<b>5</b>	990-T	E	cempt Organization				rn	OMB No 1545-0047
j-orm	330-1	1			der section 603		- 2 0	@@ <b>40</b>
.,		For cale	ndar year 2019 or other tax year begin				2020	20 I9
	ment of the Treasury I Revenue Service		► Go to www.irs.gov/Form990					Open to Public Inspection for 35
A X		<b>₽</b> 00	Name of organization (		me changed and see instruc			oyer identification number
^ [	address changed		Traine or organization ( on oak 20			,		oyees' trust, see instructions)
B Exe	empt under section		UNIVERSITY OF RICHMO	OND				
_	501( C 10 3 )	Print	Number, street, and room or suite no		box see instructions		54~0	505965
	408(e) 220(e)	_ or		•	-			ated business activity code
$\vdash$	408(e) 220(e) 408A 530(a)	Туре	110 UR DRIVE, SUITE	201	•			structions)
$\Box$	529(a)		City or town, state or province, country		ZIP or foreign postal code			
. C Boo	ok value of all assets	ł	RICHMOND, VA 23173-				52	-
	end of year	F Gro	up exemption number (See instructi					
2	2953130131.		ck organization type > X 501			1(c) trust	401(a)	trust Other trust
H Er	nter the number of		nization's unrelated trades or busine			· <i>'</i>		(or first) unrelated
tra	ade or business her	e ▶INV	ESTMENTS IN PARTNERS	IIPS			-	e than one, describe the
			end of the previous sentence, cor				-	
	ade or business, the		•	•	•			
I Di	uring the tax year,	was the	corporation a subsidiary in an affili	ated g	roup or a parent-subsidia	ry controlled group?		▶ Yés X No
	-		identifying number of the parent co		on <b>&gt;</b>			
			AURIE F. MELVILLE		Teleph	none number 🕨 80	4-289-	-8150
Par	t I Unrelated	Trade o	or Business Income		(A) Income	· (B) Expen	ses	(C) Net
1a	Gross receipts or s	sales						
b	Less returns and allowa	nces	c Balance	1c				
2	Cost of goods sol	d (Sched	ule A, line 7)	2		4.0		
3	Gross profit Sub	tract line	2 from line (c)	3	=	20 X X X X X X X X X X X X X X X X X X X		
4a	Capital gain net ii	ncome (a	ittach Schedule (D)	4a	12,502,144	· 2000	46.83	12,502,144.
b	Net gain (loss) (Fo	orm 4797,	Part II, line 17) (attach Form 4797)	4b				
c	Capital loss dedu	ction for t	rusts	4c				
5	Income (loss) from a p	artnership o	r an S corporation (attach statement)	5	-3,032,257	· XATCH 1	<u>//</u>	-3,032,257.
6	Rent income (Sch	edule C)		6		ļ	<u>/·</u>	<u> </u>
7	Unrelated debt-fir	nanced in	come (Schedule E)	7			_	<u> </u>
8	Interest, annuities, roya	alties, and re	ents from a controlled organization (Schedule F)			+/-		
9			1(c)(7), (9), or (17) organization (Schedule G)	9				
10	•	•	ncome (Schedule I)	10				<del> </del>
11,	_	•	fule J)	11		\$5550000000000000000000000000000000000	gerein Nighting	1.
12	,		tions, attach schedule)	12	9,469,888	ATCH#2	\$ 100 S	9,469,888.
13	Total Combine III	nes 3 thr	ough 12	13			Coducti	
(0)			ne unrelated business incom			CEIVED	<u>Je</u> duciii	ons must be directly
			directors, and trustees (Schedule K)				144	T
SCANNED	•				*(())	17	() 14 () 15	
2	Renairs and main	tenance	/ 	• • •	O MAY		9 16	
711 617	Rad debts					0	2 17	
18	Interest (attach se	chedule)	(see instructions)	• • •	OG	DEN IT	18	
	Taxes and license	s				S. F. 1. A. J.	19	269,164.
20	Depreciation (atta	 ach Form	4562)				329	3
21			on Schedule A and elsewhere on re				21b	
22			<i>.</i>				22	
			compensation plans					
22			3					
25			Schedule I)					
26			chedule J)					
27	Other deductions	(attach s	chedule)			ATCH. 3	27	11,326.
28	Total deductions.	Add line	s 14 through 27				28	280,490.
29	Unrelated busine	ss taxab	le income before net operating	loss	deduction Subtract lir	ne 28 from line 1	3 29	9,189,398.
30	Deduction for net	operatin	g loss arısıng ın tax years beginnir	ng on d	or after January 1, 2018 (	see instructions) ,	30	9,189,398.
31			e income Subtract line 30 from line	29 .	<del> </del>	<u> </u>	31	<u> </u>
<b> For F</b>	aperwork Reduct	ion Act N	lotice, see instructions.					Form <b>990-T</b> (2019)

Par	iotal Orrelated Business Taxable Income		
32 <b>7</b>	Total of unrelated business taxable income computed from all unrelated trades or businesses (see		
	instructions)	J. <u>32</u>	5,956,776.
33	Amounts paid for disallowed fringes	ı. 33	
34	Amounts paid for disallowed fringes	1. 34	37,597.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract light	e	
	34 from the sum of lines 32 and 33	). 35	5,919,179.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see	e	
	instructions)	. 36	
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	5,919,179.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	<b>∨</b> । ⊬ ।	1,000.
39	Unrelated business taxable income Subtract line 38 from line 37 If line 38 is greater than line 3	7. III	-
11	enter the smaller of zero or line 37	. 39	5,918,179.
Par	t IV Tax Computation	Ą	
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0 21)	<b>▶</b> -40	1,242,818.
41	Trusts Taxable at Trust Rates See instructions for tax computation Income tax of		
	the amount on line 39 from Tax rate schedule or Schedule D (Form 1041)	▶ 41	
42	Proxy tax. See instructions	▶ 42	•
43	Alternative minimum tax (trusts only)		
441	Tax on Noncompliant Facility Income. See instructions		
45	Total Add lines 42, 43, and 44 to line 40 or 41, whichever applies	1 45	1,242,818.
Par	Tax and Payments		
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 46a		
b	Other credits (see instructions)		
С	General business credit Attach Form 3800 (see instructions)		
	Credit for prior year minimum tax (attach Form 8801 or 8827)		
	Total credits. Add lines 46a through 46d	. 46e	
47	Subtract line 46e from line 45	. 47	1,242,818.
48	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule		
49	Total tax. Add lines 47 and 48 (see instructions)	년 49	1,242,818.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	. 50	
51 a	Payments A 2018 overpayment credited to 2019	5. <b> </b>	
b	2019 estimated tax payments		
С	Tax deposited with Form 8868	<u>.                                    </u>	
d	Foreign organizations Tax paid or withheld at source (see instructions)   5/1 t	_	
е	Backup withholding (see instructions)	<u> </u>	
f	Credit for small employer health insurance premiums (attach Form 8941) [51f]		
g	Other credits, adjustments, and payments Form 2439		
	Form 4136 Other Total ▶ <b>51g</b>	,	
52	Total payments. Add lines 51a through 51g	. 52	3,893,655.
53	Estimated tax penalty (see instructions) Check if Form 2220 is attached	<u> </u>	
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	<u>▶ 54</u>	
55,		55	2,650,837.
56	Enter the amount of line 55 you want  Credited to 2020 estimated tax ▶ 2,650,837. Refunded		
Par		•	1 1 1 1 1 1
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature		
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization	-	1 1
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	ne foreigr	1 1
	here ►		$\frac{X}{X}$
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a formula to the control of the control o	oreign trus	· · · · ·  ^
50	If "Yes," see instructions for other forms the organization may have to file		
<u>59</u>	Enter the amount of tax-exempt interest received or accrued during the tax year   S  Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the second sec	ne best of m	v knowledge and belief, it is
Sim	true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge		
Sig:		•	IRS discuss this return
ner	Signature of officer Date Title	with the (see instructi	preparer shown below ons)?X Yes No
	Print/Type preparer's name Preparer's signature Date		PTIN
Paid	5/44/2024	heck L if elf-employed	
Prep	arer	m's EIN 🕨	13-4008324
Use			02-414-1000
	1 HITS BURIESS F 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	IOUE IO -	

11

•	initialities y at bagg or ye	~				u. u. u. , u.	~	·	
2	Purchases	2		7	Cost of	goods so	ild. Subtract line	;	
3	Cost of labor	3			6 from In	ne 5 Enter	here and in Part	·	
4a .	Additional section 263A co	sts			1, line 2			.   7	
	(attach schedule)	4a		8			section 263A (		
	Other costs (attach schedul						or acquired fo		
	Total. Add lines 1 through							X	
	dule C - Rent Income		roperty a	nd Persona	I Property	Leased V	Vith Real Prope	ertv)	
	instructions)	•			. ,		•	,	
	cription of property						<del></del>		
(1)	оприон от реоротор								
(2)									
(3)					,	<u>.</u>			
(4)									
(4)		2. Rent recei	ed or accrue						
						· · · · · · · · · · · · · · · · · · ·	4		
	From personal property (if the p or personal property is more tha			rom real and pe age of rent for pe			in columns 2	directly connected with the income 2(a) and 2(b) (attach schedule)	
	more than 50%)		50% or	if the rent is ba	sed on profit or	income)		,	
(1)									
(2)									
(3)									
(4)	······································							·	
Total		<del></del>	Total						
						<del>.</del>	(b) Total deducti		
	tal income. Add totals of cond on page 1, Part I, line 6,						Enter here and o		
Scho	dule E - Unrelated De	bt Financed I	ocomo (sc	o instruction	c)		Part I, line 6, colu	лин (в) 🕨	
Scile	dule E - Officialed De	Di-Financeu ii	icome (se	1		3 [	Deductions directly co	onnected with or allocable to	
	1 Description of debt	Linanced omnedy		2 Gross inc			debt-finan	ced property	
	1 Besonption of debi	interioca property		allocable to debt-financed property		(a) Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)	
(4)						(atta	icii scriedule)	(attact scredule)	
(1) (2)									
(3)									
				<del> </del>				-	
(4)	4 Amount of average	5 Average adju	ted basis						
	acquisition debt on or	of or alloca		6 Co		7 Gross	income reportable	8. Allocable deductions	
	llocable to debt-financed	debt-financed		4 div			n 2 x column 6)	(column 6 x total of columns 3(a) and 3(b))	
	roperty (attach schedule)	(attach sche	dule)	ļ <i>'</i>					
(1)					<u>%</u>				
(2)					<u>%</u>				
(3)					%				
(4)		<del></del>		L	%	F-1/		F-1	
							re and on page 1, ne 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)	
							,		
					▶				
Total o	dividends-received deduction	ons included in co	olumn 8	<u> </u>	<u> </u>		<u> ▶</u>		

Form **990-T** (2019)

Page 4

Schedule F – Interest, Annu	uities, Royaities			on Contro entrolled Org			ations (se	e instructi	ions)	
Name of controlled organization	2 Employer identification number	er 3	Net unrel	ated income nstructions)	4 Total		ed included	f column 4 to in the contri ion's gross in	olling	6 Deductions directly connected with income in column 5
(1)										
(2)					ļ					<del></del>
(3)					<u> </u>					
(4)					<u> </u>					
Nonexempt Controlled Organiz						10 1	Part of column	O that is	11	Deductions directly
7 Taxable Income	8 Net unrelated in (loss) (see instruct			Total of specific ayments made		incl	uded in the co	ntrolling		nected with income in column 10
(1)										
(2)					-					<del> </del>
(3)				· · · · · · · · · · · · · · · · · · ·	<del></del>		<del></del>			
(4)						^d	d columns 5 a	nd 10	Ad	d columns 6 and 11
Totals			1(c)(7),	(9), or (17		Par		mn (A)		er here and on page 1, 1 i, line 8, column (B)  5 Total deductions
1 Description of income	2. Amount of	ıncome		directly cor (attach sch	nected			t-asides schedule)		and set-asides (col 3 plus col 4)
(1)										
(2)					-				-+	
(3) (4)							<u> </u>			
Totals ▶ Schedule I – Exploited Exe	Enter here and of Part I, line 9, co	olumn (A)	Other Th				enii 🗎 🖈 ke			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 Expenses directly connected with production of unrelated business income		2 minus column 3)		5 Gross income from activity that is not unrelated business income		6 Expenses attributable to column 5		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)										
(2)										
(3)			-	<u> </u>						
(4)										
Totals ,	Enter here and on page 1, Part I, Inne 10, col (A)		re and on , Part I, col (B)						Enter here and on page 1, Part II, line 25	
Schedule J- Advertising In Part I Income From Peri			Consol	idated Bas						
Part I Income From Peri	dicais Report	eu on a	Consoi	luateu bas	)i3		<u> </u>	1		
1 Name of periodical	2 Gross advertising income		rect ing costs	4 Adverting gain or (los 2 minus co a gain, coi cois 5 thro	s) (col of 3) If mpute		Circulation ncome	6 Readership costs		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)					er syere					PERSONAL PROPERTY.
(2)				State of the	The second second					CHELTA VIET II
(3)				Same of the Section of	A.L.					M. Markey Land
(4)				\$52 T \$650						MISSON ACT
Totals (carry to Part II, line (5))			_							Farm <b>990-T</b> (2019

UNIVERSITY OF RICHMOND

(4)

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

Page 5 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 2 minus col 3) If a gain, compute cols 5 through 7 5 Circulation 6 Readership minus column 5, but 1 Name of periodical advertising advertising costs ıncome costs not more than income column 4) (1) (2) (3) (4) RETURNOUS: THE PARTY OF THE P Totals from Part I. Enter here and on Enter here and on Enter here and page 1, Part I, page 1, Part I, on page 1, line 11, col (A) line 11, col (B) Part II, line 26 Totals, Part II (lines 1-5) . . . . ▶ Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3 Percent of 4 Compensation attributable to time devoted to 2 Title 1 Name unrelated business (1) % % (2) (3) %

Form 990-T (2019)

%

## SCHEDULE M (Form 990-T)

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

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service For calendar year 2019 or other tax year beginning 07/01, 2019, and ending 06/30, 20 20• Go to www.irs.gov/Form990T for instructions and the latest information.

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

Topen to Public Inspection for + 5 501(c)(3) Organizations Only

Name of the organization
UNIVERSITY OF RICHMOND

Unrelated Business Activity Code (see instructions) ▶ 44

Describe the unrelated trade or business ▶ RETAIL TRADE Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 538,792. Gross receipts or sales 538,792 b Less returns and allowances 485,266. M-1422 PMP 1239 M 1 1 9 Cost of goods sold (Schedule A, line 7)..... 2 2 Gross profit Subtract line 2 from line 1c . . . . . 4a Capital gain net income (attach Schedule D) . . . . . . . 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797). . 4h Income (loss) from a partnership or an S corporation (attach 5 6 Unrelated debt-financed income (Schedule E). . . . . . . 7 Interest, annuities, royalties, and rents from a controlled Investment income of a section 501(c)(7), (9), or (17) 9 organization (Schedule G) . . . . . . . . . . . . . . . . 9 Exploited exempt activity income (Schedule I) . . . . . . 10 10 Advertising income (Schedule J) . . . . . . . . . . . . . . . 11 11 598,416. PARAMETER 598,416. 12 Other income (See instructions, attach schedule) ATCH, 5. 12 651,942. 651,942. 13 Total Combine lines 3 through 12....

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

14	Compensation of officers, directors, and trustees (Schedule K).	14	
15	Salaries and wages		
16	Repairs and maintenance		
17	Bad debts	$\overline{}$	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses		65,130.
20	Depreciation (attach Form 4562)	45000	
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	
22	Depletion	22	
23	Contributions to deferred compensation plans	1 1	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)		·
26	Excess readership costs (Schedule J)	1 1	
27	Other deductions (attach schedule)	27	339,462.
28	Total deductions Add lines 14 through 27	28	404,592.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	247,350.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see	<u> </u>	
	instructions)		
31	Unrelated business taxable income Subtract line 30 from line 29	$\overline{}$	247,350.

For Paperwork Reduction Act Notice, see instructions

### SCHEDULE M (Form 990-T)

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning  $\frac{07/01}{}$  , 2019, and ending

06/30 .20 20

► Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Name of the organization

UNIVERSITY OF RICHMOND

Employer identification number

54-0505965

Unrelated Business Activity Code (see instructions) ▶ 53

Describe the unrelated trade or business RENTALS & LEASING

Par	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances c Balance ▶	1c		St. 142 Sept. No. 14 Table	
2	Cost of goods sold (Schedule A, line 7)	2		San	والكفائل الكياران وأسيانا والكالميان
3	Gross profit Subtract line 2 from line 1c	3			
4a	Capital gain net income (attach Schedule D)	4a		the course of the Court of the	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797).	4b		The state of the s	
С	Capital loss deduction for trusts	4c		(1977) [1] (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5		Carrier Commence Commence	
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			
0	Exploited exempt activity income (Schedule I)	10			-
1	Advertising income (Schedule J)	11			
2	Other income (See instructions, attach schedule) ATCH. 7.	12	192,708.	Carrie Belleville Bill of	192,708
3	Total Combine lines 3 through 12	13	192,708.		192,708

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

	•		
14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	186,985.
16	Repairs and maintenance		
17	Bad debts,	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses		65,130.
20	Depreciation (attach Form 4562)	3	
21	Less depreciation claimed on Schedule A and elsewhere on return	21b	
22	Depletion ,	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule)	27	131,999.
28	Total deductions. Add lines 14 through 27	28	384,114.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-191,406.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see	32.1	,
	instructions)	30	
31	Unrelated business taxable income Subtract line 30 from line 29	31	-191,406.

For Paperwork Reduction Act Notice, see instructions

# SCHEDULE M (Form 990-T)

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

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service For calendar year 2019 or other tax year beginning  $\frac{07/01}{}$  , 2019, and ending  $\frac{06/30}{}$  , 20

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

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

Open to Public Inspection for 5.501(c)(3) Organizations Only

Name of the organization

UNIVERSITY OF RICHMOND

Employer Identification number 54-0505965

Unrelated Business Activity Code (see instructions) ▶ 72

Describe the unrelated trade or business ▶ ACCOMMODATION & FOOD SERVICES

Par	t I Unrelated Trade or Business Incom	ne		(A) Income	(B) Expenses		(C) Net
1 a	Gross receipts or sales				220 755	200	
b	Less returns and allowances	c Balance	1c				
2	Cost of goods sold (Schedule A, line 7)		2		Mile Land Land		التسافية المستنف أستدانها
3	Gross profit Subtract line 2 from line 1c		3		CALL TOWN		
4a	Capital gain net income (attach Schedule D)		4a		CART STA	ارسود محد عد المأل محد عد	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Fo	m 4797)	4b		4740 F. M. S. C.		
С	Capital loss deduction for trusts	î î	4c		M. B. M. P. W. G.	THE PARTY	
5	Income (loss) from a partnership or an S corporat	ion (attach			TO THE PARTY OF TH		
	statement)		5			والمستعمر المستعمر	
6	Rent income (Schedule C)		6				
7	Unrelated debt-financed income (Schedule E)		7		,		
8	Interest, annuities, royalties, and rents from a con	trolled					
	organization (Schedule F)		8				
9	Investment income of a section 501(c)(7), (9), or (	(17)					,
	organization (Schedule G)		9				
10	Exploited exempt activity income (Schedule I) .		10				
11	Advertising income (Schedule J)		11				
12	Other income (See instructions, attach schedule)	ATCH 9.	12	144,882.	v material	100 mm	144,882.
13	Total Combine lines 3 through 12	<u> </u>	13	144,882.			144,882.
14	connected with the unrelated business  Compensation of officers, directors, and trustees (	income)				14	e directly
15	Salaries and wages					15	,
16	Repairs and maintenance						
17	Bad debts					17	
18	Interest (attach schedule) (see instructions)					18	
19	Taxes and licenses					19	65,130.
20	Depreciation (attach Form 4562)			1 1		<u> </u>	
21	Less depreciation claimed on Schedule A and els					21b	
22	Depletion					22	
23	Contributions to deferred compensation plans .					23	
24	Employee benefit programs					24	
25	Excess exempt expenses (Schedule I)					25	
26	Excess readership costs (Schedule J)					26	
27	Other deductions (attach schedule)				ATCH 10	27	113,028.
28	Total deductions. Add lines 14 through 27					28	178,158.
29	Unrelated business taxable income before ne	t operating	loss	deduction Subtract line	28 from line 13	29	-33,276.
30	Deduction for net operating loss arising in	tax years	begin	ning on or after Janua	ry 1, 2018 (see		
	instructions)					30	
31	Unrelated business taxable income Subtract line	30 from line	29 .	<del> </del>	<u></u>	31	-33,276.

For Paperwork Reduction Act Notice, see Instructions

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

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

OMB No 1545-0047

2019

Department of the Treasury

07/01 . 2019, and ending 06/30 .20 20 For calendar year 2019 or other tax year beginning ► 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) Internal Revenue Service Employer identification number Name of the organization UNIVERSITY OF RICHMOND 54-0505965 Unrelated Business Activity Code (see instructions) ▶ 81 Describe the unrelated trade or business ► SPONSORSHIPS Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales Less returns and allowances 2 Cost of goods sold (Schedule A, line 7)...... 2 THE PARTY OF THE PARTY OF Gross profit Subtract line 2 from line 1c . . . . . . . . . Market Street Capital gain net income (attach Schedule D) . . . . . . . et mazina yan Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797). Partalla La Markallo. Income (loss) from a partnership or an S corporation (attach 5 6 7. Unrelated debt-financed income (Schedule E). . . . . . . Interest, annuities, royalties, and rents from a controlled Investment income of a section 501(c)(7), (9), or (17) 10 Exploited exempt activity income (Schedule I) . . . . . . 10 Advertising income (Schedule J)....... 11 11 35,525. Other income (See instructions, attach schedule) ATCH, 11 12 12 35,525.35,525. Total. Combine lines 3 through 12. Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions ) (Deductions must be directly connected with the unrelated business income ) Compensation of officers, directors, and trustees (Schedule K)..... 14 14 15 16 16 17 17 18 Interest (attach schedule) (see instructions) 65,130. 19 19 1 20 21 Less depreciation claimed on Schedule A and elsewhere on return . . . . . . 22 22 23 23 24 24 Excess exempt expenses (Schedule I) . . . . . . . . . . . . . . . . 25 25 26 Excess readership costs (Schedule J)........ 9,666. 27 27 74,796. 28 28 -39,271.29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 29 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see 300.0

For Paperwork Reduction Act Notice, see instructions

instructions). . . . . . . . . . . . . . . . . . .

Schedule M (Form 990-T) 2019

-39,271.

# SCHEDULE M (Form 990-T)

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

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service For calendar year 2019 or other tax year beginning 07/01, 2019, and ending 06/30, 20 20

► Go to www.irs.gov/Form990T for instructions and the latest information
► Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 55.501(c)(3) Organizations Only

Name	of	the	organization	

UNIVERSITY OF RICHMOND

Employer identification number

54-0505965

Unrelated Business Activity Code (see instructions) ► 52

Describe the unrelated trade or business ► INVESTMENT MANAGEMENT

Par	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	<del></del>		
2	Cost of goods sold (Schedule A, line 7)	2			Maria Maria
3	Gross profit Subtract line 2 from line 1c	3		かくなるだった。 外球製	
4a	Capital gain net income (attach Schedule D)	4a		となりなるので	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
С	Capital loss deduction for trusts	4c		はべるながれるあいま	
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			
0	Exploited exempt activity income (Schedule I)	10			
1	Advertising income (Schedule J)	11			
2	Other income (See instructions, attach schedule) ATCH. 13	12	6,378,613.		6,378,613.
3	Total. Combine lines 3 through 12	13	6,378,613.		6,378,613.

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

ripensation of officers, directors, and trustees (Schedule K)		
	15	
airs and maintenance		
	16	
debts	17	
rest (attach schedule) (see instructions)	18	_
		65,130.
reciation (attach Form 4562)	3.900	
j j	21b	592,733.
letion	_22	
tributions to deferred compensation plans	23	
oloyee benefit programs	24	
ess readership costs (Schedule J)	26	
		11,324.
ıl deductions. Add lines 14 through 27	28	669,187.
elated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	5,709,426.
· · · · · · · · · · · · · · · · · · ·		
	ı	
·		5,709,426.
	reciation (attach Form 4562).  s depreciation claimed on Schedule A and elsewhere on return  bletion.  chributions to deferred compensation plans  cloyee benefit programs  ess exempt expenses (Schedule I)  ess readership costs (Schedule J)  er deductions (attach schedule)  al deductions. Add lines 14 through 27  elated business taxable income before net operating loss deduction Subtract line 28 from line 13 luction for net operating loss arising in tax years beginning on or after January 1, 2018 (see ructions).	reciation (attach Form 4562).  s depreciation claimed on Schedule A and elsewhere on return  stetion.  21b  stription of the top of

For Paperwork Reduction Act Notice, see instructions

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

ROR PARTNERSHIP (EIN: 26-1761403)

PASS-THROUGH UBTI

THE RICHMOND FUND LP (EIN: 26-1501561)

PASS-THROUGH UBTI

-2,663,835.

-368,422.

INCOME (LOSS) FROM PARTNERSHIPS

-3,032,257.

	ATTACHMENT 2
PART I - LINE 12 - OTHER INCOME	
SECTION 965(A) INCLUSION	1.
PART I - LINE 12 - OTHER INCOME	1.

## FORM 990T - PART II - LINE 27 - TOTAL OTHER DEDUCTIONS

INCOME TAX PREPARATION FEES ADMINISTRATIVE EXPENSES

9,989.

1,337.

PART II - LINE 27 - OTHER DEDUCTIONS

11,326.

## FORM 990T - PART III LINE 34 - CHARITABLE CONTRIBUTIONS

UNRELATED TRADE OR BUSINESS INCOME  UNRELATED TRADE OR BUSINESS INCOME (SCHEDULES M)  ADD: DOMESTIC PRODUCTION ACTIVITIES DEDUCTION	9,469,888. 7,403,670. 0.
LESS: DEDUCTIONS W/O CHARITABLE CONTRIBUTIONS & DPAD  DED W/O CHARITABLE CONTRIBUTIONS & DPAD (SCH M)	9,469,888. 1,118,114. * 10%
CHARITABLE CONTRIBUTION LIMITATION (10%)  CHARITABLE CONTRIBUTION	595,678. 37,597.
CHARITABLE CONTRIBUTION DEDUCTION (SMALLER OF THE ABOVE TWO)	595,678.

ATTACHMENT	5		 

SCHEDULE M - OTHER INCOME

WEINSTEIN CENTER FOR REC & WELLNESS

598,416.

TOTAL

598,416.

ATTACHMENT	6	
------------	---	--

#### FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

WEINSTEIN CENTER FOR REC & WELLNESS INCOME TAX PREPARATION FEES ADMINISTRATIVE EXPENSES

334,795.

3,330. 1,337.

DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD)

PART II - LINE 27 - OTHER DEDUCTIONS

339,462.

TINIT	VERSITY	OF	RT	CHI	MOND

SCHEDULE M - OTHER INCOME

WEDDINGS SUMMER CAMPS & CONFERENCES 15,000. 177,708.

TOTAL

192,708.

#### FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

WEDDINGS 1,816.
SUMMER CAMPS & CONFERENCES 125,517.
INCOME TAX PREPARATION FEES 3,330.
ADMINISTRATIVE EXPENSES 1,336.

DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD)

PART II - LINE 27 - OTHER DEDUCTIONS

131,999.

SCHEDULE M - OTHER INCOME

SUMMER CAMPS & CONFERENCES

144,882.

TOTAL

144,882.

ATTACHMENT 1	0
--------------	---

#### FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

SUMMER CAMPS & CONFERENCES INCOME TAX PREPARATION FEES ADMINISTRATIVE EXPENSES

108,362. 3,330.

1,336.

DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD)

PART II - LINE 27 - OTHER DEDUCTIONS

113,028.

UNIVERSITY	OF	RICHMOND
------------	----	----------

SCHEDULE M - OTHER INCOME

SPONSORSHIP

35,525.

TOTAL

35,525.

ATTACHM	ENT	12	

#### FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

SPONSORSHIP INCOME TAX PREPARATION FEES ADMINISTRATIVE EXPENSES

5,000.

3,330. 1,336.

DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD)

PART II - LINE 27 - OTHER DEDUCTIONS

9,666.

SCHEDULE M - OTHER INCOME

RFMC INVESTMENT MANAGEMENT

6,378,613.

TOTAL

6,378,613.

FORM 990T - PART II LINE 27 TOTAL OTHER DEDUCTIONS

TAX PREPARATION FEES ADMINISTRATIVE EXPENSES 9,988. 1,336.

DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD)

PART II - LINE 27 - OTHER DEDUCTIONS

11,324.

UNIVERSITY OF RICHMOND 54-0505965

#### PARTNERSHIP INVESTMENTS

## FORM 990-T: PART II, LINE 30 - NOL CARRYFORWARD SCHEDULE

T	ax	ab	le	

	Income before			LOSS
FY Ending	NOL	NOL Incurred	NOL Utilized	CARRYFORWARD
06/30/2019	-	(13,154,851)	9,189,398	(3,965,453)
06/30/2020	9,189,398	-	-	-
	NOL Carryfo	rward Available as	of 06/30/2020	(3,965,453)

### RETAIL TRADE

FY Ending	Taxable Income before NOL	NOL Incurred	NOL Utilized	LOSS CARRYFORWARD
06/30/2019	306,309	_	-	_
06/30/2020	247,350	-	-	-
	NOL Carryforwa	ard Available as	of 06/30/2020	_

#### RENTALS & LEASING

	Income	•		LOSS
FY Ending	before NOL	NOL Incurred	NOL Utilized	CARRYFORWARD
06/30/2019	-	(33,926)	_	(33,926)
06/30/2020	-	(191,406)	-	(191,406)
	NOL Carryforwa	ard Available as	of 06/30/2020	(225,332)

#### ACCOMMODATION & FOOD SERVICES

	Taxable Income			LOSS
FY Ending	before NOL	NOL Incurred	NOL Utilized	CARRYFORWARD
06/30/2019	27,128	_	-	_
06/30/2020	-	(33,276)	-	(33,276)
	NOL Carryforwa	ard Available as	of 06/30/2020	(33,276)

#### SPONSORSHIPS

	Taxable Income	NOT To	NOT THE TELL	LOSS
FY Ending	before NOL	NOL Incurred	NOL Utilized	CARRYFORWARD
06/30/2019	-	(7,411)	-	(7,411)
06/30/2020	-	(39,271)	-	(39,271)
	NOL Carryforwa	ard Available as	of 06/30/2020	(46,682)

UNIVERSITY OF RICHMOND 54-0505965

#### INVESTMENT MANAGEMENT

FΥ	Ending	Taxable Income before NOL	NOL Incurred	NOL Utilized	LOSS CARRYFORWARD
	06/30/2019	8,656,032	_	_	•
	06/30/2020	5,709,426	-	-	-
		NOL Carryforwa	ard Available as	of 06/30/2020	-

#### **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

Department of the Treasury Internal Revenue Service

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

2019

OMB No 1545-0123

Name	ALDOLINA OF BIOLINOVE					er identification number
	VERSITY OF RICHMOND				;	54-0505965
	ne corporation dispose of any investment(s) in a		-	-	<b>►</b> [	Yes X No
Part	s," attach Form 8949 and see its instructions fo Short-Term Capital Gains and Losses			your gain or lo	<u>ss</u>	<del></del>
r ai i	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	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments or loss from For 8949, Part I, lin column (g)	m(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	whole dollars  Totals for all short-term transactions reported on Form  1099-8 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.		, ,	column (g)		the result with column (g)
1 b	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				+		
3	with Box C checked					840,933.
			<u> </u>	1		0.07300.
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 exchar	nges from Form 8824			. 5	
6	Unused capital loss carryover (attach computation)			· · · · · · · · ·	. 6	( 167,023.
7	Net short-term capital gain or (loss) Combine lines 1	a through 6 in column	h		7	673,910.
Pari				• • • • • • •	<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	Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts to enter on Instructions for how to figure the amounts for how to figure				
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.			-		
86	Totals for all transactions reported on Form(s) 8949 with Box D checked					
	Totals for all transactions reported on Form(s) 8949				<u> </u>	
•	with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked					5,161,679.
			L			3,101,013.
11	Enter gain from Form 4797, line 7 or 9				11	6,666,555.
12	Long-term capital gain from installment sales from F	orm 6252, line 26 or 3	7		12	
13	Long-term capital gain or (loss) from like-kind exchan	ges from Form 8824	· · · · · · · · · · · · · · · · · · ·		13	·
14	Capital gain distributions (see instructions)		14			
15 Part	Net long-term capital gain or (loss) Combine lines 8:	a through 14 in column	ih	· · · · · · · · · · · · · · · · · · ·	15	11,828,234.
T CIT	- vanniary or i arw i alia ii				Τ –	
16	Enter excess of net short-term capital gain (line 7) or	ver net long-term capita	al loss (line 15)		16	673,910. 11,828,234.
17	Net capital gain Enter excess of net long-term capit					
18	Add lines 16 and 17 Enter here and on Form 1120,  Note: If Josses exceed pains, see Capital Losses in the		proper line on other re	turns	18	12,502,144.

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

Schedule D (Form 1120) 2019

## Form 8949

## Sales and Other Dispositions of Capital Assets

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

OMB No 1545-0074

Department of the Treasury

Name(s) shown on return

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

UNIVERSITY	OF	RICHMON

Social security number or taxpayer identification number

54-0505965

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

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions) For long-term transactions, see page 2

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a, you aren't required to report these transactions on Form 8949 (see instructions)

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

1							any, to gain or loss	
	(a) iption of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	Cost or other basis See the Note below	enter a cod	amount in column (g), de in column (f) rate instructions	Gain or (loss) Subtract column (e)
	e 100 sh XYZ Co)	(Mo. dav. vr.)   disposed	disposed of (Мо , day, уг )	posed of   (sales price)	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)
FROM SCHEDULE	CS K-1							840,933.
					,			
	•							
		<del></del>						
		<u>.                                    </u>						
		<del> </del>						

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

For Paperwork Reduction Act Notice, see your tax return instructions.

Form 8949 (2019)

Farm 8040 (2010)	Attachment Sequence No 12A	Dana 2
Form 8949 (2019)	Attachment Sequence No 12A	Page Z

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 54-0505965 UNIVERSITY OF RICHMOND

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 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, formore of the boxes, complete as mage (D) Long-term transactions recognition (E) Long-term transactions recognitions recognitions recognitions and the second se	any forms wit eported on Fe eported on F	h the same b orm(s) 1099- orm(s) 1099-	oox checked as y B showing basis B showing basis	ou need was reported to	o the IRS (see		ge for one or
(a) Description of property	(b) Date acquired (Mo , day, yr )	(c) Date sold or disposed of (Mo , day, yr )	(d) Proceeds (sales pnce) (see instructions)	(e) Cost or other basis See the Note below and see Column (e) in the separate instructions	Adjustment, if If you enter an a enter a co See the sepa	(h) Gain or (loss) Subtract column (e) from column (d) and	
(Example 100 sh XYZ Co)					(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
FROM SCHEDULES K-1							5,215,670
FORM 6781, PART II							-53,991

					-
,					
2 Totals Add the amounts in colunegative amounts) Enter each Schedule D, line 8b (if Box D a	total here and inc	lude on your			5 161 679

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 (2019)

5,161,679

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

54-0505965

#### UNIVERSITY OF RICHMOND

### CAPITAL GAIN/LOSS

## SCHEDULE D (1120): PART I, LINE 6 - UNUSED CAPITAL LOSS

FY Ending	Capital Loss Incurred	Capital Loss Utilized	LOSS CARRYFORWARD
06/30/2019	(167,023)	167,023	-
06/30/2020	-	_	-
CADIMAL LOCG	CADDVEODWADD AVATIANT	TE NU 06/30/2020	_

## 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

UNIVERSITY OF RICHMOND

54-0505965

Busi	ness or activity to which this form relates	S						
GEI	NERAL DEPRECIATION AN	D AMORTIZATION						
Pa	rt I Election To Expense Note: If you have any				you comp	olete Part I		
1	Maximum amount (see instruction		<u> </u>		-		1	
2	Total cost of section 179 property							
3	Threshold cost of section 179 pro							
4 5	Reduction in limitation Subtract Dollar limitation for tax year Subtract line 4 separately, see instructions	line 3 from line 2 If zero of from line 1 If zero or less, enter-	or less, enter -(	) '				
6		tion of property			isiness use only			
	Listed property Enter the amount					<del> <b>1</b></del>		
	Total elected cost of section 179							
9	Tentative deduction Enter the sm Carryover of disallowed deduction	after of line 5 of line 6.					9	
10	Business income limitation Enter							
11 12	Section 179 expense deduction							-
13	Carryover of disallowed deduction						12	3888886 78886 78
	e. Don't use Part II or Part III belov				13			MOTEUR SERVICE STORY THE STREET
	rt    Special Depreciation				on't include	listed proper	ty See inst	tructions )
14	Special depreciation allowance							1
14	during the tax year. See instruction						ı	
15	Property subject to section 168(f)							
16	Other depreciation (including ACF							
_	rt III MACRS Depreciation	<del></del>						·
		<u> </u>	<del></del>	tion A	•			
17	MACRS deductions for assets pla	aced in service in tax yea	rs beginning b	efore 2019			17	
18	If you are electing to group ar asset accounts, check here						al 🤼	
		ets Placed in Service					reciation S	ystem
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for (business/inv only - see in	estment use	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property	7X.7W.17.597.		•				
b	5-year property							
С	7-year property	and and	•					
d	10-year property	The state of the second						
е	15-year property	CARRY SHARE						
f	20-year property						<u> </u>	
g	25-year property	TWO SECTIONS			25 yrs		S/L	
h	Residential rental				27 5 yrs	MM	S/L	
	property				27 5 yrs	ММ	S/L	
i	Nonresidential real				39 yrs	MM	S/L	
	property					MM	S/L	
	Section C - Asset	s Placed in Service D	uring 2019	Tax Year	Using the	Alternative De	<del></del>	System
20a	Class life	WALKERIY.					S/L	
	12-year	TRADAC KT			12 yrs		S/L	
	30-year				30 yrs	MM	S/L	
_	40-year				40 yrs	MM	S/L	I
	rt IV Summary (See instru						<del></del>	<u> </u>
	Listed property Enter amount from	* *					21	
22	Total. Add amounts from line	•	-				l l	
23	here and on the appropriate lines  For assets shown above and p  portion of the basis attributable to	olyour return Partnershi placed in service during p section 263A costs	the current	year, ent	er the 23	1	22	

_	n 4562 (2019)					_	_								Page 2
Pa	entertainme	operty (Include ent, recreation, or	r amuseme	ent)									•	•	ed fo
	Note: For an	ny vehicle for whi s (a) through (c) of	ich you are Section A	e using all of S	the sta	andard 3. and 3	i mileag Section	ge rati Cıfaı	e or dec oplicable	ducting	lease (	expens	e, comp	olete or	1ly 24a
		Depreciation and									passe	nger au	utomobil	es)	
248	Do you have evidence						es 📗		24b					Yes	No
	(a)	(b)	(c)		(4)		(e)		(f)	(	g)		(h)		(ı)
	Type of property (list	Date placed	Business/ investment us	e Cost o	(d) or other ba		sis for depr		Recovery		hod/		eciation	1	section 179
	vehicles first)	in service	percentage			,,,	use only		period	Conv	ention	ded	luction	c	ost
25	Special depreciation														
	the tax year and us	ed more than 50%	ın a qualıfı	ed busi	ness use	e See	instruc	tions			. 25				
26	Property used more	e than 50% in a qu	alified busir	ness use	e										
				%											
			•	%			**			ĺ					
			(	%											
27	Property used 50%	or less in a qualifi	ed business	use											
			(	%						S/L -					
			(	%						S/L -		i		]	
				%						S/L -				]	
28	Add amounts in co	lumn (h), lines 25 (	through 27	Enter	here an	d on li	ne 21, p	page 1			. 28			]	
	Add amounts in col												. 29		
					nforma									•	
Cor	nplete this section for	r vehicles used by								er," or r	elated p	erson	If you r	rovided	vehicle
	our employees, first ans														
				(a	3)	(	(b)		(c)	(	d)		(e)		(f)
30	Total business/inve	setment miles drive	an during	Vehi	cle 1	Veh	ncle 2	Ve	ehicle 3	Veh	ıcle 4	Veh	hicle 5	Veh	ıcte 6
30	the year (don't incli														
31	Total commuting m		Г									1			-
		ersonal (nonco												<u> </u>	
-	miles driven	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,												
33	Total miles drive		ar Δdd					${}^{+-}$		† ·				1	
33	lines 30 through 32	•	I												
24	Was the vehicle		I	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34	use during off-duty		' '	- 100			<del> </del>		<del>                                     </del>			1.00	+	1.00	<del> </del>
25	Was the vehicle							_				1	+		
33	than 5% owner or r		I			,									
26	Is another vehicl	•	F				<u> </u>	$\vdash$				1	<del>                                     </del>	Ì	<u> </u>
30			'	-											
	use?				\A/b -	Desid	ida Mal	<u> </u>		by Th	ai- F-			<u>l</u>	<u> </u>
		ction C - Questio													
	swer these question re than 5% owners o				eption to	com	pieting	Secu	on B for	venicie	s usea	by em	pioyees	wno a	rent
									<del></del>					Yes	No
37	Do you maintain a												ng, by	163	10
20	your employees?.  Do you maintain a			 bot pro	 Shihito e			of wo	 buolos o	· · · ·				}	
38															
20	employees? See th						rs, aire	ctors, c	or 1% or	more o	wners				$\vdash$
	Do you treat all use														<del> </del>
40	Do you provide m					, obta	iin into	rmatio	n from	your er	npioyee	es abo	ut the		
	use of the vehicles,					: • •									ļ
41	Do you meet the re														<u> </u>
	Note: If your answ		U, or 41 is	'Yes," a	on't cor	npiete	Section	u R tor	the cove	erea vei	nicies			<u> </u>	
Pa	rt VI Amortizati	ion													
	(-)		(b)	ŀ		(c)			(4)		(e			(f)	
	(a) Description o	f costs	Date amort		Ame		e amount		(d) Code se		Amorti perio		Amortiza	ation for th	nis vear
			begins								perce				
42	Amortization of cos	its that begins duri	ng your 20	19 tax y	year (se	e instr	uctions)	)							
				I											
43	Amortization of cos	sts that began befo	ore your 20	19 tax y	ear				_ <del></del>			43		592	733
44	Total. Add amount	ts in column (f) Se	e the instru	uctions	for whe	re to re	eport .	<u></u>	<u> </u>	<u></u>	<u></u>	44			733
JSA													Fc	rm 456	
JUM															