# **Exempt Organization Business Income Tax Return**

OMB No. 1545-0687

Form	99U-1		(and	proxy tax under	secti	on 6033(e)	)	-		@@ <b>4 0</b>	
		For cale	endar year 2018 or othe	r tax year beginning JUL	Υ1 ,	2018, and ending	JUNE 30, 20	19 .		2018	
Departme	ent of the Treasury		► Go to www.irs.	.gov/Form990T for instr	ructions	and the latest in	formation.			- An Dublic Incom	
	Revenue Service	▶ Do i	not enter SSN number	rs on this form as it may b	e made	public if your orga	nization is a 50	1(c)(3).	501	n to Public Inspecti (c)(3) Organizations	Only
A Ca	heck box if ddress changed		Name of organization	( Check box if name ch	nanged a	nd see instructions.)				identification nur	
	pt under section	Print	CENTRAL MICHIGA		~~~~~~			l (Emb	поуеє	s' trust, see instruct	.ions.}
_	1( c )( 3 )	or	1	oom or suite no. If a P.O. bo	x, see ins	structions.		<u> </u>		8-6004447	
∐ 40		Type	304 WARRINER HA					1		business activity outliness	:ode
∐ 40.				province, country, and ZIP o	r foreign	postal code		, ,		,	
G Book	9(a) value of all assets		MOUNT PLEASANT							45XXXX	
at enc	value of all assets			mber (See instructions ype ► ☑ 501(c) cor		n [] 501(c	truet [	] 401(a	) tru	st 🗍 Other	truet
H Ent	\$1,086,830,521 ter the number			lated trades or busines						or first) unrelate	
			CMU BOOKSTORE			ly one, complet					
				revious sentence, cor							
			omplete Parts III-V								
				sidiary in an affiliated gro	oup or a	parent-subsidiar	y controlled g	roup?		▶ ☐ Yes 🗸	No
				nber of the parent corp			,	•			
			JULIA MONTRO				hone numbe	r 🕨		989-774-3332	
			e or Business In			(A) Income	(B) E)	cpenses		(C) Net	
1a	Gross receipts	or sale	es 13,822						Ġ.		
b	Less returns and a			<b>c</b> Balance ►	1c	13,822					
2	_		· ·		2	6,753		9524 (842 442) 14			
3	•				3	7,069	5.000 55.00E	56.625.0		7,069	
4a				eD)	4a				23		
b				7) (attach Form 4797)	4b						
	Capital loss de				4c						
				oration (attach statement)	J				84.65		
	Rent income (S				6						
				lule E)	7						
		-		lled organization (Schedule F)	-						
				7) organization (Schedule G)							
	•		-	dule I)	10				_		
	_	_			11						
	·			edule)	12	7 000				7.000	
13 Part	Total. Combine		<del> · ×</del>	e (See instructions fo	<del></del>	7,069	tione ) (Evo	ont for	con	7,069	
· Circ				cted with the unrelate			, ,	ebt ioi	CON	mbutions,	
14				trustees (Schedule K		<del></del>			14		
	Salaries and wa							·	15	1,634	
		_						j	16	1,38.1	
								<b></b>	17		
				ns)					18		
	•		, ,	·				<b></b>	19		
				s for limitation rules) .					20		
21	Depreciation (a	ittach F	Form 4562)			. 21	70				
				A and elsewhere on re					2b	70	
									23		
			•	plans					24		
									25		
									26		
									27		
									28	1,247	
				28				Ş	29	2,951	
				e net operating loss de				_	30	4,118	
		-		ax years beginning on o		January 1, 2018 (	see instructio	· —	31		dividit.
32	Unrelated busir	ness ta	xable income. Sub	tract line 31 from line :	30 .			. 1:	32 l	4 118	

1 01111 001	0 1 (2010)							_			- 0
Part I		otal Unrelated									
33				come computed from							
	instruct	tions)	1 1 1 1 1	* * * * * * * *		4 4			33	175,001	-
									34		
				sing in tax years be							
		Committee of the commit							35	175,001	
				ome before specific de							
									36	0	
				ut see line 37 instructi					37	1,000	
				Subtract line 37 from							
				4 4 4 4 7 7 7					38	0	
Part I	V T	ax Computation	on								
				ns. Multiply line 38 by					39		
				See instructions for							-
	the am	ount on line 38 fr	om: 🗌 Tax rate	e schedule or 🔲 Sch	edule D (Form 10	41) .			40		
									41		
42	Alterna	tive minimum tax	(trusts only) .						42		
43	Tax on	Noncompliant	Facility Income	. See instructions .					43		
44	Total.	Add lines 41, 42,	and 43 to line 3	39 or 40, whichever ap	plies				44		
Part \		ax and Payme									
45a	Foreign	tax credit (corpor	ations attach For	m 1118; trusts attach F	orm 1116) .	45a			( )		
						45b			( )		
				800 (see instructions)		45c					
d	Credit f	or prior year min	imum tax (attac	h Form 8801 or 8827)		45d					1
е	Total c	redits. Add lines	45a through 45	5d ,					45e		
46	Subtrac	ct line 45e from l	ne 44						46		
47	Other ta:	xes. Check if from:	☐ Form 4255 ☐	Form 8611  Form 869	7 🗌 Form 8866 🔲	Other (a	attach schedule) .		47		
				tructions)					48		
49	2018 ne	et 965 tax liability	paid from Forr	n 965-A or Form 965-l	B, Part II, column	(k), lin	e2		49		
50a	Paymer	nts: A 2017 over	payment credite	ed to 2018		50a					
b	2018 es	stimated tax pay	ments			50b					
C	Tax de	oosited with Form	n 8868			50c					
d	Foreign	organizations: 7	ax paid or with	held at source (see ins	tructions) .	50d					
е	Backup	withholding (se	e instructions)			50e					
				nce premiums (attach		50f					
g	Other o	redits, adjustme	nts, and payme	nts: 🗌 Form 2439 _							
	☐ Form			Other	Total ▶	50g	2				
			nes 50a through	150g					51		
52	Estimat	ted tax penalty (s	ee instructions)	. Check if Form 2220 i	s attached	4.4			52		
53	Tax du	e. If line 51 is les	s than the total	of lines 48, 49, and 52	enter amount o	wed			53		
				he total of lines 48, 49		mount	overpaid .		54		
55				ed to 2019 estimated tax			Refunded	<b>&gt;</b>	55		
Part \	STATE OF THE PARTY			in Activities and Of						-	
56	At any	time during the 2	2018 calendar y	ear, did the organization	on have an intere	est in o	r a signature	or ot	her author	ity Yes	No
	over a	financial account	(bank, securiti	es, or other) in a foreig	gn country? If "Ye	es," th	e organization	ma	y have to f	ile	
	FINCEN	Form 114, Rep	ort of Foreign B	ank and Financial Acc	counts. If "Yes," e	enter th	ne name of th	e for	eign count	ry	
	here >										/
57	During t	he tax year, did the	e organization red	ceive a distribution from,	or was it the grant	or of, o	r transferor to, a	a fore	ign trust?		/
	If "Yes,	" see instruction	s for other form	s the organization may	have to file.						
58	Enter th	ne amount of tax	-exempt interes	t received or accrued	during the tax ye	ar 🕨	\$				
201	Under	penalties of perjury, I	declare that I have ex	amined this return, including a r (other than taxpayer) is based	ccompanying schedule	es and st	atements, and to the	ne bes	t of my knowl	edge and be	lief, it is
Sign	1	orrect, and complete. L	eciaration of prepare	(officer triain taxpayer) is based				suge.	May the IRS		
Here		Day on	want	11/15/2	ASSOCIATE	VP OF	FINANCE		with the prep (see instruction		
	Signatu	ure of officer		Date /	Title				- 10.0M-U		- V
Paid		Print/Type preparer	s name	Preparer's signature	Distret		Date 7/12/2020		eck 🗌 if	PTIN	
Prepa	rer	Dori Eggett			* "O Sto		7/13/2020	self	-employed		
Use (		Firm's name ▶	Plante Moran			- 20-			n's EIN ▶		0.1
030	- iny	Firm's address	8181 E Tufte	Ave., Suite 600, D	enver, CO 802	237		Pho	ne no. 303	.224.46	21

Page	3

0	20 (40.0)											
Sche	dule A-Cost of Goods Sol	d. Ente	er method of in	vento	ry va	luation 🕨						
1	Inventory at beginning of year	1			6	Inventory a		fyear	6			
2	Purchases	2	6,753		7			sold. Subtract				
3	Cost of labor	3				line 6 from	line 5.	Enter here and				
4a	Additional section 263A cos	ts							7		6,753	
	(attach schedule)	48	1		8			section 263A (wit			Yes	No
b	Other costs (attach schedule)	4k	)			property pr	oduce	d or acquired for	resale)	apply		500000 5000000
5	Total Add lines 1 through 4b	5	6,753			to the orga	nizatior	1?				✓
Sche	dule C-Rent Income (Fror	n Real	Property and	Pers	onal	Property L	.easec	d With Real Pro	perty	)		
	instructions)											
1. Desc	ription of property											
(1)												
(2)												
(3)		****										
(4)												
	<b>2.</b> Ren	t received	or accrued									
(a) Fro	om personal property (if the percentage of personal property is more than 10% but more than 50%)	of rent not	(b) From real an percentage of rent to 50% or if the rent	for perso	onal pro	perty exceeds	3	(a) Deductions directly in columns 2(a) and	connect d 2(b) (at	ted with th tach sched	e incom dule)	е
(1)												
(2)												
(3)												
(4)		<u> </u>										
Total			Total					Fotal deductions.				
(c) Tot	tal income. Add totals of columns and on page 1, Part I, line 6, column	(A)	▶				Ente	er here and on page 1, line 6, column (B)				
Sche	dule E-Unrelated Debt-Fi	nance	d Income (see	instru	ctions	5)						
	1. Description of debt-finance			2. G	ross ind	come from or debt-financed		Deductions directly con debt-finan	ced prop			
					pro	perty		aight line depreciation attach schedule)		(attach sc		
(1)									-			
(2)				ļ								
(3)									1			
(4)			-11							y		
	acquisition debt on or	of or a debt-finar	adjusted basis liocable to nced property schedule)		4 di	olumn vided Ilumn 5		ss income reportable umn 2 × column 6)		Allocable on 6 × tota 3(a) and	al of colu	
(1)						%			<u> </u>			
(2)						%				,		
(3)						%						
(4)						%			<u> </u>			
						_	Enter h Part I,	nere and on page 1, line 7, column (A).		here and I, line 7,		
Totals							<u> </u>	>				
rotal	dividends-received deductions in	dea ir	i column 8		•					Earm (	990-T	12010
										I Of III 4	J J J J I	12010

Schedule F-Interest, Ani	nuities, Royalties	s, and Rer Exempt	Controlled	Controlled Org I Organizations	anizations (se	e instruc	uons)	
1. Name of controlled organization	2. Employer identification numbe		elated income instructions)	4. Total of specified payments made	5. Part of column included in the organization's gro	ontrolling	conn	eductions directly ected with income in column 5
(1)								
(2)								
(3)							ļ	
(4)							<u> </u>	
Nonexempt Controlled Organ	izations		F		1		<del></del>	
7. Taxable Income	8. Net unrelated (loss) (see instr			otal of specified yments made	10. Part of colum included in the organization's gro	ontrolling	conne	eductions directly cted with income in column 10
(1)		***						
(2)								
(3)								
(4)								
					Add columns 5 Enter here and c Part I, line 8, co	n page 1,	Enter	columns 6 and 11. nere and on page 1, line 8, column (B).
Totals Schedule G-Investment	Incomo of a Co	otion 501	(0)(7) (0)	or (17) Organi		ructions	<u> </u>	
1. Description of income		t of income	3. dire	Deductions ctly connected tach schedule)	4. Set-aside (attach schedi	s	<b>5.</b> To and s	otal deductions et-asides (col. 3 plus col. 4)
/1)			, un	adir denodato;				<u></u>
(1) (2)								
(3)	***************************************				**************************************			
(4)								
Totals Schedule I—Exploited Ex	. •	), column (A)		Advertising In	coma (see inst	ructions	Part I, li	re and on page 1, ne 9, column (B).
1. Description of exploited act	2. Gro unrelat	ss 3. ed con icome pro	Expenses directly nected with oduction of unrelated ness income	4. 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	6. Exp attribut	penses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)	Enter here a page 1, P	artl, pa	r here and on ge 1, Part I, 10, col. (B).					Enter here and on page 1, Part II, line 26.
Totals	▶							
Schedule J-Advertising								
Part I Income From	Periodicals Rep	orted on a	a Consoli	T		T		<b></b>
1. Name of periodical	2. Gro advertis incom	ing adve	3. Direct ertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income		dership sts	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)								222.20.20.22.22
(2)								
(3)								
(4)								
Totals (carry to Part II, line (5))	▶							Form <b>990-T</b> (2018
								ror <b>m シンしー!</b> (2018)

2 through 7 on a line-b	2. Gross	3. Direct	4. Advertising gain or (loss) (col. 2 minus col. 3). If	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but
in tune of portection	income	advertising costs	a gain, compute cols. 5 through 7	arcome	COSIO	not more than column 4).
(1)						
(2)						
(3)						<u> </u>
(4)						
Totals from Part I ▶						
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)						
Schedule K-Compensation of	Officers, Direc	tors, and Tru	<b>stees</b> (see instru	ctions)		
1. Name		2	2. Title	3. Percent of time devoted to business		tion attributable to ed business
(1)				%	5	
(2)				9/		
(3)				9/	5	
(4)				%	5	
Total Enter here and on page 1 Part II lis	no 1/l	1		)	•	

Form **990-T** (2018)

Form 990-T Tax Year 2018, Fiscal Year 2019 Central Michigan University EIN #: 38-6004447

#### **ELECTION STATEMENT**

STATEMENT 1

Section 1.263(a)-1(f) De Minimis Safe Harbor Election

Central Michigan University 304 Warriner Mt. Pleasant, MI 48859

Employer Identification Number: 38-6004447 For the Year Ending June 30, 2019

Central Michigan University is making the de minimis safe harbor election under Reg. Sec. 1.263(a)-1(f).

Form 990-T Tax Year 2018, Fiscal Year 2019 Central Michigan University EIN #: 38-6004447

#### NET OPERATING LOSS Carryover Schedule

STATEMENT 2

For NOL Arising in Tax Years Beginning Before January 1, 2018

				Charitable Contribution				Net Operating
	Tax		Loss	Deduction	Taxable	Modified	Loss	Loss
Fiscal Year Ending	<u>Year</u>	Fiscal Year	Sustained	Carryfwd	Income	Income	Utilized	Available
6/30/2007	TY06	FY07	351,026				309,855	41,171
6/30/2008	TY07	FY08	256,580					256,580
6/30/2009	TY08	FY09	50,318					50,318
6/30/2010	TY09	FY10	123,216					123,216
6/30/2011	TY10	FY11	29,733					29,733
6/30/2012	TY11	FY12	108,000					108,000
6/30/2013	TY12	FY13	99,731					99,731
6/30/2014	TY13	FY14	51,084					51,084
6/30/2015	TY14	FY15	103,831					103,831
6/30/2016	TY15	FY16			14,874	14,874		-
6/30/2017	TY16	FY17		44	120,024	119,980		-
6/30/2018	TY17	FY18	261,729					261,729
6/30/2019	TY18	FY19			175,001	175,001		-
	NOL A	vailable for TY	19/FY20				•	1,125,393

#### CHANGE IN NET OPERATING LOSS

STATEMENT 3

In fiscal year 06/30/18, the university reported an addition to its unrelated business income, pursuant to IRC SEC. 512 (A)(7), of \$45,473. On December 20, 2019, SEC. 512 (A)(7) was repealed retroactively to its original effective date. As a result, the \$45,473 addition is now incorrect.

Additionally, during 2019 the university amended the fiscal year 06/30/17 return. The amendment changed income from \$65,532 to \$120,024, and an additional \$44 in charitable contribution deduction also carried forward.

These two changes had an overall effect on the Net Operating Loss Carry Forward changing it from \$1,309,369 to \$1,300,394.

See the Net Operating Loss Carryover Schedule for more detail.

Central Michigan University EIN #: 38-6004447

Unrelated Trade or Business: 44/45XXXX - BOOKSTORE

Supporting Schedules

Schedu	ile A - Cost of Goods Sold			STATEMENT 4
1	Inventory - beginning of year		Inventory - end of year	
2	Purchases	6,753	Cost of goods sold	6,753
3	Cost of labor		Do the rules of Section	No
4a	Additional Section 263A costs		263A apply?	
4b	Other costs			
5	Total	6,753		

Other Deductions - Line 28		STATEMENT 5
Supplies & Equipment	1,247	
Total Other Deductions	1,247	

## Form 4562

Department of the Treasury

#### **Depreciation and Amortization**

(Including Information on Listed Property)

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172 2018

Attachment Sequence No. 179

Internal Revenue Service (99) Identifying number Business or activity to which this form relates Name(s) shown on return 38-6004447 44/45XXXX - BOOKSTORE CENTRAL MICHIGAN UNIVERSITY **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1.000,000 1 2 2 Total cost of section 179 property placed in service (see instructions) . . . Threshold cost of section 179 property before reduction in limitation (see instructions) . . . 3 2.500,000 0 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . . . . . . . Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing (c) Elected cost (b) Cost (business use only) (a) Description of property 6 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 10 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 . . . . . . . 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions . 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11. 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 15 15 Property subject to section 168(f)(1) election . . . . . . . . . . . . . . . . 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Don't include listed property. See instructions.) Section A 17 70 17 MACRS deductions for assets placed in service in tax years beginning before 2018 . . . . . . . . 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 (c) Basis for depreciation (b) Month and year (d) Recovery (a) Depreciation deduction (f) Method (e) Convention (a) Classification of property placed in service (business/investment use period only-see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property 25 yrs. S/L g 25-year property SIL 27.5 yrs. ММ h Residential rental 27.5 yrs. S/L ММ property 39 vrs. ММ S/L i Nonresidential real ММ S/L property Section C-Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System S/L 20a Class life S/L 12 yrs. b 12-year ММ S/L 30 yrs. c 30-year S/L ММ 40 yrs. d 40-vear Part IV Summary (See instructions.) 21 21 Listed property. Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (q), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 70 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . . . . . . . . . 23

	4562 (2018)					.,								Page 2
Pai	t V Listed Property (In entertainment, recreat	nolude auto			rtain o	other	vehicle	s, cer	taın a	urcraft,	, and	prope	rty use	ea tor
	Note: For any vehicle for 24b, columns (a) through	r which you	are usii	ng the						lease (	expense	e, comp	olete <b>o</b> n	i <b>ly</b> 24a,
	Section A—Depreciation a	nd Other Inf	ormati	on (Ca	ution: §	See the	instruc	tions fo	r limits	for pas	senger	autom	obiles.)	
24a	Do you have evidence to support th	e business/inve	stment u	use clain		Yes	No	24b lf	"Yes," i	s the evi	idence w	ritten?	☐ Yes	☐ No
	(a) (b) Busine of property (list ehicles first) in service percent	atuse Cost or o	i) ther basis		(e) for depre less/inves use only)	stment	(f) Recovery period	/ Me	(g) thod/ vention		(h) preciation eduction	Ele	(i) ected sect cost	
25	Special depreciation allowand the tax year and used more the	ce for qualified than 50% in a	d listed	d prope	erty pla ness us	ced in e. See	service instructi	during	25					
26	Property used more than 50%													
		%												
		%						-						
-07	Property used 50% or less in a	%	cinace	TICO.						.l				
_27_	Property used 30% or less in a	%	3111033	136.				S/L -		T				
		%	wi					S/L -			"			
		%						S/L -						
28	Add amounts in column (h), lin								28					
29	Add amounts in column (i), line	e 2 <b>6</b> . Enter he	ere and	on line	7, pag	<u>e1 .</u>	e of Vel			• • •	,	29		
Com	plete this section for vehicles use								er." or i	relate <b>d</b> t	oerson. I	f vou p	rovided ·	vehicles
to vo	ur employees, first answer the qu	estions in Sec	tion C t	o see if	you me	et an e	xception	to com	pleting	this sec	tion for	those ve	ehicles.	
				a)	Y	b)		c)		 (d)	1	e)	(	f)
30	Total business/investment miles of the year (don't include commutin	-	Vehi	cle 1	Vehi	icle 2	Vehi	cle 3	Veh	icle 4	Vehi	icle 5	Vehi	cle 6
	Total commuting miles driven dur													
32	Total other personal (none miles driven	commuting)												
33	Total miles driven during the lines 30 through 32													
34	Was the vehicle available for p		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
0.5	use during off-duty hours? . Was the vehicle used primarily						***					<u> </u>		
33	than 5% owner or related pers	•												
36	Is another vehicle available for pe						· <del> </del>							
	Section C-Q	uestions for	Emplo	yers W	ho Pro	vide V	ehicles	for Us	e by Th	neir Em	ployee	s		
Ansv	ver these questions to determin	ne if you mee	t an exc	ception	to com	npleting	g Section	n B for	vehicle	s used	by emp	loyees	who ar	en't
	e than 5% owners or related pe												Ves	No.
	Do you maintain a written polyour employees?												Yes	No
38	Do you maintain a written polemployees? See the instruction	licy statemen ons for vehicl	it that p es usec	orohibit d bv co	s perso rporate	onal us officer	e ot ver s, direc	iicles, e tors, or	except 1% or	more o	iting, b) wners	your .		
39	Do you treat all use of vehicles			-										
40	Do you provide more than fivuse of the vehicles, and retain	the informati	ion rece	eived?			,							
41	Do you meet the requirements	concerning	qualifie	d autor	nobile (	demon	stration	use? S	ee insti	ructions	3			CSANACAGNANCISINA
	Note: If your answer to 37, 38	3, 39, 40, or 4	1 is "Y	es," do	n't com	iplete S	Section I	3 for th	e cove	red veh	icles.			
Pa	rt VI Amortization	T	—	······						(e)	I			
	(a) Description of costs	(b) Date amortiza begins	ation	Amor	(c) rtizable aı	mount	С	(d) ode secti	on	Amortiz perioc percen	ation or	Amortiza	<b>(f)</b> ation for th	nis year
42	Amortization of costs that beg	ins during yo	ur 2018	3 tax ye	ar (see	instruc	ctions):							
		<u> </u>	0010								43			
	Amortization of costs that beg Total. Add amounts in colum										44		tt-t-t	
44	TOTAL MOD AFFICURES IN CORUM	n (r). Oce ine	mouuc	uona it	ANTIGIE	. 101GF		<del></del>					Form <b>45</b> 6	6 <b>2</b> (2018)

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

OMB No. 1545-0687

2018

Department of the Treasury Internal Revenue Service
Name of the organization

For calendar year 2018 or other tax year beginning \_\_JULY 1\_\_, 2018, and ending \_\_JUNE 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

Employer identification number

CENT	RAL MICHIGAN UNIVERSITY				<u> 38-60</u>	J444 /
Ur	related business activity code (see instructions) > 51XXXX	(				
De	scribe the unrelated trade or business 🕨 PUBLIC BROADCAST	ING				<u> </u>
Part	Unrelated Trade or Business Income		(A) Income	(B) Expense:	s	(C) Net
	Gross receipts or sales					
b	Less returns and allowances c Balance ▶	1c				
2	Cost of goods sold (Schedule A, line 7)	2			1000000	
3	Gross profit. Subtract line 2 from line 1c	3				
4a	Capital gain net income (attach Schedule D)	4a			1000000	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			A0000.000	
c	Capital loss deduction for trusts	4c			200	****
5	Income (loss) from a partnership or an S corporation (attach					
_	statement)	5				
6	Rent income (Schedule C)	6	127,741	77,574		50,167
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled					
•	organization (Schedule F)	8				No.
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)	12	11,864			11,864
13	Total. Combine lines 3 through 12	13	139,605	77,574		62,031
	deductions must be directly connected with the unrelate				14	
14	Compensation of officers, directors, and trustees (Schedule K)				15	
15	Salaries and wages				16	
16	Repairs and maintenance				17	
17	Bad debts				18	
18	Interest (attach schedule) (see instructions)				19	
19	Taxes and licenses				20	
20	Charitable contributions (See instructions for limitation rules) .			. , , ,	20	
21	Depreciation (attach Form 4562)				22b	
22	•			I	23	
23 24	Depletion				24	
2 <del>4</del> 25	Employee benefit programs				25	
	Excess exempt expenses (Schedule I)				26	
26 27	Excess readership costs (Schedule J)				27	
28	Other deductions (attach schedule)				28	4,904
29	Total deductions. Add lines 14 through 28				29	4,904
30	Unrelated business taxable income before net operating loss of				30	57,127
31	Deduction for net operating loss arising in tax years beginn					
01	instructions)				31	
32	Unrelated business taxable income. Subtract line 31 from line				32	57,127

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

OMB No. 1545-0687

2018

Department of the Treasury Internal Revenue Service For calendar year 2018 or other tax year beginning \_\_JULY 1\_, 2018, and ending \_\_JUNE 30\_, 20\_\_19\_

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| Employer identification number

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

Name of	the organization			Employer identi	ication n	umber
	AL MICHIGAN UNIVERSITY				38-6004	447
	related business activity code (see instructions) > 52XXX	<u> </u>				
Des	scribe the unrelated trade or business FINVESTMENTS					
Part	Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net
1a	Gross receipts or sales					
	Less returns and allowances c Balance ▶	1c		5. (A. (1975) (1		
2	Cost of goods sold (Schedule A, line 7)	2				
	Gross profit. Subtract line 2 from line 1c	3				
4a	Capital gain net income (attach Schedule D)	4a	126,488			126,488
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			2.54.00.0000 2.54.00000000000000000000000000000000000	
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach	1 1				1
	statement)	5	-426,055		20000000000000000000000000000000000000	-426,055
6	Rent income (Schedule C)	6				
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled		ł			
	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)	12				
13	Total. Combine lines 3 through 12	13	-299,567			-299,567
14	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule K				14	
15	Salaries and wages				15	
16	Repairs and maintenance				16	
17	Bad debts				17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses				19	
20	Charitable contributions (See instructions for limitation rules)				20	
21	Depreciation (attach Form 4562)					
22	Less depreciation claimed on Schedule A and elsewhere on re				22b	
23	Depletion				23	
24	Contributions to deferred compensation plans				24	
25	Employee benefit programs				25	
26	Excess exempt expenses (Schedule I)				26	
27	Excess readership costs (Schedule J)				27	
28	Other deductions (attach schedule)				28	
29	Total deductions. Add lines 14 through 28				29	
30	Unrelated business taxable income before net operating loss of	 deductio	n. Subtract line	29 from line 13	30	-299,567
	Deduction for net operating loss arising in tax years begin					
31	instructions)				31	
20	Unrelated husiness tayable income. Subtract line 31 from line				32	-299,567

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

OMB No. 1545-0687

2018

Department of the Treasury Internal Revenue Service Name of the organization For calendar year 2018 or other tax year beginning \_\_JULY 1\_\_, 2018, and ending \_\_JUNE 30\_, 20\_\_19\_\_

► 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

Employer identification number

CENTRAL MICHIGAN UNIVERSITY						8-6004447	
	nrelated business activity code (see instructions) > 53XXXX	<b>(</b>					
De	escribe the unrelated trade or business > ATHLETIC & UNIVERS	SITY EVE	NT RENTALS				
Part	Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net	
1a	Gross receipts or sales						
b	Less returns and allowances c Balance ▶	1c					
2	Cost of goods sold (Schedule A, line 7)	2					
3	Gross profit. Subtract line 2 from line 1c	3					
4a	Capital gain net income (attach Schedule D)	4a					
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b					
С	Capital loss deduction for trusts	4c					
5	Income (loss) from a partnership or an S corporation (attach statement)	5					
6	Rent income (Schedule C)	6	16,717			16,717	
7	Unrelated debt-financed income (Schedule E)	7					
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8					
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9					
10	Exploited exempt activity income (Schedule I)	10					
11	Advertising income (Schedule J)	11					
12	Other income (See instructions; attach schedule)	12	75,238		444.55	75,238	
13	Total. Combine lines 3 through 12	13	91,955			91,955	
Part	Deductions Not Taken Elsewhere (See instructions for deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule K)	ed busi	ness income.)		14		
15	Salaries and wages				15	49,411	
16	Repairs and maintenance				16	30,111	
17	Bad debts				17		
18	Interest (attach schedule) (see instructions)				18		
19	Taxes and licenses				19		
20	Charitable contributions (See instructions for limitation rules)				20		
21	Depreciation (attach Form 4562)						
22	Less depreciation claimed on Schedule A and elsewhere on re				22b		
23	Depletion				23		
24	Contributions to deferred compensation plans				24		
25	Employee benefit programs				25		
26	Excess exempt expenses (Schedule I)				26		
27	Excess readership costs (Schedule J)				27		
28	Other deductions (attach schedule)				28	38,401	
29	Total deductions. Add lines 14 through 28				29	87,812	
30	Unrelated business taxable income before net operating loss of				30	4,143	
31	Deduction for net operating loss arising in tax years beginn						
	instructions)				31		
32	Unrelated business taxable income. Subtract line 31 from line	30			32	4,143	

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

OMB No. 1545-0687

2018

Department of the Treasury Internal Revenue Service For calendar year 2018 or other tax year beginning \_\_JULY 1\_ , 2018, and ending \_\_JUNE 30\_ , 20\_\_19\_

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

		Employer Identi	38-6004447				
	RAL MICHIGAN UNIVERSITY  Prelated business activity code (see instructions) > 71XXXX	′			30-00	04447	·····
	escribe the unrelated trade or business > UNIVERSITY RECREA						
Pari			(A) Income	(B) Expense	es	(C) Net	
				200200000000000000000000000000000000000	Tomas and		
1a	Gross receipts or sales						
b	Less returns and allowances c Balance ▶	1c					
2	Cost of goods sold (Schedule A, line 7)	2			(Since 1)		
3	Gross profit. Subtract line 2 from line 1c	3					<u> </u>
4a	Capital gain net income (attach Schedule D)	4a			50655000 00555000 00555000		ļ
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b					ļ
C	Capital loss deduction for trusts	4c					<b></b>
5	Income (loss) from a partnership or an S corporation (attach						
	statement)	5					
6	Rent income (Schedule C)	6			<u> </u>		<u> </u>
7	Unrelated debt-financed income (Schedule E)	7					<u> </u>
8	Interest, annuities, royalties, and rents from a controlled						
	organization (Schedule F)	8			<u> </u>		—
9	Investment income of a section 501(c)(7), (9), or (17)						
	organization (Schedule G)	9			<u> </u>		<u> </u>
10	Exploited exempt activity income (Schedule I)	10					<u> </u>
11	Advertising income (Schedule J)	11	44,549	3,772		40,777	
12	Other income (See instructions; attach schedule)	12	212,258			212,258	
13	Total. Combine lines 3 through 12	13	256,807	3,772		253,035	<u> </u>
Part	II Deductions Not Taken Elsewhere (See instructions fo	r limita	ations on deduct	ions.) (Except fe	or coi	ntributions,	
	deductions must be directly connected with the unrelate						
-14	Compensation of officers, directors, and trustees (Schedule K)				14		ĭ
14					15	222,563	,
15 16	Salaries and wages				16	222,303	<b></b>
17	•				17		
18	Bad debts				18		
					19		
19	Taxes and licenses				20		<del>                                     </del>
20	Depreciation (attach Form 4562)				20		
21	, ,		~~~~		22b		
22	Less depreciation claimed on Schedule A and elsewhere on re		I I I I I I I I I I I I I I I I I I I		23		-
23	Depletion				24		
24	Contributions to deferred compensation plans				25		
25	Employee benefit programs						<del> </del>
26	Excess exempt expenses (Schedule I)				26		<del> </del>
27	Excess readership costs (Schedule J)				27		ļ
28	Other deductions (attach schedule)				28	9,963	
29	Total deductions. Add lines 14 through 28				29	232,526	
30	Unrelated business taxable income before net operating loss of				30	20,509	1
31	Deduction for net operating loss arising in tax years beginn						
	instructions)				31		
32	Unrelated business taxable income. Subtract line 31 from line	პს .		· · · · ·	32	20,509	4

#### **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 \_\_JULY 1\_, 2018, and ending \_\_JUNE 30\_, 20\_\_19\_.

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

Employer identification number

38-6004447

CENTE	AL MICHIGAN UNIVERSITY				38-600	4447
	related business activity code (see instructions) ►	K				
	scribe the unrelated trade or business > CATERING, BEVERAC	SE SRVO	S,CONCESSIONS	S,ACCOMMODATI	ONS A	T BEAVER ISLAND
Part			(A) Income	(B) Expenses		(C) Net
1a	Gross receipts or sales 571,288	T			1000 1000 1000 1000 1000 1000 1000 100	
b	Less returns and allowances	1c	571,288			
2	Cost of goods sold (Schedule A, line 7)	2	201,558			
3	Gross profit. Subtract line 2 from line 1c	3	369,730			369,730
4a	Capital gain net income (attach Schedule D)	4a				
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
c	Capital loss deduction for trusts	4c		.53 53 .53 .53 .53	10000000000000000000000000000000000000	
5	Income (loss) from a partnership or an S corporation (attach					
J	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	<del>                                     </del>				
o	organization (Schedule F)	8				
•	Investment income of a section 501(c)(7), (9), or (17)					
9	organization (Schedule G)	9				
40	Exploited exempt activity income (Schedule I)	10				
10	Advertising income (Schedule J)	11				
11	Other income (See instructions; attach schedule)	12	2,219		-55-45	2,219
12	Total. Combine lines 3 through 12	13	371,949	-0.00000000000000000000000000000000000	A400000000	371,949
_13	Deductions Not Taken Elsewhere (See instructions for					
14 15	deductions must be directly connected with the unrelated Compensation of officers, directors, and trustees (Schedule K Salaries and wages				14 15	64,052
	Repairs and maintenance				16	
16	Bad debts				17	
17	Interest (attach schedule) (see instructions)				18	
18	Taxes and licenses				19	
19	Charitable contributions (See instructions for limitation rules)				20	***************************************
20	Depreciation (attach Form 4562)				A44 534	
21	Less depreciation claimed on Schedule A and elsewhere on re	oturn	22a		22b	
22					23	
23	Depletion				24	
24					25	
25	Employee benefit programs		,		26	
26	Excess exempt expenses (Schedule I)				27	
27	Excess readership costs (Schedule J)				28	218,793
28	Other deductions (attach schedule)				29	282,845
29	Total deductions. Add lines 14 through 28	dodus <del>t</del> i	on Cubtract line		30	89,104
30	Unrelated business taxable income before net operating loss	aeauctio	on, Subtract line	23 HOLLING 13	30	09,104
31	Deduction for net operating loss arising in tax years begin				31	
	instructions)				32	89.104
20	Three lated business tayahla meema. Subtract line 3.1 from line				1 02 1	05.1041

Form 990-T
Tax Year 2018, Fiscal Year 2019
Central Michigan University
EIN #: 38-6004447
Unrelated Trade or Business: 51XXXX - PUBLIC BROADCASTING
Supporting Schedules

Schedule C - Rent Income (From Real Property and Personal	Property Leased With Real Property)	STATEMENT 6
1. Description of property		
(1) PUBLIC BROADCASTING - TOWER & ANTENNA RENTA	ALS	
(2)		
(3)		
(4)		
2. Rent received	I or accrued	
(a) From personal property (if the percentage of	(b) From real and personal property (if the	3 (a) Deductions directly connceted
rent for personal property is more than 10% but	percentage of rent for personal property	with the income in columns 2(a) and
not more than 50%)	exceeds 50% or if the rent is based on profit	2(b)
not man down,	or income)	
(1)	(1) 127,741	(1)77,574_
(2)	(2)	(2)
(3)	(3)	(3)
(4)	(4)	(4)
Total -	Total 127,741	Total deductions 77,574
		(Part I, line 6, column (B))
(C) Total Income. Add total of columns 2(a) and 2(b).	127,741	•
(Enter on Part I, line 6, column (A))		
(Enter on Part I, line 6, column (A))		
Deductions Connected With Rental Income		STATEMENT 7
Description	Amount	
PB Tower Expenditures	58,806	
PB Non-Tower Rental Expenditures	18,768	
	77,574	
Other Income - Line 12		STATEMENT 8
Uplink Services 3,000		
Studio Rental & Production 600		
Closed Captioning Services 3,676		
DVD Sales 102		
Underwriting Buys - Agency Fees 4,486		
Total Other Income		
		STATEMENT 9
Other Deductions - Line 28		21 A LEINIEM 1 A
Supplies & Equipment 4,904		
Total Other Deductions 4,904		

Form 990-T
Tax Year 2018, Fiscal Year 2019
Central Michigan University
EIN #: 38-6004447
Unrelated Trade or Business: 52XXXX - INVESTMENTS
Supporting Schedules

come (Loss) from a Partnership or a	an S corporation - Line 5	STATEMENT 10
03-0573898	ALLIANCE HOLDINGS GP LP	(75.00)
73-1564280	ALLIANCE RESOURCE PARNTERS LP	(322.00)
23-278791B	AMERIGAS PARTNERS LP	(3,224.00)
61-1736207	ARCLIGHT ENERGY PARTNERS FUND VI LP (Partner #142)	(22,177.00)
47-3202786	BROOKFIELD STRATEGIC REAL ESTATE PARNTERS II BRAZIL AIV LLC (Partner #20)	(2,063.00)
47-2984701	BROOKFIELD STRATEGIC REAL ESTATE PARTNERS II-A LP (Partner #20)	(13,662,00)
35-2605158	BROOKFIELD STRATEGIC REAL ESTATE PARTNERS III-A LP (Partner #16)	(19,234.00)
23-2432497	BUCKEYE PARTNERS LP	(351.00)
13-3597020	DAVIDSON KEMPNER INSTITUTIONAL PARTNERS LP (Endowment)	(291.00)
13-3597020	DAVIDSON KEMPNER INSTITUTIONAL PARTNERS LP (Operating)	(168.00)
46-4097730	ENVIVA PARTNERS LP	(170.00)
47-1934417	GLOUSTON PRIVATE EQUITY OPPORTUNITIES V LP (Endowment)	(5,271.00)
61-1590801	HPS LLC (Partner #1728)	81.00
61-1756259	KAYNE ANDERSON ENERGY FUND VII LP	(354,164.00)
45-1153167	LANDMARK EQUITY PARTNERS XV LP	29,554.00
73-1599053	MAGELLAN MIDSTREAM PARTNERS LP	(353.00)
	MONROE CAPITAL PRIVATE CREDIT FUND II (UNLEVERAGED) LP (Endowment)	(35.00)
47-2421840 76-0582150	PLAINS ALL AMERICAN PIPELINE LP	(462.00)
	TERRA NITROGEN COMPANY LP	(119.00)
73-1389684	THOMA BRAVO DISCOVER FUND II LP (Partner #40)	• •
82-3365637	WARBURG PINCUS (GANYMEDE) PRIVATE EQUITY XII (CAYMAN) LP (Partner #17)	7,802.00
98-1281795	WARBURG PINCUS PRIVATE EQUITY (E&P) XII (A) EP (Partner #19)	(36,190.00)
81-2647420	WARBURG PINCUS PRIVATE EQUITY (E&P) XII MAIN-1 LP (Partner #19)	(954.00)
81-1442688		(4,207.00)
81-319526B	WARBURG PINCUS PRIVATE EQUITY XII (FT-1) LP (Partner #19)	(426,055.00)
Contributions		STATEMENT 1
Description/Kind of Property	Method Used To Determine FMV	Amount
ash Only	N/A	228
Total Contributions		228
Contributions Summary		STATEMENT 1
Qualified Contributions Subject to 10	00% Limit	
Carryover of Prior Years Unused Cont	tributions	
For Tax Year 2013	0	
For Tax Year 2014	0	
For Tax Year 2015	0	
For Tax Year 2016	44	
For Tax Year 2017	0	
Total Carryover	44	
Total Current Year 10% Cont	tributions 228	
Total Contributions Available Taxable Income Limitation as		
Topicalo medita sumation a	·	
	272	
Excess 10% Contributions	272	
Excess 100% Contributions	0	
Excess 100% Contributions Total Excess Contributions	0	
Excess 100% Contributions	0 272 duction0	

Form 990-T
Tax Year 2018, Fiscal Year 2019
Central Michigan University
EIN #: 38-6004447
Unrelated Trade or Business: 52XXXX - INVESTMENTS

6/30/2019

TY18

FY19

NOI. Available for TY19/FY20

<b>NET OPERATING LOSS Carryover Schedule</b>	3							STATEMENT
For NOL Arising in Tax Years Beginning On or Afte	r January 1, 2	018						
				Charitable				Net
				Contribution				Operating
	Tax		Loss	Deduction	Taxable	Modified	Loss	Loss
Fiscal Year Ending	<u>Year</u>	Fiscal Year	Sustained	Carryfwd	Income	Income	Utilized	Available

228

299,567

299,**7**95

299,795

#### SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

### **Capital Gains and Losses**

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

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

OMB No. 1545-0123

2018

Name					Employ	er ider	ntification number
CENT		TIVITY: 52XXXX - IN				3	38-6004447
Pa	Short-Term Capital Gains and Losses (	(See instructions.	)				<b>*******</b>
	See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjust	m Form	(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine
	This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	8949, Par column (g		• Nasalasaka	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						
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked						
2	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked						
3	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked	410					410
4	Short-term capital gain from installment sales from For	rm 6252, line 26 or 3	37			4	
5	Short-term capital gain or (loss) from like-kind exchang	ges from Form 8824				5	
6	Unused capital loss carryover (attach computation)					6	(
7 Par	Net short-term capital gain or (loss). Combine lines 1a					7	410
. 4	See instructions for how to figure the amounts to enter on	(d)	(e)	(g) Adjust	ments to	gain	(h) Gain or (loss)
	the lines below.  This form may be easier to complete if you round off cents to whole dollars.	Proceeds (sales price)	Gost (or other basis)	or loss fro 8949, Par column (o	t II, line :		Subtract column (e) from column (d) and combine 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						
8b	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked						
9	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked		v ventróde filosofie				
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked	122,815					122,815
11	Enter gain from Form 4797, line 7 or 9					11	3,263
12	Long-term capital gain from installment sales from For	m 6252, line 26 or 3	7			12	
13	Long-term capital gain or (loss) from like-kind exchang	es from Form 8824				13	
14	Capital gain distributions (see instructions)					14	
15 Par	Net long-term capital gain or (loss). Combine lines 8a t	hrough 14 in colum	<u>nh</u>			15	126,078
16	Enter excess of net short-term capital gain (line 7) over	r net l <b>o</b> ng-term capit	tal loss (line 15)			16	410
17	Net capital gain. Enter excess of net long-term capital					17	126,078
18	Add lines 16 and 17. Enter here and on Form 1120, pa Note: If losses exceed gains, see Capital losses in		roper line on othe	er returns		18	126,488

## Form **8949**

### Sales and Other Dispositions of Capital Assets

2018

Attachment

OMB No. 1545-0074

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

Department of the Treasury ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Sequence No. 12A Internal Revenue Service Social security number or taxpayer identification number Name(s) shown on return CENTRAL MICHIGAN UNIVERSITY BUSINESS ACTIVITY: 52XXXX - INVESTMENTS 38-6004447 Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check. Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see Part I instructions). For long-term transactions, see page 2. Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (B) Short-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss. If you enter an amount in column (g), 1 (h) (e)
Cost or other basis enter a code in column (B. Gain or (loss). See the separate instructions. (b) (a) See the Note below Subtract column (e) Date sold or Proceeds Description of property Date acquired from column (d) and and see Column (e) disposed of (sales price) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) combine the result (see instructions) in the separate (Mo., day, yr.) Code(s) from Amount of with column (g) instructions instructions adjustment VARIOUS **VARIOUS** 410 410

FLOW THROUGH FROM PARTNERSHIPS (K-1s -FORM 1065) 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B 410

above is checked), or line 3 (if Box C above is checked) ▶

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

Social security number or taxpayer identification number

CENTRAL MICHIGAN UNIVERSITY

38-6004447

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.

(a)	(b) Date acquired	(c) Date sold or	(d) Proceeds	<b>(e)</b> Cost or other basis. See the <b>Not</b> e below	If you enter an a enter a co	any, to gain or loss. amount in column (g), ode in column (ſ). arate instructions.	(h) Gain or (loss), Subtract column (e)
Description of property (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	<b>(g)</b> Amount of adjustment	from column (d) and combine the result with column (g)
FLOW THROUGH FROM PARTNERSHIPS (K-1s -FORM 1065)	VARIOUS	VARIOUS	122,815				122,815
	· · · · · · · · · · · · · · · · · · ·						
Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (If Box D above).	I here and inc	lude on your					

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 **4797**

Department of the Treasury

Internal Revenua Service

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

► Attach to your tax return.

► Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

Attachment Sequence No. 27

Name	(s) shown on return					identilying i	umpei	
CENT	RAL MICHIGAN UNIVERSI	TY BUSINI	ESS ACTIVITY: 5	2XXXX - INVESTME	NTS		38-600	)4447
1	Enter the gross proceeds	from sales or excl	nanges reported	to you for 2018 on	Form(s) 1099-B or		١. ١	
	substitute statement) that	you are including	on line 2, 10, or	20. See instructions	· · · · · · · · · · · · · · · · · · ·		1 1	F 011
Par	Sales or Exchan Than Casualty o	ges of Propert	y Used in a T	rade or Busines	ss and involunta	ary Conver	sions	From Other
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or of basis, plu improvement expense of	ıs sand	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
F1 014	LTUDOUCU CDOM	VARIOUS	VARIOUS	3,263		·		3,263
	THROUGH FROM	VARIOUS	VARIOUS	3,200				
PARI	NERSHIPS (FORM 1065)							
3	Gain, if any, from Form 4684	4, line 39					3	
4	Section 1231 gain from insta	allment sales from I	Form 6252, line 2	6 or 37			4	
	Section 1231 gain or (loss) f						5	
	Gain, if any, from line 32, fro						6	
7	Combine lines 2 through 6.	Enter the gain or (Id	ss) here and on t	he appropriate line a	s follows		7	3,263
	Partnerships and S corpo line 10, or Form 1120S, Sch	rations. Report th	e gain or (loss) fo	ollowing the instructi	ons for Form 1065,	Schedule K,		
	Individuals, partners, S co line 7 on line 11 below and losses, or they were recap Schedule D filed with your r	d skip lines 8 and 9 stured in an earlier eturn and skip lines	9. If line 7 is a g year, enter the s 8 8, 9, 11, and 12	ain and you didn't h gain from line 7 as below.	ave any prior year :	Section 1231		
	Nonrecaptured net section					• • •	8	
9	Subtract line 8 from line 7. I	f zero or less, ente	0 If line 9 is ze	ero, enter the gain fro	om line 7 on line 12 l	below. If line		
	9 is more than zero, enter	the amount from li	ine 8 on line 12 l	below and enter the	gain from line 9 as	a long-term	9	2 262
	capital gain on the Schedule					· · · · · ·	9	3,263
10	Ordinary Gains of Ordinary gains and losses n	and Losses (St	s 11 through 16 (i	nclude property held	1 year or less):			
10	Ordinary gains and losses in	Tot included on line.	s 11 tillough 10 ti	Toldado proporty noid	1			
					<u> </u>			
11	Loss, if any, from line 7.				<u> </u>		11	( )
	Gain, if any, from line 7 or a						12	
							13	
	Net gain or (loss) from Form						14	
	Ordinary gain from installme						15	
16	Ordinary gain or (loss) from	like-kind exchange	s from Form 882	4			16	
	Combine lines 10 through 1						17	
18	For all except individual retained b below. For individual	urns, enter the amo			ne of your return an	d skip lines a		
_	If the loss on line 11 includes				art of the loss here.	Enter the loss		
а	from income-producing properployee.) Identify as from "	perty on Schedule A	\ (Form 1040), line	e 16. (Do not include	any loss on proper	ty used as an	18a	
h	Redetermine the gain or (loss)						18b	

Par	Gain From Disposition of Property Und (see instructions)	der Se	ctions 1245, 12	50, 1252, 1	254,	and 1255		
19	(a) Description of section 1245, 1250, 1252, 1254, or 125	55 prope	rty:			(b) Date acqu (mo., day, y		(c) Date sold (mo., day, yr.)
A	i and the state of							
<u>B</u>								
С								
D	j	———						
			Property A	Property	В	Property	С	Property D
	These columns relate to the properties on lines 19A through 19I	$\overline{}$						
20	Gross sales price (Note: See line 1 before completing.) .	20						~
21	Cost or other basis plus expense of sale	21						****
22	Depreciation (or depletion) allowed or allowable	22						
23	Adjusted basis, Subtract line 22 from line 21	23						
24	Total gain. Subtract line 23 from line 20	24						
25	If section 1245 property:							
а	Depreciation allowed or allowable from line 22	25a						
_ b	Enter the smaller of line 24 or 25a	25b						
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.  Additional depreciation after 1975. See instructions	1 1	<u></u> -					
	Applicable percentage multiplied by the smaller of line	——————————————————————————————————————						
	24 or line 26a. See instructions	26b						
C	Subtract line 26a from line 24. If residential rental property	1 1						
_	or line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
	Additional depreciation after 1969 and before 1976.	26d						
	Enter the smaller of line 26c or 26d	26e	***************************************					
	Section 291 amount (corporations only)	26f						
g	Add lines 26b, 26e, and 26f	26g						
27	If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.					1		
а	Soil, water, and land clearing expenses	27a						
b	Line 27a multiplied by applicable percentage. See instructions	27b						
С	Enter the smaller of line 24 or 27b	27c						
28	If section 1254 property:							
а	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
b	Enter the smaller of line 24 or 28a	28b						
29	If section 1255 property:							
а	Applicable percentage of payments excluded from							
	income under section 126. See instructions	29a						
b	Enter the smaller of line 24 or 29a. See instructions .	29b						
Sun	nmary of Part III Gains. Complete property colu	mns A	through D throug	gh line 29b b	efore	going to lin	<u>ie 30.</u>	
30	Total gains for all properties. Add property columns A thr Add property columns A through D, lines 25b, 26g, 27c, 2						30 31	A A A A A A A A A A A A A A A A A A A
31	Subtract line 31 from line 30. Enter the portion from case	ualty or	theft on Form 4684	L. line 33. Ente	r the	portion from		
32							32	
Par	t IV Recapture Amounts Under Sections 1						<u>.                                      </u>	or Less
	(see instructions)				****	(a) Section	on .	(b) Section 280F(b)(2)
						113		2001 (0)(2)
33	Section 179 expense deduction or depreciation allowable	e in prior	years		33			
34					34			
25	Pacapture amount, Subtract line 34 from line 33. See the	instruct	ions for where to re	norr	35	1		1

Form 990-T
Tax Year 2018, Fiscal Year 2019
Central Michigan University
EIN #: 38-6004447
Unrelated Trade or Business: 53XXXX - ATHLETIC & UNIVERSITY EVENT RENTALS
Supporting Schedules

Schedule C - Rent Income (From Real Property and Person	al Property Leased With Real Property)	STATEMENT 14
1. Description of property		
2. Rent received (a) From personal property (if the percentage	or accrued (b) From real and personal property (if the	3 (a) Deductions directly
of rent for personal property is more than 10% but not more than 50%)	percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	connceted with the income in columns 2(a) and 2(b)
(1) (2) (3) (4)	(1) 16,717 (2) (3) (4)	
Total	Total 16,717	Total deductions -
(C) Total Income. Add total of columns 2(a) and 2(b). (Enter on Part I, line 6, column (A))	16,717	(Part I, line 6, column (B))
Other Income - Line 12		STATEMENT 15
Event Rentals 75,238  Total Other Income 75,238		
Other Deductions - Line 28		STATEMENT 16
Supplies & Equipment 38,401  Total Other Deductions 38,401		

Form 990-T
Tax Year 2018, Fiscal Year 2019
Central Michigan University
EIN #: 38-6004447
Unrelated Trade or Business: 71XXXX - UNIVERSITY RECREATION
Supporting Schedules

edule J - Advertising Income PART I - Income From Periodicals Re	ported on a Consolidated Ba	sis	·····			STATEMENT 17
1. Name of Periodical	2. Gross Advertising Income	3. Direct Advertising Costs	4. Advertising gain or (loss). If a gain, compute cols. 5-7.	5. Circulation Income	6. Readership Costs	7. Excess readership costs (column 6 minu column 5, but not more than column 4.
(1) ADVERTISTING INCOME	44,549	3,772		-		
(2)						
(3)						
(4)						
Totals	44,549	3,772	40,777			
PART II - Income From Periodicals Re	ported on a Separate Basis					
1. Name of Periodical	2. Gross Advertising Income	3. Direct Advertising Costs	4. Advertising gain or (loss). If a gain, compute cols. 5-7.	5. Circulation Income	6. Readership Costs	7. Excess readership costs (column 6 minu column 5, but not more than column 4.
(1)				income -	o, neadership costs	more chan column 4.
(2)					***************************************	
(3)						
(4)						
Totals from Part I	44,549	3,772				<u> </u>
Totals	44,549	3,772	stantistic (section)			
er Income - Line 12				<u>,</u>		STATEMENT 18
SAC Memberships	79,418					
Facility Rentals	48,643					
Guest Passes	41,639					
Bowling	25,749					
Locker Rentals	1,235					
Personai Training	6,739					
Group Fitness	8,835					
Total Other Income	212,258					
er Deductions - Line 28						STATEMENT 19
Supplies & Equipment	9,963				** *	
Total Other Deductions	9,963					

Form 990-T Tax Year 2018, Fiscal Year 2019 Central Michigan University EIN #: 38-6004447

Unrelated Trade or Business: 72XXXX - CATERING, BEVERAGE SRVCS, CONCESSIONS & BEAVER ISLAND

**Supporting Schedules** 

Schedule A - Cost of Goods Sold				STATEMENT 20
1 Inventory - beginning of year		Inventory - end of year		
2 Purchases	201,558	Cost of goods sold	201,558	
3 Cost of labor		Do the rules of Section	No	
4a Additional Section 263A costs		263A apply?		
4b Other costs 5 Total	201,558			
Other because the 42				CTATERACKIT 34
Other Income - Line 12  Beaver Island Travel Accomodations Total Other Deductions	2,219 2,219			STATEMENT 21
Beaver Island Travel Accomodations Total Other Deductions				
Beaver Island Travel Accomodations Total Other Deductions Other Deductions - Line 28	2,219			STATEMENT 22
Beaver Island Travel Accomodations Total Other Deductions				