	•	l
		,

				Exempt Organi	zation Rusin	220	Income 1	ay	Retur	n		OMB N	No 1545-06	87
	Eo.m.	990-T	•		oxy tax under				_		-			
	rom •	**			-		_		1904			2	018	2
	-	· •	For cale	ndar year 2018 or other tax	year beginning 07/	01,	2018, and ending	06/	30 , <b>20</b>	19	$\cdot$	۱		,
		ent of the Treasury		► Go to www.irs.gov							Ope	n to Pu	blic Inspect	tion fo
		Revenue Service	▶Dor	not enter SSN numbers on	this form as it may be	made	public if your org	janizati	ion is a 50	1(c)(3).	501	(c)(3) O	iblic Inspect Organization	s Only
	A 🗆 a	heck box if ddress changed		Name of organization (	•	anged a	and see instruction	s)					ification nu	
	B Exem	pt under section	Print	GEORGETOWN UNIVE	RSITY					(En			t, see instruc	aions )
		n( C )( <b>0</b> 3)	or	Number, street, and room		r, see in	structions					3-019		
	□ 40		Туре	37TH AND O STREETS	S NW						<b>related</b> ee instri		ess activity	code
	□ 40	8A 🔲 530(a)		City or town, state or provi	• • •	r foreigr	n postal code			,00		00000113	',	
	52	9(a)		WASHINGTON, DC 200								7211	⊥ <b>10</b>	
	C Book at end	yalue of all assets of year		oup exemption number		•								
		3,581,321,072		neck organization type				(c) trus	st [	] 401(	(a) tru	st	Other	trust
				organization's unrelated									st) unrelat	
				HOTEL & CONFER	<del></del>	_								
			-	at the end of the previ	ious sentence, con	nplete	Parts I and II,	comp	olete a S	ched	ule M	for e	ach addi	tiona
				omplete Parts III-V.										
		•		e corporation a subsidia	•	•	•	ary co	ntrolled g	roup?		▶ □	] Yes 🗹	] No
			<del></del>	and identifying numbe	r of the parent corp	oratio	on. ►							
		_		DAVID B GREEN			1		e numbe	er ▶		(202	<u>) 687-0100</u>	<u> </u>
	Part	Unrelated	d Trad	e or Business Inco	me		(A) Income		(B) E	pense	s		(C) Net	Y
	1a	Gross receipts												_
	b	Less returns and a			_ c Balance ►	1c	0							
	2			Schedule A, line 7) .		2	0							
	3			t line 2 from line 1c .	•	3	0						0	ļ
	4a	•		ne (attach Schedule D	•	4a	0	<u> </u>					0	<u>.</u>
	b		-	4797, Part II, line 17) (a	•	4b	0						0	
	C	•		n for trusts		4c	0	-					0	
	5	Income (loss) fro	m a part	tnership or an S corporati	on (attach statement)	5	0						0	
	6	Rent income (S		-		6	9			. 0			0	
	7	Unrelated deb	t-financ	ced income (Schedule	E)	7	0			0			0	
	8	Interest, annuities,	royalties,	and rents from a controlled of	organization (Schedule F)	8	0			0			0	
	9	Investment income	e of a sec	ction 501(c)(7), (9), or (17) org	ganization (Schedule G)		0			0			0	
	10	Exploited exer	npt acti	ivity income (Schedule	el)	10	0			0			0	
	11	Advertising inc		•	/	11	0			0			0	
	12	•		ructions; attach schedu		12	4,708,659					4	4,708,659	
	13			3 through 12		13	4,708,659			0			4,708,659	
	Part	Deduction	ns Not	Taken Elsewhere (S	See instructions fo	r limit	ations on ded	uctior	ns.) (Exc	ept fo	or con	ıtribu	tions,	
)		deduction	<u>s must</u>	Taken Elsewhere (S be directly connecte cers, directors, and tree	d with the unrelate	ed bu	siness income	11/E		<u> </u>				
,	14	•			` '			! V.C	ا <u>ب ب</u>	-	14		0	
,	15	Salaries and w	-	· · · · · /·		.   9			. ၂႘		15	1	1,578,374	
,	16	Repairs and m	aintena	/-		. 6	3 JUL 2	<b>2</b> 202		٠	16		352,806	
	17	Bad debts .					<u> </u>		_ ·   &	.	17		0	
	18			lule) (see instructions)		·   ·	OGDE	N II	<del></del>	.	18		86,853	
	19	Taxes and lice				٠, ١,		<u>, , , , , , , , , , , , , , , , , , , </u>	<u>'</u>	.	19		232,995	
	20			ris (See instructions fo						·	20		0	
	21	Depreciation (a	,	•					385,120					
,	22		ijøn clai	imed on Schedule A a	nd elsewhere on re	turn .	22a		0	L	22b	_	385,120	
	23	Depletion . /.	• •								23		0	
•	24			rred compensation pla						.	24		0	
	25			grams						.	25		0	
	26			nses (Schedule I) .						.	26		0	L
	27	/		sts (Schedule J) .						.	27		0	
	28	Other deduction	•	•						.	28		2,282,158	
	29 /			ld lines 14 through 28						.	29		1,918,306	
	30/			xable income before n							30	(	(209,647)	<u> </u>
	31		-	ating loss arising in tax y	• •			3 (see	instructio	ns) ¡	31			
	/32	Unrelated busi	nece ta	vable income. Subtract	ot line 31 from line :	30	1) (1)+1			, j	35	- 1	(209 647)	

Form **990-T** (2018)

For Paperwork Reduction Act Notice, see instructions.

1					-3
Part				_	
<del>-33</del>	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	1 1			
	instructions)	1 33	82	8,955	
34	Amounts paid for disallowed fringes	84		0	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see				-
00	instructions)	الم	02	ا مود	
00		35	- 62	8,955	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum	1 1			
	of lines 33 and 34	36		<u> </u>	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37		0	
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		o	
Part	V Tax Computation	-	·		
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39		0	
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on			— <del>-</del> Ŭ	
70	4		-		
	——————————————————————————————————————	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		0	
Part	V Tax and Payments				
45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a		l		
b	Other credits (see instructions)	┪			
c	General business credit. Attach Form 3800 (see instructions)	┥	ļ		
	Credit for prior year minimum tax (attach Form 8801 or 8827)	-			
d		45-	ł		
е	Total credits. Add lines 45a through 45d	45e		_ 0	
46	Subtract line 45e from line 44	46		0	
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	47		0	
48	Total tax. Add lines 46 and 47 (see instructions)	48		0	
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49			
50a	Payments: A 2017 overpayment credited to 2018				
ь	2018 estimated tax payments	7	ĺ		
c	Tax deposited with Form 8868	-	ĺ		
d	Foreign organizations: Tax paid or withheld at source (see instructions) . 50d	┪			
		-			
e		╣			
f	Credit for small employer health insurance premiums (attach Form 8941) . 50f	_{			
g	Other credits, adjustments, and payments			- 1	
	☐ Form 4136 ☐ Other ☐ 0 Total ► 50g 0	J			
51	Total payments. Add lines 50a through 50g	51		0	
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached ▶ □	52			
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed ▶	53		0	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid .	54		0	
55	Enter the amount of line 54 you want. Credited to 2019 estimated tax ▶ 0 Refunded ▶	55		0	
<b>Part</b>					
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or or	other o	uthority	Yes	No
30	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization m				
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the fo				
		Jieigii	Courting	┝╌╌	
	here ► CJ, FR, GM, GT, IN, IT, KE, MX, QA, SP, TU, UK			<b>✓</b>	
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fo	reign tri	ust? .		
	If "Yes," see instructions for other forms the organization may have to file.				
58	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$				
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the b		knowledge	and bel	ef, it is
Sign	true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	May t	he IRS disci	uss this	return
Here	Oamed Kreen 7-6-2027 CHIEF FINANCIAL OFFICER	with t	he preparer	shown	below
	Signature of officer Date Title	(see in	istructions)?	<b></b>	JNo
	Print/Type preparation come.  Proparation support		7 . P1	IN	
Paid	TRAVIS I PATTON 6/4/2020	heck L	J II   _	00369	623
Prep	arer	elf-emplo	10		
Use (	JNIV	rm's EIN		400832	
	Firm's address ► 600 13TH STREET NW, SUITE 1000, WASHINGTON, DC 20005	none no	(202)	414-10	000

Form 9:	90-T (2018)								Page (
Sche	dule A-Cost of Goods Sold.	Enter m	ethod of inve	ntory va	aluation ►				
1	Inventory at beginning of year	1	0	6	Inventory at end of year	6		0	
2	Purchases	2	0	7	Cost of goods sold. Subtract				
3	Cost of labor	3	0		line 6 from line 5. Enter here and				
4a	Additional section 263A costs				in Part I, line 2	7	73	7,611	
	(attach schedule)	4a	О	8	Do the rules of section 263A (with	h resp	ect to	Yes	No
b	Other costs (attach schedule)	4b	737,611		property produced or acquired for	resale)	apply		
5	Total. Add lines 1 through 4b	5	737,611		to the organization?				~
Sche	dule C-Rent Income (From R	eal Pro	perty and Pe	ersona	Property Leased With Real Pro	perty	)		
(see	instructions)								
I. Desc	ription of property	_							
1)									
2)									
3)			-			,			
4					· · · · · · · · · · · · · · · · · · ·				_

(4)			
2. Rent recei	ved or accrued		
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)	
(1)			_
(2)			
(3)			
(4)			
Total C	Total 0	(b) Total deductions.	
(c) Total income. Add totals of columns 2(a) at here and on page 1. Part I, line 6, column (A)	, ,	Enter here and on page 1,	0

- I Involated Deht-Financed Income (see instructions)

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

Form **990-T** (2018)

Form 990-T (2018)									Page
Schedule F-Interest, Ann	wities	Royalties	and Ren	ts From	Controlled Org	anizations (se	e instru	ctions)	1 age
Concade 1 — Interest, Air		, rioyanics,			Organizations	dineations (se	e manu	Clions	<del></del>
Name of controlled organization		. Employer fication number	3. Net unre	elated income instructions)	T	5. Part of column included in the organization's grounds.	controlling	conn	eductions directly ected with income in column 5
(1)								<del> </del>	
(2)									
(3)									
(4)									
Nonexempt Controlled Organ	izations	S							-
7. Taxable Income	4	. Net unrelated inc loss) (see instruct	-		otal of specified yments made	10. Part of column included in the coorganization's great the coorganization of the coorganization of the column includes the	controlling	conne	Peductions directly cted with income in column 10
(1)									
(2)									-
(3)									
(4)	<u> </u>								
						Add columns 5 Enter here and c Part I, line 8, co	on page 1,	Enter I	columns 6 and 11 nere and on page 1, , line 8, column (B).
Totals						<b>&gt;</b>		o	(
Schedule G-Investment	Incom	ne of a Sect	ion 501(	c)(7), (9),	or (17) Organia	zation (see inst	tructions	s)	
1. Description of income		2. Amount of		3. direc	Deductions ctly connected ach schedule)	4. Set-aside (attach schede	es	5. To and s	otal deductions let-asides (col. 3 plus col. 4)
(1)			·						
(2)									
(3)									
(4)									
		Enter here and Part I, line 9, c						Enter he Part I, I	re and on page 1, ne 9, column (B)
Totals	<u>.</u> ▶			0					
Schedule I — Exploited Ex	empt /	Activity Inco	ome, Otl	her Than	Advertising In	come (see inst	ructions	s)	
Description of exploited active	vity	2. Gross unrelated business incor from trade o business	me conr r prod	Expenses directly nected with duction of nrelated less income	Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	attribu	penses Itable to Imn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)									
(2)									
(3)									
(4)									
Totals	•	Enter here and page 1, Part line 10, col (A	l, pag	here and on e 1, Part I, 10, col (B). 0			2		Enter here and on page 1, Part II, line 26.
Schedule J-Advertising									
Part I Income From F	Period	icals Report	ted on a	Consoli	dated Basis				
· 1. Name of periodical		2. Gross advertising income	_	. Direct tising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols 5 through 7	5. Circulation income		idership osts	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)									
(2)		<del>                                     </del>							
(3)				-					

Form **990-T** (2018)

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

(4)

0

0



Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols. 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)					-	
(2)						
(3)						
(4)	_					
Totals from Part I	0	0				0
	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
<b>Totals,</b> Part II (lines 1–5) ▶	0	0				0

Schedule K—Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 1	4		0

Form **990-T** (2018)

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

OMB No 1545-0687

Department of the Treasury Internal Revenue Service Name of the organization For calendar year 2018 or other tax year beginning 07/01 , 2018, and ending 06/30

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

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

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

Employer identification number

GEOR	GETOWN UNIVERSITY				5	53-019	6603	
Ur	related business activity code (see instructions) ▶ 541900	)		•			-	
De	scribe the unrelated trade or business > SERVICE AGREEMEN	ITS	•					
Part	Unrelated Trade or Business Income		(A) Income	e (B) E	xpenses	•	(C) Net	
1a	Gross receipts or sales 0							
b	Less returns and allowances 0 c Balance ▶	1c	o					
2	Cost of goods sold (Schedule A, line 7)	2	0					
3	Gross profit. Subtract line 2 from line 1c	3	0				0	
4a	Capital gain net income (attach Schedule D)	4a	0				0	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	0				0	
С	Capital loss deduction for trusts	4c	0				0	
5	Income (loss) from a partnership or an S corporation (attach							
	statement)	5	0		1	1	0	
6	Rent income (Schedule C)	6	0		0		0	
7	Unrelated debt-financed income (Schedule E)	7	0		0		0	
8	Interest, annuities, royalties, and rents from a controlled							
	organization (Schedule F)	8	О		О		o	
9	Investment income of a section 501(c)(7), (9), or (17)							
•	organization (Schedule G)	9	0		0		o	
10	Exploited exempt activity income (Schedule I)	10	0		0		0	
11	Advertising income (Schedule J)	11	0		0		0	-
12	Other income (See instructions; attach schedule)	12	1,209,953				1,209,953	
13	Total. Combine lines 3 through 12	13	1,209,953	<del>                                     </del>	0		1,209,953	
Part	deductions must be directly connected with the unrelate	ed bus	siness income	e.)	· 			
14	Compensation of officers, directors, and trustees (Schedule K)	٠.			. [	14	0	
15	Salaries and wages				-	15	735,855	
16	Repairs and maintenance				. [	16	10,735	
17	Bad debts				. [	17	0	
18	Interest (attach schedule) (see instructions)				. [	18	0	
19	Taxes and licenses				. L	19	0	
20	Charitable contributions (See instructions for limitation rules) .				L	20	0	
21	Depreciation (attach Form 4562)		. 21	13,759				
22	Less depreciation claimed on Schedule A and elsewhere on re	turn .	. 22a	0		22b	13,759	
23	Depletion				. L	23	0	
24	Contributions to deferred compensation plans				. [	24	0	
25	Employee benefit programs					25	0	
26	Excess exempt expenses (Schedule I)					26	0	
27	Excess readership costs (Schedule J)					27	0	
28	Other deductions (attach schedule)				_	28	278,923	
29	Total deductions. Add lines 14 through 28					29	1,039,272	
30	Unrelated business taxable income before net operating loss d				<u> </u>	30	170,681	
31	Deduction for net operating loss arising in tax years beginn				_			
	instructions)					31	0	
32	Unrelated business taxable income. Subtract line 31 from line				<u> </u>	32	170,681	
	erwork Reduction Act Notice, see instructions.					chedu	le M (Form 990-T)	2018

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

OMB No. 1545-0687

Open to Public Inspection for

Department of the Treasury Internal Revenue Service

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.

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

501(c)(3) Organizations Only Name of the organization **Employer identification number GEORGETOWN UNIVERSITY** 53-0196603 Unrelated business activity code (see instructions) ▶ 451211 Describe the unrelated trade or business ▶ BOOKSTORE

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales 920,193				
b Less returns and allowances 0 c Balance	► 1c	920,193		
2 Cost of goods sold (Schedule A, line 7)	2	737,611		
3 Gross profit. Subtract line 2 from line 1c	3	182,582		182,582
4a Capital gain net income (attach Schedule D)	4a	0		0
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	) 4b	0		0
c Capital loss deduction for trusts	4c	0		0
5 Income (loss) from a partnership or an S corporation (attack	١ 🗆			
statement)	5	0	·	0
6 Rent income (Schedule C)	6	0	0	0
7 Unrelated debt-financed income (Schedule E)	7	0	0	0
8 Interest, annuities, royalties, and rents from a controlled		_		
organization (Schedule F)	8	0	0	0
9 Investment income of a section 501(c)(7), (9), or (17)				
organization (Schedule G)		0	0	0
Exploited exempt activity income (Schedule I)	10	0	0	0
1 Advertising income (Schedule J)	11	0	0	0
2 Other income (See instructions; attach schedule)	12	0		0
3 Total. Combine lines 3 through 12	13	182,582	0	182,582

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

		1	
14	Compensation of officers, directors, and trustees (Schedule K)	14	0
15	Salaries and wages	15	0
16	Repairs and maintenance	16	0
17	Bad debts	17	0
81	Interest (attach schedule) (see instructions)	18	0
19	Taxes and licenses	19	0
20	Charitable contributions (See instructions for limitation rules)	20	0
21	Depreciation (attach Form 4562)		
2	Less depreciation claimed on Schedule A and elsewhere on return 22a 0	22b	0
3	Depletion	23	0
4	Contributions to deferred compensation plans	24	0
5	Employee benefit programs	25	0
6	Excess exempt expenses (Schedule I)	26	0
7	Excess readership costs (Schedule J)	27	0
8	Other deductions (attach schedule)	28	17,046
9	Total deductions. Add lines 14 through 28	29	17,046
0	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	165,536
1	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	31	0
32	Unrelated business taxable income. Subtract line 31 from line 30	32	165,536

For Paperwork Reduction Act Notice, see Instructions.

Cat No 71329Y

Schedule M (Form 990-T) 2018

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

OMB No 1545-0687

Department of the Treasury Internal Revenue Service

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.

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

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

Name of	e of the organization Employer identification number			number			
GEOR	GETOWN UNIVERSITY				53-0196603		
Un	related business activity code (see instructions) ▶ 713900	)				· ·	
Des	scribe the unrelated trade or business YATES FIELD HOUSE	FITNE	SS CENTER				
Part	Unrelated Trade or Business Income		(A) Income	(B) Expense	es	(C) Net	
1a	Gross receipts or sales 0						
b	Less returns and allowances 0 c Balance ▶	1c	0	ŀ			
2	Cost of goods sold (Schedule A, line 7)	2	0				
3	Gross profit. Subtract line 2 from line 1c	3	0			0	
4a	Capital gain net income (attach Schedule D)	4a	0			0	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	0	l		0	
С	Capital loss deduction for trusts	4c	0			0	
5	Income (loss) from a partnership or an S corporation (attach						
	statement)	5	o			o	
6	Rent income (Schedule C)	6	0	0		0	
7	Unrelated debt-financed income (Schedule E)	7	0	0		0	
8	Interest, annuities, royalties, and rents from a controlled						
	organization (Schedule F)	8	О	0		o	
9	Investment income of a section 501(c)(7), (9), or (17)						
	organization (Schedule G)	9	0	0		o	
10	Exploited exempt activity income (Schedule I)	10	0	0		0	
11	Advertising income (Schedule J)	11	0	0		0	
12	Other income (See instructions; attach schedule)	12	483,628			483,628	
13	Total. Combine lines 3 through 12	13	483,628	0		483,628	
Part 14	Deductions Not Taken Elsewhere (See instructions fo deductions must be directly connected with the unrelate Compensation of officers, directors, and trustees (Schedule K)	ed bus	siness income.)		or cont	ributions,	
15					15	146,686	
16	<u> </u>				16		
17	Repairs and maintenance				17	10,197	
	Interest (attach schedule) (see instructions)				18	7,592	
	Taxes and licenses				19	0	
	Charitable contributions (See instructions for limitation rules) .				20	0	
	Depreciation (attach Form 4562)			47,025	20		
	Less depreciation claimed on Schedule A and elsewhere on re			0	22b	47,025	
	Depletion				23	0	
	Contributions to deferred compensation plans				24	0	
	Employee benefit programs				25	0	
	Excess exempt expenses (Schedule I)				26	0	
	Excess readership costs (Schedule J)				27	0	
	Other deductions (attach schedule)				28	171,139	
	Total deductions. Add lines 14 through 28				29	382,639	
	Unrelated business taxable income before net operating loss d				30	100,989	
	Deduction for net operating loss arising in tax years beginn						
	instructions)	_	,	,	31	0 7	
	Unrelated business taxable income. Subtract line 31 from line				32	100,989	
	erwork Reduction Act Notice, see instructions.		o 71329Y		-	e M (Form 990-T) 2018	

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

OMB No. 1545-0687

Department of the Treasury Internal Revenue Service Name of the organization

For calendar year 2018 or other tax year beginning 07/01 , 2018, and ending 06/30 , 20 19

▶ 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(c)(3) Organizations Only

Employer Identification number

GEOR	GETOWN UNIVERSITY				53-019	96603	
Ųn	related business activity code (see instructions) ► 525990						
De	scribe the unrelated trade or business NET UNRELATED BUS	SINESS	INCOME (LOSS)	FROM THE UNIVE	RSITY	'S SCHEDULE K-	18
Part	Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net	
1a	Gross receipts or sales 0						
b	Less returns and allowances 0 c Balance ▶	1c	0	į			
2	Cost of goods sold (Schedule A, line 7)	2	0				
3	Gross profit. Subtract line 2 from line 1c	3	0			0	
4a	Capital gain net income (attach Schedule D)	4a	10,995			10,995	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	385,283			385,283	
С	Capital loss deduction for trusts	4c	0			0	
5	Income (loss) from a partnership or an S corporation (attach					"	
	statement)	5	(3,316,966)			(3,316,966)	
6	Rent income (Schedule C)	6	0	0		0	
7	Unrelated debt-financed income (Schedule E)	7	0	0		0	
8	Interest, annuities, royalties, and rents from a controlled						
	organization (Schedule F)	8	o	0		О	
9	Investment income of a section 501(c)(7), (9), or (17)		-				
	organization (Schedule G)	9	o	0		О	
10	Exploited exempt activity income (Schedule I)	10	0	0		0	
11	Advertising income (Schedule J)	11	0	0		0	
12	Other income (See instructions; attach schedule)	12	0			0	
13	Total. Combine lines 3 through 12	13	(2,920,688)	0		(2,920,688)	_
Part	deductions must be directly connected with the unrelate	ed bus	siness income.)			-	
14	Compensation of officers, directors, and trustees (Schedule K)				14	0	
15	Salaries and wages				15	0	
16	Repairs and maintenance				16	0	
17	Bad debts				17	0	
18	Interest (attach schedule) (see instructions)				18	0	
19	Taxes and licenses				19	0	
20	Charitable contributions (See instructions for limitation rules) .			ı	20	0	
21	Depreciation (attach Form 4562)			0			
22 22	Less depreciation claimed on Schedule A and elsewhere on re			U	22b	0	
23	Depletion				23	0	—
24 25	Contributions to deferred compensation plans				24	0	—
25 06	Employee benefit programs				25	0	—
26 07	Excess exempt expenses (Schedule I)				26		—
27	Excess readership costs (Schedule J)				27	0	
28	Other deductions (attach schedule)				28	371,989	—
<b>29</b>	Total deductions. Add lines 14 through 28				29	371,989	
30	Unrelated business taxable income before net operating loss d				30	(3,292,677)	
31	Deduction for net operating loss arising in tax years beginning				<del>_</del>		_
20	instructions)				31	(0.000.077)	
32	Unrelated business taxable income. Subtract line 31 from line 3	30 .	<u> </u>		32	(3,292,677)	

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Cat. No. 71329Y

Schedule M (Form 990-T) 2018

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

OMB No 1545-0687

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Department of the Treasury Internal Revenue Service

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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.

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

Name of the organization **Employer Identification number GEORGETOWN UNIVERSITY** 53-0196603 Unrelated business activity code (see instructions) ▶ 541800

Describe the unrelated trade or business ▶ CORPORATE SPONSORSHIP Part I **Unrelated Trade or Business Income** (A) Income (B) Expenses (C) Net 1a Gross receipts or sales 0 b Less returns and allowances c Balance ▶ 1c 0 2 Cost of goods sold (Schedule A, line 7) . 2 0 Gross profit. Subtract line 2 from line 1c. . . 3 3 0 0 0 4a Capital gain net income (attach Schedule D) . . . . . 0 4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b 0 0 0 C Capital loss deduction for trusts . . . . . . . . . 4c 0 5 Income (loss) from a partnership or an S corporation (attach statement) 5 0 0 Rent income (Schedule C) . . . . . . . 6 6 0 0 0 7 Unrelated debt-financed income (Schedule E) . . . . . 7 0 0 0 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) . . . . . . . . . . . . 8 0 0 0 9 Investment income of a section 501(c)(7), (9), or (17) 0 9 0 0 10 0 10 Exploited exempt activity income (Schedule I) . . . . . 0 0 11 Advertising income (Schedule J) . . . . . . . . . 11 0 0 0 12 12 282,750 Other income (See instructions; attach schedule) . . . . 282,750

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

13

282,750

Total. Combine lines 3 through 12 . . . . . . . . .

		1	
14	Compensation of officers, directors, and trustees (Schedule K)	14	0
15	Salaries and wages	15	5,008
16	Repairs and maintenance	16	0
17	Bad debts	17	0
18	Interest (attach schedule) (see instructions)	18	0
19	Taxes and licenses	19	0
20	Charitable contributions (See instructions for limitation rules)	20	0
21	Depreciation (attach Form 4562)		
22	Less depreciation claimed on Schedule A and elsewhere on return 22a 0	22b	0
23	Depletion	23	0
24	Contributions to deferred compensation plans	24	0
25	Employee benefit programs	25	0
26	Excess exempt expenses (Schedule I)	26	0
27	Excess readership costs (Schedule J)	27	0
28	Other deductions (attach schedule)	28	1,062
29	Total deductions. Add lines 14 through 28	29	6,070
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	276,680
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	31	0
32	Unrelated business taxable income. Subtract line 31 from line 30	32	276,680

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Schedule M (Form 990-T) 2018

0

282,750

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

OMB No. 1545-0687

Department of the Treasury Internal Revenue Service

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.

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

Name o	f the organization			Employer iden	tification	number	
GEOR	GETOWN UNIVERSITY				53-019	96603	
Un	related business activity code (see instructions) ▶ 531110			-			
De	scribe the unrelated trade or business ▶ SUMMER CONFEREN	CES F	OUSED IN DORMS				
Part	Unrelated Trade or Business Income		(A) Income	(B) Expens	ses	(C) Net	
1a	Gross receipts or sales 0					_	
b	Less returns and allowances 0 c Balance ▶	1c	0				
2	Cost of goods sold (Schedule A, line 7)	2	0				
3	Gross profit. Subtract line 2 from line 1c	3	0			0	
4a	Capital gain net income (attach Schedule D)	4a	0			0	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	0			0	
С	Capital loss deduction for trusts	4c	0			0	
5	Income (loss) from a partnership or an S corporation (attach						
	statement)	5	0			0	
6	Rent income (Schedule C)	6	0		0	0	
7	Unrelated debt-financed income (Schedule E)	7	0	(	וכ	0	
8	Interest, annuities, royalties, and rents from a controlled						
	organization (Schedule F)	8	0		0	0	
9	Investment income of a section 501(c)(7), (9), or (17)						
	organization (Schedule G)	9	.0		)	0	
10	Exploited exempt activity income (Schedule I)	10	0	(	)	0	
11	Advertising income (Schedule J)	11	0	(	)	0	
12	Other income (See instructions; attach schedule)	12	207,803			207,803	
13	Total. Combine lines 3 through 12	13	207,803	(	)	207,803	
Part	deductions must be directly connected with the unrelate	ed bu	siness income.)		for con	tributions,	
14	Compensation of officers, directors, and trustees (Schedule K)				14	0	
15	Salaries and wages				15	39,432	
16	Repairs and maintenance				16	3,486	
17	Bad debts				17	0	
18	Interest (attach schedule) (see instructions)				18	7,330	
19	Taxes and licenses				19	0	
20	Charitable contributions (See instructions for limitation rules) .		1 1		20	0	
21	Depreciation (attach Form 4562)		<del></del>	9,065			
22	Less depreciation claimed on Schedule A and elsewhere on re-		\	0	22b	9,065	
23	Depletion				23	0	
24	Contributions to deferred compensation plans				24	0	
25	Employee benefit programs				25	0	
26	Excess exempt expenses (Schedule I)				26	0	
27	Excess readership costs (Schedule J)				27	0	
28	Other deductions (attach schedule)				28	57,013	
29	<b>Total deductions.</b> Add lines 14 through 28				29	116,326	
30	Unrelated business taxable income before net operating loss d				30	91,477	
31	Deduction for net operating loss arising in tax years beginning	_	•	,			
	instructions)				31	0	
32	Unrelated business taxable income. Subtract line 31 from line 3	30 .	<u> </u>	<u> </u>	32	91,477	

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Cat No 71329Y

Schedule M (Form 990-T) 2018

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

OMB No. 1545-0687

Open to Public Inspection for

Department of the Treasury Internal Revenue Service

For calendar year 2018 or other tax year beginning 07/01, 2018, and ending 06/30

▶ 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).

501(c)(3) Organizations Only Name of the organization **Employer identification number** GEORGETOWN UNIVERSITY 53-0196603 Unrelated business activity code (see instructions) ▶ 722320 Describe the unrelated trade or business ► CATERING SERVICES Part I **Unrelated Trade or Business Income** (A) Income (B) Expenses (C) Net Gross receipts or sales Less returns and allowances 0 c Balance ▶ 1c 0 2 2 0 Cost of goods sold (Schedule A, line 7) . 3 Gross profit. Subtract line 2 from line 1c. . . . 3 0 0 0 4a Capital gain net income (attach Schedule D) . . . . . 4a 0 b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b 0 O 0 0 5 Income (loss) from a partnership or an S corporation (attach statement) . . . . . . . . . . . . . . . . . . . 5 0 0 6 6 Rent income (Schedule C) . . . . . 0 0 0 7 Unrelated debt-financed income (Schedule E) . . . . . . 0 0 0 8 Interest, annuities, royalties, and rents from a controlled . . . . . . . . . . . . organization (Schedule F) 0 8 0 0 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) . . . . . . . . . . . . . . . 9 0 0 0 10 Exploited exempt activity income (Schedule I) . . . . . 10 0 0 0 11 Advertising income (Schedule J) . . . . . . . . . 11 0 0 0 164.265 12 Other income (See instructions; attach schedule) . . . . . 12 164.265 13 Total. Combine lines 3 through 12 . . . . . . . . . . . 13 164,265 n 164,265 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 0 15 Salaries and wages 15 80.482 16 Repairs and maintenance 16 0 17 Bad debts 17 0 18 Interest (attach schedule) (see instructions) . . . . . 18 0 19 19 550 20 Charitable contributions (See instructions for limitation rules) . . . . . 20 0 21 21 O 22 Less depreciation claimed on Schedule A and elsewhere on return . . . 23 0 23 24 0 Contributions to deferred compensation plans . . . 24 25 Employee benefit programs . . . . . . . . . . . . . . . . . . 0 25 26 26 0 27 Excess readership costs (Schedule J) 27 0 28 69,285 28 29 Total deductions. Add lines 14 through 28 150,317 30 13,948 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30

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Unrelated business taxable income. Subtract line 31 from line 30

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Schedule M (Form 990-T) 2018

0

13,948

31

32

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

31

32

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

OMB No 1545-0687

Department of the Treasury Internal Revenue Service Name of the organization

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.

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

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

Name of	ame of the organization Employer in			Employer ident	entification number		
GEOR	GETOWN UNIVERSITY				53-0196	603	
Un	related business activity code (see instructions) ► 541900					<del></del> -	
De	scribe the unrelated trade or business  MEDICAL ILLUSTRATI	IONS					
Part	Unrelated Trade or Business Income		(A) Income	(B) Expens	es	(C) Net	
1a	Gross receipts or sales 0						
b	Less returns and allowances 0 c Balance ▶	1c	0				
2	Cost of goods sold (Schedule A, line 7)	2	0				
3	Gross profit. Subtract line 2 from line 1c	3	0			0	
4a	Capital gain net income (attach Schedule D)	4a	0	ı		0	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	0			0	
С	Capital loss deduction for trusts	4c	0			0	
5	Income (loss) from a partnership or an S corporation (attach						
	statement)	5	0			0	
6	Rent income (Schedule C)	6	0	c		0	
7	Unrelated debt-financed income (Schedule E)	7	0	c		0	
8	Interest, annuities, royalties, and rents from a controlled	1					
	organization (Schedule F)	8	0	c		0	
9	Investment income of a section 501(c)(7), (9), or (17)						
	organization (Schedule G)	9	0	C		0	
10	Exploited exempt activity income (Schedule I)	10	0	0		0	
11	Advertising income (Schedule J)	11	0	0		0	
12	Other income (See instructions; attach schedule)	12	13,526		<u> </u>	13,526	
13	Total. Combine lines 3 through 12	13	13,526	0		13,526	
Part	deductions must be directly connected with the unrelate	ed bus	siness income.)		,	·	
14	Compensation of officers, directors, and trustees (Schedule K)				14	0	
15	Salaries and wages				15	2,155	
16	Repairs and maintenance				16	0	
17	Bad debts				17	0	
18 19	Interest (attach schedule) (see instructions)				18	0	
	Taxes and licenses				19	0	
20 21	Charitable contributions (See instructions for limitation rules) . Depreciation (attach Form 4562)		1 1	ol	20	0	
22	Less depreciation claimed on Schedule A and elsewhere on re			0	22b	o	
23	·		<u> </u>		<del>+</del>	0	
24	Depletion				23	0	
<b>25</b>	Employee benefit programs				25	0	
26 26	Excess exempt expenses (Schedule I)				26	0	
20 27	Excess readership costs (Schedule J)					0	
28	Other deductions (attach schedule)				27 28	2,122	
29	<b>Total deductions.</b> Add lines 14 through 28				29	4,277	
30	Unrelated business taxable income before net operating loss d				30	9,249	
	Deduction for net operating loss arising in tax years beginn				30	3,243	
31	Instructions)	_	•		31	0	
32	Unrelated business taxable income. Subtract line 31 from line 3				32	9,249	
-	erwork Reduction Act Notice, see instructions.					M (Form 990-T) 2018	

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

OMB No 1545-0687

Department of the Treasury Internal Revenue Service

For calendar year 2018 or other tax year beginning 07/01 , 2018, and ending 06/30 , 20 19

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

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

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

	f the organization			Employer ident	ification n	umber	
GEOR	GETOWN UNIVERSITY			_	53-0196	603	
	related business activity code (see instructions) ► 900002						
De	scribe the unrelated trade or business PERSONAL PROPER	TY RENT	TAL INCOME	1		_	
Part	Unrelated Trade or Business Income		(A) Income	(B) Expens	es	(C) Net	
10	Gross receipts or sales 0	<del></del>	<del></del>		<del>-  </del>		
1a b	Gross receipts or sales  Less returns and allowances  0  c Balance	1c	o	į			
2	Cost of goods sold (Schedule A, line 7)	2	0	-	+		
3	Gross profit. Subtract line 2 from line 1c	3	0		+-+-	0	
о 4а	Capital gain net income (attach Schedule D)	4a	0	<del></del> -	+	0	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	0	<del></del>		0	
c	Capital loss deduction for trusts	4c	0		+ +	0	
5	Income (loss) from a partnership or an S corporation (attach		<del></del>		+ +	<del></del>	
•	statement)	5	o		1	o	
6	Rent income (Schedule C)	6	0	1 0	+	0	
7	Unrelated debt-financed income (Schedule E)	7	0	0	<del></del>	0	
8	Interest, annuities, royalties, and rents from a controlled						
_	organization (Schedule F)	8	o	0		o	
9	Investment income of a section 501(c)(7), (9), or (17)			<del></del>			
	organization (Schedule G)	9	О	0		o	
10	Exploited exempt activity income (Schedule I)	10	0	0		0	
11	Advertising income (Schedule J)	11	0	0		0	
12	Other income (See instructions; attach schedule)	12	5,951			5,951	
13	Total. Combine lines 3 through 12	13	5,951	0		5,951	
Part	deductions must be directly connected with the unrelate	ed busi	ness income.)		or contr	ibutions,	
14	Compensation of officers, directors, and trustees (Schedule K)				14	0	
15	Salaries and wages				15	2,816	
16	Repairs and maintenance				16	0	
17	Bad debts				17	0	
18	Interest (attach schedule) (see instructions)				18	0	
19	Taxes and licenses				19	0	
20	Charitable contributions (See instructions for limitation rules) .		1 1	1	20	0	
21 22	Depreciation (attach Form 4562)			0	22b	ام	
23	·	eturri .	. [228]	٠	23	0	
23 24	Depletion	• •			24	0	
25	Employee benefit programs				25	0	
26	Excess exempt expenses (Schedule I)				26	0	
27	Excess readership costs (Schedule J)				27		
28	Other deductions (attach schedule)				28	2,740	
29	<b>Total deductions.</b> Add lines 14 through 28				29	5,556	
30	Unrelated business taxable income before net operating loss of				30	395	
31	Deduction for net operating loss arising in tax years beginn					355	
٠.	instructions)				31	0	
32	Unrelated business taxable income. Subtract line 31 from line				32	395	
	erwork Reduction Act Notice, see instructions		71329Y	······································	<del></del>	M (Form 990-T)	2018



Name of Partnership	EIN	UBI
NET UNRELATED BUSINESS INCOME (LOSS) FROM THE UNIVERSITY'S SCHE	EDULE K-1S	
(1) NET UNRELATED BUSINESS INCOME (LOSS) FROM THE UNIVERSITY'S K-1S		-3,316,966
	Total for Part I, Line 5	-3,316,966



Description	Amount
HOTEL & CONFERENCE CENTER	
(1) OTHER INCOME	4,708,659
SERVICE AGREEMENTS	
(2) OTHER INCOME	1,209,953
YATES FIELD HOUSE FITNESS CENTER	
(3) OTHER INCOME	483,628
CORPORATE SPONSORSHIP	
(4) OTHER INCOME	282,750
SUMMER CONFERENCES HOUSED IN DORMS	
(5) OTHER INCOME	207,803
CATERING SERVICES	
(6) OTHER INCOME	164,265
MEDICAL ILLUSTRATIONS	
(7) OTHER INCOME	13,526
PERSONAL PROPERTY RENTAL INCOME	
(8) OTHER INCOME	5,951
Tota	I for Part I, Line 12 7,076,535

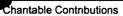
16



Description		Amount
HOTEL & CONFERENCE CENTER		
(1) TAXABLE BOND INTEREST RELATED TO UBI		86,853
YATES FIELD HOUSE FITNESS CENTER		
(2) TAXABLE BOND INTEREST RELATED TO UBI		7,592
SUMMER CONFERENCES HOUSED IN DORMS		
(3) TAXABLE BOND INTEREST RELATED TO UBI		7,330
	Total for Part II, Line 18	101,775

Taxes and Licenses

Description	Amount
HOTEL & CONFERENCE CENTER	
(1) REAL ESTATE TAX	132,276
(2) SALES TAX	9,112
(3) EMPLOYER TAX	91,607
Tota	232,995
CATERING SERVICES	
(4) SALES TAX	550



Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Converted to NOL	Amount Remaining	Contribution Carryover Expires
2013	331,796	0		82,896	248,900	2018
2014	347,732	0			347,732	2019
2015	433,088	0			433,088	2020
2016	268,226	0			268,226	2021
2017	584,923	0			584,923	2022
2018	496,013	0			496,013	2023
Totals	2,461,778	0	0	82,896	2,378,882	

Description		Amount
HOTEL & CONFERENCE CENTER		·· <u>-</u>
(1) SUPPLIES		37,832
(2) SERVICES		88,748
(3) RENT		1,124
(4) MANAGEMENT FEE		213,593
(5) ACCOUNTING FEES		1,000
(6) ROOM EXPENSE		275,064
(8) CONFERENCE SERVICES		142,836
(9) BANQUET SERVICES	<del>-</del>	
(10) ADMINISTRATIVE AND GENERAL		653,842
(11) SALES AND MARKETING		477,057
(12) OTHER OPERATING EXPENSE		39,520
(12) OTHER OF ERVITING EXITENSE	Total	2,282,158
SERVICE AGREEMENTS	10001	2,202,100
(13) SUPPLIES		65,861
(14) SERVICES		88,356
(15) TRAVEL & BUSINESS	<del></del>	3,174
(16) INSURANCE		1,715
(17) RENT		4,184
(18) OTHER OPERATING EXPENSE		25,500
(19) MANAGEMENT FEE		89,133
(20) ACCOUNTING FEES		1,000
	Total	278,923
BOOKSTORE		
(21) OTHER OPERATING EXPENSE		16,046
(22) ACCOUNTING FEES		1,000
	Total	17,046
YATES FIELD HOUSE FITNESS CENTER	· · · · · · · · · · · · · · · · · · ·	
(23) SUPPLIES		11,786
(24) SERVICES		35,759
(25) TRAVEL & BUSINESS		1,106
(26) MEALS & INCIDENTALS		351
(27) INSURANCE		94
(28) RENT		8,958
(29) ALLOCATIONS		99,212
(30) OTHER OPERATING EXPENSE		12,873
(31) ACCOUNTING FEES		1,000
	Total	171,139
NET UNRELATED BUSINESS INCOME (LOSS) FROM THE UNIVERSITY'S SCHEDULE K-1S	<del></del>	
(32) OTHER OPERATING EXPENSE		348,489
(33) ACCOUNTING FEES	<b>T</b> -4-1	23,500
CORRODATE SPONSORSHIP	Total	371,989
CORPORATE SPONSORSHIP (34) INSURANCE		
(35) ACCOUNTING FEES	<del></del>	1,000
(33) ACCOUNTING FEES	Total	
SUMMER CONFERENCES HOUSED IN DORMS	Total	1,062
(36) SUPPLIES	_	6,078
(37) SERVICES	<del></del>	48,406
(38) TRAVEL & BUSINESS		1,331
(39) MEALS & INCIDENTALS	<del>-   -</del>	198
(40) ACCOUNTING FEES		1,000
(A) NOODON MOTELO	Total	57,013
	10001	37,013
CATERING SERVICES	•	

(42) INSURANCE		1,596
(43) ACCOUNTING FEES		1,000
	Total	69,285
MEDICAL ILLUSTRATIONS		
(44) SUPPLIES		1,122
(45) ACCOUNTING FEES		1,000
	Total	2,122
PERSONAL PROPERTY RENTAL INCOME		
(46) OTHER OPERATING EXPENSE		1,740
(47) ACCOUNTING FEES		1,000
	Total	2,740

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

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining
<b>HOTEL &amp; CONFERENC</b>	E CENTER				
2018	209,647			0	209,647
NET UNRELATED BUSI	NESS INCOME (LOSS) I	FROM THE UNIVERSITY	'S SCHEDULE K-1S		-
2018	3,292,677			0	3,292,677

Deduction for net operating loss arising in tax years beginning before January 1, 2018

Year Generated	Amount Generated	Converted Contributions	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	NOL Expires
2001	546,869		262,525	284,344	0	2022
2002	130,006		0	130,006	0	2023
2003	575,360		0	414,605	160,755	2024
2004	171,331		0		171,331	2025
2005	426,307		0	·	426,307	2026
2006	846,948		0		846,948	2027
2007	768,904		0		768,904	2028
2008	2,893,615		0		2,893,615	2029
2009	1,993,818	ì	0		1,993,818	2030
2010	1,377,394	,	0		1,377,394	2031
2011	2,211,465		0		2,211,465	2032
2012	15,045	· <del>-</del>	0	·	15,045	2033
2013	0	87,313	_ 0		87,313	2034
2016	442,202		0		442,202	2037
Totals	12,399,264	87,313	262,525	828,955	11,395,097	

### Schedule A, Line 4b



Description	A	Amount		
BOOKSTORE				
(1) DIRECT MANAGEMENT FEE		559,507		
(2) INCENTIVE MANAGEMENT FEE		178,104		
	Total	737,611		
Total for Schedule	A, Line 4b	737,611		

#### SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

# Capital Gains and Losses



OMB No 1545-0123

2018

► 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.

Name

Employer identification number **GEORGETOWN UNIVERSITY** 53-0196603 Part I Short-Term Capital Gains and Losses (See instructions.) See instructions for how to figure the amounts to enter on (g) Adjustments to gain (h) Gain or (loss) (d) (e) the lines below. or loss from Form(s) Subtract column (e) from **Proceeds** Cost 8949, Part I, 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) whole dollars the result with column (g) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 0 1b Totals for all transactions reported on Form(s) 8949 with Box A checked 0 2 Totals for all transactions reported on Form(s) 8949 with Box B checked 0 Totals for all transactions reported on Form(s) 8949 478 79 0 with Box C checked 399 Short-term capital gain from installment sales from Form 6252, line 26 or 37. Short-term capital gain or (loss) from like-kind exchanges from Form 8824 5 6 Unused capital loss carryover (attach computation) 0) 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h 399 Long-Term Capital Gains and Losses (See instructions. See instructions for how to figure the amounts to enter on (g) Adjustments to gain (h) Gain or (loss) the lines below. or loss from Form(s) Subtract column (e) from Cost **Proceeds** 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) whole dollars column (g) the result with column (g) 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 0 8b Totals for all transactions reported on Form(s) 8949 with Box D checked 0 Totals for all transactions reported on Form(s) 8949 with Box E checked 0 Totals for all transactions reported on Form(s) 8949 with Box F checked 10,601 0 10,596 11 Enter gain from Form 4797, line 7 or 9. 11 385,283 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37 12 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 14 Capital gain distributions (see instructions) 14 15 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h 395,879 Summary of Parts I and II Part III 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 16 399 17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) 17 395,879 18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the proper line on other returns. 18 396,278 Note: If losses exceed gains, see Capital losses in the instructions.

# Sales and Other Dispositions of Capital Assets

Department of the Treasury Internal Revenue Service

**GEORGETOWN UNIVERSITY** 

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

Attachment Sequence No 12A

OMB No. 1545-0074

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Name(s) shown on return

Social security number or taxpayer identification number 53-0196603

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 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)

<ul><li>✓ (C) Short-term transactions</li></ul>	•		_	sis <b>wasn't</b> report	ed to the ir	15	
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the <b>Note</b> below	Adjustment, it If you enter an enter a c See the sep	(h) Gain or (loss). Subtract column (e) from column (d) and	
(Example: 100 sh XYZ Co)	(Mo , day, yr )	disposed of (Mo , day, yr )	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
ST CAPITAL GAIN FROM PARTNERSHIP INVESTMENTS			478	79			399
		•					
				-			
						-	
						_	
					-		
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 6).	al here and incl is checked), lin	ude on your e 2 (if Box B	478	79		0	399

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.

Page 2

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side GEORGETOWN UNIVERSITY

Social security number or taxpayer identification number 53-0196603

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II

**Long-Term.** Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

**Note:** You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
☐ (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
(F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds (sales price)	(e) Cost or other basis. See the <b>Note</b> below and see Column (e)	If you enter an enter a c See the seg	f any, to gain or loss amount in column (g), code in column (f) parate instructions.	(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)
LT CAPITAL GAIN FROM							
PARTNERSHIP INVESTMENTS			10,601	5			10,596
			•				
	-						
	-						
		·				-	
					<u> </u>		
				· - · · · · · · · · · · · · · · · · · ·			
		_					
2 Totals. Add the amounts in columns negative amounts) Enter each total Schedule D, line 8b (if Box D above	al here and incl is checked), lin	ude on your le 9 (if Box E				_	
above is checked), or line 10 (if Box	F above is che	cked) ►	10,601	_ 5		0	10,596

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)

Department of the Treasury

Internal Revenue Service (99)

# Depreciation and Amortization

(Including Information on Listed Property)

▶Attach toyour taxreturn.

▶Cotowww.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

20

Attachment Sequence No. 179

Name(s) shown on return Business or activity to which this form relates Identifying number GEORGETOWN UNIVERSITY 53-0196603 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1 1,000,000 2 Total cost of section 179 property placed in service (see instructions) . . . . . 2 0 Threshold cost of section 179 property before reduction in limitation (see instructions) . 3 1,000,000 4 0 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 5 1,000,000 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property. Enter the amount from line 29 . . . . . . . . . . . 0 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 0 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 . . . . . . . . . . . . 0 9 10 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 . . . . . . . . . . 10 0 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions. 0 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 12 0 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 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.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 0 15 0 16 Other depreciation (including ACRS) 0 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2018 . . . . . . . . . 17 383,824 18 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 (a) Classification of property (e) Convention placed in (business/investment use (f) Method (g) Depreciation deduction period only-see instructions) service 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs. S/L h Residential rental 27.5 yrs. MM S/L 27.5 yrs MM S/L property i Nonresidential real MM S/L 39 yrs. MM S/L 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/L c 30-year 30 yrs. MM S/L d 40-vear 113.099 MM S/L 1,296 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 0 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 385,120 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . . . . . . . . .

Part V Listed Property

entertainment, recreation, or amusement.)

(Include automobiles, certain other vehicles, certain aircraft, and property used for

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a,

	24b, c	olumns (a)	through (c	) of Section	on A, all	of Sec	tion B,	and S	ection (	ifa	pplica	able.		_				
	Section A	— Depreci	iation and	Other In	formati	on (Ca	ution:	See the	e instru	ction	s for	limits	for pas	senge	er auto	mobiles.	.)	
24	a Do you have e	vidence to su	pport the b	usiness/inv	estment i	use clair	ned?	Yes [	□No	24t	o If "Y	es," is	the ev	dence	writter	1? ☐ Ye:	s	No
,.	(a) e of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment us percentage		d) other basis		(e) for depreness/inveruse only	stment	(f) Recove penod	•	(g) Meth Conve	od/		(h) preciation		(f) Elected se co:	ction	179
25	Special dep																	
	the tax year				•			e. See	instruc	tions	s .	25			0			
26	Property use	ed more tha	7		d busine	ess use	<del>)</del> :											
			9			<u> </u>												
			9															
27	Property use	d 50% or i	loss in a g	<del></del>	ucinoss													
	Property use	30 % OF 1	9		15111 <del>6</del> 55	use.		I		-	S/L -		Γ	_	T			
			9							-	3/L - 3/L -							
			9				-		-		3/L –							
28	Add amount	s in column	n (h), lines	25 throug	jh 27. E	nter he	re and	on line	21, pag			28			0			1
29	Add amount	s ın columr	n (i), lıne 20	6. Enter h	ere and	on line	7, pag	e 1 .		· .					29			0
		first answe	r the quest t miles driv	ions in Sec en during	ction C t		you me		xception		comple	eting t		tion for		vehicles.		
	the year ( <b>don</b>																	
31 32	Total commuting miles driven during the year Total other personal (noncommuting miles driven								_				<u> </u>					
33	Total miles driven during the year. Add lines 30 through 32 0 0 0 0 0								0									
34	Was the veh	ıcle availab	le for pers	sonal	Yes	No	Yes	No	Yes	N	lo	Yes	No	Yes	No	Yes		No
	use during o									<u> </u>								
35	Was the veh than 5% ow																	
<u>36</u>	Is another veh		<del> </del>				ļ							<u> </u>				
	wer these que e than 5% ow	stions to d		f you mee	t an exc	ception											ren'i	t
37	Do you mair your employ			statemer		rohibit 	s all pe	rsonal 	use of	vehi	icles, 	includ	ding co	mmut 	ing, by	Yes		No_
38	Do you mair employees?																	
39	•		-		-													
40	use of the ve	ehicles, and	retain the	informat	ion rece	ived?										<b>3</b>		
41	,																	
	Note: If you		37, 38, 3	9, 40, or 4	11 is "Ye	es," do	n't com	plete S	Section	B fo	r the o	cover	ed vehi	cles.				
Pa	rt VI Amor	tization	<del></del>						<del></del>			- 1	(0)	ſ				
		a) on of costs	C	(b) Date amortiza begins	ation	Amor	(c) rtizable ar	mount			d) section		(e) Amortiza period percent	or	Amort	(f) tization for t	this ye	ear
42	Amortization	of costs th	nat begins	during yo	ur 2018	tax ye	ar (see	instruc	ctions):	_								
	Amortization		_	-		-								43				0
44	Total. Add a	amounts in	column (f)	. See the	instruct	ions to	r where	to rep	ort .					44				0

Department of the Treasury

Internal Revenue Service (99)

# Depreciation and Amortization

(Including Information on Listed Property)

▶Attach toyour taxreturn.

▶Cotowww.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

Attachment Sequence No 179

Name(s) shown on return Business or activity to which this form relates Identifying number **GEORGETOWN UNIVERSITY** 541900 53-0196603 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1 1,000,000 2 Total cost of section 179 property placed in service (see instructions) . . . . . 2 0 Threshold cost of section 179 property before reduction in limitation (see instructions) . 3 1,000,000 4 0 5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 1,000,000 (a) Description of property 6 (b) Cost (business use only) (c) Elected cost 0 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 0 9 Tentative deduction. Enter the smaller of line 5 or line 8 . . . . . . . . . . . . 0 9 10 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 . . . . . . 10 0 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions. 170,681 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 0 13 Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12 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.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service 14 0 15 0 16 Other depreciation (including ACRS) 16 0 Part III MACRS Depreciation (Don't include listed property. See instructions.) 0 17 MACRS deductions for assets placed in service in tax years beginning before 2018 . . . . . . . . 17 18 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 (a) Classification of property placed in (e) Convention (f) Method (g) Depreciation deduction (business/investment use period only-see instructions) service 19a 3-year property 5-year property 137,602 7 yrs HY S/L c 7-year property 13,759 d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs h Residential rental 27.5 yrs MM S/L property 27 5 yrs. MM S/L i Nonresidential real MM S/L 39 yrs. property MM S/L 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/L c 30-year MM 30 yrs S/L d 40-year 40 yrs MM S/L Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 0 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 13,759 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . . . . . . . . .

Part V Listed Property

(Include automobiles, certain other vehicles, certain aircraft, and property used for

entertainment, recreation, or amusement.)

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

	24b, columns	<u> </u>	<u> </u>										_		
	Section A-Depr														
248	a Do you have evidence to		business/inv	estment ι	use clair		_ Yes _	_ No _	24b  f	"Yes," i	s the ev	idence	written?	☐ Yes	□ No
	(a) (b) e of property (list vehicles first)  (b) Date place in service	IINVASTMAN	tuse Cost or d	(d) other basis		(e) for depreness/invenuse use only	stment	(f) Recovery period	/ Me	(g) ethod/ vention		(h) preciatio eduction		(i) ected sec cost	-
25	Special depreciation														
	the tax year and use						se. See	instructi	ons .	25		·	0		
<b>26</b>	Property used more	than 50%		d busine	ess use	<u>:</u>					<del>,</del>				
			%						<u> </u>						
			%												
	Dranative and 5004		%												
	Property used 50%	or iess in a	%	usiness	use:				C/I		Т				
			%		+	<del>-</del>			S/L -		<del> </del>				
			%		+		-		S/L -						
28	Add amounts in colu	mn (h), line		ah 27. Ei	nter he	re and	on line	21. pag		28			0		
	Add amounts in colu										·	🗍	29		0
to yo	plete this section for ve our employees, first ans Total business/investm	wer the que	estions in Se	ction C to	o see if	you me			to com	pleting		tion for		ehicles.	vehicle: (f) Icle 6
	the year (don't include	_	•									_		<u> </u>	
31 32	Total commuting miles  Total other person miles driven		ommuting)												
33	Total miles driven during the year. Add lines 30 through 32 0 0 0 0 0								0						
34	Was the vehicle avai			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use during off-duty h Was the vehicle used than 5% owner or re	ours? d primarily	by a more												
36		•				-		+ +						+	
			estions for	Employ	vers W	ho Pro	vide V	ehicles:	for Use	by Th	eir Fm	nlove		<u> </u>	
	wer these questions to e than 5% owners or r	determin	e if you mee	t an exc	eption									who ar	en't
37	Do you maintain a wyour employees? .	ritten poli	cy statemer	nt that p	rohibit 	s all pe	rsonal	use of v	ehicles	s, inclu	ding co	mmuti	ing, by	Yes	No
38	Do you maintain a we employees? See the	ritten poli	cy statemer	nt that p	rohibit I by co	s perso	onal us	e of veh	icles, e ors, or	xcept	commu more o	iting, b	y your		
39	Do you treat all use of														
40	Do you provide mor						tain int	formation	from	your e	mploye	es abo	out the		
41	Do you meet the req						demon	stration (	use? Se	ee instr	uctions	s			
	Note: If your answer														
Pai	t VI Amortization	)					• • • •								
	(a) Description of costs		(b) Date amortiz begins	ation	Amoi	(c) rtizable ar	mount	Co	(d) ode sectio	on	(e) Amortiza period percent	ation I or	Amortiza	(f) ation for th	ııs year
42	Amortization of costs	that begi	ns during yo	ur 2018	tax ye	ar (see	instruc	ctions):							
	· · · · · · · · · · · · · · · · · · ·						_						** **		
	Amortization of costs											43			0
44	Total. Add amounts	<u>in colum</u> n	(f). See the	instruct	ions fo	r where	to rep	ort			<u> </u>	44			0

Department of the Treasury

Internal Revenue Service (99)

# Depreciation and Amortization

(Including Information on Listed Property)

▶Attach toyour taxreturn.

▶Cotowww.irs.gov/Form4562 f or instructions and the I atest information.

OMB No. 1545-0172

2018

Attachment Sequence No. 179

	s) shown on return			ess or activity to v	vhich this form re	lates	Identi	ifying number
	RGETOWN UNIVERS		7139				<u> </u>	53-0196603
Par			e <mark>rtain Property Ur</mark> ed property, comp			omplete Part I.		
1	Maximum amount (	see instruction	ıs)				1	1,000,000
2	Total cost of section	n 179 property	placed in service (s	ee instructions	s)		2	0
3	Threshold cost of se	ection 179 pro	perty before reduction	on in limitation	(see instruct	ions)	3	1,000,000
4	Reduction in limitati	ion. Subtract li	ne 3 from line 2. If z	ero or less, en	ter -0		4	0
5	Dollar limitation for	r tax year. Su	btract line 4 from I	ine 1. If zero	or less, ente	er -0 If married filing		
	separately, see instr	ructions					5	1,000,000
6	(a) De	scription of prope	rty	(b) Cost (bus	ness use only)	(c) Elected cost		
7	Listed property. Ent	er the amount	from line 29		7		0	
8	Total elected cost of	f section 179 j	property. Add amoui	nts in column (	(c), lines 6 and	d7	8	0
9	Tentative deduction	. Enter the <b>sm</b>	aller of line 5 or line	8			9	0
10	Carryover of disallo	wed deduction	from line 13 of you	r 2017 Form 4	562		10	0
11	Business income limit	tation. Enter the	smaller of business in	ncome (not less	than zero) or	line 5. See instructions .	11	100,989
12	Section 179 expens	e deduction. A	Add lines 9 and 10, b	ut don't enter	more than lin	ne 11	12	0
13	Carryover of disallo	wed deduction	to 2019. Add lines	9 and 10, less	line 12	13	0	
Note	: Don't use Part II o	r Part III below	for listed property.	Instead, use P	art V.			
Par	Special Dep	reciation Allo	wance and Other	Depreciation	n (Don't inclu	de listed property. See	instru	uctions.)
	•			ty (other than	listed prope	erty) placed in service		
	during the tax year.						14	0
		,,,	1) election				15	0
	Other depreciation (		IS)	<u> </u>	· · · ·	<u> </u>	16	0
Par	MACRS Dep	preciation (D	on't include listed	· · · · · · · · · · · · · · · · · · ·	e instructio	ns.)		
				Section A			Д	
						18	17	46,217
	•	•	•	_	-	o one or more general		
	asset accounts, che						<u></u>	
	Section B		,	19 2018 Tax Y	ear Using th	e General Depreciation	Syste	<u>∍m</u>
(a) C	classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	n (f) Method	(g) De	epreciation deduction
19a	3-year property							···-
b	5-year property	'						
С	7-year property		2,871	7 yrs	MQ	S/L		359
d	10-year property						<u> </u>	
е	15-year property							
f	20-year property							
<u>g</u>	25-year property			25 yrs		S/L		
h	Residential rental			27.5 yrs.	MM	S/L		
	property			27 5 yrs.	MM	S/L		
i	Nonresidential real			39 yrs.	MM	S/L	<u> </u>	
	property				MM	S/L		
	Section C-	Assets Place	d in Service During	2018 Tax Ye	ar Using the	<b>Alternative Depreciation</b>	on Sys	tem
20a	Class life					S/L		
b	12-year			12 yrs.		S/L		
С	30-year			30 yrs.	MM	S/L		•
d	40-year		25,346	40 yrs.	MM	S/L		449
Par	IV Summary (S	See instruction	ns.)			-		
21	Listed property. Ent	er amount fror	n line 28				21	0
						n (g), and line 21. Enter		
	here and on the app	ropriate lines	of your return. Partne	erships and S	corporations	-see instructions .	22	47,025
23	For assets shown al	bove and plac	ed in service during	the current ye	ar, enter the			
	portion of the basis	attributable to	section 263A costs			23 0	į.	

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

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

		olumns (a)														
	Section A	-Depreci	ation an	d Other In	formati	on (Ca	ution: S	See the	e instruc	ctions fo	or limits	for pas	ssenge	autom	obiles.)	
248	Do you have e	vidence to su	pport the l	business/inv	estment	use clair	ned?	Yes [	No	24b If	"Yes," i	s the ev	idence v	written?	☐ Yes	□ No
,.	(a) e of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment u percentage	ise Cost or d	d) other basis		(e) for depre ness/inves use only	stment	(f) Recover period	· 1	(g) ethod/ evention		(h) preciation eduction	E	(i) ected sectoricost	
25	Special dep										3					
	the tax year							e. See	instruc	tions .	25			0		
26	Property use	ed more tha	an 50% ir	a qualifie	d busin	ess use	e:									
				%												
				%												
				%												
27	Property use	ed 50% or I		<del>'                                     </del>	usiness	use:		<del></del>								
				%						S/L						1
				%						S/L -						
	A 11			%		<u> </u>	<del></del>			S/L·		<b>_</b>	<del></del>			İ
	Add amount										28			0	-	
29	Add amount	s in column	n (i), line 2								· ·	• • •		29		0
C	nlata thia anati	ian far vahia	oloo wood		tion B						"			l <b>f</b>		
	plete this secti our employees,															venicies
,.	di ciripioyecs,	11101 01101101	Tine ques		T		i -		1		<del>i</del>	_	1		1	
30	Total business the year (don'			_		a) cle 1		b) icle 2		(c) icle 3		d) icle 4		(e) licle 5	Vehi	
31	•		_	-			<u> </u>		1		<del> </del>	-	1			
	31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven															
33	Total miles lines 30 thro		ing the y					0		0		0		0		)
34	Was the veh	icle availab	le for per	sonal	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use during o		-													
35	Was the veh											-				
	than 5% own													ļ		
36	Is another veh				<u> </u>		<u> </u>			<u> </u>	<u> </u>	L	1	L		
				stions for												
more	wer these que than 5% ow	ners or rela	ated pers	ons. See ir	structio	ns.										
37	Do you main your employ		ten polic	y statemer	nt that p	rohibit 	s all pe	rsonal 	use of	vehicle:	s, inclu	ding co	mmutii 	ng, by	Yes	No
38	Do you mair employees?													y your		
39	Do you treat	all use of v	ehicles b	y employe	es as p	ersona	l use?									
40	, ~							tain inf	ormatic	n from	your e	mploye	es abo	ut the		
	use of the ve										• • •					
41	Do you meet	-		_	-											
	Note: If you		37, 38, 3	39, 40, or 4	11 is "Ye	es," do	n't com	plete S	Section	B for th	e cover	ed veh	icles.			
Par	t VI Amor	tization	- 1							-	<u> </u>	(-)				
	(a Descriptio			(b) Date amortiza begins	ation	Amor	(c) tızable ar	nount	c	(d) ode secti	on	(e) Amortiza period percent	or	Amortiza	(f) ition for th	ıs year
42	Amortization	of costs th	nat begins	s durina va	ur 2018	tax ve	ar (see	ınstruc	tions):			,	<u> </u>			
					1	, •	,			<del></del>						
43	Amortization	of costs th	nat began	before yo	ur 2018	tax ye	ar				• •		43			0

0

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

44

Department of the Treasury

Internal Revenue Service (99)

# Depreciation and Amortization

(Including Information on Listed Property)

▶Attach toyour taxreturn.

▶Cotowww.irs.gov/Form4562 f or instructions and the l atest information.

OMB No. 1545-0172

2018

Attachment Sequence No. 179

	(s) shown on return			ess or activity to w	hich this form re	lates	Ident	tifying number
	RGETOWN UNIVERS		5311				<u> </u>	53-0196603
Par			rtain Property Ur ed property, comp			omplete Part I.		
1	Maximum amount (s	see instruction	s)				1	1,000,000
2	Total cost of section	n 179 property	placed in service (s	ee instructions	s)		2	0
3	Threshold cost of se	ection 179 pro	perty before reducti	on in limitation	(see instruct	ions)	3	1,000,000
4	Reduction in limitati	on. Subtract li	ne 3 from line 2. If z	ero or less, ent	ter -0		4	0
5	Dollar limitation for separately, see instr	-				er -0 If married filing	_	4 000 000
			<del></del>			(a) Florand and	5	1,000,000
6	(a) De	scription of proper	ту	(b) Cost (busi	ness use only)	(c) Elected cost		4
								4
			·			<del> </del>		_
	Listed property. Ent					17	0	<del> </del>
_	Total elected cost o						8	0
9							9	0
10	-		-				10	0
11				•		line 5. See instructions .	11	91,477
	•					ne 11	12	0
	Carryover of disallo			•		13	0	
	: Don't use Part II o							
			•		-	ude listed property. See	: Instr	uctions.)
14				- '		erty) placed in service		_
	during the tax year.						14	0
			•				15	0
	Other depreciation					<del> </del>	16	0
Par	till MACRS Der	oreciation (D	on't include listed		e instructio	ns.)		
	.=			Section A				<u> </u>
						18	17	9,049
18				=		o one or more general		
	asset accounts, che						<u> </u>	
	Section B			ng 2018 Tax Y	ear Using th	e General Depreciation	Syst	em
(a) (	Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	on (f) Method	(g) D	Depreciation deduction
19a	3-year property							
b	5-year property		-					
C	7-year property	l i	115	7 yrs	MQ	S/L		2
d	10-year property							
	15-year property	1						•
f	20-year property		·					
g	25-year property	I		25 yrs.		S/L		
h	Residential rental			27.5 yrs.	MM	S/L		
	property			27.5 yrs.	MM	S/L		
i	Nonresidential real			39 yrs.	MM	S/L	<b></b>	
	property			J. J. J. J.	MM	S/L		
		-Assets Place	d in Service During	2018 Tax Ye		Alternative Depreciation	n Sv:	stem
20a	Class life					S/L		
	12-year			12 yrs		S/L		
	30-year	_	<del>.</del>	30 yrs.	MM	S/L	<del>                                     </del>	
	40-year		705	40 yrs.	MM	S/L	_	14
	t IV Summary (S	See instruction		1 40 yrs.	IVIIVI		—	
	Listed property. Ent		<del></del>				21	T 0
					20 in column	n (g), and line 21. Enter	-1	<del>                                     </del>
	here and on the app						22	9,065
22	For assets shown a	•	•	-	•			1 9,000
	portion of the basis	•	-	•		23 0		

		4
		,

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

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a

	24b, c	olumns (a)	through (	c) of Secti	on A, all	of Sec	tion B,	and S	ection (	if ap	plicable	,	опрот	30, 00111	pioto <b>c</b> i	.ıy L⊣u
		-Depreci														
24a	Do you have e	vidence to su	<del>1</del>	ousiness/inv	estment	se clair	ned?	] Yes	□ No _	24b	If "Yes,"	is the ev	<u>/idence</u>	written?	☐ Yes	□ No
	(a) (b) Business/ one of property (list vehicles first) Date placed in service in service percentage Cost or		(d) other basis	(e) Basis for depreciation (business/investment use only)		stment	(f) Recove period	- 1	y (g) Method/ Convention		(h) Depreciation deduction		(i) Elected section 179 cost			
25	Special depi										_					
	the tax year				•			se. See	instruc	uons	. 25	5		0	<del>.</del>	
26	Property use	ed more tha		<u> </u>	d busine	ess use	<del>:</del>						_			<del></del>
			1	%												
			<del></del>	%							-				_	_
		L	L	%		<u> </u>										
27	Property use	ed 50% or I			usiness	ușe:										
			<del>                                     </del>	%		_				_	<u>L –                                     </u>					
				%		<u>.</u>				S/	<u>L –</u>					
	<u> </u>			%		_					L –					
28	Add amount	s in columr	n (h), line:	s 25 throug	gh 27. E	nter he	re and	on line	21, pag	ge 1	28			0		
29	Add amount	s in columr	n (i), line 2	26. Enter h	ere and	on line	7, pag	je 1 .			<u></u>			29		0
					ction B						_					
	plete this secti our employees,															vehicles
30	Total business/investment miles driven during the year (don't include commuting miles) .			a) cle 1	(b) 1 Vehicle 2					(d) (e) nicle 4 Vehicle 5			(f) Vehicle 6			
21	• •		•	•			ļ	-					+		-	
33		Total miles driven during the year. Add lines 30 through 32				)	0 0			0 0		0	0			
34	Was the vehi	icłe availab	le for per	sonal	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	use during o		•													
35	5 Was the vehicle used primarily by a more than 5% owner or related person?															
36								1								
			<del></del>	stions for	Emplo	vers W	ho Pro	vide V	ehicles	for L	Jse by T	heir Em	plove	 es	<u> </u>	·
	ver these que e than 5% ow	stions to d	etermine	if you mee	et an exc	eption									who <b>ar</b>	en't
37	7 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?									Yes	No					
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 v	ehicles b	y employe	es as p	ersona	l use?									
40																
41	_							demon	stration	use?	See ins	tructions	s			
	Note: If you	-		_	•											
Par	t VI Amor		<del>'</del>	. ,							•					
	(a) Description of costs  (b) Date amortiz begins		ation	n (c) Amortizable amount		(d) Code section		(e) Amortization period or Amo percentage		Amortiza	(f) rtization for this year					
42	Amortization	of costs th	nat begin	s during ve	our 2018	tax ve	ar (see	instruc	ctions).			p=:0011				
							,550						1			
					+				$\dashv$				+			
43	Amortization	of costs th	nat begar	before vo	ur 2018	tax ve	ar	<del></del>					43			0

0

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

44