

** PUBLIC DISCLOSURE COPY **

EXTENDED TO MAY 15, 2024

Paper trivent of the Triessury Processing of the tax year beginning JUL 1, 2022andering JUN 30, 2023	Form	990-T Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))					
Description of the Treatury Description for instructions and the latest information Description for instructions and the latest information Description for instructions and the latest information Description for instructions Descriptio			_			2022	
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 Impaction Cody			For ca		— ·	ZUZZ	
Print TRE TRUSPESS OF THE SECUND INSTITUTE OF THE SECUND INSTITUTE OF	Depar Interna	tment of the Treasury al Revenue Service	ı	<u> </u>			
Number, street, and room or suite no. If a P.O. box, see instructions. Force peemption number (see instructions) Signature Signatu	Α				DEmpl	oyer identification number	
A08(e) 220(e) A08(e) 220(e) A08A 530(a) S29(a) S29	B Ex	xempt under section	Print	TECHNOLOGY		22-1487354	
Segrate Format	X		_				
Check organization type		()			F	Check box if	
Check organization type			С Во	ok value of all assets at end of year	7	an amended return.	
Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation J	G	Check organization			State		
Section Subtract line Section Section	Н	Check if filing only to)	Claim credit from Form 8941 Claim a refund shown on Form 2439			
K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes," enter the name and identifying number of the parent corporation. 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 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 5 Deduction for net operating loss. See instructions 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 1 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero 1 Unrelated business taxable income. Subtract line 11 by 21% (0.21) 1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21) 1 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on	1 (Check if a 501(c)(3)	organiz	ation filing a consolidated return with a 501(c)(2) titleholding corporation			
If "Yes," enter the name and identifying number of the parent corporation. The books are in care of LOUIS MAYER, ED.D. Telephone number 201-216-8761	J	Enter the number of	attach	ed Schedules A (Form 990-T)		4	
The books are in care of LOUIS MAYER, ED.D. Telephone number 201-216-8761 Part Total Unrelated Business Taxable Income	K [During the tax year,	was the	e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?		Yes X No	
Total of unrelated Business Taxable Income Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 1		f "Yes," enter the na	ame an	d identifying number of the parent corporation.			
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 6 Deduction for net operating loss. See instructions 7 Total of unrelated business taxable income before specific deduction and section 199A deduction. 8 Subtract line 6 from line 5 7 Secific deduction (generally \$1,000, but see instructions for exceptions) 9 Trusts. Section 199A deduction. See instructions 1 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero 1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21) 1 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on				,	201-21	.6-8761	
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enter zero Part II Tax Computation 1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21) 1 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on	10				10	1,000.	
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1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21) 1 0. Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on	Do				<u> 11</u>	0.	
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on					Τ.		
					1	0.	
Part I, line 11 from: Tax rate schedule or Schedule D (Form 1041)	2						
3 Proxy tax. See instructions 3	•	•		· · · · · · · · · · · · · · · · · · ·			
		•					
		-				0	
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies 7 U.S. LHA For Paperwork Reduction Act Notice, see instructions. Form 990-T (2022)							

223701 01-16-23

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.

OMB No. 1545-0047

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 Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) THE TRUSTEES OF THE STEVENS INSTITUTE OF print TECHNOLOGY 22-1487354 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your ONE CASTLE POINT ON HUDSON return. See 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) **Application** Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ Form 1041-A 01 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) LOUIS MAYER, ED.D. Telephone No. ▶ 201-216-8761 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this If it is for part of the group, check this box MAY 15, 2024 I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year ▶ X tax year beginning JUL 1, 2022 JUN 30, 2023 , and ending Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 10,000. any nonrefundable credits. See instructions. 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. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by 10 000 using EFTPS (Electronic Federal Tax Payment System). See instructions. 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

223841 04-01-22

LHA

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

Part		Tax and Payments			<u>'</u>	age Z
		ign tax credit (corporations attach Form 1118; trusts attach Form 1116)				
1a						
b		· · · · · · · · · · · · · · · · · · ·				
C		eral business credit. Attach Form 3800 (see instructions)				
d		it for prior year minimum tax (attach Form 8801 or 8827)				
е		I credits. Add lines 1a through 1d		1e		
2		ract line 1e from Part II, line 7		2		0.
3	Other	r amounts due. Check if from: Form 4255 Form 8611 Form 8697	Form 8866			
		Other (attach statement)		3		
4		I tax. Add lines 2 and 3 (see instructions). Check if includes tax previously defer	red under			
		on 1294. Enter tax amount here		4		0.
5		ent net 965 tax liability paid from Form 965-A, Part II, column (k)		5		0.
6a	Paym	nents: A 2021 overpayment credited to 2022				
b	2022	estimated tax payments. Check if section 643(g) election applies 6b				
С		deposited with Form 8868 6c	10,000.			
d		gn organizations: Tax paid or withheld at source (see instructions) 6d				
е	Back	sup withholding (see instructions) 6e				
f		it for small employer health insurance premiums (attach Form 8941)				
g		r credits, adjustments, and payments: Form 2439				
		Form 4136 Other Total 6g				
7	Total	I payments. Add lines 6a through 6g	<u></u>	7	10,	000.
8	Estim	nated tax penalty (see instructions). Check if Form 2220 is attached		8		
9				9		
10	Over	payment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid		10	10,	000.
11		r the amount of line 10 you want: Credited to 2023 estimated tax 10,00		11		0.
Part	IV	Statements Regarding Certain Activities and Other Information (see in	nstructions)			
1	At an	ny time during the 2022 calendar year, did the organization have an interest in or a signature	or other authority		Yes	No
	over a	a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization	n may have to file			
	FinCE	EN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the	ne foreign country			
	here					Х
2	Durin	ng the tax year, did the organization receive a distribution from, or was it the grantor of, or tr	ansferor to, a			
	foreig	gn trust?				Х
		es," see instructions for other forms the organization may have to file.				
3	Enter	r the amount of tax-exempt interest received or accrued during the tax year	\$	27.		
4		r available pre-2018 NOL carryovers here \$ 189,304. Do not include any				
	show	n on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deducti	on reported on Part	I, line 6.		
5	Post-	2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryo	overs. Don't reduce			
		mounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax yea				
			le post-2017 NOL c			
		901101 \$	•	272,063.		
		\$				
6a	Did th	he organization change its method of accounting? (see instructions)				Х
b		is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form				
		ain in Part V				
Part	V	Supplemental Information			•	
Provide	the e	explanation required by Part IV, line 6b. Also, provide any other additional information. See in	nstructions.			-
		· · · · · · · · · · · · · · · · · · ·				
						-
		Inder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and		dge and belief, it is tr	ue,	
Sign	co	orrect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any kno				
Here		Lows J. Mayer 4/10/24 CFO, VP FOR FIN & TREASURER			nis return v Iow (see	vith
	S	Signature of office Date Title		structions)? X		No
-		Print/Type reparer's name Preparer's signature Date	Check if			
		Trinib Type Topardi 3 maine	self- employed			
Paid		PHILLIP GROFF 4/1/2024	3011- GITIPIOYEU	P0124778	3	
Prepa			Firm's EIN	13-556		
Use C	nly	Firm's name KPMG LLP 1601 MARKET STREET	TIIIII S EIIV	10 000	,	
		Firm's address PHILADELPHIA, PA 19103	Phone no. 26	67-256-7000		
223711 0	11_16_00	,	I HOHE HU. 20		990-T	(2022)
223111 U	1-10-23			⊢orm ₹	JJU- 1	(2022)

FORM 990-T	PRE 2018 NOL SCHEDULE	STATEMENT 1
PRE-2018 NOL CARRY FORWARD PRE-2018 NOL DEDUCTION INC		189,304. 104,574.
SCHEDULE A PORTION OF PRESCHEDULE A ENTITY	-2018 NOL SCHEDULE A SHARE	
1	0.	
2	0.	
3	0.	
4	0.	
TOTAL SCHEDULE A SHARE OF	PRE-2018 NOL	0.
NET OPERATING DEDUCTION	104,574.	
BALANCE AFTER PRE-2018 NO	L DEDUCTION	0.
EXPIRING NET OPERATING LO	SSES	0.
CARRY FORWARD OF NET OPER	ATING LOSS	84,730.

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/10	41,688.	31,211.	10,477.	10,477.
06/30/11	19,530.	0.	19,530.	19,530.
06/30/12	29,288.	0.	29,288.	29,288.
06/30/13	10,310.	0.	10,310.	10,310.
06/30/14	17,911.	0.	17,911.	17,911.
06/30/15	4,478.	0.	4,478.	4,478.
06/30/16	9,612.	0.	9,612.	9,612.
06/30/17	51,026.	0.	51,026.	51,026.
06/30/18	36,672.	0.	36,672.	36,672.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	189,304.	189,304.

Unrelated Business Taxable Income From an Unrelated Trade or Business

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

	ment of the Treasury Il Revenue Service	Do not enter SSN numbers on this form as it is	may be m	ade public if	your orga	anization is a 5	01(c)(3).		ublic Inspection for Organizations Only
A N						nployer identif 22-1487354		nber	
<u>c</u> ւ	Jnrelated business a	activity code (see instructions) 710000				D Se	quence:	1 of	4
<u>E</u> [Describe the unrelate	ed trade or business ATHLETIC FACILITY	PUBLIC	C USE					
Pa	rt I Unrelated	Trade or Business Income		(A) Inc	ome	(B) E	penses	(C) Net
1 a	Gross receipts or s	sales							
b	Less returns and allo	wances c Balance	1c						
2	Cost of goods sold	d (Part III, line 8)	2						
3	Gross profit. Subtr	ract line 2 from line 1c	3						
4 a	Capital gain net in	come (attach Schedule D (Form 1041 or Form							
	1120)). See instruc	ctions	4a						
b	Net gain (loss) (For	rm 4797) (attach Form 4797). See instructions)	4b						
С	Capital loss deduc	tion 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-fina	anced income (Part V)	7						
8	Interest, annuities,	royalties, and rents from a controlled							
	organization (Part	VI)	8						
9	Investment income	e of section 501(c)(7), (9), or (17)							
	organizations (Part	t VII)	9						
10	Exploited exempt	activity income (Part VIII)	10						
11		e (Part IX)	11						
12	Other income (see	instructions; attach statement) STMT 3	12		41,293				41,293.
<u>13</u>	Total. Combine lin	es 3 through 12	13		41,293	3.			41,293.
1 Pa	directly co	ns Not Taken Elsewhere See instruction nected with the unrelated business in officers, directors, and trustees (Part X)	come					ns must	be
2		S							37,174.
3		enance							, , , = . - .
4		enance					-		
5		stament) See instructions					5		
6	•	S							
7	Depreciation (attac	ch Form 4562). See instructions		·····	7				
8		claimed in Part III and elsewhere on return			, 8a		8b		
9									
10		eferred compensation plans							
11		programs							4,119.
12	Excess exempt ex	penses (Part VIII)					12		· · · · · · · · · · · · · · · · · · ·
13	Excess readership	costs (Part IX)					13		
14		(attach statement)							
15		Add lines 1 through 14							41,293.
16		s income before net operating loss deduction. S							
							16		0.

LHA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 17 from line 16

Schedule A (Form 990-T) 2022

17

Deduction for net operating loss. See instructions

Page	•

Part	III Cost of Goods Sold Enter me	thod of inventory valuation	on		Page Z
1		triod of inventory valuation		1	_
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				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter				_
9	Do the rules of section 263A (with respect to property				Yes No
Part					
1	Description of property (property street address, city,				
	A	,			
	В				
	С				
	D				
		A	В	С	
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 here a	and on Part I. line 6. col	umn (A)	0.
	Deductions directly connected with the income		, ,		
4	in lines 2(a) and 2(b) (attach statement)				
	() () () () () ()			<u>.</u>	
5	Total deductions. Add line 4 columns A through D. E	nter here and on Part I, li	ne 6, column (B)		0.
Part					
1	Description of debt-financed property (street address,	city, state, ZIP code). Ch	eck if a dual-use. See ir	nstructions.	
	A				
	В				
	c 🗆				
	D				
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	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		%	%	%
7	Gross income reportable. Multiply line 2 by line 6	7-1	70	70	70
8	Total gross income (add line 7, columns A through D		I, line 7, column (A)	I	0.
•	and the second s	, and on i are	., , σοιαπιτιγγ		<u>`</u>
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A th	rough D. Enter here and	on Part I. line 7. column	 າ (B)	0.
11	Total dividends-received deductions included in line				0.

Part VI Interest, And	uities, R	oyalties, and Re	ents fror	n Control	led Or	ganization	S (se	ee instruct	ions)	Page 3
	·				E	Exempt Contro	lled Or	ganization	s	
Name of controlled organization		2. Employer identification number				al of specified nents made	5. Part of colum that is included in controlling organ tion's gross inco		in the aniza-	6. Deductions directly connected with income in column 5
(1)										
(2)										
(3)										
(4)		<u> </u>	1		<u> </u>					
7 Tayahla Inaama			1	Controlled Or	•	ons 10. Part	of ool		- 44	Daduations directly
7. Taxable Income	ir	Net unrelated ncome (loss) e instructions)		otal of specif yments mad		that is inc	luded	in the zation's		Deductions directly connected with come in column 10
(1)										
(2)										
(3)										
(4)										
						Add colum Enter here line 8, c	and or	n Part I,	Ente	d columns 6 and 11. er here and on Part I, ine 8, column (B)
Totals								0.		0.
Part VII Investment	Income	of a Section 50	1(c)(7), (9), or (17)	Orgar	nization (s	ee inst	ructions)		
	scription of	income		2. Amou incon		3. Deduction directly connumber (attach state)	ected	4. Set- (attach st	asides atemer	5. Total deductions and set-asides (add cols 3 and 4)
(1)										
(2)										
(3)										
(4)				Add amou column 2 here and or line 9, colu	Enter n Part I,					Add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals					0.					0.
Part VIII Exploited	Exempt A	Activity Income	, Other 1	Than Adve	ertising	g Income	see in:	structions)		
1 Description of explo	•									
2 Gross unrelated bus						•	. ,		2	
3 Expenses directly co		•								
line 10, column (B) 4 Net income (loss) fro	m unrelated	trade or business.	Subtract lir	ne 3 from line	e 2. If a 🤉	gain, complete	!		3	
									4	
5 Gross income from a									5	
6 Expenses attributab									6	
7 Excess exempt expe4. Enter here and on			o, but do no	ot enter more	e than th	ne amount on l	ine		7	

Page	

Part	IX Advertising Income				Page
1	Name(s) of periodical(s). Check box if reporting two	o or more periodicals on a	consolidated hasi	<u> </u>	
•	A	of more periodicals of a	corisolidated basi	J.	
	В				
	c				
	D				
Enter a	amounts for each periodical listed above in the corre	sponding column.	1		
		A	В	С	D
2	Gross advertising income				
	Add columns A through D. Enter here and on Part	I, line 11, column (A)			
а					
3	Direct advertising costs by periodical				
а	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		1		
5	Readership costs		1		
6	Circulation income				
7	Excess readership costs. If line 6 is less than		1		
•	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				
Ü	deduction. For each column showing a gain on				
	line 4, enter the lesser of line 4 or line 7				
_					
а	Add line 8, columns A through D. Enter the greater				(
Part	X Compensation of Officers, Director	ors and Trustees /	see instructions)		
· u··	Z Compensation of Officers, Birect	oro, una maoteco	see instructions)	3. Percentage	4. Compensation
	1. Name	2. Title		_	
	i. Name	2. Title		of time devoted	attributable to
· 4\				to business	unrelated business
(1)				%	
(2)				%	
3)				%	
4)				%	
	Enter here and on Part II, line 1				(
Part	XI Supplemental Information (see inst	tructions)			

FORM 990-T (A)	OTHER INCOME	STATEMENT 3
DESCRIPTION		AMOUNT
ATHLETICS-OPEN/LESSONS-F	PUBLIC	41,293.
TOTAL TO SCHEDULE A, PAR	RT I, LINE 12	41,293.

Unrelated Business Taxable Income From an Unrelated Trade or Business

	Go to www.irs.gov/Form990T for ment of the Treasury at Revenue Service Do not enter SSN numbers on this form as it is	•	Open to Public Inspection for 501(c)(3) Organizations Only				
A	Name of the organization THE TRUSTEES OF THE STEVENS INSTITUTE TECHNOLOGY	identific 37354	cation numbe	er			
<u>c</u> .	Unrelated business activity code (see instructions) 540000			D Sequence	e:	2 of	4
E I	Describe the unrelated trade or business PROFESSIONAL SERV	ICES					
	rt I Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C)	Net
1a	Gross receipts or sales						
b	Less returns and allowances c Balance	1c					
2	Cost of goods sold (Part III, line 8)	2					
3	Gross profit. Subtract line 2 from line 1c	3					
4 a	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					
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) STMT 4	12	74,14	5.			74,145.
13	Total. Combine lines 3 through 12	13	74,14				74,145.
_	Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business in	ncome				s must be	•
1	Compensation of officers, directors, and trustees (Part X)				1	 	55 724
2	Salaries and wages				2		55,734.
3	Repairs and maintenance				3	 	
4	Bad debts				4		
5	Interest (attach statement). See instructions				5	-	
6	Taxes and licenses		1 1		6		
7	Depreciation (attach Form 4562). See instructions			481.		1	401
8	Less depreciation claimed in Part III and elsewhere on return				8b		481.
9	Depletion				9		
10	Contributions to deferred compensation plans				10		1 756
11	Employee benefit programs				11	 	1,756.
12	Excess exempt expenses (Part VIII)				12	 	
13	Excess readership costs (Part IX)				13		
14	Other deductions (attach statement)				14		FR 05/
15	Total deductions. Add lines 1 through 14				15	 	57,971.
16	Unrelated business income before net operating loss deduction. S	ubtract li	ne 15 from Part I, lir	ne 13,			

For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 17 from line 16

Schedule A (Form 990-T) 2022

16,174.

16

17

17

Deduction for net operating loss. See instructions

Part	III Cost of Goods Sold Enter meth	od of inventory valua	tion		
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter h	ere and in Part I, line	2	8	
9	Do the rules of section 263A (with respect to property p	roduced or acquired	for resale) apply to th	e organization?	Yes No
Part	IV Rent Income (From Real Property and	Personal Prope	rty Leased with	Real Property)	
1	Description of property (property street address, city, st	ate, ZIP code). Checl	cif a dual-use. See ins	structions.	
	A				
	В 🗌				
	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 here	and on Part I, line 6,	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. Ent	er here and on Part I	, line 6, column (B)		0.
Part	(00	,			
1	Description of debt-financed property (street address, ci	ty, state, ZIP code).	Check if a dual-use. S	ee instructions.	
	A				
	B				
	C				
	D			1	
_		Α	В	С	D
2	Gross income from or allocable to debt-financed				
_	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
a	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	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)		,	<u> </u>	0/
6	Divide line 4 by line 5	9/	9	%	<u>%</u>
7	Gross income reportable. Multiply line 2 by line 6	Fatanbana		1	0.
8	Total gross income (add line 7, columns A through D).	Enter here and on Pa	arti, iine /, column (A) <u> </u>	<u> </u>
9	Allocable deductions. Multiply line 3c by line 6		1	T	
9 10	Total allocable deductions. Add line 9, columns A thro	ough D. Enter here an	d on Part I line 7 oo	umn (R)	0.
11	Total dividends-received deductions included in line				0.

Part	VI Interest, Annu	uities, R	oyalties, and Re	ents fror	n Control	led Or	ganizations	S (see i	nstructi	ions)	Page 3
		-					Exempt Contro	,			
	Name of controlle organization	d	2. Employer identification number	incon	unrelated ne (loss) structions)	4. Tota	al of specified ments made	5. Part of that is incontrolling tion's gr	of colun cluded i ng orga	nn 4 in the niza-	Deductions directly connected with income in column 5
(1)											
(2)											
(3)											
<u>(4)</u>											
				1	Controlled O		1				
1	7. Taxable Income	ir	Net unrelated ncome (loss) e instructions)		otal of specif yments mad		that is inc	of column cluded in t organizati s income	he	С	eductions directly onnected with ome in column 10
(1)											
(2)											
(3)											
(4)											
							Add colum Enter here line 8, c		art I,	Enter	columns 6 and 11. here and on Part I, e 8, column (B)
Totals									0.		0.
Part	VII Investment	Income	of a Section 50	1(c)(7), (9), or (17)	Orgai	nization (s	ee instruc	tions)		
	1. Desc	cription of	income		2. Amou incor		3. Deduction directly connected (attach states	ected (at	4. Set-a	asides atement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)											
(2)											
(3)											
(4)					Add amou	ınte in					Add amounts in
					column 2	. Enter					column 5. Enter
Totals					line 9, colu	ımn (A) 0 .					line 9, column (B)
Part	VIII Exploited E	xempt A	Activity Income	, Other 1	Than Adve	ertisin	g Income	(see instru	ctions)		
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 unre	elated busi	iness income	e. Enter	here and on Pa	art I,			
	line 10, column (B)									3	
4	Net income (loss) from						J , I				
	lines 5 through 7									4	
5	Gross income from ac									5	
6	Expenses attributable								·····	6	
7	Excess exempt expen 4. Enter here and on F			o, but do no	ot enter mor	e tnan th	ne amount on I	ine		,	
	The street of the street and off F	arrii, iii le	14							1	

Pa	an	4

Part	IX Advertising Income					1 age 4
1	Name(s) of periodical(s). Check box if reporting	two or m	ore periodicals on a	consolidated basis		
•	A	, two or 111	ioro periodiodio erra	consolidated basis	5.	
	В					
	c					
	D					
Enter	amounts for each periodical listed above in the c	orrespond		T _		
			Α	В	С	D
2	Gross advertising income	_				
	Add columns A through D. Enter here and on F	Part I, line	11, column (A)			0.
а		_				
3	Direct advertising costs by periodical					
а	Add columns A through D. Enter here and on F	Part I, line	11, column (B)			0.
		_		_		
4	Advertising gain (loss). Subtract line 3 from line	e				
	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	L				
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 les	s				
	than line 6, enter zero					
8	Excess readership costs allowed as a					
	deduction. For each column showing a gain or	ո				
	line 4, enter the lesser of line 4 or line 7					
а	Add line 8, columns A through D. Enter the gre		e line 8a. columns to	otal or zero here an	d on	
	Part II, line 13					0.
Part	X Compensation of Officers, Dire	ectors, a	and Trustees (see instructions)		
					3. Percentage	4. Compensation
	1. Name		2. Title		of time devoted	attributable to
					to business	unrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
Total	Enter here and on Part II, line 1					0.
Part		instruction	ons)			
						_
						_

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

Unrelated Business Taxable Income From an Unrelated Trade or Business

	Department of the Treasury nternal Revenue Service Do not enter SSN numbers on this form as it may be made public if your organization.							Open to Public Inspection for					
A N	Name of the organization	On THE TRUSTEES OF THE STEVENS INST	ITUTE C)F				oloyer identif 2-1487354	oyer identification number -1487354				
<u>c</u> ι	Unrelated business	activity code (see instructions) 901101					D Seq	uence:	3 of	4			
		red trade or business PARTNERSHIP INVEST	пмемт										
		trade of basiness	IMENI						Т				
Pa	rt I Unrelated	Trade or Business Income		(A) Ind	come		(B) Exp	enses	(C	C) Net			
1 a	Gross receipts or	sales											
b	Less returns and allo	owances c Balance	1c										
2	Cost of goods sold		2										
3	Gross profit. Subti	ract line 2 from line 1c	3										
4 a		come (attach Schedule D (Form 1041 or Form											
	1120)). See instruc	ctions	4a		2,	231.				2,231.			
b	Net gain (loss) (Fo	rm 4797) (attach Form 4797). See instructions)	4b										
С	Capital loss deduc	ction for trusts	4c										
5	Income (loss) from	a partnership or an S corporation (attach											
	statement) STAT	PEMENT 5	5		107,	043.				107,043.			
6		: IV)	6										
7		anced income (Part V)	7						T				
8	Interest, annuities,	, royalties, and rents from a controlled VI)	8										
9	Investment income	e of section 501(c)(7), (9), or (17) t VII)	9										
10		activity income (Part VIII)	10						+				
11		e (Part IX)	11						+				
12		e instructions; attach statement)	12										
13	Total. Combine lin		13		109	274.				109,274.			
_	directly co	ns Not Taken Elsewhere See instruction nected with the unrelated business in	come						ns must b)e			
1		officers, directors, and trustees (Part X)						l l	+				
2		98							+				
3		tenance						_	+				
4		-1							+				
5		atement). See instructions							+	640.			
6	Taxes and licenses					ĭ		6		040.			
7		ch Form 4562). See instructions						-	4				
8		claimed in Part III and elsewhere on return				•		8b	+				
9	Depletion	Liferent annual						9	+				
10		leferred compensation plans							+				
11		programs							+				
12		xpenses (Part VIII)							+				
13		costs (Part IX)			 2. СПР	темемт	6	13		26,459.			
14		(attach statement)								27,099.			
15		. Add lines 1 through 14						15	+	21,033.			
16		s income before net operating loss deduction. S								82,175.			
17	Doduction for and	operating loss. See instructions						16		02,173.			
17	Deduction for net	operating loss. See instructions						17	+	<u> </u>			

LHA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 17 from line 16

3 Page 2
Yes No
D
0.
0.
<u>D</u>
%

Part	Enter met	hod of inventory valuati	<u>on</u>		
1					
2	Purchases				
3	Cost of labor			3	
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			7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter	here and in Part I, line 2		8	
9	Do the rules of section 263A (with respect to property				Yes No
Part	IV Rent Income (From Real Property and	d Personal Proper	ty Leased with Re	eal Property)	
1	Description of property (property street address, city, s	state, ZIP code). Check	if a dual-use. See instru	ictions.	
	A <u> </u>				
	В				
	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				
4 5 Part	Description of debt-financed property (street address,	nter here and on Part I, I ee instructions)			0.
	B				-
	<u> </u>				
	D	Т Т			
		Α	В	С	D
2	Gross income from or allocable to debt-financed				
_	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
a	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	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)	1			
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 Par	t I, line 7, column (A)	<u> </u>	0.
			T	1	
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A th				
11	Total dividends-received deductions included in line	: 1()			0.

Schedi	ule A (Form 990-T) 2022	ities D	avaltica and Da	note for	<u>~ ~~</u>	lad O						Page	3
Part	VI Interest, Annu	iities, K	oyanies, and Re	ints trof	ii Control			`	e instruct				_
							xempt Contro	1					_
	1. Name of controlle	d	2. Employer		unrelated	1	al of specified		art of colur included			Deductions directly	y
	organization		identification		ne (loss)	payn	nents made		olling orga			connected with	
			number	(see ins	structions)				gross inc		ind	come in column 5	
(1)													
(2)													
(3)													
(4)													
			No	nexempt (Controlled O	rganizati	ions						
7	'. Taxable Income	8.1	Net unrelated	9. To	otal of specit	ied	10. Part o	of colu	mn 9	11.	. Dec	ductions directly	
		in	come (loss)	pa	yments mad	е	that is inc				cor	nnected with	
		(see	e instructions)				controlling	organiz incom		in	com	e in column 10	
(1)							J		-				_
(2)													_
(3)													_
(4)													_
<u>., </u>		l		1			Add colum	ne 5 a	nd 10	Δd	d co	lumns 6 and 11.	_
							Enter here					ere and on Part I,	
							line 8, c	column	(A)		line	8, column (B)	
Totals									0.			0).
Part	VII Investment	Income	of a Section 50	1(c)(7)_(9) or (17)	Organ	nization (s	oo inct	ructions)	<u> </u>			÷
1 0 0		cription of		.(0)(1); (2. Amou		3. Deduction			asides	Į	5. Total deduction	
	1, 5000	onpelon on			incor		directly conne		(attach st		' '	and set-asides	
							(attach stater		•			(add cols 3 and 4	.)
(1)													_
(2)													_
(3)													_
(4)											\dashv		_
(+)					Add amo	unts in						Add amounts in	_
					column 2							column 5. Enter	
					here and o	,						here and on Part	,
					line 9, colu							line 9, column (B	•
Totals Part	VIII Fundaited F		A a tivite de a a a a a	Oth a r 1	Floors Adver	0.	- 1					0	٠.
			Activity Income,	, Other i	inan Adve	ertising	g income (see ins	structions)	· 			_
1	Description of exploite	•											
2	Gross unrelated busin						•	. ,		2			
3	Expenses directly con												
	line 10, column (B)									3			_
4	Net income (loss) from	unrelated	trade or business. S	Subtract lir	ne 3 from lin	e 2. If a 🤉	gain, complete						
										4			
5	Gross income from ac	tivity that i	s not unrelated busi	iness incor	me					5			
6	Expenses attributable	to income	entered on line 5							6			
7	Excess exempt expen												
	4 Enter here and on F	Part II line	12							7			

Sched	lule <i>i</i>	۹ (F	form 990-T) 2022					Page	3
Part			Advertising Income						_
1	Na	ıme	e(s) of periodical(s). Check box if report	ting two or mor	e periodicals on a	a consolidated basis	S.		
	Α	L							_
	В	Ļ							_
	С	L							_
	D	L.							_
nter:	amo	unts	s for each periodical listed above in the	ie correspo <u>ndin</u>	-	T 5			_
2	G,	000	advortising income	<u> </u>	Α	В	С	D	-
2			advertising incomesadvertising income		1 column (A)).
а	7.0	iu c	olumia A tillough B. Enter here and e	on and, in on			••••••		_
3	Di	ect	advertising costs by periodical						_
а			columns A through D. Enter here and c		1, column (B)			0	١.
4	Ac	lver	tising gain (loss). Subtract line 3 from	line					
	2.	For	any column in line 4 showing a gain,						
			lete lines 5 through 8. For any column						
			showing a loss or zero, do not comple						
_			5 through 7, and enter zero on line 8						_
5 6			ership costs ation income						-
7			ss readership costs. If line 6 is less tha						-
•			subtract line 6 from line 5. If line 5 is						
		-	ine 6, enter zero						
8			ss readership costs allowed as a						
			ction. For each column showing a gain						
			, enter the lesser of line 4 or line 7 \dots						_
а			ne 8, columns A through D. Enter the	greater of the li	ine 8a, columns t	otal or zero here and	d on	•	
Part			l, line 13	Nirootore an		······································		U	٠.
rait	^		Compensation of Officers, D		iu Trustees	(see instructions)	2 Davagataga	4 Componentian	-
			1. Name		2. Title		3. Percentage of time devoted	 Compensation attributable to 	
			I. Name		2. Hue		to business	unrelated business	
1)							%	arriolated bacinees	_
2)							%		
3)							%		
4)							%		_
		ter I			······································			0) .
Part	ΧI		Supplemental Information (see instructions	s)				_
									-
									_
									_
									_
									-

FORM 990-T (A) INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 5
DESCRIPTION	NET INCOME OR (LOSS)
COMMONFUND CAPITAL NATURAL RESOURCES PARTNERS V, LP -	
ORDINARY BUSINESS INCO	-9,357
KKR NORTH AMERICA FUND XI (CAGE), LP - ORDINARY BUSINESS	F 422
INCOME (LOSS) KKR NORTH AMERICA FUND XI (INDIGO) LP - NET RENTAL REAL	5,433
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	7
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 6
DESCRIPTION	AMOUNT
TAX PREPARATION FEES	21,600
INVESTMENT MANAGEMENT FEES	4,859
TOTAL TO SCHEDULE A, PART II, LINE 14	26,459

990-T SCH A	POST-201	7 NET OPERATING	LOSS DEDUCTION	STATEMENT 7
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19	167,196.	0.	167,196.	167,196.
06/30/20	36,722.	0.	36,722.	36,722.
06/30/21	46,816.	0.	46,816.	46,816.
06/30/22	21,329.	0.	21,329.	21,329.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	272,063.	272,063.

SCHEDULE D (Form 1120)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-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

Name				Empl	oyer identification number
THE TRUSTEES OF THE STEVENS	INSTITUTE OF				
TECHNOLOGY				22-	1487354
Did the corporation dispose of any investment	.,				Yes X No
If "Yes," attach Form 8949 and see its instru					
Part I Short-Term Capital Gai	ns and Losses - Ass	ets Held One Year	or Less		I
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you	(d) Proceeds	(e) Cost	(g) Adjustments to go or loss from Form(s) 89	949,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the
round off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column	(g)	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	7		4	
5 Short-term capital gain or (loss) from like-kine	d exchanges from Form 8824			5	
6 Unused capital loss carryover (attach computa	/			6	(
7 Net short-term capital gain or (loss). Combin Part II Long-Term Capital Gai	e lines 1a through 6 in column	<u>h</u>		7	30.
	ns and Losses - Ass	ets Heid More Tha	n One Year		T
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.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to go or loss from Form(s) 89 Part II, line 2, column	949,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on					
Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on					
Form(s) 8949 with Box F checked					
11 Enter gain from Form 4797, line 7 or 9				11	2,201.
12 Long-term capital gain from installment sales	from Form 6252, line 26 or 37	7		12	
13 Long-term capital gain or (loss) from like-kind	d exchanges from Form 8824			13	
14 Capital gain distributions				14	
15 Net long-term capital gain or (loss). Combine		n h		15	2,201.
Part III Summary of Parts I and				T	
16 Enter excess of net short-term capital gain (lin				16	30.
17 Net capital gain. Enter excess of net long-term				17	2,201.
18 Add lines 16 and 17. Enter here and on Form		plicable line on other return	S	18	2,231.
Note: If losses exceed gains, see Capital Los	Ses in the monucuons.				

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

Schedule D (Form 1120) 2022

LHA

Form **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.

2022

Attachment Seguence No. 124

Name(s) shown on return

THE TRUSTEES OF THE STEVENS INSTITUTE OF

TECHNOLOGY

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 <u>broker and may even tell you which box to check</u> Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term Part I 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 \perp (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 Adjustment, if any, to gain or (h) (c) (d) (e) loss. If you enter an amount Proceeds Description of property Date sold or Cost or other Gain or (loss). Date acquired in column (g), enter a code in (sales price) basis. See the Subtract column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) disposed of column (f). See instructions. Note below and from column (d) & (Mo., day, yr.) (g) Amount of see Column (e) ir combine the result Code(s) with column (g) the instructions adjustment KKR NORTH AMERICA FUND XI (INDIGO) LP 30 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

223011 10-24-22 LHA For Paperwork Reduction Act Notice, see your tax return instructions.

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

Form 8949 (2022)

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.

Department of the Treasury Internal Revenue Service

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

Attach to your tax return.

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

OMB No. 1545-0184

Nam	e(s) shown on return						Ide	ntifying number
	TRUSTEES OF THE STEVENS INS	TITUTE OF						
	HNOLOGY							22-1487354
1a	Enter the gross proceeds from sales							
	(or substitute statement) that you are		••				1a	
b	Enter the total amount of gain that you MACRS assets	-		· ·	· ·		46	
_	MACRS assets Enter the total amount of loss that yo					I	1b	
·		-		-	-		1c	
Pa	rt I Sales or Exchanges of	Property Use	ed in a Trade	or Business	and Involuntar	y Convers	ions	From Other
	Than Casualty or Theft	-Most Prope	rty Held Mo	re Than 1 Year	(see instruction	ns)		
_	(a) Description	(b) Date acquired	(C) Date sold	(d) Gross sales	(e) Depreciation	(f) Cost or oth	ner	(g) Gain or (loss)
2	of property	(mo., day, yr.)	(mo., day, yr.)	price	allowed or allowable since	basis, plus improvements a	and	Subtract (f) from the sum of (d) and (e)
SEI	E STATEMENT 9				acquisition	expense of sa	le	sum of (d) and (e)
						<u> </u>		
3	Gain, if any, from Form 4684, line 39						3	
4	Section 1231 gain from installment sa					I .	4	
5	Section 1231 gain or (loss) from like-k						5	
6	Gain, if any, from line 32, from other t						6	2,201.
7	Combine lines 2 through 6. Enter the	• , ,	•				7	2,201.
	Partnerships and S corporations. F line 10, or Form 1120-S, Schedule K,				r Form 1065, Sche	edule K,		
	Individuals, partners, S corporation	·			loss enter the am	nount		
	from line 7 on line 11 below and skip							
	1231 losses, or they were recaptured	-			ng-term capital gai	n on		
	the Schedule D filed with your return	and skip lines 8,	9, 11, and 12 be	elow.				
8	Nonrecaptured net section 1231 loss	es from prior yea	rs. See instructi	ons			8	
9	Subtract line 8 from line 7. If zero or l	ess, enter -0 If li	ne 9 is zero, ent	er the gain from lin	ie 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 v	vith your return. S	See instructions				9	2,201.
Pa	rt II Ordinary Gains and I	Losses (see in:	structions)					
40								
10	Ordinary gains and losses not include	led on lines 11 th T	irough 16 (includ	de property held 1	year or less): I	ı		
11	Loss, if any, from line 7	I			I	' 	11	(
12	Gain, if any, from line 7 or amount fro						12	1
13	Gain, if any, from line 31						13	
14	Net gain or (loss) from Form 4684, lin					I .	14	
15	Ordinary gain from installment sales f					Г	15	
16	Ordinary gain or (loss) from like-kind e	•					16	
17							17	
18	For all except individual returns, ente							
	a and b below. For individual returns,	complete lines a	and b below.					
а	If the loss on line 11 includes a loss fi	rom Form 4684, I	line 35, column	(b)(ii), enter that pa	rt of the loss here.	Enter the		
	loss from income-producing property	on Schedule A (l	Form 1040), line	16. (Do not include	e any loss on prop	erty used		
	as an employee.) Identify as from "Fo	rm 4797, line 18a	a." See instruction	ons		L	18a	
b	Redetermine the gain or (loss) on line	•						
	(Form 1040), Part I, line 4						18b	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2022)

Form 4797 (2022) TECHNOLOGY

Pa	rt III Gain From Disposition of Propert	y Un	der Sections 1245	, 1250, 1252	, 125	54, and 1255	(see	instructions)
19	(a) Description of section 1245, 1250, 1252, 1254, c	or 1255	5 property:			(b) Date acquire (mo., day, yr.)	d	(c) Date sold (mo., day, yr.)
_A								
<u>B</u>								
<u></u> C								
<u>D</u>								
	These columns relate to the properties on				_			
	lines 19A through 19D.	1	Property A	Property	В	Property C		Property D
20	Gross sales price (Note: See line 1a before completing.)	20						
21	Cost or other basis plus expense of sale	21						
22	Depreciation (or depletion) allowed or allowable	22						
23	Adjusted basis. Subtract line 22 from line 21	23						
24	Total gain. Subtract line 23 from line 20	24						
	If section 1245 property:							
	Depreciation allowed or allowable from line 22	25a						
	Enter the smaller of line 24 or 25a	25b						
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
	Additional depreciation after 1975. See instructions	26a						
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b						
С	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	26d						
е	Enter the smaller of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
g	Add lines 26b, 26e, and 26f	26g						
27	If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.							
	Soil, water, and land clearing expenses	27a						
	Line 27a multiplied by applicable percentage	27b						
	Enter the smaller of line 24 or 27b	27c						
	If section 1254 property: Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
b	Enter the smaller of line 24 or 28a	28b						
29 a	If section 1255 property: Applicable percentage of payments excluded from income under section 126. See instructions	29a						
b	Enter the smaller of line 24 or 29a. See instructions	29b						
S	mmary of Part III Gains. Complete property c	مصبياه	a A through D through I	ina 20h hafara	aoina	to line 20		
Jui	Timaly of Fart III dams. Complete property c	Olumn	S A through D through i	ine 29b before (going	to line 30.		
30	Total gains for all properties. Add property columns	A thro	ough D, line 24				30	
31	Add property columns A through D, lines 25b, 26g,		·				31	
32	Subtract line 31 from line 30. Enter the portion from from other than casualty or theft on Form 4797, line		ulty or theft on Form 468	34, line 33. Ente	r the p		32	
Pa	rt IV Recapture Amounts Under Section	ns 17	79 and 280F(b)(2) \	When Busine	ess l	Jse Drops to s	50%	or Less
	(see instructions)					T	-	
						(a) Section 179		(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allo	wable	in prior years	[33			
34	D				34			
35	Recapture amount. Subtract line 34 from line 33. Se				35			

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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). 501(c)(3) Organizations Only THE TRUSTEES OF THE STEVENS INSTITUTE OF B Employer identification number Name of the organization TECHNOLOGY 22-1487354 530000 Unrelated business activity code (see instructions) **D** Sequence: 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 **b** Less returns and allowances 1c Cost of goods sold (Part III, line 8) 2 2 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 Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach 5 statement) Rent income (Part IV) 6 Unrelated debt-financed income (Part V) 7 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 8 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) Exploited exempt activity income (Part VIII) 10 10 11 Advertising income (Part IX) 11 Other income (see instructions; attach statement) STMT 8 6,225. 6,225. 12 12 13 6,225. 6,225. **Total.** Combine lines 3 through 12 Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income Compensation of officers, directors, and trustees (Part X) 2 2 Salaries and wages 3 Repairs and maintenance 3 4 4 Bad debts Interest (attach statement). See instructions 5 5 6 Taxes and licenses 6 Depreciation (attach Form 4562). See instructions 7 Less depreciation claimed in Part III and elsewhere on return 8b 8 9 Depletion _____ 9 10 Contributions to deferred compensation plans 10 Employee benefit programs 11 11 Excess exempt expenses (Part VIII) 12 12 Excess readership costs (Part IX) 13 13 Other deductions (attach statement) 14 14 0. Total deductions. Add lines 1 through 14 15 15 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, 16 column (C) 16

For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 17 from line 16

Schedule A (Form 990-T) 2022

6,225.

17

18

Deduction for net operating loss. See instructions

Page	- 2

Part	III Cost of Goods Sold Enter meth	od of inventory valuation	on		Page Z
1	Inventory at beginning of year			1	_
2	Purchases				
3	Cost of labor			l l	
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter h	ere and in Part I, line 2		8	
9	Do the rules of section 263A (with respect to property p				Yes No
Part	· · · · · · · · · · · · · · · · · · ·				
1	Description of property (property street address, city, st	ate, ZIP code). Check i	f a dual-use. See instr	uctions.	
	A				
	B				
	C				
	<u> </u>	Α	В	С	D
2	Rent received or accrued	Α	В		<u> </u>
a	From personal property (if the percentage of				
u	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 here a	and on Part I, line 6, co	olumn (A)	0.
	Deductions directly connected with the income				
4	in lines 2(a) and 2(b) (attach statement)				
					0
5 Part	Total deductions. Add line 4 columns A through D. Ent V Unrelated Debt-Financed Income (se	ter here and on Part I, li	ne 6, column (B)		0.
1	Description of debt-financed property (street address, c	,	pook if a dual upa. Saa	instructions	
'	A	ity, state, ZIP codej. Gr	ieck ii a duai-use. See	IIISTRUCTIONS.	
	В				
	c \square				
	D				
		Α	В	С	
2	Gross income from or allocable to debt-financed				
	property				
3	Deductions directly connected with or allocable				
	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
С	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	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6		1.11. 7		0.
8	Total gross income (add line 7, columns A through D).	∟nter nere and on Part	i, line /, column (A)		U.
0	Allegable deducations Multiply line Calbulling C	Τ	I		
9 10	Allocable deductions. Multiply line 3c by line 6 Total allocable deductions. Add line 9, columns A thro	ugh D. Enter here and	on Part Llino 7 colur	nn (R)	0.
11	Total dividends-received deductions included in line				0.
<u></u>					

Schedule A (Form 990-T) 2022 Page

	VI Interest, Annu		oyalties, and Re	ents fror	n Control	led Or	ganizations	S (se	ee instruct	ions)	r age o
			_			E	xempt Contro	lled Or	ganization	s .	
	Name of controlled organization		2. Employer identification number			nents made 5. Part of columnates made that is included controlling organization's gross in		included olling orga	in the aniza-	6. Deductions directly connected with income in column 5	
<u>(1)</u>											
(2)											
(3)											
<u>(4)</u>											
	Tayabla Ingama				Controlled Or			of colu	mn 0	44	Dadustiana directly
,	. Taxable Income	in	Net unrelated acome (loss) e instructions)		otal of specif syments mad		that is inc controlling gross	luded	in the zation's	,	Deductions directly connected with one in column 10
(1)											
(2)											
(3)											
(4)											
							Add colum Enter here line 8, c	and or	Part I,	Ente	columns 6 and 11. r here and on Part I, ne 8, column (B)
Totals									0.		0.
Part	VII Investment	Income	of a Section 50	1(c)(7), (9), or (17)	Orgar	nization (s	ee inst	ructions)		
	1. Desc	cription of	income		2. Amou incom		3. Deduction directly connected (attach states	ected	4. Set- (attach st	asides atemen	5. Total deductions and set-asides (add cols 3 and 4)
(1)											
(2)											
(3)											
(4)					A -1 -1						A del con conte in
					Add amou column 2. here and or line 9, colu	Enter n Part I,					Add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals Part	VIII Exploited E	vemnt /	Activity Income,	Other 1	Than Adve	- •	Income	/ i	· • · · · · · · · · · · · · · · · · · ·		0.
1	Description of exploite		cuvity income,	, Julei I	man Auve	ı uəni		see ins	structions)		
2	Gross unrelated busin	•	e from trade or busi	ness Ente	r here and or	n Dart I	line 10. colum	n (A)		2	
3	Expenses directly con					,	•	` '		-	
3										3	
4	Net income (loss) from										
-	`									4	
5	Gross income from ac									5	
6	Expenses attributable									6	
7	Excess exempt expen										
	4. Enter here and on F	Part II, line	12							7	

Pan	ıe	4
ıau		-

Part	IX Advertising Income					,	
1	Name(s) of periodical(s). Check box if reporting	ng two or r	more periodicals on a	consolidated basis	S.		
	A						
	В 🖳						
	c						
	D						
Enter	amounts for each periodical listed above in the	correspor	nding column.	<u> </u>			
			Α	В	С	D	
2	Gross advertising income						
	Add columns A through D. Enter here and on	Part I, line	e 11, column (A)				0.
а		1					
3	Direct advertising costs by periodical						
а	Add columns A through D. Enter here and on	Part I, line	e 11, column (B)				0.
	Advantision asia (lana). Outstand line Office at line						—
4	Advertising gain (loss). Subtract line 3 from lin	ne					
	2. For any column in line 4 showing a gain,	2					
	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 of	on					
	line 4, enter the lesser of line 4 or line 7						
а	Add line 8, columns A through D. Enter the gr		he line 8a, columns to	al or zero here and	d on		
	Part II, line 13						0.
Part	X Compensation of Officers, Dir	rectors,	and Trustees (S	ee instructions)			
					3. Percentage	4. Compensation	
	1. Name		2. Title		of time devoted	attributable to	
					to business	unrelated business	
<u>(1)</u>					%		
(2)					%		
(3)					%		
<u>(4)</u>					%		
							•
	Enter here and on Part II, line 1						0.
Part	XI Supplemental Information (se	e instruct	ions)				
							—
							—
							—

FORM 990-T (A)	OTHER INCOME	STATEMENT 8
DESCRIPTION		AMOUNT
SES IMAGING LABORATORY		6,225.
TOTAL TO SCHEDULE A, PART	I, LINE 12	6,225.

FORM 4797	PRO	PERTY HEL	D MORE THAN	N ONE YEAR	ST.	ATEMENT 9
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
KKR NORTH AMERICA FUND XI (INDIGO)						
LP KKR NORTH AMERICA FUND XI						273.
(PLATINUM), LP KKR NORTH AMERICA FUND XI (WAVE),						-716.
LP						2,644.
TOTAL TO 4797, PA	RT I, LINE	2				2,201.

SCHEDULE D (Form 1120)

Department of the Treasury

Capital Gains and Losses

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

Go to www irs nov/Form 1120 for instructions and the latest information

OMB No. 1545-0123

		GO TO WWW.IIS.gov/FOIMITIZU		•••		
Na	me				Empl	oyer identification number
	THE TRUSTEES OF THE STEVENS TECHNOLOGY	S INSTITUTE OF			22-	-1487354
Dic	the corporation dispose of any investme	nt(s) in a qualified opportur	nity fund during the tax y	ear?		Yes X No
	Yes," attach Form 8949 and see its instru	.,	, ,			
F	Part I Short-Term Capital Ga	ins and Losses - Ass	sets Held One Year	or Less		
	e instructions for how to figure the amounts	(d)	(e)	(g) Adjustments to g	ain	(h) Gain or (loss)
	enter on the lines below.	Proceeds	Cost	or loss from Form(s) 89	949,	Subtract column (e) from column (d) and combine the
rou	s form may be easier to complete if you nd off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column	(g)	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.
	Short-term capital gain from installment sales				4	
5	Short-term capital gain or (loss) from like-kin	d exchanges from Form 8824			5	
	Unused capital loss carryover (attach comput			TEMENT 10	6	(999.)
	Net short-term capital gain or (loss). Combin	e lines 1a through 6 in column	1 h	- A V	7	-969.
ŀ	Part II Long-Term Capital Gai	ns and Losses - Ass	TOTE MAIN MINTA I NO			
_		1	Tela More IIIa	Tone real		T
to e	e instructions for how to figure the amounts enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to g		(h) Gain or (loss) Subtract column (e) from
to e	e instructions for how to figure the amounts	(d)	(e)	(g) Adjustments to g	949,	
This rou	e instructions for how to figure the amounts enter on the lines below. s form may be easier to complete if you and off cents to whole dollars. 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	(d) Proceeds	(e) Cost	(g) Adjustments to g or loss from Form(s) 8	949,	Subtract column (e) from column (d) and combine the
This rou	e instructions for how to figure the amounts enter on the lines below. s form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on	(d) Proceeds	(e) Cost	(g) Adjustments to g or loss from Form(s) 8	949,	Subtract column (e) from column (d) and combine the
to 6 Thi: rou 8a	e instructions for how to figure the amounts enter on the lines below. s form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked	(d) Proceeds	(e) Cost	(g) Adjustments to g or loss from Form(s) 8	949,	Subtract column (e) from column (d) and combine the
to 6 Thi: rou 8a	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on	(d) Proceeds	(e) Cost	(g) Adjustments to g or loss from Form(s) 8	949,	Subtract column (e) from column (d) and combine the
to 6 This rou 8a 8b	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked	(d) Proceeds	(e) Cost	(g) Adjustments to g or loss from Form(s) 8	949,	Subtract column (e) from column (d) and combine the
to 6 This rou 8a 8b	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on	(d) Proceeds	(e) Cost	(g) Adjustments to g or loss from Form(s) 8	949,	Subtract column (e) from column (d) and combine the
8b 9	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box E checked	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to g or loss from Form(s) 8 Part II, line 2, column	949, (g)	Subtract column (e) from column (d) and combine the result with column (g)
8b 9 10 11	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Enter gain from Form 4797, line 7 or 9	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to g or loss from Form(s) 8 Part II, line 2, column	949, (g)	Subtract column (e) from column (d) and combine the
8b 9 10 11 12	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Enter gain from Form 4797, line 7 or 9 Long-term capital gain from installment sales	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to g or loss from Form(s) 8 Part II, line 2, column	949, (g) 11 12	Subtract column (e) from column (d) and combine the result with column (g)
8a 8b 9 10 11 12 13	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Enter gain from Form 4797, line 7 or 9 Long-term capital gain from installment sales Long-term capital gain or (loss) from like-kin	(d) Proceeds (sales price) sfrom Form 6252, line 26 or 3 d exchanges from Form 8824	(e) Cost (or other basis)	(g) Adjustments to g or loss from Form(s) 8 Part II, line 2, column	949, (g) 11 12 13	Subtract column (e) from column (d) and combine the result with column (g)
8a 8b 9 10 11 12 13 14	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Enter gain from Form 4797, line 7 or 9 Long-term capital gain from installment sales Long-term capital gain or (loss) from like-kin Capital gain distributions	(d) Proceeds (sales price) s from Form 6252, line 26 or 3 d exchanges from Form 8824	(e) Cost (or other basis)	(g) Adjustments to g or loss from Form(s) 8 Part II, line 2, column	949, (g) 11 12 13 14	Subtract column (e) from column (d) and combine the result with column (g) 2,201.
8a 8b 9 10 11 12 13 14 15	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Enter gain from Form 4797, line 7 or 9 Long-term capital gain from installment sales Long-term capital gain or (loss) from like-kin Capital gain distributions Net long-term capital gain or (loss). Combin	(d) Proceeds (sales price) s from Form 6252, line 26 or 3 d exchanges from Form 8824 e lines 8a through 14 in colum	(e) Cost (or other basis)	(g) Adjustments to g or loss from Form(s) 8 Part II, line 2, column	949, (g) 11 12 13	Subtract column (e) from column (d) and combine the result with column (g)
8a 8b 9 10 11 12 13 14 15 F	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Enter gain from Form 4797, line 7 or 9 Long-term capital gain from installment sales Long-term capital gain or (loss) from like-kin Capital gain distributions Net long-term capital gain or (loss). Combin-	(d) Proceeds (sales price) s from Form 6252, line 26 or 3 d exchanges from Form 8824 e lines 8a through 14 in colum	(e) Cost (or other basis)	(g) Adjustments to g or loss from Form(s) 8! Part II, line 2, column	949, (g) 11 12 13 14 15	Subtract column (e) from column (d) and combine the result with column (g) 2,201.
8a 8b 9 10 11 12 13 14 15 F	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Enter gain from Form 4797, line 7 or 9 Long-term capital gain from installment sales Long-term capital gain or (loss) from like-kin Capital gain distributions Net long-term capital gain or (loss). Combin Part III Summary of Parts I and	(d) Proceeds (sales price) s from Form 6252, line 26 or 3 d exchanges from Form 8824 e lines 8a through 14 in colum d II ne 7) over net long-term capita	(e) Cost (or other basis) 7 an h al loss (line 15)	(g) Adjustments to g or loss from Form(s) 8 Part II, line 2, column	949, (g) 11 12 13 14 15	Subtract column (e) from column (d) and combine the result with column (g) 2,201.
8a 8b 9 10 11 12 13 14 15 F 16 17	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Enter gain from Form 4797, line 7 or 9 Long-term capital gain from installment sales Long-term capital gain or (loss) from like-kin Capital gain distributions Net long-term capital gain or (loss). Combinerat III Summary of Parts I and Enter excess of net short-term capital gain (like to capital gain. Enter excess of net long-term.	(d) Proceeds (sales price) s from Form 6252, line 26 or 3 d exchanges from Form 8824 e lines 8a through 14 in colum d II ne 7) over net long-term capita n capital gain (line 15) over ne	(e) Cost (or other basis) 7 al loss (line 15) t short-term capital loss (lin	(g) Adjustments to g or loss from Form(s) 8 Part II, line 2, column	949, (g) 11 12 13 14 15 16 17	Subtract column (e) from column (d) and combine the result with column (g) 2,201. 2,201.
8a 8b 9 10 11 12 13 14 15 F 16 17	e instructions for how to figure the amounts enter on the lines below. Is form may be easier to complete if you and off cents to whole dollars. 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 Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with Box F checked Enter gain from Form 4797, line 7 or 9 Long-term capital gain from installment sales Long-term capital gain or (loss) from like-kin Capital gain distributions Net long-term capital gain or (loss). Combin Part III Summary of Parts I and	(d) Proceeds (sales price) s from Form 6252, line 26 or 3 d exchanges from Form 8824 e lines 8a through 14 in colum d II ne 7) over net long-term capita n capital gain (line 15) over ne 1120, page 1, line 8, or the ap	(e) Cost (or other basis) 7 al loss (line 15) t short-term capital loss (lin	(g) Adjustments to g or loss from Form(s) 8 Part II, line 2, column	949, (g) 11 12 13 14 15	Subtract column (e) from column (d) and combine the result with column (g) 2,201.

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

Schedule D (Form 1120) 2022

LHA

Form **8949**

Department of the Treasury

TECHNOLOGY

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 12A

Social security number or taxpayer identification no.

22-1487354

Internal Revenue Service File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and

Name(s) shown on return

THE TRUSTEES OF THE STEVENS INSTITUTE OF

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.

<u>broker and may even tell you which box to check</u> Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term Part I 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 \perp (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 Adjustment, if any, to gain or (h) (c) (d) (e) loss. If you enter an amount Proceeds Description of property Date sold or Cost or other Gain or (loss). Date acquired in column (g), enter a code in (sales price) basis. See the Subtract column (e) (Example: 100 sh. XYZ Co.) (Mo., day, yr.) disposed of column (f). See instructions. Note below and from column (d) & (Mo., day, yr.) (g) Amount of see Column (e) ir combine the result Code(s) with column (g) the instructions adjustment KKR NORTH AMERICA FUND XI (INDIGO) LP 30. 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B

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)

30.

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

Depreciation and Amortization (Including Information on Listed Property)

Attach to your tax return.

OMB No. 1545-0172

A PG1

3

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

THE TRUSTEES OF THE STEVENS INSTITUTE OF

Go to www.irs.gov/Form4562 for instructions and the latest information. Business or activity to which this form relates

Identifying number

ECHNOLOGY		I	PROFESSIONAL S	ERVICES		22-1487354
Part I Election To Expense Certain P	roperty Under Section 17	9 Note: If you have a	any listed property,	complete Part	V before yo	u complete Part I.
Maximum amount (see instructions	s)				1	1,080,000
2 Total cost of section 179 property	placed in service (see i	nstructions)			2	
3 Threshold cost of section 179 prop						2,700,000
Reduction in limitation. Subtract lir					اما	
5 Dollar limitation for tax year. Subtract line 4 fro						
6 (a) Description			(business use only)	(c) Elected		
7 Listed property. Enter the amount	from line 29		7			
8 Total elected cost of section 179 p					8	
9 Tentative deduction. Enter the sm						
O Carryover of disallowed deduction						
Business income limitation. Enter to			·			
Section 179 expense deduction. A		•	,			0
					12	<u> </u>
3 Carryover of disallowed deduction lote: Don't use Part II or Part III below		· · · · · · · · · · · · · · · · · · ·	13			
		· · · · · · · · · · · · · · · · · · ·	soludo lietod propo	uds / \		
Operation 2 operation and in the						
4 Special depreciation allowance for		• •	** *	_		
•						
5 Property subject to section 168(f)(,				15	
6 Other depreciation (including ACR	S)				16	481
Part III MACRS Depreciation (D	on't include listed pro	perty. See instruction Section A	is.)			
8 If you are electing to group any assets placed in Section B - As	sets Placed in Service			neral Deprecia	tion Systen	n
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciati (business/investment u only - see instructions	se (u) necovery	(e) Convention	(f) Method	(g) Depreciation deduction
9a 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	
g == year property			27.5 yrs.	ММ	S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		39 yrs.	MM	S/L	
 Nonresidential real property 	/		33 yis.	MM	S/L	
Section C - Ass	ets Placed in Service	During 2022 Tax Ye	ar Using the Alter	native Depreci	ation Syste	em
20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year	/		30 yrs.	MM	S/L	
d 40-year	/		40 yrs.	MM	S/L	
Part IV Summary (See instruction	ns.)					
1 Listed property. Enter amount from	n line 28				21	
2 Total. Add amounts from line 12, I		es 19 and 20 in colur	nn (g), and line 21.			
Enter here and on the appropriate				r	22	481
3 For assets shown above and place						
3 For assets shown above and place portion of the basis attributable to	ū	current year, enter the	ne 23			

22-1487354

Page 2

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

	ent, recreation, o	,												
	ny vehicle for w ns (a) through (c								se expens	e, comp	olete on	ly 24a,		
	A - Depreciation								imits for p	asseng	er auton	nobiles.))	
24a Do you have evidence	to support the bu	siness/investmer	nt use cla	imed?		Yes [No	24b If "\	es," is th	e evide	nce writt	en?	Yes	No
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentag	e ot	(d) Cost or ther basis		Basis for de (business/ii	preciation	(f) Recovery period	(Met	g) hod/ ention	(Depre	h) ciation iction	Elec sectio	n 179
25 Special depreciation used more than 50%	•		. ,				•	,		25				
26 Property used more										1 20				
		9/												
		9/												
-	: :	%												
27 Property used 50% of			-						1					
<u></u>	: :	9/							S/L -					
	: :	9/							S/L -				1	
	: :	9/							S/L -				1	
28 Add amounts in colu	mn (h) lines 25			and on	line :	21 page	1		•	28			1	
29 Add amounts in colu												29		
	<i></i>					on on Us								
			-	a)		(b)		(c)	(0		-	e)	(f	
30 Total business/investme year (don't include com		ĭ I	Vel	nicle		Vehicle	'	Vehicle	Veh	icle	Veh	nicle	Vehi	cle
31 Total commuting mile	es driven during	the year												
32 Total other personal	(noncommuting) miles												
driven														
33 Total miles driven du	ring the year.													
Add lines 30 through	32												<u> </u>	
34 Was the vehicle avail during off-duty hours	lable for person	al use	Yes	No	Ye	s No	Ye	s No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used														
than 5% owner or re														
36 Is another vehicle av	•													
		- Questions fo	or Empl	overs W	/ho P	rovide V	ehicles	for Use h	v Their F	mplove	es			
Answer these questions more than 5% owners or	to determine if y	ou meet an ex	•	•					•			ren't		
37 Do you maintain a w	•		hihita a	ll nerser	میں اور	a of vobi	olee inc	luding cor	nmutina	hv vour			Yes	No
omployees?	ntien policy stat	oment that pro	ייווטונס מ	" heraur	ıaı uS	C OI VEIII	oico, ii iC	ading col	initiatility,	by your			163	110

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	Yes	No
	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.		
D	art VI Amountination		

Part VI Amortization						
(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortizat period or pero		(f) Amortization for this year
42 Amortization of costs that begins during your 2	2022 tax year	r:		_		
	1 1					
	1 1					
43 Amortization of costs that began before your 2	022 tax year				43	
44 Total. Add amounts in column (f). See the instr	ructions for w	vhere to report			44	

216252 12-08-22

Form **4562** (2022)

Department of the Treasury Internal Revenue Service

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

Attach to your tax return.

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

OMB No. 1545-0184

	e(s) shown on return						Ide	ntifying number
	TRUSTEES OF THE STEVENS INS	FITUTE OF						
	HNOLOGY							22-1487354
1a	Enter the gross proceeds from sales of (or substitute statement) that you are			2022 on Form(s) 1			1a	
b	Enter the total amount of gain that yo	-	n lines 2, 10, an	d 24 due to the pa	rtial dispositions o	f		
	MACRS assets					I .	1b	
С	Enter the total amount of loss that you	_		-	-			
Pa	rt I Sales or Exchanges of	Property Use	ed in a Trade	or Business	and Involuntar	v Convers	1c	From Other
	Than Casualty or Theft	-Most Prope	rtv Held Mor	re Than 1 Year	(see instruction			
				I	(e) Depreciation	(f) Cost or of	ther	(-)
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(C) Date sold (mo., day, yr.)	(d) Gross sales price	allowed or	basis, plus		(g) Gain or (loss) Subtract (f) from the
SEI	STATEMENT 11	(mo., day, yr.)	(mo., day, yr.)	price	allowable since acquisition	improvements expense of sa		sum of (d) and (e)
3	Gain, if any, from Form 4684, line 39			•			3	
4	Section 1231 gain from installment sa	ales from Form 6	252, line 26 or 3	7			4	
5	Section 1231 gain or (loss) from like-k						5	
6	Gain, if any, from line 32, from other t						6	
7	Combine lines 2 through 6. Enter the						7	2,201.
	Partnerships and S corporations. R	eport the gain or	(loss) following	the instructions fo				
	line 10, or Form 1120-S, Schedule K, $$	line 9. Skip lines	8, 9, 11, and 12	below.		- 1		
	Individuals, partners, S corporation	shareholders, a	and all others.	If line 7 is zero or a	loss, enter the am	ount		
	from line 7 on line 11 below and skip		•	•				
	1231 losses, or they were recaptured	•			ng-term capital gair	n on		
	the Schedule D filed with your return	and skip lines o,	9, 11, and 12 be	eiow.		L		
8	Nonrecaptured net section 1231 loss	es from prior yea	rs. See instructi	ons			8	
9	Subtract line 8 from line 7. If zero or le	•	•	•		- 1		
	line 9 is more than zero, enter the am			•	from line 9 as a lo	ong-term		
	capital gain on the Schedule D filed w	ith your return. S	See instructions				9	2,201.
Pa	rt II Ordinary Gains and I	osses (see in	structions)					
10	Ordinary gains and losses not includ	ad an lines 11 th	rough 16 (includ	do proporty hold 1	voor or loop):			
	Ordinary gains and losses not includ		Tough 16 (includ	Te property field in	year or less).			
11	Loss, if any, from line 7	ı		I	.		11	(
12	Gain, if any, from line 7 or amount fro						12	
13	Gain, if any, from line 31						13	
14	Net gain or (loss) from Form 4684, line						14	
15	Ordinary gain from installment sales f					Г	15	
16	Ordinary gain or (loss) from like-kind e	•					16	
17	0 1: " 40" 140						17	
18	For all except individual returns, enter							
	a and b below. For individual returns,	complete lines a	and b below.	-	-			
а	If the loss on line 11 includes a loss fr	om Form 4684, I	line 35, column ((b)(ii), enter that par	t of the loss here.	Enter the		
	loss from income-producing property	on Schedule A (I	Form 1040), line	16. (Do not include	e any loss on prop	erty used		
	as an employee.) Identify as from "For						18a	
b	Redetermine the gain or (loss) on line							
	(Form 1040), Part I, line 4						18b	

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2022)

Form 4797 (2022) TECHNOLOGY

Pa	rt III Gain From Disposition of Propert	y Un	der Sections 1245	, 1250, 1252	, 125	54, and 1255	(see	instructions)
19	(a) Description of section 1245, 1250, 1252, 1254, o	or 1255	5 property:			(b) Date acquire (mo., day, yr.)	d	(c) Date sold (mo., day, yr.)
_A								
<u>B</u>								
<u></u> C								
<u>D</u>			Т					
	These columns relate to the properties on				_			
	lines 19A through 19D.		Property A	Property	В	Property C		Property D
20	Gross sales price (Note: See line 1a before completing.)	20						
21	Cost or other basis plus expense of sale	21						
22	Depreciation (or depletion) allowed or allowable	22						
23	Adjusted basis. Subtract line 22 from line 21	23						
24	Total gain. Subtract line 23 from line 20	24						
	If section 1245 property:							
	Depreciation allowed or allowable from line 22	25a						
	Enter the smaller of line 24 or 25a	25b						
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.							
	Additional depreciation after 1975. See instructions	26a						
b	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b						
С	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	26d						
е	Enter the smaller of line 26c or 26d	26e						
f	Section 291 amount (corporations only)	26f						
g	Add lines 26b, 26e, and 26f	26g						
27	If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.							
	Soil, water, and land clearing expenses	27a						
	Line 27a multiplied by applicable percentage	27b						
	Enter the smaller of line 24 or 27b	27c						
	If section 1254 property: Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion. See instructions	28a						
b	Enter the smaller of line 24 or 28a	28b						
29 a	If section 1255 property: Applicable percentage of payments excluded from income under section 126. See instructions	29a						
b	Enter the smaller of line 24 or 29a. See instructions	29b						
S	mmary of Part III Gains. Complete property o	مصبياه	a A through D through I	ina 20h hafara	aoina	to line 20		
Jui	Timaly of Fart in Games. Complete property of	olumn	S A through D through i	ine 29b belore (going	to line 30.		
30	Total gains for all properties. Add property columns	A thro	ough D, line 24				30	
31	Add property columns A through D, lines 25b, 26g,	,	•			·····	31	
32	Subtract line 31 from line 30. Enter the portion from from other than casualty or theft on Form 4797, line		ulty or theft on Form 468	34, line 33. Ente	r the p		32	
Pa	rt IV Recapture Amounts Under Section	ns 17	79 and 280F(b)(2) \	When Busine	ess l	Jse Drops to 5	50%	or Less
	(see instructions)					T	-	
						(a) Section 179		(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allo	wable	in prior years	[33			
34	D				34			
35	Recapture amount. Subtract line 34 from line 33. Se				35			

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Form 4797 (2022)

SCHEDULE D	CZ	CAPITAL LOSS CARRYOVER						
	LOSS YEAR	ORIGINAL LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING				
	2017 2018 2019 2020 2021	999		999				
CAPITAL LOSS	CARRYOVER TO	CURRENT TAXABLE YEAR	t .	999				

FORM 4797	PRO	PERTY HEL	O MORE THAN	ONE YEAR	ST.	ATEMENT 11
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
KKR NORTH AMERICA FUND XI (INDIGO) LP KKR NORTH AMERICA FUND XI						273.
(PLATINUM), LP KKR NORTH AMERICA FUND XI (WAVE),						-716.
LP						2,644.
TOTAL TO 4797, PA	RT I, LINE	2				2,201.