ι',	1	3. 7	,						293	933	260	<b>5</b> 128 (
•	Eorm	990-T │	Ex		anization d proxy tax						ОМВ	No 1545-0687
	e''		For cale		ther tax year begin						9	<b>1Ω</b>
	Depart	ment of the Treasury			irs.gov/Form990							. U I U
		l Revenue Service	Do		bers on this form a						501(c)(3)	Oublic Inspection for Organizations Only
	AL	Check box if address changed		Name of organizat	ion ( Check be	ox if nai	me changed and s	ee instruction	s)			ication number ee instructions )
	D Eve	empt under section	4	AMERICAN	UNIVERSITY							
	_	501( C <b>D</b> 3 )	Print		nd room or suite no	faPO	box, see instruction	ons		53-0	196549	
	H	408(e) 220(e)	or Type									ess activity code
		408A 530(a)	.,,,,,	C/O CONTR	OLLER'S OF	FICE			357	(See in	istructions)	
		529(a)			or province, country	•	- ·	al code			0.0	
		ok value of all assets and of year		<u> </u>	N, DC 2001					5259	90	
		2052830523.			mber (See instruct /pe ► X 501			501(c	\ teuct	401(a)	truct	Other trust
		nter the number of									(or first) u	
2	tra	ade or business he	re ►INV	ESTMENT IN	PARTNERSHI	IPS		If only one,	complete Parts I	•	•	
Š	-	st in the blank spa					Parts I and II, c	omplete a S	chedule M for ea	ch additio	nal	
8		ade or business, th										<del></del>
<b>C</b>		uring the tax year,						-subsidiary o	controlled group?		▶∟	Yes _X_No
2		"Yes," enter the name books are in care				rporati	on 🕨	Telephon	e number ▶ 20	2-885	-2822	
=		t Unrelated					(A) Inco		(B) Exper		1	(C) Net
	1a	Gross receipts or		<u></u>					· · · · ·	_	-	
Z		Less returns and allowa			c Balance ▶	1c						
SCAMNED	2	Cost of goods so	ld (Sched	ule A, line 7)		2						<u>}</u>
3	3	Gross profit Sub				3			,		1	38,333.
(C)		Capital gain net i	•			4a	3	88,333.	·		<del>                                     </del>	
	b	Net gain (loss) (For Capital loss dedu				4b 4c	- <u>u</u> -				<del> </del>	
	5	Income (loss) from a p				5`	19	0,950,	ATCH 1			190,950.
	6	Rent income (Sch				6						
	7	Unrelated debt-fi	nanced in	come (Schedule E		7					ļ <u> </u>	<del></del>
	8	Interest, annuities, roy	alties, and re	ents from a controlled or	ganization (Schedule F)						ļ	
	9	Investment income of				10/					<del>-  </del>	
	10 11	Exploited exempt Advertising incom	-	,		- T					-	
	12	Other income (Si				12					_	
	13	Total. Combine li	nes 3 thr	ough 12	<i>/</i>	13		9,283.				229,283.
	Par	t II Deductio	ns Not	Taken Elsewh	<b>ıere</b> ∕(See insti	ructio				Except	for contr	ibutions,
					nnected with t					T		<u> </u>
	14	Compensation of						• • • • •		. 14		
	15 16	Salaries and wage Repairs and main			REC	ΞIV	ED l			. 16		
	17	Bad debts			PERSONAL PROPERTY.					17		_
	18	Interest (attach s	chedule)	(see instructions).	8 1111 . 9	1 2	η <b>ρη.</b> .   Θ΄ .			18		
	19	Taxes and license	s . ,/.		$\wp$		<u> </u>		STMT	. 19		5,335.
	20	Charitable contril	butións (S	See instructions fo	r limitation rules)	ĽĀľ	1117		5.M.1. 210	· · <del> </del>	-	11,536.
	21	Depreciation (att						21	210	<del></del>	-	210.
	22 23	Less depreciation					_			22b	<del>'                                     </del>	
	23 24	Contributions to										
	25	Employee benefit										
	26	Excess exempt ex	xpenses (	Schedule I)						26	<u> </u>	
	27	Excess readership									<u> </u>	100 201
	28	Other deductions							~		,	108,381.
	29 20 /	Total deductions Unrelated busine		-	o not energing					24 <u>29</u> 13 30	+	103,821.
	30/ 31/	Unrelated busined Deduction for net									1	
	3 y 32	Unrelated busine							_	1 /32		103,821.
	For F	aperwork Reduct	tion Act N				<u> </u>			7	F	om <b>990-T</b> (2018)
	6XZ74	<sup>0 1</sup> 7791BI <sup>JS</sup> 700	OP						•			

_	990 T (2018)			Page 2
Pa	rt III Total Unrelated Business Taxable Income			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see			
	instructions).	233	23	6,861.
34	Amounts paid for disallowed fringes	34		
35				
	instructions). STMT 2	35	23	6,861.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum			
•	of lines 33 and 34	36		
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37		
38	Unrelated business taxable income. Subtract line 37 from line 36 If line 37 is greater than line 36,			
	enter the smaller of zero or line 36	38		0.
Pa	rt IV Tax Computation	· · · · · ·		
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0 21)	39		
40	Trusts Taxable at Trust Rates. See instructions for tax computation income tax on			
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041)	40		_
41	Proxy tax. See instructions	41		
42	Alternative minimum tax (trusts only)	42		
43	Tax on Noncompliant Facility Income. See instructions	43		
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44		
Pai	Tax and Payments			
45 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a			
	Other credits (see instructions)	1 1		
	General business credit Attach Form 3800 (see instructions)	1		
	Credit for prior year minimum tax (attach Form 8801 or 8827)	1		
	Total credits Add lines 45a through 45d	45e		
46	Subtract line 45e from line 44	46		
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Other (attach schedule).	<del> </del>		
48	Total tax. Add lines 46 and 47 (see instructions)			0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	<del></del>		
	Payments A 2017 overpayment credited to 2018	- <del>``</del>  -		
	2018 estimated tax payments	1		
	Tax deposited with Form 8868	1		
	Foreign organizations Tax paid or withheld at source (see instructions) 50d	1		
	Backup withholding (see instructions)	1		
	Credit for small employer health insurance premiums (attach Form 8941) 50f	1		
q		1 1		
y	Form 4136 Other Total 50g			
51	Total payments. Add lines 50a through 50g	51		
		52		
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached			
53 E4	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53		
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54		
55 Par	Enter the amount of line 54 you want			
56	Statements Regarding Certain Activities and Other Information (see instruction At any time during the 2018 calendar year, did the organization have an interest in or a signature or			es No
30	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may		, ' ⊢	110
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	-		ľ
	here BELGIUM, SPAIN	Toreign		x l
			<del></del>	X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign and the control of the control	ign trust?.	⊢	<del>-   ^-</del> -
	If "Yes," see instructions for other forms the organization may have to file			
<u>58</u>	Enter the almount of tax-exempt interest received or accrued during the tax year > \$30,248,004.  Under penalties of perjury, I declare that I have permined this return, including accompanying schedules and statements, and to the beginning to the penalties of perjury.	est of mi	knowledge es	helief 14
0:	true correct, and complete. Declaration of preparer (wher than taynaver) is based on all information of which preparer has any knowledge	ear or my	kilowiedge and	ueiler, It IS
Sign	- I A A B OND UD C MDDA GUDDD		S discuss th	
Her		h the p	reparer show	
		e instructions	)? X Yes	No
Paid	Print/Type preparer's name Preparer's signature Oate Check	k∐ ıf	PTIN	
	MART TORRETTA ) dum ( 1000 to 1007 227 2020 seite	mployed	P00847	
	Firm's name GRANT THORNTON LLD		86-60555	
	Firm's address ▶ 1000 WILSON BOULEVARD, SUITE 1400, ARLINGTON, VA 22209 Phone	<sub>e no</sub> 703	8-847-75	
JSA			Form 990	- <b>T</b> (2018)

Form 990 <sup>2</sup> T (2018)									F	Page 3
Schedule A - Cost of G	oods Sold. Er	ter method	d of inventor	y valuation	<b>&gt;</b>					
1 Inventory at beginning of y	ear . 1			6 Inventory	at end of year	ar	6		_	
2 Purchases	2					ld. Subtract line	[ ]			
3 Cost of labor	3			6 from	line 5 En	iter here and in				
4 a Additional section 263A co	osts			Part I, line	2		7			
(attach schedule)	4a		1			section 263A (wi	ıth resp	ect to	Yes	No
b Other costs (attach schedu				property	produced	or acquired for	resale)	apply	$\Box$	
5 Total. Add lines 1 through	4b · 5		·	to the org	anization?		<u>.</u> .	<u></u>		l
Schedule C - Rent Income	(From Real P	roperty a	nd Persona	al Property	Leased V	Vith Real Proper	ty)			
(see instructions)										
1. Description of property										
(1)										
(2)										
(3)										
(4)	<u>-</u>									
	2. Rent recei	ved or accrue	ed							
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)  (b) From real and percentage of rent for personal property is more than 10% but not percentage of rent for percentage of rent for personal property is more than 50%)				ersonal property	erty exceeds in columns 2(a) and 2(b) (attach schedule					me
(1)										
(2)										
(3)										
(4)										
Total		Total								
(c) Total income. Add totals of co	olumns 2(a) and 2(	b) Enter				(b) Total deduction Enter here and on				
here and on page 1, Part I, line 6						Part I, line 6, colum				
Schedule E - Unrelated De	ebt-Financed I	ncome (se	e instruction	ns)						
	<del></del> -		2 Gross in	come from or	3. [	3. Deductions directly connected with or allocable debt-financed property				
1 Description of deb	t-financed property			debt-financed	(a) Straigh	nt line depreciation	(b) Other deductions			
			prop	perty		ch schedule)	(attach schedule)			
(1)										
(2)								_		
(3)	<u>.                                    </u>									
(4)						1188				
Amount of average     acquisition debt on or     allocable to debt-financed     property (attach schedule)	5. Average adjust of or allocal debt-financed (attach sche	ble to property	4 dı	olumn vided lumn 5		income reportable n 2 x column 6)	(column	ocable deduce of 6 x total of c 3(a) and 3(b)	columi	
(1)				%						
(2)				%						
(3)				%						
(4)				%						
					Enter her Part I, lin	e and on page 1, le 7, column (A)	Enter h Part I,	ere and on line 7, colun	page nn (B	1,
Totals		 olumn 8								

Schedule F-Interest, Annu	inies, Royanies			trolled Or			ations (see	: IIISti uctic	,,,,,	<del></del>
Name of controlled organization	2 Employer identification numb	er 3 Ne	t unrela	ted income structions)	4 Total		ied included	f column 4 th in the contro on's gross in	olling	6 Deductions directly connected with income in column 5
(1)										
(2)							<u></u>			
(3)										
(4)					<u> </u>					•
Nonexempt Controlled Organiz	zations									
7. Taxable Income	8. Net unrelated in (loss) (see instruc			otal of specific syments made		10 Part of column 9 that is included in the controlling organization's gross income			11. Deductions directly connected with income in column 10	
(1)										
(2)										
(3)										
(4)	_									
Totals			· · · · :)(7), (	 (9), or (17	▶ ) Orga	Ent Pa	dd columns 5 a er here and on rt I, line 8, colui	page 1, mn (A)	Ent	ld columns 6 and 11 er here and on page 1, rt I, line 8, column (B)
1. Description of income	2 Amount of income			3 Deduction of the 3 Deduction o	nnected			t-asides schedule)		5. Total deductions and set-asides (col 3 plus col 4)
(1)			<u></u>							
(2)										
(3)										
(4)										
Totals ▶ Schedule I – Exploited Exe	Enter here and Part I, line 9, c mpt Activity In	olumn (A)	er Tha	an Advert	ising Ir	come	(see 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	3. Expens directly connected production unrelated business inc	with n of d	4 Net incor from unrela or business 2 minus co If a gain, c cols 5 thm	ted tradé (column lumn 3) ompute	from IS no	5. Gross income from activity that is not unrelated business income  6. Expenses attributable to column 5		ble to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)										
(2)										-
(3)										
		_								1
	Enter here and on page 1, Part I, line 10, col (A)	Enter here and page 1, Page 1, col	irtl,						·	Enter here and on page 1, Part II, line 26
Totals				<u> </u>		<del>.</del>			•	
Schedule J- Advertising In				data d Di						
Part I Income From Per	lodicals Report	red on a Co	onsoli	dated Ba	SIS	_		·		<u> </u>
1. Name of periodical	2. Gross advertising income	3 Direct advertising co		4. Adver gain or (los 2 minus co a gain, co cols 5 thm	ss) (col ol 3) If mpute	5 Circulation income		6. Readership costs		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)							·			
(2)								Ì		<u></u>
(3)										7
(4)										7
Totals (carry to Part II, line (5))										Form <b>990-T</b> (2018

Total. Enter here and on page 1, Part II, line 14.

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns Part II 2 through 7 on a line-by-line basis.) 4 Advertising 7. Excess readership gain or (loss) (col costs (column 6 2 Gross 3 Direct 5. Circulation 6. Readership minus column 5, but 2 minus col 3) If 1 Name of periodical advertising advertising costs costs income not more than income a gain, compute column 4) cols 5 through 7 (1) (2) (3) (4) Totals from Part I. Enter here and on Enter here and Enter here and on page 1, Part I. page 1, Part I, on page 1, Part II, line 27 line 11, col (A) line 11, col (B) Totals, Part II (lines 1-5) . Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 4. Compensation attributable to unrelated business time devoted to business (1) (2) % (3) % (4) %

Form 990-T (2018)

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

## **Unrelated Business Taxable Income for Unrelated Trade or Business**

OMB No 1545-0687

Department of the Treasury

For calendar year 2018 or other tax year beginning 07/01, 2018, and ending

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

Open to Public Inspection for 501(c)(3) Organizations Only ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Internal Revenue Service Name of organization

Employer identification number

53-0196549 AMERICAN UNIVERSITY Unrelated business activity code (see instructions) ▶ 713940 Describe the unrelated trade or business ► FITNESS CENTER

Pai	Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales 82,610.				
b	Less returns and allowances C Balance	1c	82,610.		
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit Subtract line 2 from line 1c	3	82,610.		82,610
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)	9			
10	Exploited exempt activity income (Schedule I)	1			
11	Advertising income (Schedule J)	11			
12	Other income (See instructions, attach schedule)	12			
13	Total. Combine lines 3 through 12	13	82,610.		82,610

Deductions Not Taken Elsewhere (See instructions for limitations on deductions ) (Except for contributions, deductions must be directly connected with the unrelated business income )

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	70,237.
16	Repairs and maintenance	16	
17	Bad debts		
18	Interest (attach schedule) (see instructions)		528,271.
19	Taxes and licenses		84.
20	Charitable contributions (See instructions for limitation rules)		
21	Depreciation (attach Form 4562)		
22	Less depreciation claimed on Schedule A and elsewhere on return	22b	
23	Depletion	23	
24	Contributions to deferred compensation plans	l	
25	Employee benefit programs	25	20,391.
26	Excess exempt expenses (Schedule I).	l	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule)	28	27,089.
29	Total deductions. Add lines 14 through 28	29	646,072.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-563,462.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	31	
32	Unrelated business taxable income Subtract line 31 from line 30	32	-563,462.
F 1	2 Padestan Ad Nation and Instruction		-badula M /Farm 000 T\ 2019

For Paperwork Reduction Act Notice, see Instructions

Schedule M (Form 990-T) 2018

### SCHEDULE M (Form 990-T)

## Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

2018

Department of the Treasury Internal Revenue Service For calendar year 2018 or other tax year beginning  $\underline{07/01}$  , 2018, and ending  $\underline{06/30}$  , 20  $\underline{1}$ 

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

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

Open to Public Inspection

Name of organization
AMERICAN UNIVERSITY

Employer identification number 53-0196549

Unrelated business activity code (see instructions) ► 532490

Describe the unrelated trade or business ► BROADCASTING TOWER RENTAL

¹P′aı	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales				
b	Less returns and allowances c Balance	1c	·		
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit Subtract line 2 from line 1c	3			
4a	Capital gain net income (attach Schedule D)	4a			
ь	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) ATCH 5	6	344,334.	198,196.	146,138.
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)				<u> </u>
	organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)		-		
12	Other income (See instructions, attach schedule)	12			
13	Total. Combine lines 3 through 12	13	344,334.	198,196.	146,138.

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

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance		
17	Bad debts		
18	Interest (attach schedule) (see instructions)		
19	Taxes and licenses		83.
20	Charitable contributions (See instructions for limitation rules)	20	14,198.
21	Depreciation (attach Form 4562)		
22	Less depreciation claimed on Schedule A and elsewhere on return 22a	22b	
23	Depletion	23	
24	Contributions to deferred compensation plans		
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)		
27	Excess readership costs (Schedule J)		
28	Other deductions (attach schedule)		4,075.
29	Total deductions Add lines 14 through 28		18,356.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	127,782.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions),		
32	Unrelated business taxable income Subtract line 31 from line 30		127,782.

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

# SCHEDULE M (Form 990-T)

## Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

2018

Department of the Treasury Internal Revenue Service -06/30, 20 19

(B) Expenses

► 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)

(A) Income

Open to Public Inspection for 501(c)(3) Organizations Only

(C) Net

Name of organization
AMERICAN UNIVERSITY

Part I Unrelated Trade or Business Income

Employer identification number 53-0196549

Unrelated business activity code (see instructions) ► 541850

Describe the unrelated trade or business ► EXCLUSIVE PROVIDER CONTRACT

1a	Gross receipts or sales				}
b	Less returns and allowances c Balance ▶ 1	1c			
2	Cost of goods sold (Schedule A, line 7)	2			<u> </u>
3	Gross profit Subtract line 2 from line 1c	3			
4a	Capital gain net income (attach Schedule D) 4	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
		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) 1	10			<u> </u>
11	Advertising income (Schedule J) 1	11			
12	Other income (See instructions, attach schedule) ATCH. 7.	12	10,000.		10,000.
13	Total. Combine lines 3 through 12	13	10,000.		10,000.
14	deductions must be directly connected with the unre			14	
15	Salaries and wages				
16	Repairs and maintenance				
17	Bad debts				
18	Interest (attach schedule) (see instructions)				
19	Taxes and licenses			19	83.
20	Charitable contributions (See instructions for limitation rules)		ŞŢMŢ	1. 20	584.
21	Depreciation (attach Form 4562)		21		_
22	Less depreciation claimed on Schedule A and elsewhere on retur			221	
23	Depletion			23	
24	Contributions to deferred compensation plans				
25	Employee benefit programs			25	
26	Excess exempt expenses (Schedule I)			26	
27				l l	
	Excess readership costs (Schedule J)			27	
28	Excess readership costs (Schedule J)				4,075.
28 29	Other deductions (attach schedule)	 	ATCH:	8. <b>28</b>	4,075. 4,742.
	Other deductions (attach schedule)	 	ATCH:	8. <b>28</b>	4,075. 4,742.
29 30	Other deductions (attach schedule)	 	ATCH:	8 28 29 13 30	4,075. 4,742. 5,258.
29	Other deductions (attach schedule)	 oss d eginr	ATCH:	8. 28 29 13 30 see	4,075. 4,742. 5,258.

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

#### SCHEDULE D (Form 1120)

**Capital Gains and Losses** 

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

OMB No 1545-0123

Department of the Treasury Internal Revenue Service Name

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

Employer identification number 53-0196549

AME	RICAN UNIVERSITY			[	!	53-0196549
Par	Short-Term Capital Gains and Losses	(See instructions	)			
•	See Instructions for how to figure the amounts to enter on the lines below  This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments or loss from Fon 8949, Part I, line column (g)	n(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
12	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			coloniii (g)		the result man column (g)
11	o 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					
4	Short-term capital gain from installment sales from F	Form 6252, line 26 or 3	7		4_	
5	Short-term capital gain or (loss) from like-kind exchain	nges from Form 8824	· · · · · · · · · · · · · · · ·		5	
6	Unused capital loss carryover (attach computation)				6_	( )
	Net short-term capital gain or (loss) Combine lines 1	la through 6 in column	h	<u> </u>	7	
Par	Long-Term Capital Gains and Losses	(See instructions.)	<u></u>			·
	See instructions for how to figure the amounts to enter on the lines below  This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments or loss from For 8949, Part II, lin column (g)	n(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8 a	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					
8 t	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 Echecked	,				
10	Totals for all transactions reported on Form(s) 8949 with Box F checked	38,333.				38,333.
11	Enter gain from Form 4797, line 7 or 9				11	
12	Long-term capital gain from installment sales from F	Form 6252, line 26 or 3	7		12	
13	Long-term capital gain or (loss) from like-kind exchan	nges from Form 8824			13	
14	Capital gain distributions (see instructions)	14				
15 Pari	Net long-term capital gain or (loss) Combine lines 8:  Summary of Parts I and II	a through 14 in column	h ,	<u></u>	15	38,333.
16	Enter excess of net short-term capital gain (line 7) or	ver net long-term capita	l loss (line 15)		16	
17	Net capital gain Enter excess of net long-term capit				17	38,333.
18	Add lines 16 and 17 Enter here and on Form 1120, Note: If losses exceed gains, see Capital losses in the	page 1, line 8, or the p			18	38,333.

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

Schedule D (Form 1120) 2018

Form 8949 (2018) Attachment Sequence No 12A

Social security number or taxpayer identification number Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side 53-0196549 AMERICAN UNIVERSITY

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 Part II 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

8a; you aren't requir							aule D, line
You must check Box D, E, or F E a separate Form 8949, page 2, formore of the boxes, complete as m  (D) Long-term transactions r  (E) Long-term transactions r  X (F) Long-term transactions r	or each applic any forms wit reported on F reported on F	able box If y h the same b orm(s) 1099- orm(s) 1099-	ou have more lo box checked as y -B showing basis B showing basis	ong-term transa rou need was reported to	o the IRS (see	will fit on this pa	
1 (a) Description of property	(b) Date sold or Date acquired disposed of (category).  (c) (d) (e) (e) (framework) Adjustment, if any, to gain or loss lif you enter an amount in column (g).  (c) (d) (category) (category) See the Note below (category).					(h) Gain or (loss). Subtract column (e) from column (d) and	
(Example 100 sh XYZ Co)	(Mo , day, yr )	(Mo , day, yr )	(see instructions)	in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
LP LONG TERM GAIN			38,333				38,333.
					=		
2 Totals Add the amounts in columns negative amounts) Enter each total Schedule D, line 8b (if Box D above	here and incli	ude on your	20.222				20.222

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

38,333

Form **8949** (2018)

38,333

above is checked), or line 10 (if Box F above is checked) ▶

# Form **4562**

Department of the Treasury Internal Revenue 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 Identifying number

AMERICAN UNIVERSITY

53-0196549

Business or activity to which this form relates							
_INVESTMENT IN PARTN	<u>ERSHI</u> PS					_	
Part I Election To Expense							
Note: If you have any	sted property, cor	mplete Part	V before	you comp	olete Part I		
1 Maximum amount (see instructions)						1	1,000,000
2 Total cost of section 179 property p							210
3 Threshold cost of section 179 proper	-						2,500,000
4 Reduction in limitation Subtract line 5 Dollar limitation for tax year Subtract line 4 fro separately, see instructions	3 from line 2 If zero of m line 1 If zero or less, enter	or less, enter -( -0- If married filing	)- 			4	1,000,000
6 (a) Description				siness use on			
SECTION 179 PROPERTY	FROM LPS			210		210	
	<u></u>						]
7 Listed property Enter the amount fr	om line 29			7			
8 Total elected cost of section 179 pr							210
9 Tentative deduction Enter the small							210
10 Carryover of disallowed deduction f							
11 Business income limitation Enter th							210
12 Section 179 expense deduction Ad	d lines 9 and 10, but	don't enter mo	ore than line	:11 <u></u>	<del></del>	12	210
13 Carryover of disallowed deduction to				<b>▶</b> 13			
Note: Don't use Part II or Part III below f							<del>,</del>
Part II Special Depreciation							tructions)
14 Special depreciation allowance f							
during the tax year. See instructions							<del> </del>
15 Property subject to section 168(f)(1)							
16 Other depreciation (including ACRS)	<u> </u>				<del></del>	16	<u> </u>
Part III MACRS Depreciation (	Don't include listed		_	tions )	<del></del> -		
			tion A			1.47	
17 MACRS deductions for assets place	•	• •					
18 If you are electing to group any asset accounts, check here	•	•	•		- ,	<u>ai</u>	İ
	s Placed in Service					reciation S	vstem
<u> </u>	(b) Month and year	(c) Basis for	depreciation	(d) Recovery			
(a) Classification of property	placed in service	(business/inv only - see in	estment use	penod	(e) Convention	(f) Method	(g) Depreciation deduction
b 5-year property	<del> </del>	<del></del>				ļ.——	<del></del>
b 5-year property c 7-year property	<del></del>	ļ <u></u>		_			
d 10-year property	<del> </del>	<del> </del>		_		-	
e 15-year property	<del></del>	ļ		_		ļ	<del> </del>
f 20-year property	<del></del>			_			
g 25-year property	<del> </del>	<del> </del>		25 yrs		S/L	<del>                                     </del>
h Residential rental				27 5 yrs	мм	S/L	
property				27 5 yrs	MM	S/L	
i Nonresidential real				39 yrs	MM	S/L	· · · · · · · · · · · · · · · · · · ·
property	<del>-</del>				MM	S/L	
Section C - Assets	Placed in Service D	During 2018	Tax Year	Using the			System
20a Class life		1	100, 100,		THE THE PERSON OF THE PERSON O	S/L	
b 12-year	<del></del>	·		12 yrs		S/L	
c 30-year	_			30 yrs	ММ	S/L	
d 40-year	-			40 yrs	ММ	S/L	
Part IV Summary (See instruct	ions.)	<u></u> -			<del></del>		
21 Listed property Enter amount from I	<del></del>					21	
22 Total. Add amounts from line 12,		7, lines 19 ai	nd 20 in c	column (g).	and line 21 E	•••	
here and on the appropriate lines of	our return Partnershi	ps and S corp	orations - se	e instruction		22	210
For assets shown above and place portion of the basis attributable to se	ed in service during ection 263A costs	the current	year, ente	er the 23			

ATTACHMENT 1

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

INCOME (LOSS) FROM PARTNERSHIPS

190,950.

INCOME (LOSS) FROM-PARTNERSHIPS

190,950.

### ATTACHMENT 2

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

TAX PREPARATION FEES - PARTNERSHIPS INVESTMENT MANAGEMENT FEES - PARTNERSHIPS

4,075. 104,306.

PART II - LINE 28 - OTHER DEDUCTIONS

108,381.

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ATTACHMENT 4
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SCHEDULE N	M -	PART	ΙI	LINE	28	TOTAL	OTHER	DEDUCTIONS
------------	-----	------	----	------	----	-------	-------	------------

OPERATIONS & MAINTENANCE - FITNESS CENTER
INSURANCE - FITNESS CENTER
TAX PREPARATION FEES - FITNESS CENTER

11,972.

11,042.

4,075.

PART II - LINE 28 - OTHER DEDUCTIONS

27,089.

ATTACHMENT 5

. BROADCASTING TOWER RENTAL

SCHEDULE M - LINE 6 SCHEDULE C RENT INCOME

3(A) DEDUCTIONS DIRECTLY CONNECTED WITH THE INCOME IN COLUMN 2(A) AND 2(B) (ATTACH SCHEDULE)	198,196.	IONS. ENTER	1, PART I, 198,196.
MENTS RELATED TO BROADCASTING TOWER  1D OR ACCRUED  (2) FROM REAL  PERCENTAGE OF RENT FOR PERSONAL PROPERTY EXCEEDS  50% OR IF THE RENT IS BASED ON PROFIT OR INCOME)	344,334.	198,196. (B) TOTAL DEDUCTIONS. ENTER	HERE AND ON PAGE 1, PART I, 344,334. LINE 6, COLUMN (B)
LEASE AGREEMENTS RELATED TO  2 RENT RECEIVED OR ACCRUED  IF THE  (2) FROM REAL AND PER  NAL PROPERTY PERCENTAGE OF RENT FC  THAN 50%) 50% OR IF THE RENT IS		TOTAL	JMN 2(A) AND 2(B).
1 DESCRIPTION OF PROPERTY 1 RENTAL REVENUE FROM LEASE AGREEMENTS 2 RENT RECEIVED OR AC (1) FROM PERSONAL PROPERTY (IF THE (2) FROPERCENTAGE OF RENT FOR PERSONAL PROPERTY PERCENT IS MORE THAN 10% BUT NOT MORE THAN 50%) 50% OR	1	TOTAL	(C) TOTAL INCOME. ADD TOTALS OF COLUMN 2(A) AND 2(B) ENTER HERE AND ON PAGE 1, PART I, LINE 6, COLUMN (A)

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ATTACHMENT 6

SCHEDULE M - PART II LINE 28 TOTAL OTHER DEDUCTIONS

TAX PREPARATION FEES - BROADCASTING TOWER

4,075.

PART II - LINE 28 - OTHER DEDUCTIONS

4,075.

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ATTACHMENT 8

SCHEDULE M - PART II LINE 28 TOTAL OTHER DEDUCTIONS

TAX PREPARATION FEES - EXCLUSIVE PROVIDER

4,075.

PART II - LINE 28 - OTHER DEDUCTIONS

4,075.

AMERICAN UNIVERSITY EIN 53-0196549

Form 990-T, Part I, Line 20 FYE 6/30/2019

### **Charitable Contributions Carryforward**

Fiscal Year Ended	Charitable Contributions Made	Charitable Contributions Used	Carryforward available for next year	Period Charitable Contributions used	
4/30/2016	1,261,683	(26,318)	1,235,365	FYE 6/30/2019	
4/30/2017	1,176,296	-	2,411,661	N/A	
4/30/2018	1,912,282	-	4,323,943	N/A	
6/30/2018 Short Year	314,705	-	4,638,648	N/A	
6/30/2019	2,418,176	-	7,056,824	N/A	

Carryforward to FYE 6/30/2020

7,056,824

AMERICAN UNIVERSITY EIN 53-0196549

Form 990-T, Part III, Line 35

·FYE 6/30/2019

Net Operating Loss Arising in Tax Years Beginning Before January 1, 2018

Fiscal Year Ended	Net Operating Loss Incurred	Net Operating Loss (Used)	IRC Section 512(A)(7) Parking Benefits Adjustment	Parking Lot Unrelated Trade or Business Adjustment*	NOL Carryforward available for next year	Period NOL used
4/30/2005	13,224	(13,224)	<u>-</u>	<u>-</u>	-	6/30/2019
4/30/2006	50,668	(50,668)	-	-	-	6/30/2019
4/30/2007	157,218	(157,218)	-	-	-	6/30/2019
4/30/2008	230,659	(15,751)	-	-	214,908	6/30/2019
4/30/2009	357,205	-	-	-	572,113	N/A
4/30/2010	409,463	-	-	-	981,576	N/A
4/30/2011	447,836	-	-	-	1,429,412	N/A
4/30/2012	593,833	-	-	-	2,023,245	N/A
4/30/2013	654,701	-	-	-	2,677,946	N/A
4/30/2014	701,473	-	-	-	3,379,419	N/A
4/30/2015	458,601	-	-	-	3,838,020	N/A
4/30/2016	559,196	-	-	250,347	4,647,563	N/A
4/30/2017	1,327,925	-	-	129,640	6,105,128	N/A
4/30/2018	338,891	-	618,105	202,703	7,264,827	N/A
6/30/2018 Short Year	-	-	354,408	41,644	7,660,879	N/A
6/30/2019		-	-	-	7,660,879	N/A
Total		(236,861)	972,513	624,334		
Carryforward to FYE 6/30/2020					7,660,879	

<sup>\*</sup> Parking Lot Unrelated Trade or Business Adjustment

Years 2015-2018 have been adjusted to remove a previously reported activity which does not meet the requirements of IRC 513 to be an unrelated trade or business due to sustained losses.

EIN 53-0196549

FYE 6/30/2019

NAICS: 713940

Net Operating Loss Arising in Tax Years Beginning After January 1, 2018

**Unrelated Trade or Business: Fitness Center** 

Fiscal Year Ended	Net Operating (Loss) Incurred	Net Operating Loss Used	NOL Carryforward available for next year	Period NOL used
6/30/2019	563,462	-	563,462	N/A
Total NOL used in 6/30 Carryforward to FYE 6		-	563,462	