	ron't
	swer these question re than 5% owners		-		eption to	o com	pieting	Secui	וטו פ וונ	venicie	s useu	by em	pioyees	WING a	ireii i
														Yes	No
37	•											mmutir	ıg, by		1
38	your employees? Do you maintain	a written policy	statement	that p	rohibits i	oerson	al use	of ve	hicles, e	except	commu	tina. by	v vour		1
•	employees? See t														
39				-											
40	Do you provide r						in info	 rmatio	n from	your e	nploye	es abo	ut the		1
	use of the vehicles														
41						demo	nstratio	n use	See ins	truction	s S				1
	Note: If your ansv													ļ	
Pa	rt VI Amortizat											_			
			(L)	-						• • •	(6	<del>)</del>			
	(a)	-6	(b) Date amore	tization	۸	(c)			(d)		Amort		Amortiz	(f) ation for t	thic year
	Description	OI COSIS	begin	s	Am	oruzable 	amount		Code se	SCHOTT		od or ntage		ation for t	ma yedi
42	Amortization of co	sts that begins du	ring your 20	18 tax	year (se	e instru	uctions	)							
			T		<u> </u>										
														_	
	<del></del>														
43	Amortization of co	sts that began be	fore your 20	18 tax	year							43	<u></u>	<u> </u>	

#### ATTACHMENT 1

# FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS OR S CORPORATIONS

ORDINARY BUSINESS INCOME (LOSS) NET RENTAL REAL ESTATE INCOME (LOSS) OTHER NET RENTAL INCOME (LOSS) INTEREST INCOME ORDINARY DIVIDENDS ROYALTIES OTHER PORTFOLIO INCOME (LOSS) CANCELLATION OF DEBT OTHER INCOME (LOSS) INVESTMENT INTEREST EXPENSE DEDUCTIONS-ROYALTY INCOME SECTION 59 (E) (2) EXPENDITURES DEDUCTIONS-PORTFOLIO OTHER OTHER DEDUCTIONS FOREIGN TAXES PAID FOREIGN TAXES ACCRUED	-26,253.
FOREIGN TAXES ACCRUED COST DEPLETION	-42. -6,477.
INCOME (LOSS) FROM PARTNERSHIPS	-44,403.

ATTACHMENT 2

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

ACCOUNTING FEES

17,550.

PART II - LINE 28 - OTHER DEDUCTIONS

17,550.

PACE UNIVERSITY 13-5562314

FORM 990-T, PAGE 1 DETAIL

#### LINE 20 - CONTRIBUTIONS DEDUCTION

1.	TAXABLE INCOME EXCLUDING CONTRIBUTIONS	-29,231.
2.	LESS: NOL CARRYOVER	371,130.
3.	PLUS: CAPITAL LOSS CARRYBACK	
4.	TAXABLE INCOME WITHOUT REGARD TO CONTRIBUTIONS, SPECIAL	
	DEDUCTIONS, NOL CARRYBACKS, AND CAPITAL LOSS CARRYBACKS	-400,361.
5.	CONTRIBUTION DEDUCTION LIMITATION (TAXABLE INCOME X 10%)	NONE
6.	AMOUNT OF DEDUCTIBLE CONTRIBUTIONS	21,935.
7.	CONTRIBUTION DEDUCTION (LESSER OF LINE 5 OR LINE 6)	NONE

LINE 20 - 5 YEAR CONTRIBUTION CARRYOVER - 10% INCOME CAP

YEAR ENDING	AMOUNT AVAILABLE	AMOUNT UTILIZED	CONVERTED TO NOL CARRYOVER	CARRYOVER TO NEXT YEAR
06/30/2014 06/30/2015 06/30/2016	3,333. 2,338. 745.	NONE NONE NONE		2,338. 745.
06/30/2017 06/30/2018 06/30/2019	12,305. 2,924. 290.	NONE NONE NONE		12,305. 2,924. 290.
TOTAL	21,935.	NONE		18,602.

EXPIRED CARRYOVER:

3,333.

LINE 20 - CURRENT YEAR CONTRIBUTIONS

,		
CONTRIBUTIONS	FROM PASS-THROUGH	ACTIVITIES 290.
TOTAL		290.
		=======================================

\_\_\_\_\_

ATTACHMENT 3

## FORM 990-T: PART III - LINE 35 - PRIOR YEARS NET OPERATING LOSS DEDUCTION

LOSS YEAR ENDING	ORIGINAL LOSS	LOSS AVAILABLE IN CURRENT YEAR	LOSS CLAIMED IN CURRENT YEAR
06/30/1999 06/30/2000 06/30/2001 06/30/2002 06/30/2003 06/30/2004 06/30/2005 06/30/2006 06/30/2007 06/30/2008 06/30/2009 06/30/2010 06/30/2011 06/30/2012 06/30/2013 06/30/2014 06/30/2015 06/30/2016 06/30/2017 06/30/2018	11,217. 8,717. 20,776. 53,941. 50,409. 36,781. 62,748. 39,581. 55,247. 31,713.	11,217. 8,717. 20,776. 53,941. 50,409. 36,781. 62,748. 39,581. 55,247. 31,713.	
TOTAL:	371,130.	371,130.	
·	M OF LINE 33 & 34	ON PAGE 2, 990T))	371,130. -29,231.
	NET OPERATING LOS	S DEDUCTION	•