## Public Disclosure Copy



| Part I Total Unrelated Business Taxable Income |  |  |  |
| :---: | :---: | :---: | :---: |
|  | Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions). | 1 | 150,235. |
| 2 | Reserved | 2 |  |
| 3 | Add lines 1 and 2 | 3 | 150,235. |
| 4 | Charitable contributions (see instructions for limitation rules) | 4 |  |
| 5 | Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 | 5 | 150,235. |
| 6 | Deduction for net operating loss. See instructions. | 6 | 150,235. |
| 7 | Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 . | 7 |  |
| 8 | Specific deduction (generally \$1,000, but see instructions for exceptions) | 8 | NONE |
| 9 | Trusts. Section 199A deduction. See instructions. | 9 |  |
| 10 | Total deductions. Add lines 8 and 9 | 10 | NONE |
|  | Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7 , enter zero. | 11 | NONE |
| Part II Tax Computation |  |  |  |
| 1 | Organizations taxable as corporations. Multiply Part I, line 11 by $21 \%$ (0.21) . | 1 | NONE |
| 2 | Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: $\square$ Tax rate schedule or $\square$ Schedule D (Form 1041). . . . . . . . . . . . . . . | 2 |  |
| 3 | Proxy tax. See instructions | 3 |  |
| 4 | Other tax amounts. See instructions | 4 |  |
| 5 | Alternative minimum tax (trusts only). | 5 |  |
| 6 | Tax on noncompliant facility income. See instructions | 6 |  |
| 7 | Total. Add lines 3 through 6 to line 1 or 2, whichever applies . . . . . . . . . . . . . . . . . . . . . . . . . | 7 | NONE |

## Part III Tax and Payments



## Part IV Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2022 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here FRANCE, ITALY, SPAIN
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.
3 Enter the amount of tax-exempt interest received or accrued during the tax year
\$
4 Enter available pre-2018 NOL carryovers here \$ 23068980 . . Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.
5 Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.


## Part V Supplemental Information

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

| Sign <br> Here | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | JOHN D. BURKE | 04/08/2024 FINANCE VP/TREASURE |  | May the IRS discuss this return with the preparer shown below (see instructions)? $X$ Yes $\square$ No |  |  |
| Paid | Print/Type preparer's name | Preparer's signature | $\begin{aligned} & \hline \text { Date } \\ & 04 / 03 / 2024 \end{aligned}$ | Check $\square$ if self-employed | $\begin{aligned} & \text { PTIN } \\ & \text { P00977 } \end{aligned}$ |  |
| Preparer Use Only | Firm's name PWC US TAX LLP |  |  | Firm's EIN | 2-046058 |  |
|  | Firm's address 101 SEA | SUITE 500, BO | SSTON, MA 02210 | Phone no. 61 | -530-50 |  |
| $\underset{\text { 2SA }}{\text { JSA }}$ |  |  |  |  | Form 99 |  |

## Public Disclosure Copy

FORM 990T, PART I, LINE 6 DETAIL


## Public Disclosure Copy

SCHEDULE A Unrelated Business Taxable Income
From an Unrelated Trade or Business

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

B Employer identification number
TRUSTEES OF BOSTON COLLEGE
04-2103545

C Unrelated business activity code (see instructions) 540000
D Sequence: 1 of 3

E Describe the unrelated trade or business ADVERTISING

| Part I Unrelated Trade or Business Income |  |  | (A) Income | (B) Expenses | (C) Net |
| :---: | :---: | :---: | :---: | :---: | :---: |
| $\begin{array}{rl} 1 a & G \\ b & \end{array}$ | Gross receipts or sales $\qquad$ Less returns and allowances $\qquad$ c Balance | 1 c |  |  |  |
| 2 C | Cost of goods sold (Part III, line 8). | 2 |  |  |  |
| 3 G | Gross profit. Subtract line 2 from line 1c | 3 |  |  |  |
| $4 \mathbf{a}$ $\begin{aligned} & \mathrm{C} \\ & \mathrm{~F} \end{aligned}$ | Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions. | 4a |  |  |  |
| b N | Net gain (loss) (Form 4797) (attach Form 4797). See instructions | 4b |  |  |  |
| c C | Capital loss deduction for trusts . . . . . . . . . . . . . . . . . | 4c |  |  |  |
| $5$ | Income (loss) from a partnership or an S corporation (attach statement) . . . . . . . . . . . . . . . . . . . . . . . . . . . . | 5 |  |  |  |
| 6 R | Rent income (Part IV) . | 6 |  |  |  |
| 7 U | Unrelated debt-financed income (Part V) | 7 |  |  |  |
| $8$ | Interest, annuities, royalties, and rents from a controlled organization (Part VI). | 8 |  |  |  |
|  | Investment income of section 501(c)(7), (9), or (17) organizations (Part VII). | 9 |  |  |  |
| 10 E | Exploited exempt activity income (Part VIII). . . . . . . . . . . | 10 | 134,850. | 26,986. | 107,864. |
| 11 A | Advertising income (Part IX). | 11 |  |  |  |
| 12 O | Other income (see instructions; attach statement) | 12 |  |  |  |
| 13 T | Total. Combine lines 3 through $12 . . . . . . . . . . . . . . . . . . ~ . ~$ | 13 | 134,850. | 26,986. | 107,864. |

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

1 Compensation of officers, directors, and trustees (Part X)
2 Salaries and wages


18 Unrelated business taxable income. Subtract line 17 from line 16
Schedule A (Form 990-T) 2022

1 Inventory at beginning of year
2 Purchases
1

3 Cost of labor
2

4 Additional section 263A costs (attach statement)
5 Other costs (attach statement)
6 Total. Add lines 1 through 5
7 Inventory at end of year
8 Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2
9 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?
Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)
1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.


2 Rent received or accrued
a From personal property (if the percentage of rent for personal property is more than $10 \%$ but not more than 50\%)
b From real and personal property (if the percentage of rent for personal property exceeds $50 \%$ or if the rent is based on profit or income)
c Total rents received or accrued by property. Add lines $2 a$ and $2 b$, columns A through D . .

| A | B | C | D |  |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

3 Total rents received or accrued. Add line $2 c$ columns A through D. Enter here and on Part I, line 6, column (A)

4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement). $\square$
5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)

## Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.
A
B
C
D


2 Gross income from or allocable to debt-financed property
3 Deductions directly connected with or allocable to debt-financed property
a Straight line depreciation (attach statement).
b Other deductions (attach statement) . . . . .
c Total deductions (add lines $3 a$ and $3 b$, columns A through D)

4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)
5 Average adjusted basis of or allocable to debtfinanced property (attach statement)
6 Divide line 4 by line 5
7 Gross income reportable. Multiply line 2 by line 6

| A | B | C | D |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A).

9 Allocable deductions. Multiply line 3c by line 6 $\square$
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)
11 Total dividends - received deductions included in line 10

## JSA

| 1. Name of controlled organization | 2. Employer identification number | Exempt Controlled Organizations |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 3. Net unrelated income (loss) (see instructions) | 4. Total of specified payments made | 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 Organizations |  |  |  |  |  |
| 7. Taxable income |  | unrelated me (loss) structions) | 9. Total of specified payments made | 10. Part of column 9 that is included in the controlling organization's gross income | 11. Deductions directly connected with income in column 10 |
| (1) |  |  |  |  |  |
| (2) |  |  |  |  |  |
| (3) |  |  |  |  |  |
| (4) |  |  |  |  |  |
|  |  |  |  | Add columns 5 and 10. Enter here and on Part I, line 8, column (A) | Add columns 6 and 11. Enter here and on Part I, line 8, column (B) |
| Totals . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . |  |  |  |  |  |
| Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) |  |  |  |  |  |
| 1. Description of income | - 2. An | nt of income | 3. Deductions directly connected (attach statement) | 4. Set-asides (attach statement) | 5. Total deductions and set-asides (add columns 3 and 4) |
| (1) |  |  |  |  |  |
| (2) |  |  |  |  |  |
| (3) |  |  |  |  |  |
| (4) |  |  |  |  |  |
| Totals . | Add am Enter lin | hts in column 2. and on Part I, column (A) |  |  | Add amounts in column 5. Enter here and on Part I, line 9, column (B) |

## Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity: NON-PERIODICAL ADVERTISING
2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)
3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)

|  |  |
| :---: | :---: |
| 2 | $134,850$. |
| 3 | $26,986$. |
| 4 | $107,864$. |
| 5 |  |
| 6 |  |
| 7 |  |

## Public Disclosure Copy

## Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis

|  | $\square$ |
| :--- | ---: | ---: |
| A | $\square$ |
| B | $\square$ |
| C | $\square$ |
| D | $\square$ |

Enter amounts for each periodical listed above in the corresponding column.

2 Gross advertising income

| A | B | C | D |
| :---: | :---: | :---: | :---: |
|  |  |  |  |

a Add columns A through D. Enter here and on Part I, line 11, column (A).

3 Direct advertising costs by periodical

|  |  |  |
| :--- | :--- | :--- |

a Add columns A through D. Enter here and on Part I, line 11, column (B).
4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8.
5 Readership costs . . . . . . . . . . . . . . .
6 Circulation income
7 Excess readership costs. If line 6 is less than line 5 , subtract line 6 from line 5 . If line 5 is less than line 6, enter zero
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7 . . . .

|  |  |  |  |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| a |  |  |  |
|  |  |  |  |

a Add line 8, columns $A$ through $D$. Enter the greater of the line 8 a , columns total or zero here and on Part II, line 13
Part X $\quad$ Compensation of Officers, Directors, and Trustees (see instructions)

| 1. Name | 2. Title | 3. Percentage of time devoted to business | 4. Compensation attributable to unrelated business |
| :---: | :---: | :---: | :---: |
| (1) |  | \% |  |
| (2) |  | \% |  |
| (3) |  | \% |  |
| (4) |  | \% |  |
| Total. Enter here and on Part II, line 1. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . |  |  |  |

## Part XI Supplemental Information (see instructions)

## Public Disclosure Copy

SCHEDULE A Unrelated Business Taxable Income
From an Unrelated Trade or Business

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

04-2103545

C Unrelated business activity code (see instructions) 720000

D Sequence: 2 of 3

E Describe the unrelated trade or business CATERING

| Part I Unrelated Trade or Business Income |  |  | (A) Income | (B) Expenses | (C) Net |
| :---: | :---: | :---: | :---: | :---: | :---: |
| $\begin{array}{rl} 1 a & G \\ b & \end{array}$ | Gross receipts or sales $\qquad$ Less returns and allowances $\qquad$ c Balance | 1c |  |  |  |
| 2 C | Cost of goods sold (Part III, line 8). | 2 |  |  |  |
| 3 G | Gross profit. Subtract line 2 from line 1c | 3 |  |  |  |
| $4 \mathbf{a}$ $\begin{aligned} & \mathrm{C} \\ & \mathrm{~F} \end{aligned}$ | Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions. | 4a |  |  |  |
| b N | Net gain (loss) (Form 4797) (attach Form 4797). See instructions | 4b |  |  |  |
| c C | Capital loss deduction for trusts. . . . . . . . . . . . . . . . . | 4c |  |  |  |
| $5$ | Income (loss) from a partnership or an S corporation (attach statement) | 5 |  |  |  |
| 6 R | Rent income (Part IV) | 6 |  |  |  |
| 7 U | Unrelated debt-financed income (Part V) | 7 |  |  |  |
| $8$ | Interest, annuities, royalties, and rents from a controlled organization (Part VI). | 8 |  |  |  |
|  | Investment income of section 501(c)(7), (9), or (17) organizations (Part VII). | 9 |  |  |  |
| 10 E | Exploited exempt activity income (Part VIII). . . . . . . . . . . | 10 |  |  |  |
| 11 A | Advertising income (Part IX). | 11 |  |  |  |
| 12 O | Other income (see instructions; attach statement) . . S.TM.T. 1 | 12 | 1,778,570. |  | 1,778,570. |
| 13 T | Total. Combine lines 3 through 12 . . . . . . . . . . . . . . . | 13 | 1,778,570. |  | 1,778,570. |

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

1 Compensation of officers, directors, and trustees (Part X)
2 Salaries and wages

|  | 1 |  |
| :---: | :---: | :---: |
| . . . . . . . . . . | 2 |  |
| . . . . . . . . . . . . | 3 |  |
| . . . . . . . . . . . . | 4 |  |
| . . . . . . . | 5 |  |
|  | 6 |  |
| 7 |  |  |
| 8a | 8b |  |
| . . . . . . . . . . . . | 9 |  |
| . . . . . . . . . . | 10 |  |
| . . . . . . . . . . | 11 |  |
| . . . . . . . . . . | 12 |  |
|  | 13 |  |
| . STMT. 2. | 14 | 1,736,199. |
|  | 15 | 1,736,199. |
| 15 from Part I, line 13, | 16 | 42,371. |
|  | 17 | NONE |
| . . . . . . . . . . | 18 | 42,371. |

18 Unrelated business taxable income. Subtract line 17 from line 16
Schedule A (Form 990-T) 2022

1 Inventory at beginning of year
2 Purchases
1

3 Cost of labor
2

4 Additional section 263A costs (attach statement)
5 Other costs (attach statement)
6 Total. Add lines 1 through 5
7 Inventory at end of year
8 Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2
9 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?
Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)
1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.


2 Rent received or accrued
a From personal property (if the percentage of rent for personal property is more than $10 \%$ but not more than 50\%)
b From real and personal property (if the percentage of rent for personal property exceeds $50 \%$ or if the rent is based on profit or income)
c Total rents received or accrued by property. Add lines $2 a$ and $2 b$, columns A through D . .

| A | B | C | D |  |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

3 Total rents received or accrued. Add line $2 c$ columns A through D. Enter here and on Part I, line 6, column (A)

4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement). $\square$
5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)

## Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.
A
B
C
D


2 Gross income from or allocable to debt-financed property
3 Deductions directly connected with or allocable to debt-financed property
a Straight line depreciation (attach statement).
b Other deductions (attach statement) . . . . .
c Total deductions (add lines $3 a$ and $3 b$, columns A through D)

4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)
5 Average adjusted basis of or allocable to debtfinanced property (attach statement)
6 Divide line 4 by line 5
7 Gross income reportable. Multiply line 2 by line 6

| A | B | C | D |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A).

9 Allocable deductions. Multiply line 3c by line 6 $\square$
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)
11 Total dividends - received deductions included in line 10

## JSA

| 1. Name of controlled organization | 2. Employer identification number | Exempt Controlled Organizations |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 3. Net unrelated income (loss) (see instructions) | 4. Total of specified payments made | 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 Organizations |  |  |  |  |  |
| 7. Taxable income |  | unrelated (loss) structions) | 9. Total of specified payments made | 10. Part of column 9 that is included in the controlling organization's gross income | 11. Deductions directly connected with income in column 10 |
| (1) |  |  |  |  |  |
| (2) |  |  |  |  |  |
| (3) |  |  |  |  |  |
| (4) |  |  |  |  |  |
|  |  |  |  | Add columns 5 and 10 Enter here and on Part I, line 8, column (A) | Add columns 6 and 11. Enter here and on Part I, line 8, column (B) |
| Totals . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . |  |  |  |  |  |
| Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) |  |  |  |  |  |
| 1. Description of income | 2. A | ht of income | 3. Deductions directly connected (attach statement) | 4. Set-asides (attach statement) | 5. Total deductions and set-asides (add columns 3 and 4) |
| (1) |  |  |  |  |  |
| (2) |  |  |  |  |  |
| (3) |  |  |  |  |  |
| (4) |  |  |  |  |  |
| Totals . | Add am Enter lin | ts in column 2. and on Part I, column (A) |  |  | Add amounts in column 5. Enter here and on Part I, line 9, column (B) |

## Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity:
2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)
3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)


## Public Disclosure Copy

## Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis

|  | $\square$ |
| :--- | ---: | ---: |
| A | $\square$ |
| B | $\square$ |
| C | $\square$ |
| D | $\square$ |

Enter amounts for each periodical listed above in the corresponding column.

2 Gross advertising income

| A | B | C | D |
| :---: | :---: | :---: | :---: |
|  |  |  |  |

a Add columns A through D. Enter here and on Part I, line 11, column (A).

3 Direct advertising costs by periodical

|  |  |  |
| :--- | :--- | :--- |

a Add columns A through D. Enter here and on Part I, line 11, column (B).
4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8.
5 Readership costs . . . . . . . . . . . . . . .
6 Circulation income
7 Excess readership costs. If line 6 is less than line 5 , subtract line 6 from line 5 . If line 5 is less than line 6, enter zero
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7 . . . .

|  |  |  |  |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| a |  |  |  |
|  |  |  |  |

a Add line 8, columns $A$ through $D$. Enter the greater of the line 8 a , columns total or zero here and on Part II, line 13
Part X $\quad$ Compensation of Officers, Directors, and Trustees (see instructions)

| 1. Name | 2. Title | 3. Percentage of time devoted to business | 4. Compensation attributable to unrelated business |
| :---: | :---: | :---: | :---: |
| (1) |  | \% |  |
| (2) |  | \% |  |
| (3) |  | \% |  |
| (4) |  | \% |  |
| Total. Enter here and on Part II, line 1. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . |  |  |  |

## Part XI Supplemental Information (see instructions)

# Public Disclosure Copy 

TRUSTEES OF BOSTON COLLEGE

```
SCHEDULE A:CATERING
PART I - LINE 12 - OTHER INCOME
\(===============================\)
```

CATERING
1,778,570.

TOTAL OTHER INCOME
1,778,570.

# Public Disclosure Copy 

TRUSTEES OF BOSTON COLLEGE

```
SCHEDULE A:CATERING
PART II - LINE 14 - OTHER DEDUCTIONS
\(=====================================\)
```

DINING/CATERING COSTS 238,209.
FLOWERS/CONTRACT SERVICES/OTHER
1,497,990.

TOTAL OTHER DEDUCTIONS ................................
1,736,199.

## Public Disclosure Copy

SCHEDULE A Unrelated Business Taxable Income
From an Unrelated Trade or Business

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

B Employer identification number
A Name of the organization

04-2103545

C Unrelated business activity code (see instructions) 901101

D Sequence: 3 of 3

E Describe the unrelated trade or business QUALIFYING PARTNERSHIP INTERESTS

| Part I Unrelated Trade or Business Income |  |  | (A) Income | (B) Expenses | (C) Net |
| :---: | :---: | :---: | :---: | :---: | :---: |
| $\begin{array}{r} 1 a \\ b \end{array}$ | Gross receipts or sales $\qquad$ <br> Less returns and allowances $\qquad$ c Balance | 1c |  |  |  |
| 2 | Cost of goods sold (Part III, line 8). | 2 |  |  |  |
| 3 | Gross profit. Subtract line 2 from line 1c | 3 |  |  |  |
|  | Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions. | 4a | 640,860. |  | 640,860. |
|  | Net gain (loss) (Form 4797) (attach Form 4797). See instructions | 4b |  |  |  |
| c | Capital loss deduction for trusts. | 4c |  |  |  |
|  | Income (loss) from a partnership or an S corporation (attach statement) . . . . . SEE. STATEMENT. 1. . . . . . . . | 5 | -8,070,717. |  | -8,070,717. |
| 6 | Rent income (Part IV) | 6 |  |  |  |
| 7 | Unrelated debt-financed income (Part V) | 7 |  |  |  |
|  | Interest, annuities, royalties, and rents from a controlled organization (Part VI). | 8 |  |  |  |
| 9 | Investment income of section 501(c)(7), (9), or (17) organizations (Part VII). | 9 |  |  |  |
| 10 | Exploited exempt activity income (Part VIII). | 10 |  |  |  |
| 11 | Advertising income (Part IX). | 11 |  |  |  |
| 12 | Other income (see instructions; attach statement) | 12 |  |  |  |
| 13 | Total. Combine lines 3 through 12. . . . . . . . . . . . | 13 | -7,429,857. |  | -7,429,857. |

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

1 Compensation of officers, directors, and trustees (Part X)
2 Salaries and wages


18 Unrelated business taxable income. Subtract line 17 from line 16
Schedule A (Form 990-T) 2022

1 Inventory at beginning of year
2 Purchases
1

3 Cost of labor
2

4 Additional section 263A costs (attach statement)
5 Other costs (attach statement)
6 Total. Add lines 1 through 5
7 Inventory at end of year
8 Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2
9 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?
Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)
1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.


2 Rent received or accrued
a From personal property (if the percentage of rent for personal property is more than $10 \%$ but not more than 50\%)
b From real and personal property (if the percentage of rent for personal property exceeds $50 \%$ or if the rent is based on profit or income)
c Total rents received or accrued by property. Add lines $2 a$ and $2 b$, columns A through D . .

| A | B | C | D |  |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

3 Total rents received or accrued. Add line $2 c$ columns A through D. Enter here and on Part I, line 6, column (A)

4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement). $\square$
5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)

## Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.
A
B
C
D


2 Gross income from or allocable to debt-financed property
3 Deductions directly connected with or allocable to debt-financed property
a Straight line depreciation (attach statement).
b Other deductions (attach statement) . . . . .
c Total deductions (add lines $3 a$ and $3 b$, columns A through D)

4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)
5 Average adjusted basis of or allocable to debtfinanced property (attach statement)
6 Divide line 4 by line 5
7 Gross income reportable. Multiply line 2 by line 6

| A | B | C | D |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A).

9 Allocable deductions. Multiply line 3c by line 6 $\square$
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)
11 Total dividends - received deductions included in line 10

## JSA

| 1. Name of controlled organization | 2. Employer identification number | Exempt Controlled Organizations |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | 3. Net unrelated income (loss) (see instructions) | 4. Total of specified payments made | 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 Organizations |  |  |  |  |  |
| 7. Taxable income |  | unrelated (loss) structions) | 9. Total of specified payments made | 10. Part of column 9 that is included in the controlling organization's gross income | 11. Deductions directly connected with income in column 10 |
| (1) |  |  |  |  |  |
| (2) |  |  |  |  |  |
| (3) |  |  |  |  |  |
| (4) |  |  |  |  |  |
|  |  |  |  | Add columns 5 and 10 Enter here and on Part I, line 8, column (A) | Add columns 6 and 11. Enter here and on Part I, line 8, column (B) |
| Totals . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . |  |  |  |  |  |
| Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) |  |  |  |  |  |
| 1. Description of income | 2. A | ht of income | 3. Deductions directly connected (attach statement) | 4. Set-asides (attach statement) | 5. Total deductions and set-asides (add columns 3 and 4) |
| (1) |  |  |  |  |  |
| (2) |  |  |  |  |  |
| (3) |  |  |  |  |  |
| (4) |  |  |  |  |  |
| Totals . | Add am Enter lin | ts in column 2. and on Part I, column (A) |  |  | Add amounts in column 5. Enter here and on Part I, line 9, column (B) |

## Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity:
2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)
3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)


## Public Disclosure Copy

## Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis

|  | $\square$ |
| :--- | ---: | ---: |
| A | $\square$ |
| B | $\square$ |
| C | $\square$ |
| D | $\square$ |

Enter amounts for each periodical listed above in the corresponding column.

2 Gross advertising income

| A | B | C | D |
| :---: | :---: | :---: | :---: |
|  |  |  |  |

a Add columns A through D. Enter here and on Part I, line 11, column (A).

3 Direct advertising costs by periodical

|  |  |  |
| :--- | :--- | :--- |

a Add columns A through D. Enter here and on Part I, line 11, column (B).
4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8.
5 Readership costs . . . . . . . . . . . . . . .
6 Circulation income
7 Excess readership costs. If line 6 is less than line 5 , subtract line 6 from line 5 . If line 5 is less than line 6, enter zero
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7 . . . .

|  |  |  |  |
| :--- | :--- | :--- | :--- |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| a |  |  |  |
|  |  |  |  |

a Add line 8, columns $A$ through $D$. Enter the greater of the line 8 a , columns total or zero here and on Part II, line 13
Part X $\quad$ Compensation of Officers, Directors, and Trustees (see instructions)

| 1. Name | 2. Title | 3. Percentage of time devoted to business | 4. Compensation attributable to unrelated business |
| :---: | :---: | :---: | :---: |
| (1) |  | \% |  |
| (2) |  | \% |  |
| (3) |  | \% |  |
| (4) |  | \% |  |
| Total. Enter here and on Part II, line 1. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . |  |  |  |

## Part XI Supplemental Information (see instructions)

## Public Disclosure Copy

```
TRUSTEES OF BOSTON COLLEGE

SCHEDULE A: THE ONLY OR FIRST UNRELATED TD OR BUS.

INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS


TOTAL INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

\section*{Public Disclosure Copy}

TRUSTEES OF BOSTON COLLEGE
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SCHEDULE A:THE ONLY OR FIRST UNRELATED TD OR BUS.
PART II - LINE 14 - OTHER DEDUCTIONS

```

    TAX PREPARATION FEES 43,200.
    INVESTMENT MANAGEMENT EXPENSE \(1,578,778\).
    TOTAL OTHER DEDUCTIONS .............................. 1, 621,978.

\section*{Public Disclosure Copy}

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.

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

TRUSTEES OF BOSTON COLLEGE
Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? \(\qquad\) Yes
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.
Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less
\begin{tabular}{|c|c|c|c|c|c|c|}
\hline & \begin{tabular}{l}
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.
\end{tabular} & \begin{tabular}{l}
(d) \\
Proceeds (sales price)
\end{tabular} & \[
\begin{gathered}
\text { (e) } \\
\text { Cost } \\
\text { (or other basis) }
\end{gathered}
\] & \multicolumn{2}{|l|}{(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)} & (h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g) \\
\hline 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 . . . . . . . . . & & & & & \\
\hline & Totals for all transactions reported on Form(s) 8949 with Box A checked & & & & & \\
\hline & Totals for all transactions reported on Form(s) 8949 with Box B checked & & & & & \\
\hline & Totals for all transactions reported on Form(s) 8949 with Box C checked & & & & & 40,073. \\
\hline 4 & Short-term capital gain from installment sales from & 6252, line 26 & & & 4 & \\
\hline 5 & Short-term capital gain or (loss) from like-kind excha & from Form 8 & & & 5 & \\
\hline 6 & Unused capital loss carryover (attach computation) & & & & 6 & \((\) \\
\hline 7 & Net short-term capital gain or (loss). Combine lines & ough 6 in col & & & 7 & 40,073. \\
\hline
\end{tabular}

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year
\begin{tabular}{|c|c|c|c|c|c|c|}
\hline & \begin{tabular}{l}
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.
\end{tabular} & \begin{tabular}{l}
(d) \\
Proceeds (sales price)
\end{tabular} & \[
\begin{gathered}
\text { (e) } \\
\text { Cost } \\
\text { (or other basis) }
\end{gathered}
\] & \multicolumn{2}{|l|}{(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)} & (h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g) \\
\hline & 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 & & & & & \\
\hline & Totals for all transactions reported on Form(s) 8949 with Box D checked & & & & & \\
\hline & Totals for all transactions reported on Form(s) 8949 with Box E checked & & & & & \\
\hline \[
10
\] & Totals for all transactions reported on Form(s) 8949 with Box F checked & & & & & 426,414. \\
\hline 11 & Enter gain from Form 4797, line 7 or 9 & & & & 11 & 174,373. \\
\hline 12 & Long-term capital gain from installment sales from F & 252, line 26 & & & 12 & \\
\hline 13 & Long-term capital gain or (loss) from like-kind exchan & om Form 88 & & & 13 & \\
\hline 14 & Capital gain distributions (see instructions) & & & & 14 & \\
\hline 15 & Net long-term capital gain or (loss). Combine lines 8 & ough 14 in co & & & 15 & 600,787. \\
\hline Part & III Summary of Parts I and II & & & & & \\
\hline 16 & Enter excess of net short-term capital gain (line 7) o & long-term & (line 15) & & 16 & 40,073. \\
\hline 17 & Net capital gain. Enter excess of net long-term capit & (line 15) o & rt-term capit & (line 7). & 17 & 600,787. \\
\hline 18 & Add lines 16 and 17. Enter here and on Form 1120, & 1, line 8, or & icable line on o & returns & 18 & 640,860. \\
\hline
\end{tabular}

\section*{Public Disclosure Copy}

Department of the Treasury nternal Revenue Service

\section*{Sales and Other Dispositions of Capital Assets}

Go to www.irs.gov/Form8949 for instructions and the latest information.
File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

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.
Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.
Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).
You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.
\begin{tabular}{|c|c|c|c|c|c|c|c|}
\hline \multicolumn{8}{|l|}{\begin{tabular}{l}
(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
\end{tabular}} \\
\hline \multirow[t]{2}{*}{\[
1
\]} & \multirow[t]{2}{*}{\begin{tabular}{l}
(b) \\
Date acquired (Mo., day, yr.)
\end{tabular}} & \multirow[b]{2}{*}{\begin{tabular}{l}
(c) \\
Date sold or disposed of (Mo., day, yr.)
\end{tabular}} & \multirow[b]{2}{*}{\begin{tabular}{l}
(d) \\
Proceeds (sales price) (see instructions)
\end{tabular}} & \multirow[t]{2}{*}{\begin{tabular}{l}
(e) \\
Cost or other basis See the Note below and see Column (e) in the separate instructions.
\end{tabular}} & \multicolumn{2}{|l|}{Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.} & \multirow[t]{2}{*}{\begin{tabular}{l}
(h) \\
Gain or (loss) \\
Subtract column (e) from column (d) and combine the result with column (g).
\end{tabular}} \\
\hline & & & & & (f) Code(s) from instructions & \begin{tabular}{l}
(g) \\
Amount of adjustment
\end{tabular} & \\
\hline SHORT TERM CAPITAL GAIN/(LOSS) & VAR & VAR & & & & & 40,073. \\
\hline & & & & & & & \\
\hline & & & & & & & \\
\hline & & & & & & & \\
\hline & & & & & & & \\
\hline & & & & & & & \\
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\hline & & & & & & & \\
\hline & & & & & & & \\
\hline \multicolumn{3}{|l|}{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 above is checked), or line 3 (if Box C above is checked)} & & & & & 40,073. \\
\hline
\end{tabular}

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.

\section*{trustees of boston college}

04-2103545
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.


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 \((\mathrm{g})\) to correct the basis. See Column \((g)\) in the separate instructions for how to figure the amount of the adjustment.

JSA

\section*{Public Disclosure Copy}

\section*{(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.}

Identifying number
TRUSTEES OF BOSTON COLLEGE
1a Enter the gross proceeds from sales or exchanges reported to you for 2022 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2,10 , or 20 . See instructions
b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets
Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft - Most Property Held More Than 1 Year (see instructions)


Part II Ordinary Gains and Losses (see instructions)
10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):


For Paperwork Reduction Act Notice, see separate instructions.
Form 4797 (2022)

\section*{Public Disclosure Copy}

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions)
\begin{tabular}{|c|c|c|c|c|c|}
\hline \multicolumn{4}{|l|}{19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:} & (b) Date acquired (mo., day, yr.) & (c) Date sold (mo., day, yr.) \\
\hline \multicolumn{4}{|l|}{A} & & \\
\hline \multicolumn{4}{|l|}{B} & & \\
\hline \multicolumn{4}{|l|}{C} & & \\
\hline \multicolumn{4}{|l|}{D} & & \\
\hline \multicolumn{2}{|l|}{These columns relate to the properties on lines 19A through 19D.} & Property A & Property B & Property C & Property D \\
\hline \multirow[t]{2}{*}{\begin{tabular}{l}
20 Gross sales price (Note: See line 1 before completing.) \\
21 Cost or other basis plus expense of sale . . . . . . .
\end{tabular}} & 20 & & & & \\
\hline & 21 & & & & \\
\hline \multirow[t]{3}{*}{\begin{tabular}{l}
22 Depreciation (or depletion) allowed or allowable. \\
23 Adjusted basis. Subtract line 22 from line 21 . . . . \\
24 Total gain. Subtract line 23 from line 20.
\end{tabular}} & 22 & & & & \\
\hline & 23 & & & & \\
\hline & 24 & & & & \\
\hline \multirow[t]{2}{*}{\begin{tabular}{l}
25 If section 1245 property: \\
a Depreciation allowed or allowable from line 22 b Enter the smaller of line 24 or 25 a. . . . . . . . . .
\end{tabular}} & 25a & & & & \\
\hline & 25b & & & & \\
\hline \begin{tabular}{l}
26 If section 1250 property: If straight line depreciation was used, enter -0 - on line 26 g , except for a corporation subject to section 291. \\
a Additional depreciation after 1975. See instructions.
\end{tabular} & 26a & & & & \\
\hline b Applicable percentage multiplied by the smaller of line 24 or line 26 a. See instructions. & 26b & & & & \\
\hline c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e . & 26c & & & & \\
\hline d Additional depreciation after 1969 and before 1976. & 26d & & & & \\
\hline e Enter the smaller of line 26c or 26d. . & 26e & & & & \\
\hline f Section 291 amount (corporations only). & \(26 f\) & & & & \\
\hline g Add lines 26b, 26e, and 26f . . . . . . . . . . & 26 g & & & & \\
\hline \begin{tabular}{l}
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. \\
a Soil, water, and land clearing expenses . . . . . . .
\end{tabular} & 27a & & & & \\
\hline b Line 27a multiplied by applicable percentage. See instructions. & 27b & & & & \\
\hline c Enter the smaller of line 24 or 27 b . . . . . . & 27c & & & & \\
\hline \begin{tabular}{l}
28 If section 1254 property: \\
a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions .
\end{tabular} & 28a & & & & \\
\hline b Enter the smaller of line 24 or 28 a . . . . . . & 28b & & & & \\
\hline \begin{tabular}{l}
29 If section 1255 property: \\
a Applicable percentage of payments excluded from income under section 126. See instructions . . . .
\end{tabular} & 29a & & & & \\
\hline b Enter the smaller of line 24 or 29a. See instructions. & 29b & & & & \\
\hline
\end{tabular}

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.
30 Total gains for all properties. Add property columns A through D, line 24 . . . . . . . . . . . . . . . . . . . . . . . . 30

31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13 . . . . . . . . . . . . 31
32 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6

\section*{Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to \(50 \%\) or Less} (see instructions)
\begin{tabular}{|c|c|c|c|c|}
\hline & & & (a) Section 179 & (b) Section 280F(b)(2) \\
\hline 33 & Section 179 expense deduction or depreciation allowable in prior years & 33 & & \\
\hline 34 & Recomputed depreciation. See instructions & 34 & & \\
\hline & Recapture amount. Subtract line 34 from line 33. See the instructions for where to report & 35 & & \\
\hline
\end{tabular}

Public Disclosure Copy
04-2103545
TRUSTEES OF BOSTON COLLEGE Supplement to Form 4797 Part I Detail
\begin{tabular}{|c|c|c|c|c|c|c|}
\hline Description & \[
\begin{gathered}
\text { Date } \\
\text { Acquired }
\end{gathered}
\] & Date
Sold
sid & Gross Sales
Price & \begin{tabular}{l}
Depreciation Allowed \\
or Allowable
\end{tabular} & Cost or Other Basis & Gain or (Loss) for entire year \\
\hline SECT. 1231 GAIN/LOSS & VAR & VAR & 174,373. & & & 174,373. \\
\hline & & & & & & \\
\hline & & & & & & \\
\hline & & & & & & \\
\hline & & & & & & \\
\hline & & & & & & \\
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\hline & & & & & & \\
\hline & & & & & & \\
\hline Totals & & & & & & 174,373 \\
\hline
\end{tabular}

\section*{Public Disclosure Copy}

Go to www.irs.gov/Form3800 for instructions and the latest information. You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

Name(s) shown on return
TRUSTEES OF BOSTON COLLEGE

Part I Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT)
(See instructions and complete Part(s) III before Parts I and II.)
\begin{tabular}{|c|c|c|c|}
\hline 1 & General business credit from line 2 of all Parts III with box A checked & 1 & \\
\hline 2 &  & & \\
\hline 3 & Enter the applicable passive activity credits allowed for 2022. See instructions & 3 & NONE \\
\hline 4 & Carryforward of general business credit to 2022. Enter the amount from line 2 of Part III with box C checked. See instructions for statement to attach & 4 & \\
\hline 5 & Check this box if the carryforward was changed or revised from the original reported amount \(\square\) Carryback of general business credit from 2023. Enter the amount from line 2 of Part III with box D checked. See instructions. & 5 & \\
\hline 6 & Add lines 1, 3, 4, and \(5 . . . . . . .8)\) & 6 & NONE \\
\hline
\end{tabular}

\section*{Part II Allowable Credit}

7 Regular tax before credits:
- Individuals. Enter the sum of the amounts from Form 1040, 1040-SR, or 1040-NR, line 16, and Schedule 2 (Form 1040), line 2.
- Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2; or the applicable line of your return.
- Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, plus any Form 8978 amount included on line 1d; or the amount from the applicable line of your return.

8 Alternative minimum tax:
- Individuals. Enter the amount from Form 6251, line 11.
- Corporations. Enter -0-.
- Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54.

9 Add lines 7 and 8
10a Foreign tax credit
. . . . . . . . . . . . . . . . . . . . . . . . . . . .
b Certain allowable credits (see instructions). . . . . . . . . . . . . . . . 10b
c Add lines 10a and 10b


1 Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16
12 Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0-

13 Enter \(25 \%\) (0.25) of the excess, if any, of line 12 over \(\$ 25,000\). See instructions
14 Tentative minimum tax:
- Individuals. Enter the amount from Form 6251, line 9.)
- Corporations. Enter -0-.
\begin{tabular}{|c|l|}
\hline 12 & \\
\hline 13 & \\
\hline 14 & \\
\hline
\end{tabular}
- Estates and trusts. Enter the amount from Schedule I (Form 1041), line 52.
15 Enter the greater of line 13 or line 14

\section*{15}

16
17 Enter the smaller of line 6 or line 16
16
17
C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or reorganization.
For Paperwork Reduction Act Notice, see separate instructions.

\section*{Public Disclosure Copy}

Form 3800 (2022) TRUSTEES OF BOSTON COLLEGE
04-2103545
Page 2
Part II Allowable Credit (continued)
Note: If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter \(-0-\) on line 26.
\begin{tabular}{|c|c|c|c|}
\hline 18 & Multiply line 14 by 75\% (0.75). See instructions & 18 & \\
\hline 19 & Enter the greater of line 13 or line 18 & 19 & \\
\hline 20 & Subtract line 19 from line 11. If zero or less, enter -0- & 20 & \\
\hline 21 & Subtract line 17 from line 20. If zero or less, enter -0- & 21 & \\
\hline 22 & Combine the amounts from line 3 of all Parts III with box A, C, or D checked & 22 & \\
\hline 23 & Passive activity credit from line 3 of all Parts III with box B checked . . . . 23 & & \\
\hline 24 & Enter the applicable passive activity credit allowed for 2022. See instructions & 24 & \\
\hline 25 & Add lines 22 and 24 & 25 & \\
\hline 26 & Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25 & 26 & \\
\hline 27 & Subtract line 13 from line 11. If zero or less, enter -0- & 27 & \\
\hline 28 & Add lines 17 and 26 & 28 & \\
\hline 29 & Subtract line 28 from line 27. If zero or less, enter -0- & 29 & \\
\hline 30 & Enter the general business credit from line 5 of all Parts III with box A checked. & 30 & \\
\hline 31 & Reserved & 31 & \\
\hline 32 & Passive activity credits from line 5 of all Parts III with box B checked . . . \(32 \times 39\). & & \\
\hline 33 & Enter the applicable passive activity credits allowed for 2022. See instructions. & 33 & \\
\hline 34 & Carryforward of business credit to 2022. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach & 34 & \\
\hline & Check this box if the carryforward was changed or revised from the original reported amount. & & \\
\hline 35 & Carryback of business credit from 2023. Enter the amount from line 5 of Part III with box D checked. See instructions. & 35 & \\
\hline 36 & Add lines 30, 33, 34, and 35. & 36 & \\
\hline 37 & Enter the smaller of line 29 or line 36. & 37 & \\
\hline 38 & \begin{tabular}{l}
Credit allowed for the current year. Add lines 28 and 37. \\
Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return. \\
- Individuals. Schedule 3 (Form 1040), line 6. \\
- Corporations. Form 1120, Schedule J, Part I, line 5c. \\
- Estates and trusts. Form 1041, Schedule G, line 2b.
\end{tabular} & 38 & NONE \\
\hline
\end{tabular}

04-2103545

\section*{Part III General Business Credits or Eligible Small Business Credits (see instructions)}

Complete a separate Part III for each box checked below. See instructions.
\begin{tabular}{|c|c|c|c|}
\hline & & & \\
\hline A & General Business Credit From a Non-Passive Activity & E & Reserved \\
\hline B & General Business Credit From a Passive Activity & F & Reserved \\
\hline C & General Business Credit Carryforwards & G & Eligible Small Business Credit Carryforwards \\
\hline D & General Business Credit Carrybacks & H & Reserved \\
\hline
\end{tabular}

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III
(a) Description of credit

Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.
\begin{tabular}{|c|c|c|}
\hline & (b) Enter EIN if claiming the credit from a pass-through entity & (c) Enter the appropriate amount. \\
\hline 1a & & \\
\hline 1b & & \\
\hline 1c & & 7,633. \\
\hline 1d & & \\
\hline 1e & & \\
\hline 1 f & & \\
\hline 1 g & & \\
\hline 1h & & \\
\hline 1i & & \\
\hline 1j & & \\
\hline 1k & & \\
\hline 11 & & \\
\hline 1 m & & \\
\hline 1n & & \\
\hline 10 & & \\
\hline 1p & & \\
\hline 19 & & \\
\hline 1 r & & \\
\hline 1s & & \\
\hline 1t & & \\
\hline 1u & & \\
\hline 1v & & \\
\hline 1w & & \\
\hline 1x & & \\
\hline 1y & & \\
\hline \(1 z\) & & \\
\hline 1aa & & \\
\hline 1bb & & \\
\hline 1zz & & \\
\hline 2 & & 7,633. \\
\hline 3 & & \\
\hline 4a & & \\
\hline 4b & & \\
\hline 4c & & \\
\hline 4d & & 18. \\
\hline 4e & & \\
\hline 4f & & 21. \\
\hline 4 g & & \\
\hline 4h & & \\
\hline \(4 i\) & & \\
\hline 4j & & \\
\hline 4z & & \\
\hline 5 & & 39. \\
\hline 6 & & 7,672 \\
\hline
\end{tabular}

TRUSTEES OF BOSTON COLLEGE
Part III General Business Credits or Eligible Small Business Credits (see instructions)
Complete a separate Part III for each box checked below. See instructions.
\begin{tabular}{l|l|ll|ll} 
A & \(\square\) & General Business Credit From a Non-Passive Activity & E & \(\square\) & Reserved \\
& B & X & General Business Credit From a Passive Activity & F & \\
Reserved \\
C & & General Business Credit Carryforwards & G & \\
D & \(\square\) & General Business Credit Carrybacks & H & \(\square\) & Reserved
\end{tabular}

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III
(a) Description of credit

Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.
\begin{tabular}{|c|c|c|}
\hline ch & (b) Enter EIN if claiming the credit from a pass-through entity. & (c) Enter the appropriate amount. \\
\hline 1a & & \\
\hline 1b & & \\
\hline 1c & & \\
\hline 1d & & \\
\hline 1e & & \\
\hline 1f & & \\
\hline 1 g & & \\
\hline 1h & & \\
\hline 1i & & \\
\hline 1j & & \\
\hline 1k & & \\
\hline 11 & & \\
\hline 1m & & \\
\hline 1n & & \\
\hline 10 & & \\
\hline 1p & & \\
\hline 1q & & \\
\hline 1r & & \\
\hline 1s & & \\
\hline 1t & & \\
\hline 1u & & \\
\hline 1v & & \\
\hline 1w & & \\
\hline 1x & & \\
\hline 1y & & \\
\hline \(1 z\) & & \\
\hline 1aa & & \\
\hline 1bb & & \\
\hline 1zz & & \\
\hline 2 & & \\
\hline 3 & & \\
\hline 4a & & \\
\hline 4b & & \\
\hline 4c & & \\
\hline 4d & 04-3455028 & 18. \\
\hline 4e & & \\
\hline 4f & 04-3455028 & 21. \\
\hline 4g & & \\
\hline 4h & & \\
\hline \(4 i\) & & \\
\hline 4j & & \\
\hline 4 z & & \\
\hline 5 & & 39. \\
\hline 6 & & 39. \\
\hline
\end{tabular}

TRUSTEES OF BOSTON COLLEGE
Part III General Business Credits or Eligible Small Business Credits (see instructions)
Complete a separate Part III for each box checked below. See instructions.
\begin{tabular}{l|l|ll|ll} 
A & \(\square\) & General Business Credit From a Non-Passive Activity & E & \(\square\) & Reserved \\
& B & X & General Business Credit From a Passive Activity & F & \\
Reserved \\
C & & General Business Credit Carryforwards & G & \\
D & \(\square\) & General Business Credit Carrybacks & H & \(\square\) & Reserved
\end{tabular}

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III
(a) Description of credit

Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.
\begin{tabular}{|c|c|c} 
(b) Enter EIN if & (c) Enter the \\
claiming the credit \\
from a pass-through & \begin{tabular}{c} 
appropriate \\
amount.
\end{tabular}
\end{tabular}

1a Investment (Form 3468, Part II only) (attach Form 3468)
b Advanced manufacturing production (Form 7207).
c Increasing research activities (Form 6765)
d Low-income housing (carryforward only) (see instructions)
e Disabled access (Form 8826)*
f Renewable electricity production (Form 8835).
g Indian employment (Form 8845)
h Orphan drug (Form 8820).
i New markets (Form 8874)
j Small employer pension plan startup costs and auto-enrollment (Form 8881)
k Employer-provided child care facilities and services (Form 8882)*
I Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)
m Low sulfur diesel fuel production (Form 8896).
n Distilled spirits (Form 8906).
o Nonconventional source fuel (carryforward only).
p Energy efficient home (Form 8908)
q Energy efficient appliance (carryforward only)
r Alternative motor vehicle (Form 8910)
s Alternative fuel vehicle refueling property (Form 8911)
t Enhanced oil recovery credit (Form 8830)
u Mine rescue team training (Form 8923)
v Agricultural chemicals security (carryforward only)
w Employer differential wage payments (Form 8932)
x Carbon oxide sequestration (Form 8933).
y Qualified plug-in electric drive motor vehicle (Form 8936).
z Qualified plug-in electric vehicle (carryforward only)
aa Employee retention (Form 5884-A)
bb General credits from an electing large partnership (carryforward only)
zz Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions).
2 Add lines 1a through 1 zz and enter here and on the applicable line of Part I
3 Enter the amount from Form 8844 here and on the applicable line of Part II
4a Investment (Form 3468, Part III) (attach Form 3468)
b Work opportunity (Form 5884)
c Biofuel producer (Form 6478)
d Low-income housing (Form 8586)
e Renewable electricity production (Form 8835).
f Employer social security and Medicare taxes paid on certain employee tips (Form 8846),
g Qualified railroad track maintenance (Form 8900)
h Small employer health insurance premiums (Form 8941)
i Increasing research activities (Form 6765)
j Employer credit for paid family and medical leave (Form 8994)
z Other
5 Add lines 4a through \(4 z\) and enter here and on the applicable line of Part II
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II .
105.

TRUSTEES OF BOSTON COLLEGE
Part III General Business Credits or Eligible Small Business Credits (see instructions)
Complete a separate Part III for each box checked below. See instructions.
\begin{tabular}{l|l|ll|ll} 
A & \(\square\) & General Business Credit From a Non-Passive Activity & E & \(\square\) & Reserved \\
& B & X & General Business Credit From a Passive Activity & F & \\
Reserved \\
C & & General Business Credit Carryforwards & G & \\
D & \(\square\) & General Business Credit Carrybacks & H & \(\square\) & Reserved
\end{tabular}

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III
(a) Description of credit

Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.
\begin{tabular}{|c|c|c|}
\hline & (b) Enter EIN if claiming the credit from a pass-through entity. & (c) Enter the appropriate amount. \\
\hline 1a & & \\
\hline 1b & & \\
\hline 1c & 47-2732735 & 7,114. \\
\hline 1d & & \\
\hline 1e & & \\
\hline 1 f & & \\
\hline 1 g & & \\
\hline 1h & & \\
\hline 1 i & & \\
\hline 1 j & & \\
\hline 1k & & \\
\hline 11 & & \\
\hline 1 m & & \\
\hline 1n & & \\
\hline 10 & & \\
\hline 1p & & \\
\hline \(1 q\) & & \\
\hline 1 r & & \\
\hline 1s & & \\
\hline 1t & & \\
\hline 1u & & \\
\hline 1v & & \\
\hline 1 w & & \\
\hline 1x & & \\
\hline 1y & & \\
\hline 1 z & & \\
\hline 1aa & & \\
\hline 1bb & & \\
\hline 1zz & & \\
\hline 2 & & 7,114. \\
\hline 3 & & \\
\hline 4a & & \\
\hline 4b & & \\
\hline 4c & & \\
\hline 4d & & \\
\hline 4e & & \\
\hline 4f & & \\
\hline 4 g & & \\
\hline 4h & & \\
\hline 4i & & \\
\hline 4j & & \\
\hline 4z & & \\
\hline 5 & & \\
\hline 6 & & 7,114. \\
\hline
\end{tabular}

TRUSTEES OF BOSTON COLLEGE
Part III General Business Credits or Eligible Small Business Credits (see instructions)
Complete a separate Part III for each box checked below. See instructions.
\begin{tabular}{l|l|ll|ll} 
A & \(\square\) & General Business Credit From a Non-Passive Activity & E & \(\square\) & Reserved \\
& B & X & General Business Credit From a Passive Activity & F & \\
Reserved \\
C & & General Business Credit Carryforwards & G & \\
D & \(\square\) & General Business Credit Carrybacks & H & \(\square\) & Reserved
\end{tabular}

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III
(a) Description of credit

Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.
\begin{tabular}{|c|c} 
& (b) Enter EIN if \\
claiming the credit \\
from a pass-through
\end{tabular}\(\quad\)\begin{tabular}{c} 
(c) Enter the \\
appropriate \\
amount.
\end{tabular}

1a Investment (Form 3468, Part II only) (attach Form 3468)
b Advanced manufacturing production (Form 7207).
c Increasing research activities (Form 6765)
d Low-income housing (carryforward only) (see instructions)
e Disabled access (Form 8826)*
f Renewable electricity production (Form 8835).
g Indian employment (Form 8845)
h Orphan drug (Form 8820).
i New markets (Form 8874)
j Small employer pension plan startup costs and auto-enrollment (Form 8881)
k Employer-provided child care facilities and services (Form 8882)*
I Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)
m Low sulfur diesel fuel production (Form 8896).
n Distilled spirits (Form 8906).
o Nonconventional source fuel (carryforward only).
p Energy efficient home (Form 8908)
q Energy efficient appliance (carryforward only)
r Alternative motor vehicle (Form 8910)
s Alternative fuel vehicle refueling property (Form 8911)
t Enhanced oil recovery credit (Form 8830)
u Mine rescue team training (Form 8923)
v Agricultural chemicals security (carryforward only)
w Employer differential wage payments (Form 8932)
x Carbon oxide sequestration (Form 8933).
y Qualified plug-in electric drive motor vehicle (Form 8936).
z Qualified plug-in electric vehicle (carryforward only)
aa Employee retention (Form 5884-A)
bb General credits from an electing large partnership (carryforward only)
zz Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions).
2 Add lines 1a through 1 zz and enter here and on the applicable line of Part I
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d Low-income housing (Form 8586)
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f Employer social security and Medicare taxes paid on certain employee tips (Form 8846),
g Qualified railroad track maintenance (Form 8900)
h Small employer health insurance premiums (Form 8941)
i Increasing research activities (Form 6765)
j Employer credit for paid family and medical leave (Form 8994)
z Other
5 Add lines 4a through \(4 z\) and enter here and on the applicable line of Part II
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II .
31.

TRUSTEES OF BOSTON COLLEGE
Part III General Business Credits or Eligible Small Business Credits (see instructions)
Complete a separate Part III for each box checked below. See instructions.
\begin{tabular}{l|l|ll|ll} 
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& B & X & General Business Credit From a Passive Activity & F & \\
Reserved \\
C & & General Business Credit Carryforwards & G & \\
D & \(\square\) & General Business Credit Carrybacks & H & \(\square\) & Reserved
\end{tabular}

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(a) Description of credit

Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity.
\begin{tabular}{|c|c} 
& \begin{tabular}{c} 
(b) Enter EIN if \\
claiming the credit \\
from a pass-through
\end{tabular}
\end{tabular} \begin{tabular}{c} 
(c) Enter the \\
appropriate \\
amount.
\end{tabular}

1 a Investment (Form 3468, Part II only) (attach Form 3468)
b Advanced manufacturing production (Form 7207).
c Increasing research activities (Form 6765)
d Low-income housing (carryforward only) (see instructions)
e Disabled access (Form 8826)*
f Renewable electricity production (Form 8835).
g Indian employment (Form 8845)
h Orphan drug (Form 8820).
i New markets (Form 8874)
j Small employer pension plan startup costs and auto-enrollment (Form 8881)
k Employer-provided child care facilities and services (Form 8882)*
I Biodiesel, renewable diesel, or sustainable aviation fuel (attach Form 8864)
m Low sulfur diesel fuel production (Form 8896).
n Distilled spirits (Form 8906).
o Nonconventional source fuel (carryforward only).
p Energy efficient home (Form 8908)
q Energy efficient appliance (carryforward only)
r Alternative motor vehicle (Form 8910)
s Alternative fuel vehicle refueling property (Form 8911)
t Enhanced oil recovery credit (Form 8830)
u Mine rescue team training (Form 8923)
\(v\) Agricultural chemicals security (carryforward only)
w Employer differential wage payments (Form 8932)
x Carbon oxide sequestration (Form 8933).
y Qualified plug-in electric drive motor vehicle (Form 8936).
z Qualified plug-in electric vehicle (carryforward only)
aa Employee retention (Form 5884-A)
bb General credits from an electing large partnership (carryforward only)
zz Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions).
2 Add lines 1a through 1 zz and enter here and on the applicable line of Part I
3 Enter the amount from Form 8844 here and on the applicable line of Part II
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c Biofuel producer (Form 6478)
d Low-income housing (Form 8586)
e Renewable electricity production (Form 8835).
f Employer social security and Medicare taxes paid on certain employee tips (Form 8846)
g Qualified railroad track maintenance (Form 8900)
h Small employer health insurance premiums (Form 8941)
i Increasing research activities (Form 6765)
j Employer credit for paid family and medical leave (Form 8994).
z Other
5 Add lines 4a through \(4 z\) and enter here and on the applicable line of Part II
6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II .

\section*{ATTACHMENT 4}

FORM 990-T, SCHEDULE OF NOL GENERATED
BEFORE TCJA - TAX YEARS BEGINNING BEFORE 1/1/2018:
\begin{tabular}{|c|c|c|c|c|}
\hline DATE & ORIGINAL NOL & AMOUNT AVAILABLE & AMOUNT USED & NOL CARRYOVER TO NEXT YEAR \\
\hline 5/31/2010 & 396,907 & 231,329 & 231,329 & 0 \\
\hline 5/31/2011 & 62,018 & 62,018 & 62,018 & 0 \\
\hline 5/31/2012 & 1,611,150 & 1,611,150 & 1,611,150 & 0 \\
\hline 5/31/2014 & 2,906,804 & 2,906,804 & 2,460,681 & 446,123 \\
\hline 5/31/2015 & 2,171,377 & 2,171,377 & 0 & 2,171,377 \\
\hline 5/31/2016 & 774,951 & 774,951 & 0 & 774,951 \\
\hline 5/31/2017 & 6,452,247 & 6,452,247 & 0 & 6,452,247 \\
\hline 5/31/2018 & 13,224,282 & 13,224,282 & 0 & 13,224,282 \\
\hline & 27,599,736 & 27,434,158 & 4,365,178 & 23,068,980 \\
\hline
\end{tabular}
\begin{tabular}{|c|c|c|c|c|c|}
\hline \multicolumn{2}{|l|}{} & & & & ATTACHMENT 4A \\
\hline \multicolumn{6}{|l|}{FORM 990-T, SCHEDULE OF NOL} \\
\hline \multicolumn{6}{|c|}{GENERATED} \\
\hline \multicolumn{6}{|l|}{AFTER TCJA - TAX YEARS} \\
\hline \multicolumn{6}{|l|}{BEGINNING AFTER 1/1/2018:} \\
\hline & & AMOUNT & AMOUNT & NOL CARRYOVER & ACTIVITY GENERATING \\
\hline DATE & ORIGINAL NOL & AVAILABLE & USED & TO NEXT YEAR & LOSS \\
\hline 5/31/2019 & 20,962,492 & 20,962,492 & 0 & 20,962,492 & Partnership Investments \\
\hline 5/31/2020 & 15,549,378 & 15,549,378 & 0 & 15,549,378 & Partnership Investments \\
\hline \multirow[t]{2}{*}{5/31/2021} & 5,118,009 & 5,118,009 & 0 & 5,118,009 & Partnership Investments \\
\hline & 41,629,879 & 41,629,879 & 0 & 41,629,879 & \\
\hline & & AMOUNT & AMOUNT & NOL CARRYOVER & ACTIVITY GENERATING \\
\hline DATE & ORIGINAL NOL & AVAILABLE & USED & TO NEXT YEAR & LOSS \\
\hline 5/31/2020 & 37,350 & 37,350 & 0 & 37,350 & Catering \\
\hline 5/31/2021 & 75,118 & 75,118 & 0 & 75,118 & Catering \\
\hline \multirow[t]{2}{*}{5/31/2022} & 106,537 & 106,537 & 0 & 106,537 & Catering \\
\hline & 219,005 & 219,005 & 0 & 219,005 & \\
\hline
\end{tabular}```

