PUBLIC DISCLOSURE COPY
** PUBLIC DISCLOSURE COPY **
EXTENDED TO MAY 15, 2024

## Exempt Organization Business Income Tax Return

 (and proxy tax under section 6033(e))| Department of the Treasury Internal Revenue Service |  |  |
| :---: | :---: | :---: |
| A | Check box if address changed |  |
| B Exempt under section |  |  |
|  | 501(c) (3 |  |
|  | 408(e) | 220(e) |
|  | 408A | 530(a) |
|  | 529(a) | 529A |

For calendar year 2022 or other tax year beginning JUL 1, 2022
, and ending JUN 30, 2023
Go to www.irs.gov/Form990T for instructions and the latest information.

L The books are in care of LOUIS MAYER, ED.D. Telephone number 201-216-8761
L The books are in care of LOUIS MAYER, ED.D. Telephone number 201-216-8761

| Part I | Total Unrelated Business Taxable Income |
| :--- | :--- |

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)
2 Reserved
3 Add lines 1 and 2
4 Charitable contributions (see instructions for limitation rules)
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3

7 Total of unrelated business taxable income before specific deduction and section 199A deduction.
Subtract line 6 from line 5
8 Specific deduction (generally $\$ 1,000$, but see instructions for exceptions)
9 Trusts. Section 199A deduction. See instructions
10 Total deductions. Add lines 8 and 9
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero

|  |  |
| ---: | ---: |
| 1 | $104,574$. |
| 2 |  |
| 3 | $104,574$. |
| 4 | 0. |
| 5 | $104,574$. |
| 6 | $104,574$. |
| 7 |  |
| 8 | $1,000$. |
| 9 |  |
| 10 | $1,000$. |
| 11 | 0. |

## Part II Tax Computation

1 Organizations taxable as corporations. Multiply Part I, line 11 by 21\% (0.21)
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on
Part I, line 11 from: Tax rate schedule or $\quad$ Schedule D (Form 1041)
3 Proxy tax. See instructions
4 Other tax amounts. See instructions
5 Alternative minimum tax (trusts only)
6 Tax on noncompliant facility income. See instructions
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies

| 1 | 0. |
| :---: | ---: |
|  |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 5 |  |
| 6 |  |
| 7 |  |

## LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-T (2022)

Form 8868
(Rev. January 2022)

Department of the Treasury Internal Revenue Service

## Application for Automatic Extension of Time To File an Exempt Organization Return

- File a separate application for each return.
- Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6 -month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.
Automatic 6-Month Extension of Time. Only submit original (no copies needed).
All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

| Type or print | Name of exempt organization or other filer, see instructions. THE TRUSTEES OF THE STEVENS INSTITUTE OF TECHNOLOGY |  |  | Taxpayer identification number $22-1487354$ | (TIN) |
| :---: | :---: | :---: | :---: | :---: | :---: |
| File by the due date for filing your | Number, street, and room or suite no. If a P.O. box, see instructions. ONE CASTLE POINT ON HUDSON |  |  |  |  |
| instructions | City, town or post office, state, and ZIP code. For a foreign address, see instructions. HOBOKEN, NJ 07030 |  |  |  |  |
| Enter the Return Code for the return that this application is for (file a separate application for each return) |  |  |  |  | 7 |
| Application Is For |  | Return Code | Application Is For |  | Return Code |
| Form 990 or Form 990-EZ |  | 01 | Form 1041-A |  | 08 |
| Form 4720 (individual) |  | 03 | Form 4720 (other than individual) |  | 09 |
| Form 990-PF |  | 04 | Form 5227 |  | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) |  | 05 | Form 6069 |  | 11 |
| Form 990-T (trust other than above) |  | 06 | Form 8870 |  | 12 |
| Form 990-T (corporation) |  | 07 |  |  |  |
| - The books are in the care ofLOUIS MAYER, ED.D. <br> 5 MARINE VIEW PLAZA, SUITE 501 - HOBOKEN, NJ 07030 |  |  |  |  |  |
| Telephone No. 201-216-8761 <br> Fax No. $\qquad$ <br> - If the organization does not have an office or place of business in the United States, check this box <br> - If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) $\qquad$ |  |  |  | this is for the whole group, chec all members the extension is for. | ck this |

1 I request an automatic 6-month extension of time until MAY 15, 2024 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:
$\rightarrow \square$
calendar year $\qquad$
x tax year beginning JUL 1, 2022 or , and ending JUN 30, 2023

2 If the tax year entered in line 1 is for less than 12 months, check reason:
$\square$ Final return $\square$ Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

|  |  |  |  |
| ---: | ---: | ---: | ---: |
|  | 3a | $\$$ | $10,000$. |
|  | 3b | $\$$ | 0. |
|  |  |  |  |
| 3c | $\$$ | $10,000$. |  |

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

\section*{| Part III | Tax and Payments |
| :--- | :--- |}

1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)
b Other credits (see instructions)
c General business credit. Attach Form 3800 (see instructions)
d Credit for prior year minimum tax (attach Form 8801 or 8827)
e Total credits. Add lines 1a through 1d
2 Subtract line 1e from Part II, line 7
3 Other amounts due. Check if from: $\qquad$ Form 4255 Other (attach statement)


|  |  |
| :---: | ---: |
|  |  |
| $1 e$ |  |
| 2 |  |
| 3 |  |
| 4 |  |
| 4 | 0. |
| 5 | 0. |

6a Payments: A 2021 overpayment credited to 2022
b 2022 estimated tax payments. Check if section 643(g) election applies
c Tax deposited with Form 8868
d Foreign organizations: Tax paid or withheld at source (see instructions)
e Backup withholding (see instructions)
f Credit for small employer health insurance premiums (attach Form 8941)
g Other credits, adjustments, and payments: $\square$ Form 2439 $\square$ Form 4136 $\qquad$ $\square$ Other $\qquad$ Total
7 Total payments. Add lines 6 a through 6 g 6 G
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached
9 Tax due. If line 7 is smaller than the total of lines 4,5 , and 8 , enter amount owed
10 Overpayment. If line 7 is larger than the total of lines 4,5 , and 8 , enter amount overpaid
11 Enter the amount of line 10 you want: Credited to 2023 estimated tax 10,000. Refunded

| 7 | $10,000$. |
| :---: | ---: |
| 8 |  |
| 9 |  |
| 10 | $10,000$. |
| 11 | 0. |

Part IV
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
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
\$
\$ 27.

4 Enter available pre-2018 NOL carryovers here \$ 189,304. 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.

Business Activity Code

|  | Available post-2017 NOL carryover |
| :--- | :--- |
| $\$$ | $272,063$. |
| $\$$ |  |

6a Did the organization change its method of accounting? (see instructions)
b If 6 a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V

\section*{| Part V | Supplemental Information |
| :--- | :--- |}

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


| FORM 990-T PRE 2018 NOL SCHEDULE | STATEMENT 1 |
| :---: | :---: |
| PRE-2018 NOL CARRY FORWARD FROM PRIOR YEAR | 189,304. |
| PRE-2018 NOL DEDUCTION INCLUDED IN PART I, LINE 6 | 104,574. |
| SCHEDULE A PORTION OF PRE-2018 NOL SCHEDULE A ENTITY |  |
| 0. |  |
| 0. |  |
| 0. |  |
| 0. |  |
| TOTAL SCHEDULE A SHARE OF PRE-2018 NOL | 0. |
| NET OPERATING DEDUCTION | 104,574. |
| BALANCE AFTER PRE-2018 NOL DEDUCTION | 0. |
| EXPIRING NET OPERATING LOSSES | 0. |
| CARRY FORWARD OF NET OPERATING LOSS | 84,730. |



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).


| Part I Unrelated Trade or Business Income |  | (A) Income | (B) Expenses | (C) Net |
| :---: | :---: | :---: | :---: | :---: |
| 1a Gross receipts or sales <br> b 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 |  |  |  |
| 4a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions | 4a |  |  |  |
| b Net gain (loss) (Form 4797) (attach Form 4797). See instructions) | 4b |  |  |  |
| c 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) ... STMT 3 | 12 | 41,293. |  | 41,293. |
| 13 Total. Combine lines 3 through 12 | 13 | 41,293. |  | 41,293. |

## Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be

 directly connected with the unrelated business income

| Part III | C |
| :---: | :--- |
| $\mathbf{1}$ | Inventory |
| $\mathbf{2}$ | Purchas |
| $\mathbf{3}$ | Cost of I |
| $\mathbf{4}$ | Addition |
| $\mathbf{5}$ | Other co |
| $\mathbf{6}$ | Total. A |
| $\mathbf{7}$ | Inventory |
| $\mathbf{8}$ | Cost of |
| $\mathbf{9}$ | Do the ru |
| Part IV | Re |
| $\mathbf{1}$ | Descript |
|  | A |
|  | B |
|  | $\square$ |
| C |  |
| D | $\square$ |

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 2c columns A through D. Enter here and on Part I, line 6, column (A)
4 in lines 2(a) and 2(b) (attach statement)


## 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.
$\begin{array}{ll}\text { A } & \square \\ \text { B } & \square \\ \text { C } & \square \\ \text { D } & \square\end{array}$ $\qquad$
$\qquad$
$\longrightarrow$
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 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 debtfinanced property (attach statement)
6 Divide line 4 by line 5
7 Gross income reportable. Multiply line 2 by line 6
A

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
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



## Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.
A $\square$
B $\square$
C $\square$
D $\square$ $\longrightarrow$

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

2 Gross advertising income

| A | B | C | D |
| :---: | :---: | :---: | :---: |
|  |  |  | 0. |

Add columns A through D. Enter here and on Part I, line 11, column (A)
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 Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13 .
Part X Compensation of Officers, Directors, and Trustees (see instructions)

| 1. Name | 2. Title | 3. Percentage <br> of time devoted <br> to business | 4. Compensation <br> attributable to <br> unrelated business |
| :--- | :--- | ---: | ---: |
| $(1)$ |  | $\%$ |  |
| $(2)$ |  | $\%$ |  |
| $(3)$ |  | $\%$ |  |
| $(4)$ |  |  |  |

Part XI Supplemental Information (see instructions)

| FORM $990-\mathrm{T}$ (A) | OTHER INCOME |
| :--- | ---: |
| DESCRIPTION | STATEMENT 3 |
| ATHLETICS-OPEN/LESSONS-PUBLIC | AMOUNT |
| TOTAL TO SCHEDULE A, PART I, LINE 12 | $41,293$. |
| $41,293$. |  |

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).

| A | Name of the organization TECHNOLOGY | THE TRUSTEES OF THE | STEVENS INSTITUTE OF | B Employer identification number 22-1487354 |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| C | Unrelated business acti | ity code (see instructions) | 540000 | D Sequence: | 2 | of |  |

E Describe the unrelated trade or business PROFESSIONAL SERVICES

| Unrelated Trade or Business Income |  | (A) Income | (B) Expenses | (C) Net |
| :---: | :---: | :---: | :---: | :---: |
| 1a Gross receipts or sales <br> b 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 |  |  |  |
| 4a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions | 4a |  |  |  |
| b Net gain (loss) (Form 4797) (attach Form 4797). See instructions) | 4b |  |  |  |
| c 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) STMT 4 | 12 | 74,145. |  | 74,145. |
| 13 Total. Combine lines 3 through 12 | 13 | 74,145. |  | 74,145. |

## Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be

 directly connected with the unrelated business income

| Part III | C |
| :---: | :--- |
| $\mathbf{1}$ | Inventory |
| $\mathbf{2}$ | Purchas |
| $\mathbf{3}$ | Cost of I |
| $\mathbf{4}$ | Addition |
| $\mathbf{5}$ | Other co |
| $\mathbf{6}$ | Total. A |
| $\mathbf{7}$ | Inventory |
| $\mathbf{8}$ | Cost of |
| $\mathbf{9}$ | Do the ru |
| Part IV | Re |
| $\mathbf{1}$ | Descript |
|  | A |
|  | B |
|  | $\square$ |
| C |  |
| D | $\square$ |

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 2a and 2 b , columns A through D

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

3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)
4 in lines 2(a) and 2(b) (attach statement)


## 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.
$\begin{array}{ll}\text { A } & \square \\ \text { B } & \square \\ \text { C } & \square \\ \text { D } & \square\end{array}$ $\qquad$


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 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 debtfinanced property (attach statement)
6 Divide line 4 by line 5
7 Gross income reportable. Multiply line 2 by line 6


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
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



| Part IX | Ad |
| ---: | ---: |
| $\mathbf{1}$ | Name(s) |
|  | A $\square$ |
| B $\square$ |  |
| C $\square$ |  |
| D $\square$ |  |

2 Gross advertising income Add columns A through D. Enter here and on Part I, line 11, column (A)
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 Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13 .
Part X Compensation of Officers, Directors, and Trustees (see instructions)

| Part X Compensation of Officers, Directors, and Trustees (see instructions) |  |  |  |
| :--- | :--- | ---: | ---: |
| 1. Name | 2. Title | 3. Percentage <br> of time devoted <br> to business | 4. Compensation <br> attributable to <br> unrelated business |
| (1) |  | $\%$ |  |
| $(2)$ |  | $\%$ |  |
| (3) |  | $\%$ |  |
| (4) |  |  |  |

Part XI Supplemental Information (see instructions)

| FORM 990-T (A) | OTHER INCOME |
| :--- | ---: |
| DESCRIPTION | STATEMENT 4 |
| BUILDING TECHNOLOGY LABORATORY | AMOUNT |
| TOTAL TO SCHEDULE A, PART I, LINE 12 | $74,145$. |
| $74,145$. |  |

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 $501(\mathrm{c})(3)$.

| AName of the organization <br> TECHNOLOGY |  | B TRUSTEES OF THE STEVENS INSTITUTE OF | Employer identification number |
| :--- | :---: | :---: | :---: |
| $22-1487354$ |  |  |  |

E Describe the unrelated trade or business PARTNERSHIP INVESTMENT

| Part I Unrelated Trade or Business Income |  | (A) Income | (B) Expenses | (C) Net |
| :---: | :---: | :---: | :---: | :---: |
| 1a Gross receipts or sales <br> b 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 |  |  |  |
| 4a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions | 4a | 2,231. |  | 2,231. |
| b Net gain (loss) (Form 4797) (attach Form 4797). See instructions) | 4b |  |  |  |
| c Capital loss deduction for trusts | 4c |  |  |  |
| 5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 5 | 5 | 107,043. |  | 107,043. |
| 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 | 109,274. |  | 109,274. |

## Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be

 directly connected with the unrelated business income

| Part III | C |
| :---: | :--- |
| $\mathbf{1}$ | Inventory |
| $\mathbf{2}$ | Purchas |
| $\mathbf{3}$ | Cost of I |
| $\mathbf{4}$ | Addition |
| $\mathbf{5}$ | Other co |
| $\mathbf{6}$ | Total. A |
| $\mathbf{7}$ | Inventory |
| $\mathbf{8}$ | Cost of |
| $\mathbf{9}$ | Do the ru |
| Part IV | Re |
| $\mathbf{1}$ | Descript |
|  | A |
|  | B |
| C |  |
| C | $\square$ |
| D |  |

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 2c columns A through D. Enter here and on Part I, line 6, column (A)
4 in lines 2(a) and 2(b) (attach statement)


## 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 $\square$
B $\square$ $\qquad$
C $\square$
D $\square$ $\qquad$

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 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 debtfinanced property (attach statement)
6 Divide line 4 by line 5
7 Gross income reportable. Multiply line 2 by line 6
A

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
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

| Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions) |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 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 | 8. Net unrelated income (loss) (see instructions) | 9. Total of spec payments ma |  | 10. Part that is inc controlling gross | of column 9 luded in the organization's income |  | Deductions directly connected with come in column 10 |
| (1) |  |  |  |  |  |  |  |
| (2) |  |  |  |  |  |  |  |
| (3) |  |  |  |  |  |  |  |
| (4) |  |  |  |  |  |  |  |
|  |  |  |  | Add colum Enter here line 8 , | ns 5 and 10. and on Part I, column (A) |  | d columns 6 and 11 . er here and on Part I, line 8, column (B) |
| Totals |  |  |  |  |  |  | 0. |



| Part IX | Ad |
| ---: | ---: |
| $\mathbf{1}$ | Name(s) |
|  | A $\square$ |
| B $\square$ |  |
| C $\square$ |  |
| D | $\square$ |

2 Gross advertising income Add columns A through D. Enter here and on Part I, line 11, column (A)
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 Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13 .
Part X Compensation of Officers, Directors, and Trustees (see instructions)

| Part X Compensation of Officers, Directors, and Trustees (see instructions) |  |  |  |
| :--- | :--- | ---: | ---: |
| 1. Name | 2. Title | 3. Percentage <br> of time devoted <br> to business | 4. Compensation <br> attributable to <br> unrelated business |
| (1) |  | $\%$ |  |
| $(2)$ |  | $\%$ |  |
| (3) |  | $\%$ |  |
| (4) |  |  |  |

Part XI Supplemental Information (see instructions)

| FORM 990-T (A) INCOME (LOSS) FROM PARTNERSHIPS | STATEMENT 5 |
| :---: | :---: |
| DESCRIPTION | $\begin{array}{cc} \text { NET } & \text { INCOME } \\ \text { OR } & \text { (LOSS }) \end{array}$ |
| COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS V, LP - |  |
| ORDINARY BUSINESS INCO | -9,357. |
| KKR NORTH AMERICA FUND XI (CAGE), LP - ORDINARY BUSINESS |  |
| INCOME (LOSS) | 5,433. |
| KKR NORTH AMERICA FUND XI (INDIGO) LP - NET RENTAL REAL |  |
| ESTATE INCOME | 316. |
| KKR NORTH AMERICA FUND XI (INDIGO) LP - OTHER INCOME (LOSS ) | -1,801. |
| KKR NORTH AMERICA FUND XI, LP - OTHER INCOME (LOSS) | -25. |
| KKR NORTH AMERICA FUND XI (PLATINUM), LP - ORDINARY |  |
| BUSINESS INCOME (LOSS) | -2,177. |
| KKR NORTH AMERICA FUND XI (POTAMOI), LP - ORDINARY |  |
| BUSINESS INCOME (LOSS) | -7,920. |
| KKR NORTH AMERICA FUND XI (WAVE), LP - ORDINARY BUSINESS |  |
| INCOME (LOSS) | -8,600. |
| KKR NORTH AMERICA FUND XI (WAVE), LP - NET RENTAL REAL |  |
| ESTATE INCOME | 149. |
| KKR NORTH AMERICA FUND XI (WAVE), LP - INTEREST INCOME |  |
| KKR NORTH AMERICA FUND XI (WAVE), LP - OTHER INCOME (LOSS) | -55. |
| KKR NORTH AMERICA FUND XI (TRAIN), LP - ORDINARY BUSINESS |  |
| INCOME (LOSS) | 605. |
| PLAINS ALL AMERICAN PIPELINE, LP - ORDINARY BUSINESS |  |
| INCOME (LOSS) | 5,718. |
| HUFF ENERGY FUND, LP - OTHER INCOME (LOSS) | 124,750. |
| TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5 | 107,043. |


| FORM 990-T (A) | OTHER DEDUCTIONS | STATEMENT |
| :---: | :---: | :---: |
| DESCRIPTION |  | AMOUNT |
| TAX PREPARATION FEES |  | 21,600. |
| INVESTMENT MANAGEMENT |  | 4,859. |
| TOTAL TO SCHEDULE A, | NE 14 | 26,459. |



| Name |  |
| :--- | :--- |
|  | THE TRUSTEES OF THE STEVENS INSTITUTE OF |
|  | TECHNOLOGY |

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ................................. $\square$ Yes X No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

| Short-Term Capital Gains and Losses - Assets Held One Year or Less |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| See instructions for how to figure the amounts to enter on the lines below. <br> This form may be easier to complete if you round off cents to whole dollars. |  | (d) <br> Proceeds (sales price) | (e) <br> Cost <br> (or other basis) | (g) Adjustments to or loss from Form(s) Part I, line 2, colum |  | (h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g) |
| 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b |  |  |  |  |  |  |
| 1b Totals for all transactions reported on Form(s) 8949 with Box A checked |  |  |  |  |  |  |
| 2 Totals for all transactions reported on Form(s) 8949 with Box B checked |  |  |  |  |  |  |
| 3 Totals for all transactions reported on Form(s) 8949 with Box C checked |  |  |  |  |  | 30. |
| 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37 <br> 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 <br> 6 Unused capital loss carryover (attach computation) <br> 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h |  |  |  |  | 4 |  |
|  |  |  |  |  | 5 |  |
|  |  |  |  |  | 6 | ) |
|  |  |  |  |  | 7 | 30. |

Part II


Note: If losses exceed gains, see Capital Losses in the instructions.

## Form <br> 8949

Department of the Treasury Internal Revenue Service

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.

Social security number or taxpayer identification no.

22-1487354
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.
(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

| 1 <br> (a) <br> Description of property <br> (Example: 100 sh. XYZ Co.) | (b) <br> Date acquired <br> (Mo., day, yr.) | (c) Date sold or disposed of | (d) <br> Proceeds (sales price) | (e) <br> Cost or other basis. See the | Adjustm loss. If in colum column | if any, to gain or enter an amount , enter a code in ee instructions. | (h) Gain or (loss). Subtract column (e) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | see Column (e) in the instructions | $\begin{array}{\|c\|} \hline(\mathbf{f}) \\ \operatorname{Code}(\mathrm{s}) \end{array}$ | $(\mathbf{g})$ Amount of adjustment | combine the result with column (g) |
| KKR NORTH AMERICA FUND XI |  |  |  |  |  |  |  |
| (INDIGO) LP |  |  |  |  |  |  | 30. |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| 2 Totals. Add the amounts in col negative amounts). Enter each Schedule D, line 1b (if Box A ab above is checked), or line 3 (if | nns (d), (e), (g), tal here and incl ve is checked), ox C above is ch | nd (h) (subtract ude on your ine 2 (if Box B ecked) |  |  |  |  | 30. |

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.
223011 10-24-22 LHA For Paperwork Reduction Act Notice, see your tax return instructions.
Form 8949 (2022)

Sales of Business Property
OMB No. 1545-0184
(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

2022
Department of the Treasury Internal Revenue Service

Attach to your tax return.
Go to www.irs.gov/Form4797 for instructions and the latest information.

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
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

| $1 a$ |  |
| :---: | :--- |
| $1 b$ |  |
| $1 b$ |  |

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)

| 2 <br> SEE | (a) Description of property STATEMENT 9 | (b) Date acquired (mo., day, yr.) | (c) Date sold (mo., day, yr.) | (d) $\underset{\substack{\text { Gross sales } \\ \text { price }}}{ }$ | (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 sales from Form 6252, line 26 or 37 |  |  |  |  |  | 4 |  |
| 5 | Section 1231 gain or (loss) from like-kind exchanges from Form 8824 |  |  |  |  |  | 5 |  |
| 6 | Gain, if any, from line 32, from other than casualty or theft |  |  |  |  |  | 6 |  |
| 7 | Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows |  |  |  |  |  | 7 | 2,201. |
| $\begin{aligned} & \text { P } \\ & \text { lir } \end{aligned}$ | Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. |  |  |  |  |  |  |  |
|  | Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9 . If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines $8,9,11$, and 12 below. |  |  |  |  |  |  |  |
|  | Nonrecaptured net section 1231 losses from prior years. See instructions |  |  |  |  |  | 8 |  |
| 9 Subtract line 8 from line 7 . If zero or less, enter -0 . If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions |  |  |  |  |  |  | 9 | 2,201. |

## Part II Ordinary Gains and Losses (see instructions)

$\mathbf{1 0} \quad$ Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):


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

| 19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property: |  |  |  | (b) Date acquired (mo., day, yr.) | (c) Date sold (mo., day, yr.) |
| :---: | :---: | :---: | :---: | :---: | :---: |
| A |  |  |  |  |  |
| B |  |  |  |  |  |
| C |  |  |  |  |  |
| D |  |  |  |  |  |
| These columns relate to the properties on lines 19A through 19D. |  | Property A | Property B | Property C | Property D |
| 20 Gross sales price (Note: See line 1a before completing.) <br> 21 Cost or other basis plus expense of sale <br> 22 Depreciation (or depletion) allowed or allowable <br> 23 Adjusted basis. Subtract line 22 from line 21 <br> 24 Total gain. Subtract line 23 from line 20 | 20 |  |  |  |  |
|  | 21 |  |  |  |  |
|  | 22 |  |  |  |  |
|  | 23 |  |  |  |  |
|  | 24 |  |  |  |  |
| 25 If section 1245 property: <br> a Depreciation allowed or allowable from line 22 <br> b Enter the smaller of line 24 or 25a | 25a |  |  |  |  |
|  | 25b |  |  |  |  |
| 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. <br> a Additional depreciation after 1975. See instructions <br> b Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions | 26a |  |  |  |  |
|  | 26b |  |  |  |  |
| 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 |  |  |  |  |
| d Additional depreciation after 1969 and before 1976 <br> e Enter the smaller of line 26 c or 26d | 26d |  |  |  |  |
|  | 26e |  |  |  |  |
| f Section 291 amount (corporations only) <br> g Add lines 26b, 26e, and 26 f | $26 f$ |  |  |  |  |
|  | 26 g |  |  |  |  |
| 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. <br> a Soil, water, and land clearing expenses <br> b Line 27a multiplied by applicable percentage <br> c Enter the smaller of line 24 or 27b | 27a |  |  |  |  |
|  | 27b |  |  |  |  |
|  | 27c |  |  |  |  |
| 28 If section 1254 property: <br> a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions <br> b Enter the smaller of line 24 or 28a | 28a |  |  |  |  |
|  | 28b |  |  |  |  |
| 29 If section 1255 property: <br> a Applicable percentage of payments excluded from income under section 126. See instructions <br> b Enter the smaller of line 24 or 29a. See instructions | 29a |  |  |  |  |
|  | 29b |  |  |  |  |

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

31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13
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

| 30 |  |
| :---: | :--- |
| 31 |  |
|  |  |
| 32 |  |

## Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50\% or Less

(see instructions)

33 Section 179 expense deduction or depreciation allowable in prior years
34 Recomputed depreciation. See instructions
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report

|  |
| :--- |
| 33 |
| 34 |
| 35 |


| (a) Section <br> 179 | (b) Section <br> $280 F(b)(2)$ |
| :---: | :---: |
|  |  |
|  |  |

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).


E Describe the unrelated trade or business PERSONAL PROPERTY RENTALS

| Part I Unrelated Trade or Business Income |  | (A) Income | (B) Expenses | (C) Net |
| :---: | :---: | :---: | :---: | :---: |
| 1a Gross receipts or sales <br> b 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 |  |  |  |
| 4a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions | 4a |  |  |  |
| b Net gain (loss) (Form 4797) (attach Form 4797). See instructions) | 4b |  |  |  |
| c 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) ...STMT 8 | 12 | 6,225. |  | 6,225. |
| 13 Total. Combine lines 3 through 12 | 13 | 6,225. |  | 6,225. |

## 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 |  |
| 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 |  |  | 11 |  |
| 12 | Excess exempt expenses (Part VIII) |  |  | 12 |  |
| 13 | Excess readership costs (Part IX) |  |  | 13 |  |
| 14 | Other deductions (attach statement) |  |  | 14 |  |
| 15 | Total deductions. Add lines 1 through 14 |  |  | 15 | 0 . |
| 16 | Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) |  |  | 16 | 6,225. |
| 17 | Deduction for net operating loss. See instructions |  |  | 17 | 0. |
| 18 | Unrelated business taxable income. Subtract line 17 from line 16 |  |  | 18 | 6,225. |
| LHA | For Paperwork Reduction Act Notice, see instructions. |  |  | hed | Schedule A (Form 990-T) 2022 |


| Part III | C |
| :---: | :--- |
| $\mathbf{1}$ | Inventory |
| $\mathbf{2}$ | Purchas |
| $\mathbf{3}$ | Cost of I |
| $\mathbf{4}$ | Addition |
| $\mathbf{5}$ | Other co |
| $\mathbf{6}$ | Total. A |
| $\mathbf{7}$ | Inventory |
| $\mathbf{8}$ | Cost of |
| $\mathbf{9}$ | Do the ru |
| Part IV | Re |
| $\mathbf{1}$ | Descript |
|  | A |
|  | B |
| C |  |
| C | $\square$ |
| D |  |

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 2a and 2 b , columns A through D

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

3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)
4 in lines 2(a) and 2(b) (attach statement)


## 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.
$\begin{array}{ll}\text { A } & \square \\ \text { B } & \square \\ \text { C } & \square \\ \text { D } & \square\end{array}$ $\qquad$


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 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 debtfinanced property (attach statement)
6 Divide line 4 by line 5
7 Gross income reportable. Multiply line 2 by line 6


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
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

| Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions) |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 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 | 8. Net unrelated income (loss) (see instructions) | 9. Total of spec payments ma |  | 10. Part that is inc controlling gross | of column 9 luded in the organization's income |  | Deductions directly connected with come in column 10 |
| (1) |  |  |  |  |  |  |  |
| (2) |  |  |  |  |  |  |  |
| (3) |  |  |  |  |  |  |  |
| (4) |  |  |  |  |  |  |  |
|  |  |  |  | Add colum Enter here line 8 , | ns 5 and 10. and on Part I, column (A) |  | d columns 6 and 11 . er here and on Part I, line 8, column (B) |
| Totals |  |  |  |  |  |  | 0. |



## Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.
A $\square$
B $\square$
C $\square$
D $\square$ $\longrightarrow$

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

2 Gross advertising income

| A | B | C | D |
| :---: | :---: | :---: | :---: |
|  |  |  | 0. |

Add columns A through D. Enter here and on Part I, line 11, column (A)
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 Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13.
Part X Compensation of Officers, Directors, and Trustees (see instructions)

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

Part XI Supplemental Information (see instructions)


| FORM 4797 | PROPERTY HELD MORE THAN ONE YEAR |  | STATEMENT 9 |
| :--- | :--- | :--- | :--- | :--- | :--- |

Name
THE TRUSTEES OF THE STEVENS INSTITUTE OF TECHNOLOGY
Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? ............................... $\square$ Yes X No

If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss.

| Short-Term Capital Gains and Losses - Assets Held One Year or Less |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| See instructions for how to figure the amounts to enter on the lines below. <br> This form may be easier to complete if you round off cents to whole dollars. |  | (d) <br> Proceeds (sales price) | (e) <br> Cost (or other basis) | (g) Adju or loss fr Part I, |  | (h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g) |
| 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b |  |  |  |  |  |  |
| 1b Totals for all transactions reported on Form(s) 8949 with Box A checked |  |  |  |  |  |  |
| 2 Totals for all transactions reported on Form(s) 8949 with Box B checked |  |  |  |  |  |  |
| 3 Totals for all transactions reported on Form(s) 8949 with Box C checked |  |  |  |  |  | 30. |
| 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37 <br> 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 |  |  |  |  | 4 |  |
|  |  |  |  |  | 5 |  |
| 6 Unused capital loss carryover (attach computation) |  |  | SEE | ENT 10 | 6 | 999.) |
| 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h |  |  |  |  | 7 | -969. |

Part II


Note: If losses exceed gains, see Capital Losses in the instructions.

## Form <br> 8949

Department of the Treasury Internal Revenue Service

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.

Social security number or taxpayer identification no.

22-1487354
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.
(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

| 1 <br> (a) <br> Description of property (Example: 100 sh. XYZ Co.) | (b) <br> Date acquired (Mo., day, yr.) | (c) <br> Date sold or disposed of | (d) Proceeds (sales price) | (e) <br> Cost or other basis. See the | Adjustm loss. in colu | f any, to gain or enter an amount , enter a code in ee instructions. | (h) <br> Gain or (loss). <br> ubtract column (e) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | see Column (e) in the instructions | $\begin{array}{\|c\|} \hline(\mathrm{f}) \\ \operatorname{Code}(\mathrm{s}) \end{array}$ | (g) Amount of adjustment | combine the result with column (g) |
| KKR NORTH AMERICA FUND XI |  |  |  |  |  |  |  |
| (INDIGO) LP |  |  |  |  |  |  | 30. |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| 2 Totals. Add the amounts in colu negative amounts). Enter each Schedule D, line 1b (if Box A ab above is checked), or line 3 (if | mns (d), (e), (g), tal here and incl ve is checked), ox $\mathbf{C}$ above is c | nd (h) (subtract ude on your line 2 (if Box B ecked) $\qquad$ |  |  |  |  | 30. |

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.
223011 10-24-22 LHA For Paperwork Reduction Act Notice, see your tax return instructions.
Form 8949 (2022) Depreciation and Amortization
(Including Information on Listed Property) A PG1

Part I $\quad$ Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.


18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here
Section B - Assets Placed in Service During 2022 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only - see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 19a 3-year property |  |  |  |  |  |  |
| b 5-year property |  |  |  |  |  |  |
| c 7-year property |  |  |  |  |  |  |
| d 10-year property |  |  |  |  |  |  |
| e 15-year property |  |  |  |  |  |  |
| f 20-year property |  |  |  |  |  |  |
| g 25-year property |  |  | 25 yrs. |  | S/L |  |
| h R | 1 |  | 27.5 yrs. | MM | S/L |  |
| h | 1 |  | 27.5 yrs. | MM | S/L |  |
| i Nonresidential real prof | 1 |  | 39 yrs. | MM | S/L |  |
| Nonresidential real prop | / |  |  | MM | S/L |  |

## Section C - Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System



## Part IV $\quad$ Summary (See instructions.)

21 Listed property. Enter amount from line 28
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column ( g ), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs
entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24 a ,
24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.
Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)
24a Do you have evidence to support the business/investment use claimed? $\quad \square$ Yes $\square \square$ No $\quad$ 24b If "Yes," is the evidence written? $\square$ Yes $\square$ No
Cost or
Type of property (list vehicles first)

| (b) | (c) |
| :---: | :---: |
| Date | Business/ |
| placed in | investment |
| service | use percentage | other basis Basis for depr (busis for depreciation

ty placed ir
ty placed in service use only)

| (f) |
| :---: | :---: | :---: |
| Recovery |
| period |

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than $50 \%$ in a qualified business use

| (g) <br> Method/ <br> Convention |  |
| :---: | :---: |
|  |  |
| $\ldots . . .$. | 2 |

26 Property used more than 50\% in a qualified business use:


## Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than $5 \%$ owner," or related person. If you provided vehicles to your employees, first answer the questions in Section $C$ to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (don't include commuting miles)
31 Total commuting miles driven during the year
32 Total other personal (noncommuting) miles driven

33 Total miles driven during the year.
Add lines 30 through 32
34 Was the vehicle available for personal use during off-duty hours?
35 Was the vehicle used primarily by a more than $5 \%$ owner or related person?
36 Is another vehicle available for personal use?


## Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5\% owners or related persons.
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your
employees? See the instructions for vehicles used by corporate officers, directors, or $1 \%$ or more owners
39 Do you treat all use of vehicles by employees as personal use?
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?
41 Do you meet the requirements concerning qualified automobile demonstration use?
Note: If your answer to $37,38,39,40$, or 41 is "Yes," don't complete Section B for the covered vehicles.

## Part VI Amortization

| (a) | (b) <br> Description of costs | (c) <br> Amortizable <br> amount | (d) <br> Codertization <br> begins | (e) <br> section | Amortization <br> period or percentage |
| :---: | :---: | :---: | :---: | :---: | :---: |

42 Amortization of costs that begins during your 2022 tax year:


Sales of Business Property
OMB No. 1545-0184
(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

2022
Department of the Treasury Internal Revenue Service

Attach to your tax return.
Go to www.irs.gov/Form4797 for instructions and the latest information.

## TECHNOLOGY

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
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

| $1 a$ |  |
| :---: | :--- |
| $1 b$ |  |
| $1 b$ |  |

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)

| 2 | (a) Description of property E STATEMENT 11 | (b) Date acquired (mo., day, yr.) | (c) Date sold (mo., day, yr.) | (d) Gross sales price | (e) Depreciation allowed or allowable since acquisition | (f) Cost or 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 sales from Form 6252, line 26 or 37 |  |  |  |  |  | 4 |  |
| 5 | Section 1231 gain or (loss) from like-kind exchanges from Form 8824 |  |  |  |  |  | 5 |  |
| 6 | Gain, if any, from line 32, from other than casualty or theft |  |  |  |  |  | 6 |  |
| 7 | Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows |  |  |  |  |  | 7 | 2,201. |
|  | Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9 . Skip lines $8,9,11$, and 12 below. |  |  |  |  |  |  |  |
|  | Individuals, partners, $\mathbf{S}$ corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9 . If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule $D$ filed with your return and skip lines $8,9,11$, and 12 below. |  |  |  |  |  |  |  |
| 8 | Nonrecaptured net section 1231 losses from prior years. See instructions ................................................... |  |  |  |  |  | 8 |  |
|  | Subtract line 8 from line 7 . If zero or less, enter -0 . If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions |  |  |  |  |  | 9 | 2,201. |

## Part II Ordinary Gains and Losses (see instructions)

$\mathbf{1 0} \quad$ Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):


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

| 19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property: |  |  |  | (b) Date acquired (mo., day, yr.) | (c) Date sold (mo., day, yr.) |
| :---: | :---: | :---: | :---: | :---: | :---: |
| A |  |  |  |  |  |
| B |  |  |  |  |  |
| C |  |  |  |  |  |
| D |  |  |  |  |  |
| These columns relate to the properties on lines 19A through 19D. |  | Property A | Property B | Property C | Property D |
| 20 Gross sales price (Note: See line 1a before completing.) <br> 21 Cost or other basis plus expense of sale <br> 22 Depreciation (or depletion) allowed or allowable <br> 23 Adjusted basis. Subtract line 22 from line 21 <br> 24 Total gain. Subtract line 23 from line 20 | 20 |  |  |  |  |
|  | 21 |  |  |  |  |
|  | 22 |  |  |  |  |
|  | 23 |  |  |  |  |
|  | 24 |  |  |  |  |
| 25 If section 1245 property: <br> a Depreciation allowed or allowable from line 22 <br> b Enter the smaller of line 24 or 25a | 25a |  |  |  |  |
|  | 25b |  |  |  |  |
| 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. <br> a Additional depreciation after 1975. See instructions <br> b Applicable percentage multiplied by the smaller of line 24 or line 26 a. See instructions | 26a |  |  |  |  |
|  | 26b |  |  |  |  |
| 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 |  |  |  |  |
| d Additional depreciation after 1969 and before 1976 <br> e Enter the smaller of line 26 c or 26 d | 26d |  |  |  |  |
|  | 26 e |  |  |  |  |
| f Section 291 amount (corporations only) <br> g Add lines 26b, 26e, and $26 f$ | 266 |  |  |  |  |
|  | 26 g |  |  |  |  |
| 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. <br> a Soil, water, and land clearing expenses <br> b Line 27a multiplied by applicable percentage <br> c Enter the smaller of line 24 or 27b | 27a |  |  |  |  |
|  | 27b |  |  |  |  |
|  | 27c |  |  |  |  |
| 28 If section 1254 property: <br> a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions <br> b Enter the smaller of line 24 or 28a | 28a |  |  |  |  |
|  | 28b |  |  |  |  |
| 29 If section 1255 property: <br> a Applicable percentage of payments excluded from income under section 126. See instructions <br> b Enter the smaller of line 24 or 29a. See instructions | 29a |  |  |  |  |
|  | 29b |  |  |  |  |

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

31 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13
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

| 30 |  |
| :---: | :--- |
| 31 |  |
|  |  |
| 32 |  |

## Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50\% or Less

(see instructions)

33 Section 179 expense deduction or depreciation allowable in prior years
34 Recomputed depreciation. See instructions
35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report

|  |
| :--- |
| 33 |
| 34 |
| 35 |


| (a) Section <br> 179 | (b) Section <br> $280 F(b)(2)$ |
| :---: | :---: |
|  |  |
|  |  |



| FORM 4797 | PROPERTY HELD MORE THAN ONE YEAR |  | STATEMENT 11 |
| :--- | :--- | :--- | :--- |

