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Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)  Unrelated business taxable income Subtract line 30 from line 29  30  0.  31  66.			Q	and the contract of the second		., .						
(see instructions) SEE STATEMENT 2 30 0.  Unrelated business taxable income Subtract line 30 from line 29 31 66.									29	66.		
Unrelated business taxable income Subtract line 30 from line 29  31  66.	,	craung l	uss arising in tax years be	guming on or after Janu	ary 1, 20		C III 3 III	DMDNM 1	,			
	<i>,</i> '	axahle ir	ncome. Subtract line 30 fre	nm line 29		SEE	STAT	emeni. 7				
									31	Form <b>990-T</b> (2019)		

Form 990	10-T (2014) TEXAS LUTHERAN UNIVERSITY		74-	11097	48 F	age 2
Part	t III/ Total Unrelated Business Taxable Income	1_1_				
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	32		6	56.
33	Amounts paid for disallowed fringes	•	33			
34	Charitable contributions (see instructions for limitation rules)		34			0.
35	Total unrelated business taxable income before pre 2018 NOLs and specific deduction Subtract line 34 from the sum of lines 3	499433)	35			<u> </u>
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	₩ 3	36		6	<u> 56.</u>
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	C	37			
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	8	38	1	,00	00.
39	Unrelated business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37,		1			_
	enter the smaller of zero or line 37		39			0.
Part	t IV Tax Computation					
40	Organizations Taxable as Corporations Multiply line 39 by 21% (0.21)		40			0.
41	Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 39 from					
	Tax rate schedule or Schedule D (Form 1041)	<b>&gt;</b>	41			
42	Proxy tax See instructions	<b>&gt;</b>	42			
43	Alternative minimum tax (trusts only)		43			
44	Tax on Noncompliant Facility Income See instructions		44			
45	Total Add lines 42, 43, and 44 to line 40 or 41, whichever applies		45			0.
Part						
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)  Other worlds (corporations)		-			
þ	Other credits (see instructions)  Consul by successful Attack Source 2000		-			
G	General business credit Attach Form 3800 46c		-			
4	7		460			
	Total credits. Add lines 46a through 46d Subtract line 46e from line 45		46e			0.
47 40	Other taxes Check if from. Form 4255 Form 8611 Form 8697 Form 8866 Other (attach		48			<del>••</del>
48	Total tax Add lines 47 and 48 (see instructions)	schedule)	49			0.
49 50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3		50			0.
	Payments A 2018 overpayment credited to 2019		-30			<del>••</del>
	2019 estimated tax payments 51b		-			
	Tax deposited with Form 8868 51c					
	Foreign organizations Tax paid or withheld at source (see instructions)  51d		┤			
	Backup withholding (see instructions) 51e		_			
	Credit for small employer health insurance premiums (attach Form 8941) 51f		-			
	Other credits, adjustments, and payments. Form 2439				•	
٠	Form 4136 Other Total > 51g					
52	Total payments Add lines 51a through 51g		52			
53	Estimated tax penalty (see instructions) Check if Form 2220 is attached		53	-		
54	Tax due If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	<b>&gt;</b>	54			
55	Overpayment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	<b>&gt;</b>	55_			
56	Enter the amount of line 55 you want. Credited to 2020 estimated tax.	ed 🕨	56			
Part	t VI Statements Regarding Certain Activities and Other Information (see instruction	s)				
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority			L	Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file			l	ļ	1
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country			-		
	here CAYMAN ISLANDS				X	
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign tru	ıst?				_X_
	If "Yes," see instructions for other forms the organization may have to file					
59	Enter the amount of tax-exempt interest received or accrued during the tax year \$					
Sign	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best correct, approximation of preparer last any knowledge is based on all information of which preparer has any knowledge	of my knowl	edge and b	elief, it is true,		
Here		Г	May the IRS	discuss this r	eturn W	ath
11010	VF TOR FINANCE			shown below		
	Signature of officer Date Title			)? X Yes		No
	Print/Type preparer's name Preparer's signature Date Chec		if PTI	J.		
Paid	TOCEDITATE DELIDENT (ACCORDING 15 April 100 100 100	employed	1			
-	parer JOSEPHINE BEHREND JOSEPHINE 03/31/21			007153		
Use	Only Firm's name ► RSM US LLP (Firm's name	n's EIN	<u> </u>	2-0714	32!	2
	19026 RIDGEWOOD PKWY, STE 400		04.5			
	Firm's address ► SAN ANTONIO, TX 78259	one no	<u> 210-8</u>	328-62	81	

Schedule A - Cost of Goods	Sold. Enter	method of inven	itory valuation   N/A					
1 Inventory at beginning of year	1		6 Inventory at end of year	ar		6		
2 Purchases	2		7 Cost of goods sold S	ubtract li	ine 6		·	
3 Cost of labor	3		from line 5 Enter here	and in P	Part I,			
4 a Additional section 263A costs		<del></del>	line 2			7		
(attach schedule)	4a		8 Do the rules of section	1 263A (v	vith respect to		Yes	No
<b>b</b> Other costs (attach schedule)	4b		property produced or a	acquired	for resale) apply to			
5 Total Add lines 1 through 4b	5		the organization?	_				
Schedule C - Rent Income (	From Real I	Property and	Personal Property L	ease	d With Real Prop	erty)		
(see instructions)	·							
1 Description of property								
(1)							-	
(2)		· · · · · · · · · · · · · · · · · · ·						
(3)			-					
(4)						•		
	2. Rent receive	ed or accrued						
(a) From personal property (if the perc rent for personal property is more 10% but not more than 50%)	centage of than	of rent for p	and personal property (if the percenta personal property exceeds 50% or if at is based on profit or income)	ige	3(a) Deductions directly columns 2(a) ar	connec nd 2(b) (a	ted with the income in attach schedule)	1
(1)			<u> </u>				<u></u>	
(2)								
(3)								
(4)								
Total '	0.	Total		0.				
(c) Total income Add totals of columns here and on page 1, Part I, line 6, column	) (A)	<b>&gt;</b>		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<b>&gt;</b>		0.
Schedule E - Unrelated Deb	t-Financed	Income (see	instructions)	-				
			2. Gross income from		3. Deductions directly control to debt-finance	nected v	erty	
1 Description of debt-fir	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	ıs
(1)						<u> </u>		
(2)								
(3)								
(4)							-	
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property a schedule)	6 Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deduct column 6 x total of co 3(a) and 3(b))	ions Iumns
(1)		-	%	<b> </b>	~~	+		
(2)			%	<del>                                     </del>		$\top$		
(3)			%			+		
(4)	-		%			+		
	·			<u> </u>	nter here and on page 1	+	Enter have and -	- 1
					Part I, line 7, column (A)		Enter here and on pag Part I, line 7, column (	
Totals			•		0	.		0.
Total dividends-received deductions in	icluded in column	18				-	<del></del>	0.

Schedule F - Interest, F		, ,	,		Controlled O				(300 1115	truction	<i>5</i> ,	
1 Name of controlled organizate	ion	2. Em identifi num	cation	3. Net unr	elated income instructions)	4. Tota	al of specified nents made	include	5. Part of column 4 that is included in the controlling organization's gross income		6. Deductions directly connected with income in column 5	
(1)												
(2)									_			
(3)												
(4)												
Nonexempt Controlled Organi	zations					-						
7. Taxable Income		elated incom e instructions		9 Total	of specified payr made	nents	10 Part of column the controllingrose	mn 9 that ng organ s income	is included ization's		ductions directly connected income in column 10	
(1)							-					
(2)												
(3)												
(4)								-		<del></del> -	<del></del>	
	,						Add colum Enter here and line 8, o		1, Part I,	Enter h	d columns 6 and 11 ere and on page 1, Part I, line 8, column (B)	
Totals Schedule G - Investme	nt Incom	e of a S	Section	501(0)/7	'\ (0\ or (	17\ Ora	anization		0.		0.	
(see instr		eoras	section	1 50 1 (0)(7	), (9), or (	i /) Org	janization					
<del></del>	ription of incom	9			2 Amount of	ıncome	3. Deduction directly connective (attach schedule)	cted	4. Set-a		5 Total deductions and set-asides (col 3 plus col 4)	
(1)		_						,			(ser o piec ser sy	
(2)	···-											
(3)												
(4)										-		
					Enter here and o Part I, line 9, co						Enter here and on page 1 Part I, line 9, column (B)	
Totals				<b>•</b>		0.					0.	
Schedule I - Exploited (see instru		Activity	Incom	e, Other	Than Adv	ertisin	g Income					
Description of exploited activity	2 Gro unrelated b income trade or bu	usiness from	directly with pi of ur	xpenses connected roduction related ss income	4 Net incomfrom unrelated business (cominus columi gain, compute through	trade or lumn 2 n 3) If a cols 5	5. Gross inco from activity t is not unrelat business inco	hat ed	6 Exp attributa colum	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)											•	
(2)												
(3)												
(4)												
	Enter here page 1, F line 10, co	Parti, ol(A)	page	ere and on 1, Part I, ), col (B)		1.		<del></del>			Enter here and on page 1, Part II, line 25	
Totals Schedule J - Advertisir	a Incom	0.		0.		· · · · · · · · · · · · · · · · · · ·					<u> </u>	
Part I Income From F			nstructio		olidated	Posis					,	
	- Ilouica	iis nepi	·		-,							
1. Name of periodical	á	2 Gross advertising income	ad	3. Direct vertising costs	4 Advert or (loss) (co col 3) If a ga cols 5 th	ol 2 minus iin, compute	5. Circulation		6. Reade cost		7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)												
(2)												
(3)												
(4)												
Totals (carry to Part II, line (5))	<b>•</b>	(	0.	0							^	
, , , , , , , , , , , , , , , , , , , ,					- 1		٠	ļ			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)

4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. 7 Excess readership costs (column 6 minus column 5, but not more than column 4) 2 Gross advertising income 5. Circulation income 6 Readership costs 3 Direct 1 Name of periodical advertising costs (1) (2) (3) (4) 0. 0. 0. Totals from Part I Enter here and on page 1, Part I, line 11, col (A) Enter here and on page 1, Part I, line 11, col (B) Enter here and on page 1, Part II, line 26 0. Totals, Part II (lines 1-5) 0.

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

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14			0.

Form 990-T (2019)

	INCO	ME (LOSS) FROM PA	ARTNERSHIPS	STATEMENT 1
DESCRIPTION	N			NET INCOME OR (LOSS)
	PRODUCTS PARTNERS	, L.P ORDINARY	BUSINESS	
INCOME (LOS	SS) RY FUND 8-B LP C/O		a oppringer	-960
SUSINESS IN	_ ·	TRG KK FUND 8 LL	ic - ORDINARY	-356
HI-CRUSH PA	ARTNERS L.P ORDI IGUARD FUND III L.I			-33
(LOSS)				-468
	T CAPITAL PRIVATE I	EQUITY FUND X, L.	P ORDINARY	
BUSINESS II	•			1,785
NEWBURY EQU (LOSS)	UITY PARTNERS, L.P.	ORDINARY BUSI	NESS INCOME	928
	VATE INVESTMENT PAR	RTNERS III. LP -	ORDINARY	920
	NCOME (LOSS)		OILD IIIIIII	309
	EMPNER INSTITUTIONA	AL PARTNERS, L.P.	- ORDINARY	
BUSINESS II	NCOME (LO & GAS, LTD ORDII			254
/ΜΥ ''!! Δ ()   '	-53			
	E MINEDALC I D _	ODDINADA BUGINES	C TNCOME	33
BLACK STONI	E MINERALS, L.P	ORDINARY BUSINES	S INCOME	
BLACK STONI (LOSS)	E MINERALS, L.P NSFER, L.P ORDIN			56 -1,396
BLACK STONI (LOSS) ENERGY TRAI	·	NARY BUSINESS INC		56
BLACK STONI (LOSS) ENERGY TRAI	NSFER, L.P ORDIN	NARY BUSINESS INC	COME (LOSS)	56 -1,396
BLACK STONI (LOSS) ENERGY TRAI	NSFER, L.P ORDIN	NARY BUSINESS INC , PAGE 1, LINE 5 OPERATING LOSS D	COME (LOSS)	56 -1,396 66
BLACK STONI (LOSS) ENERGY TRAI FOTAL INCLU	NSFER, L.P ORDIN	NARY BUSINESS INC , PAGE 1, LINE 5 OPERATING LOSS D	COME (LOSS)	56 -1,396 66
BLACK STONI (LOSS) ENERGY TRAI	NSFER, L.P ORDINUDED ON FORM 990-T	NARY BUSINESS INC , PAGE 1, LINE 5 OPERATING LOSS D LOSS PREVIOUSLY	COME (LOSS) DEDUCTION LOSS	56 -1,396 66 STATEMENT 2 AVAILABLE

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 3
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
05/31/14	2,783.	2,783.	0.	0.
05/31/15	4,395.	4,395.	0.	0.
05/31/16	22,943.	7,823.	15,120.	15,120.
05/31/18	23,957.	0.	23,957.	23,957.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	39,077.	39,077.