

Form	990-T	Exe	mpt Organization Business Income Tax Return	F	OMB No. 1545-0047
			(and proxy tax under section 6033(e))		0004
			rear 2021 or other tax year beginning $\underline{JUL 1}$ , $\underline{2021}$ , and ending $\underline{JUN 30}$ , $\underline{202}$	2	2021
	nent of the Treasury		Go to www.irs.gov/Form990T for instructions and the latest information.	C	Open to Public Inspection for 501(c)(3) Organizations Only
Internal	Revenue Service		ot enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).		01(c)(3) Organizations Only yer identification number
A	Check box if address changed.				-
	empt under section	Print SO	UTHWESTERN UNIVERSITY		4-1233796
X	501( <b>c</b> )( <b>3</b> )		ber, street, and room of suite no. If a P.O. box, see instructions.		exemption number structions)
	408(e) 220(e)	Type 10	01 E. UNIVERSITY AVE.		
	408A 530(a) 529(a) 529A	-	or town, state or province, country, and ZIP or foreign postal code ORGETOWN , TX 78626	F	Check box if
		C Book va	lue of all assets at end of year > 544, 973, 903.		an amended return.
G CI	heck organization t		501(c) corporation 501(c) trust 401(a) trust Other trust		
	heck if filing only to		Claim credit from Form 8941 Claim a refund shown on Form 2439		
I CI	heck if a 501(c)(3) o	organization	filing a consolidated return with a 501(c)(2) titleholding corporation		<b>&gt;</b>
J Er	nter the number of	attached Sc	hedules A (Form 990-T)	2	
K Du	uring the tax year,	was the corp	poration a subsidiary in an affiliated group or a parent-subsidiary controlled group?		Yes 🚺 No
			ntifying number of the parent corporation.		
				512)	) 863-1956
Par	t I   Total Unr	elated Bu	siness Taxable Income		
1	Total of unrelated	ousiness tax	able income computed from all unrelated trades or businesses (see		
	instructions)			1	530,346.
2	Reserved			2	
-	Add lines 1 and 2			3	530,346.
			nstructions for limitation rules)	4	0.
			le income before net operating losses. Subtract line 4 from line 3	5	530,346.
			ss. See instructions STATEMENT 1	6	530,346.
			able income before specific deduction and section 199A deduction.		
	Subtract line 6 from			7	1 000
			1,000, but see instructions for exceptions)	8	1,000.
			on. See instructions	9	1 000
	Total deductions.			10	1,000.
11	Unrelated busine	s taxable i	ncome. Subtract line 10 from line 7. If line 10 is greater than line 7,		0
Par	enter zero	wtation		11	0.
					0.
	-		porations. Multiply Part I, line 11 by 21% (0.21)	1	0.
			See instructions for tax computation. Income tax on the amount on		
	Part I, line 11 from		ax rate schedule or Schedule D (Form 1041)	2	
	Proxy tax. See ins		ntiono.	3 4	
	Other tax amounts Alternative minimu			4 5	
				6	
	•	-		7	0.
<u>7</u> LHA			tine 1 or 2, whichever applies	1	Form <b>990-T</b> (2021)
		Couction A			10111 (2021)

Form 9	90-T (2021)					Page <b>2</b>
Part	III Tax and Payments					
1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a				
b	Other credits (see instructions)	1b				
с	General business credit. Attach Form 3800 (see instructions)	1c				
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	1d				
е	Total credits. Add lines 1a through 1d			1e		
2	Subtract line 1e from Part II, line 7			2		0.
3	Other amounts due. Check if from: Form 4255 Form 8611 Form 869	97 [	Form 8866			
	Other (attach statement)			3		
4	Total tax. Add lines 2 and 3 (see instructions).	sly defe	erred under			
	section 1294. Enter tax amount here			4		0.
5	Current net 965 tax liability paid from Form 965 A or Form 965 B, Part II, column (k), line	4		5		0.
6a	Payments: A 2020 overpayment credited to 2021	6a				
b	2021 estimated tax payments. Check if section 643(g) election applies	6b				
с	Tax deposited with Form 8868	6c				
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d				
е	Backup withholding (see instructions)	6e				
f	Credit for small employer health insurance premiums (attach Form 8941)	6f				
g	Other credits, adjustments, and payments: Form 2439					
	□ Form 4136 Other Total ►	6g				
7	Total payments. Add lines 6a through 6g			7		
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached		►	8		
9			►	9		
10	$\ensuremath{\textbf{Overpayment.}}$ If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid		►	10		
	Enter the amount of line 10 you want: Credited to 2022 estimated tax		Refunded 🕨	11		
Part	<b>IV</b> Statements Regarding Certain Activities and Other Information	(see	instructions)			
1	At any time during the 2021 calendar year, did the organization have an interest in or a si				Ye	s No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the orga		•			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name	me of	the foreign country			
	here					X
2	During the tax year, did the organization receive a distribution from, or was it the grantor					
	foreign trust?					X
	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 ▶ \$_1,217,596. Do not inclu		• •	-	_	
	shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any o					
5	Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL ca					
	the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the					
		Availa	ble post-2017 NOL		-	
	722514 \$			9,86		
	901101 \$			233,51	4.	
6a	Did the organization change its method of accounting? (see instructions)					<u> </u>
b	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, o	or Forr	n 1128? lf "No,"			
Dert	explain in Part V V Supplemental Information					
Part						

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

Sign Here	Under penalties of perjury, I declare that I have examined correct, and complete. Declaration of preparer (other than Signature of officer	s schedules and statements, and to the on of which preparer has any knowled VP FOR FINANCE ADMIN Title	e best of my knov ge. <b>2 &amp;</b>	Wedge and belief, it is true, May the IRS discuss this return with the preparer shown below (see instructions)? X Yes No	
Paid	Print/Type preparer's name	Preparer's signature	Date	Check self- employe	if PTIN ed <b>P00748038</b>
Prepare Use Onl	V Firm's name ► CHERRY BEKAE		LC E, SUITE 2200	Firm's EIN Phone no.	
123711 01-31	-22	78			Form <b>990-T</b> (2021)

### 13230428 794483 80158888

2021.05080 SOUTHWESTERN UNIVERSITY

FORM 990-T	PRE 2018 NOL SCHEDULE	STATEMENT 1
	FORWARD FROM PRIOR YEAR ION INCLUDED IN PART I, LINE 6	1,217,596. 530,346.
SCHEDULE A PORTION O SCHEDULE A ENTITY	OF PRE-2018 NOL SCHEDULE A SHARE	
1 2	0.0.	
TOTAL SCHEDULE A SHI NET OPERATING DEDUC' BALANCE AFTER PRE-2 EXPIRING NET OPERAT CARRY FORWARD OF NE'	0. 530,346. 0. 0. 687,250.	

FORM 990-T PRE-2018 NET OPERATING LOSS DEDUCTION STATEMENT 2

TAX YEAR	LOSS SUSTAINED	PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/03	76,449.	76,449.	0.	0.
06/30/04	113,917.	113,917.	0.	0.
06/30/05	100,387.	100,387.	0.	0.
06/30/06	87,245.	87,245.	0.	0.
06/30/07	83,156.	83,156.	0.	0.
06/30/08	78,412.	27,968.	50,444.	50,444.
06/30/09	78,573.	0.	78,573.	78,573.
06/30/10	150,642.	0.	150,642.	150,642.
06/30/11	126,277.	0.	126,277.	126,277.
06/30/12	169,447.	0.	169,447.	169,447.
06/30/13	83,873.	0.	83,873.	83,873.
06/30/14	137,020.	0.	137,020.	137,020.
06/30/15	110,639.	0.	110,639.	110,639.
06/30/16	131,415.	0.	131,415.	131,415.
06/30/18	179,266.	0.	179,266.	179,266.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	1,217,596.	1,217,596.

### SCHEDULE A (Form 990-T)

Department of the Treasury

Internal Revenue Service

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

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).

l for nly

2

#### Name of the organization Α SOUTHWESTERN UNIVERSITY

722514 Unrelated business activity code (see instructions) С

# Describe the unrelated trade or business ▶PUBLIC MEALS

<b>E</b> [	Describe the unrelated trade or business <b>PUBLIC MEALS</b>				
Ра	rt I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales1,857.				
b	· · · · · · · · · · · · · · · · · · ·	1c	1,857.		
2	Cost of goods sold (Part III, line 8)	2			
3	Gross profit. Subtract line 2 from line 1c	3	1,857.		1,857.
4a	Capital gain net income (attach Sch D (Form 1041 or Form				
	1120)). See instructions	4a			
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b			
с	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Part IV)	6			
7	Unrelated debt-financed income (Part V)	7			
8	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	1,857.		1,857.

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)		1	
2	Salaries and wages	2	448.	
3	Repairs and maintenance		3	
4	Bad debts		4	
5	Interest (attach statement). See instructions		5	
6	Taxes and licenses		6	
7	Depreciation (attach Form 4562). See instructions	806.		
8	Less depreciation claimed in Part III and elsewhere on return		8b	806.
9	Depletion		9	
10	Contributions to deferred compensation plans		10	
11	Employee benefit programs		11	
12	Excess exempt expenses (Part VIII)		12	
13	Excess readership costs (Part IX)		13	
14	Other deductions (attach statement) SEE ST	ATEMENT 3	14	4,077.
15	Total deductions. Add lines 1 through 14		15	5,331.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, I	ine 13,		
	column (C)		16	-3,474.
17	Deduction for net operating loss. See instructions		17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16		18	-3,474.
LHA	For Paperwork Reduction Act Notice, see instructions.	S	chedu	le A (Form 990-T) 2021

123741 01-28-22

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2021
Open to Public Inspection
501(c)(3) Organizations C

of

B Employer identification number

1

74-1233796

D Sequence:

Sched	ule A (Form 990-T) 2021				Page 2
Part		thod of inventory valua	ation 🕨		
1	Inventory at beginning of year				
2	Purchases				
3	Cost of labor				
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 9	<b>Cost of goods sold.</b> Subtract line 7 from line 6. Enter Do the rules of section 263A (with respect to property				Yes No
Part			<u> </u>	<u>u</u>	
1	Description of property (property street address, city,				
•	A				
	B				
	c 🗌				
	D 🗌				
		Α	В	с	D
2	Rent received or accrued				
а	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)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c columns	A through D. Enter her	e and on Part I line 6 o	column (A)	0.
•	Deductions directly connected with the income				
4	in lines 2(a) and 2(b) (attach statement)				
			•		
5	Total deductions. Add line 4 columns A through D. E	nter here and on Part	, line 6, column (B)		0.
Part	V Unrelated Debt-Financed Income (s	see instructions)			
1	Description of debt-financed property (street address,	city, state, ZIP code).	Check if a dual-use. See	e instructions.	
	A				
	D	•	P	<u>^</u>	D D
2	Gross income from or allocable to debt-financed	Α	В	С	D
2					
3	property Deductions directly connected with or allocable				
Ū	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
c	Total deductions (add lines 3a and 3b,				
	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 debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5		6 %	9	6 %
7	Gross income reportable. Multiply line 2 by line 6 $\dots$				
8	Total gross income (add line 7, columns A through D	). Enter here and on P	art I, line 7, column (A)	•	0.
			1		
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A th				0.
11	Total dividends-received deductions included in line	e IU			0 . • A (Form 999 T) 9991
123721 (	J1-28-22	81		Schedulo	e A (Form 990-T) 2021

1

												1
	ule A (Form 990-T) 2021 VI Interest, Annu		waltice and B	onto fron	n Control		aonization			· 、		Page 3
Part	VI Interest, Annu		byanties, and h				Exempt Control	,	e instruct	,		
	1. Name of controlle	ed	2. Employer	3. Net	unrelated		al of specified	1	rt of colur		6. De	eductions directly
	organization		identification	incon	ne (loss)		nents made		included			onnected with
			number	(see ins	structions)				olling orga gross inc		inco	ome in column 5
(1)												
(2)												
(3)												
<u>(4)</u>												
	· <del>-</del> · · ·				Controlled O	-	1					
7	7. Taxable Income	in	Net unrelated come (loss)		otal of specif yments mad		<b>10.</b> Part of that is included controlling	luded i	in the		conr	uctions directly nected with
		(See	e instructions)				gross	incom	е	m	come	in column 10
<u>(1)</u>												
<u>(2)</u>												
<u>(3)</u>												
<u>(4)</u>							Add colum	ne 5 a	nd 10	Ad	d coli	umns 6 and 11.
							Enter here					e and on Part I,
							line 8, c	column	(A)		line 8	, column (B)
Totals						►			0.			0.
Part	VII Investment I	Income	of a Section 50	1(c)(7), (	9), or (17)	Orgar	nization <sub>(s</sub>	ee inst	ructions)			
	<b>1.</b> Desc	cription of i	ncome		2. Amou		3. Deductio		4. Set-			Total deductions
					incon	ne	directly conne (attach stater		(attach st	tateme		and set-asides add cols 3 and 4)
(1)												
(2)												
(3)												
(4)					Add amou	inte in					_	Add amounts in
					column 2							column 5. Enter
					here and o	,						ere and on Part I,
Totals				•	line 9, colu							ine 9, column (B) 0 •
Part		xempt A	ctivity Income	. Other T	han Adve	•••	a Income	see ins	structions)			
1	Description of exploite		,	,								
2	Gross unrelated busin		e from trade or busi	ness. Ente	r here and o	n Part I,	line 10, colum	n (A)		2		
3	Expenses directly con											
	line 10, column (B)		•							3		
4	Net income (loss) from	n unrelated	trade or business.	Subtract lir	ne 3 from line	e 2. If a g	gain, complete	1				
										4		
5	Gross income from ac									5		
6	Expenses attributable									6		
7	Excess exempt expension											
	4. Enter here and on P	Part II, line <sup>-</sup>	12							7		

Schedule A (Form 990-T) 2021

123731 01-28-22

	lule A (Form 990-T) 2021				Page 4
Part	<b>v</b>				
1	Name(s) of periodical(s). Check box if reporti	ing two or more periodicals on a c	onsolidated basis	i.	
	A				
	В				
	c 🔄				
	D				
Enter a	amounts for each periodical listed above in the	e corresponding column.			
		A	В	С	D
2	Gross advertising income				
	Add columns A through D. Enter here and or	n Part I, line 11, column (A)		▶	0.
а		ГТ			
3	Direct advertising costs by periodical	-			
а	Add columns A through D. Enter here and or	n Part I, line 11, column (B)		►	0.
		[]			
4	Advertising gain (loss). Subtract line 3 from l	ine			
	2. For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column				
	line 4 showing a loss or zero, do not comple				
_	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 le				
•	than line 6, enter zero				
8	Excess readership costs allowed as a				
	deduction. For each column showing a gain				
	line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the g	greater of the line 8a, columns tota	al or zero here and	d on	0.
Part	Y         Compensation of Officers, Di	rectors and Trustees	a instructions)	·····	0.
1 011				3. Percentage	4. Compensation
	1. Name	<b>2.</b> Title		of time devoted	attributable to
	in Name			to business	unrelated business
(1)				%	
(2)				%	
(3)				%	
(4)				%	
<u></u>				,,,	
Total	I. Enter here and on Part II, line 1				0.
Part		ee instructions)			
	••				

123732 01-28-22

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SOUTHWESTERN UNIVERSITY

### 74-1233796

FORM 990-T (A)	ОТН	OTHER DEDUCTIONS			STATEMENT 3	}
DESCRIPTION					AMOUNT	
DIRECT PUBLIC MEALS E TAX PREPARATION FEES	EXPENSES				3,86 21	57. 0.
TOTAL TO SCHEDULE A,	PART II, LINE	14			4,07	7.
990-T SCH A	POST-2017 NET	OPERATING	LOSS	DEDUCTION	STATEMENT 4	 L

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19	5,550.	0.	5,550.	5,550.
06/30/20	3,490.	0.	3,490.	3,490.
06/30/21	827.	0.	827.	827.
NOL CARRYO	VER AVAILABLE THIS	YEAR	9,867.	9,867.

### SCHEDULE A (Form 990-T)

Department of the Treasury

Internal Revenue Service

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

► 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

2

B Employer identification number

2

of

74-1233796

**D** Sequence:

#### Name of the organization Α SOUTHWESTERN UNIVERSITY

901101 Unrelated business activity code (see instructions) С

#### Describe the unrelated trade or business **INVESTMENTS**

<b>E</b> [	Describe the unrelated trade or business <b>INVESTMENTS</b>				
Pa	t I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net	
1a	Gross receipts or sales				
b	Less returns and allowances c Balance ►	1c			
2	Cost of goods sold (Part III, line 8)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions	4a	564,212.		564,212.
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b			
с	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach statement) <b>STATEMENT</b> 5	5	-29,390.		-29,390.
6	Rent income (Part IV)	6			
7	Unrelated debt-financed income (Part V)	7			
8	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	534,822.		534,822.

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)	1			
2	Salaries and wages				2,086.
3	Repairs and maintenance			3	
4	Bad debts			4	
5	Interest (attach statement). See instructions			5	
6	Taxes and licenses			6	
7	Depreciation (attach Form 4562). See instructions	7			
8	Less depreciation claimed in Part III and elsewhere on return	8a		8b	
9	Depletion			9	
10	Contributions to deferred compensation plans			10	
11	Employee benefit programs				
12	Excess exempt expenses (Part VIII)			12	
13	Excess readership costs (Part IX)				
14	Other deductions (attach statement)	E S	STATEMENT 6	14	2,390.
15	Total deductions. Add lines 1 through 14			15	4,476.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from				
	column (C)			16	530,346.
17	Deduction for net operating loss. See instructions			17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16				530,346.
LHA	For Paperwork Reduction Act Notice, see instructions.			Schedu	le A (Form 990-T) 2021

123741 01-28-22

13230428 794483 80158888

Schod	ıle A (Form 990-T) 2021				Page
Part		hod of inventory valuat	ion		T age
1	Inventory at beginning of year				
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5			6	
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	2		
9 Devet	Do the rules of section 263A (with respect to property				Yes No
Part			-		
1	Description of property (property street address, city, s	tate, ZIP code). Check	if a dual-use. See instru	ctions.	
	D			_	_
		A	В	C	D
2	Rent received or accrued				
а	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)				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
3 4	Total rents received or accrued. Add line 2c columns A Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				0.
	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, ee instructions)	line 6, column (B)	<b>&gt;</b>	0.
4 5 <b>Part</b>	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, ee instructions)	line 6, column (B)	<b>&gt;</b>	
4 5 <b>Part</b>	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, ee instructions)	line 6, column (B)	<b>&gt;</b>	
4 5 <b>Part</b>	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, ee instructions)	line 6, column (B)	<b>&gt;</b>	
4 5 <b>Part</b>	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, ee instructions) city, state, ZIP code). C	line 6, column (B) heck if a dual-use. See	instructions.	0.
4 <u>5</u> Part 1	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, ee instructions) city, state, ZIP code). C	line 6, column (B) heck if a dual-use. See	instructions.	0.
4 <u>5</u> Part 1	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, ee instructions) city, state, ZIP code). C	line 6, column (B) heck if a dual-use. See	instructions.	0.
4 <u>5</u> 1 2	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, ee instructions) city, state, ZIP code). C	line 6, column (B) heck if a dual-use. See	instructions.	0.
4 <u>5</u> 1 2	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, ee instructions) city, state, ZIP code). C	line 6, column (B) heck if a dual-use. See	instructions.	0.
4 <u>5</u> 1 2 3	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, ee instructions) city, state, ZIP code). C	line 6, column (B) heck if a dual-use. See	instructions.	0.
4 <u>5</u> 1 2 3 a	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, ee instructions) city, state, ZIP code). C	line 6, column (B) heck if a dual-use. See	instructions.	0.
4 <u>5</u> Part 1 2 3 a b	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, ee instructions) city, state, ZIP code). C	line 6, column (B) heck if a dual-use. See	instructions.	0.
4 5 Part 1 2 3 a b c 4	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, ee instructions) city, state, ZIP code). C	line 6, column (B) heck if a dual-use. See	instructions.	0.
4 5 Part 1 2 3 a b c	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of B	tter here and on Part I, ee instructions) city, state, ZIP code). C	line 6, column (B) heck if a dual-use. See	instructions.	0.
4 5 7 1 2 3 a b c 4 5	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	ter here and on Part I, ee instructions) city, state, ZIP code). C	line 6, column (B) heck if a dual-use. See i B	C	0.
4 5 <b>Part</b> 1 2 3 a b c 4 5 6	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	ter here and on Part I, ee instructions) city, state, ZIP code). C	line 6, column (B) heck if a dual-use. See	instructions.	D
4 5 <b>Part</b> 1 2 3 a b c 4 5 4 5 7	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	A	line 6, column (B) heck if a dual-use. See i B B %	c	0. D
4 5 <b>Part</b> 1 2 3 a b c 4 5 6	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	A	line 6, column (B) heck if a dual-use. See i B B %	c	0.
4 5 Part 1 2 3 a b c 4 5 4 5 6 7 8 9	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)  Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of B		line 6, column (B) heck if a dual-use. See i B B (1) (1) (1) (1) (1) (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4		0. D
4 5 7 2 3 2 3 6 7 8	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)		line 6, column (B) heck if a dual-use. See i B B (1) (1) (1) (1) (1) (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	C C (B)	0. D

												2
Schedu	ule A (Form 990-T) 2021	iti e a Di			. <b>O</b> a veltura I							Page <b>3</b>
Part	VI Interest, Annu	lities, Ro	byaities, and Re	ents fron	n Control		•	(	e instruct	,		
	1. Name of controlle	d	<b>2.</b> Employer	2 Not	unrelated		Exempt Control		ganization art of colur			and directly
	organization	u	identification		ne (loss)				included			ted with
	organization.		number		(see instructions)				olling orga gross inc			column 5
(1)												
(2)												
(3)												
(4)												
				· · · · ·	Controlled O	<u> </u>	ons					
7	. Taxable Income		Net unrelated		otal of specif		10. Part of that is inc			11.	Deduction	2
			icome (loss)	pa	yments mad	е	controlling			in	connected come in col	
<u></u>		(500	e instructions)				gross	incom	е			
( <u>1</u> )												
( <u>2</u> )												
( <u>3)</u> (4)												
<u></u>							Add colum	ins 5 ai	nd 10.	Ado	d columns 6	Sand 11.
							Enter here	and on	Part I,	Ente	er here and	on Part I,
							line 8, c	olumn	(A)		ine 8, colur	nn (B)
Totals						►			0.			0.
Part	VII Investment	Income	of a Section 50	1(c)(7), (	9), or (17)	Orgar	nization (s	ee inst	ructions)			
	<b>1.</b> Desc	cription of i	income		2. Amou		3. Deductio			asides		deductions et-asides
					incor	le	directly conne (attach stater		(attach st	atemer		ols 3 and 4)
(4)							<b>v</b>	,				
(1) (2)												
(2) (3)												
(4)												
( )					Add amou	unts in					Add a	mounts in
					column 2 here and o							nn 5. Enter nd on Part I,
					line 9, colu	,						column (B)
Totals				►		0.						0.
Part	VIII Exploited E	xempt A	<b>Activity Income</b>	, Other T	han Adve	ertising	g Income (	see ins	structions)			
1	Description of exploite	ed activity:										
2	Gross unrelated busin	ess incom	e from trade or busi	ness. Ente	r here and o	n Part I,	line 10, colum	n (A)		2		
3	Expenses directly con	nected wit	h production of unr	elated busi	ness income	e. Enter l	here and on Pa	art I,				
-										3		
4	Net income (loss) from											
_	lines 5 through 7									4		
5 6	Gross income from ac									5 6		
7	Expenses attributable Excess exempt expen											
•	4. Enter here and on P									7		
		,										

Schedule A (Form 990-T) 2021

123731 01-28-22

	ule A (Form 990-T) 2021				Page 4
Part	U U				
1	Name(s) of periodical(s). Check box if reportin	ig two or more periodicals on a o	consolidated basis	S.	
	A				
	В				
	c 🔄				
	D []				
Enter a	amounts for each periodical listed above in the	corresponding column.			
		Α	В	C	D
2	Gross advertising income				
	Add columns A through D. Enter here and on	Part I, line 11, column (A)		►	0.
а		<b></b>			
3	Direct advertising costs by periodical				
а	Add columns A through D. Enter here and on	Part I, line 11, column (B)		►	0.
		<b></b>			
4	Advertising gain (loss). Subtract line 3 from lir	ne			
	2. For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column ir				
	line 4 showing a loss or zero, do not complete				
	lines 5 through 7, and enter zero on line 8 $\dots$				
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 le				
	than line 6, enter zero				
8	Excess readership costs allowed as a				
	deduction. For each column showing a gain o				
	line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the g	reater of the line 8a, columns tot	al or zero here an	d on	•
Daut	Part II, line 13			►	0.
Part	X Compensation of Officers, Dir	ectors, and trustees (s	ee instructions)		
				3. Percentage	4. Compensation
	1. Name	<b>2.</b> Title		of time devoted	attributable to
(4)				to business	unrelated business
<u>(1)</u>				%	
<u>(2)</u>				%	
(3)				%	
(4)				%	
Tatal	Enter have and an Dart II, line 1				0.
Part	. Enter here and on Part II, line 1 XI Supplemental Information (se	· · · · ·		····· ►	0.
Fail		e instructions)			

2

FORM 990-T (A)	INCOME	(LOSS)	) FROM PA	ARTNERS	SHIPS	STATE	EMENT 5		
DESCRIPTION							INCOME (LOSS)		
CCIP VII - OTHER INCOM	E (LOSS)						1,220.		
CCPEP VIII - OTHER INC		S)					71,773		
CCVP IX - OTHER INCOME							-300		
CCVP X - OTHER INCOME		- )					-1,055		
CCNRP VIII - OTHER INC		S)					68,791		
CCNRP IX - OTHER INCOM							153,305		
CSSREOP FUND - OTHER I CSSREO FUND 2014 - OTH			<b>-</b> \				4,954 4,153		
CCVP XI - OTHER INCOME			<b>)</b>				-304		
CCSSGPE FUND - OTHER INCOME		099)					17,265		
CCNRP X - OTHER INCOME		(000)					-65,100.		
CCSSGPE FUND II - OTHE		(LOSS)	)				17,714.		
CCVP XII - OTHER INCOM		(LODD)	•				-12,960		
CNRP XI - OTHER INCOME							-26,320		
CPC FUND 2018 - OTHER		LOSS)					414		
CREOF 2018 - OTHER INC	OME (LOS	S)					-95,262		
CCVP XIII - OTHER INCO	ME (LOSS	)					-15,676		
CCSSGPE FUND III - OTH	ER INCOM	E (LOSS	5)				-99,924		
CPCF II - OTHER INCOME	(LOSS)			CPCF II - OTHER INCOME (LOSS)					
CREOF II - OTHER INCOME (LOSS)							-1,190.		
							-		
CREOF II - OTHER INCOM CCOGPEF IV - OTHER INCO		S)							
	OME (LOS		, LINE 5				-64,834.		
CCOGPEF IV - OTHER INC	OME (LOS	PART I	, LINE 5	IONS		  STATE	-64,834.		
CCOGPEF IV - OTHER INC TOTAL INCLUDED ON SCHE FORM 990-T (A)	OME (LOS	PART I		IONS			-64,834. -29,390.		
CCOGPEF IV - OTHER INC TOTAL INCLUDED ON SCHE FORM 990-T (A) DESCRIPTION	OME (LOS	PART I		IONS			-64,834. -29,390. EMENT 6		
CCOGPEF IV - OTHER INC TOTAL INCLUDED ON SCHE FORM 990-T (A) DESCRIPTION	OME (LOS	PART I		IONS			-64,834. -29,390. EMENT 6		
CCOGPEF IV - OTHER INC	DME (LOS	PART I	R DEDUCT	IONS			-64,834. -29,390. EMENT 6		
CCOGPEF IV - OTHER INC TOTAL INCLUDED ON SCHE FORM 990-T (A) DESCRIPTION TAX PREPARATION FEES	DME (LOS	PART I	R DEDUCT	IONS			-64,834. -29,390. EMENT 6 IOUNT 2,390.		
CCOGPEF IV - OTHER INC TOTAL INCLUDED ON SCHE FORM 990-T (A) DESCRIPTION TAX PREPARATION FEES TOTAL TO SCHEDULE A, P.	OME (LOS	PART I	R DEDUCT:		DEDUCTION	AM	-64,834. -29,390. EMENT 6 IOUNT 2,390.		
CCOGPEF IV - OTHER INC TOTAL INCLUDED ON SCHE FORM 990-T (A) DESCRIPTION TAX PREPARATION FEES TOTAL TO SCHEDULE A, P.	OME (LOS DULE A, ART II, DST-2017	PART I OTHEN	A DEDUCT:	LOSS I	DEDUCTION	AM	-64,834. -29,390. EMENT 6 IOUNT 2,390. 2,390. EMENT 7 ABLE		
CCOGPEF IV - OTHER INC TOTAL INCLUDED ON SCHE FORM 990-T (A) DESCRIPTION TAX PREPARATION FEES TOTAL TO SCHEDULE A, P. 990-T SCH A PO	OME (LOS DULE A, ART II, DST-2017	PART I OTHEN	A DEDUCT:	LOSS I	LOSS	AM STATE AVAIL THIS	-64,834 -29,390 EMENT 6 IOUNT 2,390 2,390 EMENT 7 EMENT 7		

Name

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-REIT, 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

► Yes X No

Employer identification number

74-1233796

## SOUTHWESTERN UNIVERSITY

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year?

Part I Short-Term Capital Gai					
See instructions for how to figure the amounts	115 anu Lusses - Ass	ets neiu Olle Teal			(h) Gain or (loss)
to enter on the lines below.	(d) Proceeds	<b>(e)</b> Cost	(g) Adjustments to ga or loss from Form(s) 89		Subtract column (e) from column (d) and combine the
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column	(g)	result with column (g)
<ul> <li>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</li> </ul>					
<b>1b</b> 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					24,793.
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 3	7		4	
5 Short-term capital gain or (loss) from like-kin				5	
6 Unused capital loss carryover (attach computa				6	( )
7 Net short-term capital gain or (loss). Combine	e lines 1a through 6 in column	h		7	24,793.
Part II Long-Term Capital Gai	ns and Losses - Ass	ets Held More Tha	n One Year		
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.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the
round off cents to whole dollars.	(	(0. 0		(9)	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					
<b>10</b> Totals for all transactions reported on					
Form(s) 8949 with <b>Box F</b> checked					310,102.
				11	229,317.
12 Long-term capital gain from installment sales		7		12	
13 Long-term capital gain or (loss) from like-king	d exchanges from Form 8824			13	
				14	<b>EDD</b> 44.0
15 Net long-term capital gain or (loss). Combine		nh		15	539,419.
Part III Summary of Parts I and					04 700
16 Enter excess of net short-term capital gain (lir				16	24,793.
17 Net capital gain. Enter excess of net long-term				17	539,419.
<b>18</b> Add lines 16 and 17. Enter here and on Form		plicable line on other return	s	18	564,212.
Note: If losses exceed gains, see Capital Los	ses in the instructions.				

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

Schedule D (Form 1120) 2021

121051 12-17-21



Name(s) shown on return

# 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.

OMB No. 1545-0074

Attachment Sequence No. 12A Social security number or

taxpayer identification no.

74-1233796

SOUTHWESTERN UNIVERSITY

Before you check Box A, B, or C bel	ow see whether	you received any	$(E_{0}) = 1000 - R$	or substitute statem	ant(a) from	Nour broker A ou	l 1'1 1 -
Before you check Box A, B, or C bel statement will have the same informa broker and may even tell you which b	ation as Form 109	99-B. Either will s	show whether you	r basis (usually you	r cost) was	reported to the IR	Stitute S by your
Part I Short-Term. Transact		al assets vou held	1 vear or less are de	nerally short-term (see	e instruction	s). For long-term	
transactions, see page 2. Note: You may aggregate al							liveteente ev
codes are required. Enter the							
You must check Box A, B, or C below.							each applicable box.
(A) Short-term transactions re					,		
(B) Short-term transactions re					Note ab	010)	
X (C) Short-term transactions no			-				
1 (a)	(b)	(c)	(d)	(e)	Adiustmer	it, if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds	Cost or other	loss. If y	où enter an amount	Gain or (loss).
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(sales price)	basis. See the		(g), enter a code in ). See instructions.	Subtract column (e)
, , , , , , , , , , , , , , , , , , ,		(Mo., day, yr.)		Note below and	(f)		from column (d) &
				see Column (e) in the instructions	Code(s)	(g) Amount of	combine the result with column (g)
CCNRP VIII						adjustment	-582.
CCVP XI							114.
CCSSGPE FUND							1,598.
CCNRP X							2,443.
CCSSGPE FUND II							347.
CCVP XII							10,591.
CNRP XI							-35.
CCVP XIII							2,154.
CCSSGPE FUND III							1,799.
CPCF II							6,238.
CCOGPEF IV							126.
2 Totals. Add the amounts in colur	nns (d), (e), (g), a	nd (h) (subtract					
negative amounts). Enter each to							
Schedule D, line 1b (if Box A abo		-					
above is checked), or <b>line 3</b> (if <b>B</b>							24,793.
		, <del>,</del>		-		eported to the IRS	· · · · · ·

91

2021.05080 SOUTHWESTERN UNIVERSITY 80158881

Form 8949 (2021)				Attachn	nent Sequen	ce No. <b>12A</b>	Page <b>2</b>
Name(s) shown on return. Name and	d SSN or taxpaye	er identification n	o. not required if	shown on page 1			rity number or entification no.
SOUTHWESTERN U	NIVERSIT	Y				74-1	233796
Before you check Box D, E, or F belo statement will have the same information	ow, see whether y ation as Form 109		Form(s) 1099-B o show whether you	or substitute statem ır basis (usually you	ent(s) from y r cost) was re		
broker and may even tell you which be           Part II         Long-Term. Transaction	box to check.						
see page 1. Note: You may aggregate all							
codes are required. Enter the You must check Box D, E, or F below. O If you have more long-term transactions than will	Check only one bo	x. If more than one be	ox applies for your long	-term transactions, compl	ete a separate Fo	rm 8949, page 2, for	
(D) Long-term transactions rep							
(E) Long-term transactions rep	orted on Form(s)	) 1099-B showing	g basis <b>wasn't</b> re			-,	
(F) Long-term transactions not				(0)	Adjustment	if any, to gain or	(h)
1 (a) Description of property	(b) Date acquired	(c) Date sold or	<b>(d)</b> Proceeds	(e) Cost or other	loss. If you	enter an amount	(h) Gain or (loss).
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(sales price)	basis. See the	in column (g	), enter a code in See instructions.	Subtract column (e)
		(Mo., day, yr.)		Note below and	(f)	(g)	from column (d) & combine the result
				see Column (e) in the instructions	Code(s)	Amount of adjustment	with column (g)
CCIP VII						aujustment	3,605.
CCPEP VIII							40,380.
CCNRP VIII							-2,571.
CCNRP IX							-892.
CSSREOP FUND							854.
CCVP XI							2,594.
CCSSGPE FUND							12,452.
CCNRP X							6,578.
CCSSGPE FUND II							20,955.
CCVP XII							40,724.
CCVP XIII							61,351.
CCSSGPE FUND III							93,116.
CPCF II							207.
CCOGPEF IV							30,749.
2 Totals Add the emounts in column	$\frac{1}{2}$	nd (b) (aubtract		+			
2 Totals. Add the amounts in colur							
negative amounts). Enter each to		•					
Schedule D, line 8b (if Box D abo above is checked), or line 10 (if E							310,102.
Note: If you checked Box D above b			was incorrect on	ter in column (e) the	hasis as ror	orted to the IPC	·
adjustment in column (g) to correct t				. ,			•

123012 12-14-21

Department of the Treasury Internal Revenue Service Name(s) shown on return

# 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.

OM	BN	lo. 1	1545	-0184

27 Seauence No Identifying number

SOUTHWESTERN UNIVERSITY		74-1233796
1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20	1a	
<b>b</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	1b	
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets	10	

Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Part I Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions)

	man ousdaity of more	moorrope			(see instruction	15/	
2 SE	(a) Description of property CE STATEMENT 8	(b) Date acquired (mo., day, yr.)	<b>(C)</b> Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
3	Gain, if any, from Form 4684, line 39	•	•	•	•	3	
4	Section 1231 gain from installment sa						
5	Section 1231 gain or (loss) from like-k						
6	Gain, if any, from line 32, from other t						
7	Combine lines 2 through 6. Enter the						229,317.
•	Partnerships and S corporations. R	•	•				
	line 10, or Form 1120-S, Schedule K,		· , 0				
	Individuals, partners, S corporation	•			loss ontor the am	ount	
	from line 7 on line 11 below and skip						
	1231 losses, or they were recaptured		•	•			
	the Schedule D filed with your return				0 1 0		
8	Nonroportured pet postion 1921 loss	on from prior you	ra Saa inatruati	000		8	
9	Nonrecaptured net section 1231 loss Subtract line 8 from line 7. If zero or le				o 7 on line 19 hold		
9	line 9 is more than zero, enter the am	-		•			
	capital gain on the Schedule D filed w			and enter the gain		9	229,317.
_							227,517.
Pa	rt II Ordinary Gains and I	-osses (see in	structions)				
10	Ordinary gains and losses not includ	ed on lines 11 th	rough 16 (inclue	le property held 1	vear or less).		
	ordinary game and losses not molda						
	Land If any from the 7						
							)
12	Gain, if any, from line 7 or amount fro						
13	Gain, if any, from line 31						
14	Net gain or (loss) from Form 4684, line						
	Ordinary gain from installment sales f						
16	Ordinary gain or (loss) from like-kind e						
17							
18	For all except individual returns, enter	r the amount fror	n line 17 on the	appropriate line of	your return and sl	kip lines	
	a and b below. For individual returns,	complete lines a	a and b below.				
а	If the loss on line 11 includes a loss fr	rom Form 4684,	line 35, column (	b)(ii), enter that pa	rt of the loss here.	Enter the	
	loss from income-producing property						1
	as an employee.) Identify as from "Fo	rm 4797, line 18a	a." See instructio	ons		<u>18a</u>	
b	Redetermine the gain or (loss) on line	17 excluding the	e loss, if any, on	line 18a. Enter her	e and on Schedule	e 1	
	(Form 1040), Part I, line 4					18b	

(Form 1040), Part I, line 4

LHA For Paperwork Reduction Act Notice, see separate instructions. 118011 12-17-21

74-1233796

Page **2** 

<b>10</b> (a) Description of postion 1045, 1050, 1050, 105	1 0* 1055	araa arti u		(b) Date acqui	ired	(c) Date sold
<b>19</b> (a) Description of section 1245, 1250, 1252, 1254	4, or 1255	property:		(mo., day, yr	r.)	(mo., day, yr.)
Α						
В						
_ C						
D			1			
These columns relate to the properties on lines 19A through 19D.		Property A	Property B	Property	с	Property D
20 Gross sales price (Note: See line 1a before completing	J.) <b>20</b>					
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:						
a Depreciation allowed or allowable from line 22	25a					
<b>b</b> Enter the <b>smaller</b> 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.						
<b>a</b> Additional depreciation after 1975. See instructions	. 26a					
<b>b</b> Applicable percentage multiplied by the <b>smaller</b> of line 24 or line 26a. See instructions	26b					
<b>c</b> Subtract line 26a from line 24. If residential renta property <b>or</b> line 24 isn't more than line 26a, skip lines 26d and 26e						
d Additional depreciation after 1969 and before 1976						
e Enter the smaller of line 26c or 26d	26e					
f Section 291 amount (corporations only)	. 26f					
<b>g</b> Add lines 26b, 26e, and 26f	. 26g					
27 If section 1252 property: Skip this section if you didr dispose of farmland or if this form is being completed f a partnership.	or					
a Soil, water, and land clearing expenses						
<b>b</b> Line 27a multiplied by applicable percentage						
c Enter the smaller of line 24 or 27b	. 27c					
<ul> <li>If section 1254 property:</li> <li>a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instruction</li> </ul>						
<b>b</b> Enter the <b>smaller</b> of line 24 or 28a	. 28b					
29 If section 1255 property: a Applicable percentage of payments excluded						
from income under section 126. See instructions	29a					
<b>b</b> Enter the <b>smaller</b> of line 24 or 29a. See instructions	29b					
Summary of Part III Gains. Complete propert	y columns	A through D throug	n line 29b before goi	ng to line 30.		
<b>30</b> Total gains for all properties. Add property colum	ins A throu	gh D, line 24			30	
<b>31</b> Add property columns A through D, lines 25b, 26	ig, 27c, 28	b, and 29b. Enter he	ere and on line 13		31	
32 Subtract line 31 from line 30. Enter the portion from	om casualt	y or theft on Form 4	684, line 33. Enter th	e portion		
from other than casualty or theft on Form 4797, I	ine 6				32	-
Part IV Recapture Amounts Under Sec (see instructions)	tions 179	e and 280F(b)(2)	When Busines	s Use Drops to	o 50%	or Less
				(a) Section 179	n	(b) Section 280F(b)(2)
33 Section 179 expense deduction or depreciation a	allowable ir	prior vears	3	3		

#### 35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report 118012 12-17-21 94

34 Recomputed depreciation. See instructions

Form 4797 (2021)

## 13230428 794483 80158888

34 35 SOUTHWESTERN UNIVERSITY

74-1233796

FORM 4797	PRO	PERTY HEL	D MORE THA	N ONE YEAR	ST.	ATEMENT 8
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
CCPEP VIII CCNRP VIII CCNRP IX CCSSGPE FUND CCNRP X CCSSGPE FUND II CNRP XI CCSSGPE FUND III CCOSSGPE FUND III						-4. -93. 218. 223,433. 2,896. 1,014. 30. 1,033. 790.
TOTAL TO 4797, PA	RT I, LINE	2				229,317.

= =

= =

= =

Name

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-REIT, 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

► Yes X No

Employer identification number

74-1233796

## SOUTHWESTERN UNIVERSITY

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year?

Part I Short-Term Capital Gai					
See instructions for how to figure the amounts	115 anu Lusses - Ass	ets neiu Olle Teal			(h) Gain or (loss)
to enter on the lines below.	(d) Proceeds	<b>(e)</b> Cost	(g) Adjustments to ga or loss from Form(s) 89		Subtract column (e) from column (d) and combine the
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column	(g)	result with column (g)
<ul> <li>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</li> </ul>					
<b>1b</b> 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					24,793.
4 Short-term capital gain from installment sales	from Form 6252, line 26 or 3	7		4	
5 Short-term capital gain or (loss) from like-kin				5	
6 Unused capital loss carryover (attach computa				6	( )
7 Net short-term capital gain or (loss). Combine	e lines 1a through 6 in column	h		7	24,793.
Part II Long-Term Capital Gai	ns and Losses - Ass	ets Held More Tha	n One Year		
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.	<b>(d)</b> Proceeds (sales price)	<b>(e)</b> Cost (or other basis)	(g) Adjustments to ga or loss from Form(s) 89 Part II, line 2, column	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the
round off cents to whole dollars.	(	(0. 0		(9)	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					
<b>10</b> Totals for all transactions reported on					
Form(s) 8949 with <b>Box F</b> checked					310,102.
				11	229,317.
12 Long-term capital gain from installment sales		7		12	
13 Long-term capital gain or (loss) from like-king	d exchanges from Form 8824			13	
				14	<b>EDD</b> 44.0
15 Net long-term capital gain or (loss). Combine		nh		15	539,419.
Part III Summary of Parts I and					04 700
16 Enter excess of net short-term capital gain (lir				16	24,793.
17 Net capital gain. Enter excess of net long-term				17	539,419.
<b>18</b> Add lines 16 and 17. Enter here and on Form		plicable line on other return	s	18	564,212.
Note: If losses exceed gains, see Capital Los	ses in the instructions.				

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

Schedule D (Form 1120) 2021

121051 12-17-21



Name(s) shown on return

# 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.

OMB No. 1545-0074

2021 Attachment Sequence No. 12A

Social security number or taxpayer identification no.

SOUTHWESTERN U	NIVERSITY	ζ				74-1	233796
Before you check Box A, B, or C belo statement will have the same informa	w, see whether tion as Form 109	you received any 99-B. Either will s	Form(s) 1099-B how whether you	or substitute statem ır basis (usually youı	ent(s) fron r cost) was	n your broker. A su s reported to the IF	bstitute S by your
broker and may even tell you which b Part I Short-Term. Transaction	ox to check. ons involving capit	al assets you held <sup>.</sup>	1 year or less are ge	enerally short-term (see	instruction	s). For long-term	
transactions, see page 2. <b>Note:</b> You may aggregate all							liustments or
codes are required. Enter the	totals directly on S	Schedule D, line 1a	; you aren't required	d to report these transa	actions on F	orm 8949 (see instru	ctions).
You must check Box A, B, or C below. C If you have more short-term transactions than will							each applicable box.
(A) Short-term transactions rep					-		
(B) Short-term transactions rep	orted on Form(s	) 1099-B showin	g basis <b>wasn't</b> r	eported to the IRS			
X (C) Short-term transactions not	t reported to you	on Form 1099-E	3				
1 (a)	(b)	(c)	(d)	(e)		nt, if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds	Cost or other		ou enter an amount (g), enter a code in	Gain or (loss).
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(sales price)	basis. See the <b>Note</b> below and		). See instructions.	Subtract column (e) from column (d) &
		(Mo., day, yr.)		see Column (e) in	(f)	(g)	combine the result
				the instructions	Code(s)	Amount of adjustment	with column (g)
CCNRP VIII							<582.
CCVP XI							114.
CCSSGPE FUND							1,598.
CCNRP X							2,443.
CCSSGPE FUND II							347.
CCVP XII							10,591.
CNRP XI							<35.2
CCVP XIII							2,154.
CCSSGPE FUND III							1,799.
CPCF II							6,238.
CCOGPEF IV							126.
							1201
							<u> </u>
2 Totals Add the amounts in action	ans(d)(a)(a)(a)	nd (b) (subtract					<u> </u>
2 Totals. Add the amounts in colum negative amounts). Enter each tot							
Schedule D, line 1b (if Box A abo		2					
Schedule D, III II II (II DUX A 200							24,793.
above is checked), or line 3 (if Bo	<b>ny C</b> ahovo io oh						1 74 797

97

2021.05080 SOUTHWESTERN UNIVERSITY 80158881

Form 8949 (2021)				Attachm	nent Sequer	nce No. 12A	Page <b>2</b>
Name(s) shown on return. Name and	I SSN or taxpaye	er identification n	o. not required if	shown on page 1			ity number or ntification no.
SOUTHWESTERN U	NIVERSITY	Z				74-1	233796
Before you check Box D, E, or F belo statement will have the same information	ow, see whether y ation as Form 109	ou received any 99-B. Either will s	r Form(s) 1099-B o show whether you	or substitute statem Ir basis (usually you	ent(s) from y r cost) was r	your broker. A sur reported to the IF	bstitute S by your
<b>Part II</b> Long-Term. Transaction see page 1.		al assets you held r	more than 1 year are	e generally long-term (s	ee instruction	ns). For short-term t	ransactions,
Note: You may aggregate all codes are required. Enter the							
You must check Box D, E, or F below. C	Check only one bo	x. If more than one b	ox applies for your long	-term transactions, compl	ete a separate F	orm 8949, page 2, for e	
If you have more long-term transactions than will (D) Long-term transactions rep					-		
(E) Long-term transactions rep						(6)	
X (F) Long-term transactions not			•				
1 (a)	(b)	(c)	(d)	(e)	Adjustment	, if any, to gain or	(h)
Description of property	Date acquired	Date sold or	Proceeds	Cost or other		g), enter an amount	Gain or (loss).
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(sales price)	basis. See the	column (f).	See instructions.	Subtract column (e) from column (d) &
		(Mo., day, yr.)		Note below and see Column (e) in	(f)	(g)	combine the result
				the instructions	Code(s)	Amount of adjustment	with column (g)
CCIP VII							3,605.
CCPEP VIII							40,380.
CCNRP VIII							<2,571.>
CCNRP IX							<892.>
CSSREOP FUND							854.
CCVP XI							2,594.
CCSSGPE FUND							12,452.
CCNRP X							6,578.
CCSSGPE FUND II							20,955.
CCVP XII							40,724.
CCVP XIII							61,351.
CCSSGPE FUND III							93,116.
CPCF II CCOGPEF IV							207. 30,749.
CCOGPEF IV							50,749.
					├		
					<u>├</u>		
2 Totals. Add the amounts in colur							
negative amounts). Enter each to		-					
Schedule D, <b>line 8b</b> (if <b>Box D</b> above is checked), or <b>line 10</b> (if <b>E</b>		•					310,102.
Note: If you checked Box D above b			L was incorrect ent	ter in column (a) the	hasis as re	ported to the IPS	· · · · · · · · · · · · · · · · · · ·
adjustment in column (g) to correct t							

123012 12-14-21

Form <b>4562</b>	
Department of the Treasury Internal Revenue Service	(99)

# **Depreciation and Amortization** (Including Information on Listed Property)

A PG1

OMB No. 1545-0172 2021

Attachment Sequence No. **179** 

1

Attach to your tax return.

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

Name(s) shown on return				ess or ac	Identifying number			
SOUTHWESTERN UNIVERSIT	Ϋ́Υ		PUE	BLIC	74-1233796			
Part I Election To Expense Certain Proper		9 Note: If vo					V before v	
	,							1,050,000.
<ul><li>2 Total cost of section 179 property place</li></ul>								
3 Threshold cost of section 179 property place								2,620,000.
								2,020,000
		-						
5 Dollar limitation for tax year. Subtract line 4 from line 6 (a) Description of pro		J IT married filing	(b) Cost (busin			(c) Elected		
6 (a) Description of pro			(b) OOSt (busin		Jiliy)	(C) Elected (	.051	
7 Listed property. Enter the amount from					7			
8 Total elected cost of section 179 prope	rty. Add amounts	in column (c)	, lines 6 and	7			8	
9 Tentative deduction. Enter the smaller	of line 5 or line 8						9	
10 Carryover of disallowed deduction from	line 13 of your 20	20 Form 456	62				10	
11 Business income limitation. Enter the si								
12 Section 179 expense deduction. Add lin	nes 9 and 10, but	don't enter n	nore than line				12	
13 Carryover of disallowed deduction to 20								
Note: Don't use Part II or Part III below for								
Part II Special Depreciation Allowa	nce and Other De	preciation (	Don't includ	le listed	d prope	erty.)		
14 Special depreciation allowance for qual		• •						
the tax year	1 1 2 (					0	14	
<b>15</b> Property subject to section 168(f)(1) ele								
								806.
16 Other depreciation (including ACRS) Part III MACRS Depreciation (Don't	include listed pro						10	000.
MACKS Depreciation (Don't	include listed pro		ction A					
47 MAODO de destinas for secolo al citado		_					47	
17 MACRS deductions for assets placed in							17	
18 If you are electing to group any assets placed in servi							Lion Overte	
Section B - Assets	(b) Month and		depreciation	T			lion Syste	m
(a) Classification of property	year placed	(business/in	vestment use instructions)		Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
	in service	Uniy - See			-			
<b>19a</b> 3-year property								
<b>b</b> 5-year property								
c 7-year property								
d 10-year property								
e 15-year property								
f 20-year property								
g 25-year property				2	5 yrs.		S/L	
h. Desidential metal and a to	/			27	'.5 yrs.	MM	S/L	
h Residential rental property	/			27	′.5 yrs.	MM	S/L	
	/			3	9 yrs.	MM	S/L	
i Nonresidential real property	/					MM	S/L	
Section C - Assets P	laced in Service	During 2021	Tax Year Us	sing th	e Alte	rnative Depreci		em
20a Class life		-		T			S/L	
b 12-year				1	2 vrs		S/L	
c 30-year	/						S/L	
	/				0 yrs.	MM	S/L	
d 40-year           Part IV         Summary (See instructions.)	/			<u> </u>	5 yr 3.		0/L	
21 Listed property. Enter amount from line				·····			21	
22 Total. Add amounts from line 12, lines								000
Enter here and on the appropriate lines				ions - s	see ins	tr	22	806.
<b>23</b> For assets shown above and placed in								
portion of the basis attributable to secti	ion 263A costs	<u></u>	<u></u>		23			

116251 12-21-21 LHA For Paperwork Reduction Act Notice, see separate Instructions. 2021.05080 SOUTHWESTERN UNIVERSITY

Foi	rm 4562 (2021)	SOU	THWESTE	RN U	NIVE	RSIT	Y					74-	1233	796	Page 2
	art V Listed Proper				ner vehic	les, cert	tain aircr	aft, and	d property	used for					9
	entertainment, <b>Note:</b> For any 24b, columns	vehicle for w	hich you are u	, sing the						e expens	e, comp	olete <b>on</b>	<b>ly</b> 24a,		
		<u> </u>	on and Other	•						mits for p	asseng	er auton	nobiles. )		
24a	Do you have evidence to s	support the bu	siness/investme	nt use cla	aimed?	<b>Y</b>	′es	No	<b>24b</b> If "Y	es," is th	e evide	nce writt	en?	Yes	No
	<b>(a)</b> Type of property (list vehicles first)	<b>(b)</b> Date placed in service	(c) Business/ investment use percentag		<b>(d)</b> Cost or ther basis	(bu	(e) sis for depre usiness/inve use only	stment	<b>(f)</b> Recovery period	Met	<b>g)</b> hod/ ention	Depre	<b>h)</b> eciation uction	Ele sectio	<b>(i)</b> cted on 179 ost
25	Special depreciation all	owance for q	ualified listed	property			0		,						
	used more than 50% in										25				
26	Property used more that									1		1			
		: :		%											
		: :		%											
	Droporty used E00/ or k			%											
27	Property used 50% or le									0/1					
		: :		%						S/L ·					
		: :		%						S/L -					
	A	(h) Kara OF	•	%		1				S/L -	00				
	Add amounts in column												00		
29	Add amounts in column	i (i), line 26. E								<u></u>		<u></u>	29		
0-							on Use					16	. ام مام .		
	mplete this section for ve													/enicies	
το γ	our employees, first ans	wer the ques	tions in Section	on C to s	ee it you	i meet a	an excep	tion to	completin	ig this se	ction to	r those \	enicies.		
					- )		(1-)		(-)		•		- )		n)
~~	Tatal husiness (in cashing and	ام محادثيات معاليت			a)		(b)		(c)	(c		-	e) Siele	(1 ) (1	
30	Total business/investment		•	Ver	nicle	Ve	hicle	V	ehicle	Veh	icle	Ver	nicle	Ven	iicle
	year ( <b>don't</b> include commu														
	Total commuting miles														
32	Total other personal (no driven	-	-												
33	Total miles driven during	g the year.													
	Add lines 30 through 32	<u>2</u>													
34	Was the vehicle availab			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
	during off-duty hours?														
35	Was the vehicle used p	rimarily by a	more												
	than 5% owner or relate	ed person?													
36	Is another vehicle availa														
	use?														
		Section C	- Questions f	or Empl	oyers W	ho Pro	vide Ver	icles f	or Use by	Their E	mploye	es			
Ans	swer these questions to (	determine if y	/ou meet an ex	ception	to comp	oleting S	Section E	8 for ve	hicles use	d by em	oloyees	who a	ren't		
mo	re than 5% owners or rel	ated persons	6.												
37	Do you maintain a writte	en policy stat	ement that pro	ohibits a	II person	al use c	of vehicle	s, inclu	uding com	muting, I	by your			Yes	No
	employees?														
38	Do you maintain a writte														
	employees? See the ins	tructions for	vehicles used	by corp	orate off	icers, di	irectors,	or 1% (	or more o	wners					
39	Do you treat all use of v	ehicles by en	nployees as pe	ersonal u	use?										
40	Do you provide more th	an five vehicl	les to your em	ployees,	obtain i	nformat	ion from	your e	mployees	about					
	the use of the vehicles,	and retain th	e information	received	?			- 	-						
41	Do you meet the require														
	Note: If your answer to														
P	art VI Amortization	<u> </u>													
	(a)		-	(b)		(c)			(d)		(e)			(f)	
	Description o	f costs	Date	amortization begins		Amortizal amoun			Code section		Amortiza period or per			nortization r this year	
42	Amortization of costs th	at begins du	ring your 2021	-	ır:							•			
43	Amortization of costs th	at began bef	fore your 2021		r			- 1		•		43			
	Total. Add amounts in a											44			
-	252 12-21-21	, j. 20											F	orm <b>456</b>	<b>2</b> (2021)
													-		, , ,

## 13230428 794483 80158888

100 2021.05080 SOUTHWESTERN UNIVERSITY 80158881

Form	4	7	9	7	

Department of the Treasury Internal Revenue Service Name(s) shown on return

# 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.

OM	BN	lo. 1	1545	-0184

27 Seauence No Identifying number

SOUTHWESTERN UNIVERSITY		74-1233796
1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20	1a	
<b>b</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	1b	
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS assets	10	

Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Part I Than Casualty or Theft-Most Property Held More Than 1 Year (and instru-...

	man ousdaity of men				(see instruction	15/	
2 SE	(a) Description of property CE STATEMENT 9	(b) Date acquired (mo., day, yr.)	<b>(C)</b> Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	<b>(g)</b> Gain or (loss) Subtract (f) from the sum of (d) and (e)
3	Gain, if any, from Form 4684, line 39					3	
4	Section 1231 gain from installment s						
5	Section 1231 gain or (loss) from like-l						
6	Gain, if any, from line 32, from other	than casualty or t	heft			6	
7	Combine lines 2 through 6. Enter the					7	229,317.
	Partnerships and S corporations. F line 10, or Form 1120-S, Schedule K, Individuals, partners, S corporation	line 9. Skip lines	8, 9, 11, and 12 and all others.	below. If line 7 is zero or a	loss, enter the am	nount	
	from line 7 on line 11 below and skip 1231 losses, or they were recaptured the Schedule D filed with your return	l in an earlier yea	r, enter the gain	from line 7 as a lor			Γ
8	Nonrecaptured net section 1231 loss	es from prior yea	irs. See instructi	ons			
9	Subtract line 8 from line 7. If zero or I	ess, enter -0 If li	ne 9 is zero, ent	er the gain from lin	e 7 on line 12 belo	ow. If	
	line 9 is more than zero, enter the am	ount from line 8	on line 12 below	and enter the gair	n from line 9 as a lo	ong-term	
	capital gain on the Schedule D filed w	vith your return. S	See instructions				229,317.
Pa	rt II Ordinary Gains and	Losses (see in	structions)				
10	Ordinary gains and losses not includ	ted on lines 11 tr	irougn 16 (incluc I	ae property neid 1	year or less): I		
11							()
12	Gain, if any, from line 7 or amount fro						
13	Gain, if any, from line 31						
14	Net gain or (loss) from Form 4684, lin						
15	Ordinary gain from installment sales						
16	Ordinary gain or (loss) from like-kind e						
17							
18	For all except individual returns, ente			appropriate line of	your return and sl	kip lines	
	a and b below. For individual returns,	•					
а	If the loss on line 11 includes a loss f	•					
	loss from income-producing property						
	as an employee.) Identify as from "Fo						
b	Redetermine the gain or (loss) on line	17 excluding the	e loss, if any, on	line 18a. Enter her	e and on Schedule		
	(Form 1040), Part I, line 4					18b	

(Form 1040), Part I, line 4

LHA For Paperwork Reduction Act Notice, see separate instructions. 118011 12-17-21

74-1233796

Page **2** 

<b>9</b> (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:						ired r.)	(c) Date sold (mo., day, yr.)
;							
These columns relate to the properties on							
lines 19A through 19D.		Property A	Property	в	Property	С	Property [
Gross sales price ( <b>Note:</b> See line 1a before completing.)	20						
Cost or other basis plus expense of sale	21						
Depreciation (or depletion) allowed or allowable	22						
Adjusted basis. Subtract line 22 from line 21	23						
Total gain. Subtract line 23 from line 20	24						
If section 1245 property:							
Depreciation allowed or allowable from line 22	25a						
• Enter the <b>smaller</b> of line 24 or 25a	25b						
If section 1250 property: If straight line depreciation							
was used, enter -0- on line 26g, except for a corporation subject to section 291.							
a Additional depreciation after 1975. See instructions	26a						
• 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 <b>or</b> line 24 isn't more than line 26a, skip lines 26d and 26e	26c						
d Additional depreciation after 1969 and before 1976	26d						
e Enter the smaller of line 26c or 26d	26e						
Section 291 amount (corporations only)	26f						
g Add lines 26b, 26e, and 26f	26g						
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	27a						
<b>b</b> Line 27a multiplied by applicable percentage	27b						
c Enter the smaller of line 24 or 27b	27c						
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	28a						
Enter the smaller of line 24 or 28a	28b						
If section 1255 property: Applicable percentage of payments excluded from income under section 126. See instructions	29a						
<b>b</b> Enter the <b>smaller</b> of line 24 or 29a. See instructions	29b						
mmary of Part III Gains. Complete property of	olumns	A through D through	n line 29b before	going	to line 30.		
Total gains for all properties. Add property columns	A throug	gh D, line 24				30	
Add property columns A through D, lines 25b, 26g,	270 204	and 20h Entar ha	re and on line 12			31	
Subtract line 31 from line 30. Enter the portion from					ortion		
from other than casualty or theft on Form 4797, line	-		004, III E 33. ENTE	n une		32	
art IV Recapture Amounts Under Sectio (see instructions)	ons 179	and 280F(b)(2)	When Busin	ess l	Jse Drops to	50%	or Less
· · · ·					(a) Sectio 179	n	(b) Sectior 280F(b)(2)

102

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118012 12-17-21

35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report

2021.05080 SOUTHWESTERN UNIVERSITY

35

Form 4797 (2021)

SOUTHWESTERN UNIVERSITY

74-1233796

FORM 4797		PERTY HELI	D MORE THA	N ONE YEAR	STATEMENT 9		
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS	
CCPEP VIII CCNRP VIII CCNRP IX CCSSGPE FUND CCNRP X CCSSGPE FUND II CNRP XI CCSSGPE FUND III CCOGPEF IV						-4. -93. 218. 223,433. 2,896. 1,014. 30. 1,033. 790.	
TOTAL TO 4797, PA	RT I, LINE	2				229,317.	

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