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Form 8879-TE	IRS e-file Signature Authorization for a Tax Exempt Entity	OMB No. 1545-0047			
	For calendar year 2021, or fiscal year beginning $_ JUL 1$, 2021, and ending $_ JUN 30$,	²⁰ 22 2021			
Department of the Treasury Internal Revenue Service	 Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information. 				
Name of filer		EIN or SSN			
CENTRA:	L MICHIGAN UNIVERSITY	38-6004447			
Name and title of officer or pe	·				
Deut I Turne of I	ASSOCIATE VICE PRESIDENT				
	Return and Return Information				
Form 5330 filers may enter or 10a below, and the amo	rn for which you are using this Form 8879-TE and enter the applicable amount, if any, from dollars and cents. For all other forms, enter whole dollars only. If you check the box on line ount on that line for the return being filed with this form was blank, then leave line 1b, 2b, ank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable	ne 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b,			
1a Form 990 check h	ere b Total revenue, if any (Form 990, Part VIII, column (A), line 12)				
2a Form 990-EZ che	ck here 🕨 📃 🛛 b Total revenue, if any (Form 990-EZ, line 9)				
3a Form 1120-POL of					
4a Form 990-PF che					
5a Form 8868 check					
6a Form 990-T check					
7a Form 4720 check		7b			
8a Form 5227 check		8b			
9a Form 5330 check		9b			
10a Form 8038-CP ch	eck here b Amount of credit payment requested (Form 8038-CP, Part III, li ion and Signature Authorization of Officer or Person Subject to Tax	ine 22) 10b			
	I declare that I am an officer of the above entity or I am a person subject to tak				
of entity)	, (EIN) and				
entry to the financial institu financial institution to debi- later than 2 business days payment of taxes to receiv personal identification num PIN: check one box only	, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic to ition account indicated in the tax preparation software for payment of the federal taxes on the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financia prior to the payment (settlement) date. I also authorize the financial institutions involved in e confidential information necessary to answer inquiries and resolve issues related to the ber (PIN) as my signature for the electronic return and, if applicable, the consent to electronic to electronic to the payment for the electronic return and its applicable.	wed on this return, and the ial Agent at 1-888-353-4537 no n the processing of the electronic payment. I have selected a ronic funds withdrawal.			
X I authorize PL.	ANTE & MORAN, PLLC to	enter my PIN 12345			
	ERO firm name	Enter five numbers, but do not enter all zeros			
with a state ager	on the tax year 2021 electronically filed return. If I have indicated within this return that a ncy(ies) regulating charities as part of the IRS Fed/State program, I also authorize the afor isclosure consent screen.				
return. If I have i	person subject to tax with respect to the entity, I will enter my PIN as my signature on the indicated within this return that a copy of the return is being filed with a state agency(ies) r rogram, I will enter my PIN on the return's disclosure consent screen.	regulating charities as part of the			
Signature of officer or person subject		Date > 5/2/2023			
Part III Certifica	tion and Authentication				
	ur six-digit electronic filing identification your five-digit self-selected PIN. 38627813579 Do not enter all zeros				
-	neric entry is my PIN, which is my signature on the 2021 electronically filed return indicate cordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Au				
ERO's signature 🕨 PLA	NTE & MORAN, PLLC Date ► 05/	01/23			
ERO Must Retain This Form - See Instructions					
	Do Not Submit This Form to the IRS Unless Requested To Do S	Form 8879-TE (2021)			
	Paperwork Reduction Act Notice, see instructions.				
102521 01-11-22	9				

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Public Disclosure Copy

Form 990T

PLEASE SIGN THIS COPY AND RETAIN FOR YOUR RECORDS

Public Inspection Requirement

An exempt organization must make available for public inspection, upon request and without charge, a copy of its original and amended annual information returns. Each information return must be made available from the date it is required to be filed (determined without regard to any extensions), or is actually filed, whichever is later. An original return does not have to be made available if more than 3 years have passed from the date the return was required to be filed (including any extensions) or was filed, whichever is later. An amended return does not have to be made available if more than 3 years have passed from the date it was filed.

An annual information return includes an exact copy of the return (Form 990 or 990–EZ and amended return, if any) and all schedules, attachments, and supporting documents filed with the IRS. In the case of a tax-exempt organization other than a private foundation, the names and addresses of contributors to the organization need not be disclosed, and Schedule B has been redacted accordingly.

For returns filed by Section 501(c)(3) organizations after August 17, 2006, Form 990-T must also be made available for public inspection. However, only those schedules, statements, and attachments to Form 990-T that relate to the imposition of the unrelated business income tax must be made available for public inspection.

This copy of the return is provided only for Public Disclosure purposes. Any confidential information regarding donors, and schedules or attachments to Form 990-T that do not relate to the calculation of unrelated business income tax, have been removed.

EXTENDED TO MAY 15, 2023							
Form 990-T							
	(and proxy tax under section 6033(e))						
	For calendar year 2021 or other tax year beginning JUL 1, 2021 , and ending JUN 30, 202	22	2021				
Department of the Treasury	► Go to www.irs.gov/Form990T for instructions and the latest information.	— L					
Internal Revenue Service	Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)).	Open to Public Inspection for 501(c)(3) Organizations Only				
A Check box if address changed.	Name of organization (Check box if name changed and see instructions.)	DEmplo	oyer identification number				
B Exempt under section	Print CENTRAL MICHIGAN UNIVERSITY		8-6004447				
X 501(c)(3)	or Number, street, and room or suite no. If a P.O. box, see instructions.		o exemption number nstructions)				
408(e) 220(e)	Type 1200 S. FRANKLIN ST	Ì	,				
408A 530(a)	City or town, state or province, country, and ZIP or foreign postal code						
529(a) 529A	MOUNT PLEASANT, MI 48859	_F 🗌	Check box if				
	C Book value of all assets at end of year		an amended return.				
G Check organization	type 🕨 🔀 501(c) corporation 🔄 501(c) trust 🔄 401(a) trust 🔄 Other trust						
H Check if filing only to	p ▶ Claim credit from Form 8941 Claim a refund shown on Form 2439						
Check if a 501(c)(3)	organization filing a consolidated return with a 501(c)(2) titleholding corporation	<u></u>					
J Enter the number of	attached Schedules A (Form 990-T)		<u>6 </u>				
• • •	was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?		Yes X No				
	ame and identifying number of the parent corporation.						
	re of ► JULIA MONTROSS Telephone number ►	<u>989-</u>	774-3332				
	related Business Taxable Income						
1 Total of unrelated	business taxable income computed from all unrelated trades or businesses (see	1					
instructions)		1	227,454.				
2 Reserved		2					
3 Add lines 1 and 2		3	227,454.				
	utions (see instructions for limitation rules) STMT 1 STMT 2	4	0.				
	isiness taxable income before net operating losses. Subtract line 4 from line 3	5	227,454.				
	operating loss. See instructions STATEMENT 3	6	227,454.				
	business taxable income before specific deduction and section 199A deduction.	1					
Subtract line 6 fro		7	1 000				
	n (generally \$1,000, but see instructions for exceptions)		1,000.				
	99A deduction. See instructions	9	1 000				
	Add lines 8 and 9	10	1,000.				
	ss taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7,		0				
Part II Tax Com	nutation	11	0.				
	kable as corporations. Multiply Part I, line 11 by 21% (0.21)		0.				
-		▶ 1	0.				
	trust rates. See instructions for tax computation. Income tax on the amount on						
Part I, line 11 from		► <u>2</u> ► 3	<u> </u>				
3 Proxy tax. See ins		4					
		4 5					
		6					
		7	0.				
	through 6 to line 1 or 2, whichever applies	/	Form 990-T (2021)				
			· onn •••• • (2021)				

Form 9	90-T (2021)			Page 2
Part	III Tax and Payments			
1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)			
b	Other credits (see instructions) 1b			
с	General business credit. Attach Form 3800 (see instructions)			
d	Credit for prior year minimum tax (attach Form 8801 or 8827) 1d			
е	Total credits. Add lines 1a through 1d	1e		
2	Subtract line 1e from Part II, line 7	2		0.
3	Other amounts due. Check if from: Form 4255 Form 8611 Form 8697 Form 8866			
	Other (attach statement)	3		
4	Total tax. Add lines 2 and 3 (see instructions).			
	section 1294. Enter tax amount here	4		0.
5	Current net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4	5		0.
6a	Payments: A 2020 overpayment credited to 2021 6a			
b	2021 estimated tax payments. Check if section 643(g) election applies 66			
с	Tax deposited with Form 8868 6c			
d	Foreign organizations: Tax paid or withheld at source (see instructions) 6d			
е	Backup withholding (see instructions)			
f	Credit for small employer health insurance premiums (attach Form 8941)			
g	Other credits, adjustments, and payments: Form 2439			
	□ Form 4136 Other Total ► 6g			
7	Total payments. Add lines 6a through 6g	7		
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached	8		
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9		
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10		
	Enter the amount of line 10 you want: Credited to 2022 estimated tax Refunded	11		
Part	IV Statements Regarding Certain Activities and Other Information (see instructions)			
1	At any time during the 2021 calendar year, did the organization have an interest in or a signature or other authority		Yes	<u>s No</u>
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country			
	here			X
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a			
	foreign trust?			X
	If "Yes," see instructions for other forms the organization may have to file.			
3	Enter the amount of tax-exempt interest received or accrued during the tax year			
4	Enter available pre-2018 NOL carryovers here \$ 946, 286. Do not include any post-2017 NOL ca	ryover		
	shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Par	t I, line 4.		
5	Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce			
	the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions			
	Business Activity Code Available post-2017 NOL of	arryover		
	SEE STATEMENT 6 \$			
	\$			
6a	Did the organization change its method of accounting? (see instructions)			X
b	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No,"			
	explain in Part V	<u></u>		
Davet	V Supplemental Information			

Part V Supplemental Information

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

Sign Here							
Paid	Print/Type preparer's name	Preparer's signature	Date 05/01/23	Check self- employe	if	ctions)? X Yes No PTIN P00645252	
Preparer Use Only				Firm's EIN Phone no.		$\frac{38-1357951}{69) 567-4500}$	
123711 01-31-2				T Hono Ho.	<u>\</u>	Form 990-T (2021)	

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FORM 990-T	CONTRIBUTIONS	STATEMENT 1
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
CHARITABLE CONTRIBUTIONS FROM PASS THROUGH	N/A	138.
TOTAL TO FORM 990-T, PART I, LI	INE 4	138.

FORM 990-T	CONTRIBUTIONS SUMMARY		STATEMENT	2
	CONTRIBUTIONS SUBJECT TO 100% LIMIT CONTRIBUTIONS SUBJECT TO 25% LIMIT			
FOR TAX FOR TAX FOR TAX FOR TAX	OF PRIOR YEARS UNUSED CONTRIBUTIONS YEAR 2016 YEAR 2017 YEAR 2018 YEAR 2019 YEAR 2020			
TOTAL CARI TOTAL CURI	RYOVER RENT YEAR 10% CONTRIBUTIONS	138		
	TRIBUTIONS AVAILABLE NCOME LIMITATION AS ADJUSTED	138 0		
EXCESS 10	NTRIBUTIONS D% CONTRIBUTIONS ESS CONTRIBUTIONS	138 0 138		
ALLOWABLE	CONTRIBUTIONS DEDUCTION			0
TOTAL CON	TRIBUTION DEDUCTION			0

FORM 990-T	PRE 2018 NOL SCHEDULE	STATEMENT 3
PRE-2018 NOL CARRY FORW PRE-2018 NOL DEDUCTION	ARD FROM PRIOR YEAR INCLUDED IN PART I, LINE 6	946,286. 227,454.
SCHEDULE A PORTION OF P SCHEDULE A ENTITY	RE-2018 NOL SCHEDULE A SHARE	
 1 2	0.0.	
- 3 4	0.0.	
5	0.	
6	0.	
TOTAL SCHEDULE A SHARE (OF PRE-2018 NOL	0.
NET OPERATING DEDUCTION BALANCE AFTER PRE-2018	NOL DEDUCTION	227,454. 0.
EXPIRING NET OPERATING DECARRY FORWARD OF NET OP		0. 718,832.
		,10,002.

FOOTNOTES

STATEMENT 4

SECTION 1.263(A)-1(F) DE MINIMIS SAFE HARBOR ELECTION

CENTRAL MICHIGAN UNIVERSITY 1200 S. FRANKLIN ST. MT. PLEASANT, MI 48859

EMPLOYER IDENTIFICATION NUMBER: 38-6004447 FOR THE YEAR ENDING JUNE 30, 2021

CENTRAL MICHIGAN UNIVERSITY IS MAKING THE DE MINIMIS SAFE HARBOR ELECTION UNDER REG. SEC. 1.263(A)-1(F).

38-6004447

FORM 990-T	PRE-201	8 NET OPERATING	LOSS DEDUCTION	STATEMENT 5
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/07	351,026.	351,026.	0.	0.
06/30/08	256,580.	137,936.	118,644.	118,644.
06/30/09	50,318.	0.	50,318.	50,318.
06/30/10	123,216.	0.	123,216.	123,216.
06/30/11	29,733.	0.	29,733.	29,733.
06/30/12	108,000.	0.	108,000.	108,000.
06/30/13	99,731.	0.	99,731.	99,731.
06/30/14	51,084.	0.	51,084.	51,084.
06/30/15	103,831.	0.	103,831.	103,831.
06/30/18	261,729.	0.	261,729.	261,729.
NOL CARRYO	VER AVAILABLE THIS	YEAR	946,286.	946,286.

FORM 990T, PART IV

AVAILABLE POST-2017 NOL

STATEMENT 6

BUSINESS CODE	AVAILABLE POST-2017 NOL
520000 450000 530000 710000	1,020,735. 1,436. 22,365. 45,117.
720000	87,209.

SCHEDULE A (Form 990-T)

Department of the Treasury

Internal Revenue Service

Unrelated Business Taxable Income From an Unrelated Trade or Business

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

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

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

6

A Name

ne of the organization		B Employer
CENTRAL MICHIGAN	UNIVERSITY	38-60

identification number 04447

1

of

D Sequence:

520000 C Unrelated business activity code (see instructions)

EC	E Describe the unrelated trade or business INVESTMENTS						
Pa			(A) Income	(B) Expenses	(C) Net		
1a	Gross receipts or sales						
b	Less returns and allowances c Balance >	1c					
2	Cost of goods sold (Part III, line 8)	2					
3	Gross profit. Subtract line 2 from line 1c	3					
4 a	Capital gain net income (attach Sch D (Form 1041 or Form						
	1120)). See instructions	4a	495,932.		495,932.		
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions)	4b	-108.		-108.		
с	Capital loss deduction for trusts	4c					
5	Income (loss) from a partnership or an S corporation (attach						
	statement) STATEMENT 7	5	-342,435.		-342,435.		
6	Rent income (Part IV)	6					
7	Unrelated debt-financed income (Part V)	7					
8	Interest, annuities, royalties, and rents from a controlled						
	organization (Part VI)	8					
9	Investment income of section 501(c)(7), (9), or (17)						
	organizations (Part VII)	9					
10	Exploited exempt activity income (Part VIII)	10					
11	Advertising income (Part IX)	11					
12	Other income (see instructions; attach statement)	12					
13	Total. Combine lines 3 through 12	13	153,389.		153,389.		
_							

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

1	Compensation of officers, directors, and trustees (Part X)			1	
2				2	
3	Repairs and maintenance			3	
4	Bad debts			4	
5	Interest (attach statement). See instructions			5	
6	Taxes and licenses			6	
7	Depreciation (attach Form 4562). See instructions	7			
8	Depreciation (attach Form 4562). See instructions Less depreciation claimed in Part III and elsewhere on return	8a		8b	
9	Depletion			9	
10	Contributions to deferred compensation plans			10	
11	Employee benefit programs				
12	Excess exempt expenses (Part VIII)				
13	Excess readership costs (Part IX)			13	
14	Other deductions (attach statement)			14	
15	Total deductions. Add lines 1 through 14			15	0.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from	Part	I, line 13,		
	column (C)			16	153,389.
17	Deduction for net operating loss. See instructions			17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16				153,389.
LHA	For Paperwork Reduction Act Notice, see instructions.			Schedu	le A (Form 990-T) 2021

123741 01-28-22

Sched	ule A (Form 990-T) 2021				⊥ Page 2
Part		nod of inventory va l uati	on 🕨		
1	Inventory at beginning of year			1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)				
5 6	Other costs (attach statement)				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter h				
9	Do the rules of section 263A (with respect to property p				Yes No
Part	IV Rent Income (From Real Property and	Personal Proper	ty Leased with Re	eal Property)	
1	Description of property (property street address, city, st	tate, ZIP code). Check	if a dual-use. See instr	uctions.	
	A				
	в				
	D	•	n l	0	
2	Rent received or accrued	A	В	C	D
2 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	and an Dart L lina 6 a		0.
3	Deductions directly connected with the income	through D. Enter here	and on Part I, line 0, co		••
4	in lines 2(a) and 2(b) (attach statement)				
•		1	1	L	
5	Total deductions. Add line 4 columns A through D. En		line 6, co l umn (B)		0.
Part	V Unrelated Debt-Financed Income (se	e instructions)			
1	Description of debt-financed property (street address, c	ity, state, ZIP code). C	heck if a dual-use. See	instructions.	
	B				
	с р				
		А	В	с	D
2	Gross income from or allocable to debt-financed		U		
-	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				
F	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	/0	//	,,,	
8	Total gross income (add line 7, columns A through D).	. Enter here and on Par	t I, line 7, column (A)	>	0.
	- · · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·		
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A three				0.
11	Total dividends-received deductions included in line	10			0.
123721 (01-28-22	19		Schedule A	(Form 990-T) 2021

												1
Sched Part	ule A (Form 990-T) 2021	l Jities Ro	valties and R	ents fron	n Control	led Or	ganization		e instruct	ione)		Page 3
1 art			jandoo, and m				Exempt Control	`		,		
	1. Name of controlled		2. Employer	3. Net	unrelated	-	al of specified	-	t of colur		6. Deduc	tions directly
	organization		identification	incom	ne (loss)	payn	nents made		nc l uded Iling orga		conne	cted with
			number	(see ins	structions)				gross inc		income	in co l umn 5
<u>(1)</u>												
<u>(2)</u>												
<u>(3)</u>												
<u>(4)</u>												
					Controlled O	<u> </u>		<u> </u>	0		<u> </u>	
7	7. Taxable Income	ind	let unrelated come (loss)		otal of specif yments mad		10. Part of that is included controlling	luded in	n the		connecte	
		(see	instructions)				gross	income	•		come in c	
<u>(1)</u>												
<u>(2)</u>												
<u>(3)</u>												
<u>(4)</u>							Add colum	ine 5 an	d 10	Ado	1 columns	6 and 11.
							Enter here	and on I	Part I,	Ente	er here an	d on Part I ,
							line 8, c	co l umn (A)	l	ine 8, co l	umn (B)
Totals						►			Ο.			Ο.
Part	VII Investment	Income o	of a Section 50)1(c)(7), (9), or (17)	Orgar	nization _{(s}	ee instru	uctions)			
	1. Desc	cription of ir	ncome		2. Amou		3. Deductio		4. Set			al deductions
					incor	ne	directly conne (attach stater		attach st	atemer		set-asides cols 3 and 4)
(1)												
(2)												
(3)												
(4)					Add amou	inte in					Add	amounts in
					column 2							mn 5. Enter
					here and o							and on Part I,
Totals					line 9, colu	umn (A) 0					lines	∂, column (B) 0 .
Part		xemnt Δ	ctivity Income	Other T	∣ han Adve			lago inst	ructions)			0.
1	Description of exploite			, etailer i			gineenie	366 1131	ructions			
2	Gross unrelated busin		from trade or busi	iness. Enter	r here and o	n Part I.	line 10. colum	n (A)		2		
3	Expenses directly con											
-			·							3		
4	Net income (loss) from											
										4		
5	Gross income from ac	tivity that is	not unrelated bus	iness incor	ne					5		
6	Expenses attributable									6		
7	Excess exempt expension											
	4. Enter here and on P	Part II, line 1	2			<u></u>		<u></u>		7		

Schedule A (Form 990-T) 2021

123731 01-28-22

Sched	ule A (Form 990-T) 2021				⊥ Page 4
Part					Fage -
1	Name(s) of periodical(s). Check box if reporting	two or more periodicals on a	consolidated basi	s.	
	A				
	В				
	c				
	D				
Enter a	amounts for each periodical listed above in the co	prresponding column.			
		Α	В	С	D
2	Gross advertising income				
	Add columns A through D. Enter here and on P	Part I, line 11, column (A)		►	0.
а					
3	Direct advertising costs by periodical				
а	Add columns A through D. Enter here and on P	Part I, line 11, column (B)		►	0.
4	Advertising gain (loss). Subtract line 3 from line				
	2. For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column in				
	line 4 showing a loss or zero, do not complete				
_	lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is less				
•	than line 6, enter zero				
8	Excess readership costs allowed as a				
	deduction. For each column showing a gain on				
	line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the grea				0.
Part	Part II, line 13 X Compensation of Officers, Dire	ctors and Trustees		····· ►	0.
I art				3. Percentage	4. Compensation
	1. Name	2. Title		of time devoted	attributable to
				to business	unrelated business
(1)				%	
(2)				%	
				1 1	
(3)					
				%	
				%	
<u>(4)</u>	. Enter here and on Part II. line 1				0.
<u>(4)</u> 	. Enter here and on Part II, line 1 XI Supplemental Information (see	instructions)			0.
<u>(4)</u>		instructions)			0.
(4) Total		instructions)			0.
(4) Total		instructions)			0.
(4) Total		instructions)			0.
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<u>(4)</u> 		instructions)			0.
(4) Total		instructions)			0.
		instructions)			0.
<u>(4)</u> 		instructions)			0.
<u>(4)</u> 		instructions)			0.

FORM 990-T (A) INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 7
DESCRIPTION	NET INCOME OR (LOSS)
ARCLIGHT ENERGY PARTNERS FUND VI, L.P ORDINARY BUSINESS	
INCOME (LOSS)	28,506
ARCLIGHT ENERGY PARTNERS FUND VI, L.P INTEREST INCOME	63
BROOKFIELD STRATEGIC REAL ESTATE PARTNERS III HERCULES	
AIV-C LP - ORDINARY B	640
HARVEST MLP INCOME FUND II LLC - ORDINARY BUSINESS INCOME	100
LOSS)	-120
GLOUSTON PRIVATE EQUITY OPPORTUNITIES V, L.P ORDINARY BUSINESS INCOME (LO	E 100
IPS LLC – ORDINARY BUSINESS INCOME (LOSS)	5,120 16
AYNE ANDERSON ENERGY FUND VII, LP - ORDINARY BUSINESS	10
INCOME (LOSS)	80,735
ANDMARK EQUITY PARTNERS XV, L.P ORDINARY BUSINESS	00,755
INCOME (LOSS)	43,460
LANDMARK EQUITY PARTNERS XV, L.P INTEREST INCOME	613
LANDMARK EQUITY PARTNERS XV, L.P DIVIDEND INCOME	61
LANDMARK EQUITY PARTNERS XV, L.P OTHER INCOME (LOSS)	58,663
MONROE CAPITAL PRIVATE CREDIT FUND II (UNLEV) LP -	
ORDINARY BUSINESS INCOME	-180
SDC DIGITAL INFRASTRUCTURE OPPORTUNITY FUND I LP -	
ORDINARY BUSINESS INCOME	-35,171
SEARCHLIGHT CAPITAL III, L.P ORDINARY BUSINESS INCOME	
(LOSS)	-45
TAILWATER ENERGY FUND IV LP - ORDINARY BUSINESS INCOME	
LOSS)	-517,645
THE BARING ASIA PRIVATE EQUITY FUND VII LP - ORDINARY BUSINESS INCOME (LOSS)	-22,388
THE BARING ASIA PRIVATE EQUITY FUND VII LP - INTEREST	-22,300
INCOME	227
THE BARING ASIA PRIVATE EQUITY FUND VII LP - DIVIDEND	
INCOME	57,872
THOMA BRAVO DISCOVER FUND II AIV LP - ORDINARY BUSINESS	··· , ···-
INCOME (LOSS)	-6,002
VANCE STREET CAPITAL LIII L.P ORDINARY BUSINESS INCOME	
(LOSS)	-63,473
VARBURG PINCUS (GANYMEDE) PRIVATE EQUITY XII (CAYMAN),	
J.P ORDINARY BUSIN	-4,832
VARBURG PINCUS (GANYMEDE) PRIVATE EQUITY XII (CAYMAN),	
J.P DIVIDEND INCOM	338
VARBURG PINCUS PRIVATE EQUITY (E&P) XII MAIN-1, L.P	10 700
)RDINARY BUSINESS INC VARBURG PINCUS PRIVATE EQUITY (E&P) XII (A), L.P	10,768
DRDINARY BUSINESS INCOME	-11,583
VARBURG PINCUS PRIVATE EQUITY XII (FT-1), L.P ORDINARY	-11,303
BUSINESS INCOME (L	30,318
BROOKFIELD STRATEGIC REALESTATE PARTNERS III-A LP -	50,510
DRDINARY BUSINESS INCOME	3,914
HIGHBAR PARTNERS III, L.P ORDINARY BUSINESS INCOME	-,
(LOSS)	383
IIGHBAR PARTNERS III, L.P INTEREST INCOME	-2,680
PONTIFAX GLOBAL FOOD AND AGRICULTURE TECHNOLOGY FUND II, LP - ORDINARY BUSIN	-13

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38-6004447

TOTAL	INCLUDED	ON	SCHEDULE	Α.	PART	Ι.	LINE	5
- O	THOTODDD	011	001100000	/		÷,		-

-342,435.

990-T SCH	A POST-201	17 NET OPERATING	LOSS DEDUCTION	STATEMENT 8
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19 06/30/20 06/30/21	299,567. 590,836. 130,332.	0. 0. 0.	299,567. 590,836. 130,332.	299,567. 590,836. 130,332.
NOL CARRYC	VER AVAILABLE THIS	YEAR	1,020,735.	1,020,735.

Name

Department of the Treasury Internal Revenue Service

Capital Gains and Losses ► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T. ► Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

ms 990-T. **202**

38-6004447

Employer identification number

► Yes X No

CENTRAL MICHIGAN UNIVERSITY

Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year?	
If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or la	000
In res, allacing official see its instructions for additional requirements for reporting your gain of it	J33.

Part I Short-Term Capital Gai	ns and Losses - Ass	ets Held One Year o	or Less		
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 ga or loss from Form(s) 89	49,	(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					1,444.
4 Short-term capital gain from installment sales				4	
5 Short-term capital gain or (loss) from like-kind				5	
6 Unused capital loss carryover (attach compute				6	()
7 Net short-term capital gain or (loss). Combine	<u>e lines 1a through 6 in columr</u>	<u>1 h</u>	<u> </u>	7	1,444.
Part II Long-Term Capital Gai	ns and Losses - Ass	ets Held More Than			
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 ga or loss from Form(s) 89 Part II, line 2, column	49,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the 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					404 400
Form(s) 8949 with Box F checked					494,488.
				11	
12 Long-term capital gain from installment sales		7		12	
13 Long-term capital gain or (loss) from like-kind	d exchanges from Form 8824			13	
				14	404 400
15 Net long-term capital gain or (loss). Combine		<u>nh</u>		15	494,488.
Part III Summary of Parts I and					1 4 4 4
16 Enter excess of net short-term capital gain (lin				16	1,444.
17 Net capital gain. Enter excess of net long-term				17	494,488.
18 Add lines 16 and 17. Enter here and on Form		plicable line on other returns		18	495,932.
Note: If losses exceed gains, see Capital Los	ses in the instructions.				

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

Schedule D (Form 1120) 2021

121051 12-17-21



Name(s) shown on return

Sales and Other Dispositions of Capital Assets

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

OMB No. 1545-0074	4
2021	

Attachment Sequence No. **12A**

Social security number or taxpayer identification no.

C O O A A A 7

CENTRAL MICHIG	AN UNIVE	RSITY				38-6	004447	
Before you check Box A, B, or C bel statement will have the same informa-	ation as Form 10	you received any 99-B. Either will s	/ Form(s) 1099-B show whether you	or substitute staten ır basis (usually you	nent(s) fron r cost) was	n your broker. A su s reported to the IF	bstitute IS by your	
broker and may even tell you which Part I Short-Term. Transact		al assets you held	1 year or less are ge	enerally short-term (see	e instruction	s). For long-term		
transactions, see page 2. Note: You may aggregate al codes are required. Enter the	II short-term transac	tions reported on I	Form(s) 1099-B show	wing basis was reporte	ed to the IRS	S and for which no ac		
You must check Box A, B, or C below.	Check only one bo	X. If more than one b	ox applies for your sho	ort-term transactions, com	olete a separa	te Form 8949, page 1, for		
If you have more short-term transactions than wi								
(A) Short-term transactions re	• •	•	•	•	Note ab	ove)		
(B) Short-term transactions re	• •		•	reported to the IRS				
X (C) Short-term transactions no								
1 (a)	(b)	(c)	(d) Proceeds	(e)	Adjustmei	nt, if any, to gain or ou enter an amount	(h)	
Description of property	Date acquired	Date sold or	(sales price)	Cost or other basis. See the	in column	(g), enter a code in	Gain or (loss). Subtract column (e)	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(Note below and). See instructions.	from column (d) &	
		(Mo., day, yr.)		see Column (e) in the instructions	(f) Code(s)	(g) Amount of	combine the result with column (g)	
GLOUSTON PRIVATE					.,	adjustment	(g)	
EOUITY								
OPPORTUNITIES V,							1,236.	С
LANDMARK EQUITY								-
PARTNERS XV, L.P.							51.	С
THE BARING ASIA							511	C
PRIVATE EQUITY								
FUND VII							29.	C
THOMA BRAVO								C
	-							
DISCOVER FUND II							100	~
LP							128.	C
							ļ	
2 Totals. Add the amounts in colu		.,.						
negative amounts). Enter each to		-						
Schedule D, line 1b (if Box A abo		•					1 4 4 4	
above is checked), or line 3 (if E							1,444.	
Note: If you checked Box A above adjustment in column (g) to correct								

Form 8949 (2021)				Attachn	nent Seque	nce No. 12A	Page 2	
Name(s) shown on return. Name and	I SSN or taxpaye	er identification n	o. not required if			Social secur	rity number or entification no.	
CENTRAL MICHIG	AN UNIVE	RSITY					004447	
Before you check Box D, E, or F belo statement will have the same informa broker and may even tell you which b	ow, see whether y ation as Form 109		r Form(s) 1099-B o show whether you	or substitute statem ır basis (usually you	ent(s) from r cost) was			•
Part II Long-Term. Transactio	ons involving capita	al assets you held r	nore than 1 year are	generally long-term (s	ee instructio	ns). For short-term t	ransactions,	•
see page 1. Note: You may aggregate all								
codes are required. Enter the	e totals directly on S	Schedule D, line 8a	ı; you aren't required	d to report these trans	actions on Fo	orm 8949 (see instru	ictions).	-
You must check Box D, E, or F below. O If you have more long-term transactions than will							each applicable box.	
(D) Long-term transactions rep	orted on Form(s) 1099-B showin	g basis was repoi	rted to the IRS (see	Note abo	ove)		
(E) Long-term transactions rep X (F) Long-term transactions not	orted on Form(s)) 1099-B showing	g basis wasn't re					
1 (a)	(b)	(c)	(d)	(e)	Adjustmen	t, if any, to gain or	(h)	•
Description of property	Date acquired	Date sold or	Proceeds	Cost or other		(g), enter a code in	Gain or (loss)	
(Example: 100 sh. XYZ Co.)	(Mo , day, yr)	disposed of	(sales price)	basis. See the	column (f)	. See instructions.	Subtract column (e)	
		(Mo., day, yr.)		Note below and see Column (e) in	(f)	(g)	from column (d) & combine the result	
				the instructions	Code(s)	Amount of adjustment	with column (g)	
ARCLIGHT ENERGY								,
PARTNERS FUND VI,								,
L.P.							1,498.	Ċ
GLOUSTON PRIVATE								•
EQUITY								
OPPORTUNITIES V,							67,120.	Ċ
LANDMARK EQUITY								
PARTNERS XV, L.P.							14.	Ċ
SDC DIGITAL								
INFRASTRUCTURE								_
OPPORTUNITY F							394,502.	Ċ
THE BARING ASIA								_
PRIVATE EQUITY								
FUND VII							12,064.	_ (
WARBURG PINCUS								-
(GANYMEDE) PRIVATE								-
EQUITY							18,504.	. 0
BROOKFIELD								
STRATEGIC								
REALESTATE								. ,
PARTNERS							7.	. C
HIGHBAR PARTNERS							770	. ,
III, L.P.							779.	. (
				+				
								•
								•
								•
								•
				1				•
				1				•
								•
								,
2 Totals. Add the amounts in colur	nns (d), (e), (a) a	nd (h) (subtract						•
negative amounts). Enter each to								
Schedule D, line 8b (if Box D abo		•						
above is checked), or line 10 (if E		•					494,488.	
Note: If you checked Box D above b			was incorrect. ent	ter in co l umn (e) the	basis as re	eported to the IRS	· · ·	•
adjustment in column (g) to correct t								

123012 12-14-21

Form **8949** (2021)

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

Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2)) Attach to your tax return.

OMB No. 1545-0184

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

	202 I					
	Attachment Sequence No. 27					
Identifying number						

CENTRAL MICHIGAN UNIVERSITY		38-6004447
1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S		
(or substitute statement) that you are including on line 2, 10, or 20	1a	
b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of		
MACRS assets	1b	
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS		
agente	10	

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

					(000 1101 00101	(0)	
2 S1	(a) Description of property EE STATEMENT 24	(b) Date acquired (mo., day, yr.)	(C) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(y) Gain or (loss)
_	Opin if any from Form 4004 line 20						<u> </u>
3	Gain, if any, from Form 4684, line 39						
4	Section 1231 gain from installment s						
5	Section 1231 gain or (loss) from like-	kind exchanges fi	rom Form 8824				5
6	Gain, if any, from line 32, from other	than casua l ty or t	heft				
7	Combine lines 2 through 6. Enter the	gain or (loss) her	re and on the ap	propriate line as fo	llows		-108.
	Partnerships and S corporations. F line 10, or Form 1120-S, Schedule K,	edule K,					
	Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.						
8	Nonrecaptured net section 1231 loss	ses from prior yea	rs. See instructi	ons		8	3
9	Subtract line 8 from line 7. If zero or						
	line 9 is more than zero, enter the am	,	,	0			
	capital gain on the Schedule D filed v					g	,
_	•						
Pa	art II Ordinary Gains and	LOSSES (see in:	structions)				

Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):		
Loss, if any, from line 7	11	(108.
	12	
Gain, if any, from line 31		
Net gain or floss) from Form 4684 lines 31 and 38a		
		-108.
	1/	-100.
For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines		
a and b below. For individual returns, complete lines a and b below.		
If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the		
loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used		
as an employee.) Identify as from "Form 4797. line 18a." See instructions	18a	
	19h	
	Gain, if any, from line 7 or amount from line 8, if applicable Gain, if any, from line 31 Net gain or (loss) from Form 4684, lines 31 and 38a Ordinary gain from installment sales from Form 6252, line 25 or 36 Ordinary gain or (loss) from like-kind exchanges from Form 8824 Combine lines 10 through 16 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below. If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the	Loss, if any, from line 7 11 Gain, if any, from line 7 or amount from line 8, if applicable 12 Gain, if any, from line 7 or amount from line 8, if applicable 13 Net gain or (loss) from Form 4684, lines 31 and 38a 14 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 Combine lines 10 through 16 17 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below. 17 If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions 18a Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 18a

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

38-6004447 Page 2

Part III	Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255	(see instructions)
----------	---	--------------------

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:					(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
Α						
В						
С						
D						
	These columns relate to the properties on					
	lines 19A through 19D		Property A	Property B	Property C	Property D
20	Gross sales price (Note: See line 1a before completing.)	20				
21	Cost or other basis plus expense of sale	21				
22	Depreciation (or depletion) allowed or allowable	22				
23	Adjusted basis. Subtract line 22 from line 21	23				
24	Total gain. Subtract line 23 from line 20	24				
25	If section 1245 property:					
	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.					
a	Additional depreciation after 1975. See instructions	26a				
Ł	Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions	26b				
c	Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e	26c				
c	Additional depreciation after 1969 and before 1976	26d				
	Enter the smaller of line 26c or 26d	26e				
	Section 291 amount (corporations only)	26f				
	Add lines 26b, 26e, and 26f	26g				
	If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership.	07				
	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				
	Enter the smaller of line 24 or 28a	28b				
a	If section 1255 property: Applicable percentage of payments excluded from income under section 126. See instructions	29a				
k	Enter the smaller of line 24 or 29a. See instructions	29b				

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties. Add property columns A through D, line 24	30	
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion		
	from other than casualty or theft on Form 4797, line 6	32	
P	art IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to	50%	or Less

			(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33		
34	Recomputed depreciation. See instructions	34		
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35		
1180	12 12-17-21			Form 4797 (2021)

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SCHEDULE A (Form 990-T)

Department of the Treasury

Internal Revenue Service

Unrelated Business Taxable Income From an Unrelated Trade or Business

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

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

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

6

Α	Name of the organization	B Employer ic
	CENTRAL MICHIGAN UNIVERSITY	38-600
<u>c</u>	Unrelated business activity code (see instructions) 450000	D Sequence:

identification number 04447

2

of

Describe the unrelated trade or business **BOOKSTORE** F

Pa	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net					
1a b 2	Gross receipts or sales 2,150. Less returns and allowances c Balance ► Cost of goods sold (Part III, line 8)	1c 2	2,150. 2,167.							
3 4 a	Gross profit. Subtract line 2 from line 1c Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions	3 4a	-17.		-17.					
b c 5	Net gain (loss) (Form 4797) (attach Form 4797). See instructions) Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach	4b 4c								
6 7	statement) Rent income (Part IV) Unrelated debt-financed income (Part V)	5 6 7								
8 9	Interest, annuities, royalties, and rents from a controlled organization (Part VI) Investment income of section 501(c)(7), (9), or (17)	8								
10 11	organizations (Part VII) Exploited exempt activity income (Part VIII) Advertising income (Part IX)	9 10 11								
12 13	Other income (see instructions; attach statement)	12 13	-17.		-17.					
Pa	t II Deductions Not Taken Elsewhere See instruction	ons fo	or limitations on ded	Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be						

directly connected with the unrelated business income

1	Compensation of officers, directors, and trustees (Part X)	1	
2	Salaries and wages	2	295.
3	Repairs and maintenance	3	
4	Bad debts	4	
5	Interest (attach statement). See instructions	5	
6	Taxes and licenses	6	
7	Depreciation (attach Form 4562). See instructions 7 21	•	
8	Less depreciation claimed in Part III and elsewhere on return 8a	8b	21.
9	Depletion	9	
10	Contributions to deferred compensation plans	10	
11	Employee benefit programs	11	
12	Excess exempt expenses (Part VIII)	12	
13	Excess readership costs (Part IX)	13	
14	Other deductions (attach statement) SEE STATEMENT 9	14	277.
15	Total deductions. Add lines 1 through 14	15	593.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13,		
	column (C)	16	-610.
17	Deduction for net operating loss. See instructions	17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16	18	-610.
LHA	For Paperwork Reduction Act Notice, see instructions.	Schedu	e A (Form 990-T) 2021

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					2
Schedi Part	ule A (Form 990-T) 2021	nod of inventory val	uation N/A		Page 2
1	Inventory at beginning of year			1	0.
2	Purchases				2,167.
3	Cost of labor				0.
4	Additional section 263A costs (attach statement)				0.
5	Other costs (attach statement)				0.
6	Total. Add lines 1 through 5			6	2,167.
7	Inventory at end of year			7	0.
8	Cost of goods sold. Subtract line 7 from line 6. Enter h				2,167.
9 Dort	Do the rules of section 263A (with respect to property p				Yes X No
Part			-		
1	Description of property (property street address, city, s	tate, ZIP code). Che	eck if a dual-use. See instr	ructions.	
	B				
	с р				
	B	А	В	с	D
2	Rent received or accrued	A	B		U
ے a	From personal property (if the percentage of				
a	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				
5 Part 1	Total deductions. Add line 4 columns A through D. En V Unrelated Debt-Financed Income (se Description of debt-financed property (street address, or a base of the second	e instructions)			0.
	c				
	D	-	_	-	_
		Α	В	C	D
2	Gross income from or allocable to debt-financed				
3	property Deductions directly connected with or allocable				
Ū	to debt-financed property				
а	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
c	Total deductions (add lines 3a and 3b,				
-	columns A through D)				
4	Amount of average acquisition debt on or allocable				
F	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
6	financed property (attach statement) Divide line 4 by line 5		%	%	%
6 7	Gross income reportable. Multiply line 2 by line 6		<u>/v %</u>	70	90
8	Total gross income (add line 7, columns A through D).	Enter here and on I	Part I, line 7, column (A)	L	0.
5					
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A thr				0.
	Total dividends-received deductions included in line	10			0.
123721 (01-28-22	20		Schedule A	(Form 990-T) 2021

											2
Schedu	ule A (Form 990-T) 2021						<u> </u>				Page 3
Part	VI Interest, Annu	lities, Ro	byalties, and Re	ents fror	n Control		-	`	e instruct	,	
	1 Name of controlle	d	2. Emp l oyer	2 Not	uprolotod	1	Exempt Control al of specified	1			6. Deductions directly
	 Name of controlle organization 			_			al of specified 5. Part of column terms made				connected with
	organization		number		e instructions)			controlling organiza- tion's gross income			income in column 5
(1)					,				gross inc		
(2)											
(3)											
(4)											
		-	Nc	nexempt C	Controlled O	ganizati	ons				
7	. Taxable Income		Net unrelated	9. To	otal of specif	ied	10. Part o			11.	Deductions directly
			icome (loss)	pa	yments mad	е	that is inc				connected with
		(see	e instructions)					incom		inc	come in co l umn 10
<u>(1)</u>											
<u>(2)</u>											
<u>(3)</u>											
<u>(4)</u>							Add colum		- 10	م ام	columns 6 and 11.
							Enter here				r here and on Part I,
							line 8, c	co l umn	(A)	li	ine 8, co l umn (B)
Totals						►			ο.		0.
Part	VII Investment	ncome	of a Section 50	1(c)(7), (9), or (17)	Orgar	hization (s	ee instr	ructions)		
		cription of			2. Amou	-	3. Deductio		4. Set a	asides	5. Total deductions
					incor	ne	directly conne		(attach st	atemer	t) and set-asides (add cols 3 and 4)
							(attach stater	nent)			
(1)											
(2)											
(3)											
(4)					Add amou	inte in					Add amounts in
					column 2						column 5. Enter
					here and o						here and on Part I,
Totals				•	line 9, colu	umn (A) 0					line 9, column (B) 0 •
Part	VIII Exploited E	xempt A	ctivity Income	Other T	l Than Adve	•••	n Income		tructions)		0.
1	Description of exploite							300 113			
2	Gross unrelated busin	-		ness. Ente	r here and o	n Part I.	line 10. colum	n (A)		2	
3	Expenses directly con										
-										3	
4	Net income (loss) from										
	lines 5 through 7									4	
5	Gross income from ac	tivity that i	s not unre l ated bus	iness incor	ne					5	
6	Expenses attributable	to income	entered on line 5 $_{\rm .}$							6	
7	Excess exempt expen										
	4. Enter here and on F	Part II, l ine	12			<u></u>				7	

Schedule A (Form 990-T) 2021

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	ule A (Form 990-T) 2021					Page 4
Part						
1	Name(s) of periodical(s). Check box if reportir	ng two or mo	pre periodicals on	a consolidated basi	s.	
	A					
	В					
	c					
	D					
Enter a	amounts for each periodical listed above in the	correspondi	ing column.			
			Α	В	C	D
2	Gross advertising income	· · · · · ·				
	Add columns A through D. Enter here and on	Part I, line	11, column (A)		▶	0.
а						
3	Direct advertising costs by periodical	L				
а	Add columns A through D. Enter here and on	Part I, line	11, column (B)		▶	0.
		Г				
4	Advertising gain (loss). Subtract line 3 from lir	ne				
	2. For any column in line 4 showing a gain,					
	complete lines 5 through 8. For any column 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 le					
8	than line 6, enter zero	····· –				
0	Excess readership costs allowed as a deduction. For each column showing a gain of					
	line 4, enter the lesser of line 4 or line 7					
а	Add line 8, columns A through D. Enter the g		lino 8a. columns i	iotal or zoro boro an	ud on	
d	Part II, line 13	reater of the	ine oa, columns i		•	. 0.
Part		rectors. a	nd 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	XI Supplemental Information (Se	e instructio	ns)			

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38-6004447

FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 9
DESCRIPTION		AMOUNT
SUPPLIES AND EQUIPMENT		277.
TOTAL TO SCHEDULE A, PART	II, LINE 14	277.

990-T SCH	A POST-201	7 NET OPERATING	LOSS DEDUCTION	STATEMENT 10
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/20 06/30/21	1,035. 401.	0.0.	1,035. 401.	1,035. 401.
NOL CARRYO	VER AVAILABLE THIS	YEAR	1,436.	1,436.

FORM 4797	PRO	PERTY HEL	D MORE THAN	N ONE YEAR	ST.	ATEMENT 24
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS
ARCLIGHT ENERGY						
PARTNERS FUND VI, L.P.						95.
LANDMARK EQUITY PARTNERS XV, L.P. SDC DIGITAL						-794.
INFRASTRUCTURE OPPORTUNITY F WARBURG PINCUS						-13.
PRIVATE EQUITY (E&P) XII						604.
TOTAL TO 4797, PA	ART I, LINE	2				-108.

SCHEDULE A (Form 990-T)

Department of the Treasury

Internal Revenue Service

Unrelated Business Taxable Income From an Unrelated Trade or Business

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

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

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

6

Name of the organization Α

CENTRAL	UNIVERSITY	

Unrelated business activity code (see instructions) С

510000

D Sequence:

38-6004447

3

of

B Employer identification number

Describe the unrelated trade or business **▶**PUBLIC BROADCASTING F

Pa	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances c Balance ►	1c			
2	Cost of goods sold (Part III, line 8)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Sch D (Form 1041 or Form				
	1120)). See instructions	4a			
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	135,071.	64,918.	70,153.
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 11	12	3,996.		3,996.
13	Total. Combine lines 3 through 12	13	139,067.	64,918.	74,149.
Pa	TII Deductions Not Taken Elsewhere See instruction directly connected with the unrelated business inc			uctions. Deduction	s must be

1	Compensation of officers, directors, and trustees (Part X)	1	
2	Salaries and wages	2	
3	Repairs and maintenance	3	
4	Bad debts	4	
5	Interest (attach statement). See instructions	5	
6	Taxes and licenses	6	
7	Depreciation (attach Form 4562). See instructions		
8	Less depreciation claimed in Part III and elsewhere on return 8a	8b	
9	Depletion	9	
10	Contributions to deferred compensation plans	10	
11	Employee benefit programs	11	
12	Excess exempt expenses (Part VIII)	12	
13	Excess readership costs (Part IX)	13	
14	Other deductions (attach statement) SEE STATEMENT 12	14	3,223.
15	Total deductions. Add lines 1 through 14	15	3,223.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13,		
	column (C)	16	70,926.
17	Deduction for net operating loss. See instructions	17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16	18	70,926.
LHA	For Paperwork Reduction Act Notice, see instructions.	Schedu	le A (Form 990-T) 2021

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hedui	le A (Form 990-T) 2021				Page 2
rt II		hod of inventory va l uati	on 🕨		
1	Inventory at beginning of year				
2	Purchases				
	Cost of labor				
4	Additional section 263A costs (attach statement)			4	
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5			6	
	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6. Enter I	nere and in Part I, line 2			
	Do the rules of section 263A (with respect to property p				Yes No
art I					
1	Description of property (property street address, city, s				
	A <u>PUBLIC BROADCASTING - TO</u>	<u>DWER 1200 S.</u>	FRANKLIN	ST, MOUNT PL	EASANT, MI
	в 🛄				
	c 🔄				
	D	Г Г			
		A	В	С	D
	Rent received or accrued				
	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)	0.			
	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)	135,071.			
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D	135,071.			
4	Total rents received or accrued. Add line 2c columns A Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) STMT 13 Total deductions. Add line 4 columns A through D. Er	64,918.			<u>135,071.</u> 64,918.
4 <u>5</u> art V 1	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (so Description of debt-financed property (street address, of A	64,918. Iter here and on Part I, I ee instructions)	ine 6, column (B)	▶	<u>135,071.</u> 64,918.
4 <u>5</u> art V 1	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of B	64,918. Iter here and on Part I, I ee instructions)	ine 6, column (B)	▶	
1 5 1 1	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (so Description of debt-financed property (street address, of B C	64,918. Iter here and on Part I, I ee instructions)	ine 6, column (B)	▶	
4 <u>5</u> art V 1	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (s Description of debt-financed property (street address, of B	64,918. Iter here and on Part I, ee instructions) city, state, ZIP code). Cl	ine 6, column (B) neck if a dual-use. See	instructions.	64,918.
4 <u>5</u> art V 1	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er <u>Unrelated Debt-Financed Income</u> (si Description of debt-financed property (street address, of A B D	64,918. Iter here and on Part I, I ee instructions)	ine 6, column (B)	>	
4 <u>5</u> art V 1	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) STMT 13 Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (s) Description of debt-financed property (street address, of A B C D Gross income from or allocable to debt-financed	64,918. Iter here and on Part I, ee instructions) city, state, ZIP code). Cl	ine 6, column (B) neck if a dual-use. See	instructions.	64,918.
4 <u>5</u> 1 1	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) STMT 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (s) Description of debt-financed property (street address, of A B C Gross income from or allocable to debt-financed property	64,918. Iter here and on Part I, ee instructions) city, state, ZIP code). Cl	ine 6, column (B) neck if a dual-use. See	instructions.	64,918.
4 <u>5</u> art V 1 2 3	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er <u>Unrelated Debt-Financed Income</u> (s) Description of debt-financed property (street address, of A	64,918. Iter here and on Part I, ee instructions) city, state, ZIP code). Cl	ine 6, column (B) neck if a dual-use. See	instructions.	64,918.
4 <u>5</u> art V 1 2 3	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er <u>Unrelated Debt-Financed Income</u> (s) Description of debt-financed property (street address, of A B C D Gross income from or allocable to debt-financed property Deductions directly connected with or allocable to debt-financed property	64,918. Iter here and on Part I, ee instructions) city, state, ZIP code). Cl	ine 6, column (B) neck if a dual-use. See	instructions.	64,918.
4 <u>5</u> art V 1 2 3 a	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er <u>Unrelated Debt-Financed Income</u> (sr Description of debt-financed property (street address, of A B C D Gross income from or allocable to debt-financed property Deductions directly connected with or allocable to debt-financed property Straight line depreciation (attach statement)	64,918. Iter here and on Part I, ee instructions) city, state, ZIP code). Cl	ine 6, column (B) neck if a dual-use. See	instructions.	64,918.
4 5 art V 1 2 3 a b	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er <u>Unrelated Debt-Financed Income</u> (si Description of debt-financed property (street address, of A	64,918. Iter here and on Part I, ee instructions) city, state, ZIP code). Cl	ine 6, column (B) neck if a dual-use. See	instructions.	64,918.
4 <u>5</u> art V 1 2 3 a b c	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er <u>Unrelated Debt-Financed Income</u> (si Description of debt-financed property (street address, of A	64,918. Iter here and on Part I, ee instructions) city, state, ZIP code). Cl	ine 6, column (B) neck if a dual-use. See	instructions.	64,918.
4 <u>5</u> art V 1 2 3 a b c	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (s) Description of debt-financed property (street address, of A	64,918. Iter here and on Part I, ee instructions) city, state, ZIP code). Cl	ine 6, column (B) neck if a dual-use. See	instructions.	64,918.
4 <u>5</u> art V 1 1 2 3 a b c	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (s) Description of debt-financed property (street address, of A	64,918. Iter here and on Part I, ee instructions) city, state, ZIP code). Cl	ine 6, column (B) neck if a dual-use. See	instructions.	64,918.
1 5 7 1 2 3 3 8 5 5 5 5 1	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (sr Description of debt-financed property (street address, of B	64,918. Iter here and on Part I, ee instructions) city, state, ZIP code). Cl	ine 6, column (B) neck if a dual-use. See	instructions.	64,918.
4 5 art V 1 2 3 a b c 4 5	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (sr Description of debt-financed property (street address, of B	64,918. Iter here and on Part I, I ee instructions) city, state, ZIP code). Cl A	ine 6, column (B) neck if a dual-use. See	instructions.	64,918.
۱ ۱ <mark>۲۲ ۷</mark> ۱ 2 3 4 5	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (su Description of debt-financed property (street address, of A	64,918. Iter here and on Part I, ee instructions) city, state, ZIP code). Cl A	ine 6, column (B) neck if a dual-use. Sec B	c	64,918.
1 <u>5</u> 1 2 3 a b c 1 5 5	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er <u>Unrelated Debt-Financed Income</u> (si Description of debt-financed property (street address, of A	64,918. Iter here and on Part I, ee instructions) city, state, ZIP code). Cl A	ine 6, column (B) neck if a dual-use. See	c	64,918.
4 <u>5</u> 1 2 3 a b c 4 5 7	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) STMT 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (si Description of debt-financed property (street address, of A	64,918.	ine 6, column (B) neck if a dual-use. Sec B	c	64,918.
4 5 1 2 3 a b c 4 5 5 7	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er <u>Unrelated Debt-Financed Income</u> (si Description of debt-financed property (street address, of A	64,918.	ine 6, column (B) neck if a dual-use. Sec B	c	64,918.
4 5 art V 1 2 3 a b c 4 5 5 7 3	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (sr Description of debt-financed property (street address, of B	64,918.	ine 6, column (B) neck if a dual-use. Sec B	c	64,918.
ا ال ال ک ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا ا	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) STMT 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (sr Description of debt-financed property (street address, of B	64,918.	ine 6, column (B) neck if a dual-use. Sec B B t I, line 7, column (A)	C C %	64,918.
4 5 7 3 6 7 3 6 7 3 9 9 0	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) <u>STMT</u> 13 Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (sr Description of debt-financed property (street address, of B	64,918.	ine 6, column (B) neck if a dual-use. Sec B B t I, line 7, column (A)	C C %	64,918.

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Schedu	ule A (Form 990-T) 2021	itiaa D		anta fuan	. O a vatura l						Page 3
Part	VI Interest, Annu	lities, Ro	oyalties, and Re	ents fror	n Control		-	`	e instruct	,	
	1. Name of controlle	d	2. Emp l oyer	2 Not	unrelated	1	Exempt Control al of specified	1	ganization art of colur		6. Deductions directly
	organization	u	identification	-			nents made that		included	in the	connected with
			number		e instructions)			controlling organiza- tion's gross income			income in column 5
(1)									groos inc		
(2)											
(3)											
(4)											
			No	nexempt C	Controlled O	rganizati	ons				
7	Taxable Income		Net unrelated		otal of specif		10. Part of				Deductions directly
			ncome (loss)	pa	yments mad	е	that is inc				connected with
		(see	e instructions)				gross	incom	е	inc	come in co l umn 10
<u>(1)</u>				-							
<u>(2)</u>											
<u>(3)</u>											
<u>(4)</u>							Add colum		nd 10	۸dd	I columns 6 and 11.
							Enter here				r here and on Part I,
							line 8, c	o l umn	(A)	li	ine 8, co l umn (B)
Totals						►			Ο.		0.
Part		ncome	of a Section 50	1(c)(7), (9), or (17)	Orgar	hization (s	ee inst	ructions)		-
		cription of			2. Amou	-	3. Deductio		4. Set	asides	5. Total deductions
					incor	ne	directly conn		(attach st	atemer	t) and set-asides (add cols 3 and 4)
							(attach stater	ment)			
(1)											
(2)											
(3)											
(4)					Add amou	unto in					Add amounts in
					column 2						column 5. Enter
					here and o	,					here and on Part I,
T . 4 . 1 .					line 9, colu	umn (A)					line 9, column (B)
Totals Part		vemnt A	Activity Income	Other T	 han Adve			a a a ima	tru (otiono)		0.
1	Description of exploite		-	, ouier i		rusin	gincome	see ins	structions)		
2	Gross unrelated busin	-		ness Ente	r here and o	n Part I	line 10. colum	n (Δ)		2	
3	Expenses directly con										
0										3	
4	Net income (loss) from										
	lines 5 through 7						0 / 1			4	
5	Gross income from ac	tivity that i	is not unrelated bus	iness incor	ne					5	
6	Expenses attributable									6	
7	Excess exempt expen										
	4. Enter here and on F	Part II, l ine	12			<u></u>				7	

Schedule A (Form 990-T) 2021

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	ule A (Form 990-T) 2021				Page 4
Part					
1	Name(s) of periodical(s). Check box if reportir	ng two or more periodicals or	a consolidated basis	6.	
	A				
	B				
Enter a	amounts for each periodical listed above in the				
•	Our en estructivir a in energe	A	<u> </u>	C	D
2	Gross advertising income				0.
_	Add columns A through D. Enter here and on	Part I, line TT, column (A)			0.
a	Divert advertision as to by neviadical				
3	Direct advertising costs by periodical				0.
а	Add columns A through D. Enter here and on	Part I, line TT, column (B)			0.
	Advertising gain (loss). Subtrast line 2 from li	nn			
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	n			
	line 4 showing a loss or zero, do not complet				
	lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is le				
	than line 6, enter zero				
8	Excess readership costs allowed as a				
-	deduction. For each column showing a gain of	on			
	line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the g		total or zero here an	d on	
	Part II, line 13				0.
Part	X Compensation of Officers, Di	rectors, and Trustees	(see instructions)		
				3. Percentage	4. Compensation
	1. Name	2. Title		of time devoted	attributable to
				to business	unrelated business
<u>(1)</u>				%	
<u>(2)</u>				%	
<u>(3)</u>				%	
<u>(4)</u>				%	
	Enter here and on Part II, line 1			>	0.
Part	XI Supplemental Information (se	ee instructions)			

38 - 6004447

3,223.

FORM 990-T (A)	OTHER	INCOME	STATEMENT 11
DESCRIPTION			AMOUNT
CLOSED CAPTIONING SERVIC	3,996.		
TOTAL TO SCHEDULE A, PART I, LINE 12			3,996.
FORM 990-T (A)	OTHER	DEDUCTIONS	STATEMENT 12
DESCRIPTION			AMOUNT

TOTAL TO SCHEDULE A, PART II, LINE 14

FORM 990-T (A)	DEDUCTIONS	CONNECTED	WITH RENTAL	INCOME	STATEMENT 13
DESCRIPTION			ACTIVITY NUMBER	AMOUNT	TOTAL
PB TOWER EXPENDI PB NON-TOWER EXP				47,503. 17,415.	
		- SUBTOTA	և – 3	,	64,918.
TOTAL TO FORM 99	0-T, SCHEDUI	LE A, PART	IV, LINE 4		64,918.

SCHEDULE A (Form 990-T)

Department of the Treasury

Internal Revenue Service

Unrelated Business Taxable Income From an Unrelated Trade or Business

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

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

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

6

B Employer identification number

4

of

38-6004447

D Sequence:

Name of the organization Α

Name of the organiza	lion		
CENTRAL	MICHIGAN	UNIVERSITY	

530000 Unrelated business activity code (see instructions) С

Describe the unrelated trade or business **ATHLETIC & UNIVERSITY EVENT RENTALS**

Ра	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances c Balance ►	1c			
2	Cost of goods sold (Part III, line 8)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Sch D (Form 1041 or Form				
	1120)). See instructions	4a			
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	17,644.		17,644.
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 14	12	16,020.		16,020.
13	Total. Combine lines 3 through 12	13	33,664.		33,664.
Ра	t II Deductions Not Taken Elsewhere See instruction		or limitations on dec	luctions. Deduction	s must be

directly connected with the unrelated business income

1	Compensation of officers, directors, and trustees (Part X)	1	
2	Salaries and wages	2	17,708.
3	Repairs and maintenance	3	
4	Bad debts	4	
5	Interest (attach statement). See instructions	5	
6	Taxes and licenses	6	
7	Depreciation (attach Form 4562). See instructions 7		
8	Less depreciation claimed in Part III and elsewhere on return 8a	8b	
9	Depletion	9	
10	Contributions to deferred compensation plans	10	
11	Employee benefit programs	11	
12	Excess exempt expenses (Part VIII)	12	
13	Excess readership costs (Part IX)	13	
14	Other deductions (attach statement) SEE STATEMENT 15	14	12,817.
15	Total deductions. Add lines 1 through 14	15	30,525.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13,		
	column (C)	16	3,139.
17	Deduction for net operating loss. See instructions	17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16	18	3,139.
LHA	For Paperwork Reduction Act Notice, see instructions.	Schedu	le A (Form 990-T) 2021

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	le A (Form 990-T) 2021				Page 2
τI		nod of inventory valuat	ion 🕨		·
	Inventory at beginning of year			1	
	Purchases				
	Cost of labor				
	Additional section 263A costs (attach statement)				
	Other costs (attach statement)				
	Total. Add lines 1 through 5				
	Inventory at end of year				
	Cost of goods sold. Subtract line 7 from line 6. Enter h				
rt ľ	Do the rules of section 263A (with respect to property p Rent Income (From Real Property and				Yes No
	Description of property (property street address, city, si		-		
1	A ATHLETIC EVENT RENTALS -				EASANT. MI
	в 🗌				
	c 🗌				
	D				
		А	В	с	D
2	Rent received or accrued		_		———
	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)	0.			
	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)	17,644.			
	Total rents received or accrued by property.	, -			
	Add lines 2a and 2b, columns A through D	17,644.			
}	Total rents received or accrued. Add line 2c columns A				
	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	0.	and off f art i, line o, t		17,644.
	-	u l			
1 5	in lines 2(a) and 2(b) (attach statement)	0 . ter here and on Part I,			0.
4 5 1rt \	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se	0 . ter here and on Part I, se instructions)	line 6, column (B)	·····►	
4 5 art \	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c	0 . ter here and on Part I, se instructions)	line 6, column (B)	·····►	
s Trt V	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c	0 . ter here and on Part I, se instructions)	line 6, column (B)	·····►	
s Trt V	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c B	0 • 0 • 1 ter here and on Part I, se instructions)	line 6, column (B)	·····►	
rt \	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (see Description of debt-financed property (street address, c A B C	0 • 0 • 1 ter here and on Part I, se instructions)	line 6, column (B)	·····►	
s Trt V	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c A B	0 . ter here and on Part I, ee instructions) ity, state, ZIP code). C	line 6, column (B) heck if a dual-use. Se	e instructions.	0.
4 <u>5</u> art \ 1	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c A B C D D D D	0 • 0 • 1 ter here and on Part I, se instructions)	line 6, column (B)	·····►	
4 5 art \ 1	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, of B C G Gross income from or allocable to debt-financed	0 . ter here and on Part I, ee instructions) ity, state, ZIP code). C	line 6, column (B) heck if a dual-use. Se	e instructions.	0.
1 <u>5</u> <u>1</u> 1	in lines 2(a) and 2(b) (attach statement)	0 . ter here and on Part I, ee instructions) ity, state, ZIP code). C	line 6, column (B) heck if a dual-use. Se	e instructions.	0.
4 <u>5</u> <u>1</u> 1	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (see Description of debt-financed property (street address, c	0 . ter here and on Part I, ee instructions) ity, state, ZIP code). C	line 6, column (B) heck if a dual-use. Se	e instructions.	0.
4 5 1rt V 1 2 3	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (see Description of debt-financed property (street address, c A B C G Gross income from or allocable to debt-financed property Deductions directly connected with or allocable to debt-financed property	0 . ter here and on Part I, ee instructions) ity, state, ZIP code). C	line 6, column (B) heck if a dual-use. Se	e instructions.	0.
4 <u>5</u> 1 2 3 a	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (see Description of debt-financed property (street address, c A	0 . ter here and on Part I, ee instructions) ity, state, ZIP code). C	line 6, column (B) heck if a dual-use. Se	e instructions.	0.
4 5 1 1 2 3 a b	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c A	0 . ter here and on Part I, ee instructions) ity, state, ZIP code). C	line 6, column (B) heck if a dual-use. Se	e instructions.	0.
4 <u>5</u> art \ 1 1 2 3 a b c	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c	0 . ter here and on Part I, ee instructions) ity, state, ZIP code). C	line 6, column (B) heck if a dual-use. Se	e instructions.	0.
4 5 art V 1 1 2 3 a b c	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c A	0 . ter here and on Part I, ee instructions) ity, state, ZIP code). C	line 6, column (B) heck if a dual-use. Se	e instructions.	0.
int <u>)</u> I 2 3 a b c	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c B C G G G G G G G G G G G G	0 . ter here and on Part I, ee instructions) ity, state, ZIP code). C	line 6, column (B) heck if a dual-use. Se	e instructions.	0.
art V art V b c	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (see Description of debt-financed property (street address, c A	0 . ter here and on Part I, ee instructions) ity, state, ZIP code). C	line 6, column (B) heck if a dual-use. Se	e instructions.	0.
h nrtl 1 2 3 a b c h 5	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (see Description of debt-financed property (street address, c A	0 . ter here and on Part I, se instructions) ity, state, ZIP code). C A	line 6, column (B) heck if a dual-use. Se	e instructions.	0.
a b c	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c A B C B C D C C D C C C C C C C C C C C C	0 . ter here and on Part I, se instructions) ity, state, ZIP code). C A	line 6, column (B) heck if a dual-use. Se B	e instructions.	0.
a b c	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c A	0 . ter here and on Part I, se instructions) ity, state, ZIP code). C A	line 6, column (B) heck if a dual-use. Se B	e instructions.	0.
a b c	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c A	A C . ter here and on Part I, be instructions) ity, state, ZIP code). C A A	line 6, column (B) heck if a dual-use. Se B	e instructions.	0.
a b c	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c A	A C . ter here and on Part I, be instructions) ity, state, ZIP code). C A A	line 6, column (B) heck if a dual-use. Se B	e instructions.	0.
a b c	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (se Description of debt-financed property (street address, c A	A C . ter here and on Part I, be instructions) ity, state, ZIP code). C A A	line 6, column (B) heck if a dual-use. Se B	e instructions.	0.
a b c	in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income Description of debt-financed property (street address, or A B C D Gross income from or allocable to debt-financed property Deductions directly connected with or allocable to debt-financed property Straight line depreciation (attach statement) Other deductions (attach statement) Total deductions (add lines 3a and 3b, columns A through D) Amount of average acquisition debt on or allocable to debt-financed property (attach statement) Average adjusted basis of or allocable to debt-financed property (attach statement) Divide line 4 by line 5 Gross income reportable. Multiply line 2 by line 6	A Enter here and on Part I, be instructions) ity, state, ZIP code). C A % Enter here and on Part %	line 6, column (B) heck if a dual-use. Se B B t I, line 7, column (A)	e instructions.	0. 0.

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												4
Part	ule A (Form 990-T) 2021 VI Interest, Annu	uities, Ro	yalties, and Ro	ents fron	n Control	led Or	ganizations	S (se	e instruct	ions)		Page 3
						E	- Exempt Control	olled Organizations				
	1. Name of controlled organization		identification inco		income (loss) paym		al of specified 5. Part that is in		rt of colur included olling orga	in the	co	ductions directly nnected with
			number	(see ins	structions)			tion's	gross inc	ome	incor	ne in co l umn 5
<u>(1)</u>												
<u>(2)</u>												
<u>(3)</u>												
<u>(4)</u>			Nc	I nexempt (Controlled O	l manizati	ons					
7	. Taxable Income	8. N	et unrelated	-	otal of specif	-	10. Part o	of colur	nn 9	11.	Deduc	ctions directly
			yments mad		that is inc	luded i	n the ation's		conne	ected with n column 10		
<u>(1)</u>												
<u>(2)</u>												
<u>(3)</u>												
<u>(4)</u>												
							Add colum Enter here line 8, c	and on	Part I , (A)	Ente	er here	nns 6 and 11. and on Part I, column (B)
Totals Part			of a Section 50	1(0)(7) (0) or (17)		izotion		0.			0.
Fail		cription of in		(C)(7), (ructions)	! -!	5	Total deductions
	I. Desc				2. Amou incon		3. Deduction directly connormal (attach stater	ected	4. Set- (attach st		nt) a	dd cols 3 and 4)
(1)												
(2)												
(3)												
(4)												
					Add amou column 2							Add amounts in column 5. Enter
					here and o							re and on Part I,
					line 9, colu						lir	ne 9, co l umn (B)
Totals				<u> </u>		0.	-					0.
Part	Exploited E	-	ctivity Income	, Other T	han Adve	ertising	g Income (see ins	tructions)			
1	Description of exploite											
2	Gross unrelated busin									2		
3	Expenses directly con	nected with	production of unr	elated busi	ness income	e. Enter l	here and on Pa	art I,				
										3		
4	Net income (loss) from											
-										4		
5	Gross income from ac									5 6		
6 7	Expenses attributable Excess exempt expense											
1										7		
	4. Enter here and on P	arn, 1110 1.	ــــــــــــــــــــــــــــــــــــــ							1		

Schedule A (Form 990-T) 2021

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	ule A (Form 990-T) 2021				Page 4
Part					
1	Name(s) of periodical(s). Check box if reportir	ng two or more periodicals of	n a consolidated basis	S.	
	A				
	B				
E.t.					
Entera	amounts for each periodical listed above in the				
•		A	<u> </u>	C	D
2	Gross advertising income				0.
_	Add columns A through D. Enter here and on	Part I, line TT, column (A)			0.
a	Divert advertision as to by neviadical				
3	Direct advertising costs by periodical				0.
а	Add columns A through D. Enter here and on	Part I, line TT, column (B)			
	Advertising gain (loss). Subtrast line 2 from li	~			
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	n			
	line 4 showing a loss or zero, do not complet				
	lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is le				
	than line 6, enter zero				
8	Excess readership costs allowed as a				
•	deduction. For each column showing a gain of	on			
	line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the g		total or zero here an	d on	
	Part II, line 13	·			0.
Part	X Compensation of Officers, Di	rectors, and Trustees	(see instructions)		
				3. Percentage	4. Compensation
	1. Name	2. Title		of time devoted	attributable to
				to business	unrelated business
<u>(1)</u>				%	
<u>(2)</u>				%	
<u>(3)</u>				%	
<u>(4)</u>				%	
-	Enter here and on Part II, line 1			▶	0.
Part	XI Supplemental Information (se	e instructions)			

38-6004447

STATEMENT 14	
AMOUNT	
16,020.	
16,020.	
STATEMENT 15	
AMOUNT	
12,817.	
12,817.	
-	

990-T SCH	A POST-202	L7 NET OPERATING	LOSS DEDUCTION	STATEMENT 16
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/20 06/30/21	21,107. 1,258.	0.0.	21,107. 1,258.	21,107. 1,258.
NOL CARRYO	OVER AVAILABLE THIS	YEAR	22,365.	22,365.

SCHEDULE A (Form 990-T)

Department of the Treasury

Internal Revenue Service

Unrelated Business Taxable Income From an Unrelated Trade or Business

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

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

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

6

A Name of the organization

	CENTRAL MICHIGAN UNIVERSITY	
--	-----------------------------	--

C Unrelated business activity code (see instructions) ► 710000

В	Employer identification number $38-6004447$

5

of

D Sequence:

E Describe the unrelated trade or business **UNIVERSITY RECREATION**

Part I Unrelated Trade or Business Income			(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances c Balance >	1c			
2	Cost of goods sold (Part III, line 8)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Sch D (Form 1041 or Form				
	1120)). See instructions	4a			
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	38,120.	967.	37,153.
12	Other income (see instructions; attach statement)STMT17	12	72,175.		72,175.
13	Total. Combine lines 3 through 12	13	110,295.	967.	109,328.
Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income					
1	Compensation of officers, directors, and trustees (Part X)	1			
2	Salaries and wages	2	132,709.		
3	Repairs and maintenance				
4	Bad debts				

-					
5	Interest (attach statement). See instructions				
6				6	
7	Taxes and licenses	7			
8	Less depreciation claimed in Part III and elsewhere on return	8a		8b	
9	Depletion			9	
10	Contributions to deferred compensation plans			10	
11	Employee benefit programs			11	
12	Excess exempt expenses (Part VIII)				
13	Excess readership costs (Part IX)			13	
14	Other deductions (attach statement)			14	7,939.
15	Total deductions. Add lines 1 through 14			15	140,648.
16	Unrelated business income before net operating loss deduction. Subtract line 15 from				
	column (C)			16	-31,320.
17	Deduction for net operating loss. See instructions			17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16				-31,320.
LHA	For Paperwork Reduction Act Notice, see instructions.			Schedu	le A (Form 990-T) 2021

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0 - 1					5
Part	ule A (Form 990-T) 2021 III Cost of Goods Sold Enter meth	nod of inventory va l u	ation 🕨		Page 2
1	Inventory at beginning of year			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 h				│ │ Yes │ No
9 Part	Do the rules of section 263A (with respect to property p IV Rent Income (From Real Property and				
1	Description of property (property street address, city, si		-		
•	A				
	B				
	c 🗌				
	D 🗌				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
•	50% or if the rent is based on profit or income) Total rents received or accrued by property.				
С	Add lines 2a and 2b, columns A through D				
	······································				•
3 4	Total rents received or accrued. Add line 2c columns A Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	<u> </u>			
5	Total deductions. Add line 4 columns A through D. En		I, line 6, column (B)	▶	0.
Part	[01				
1	Description of debt-financed property (street address, c	sity, state, ZIP code).	Check if a dual-use. See	instructions.	
	B				
	c 🗌				
	D				
		А	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-				
6	financed property (attach statement)		%		0/ 0/
6 7	Divide line 4 by line 5 Gross income reportable. Multiply line 2 by line 6		%%		% %
7 8	Total gross income (add line 7, columns A through D).	Enter here and on E	Part Lline 7. column (A)		0.
ð	rotar gross meente (aud inte 7, columns A through D).	. Enter nere and off P			0.
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A thr	ough D. Enter here a	nd on Part I, line 7, colur	mn (B)►	0.
11	Total dividends-received deductions included in line				0.
123721	01-28-22	4.4		Schedu	ule A (Form 990-T) 2021

												5
Sched	ule A (Form 990 T) 2021				<u> </u>							Page 3
Part	VI Interest, Annu	uities, Ro	oyalties, and Re	ents fron	n Control		-	· ·	e instruct	,		
	d Name of controlle	-1	0 England				Exempt Control		-		0 Dealerati	
	organization identi		 Employer identification 	-	unrelated ne (loss)		al of specified nents made		art of colui included			ons directly ted with
			number		structions)	μαγι	nems made	contr	olling orga	aniza-		n column 5
(4)				(000				tion's	gross inc	come		
(<u>1</u>)												
<u>(2)</u> (3)												
(<u>3)</u> (4)												
<u>(+)</u>			INc	nexempt C	Controlled O	ı oanizati	ons					
	7. Taxable Income	8.1	Net unrelated		otal of specif	•	10. Part o	of colu	mn 9	11.	Deduction	s directly
		in	icome (l oss)		, yments mad		that is inc				connected	,
		(see	e instructions)				controlling organization's gross income			income in column 10		
(1)												
(2)												
(3)												
(4)												
							Add colum	ins 5 a	nd 10.	Add	d co l umns	6 and 11.
							Enter here line 8, c				er here and ine 8, co l u	
								Junn	. ,	ľ	ine o, colu	пп (Б)
Totals						🕨			0.			0.
Part			of a Section 50)1(c)(7), (9), or (17)	Orgar	nization _{(s}	ee inst	ructions)			
	1. Desc	cription of	income		2. Amou		3. Deductio			asides		deductions
						directly connected (attach s) (attach statement)				ols 3 and 4)		
<u></u>							`	,				
<u>(1)</u>												
<u>(2)</u>												
<u>(3)</u>												
<u>(4)</u>					Add amou	unts in					Add	amounts in
					column 2	Enter					colur	nn 5. Enter
					here and o	,						nd on Part I, column (B)
Totals					line 9, colu	0.					1116 5,	0 •
Part		xempt A	Activity Income	Other T	han Adve	•••	a Income	see ing	structions)	1		
1	Description of exploite			, •		- doing	<u>g incenie</u> (300 111	structions			
2	Gross unrelated busin	-		ness Enter	r here and o	n Part I	line 10. colum	n (A)		2		
3	Expenses directly con											
•	line 10, column (B)		-							3		
4	Net income (loss) from											
-	lines 5 through 7						0 / 1			4		
5	Gross income from ac	tivity that i	s not unrelated bus	iness incon	ne					5		
6	Expenses attributable									6		
7	Excess exempt expen											
	4. Enter here and on F	Part II, line	12	<u></u>	<u></u>	<u></u>			<u></u>	7		

Schedule A (Form 990-T) 2021

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	ule A (Form 990-T) 2021				Page 4
Part	IX Advertising Income				
1	Name(s) of periodical(s). Check box if reportin	g two or more periodica l s on a c	onsolidated basis	S.	
	A ADVERTISING				
	В				
	c 🗌				
	D 🗌				
Enter	amounts for each periodical listed above in the o	corresponding column.			
		A	В	С	D
2	Gross advertising income	38,120.			
	Add columns A through D. Enter here and on				38,120.
а				······································	
3	Direct advertising costs by periodical	967.			
	Add columns A through D. Enter here and on				. 967.
а	Add columns A through D. Enter here and on				
	Advertising asig (less). Subtract line 2 from lin				
4	Advertising gain (loss). Subtract line 3 from lin	ie			
	2. For any column in line 4 showing a gain,				
	complete lines 5 through 8. For any column in				
	line 4 showing a loss or zero, do not complete				
	lines 5 through 7, and enter zero on line 8				
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than				
	line 5, subtract line 6 from line 5. If line 5 is les				
	than line 6, enter zero				
8	Excess readership costs allowed as a				
	deduction. For each column showing a gain o	on			
	line 4, enter the lesser of line 4 or line 7				
а	Add line 8, columns A through D. Enter the gr	reater of the line 8a, columns tota	al or zero here and	d on	
	Part II, line 13				. 0.
Part	X Compensation of Officers, Dir	ectors, and Trustees (se	e instructions)		
				3. Percentage	4. Compensation
	1. Name	2. Title		of time devoted	attributable to
				to business	unrelated business
(1)				%	
(2)				%	
(3)				%	
<u>(4)</u>				%	
<u> /</u>				,,,	
Total	. Enter here and on Part II, line 1				0.
Part	<i>,</i>				
I UIL					

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FORM 990-T (A) OTH	ER INCOME STATEMENT 17
DESCRIPTION	AMOUNT
SAC MEMBERSHIPS FACILITY RENTALS LOCKER RENTALS GUEST PASSES GROUP FITNESS PERSONAL TRAINING	23,737. 23,071 765. 24,412. 30. 160.
TOTAL TO SCHEDULE A, PART I, LINE 1	2 72,175.

FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 18
DESCRIPTION		AMOUNT
SUPPLIES AND EQUIPMENT		7,939.
TOTAL TO SCHEDULE A, PART I	I, LINE 14	7,939.

990-T SCH .	A POST-201	7 NET OPERATING	LOSS DEDUCTION	STATEMENT 19
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/20	45,117.	0.	45,117.	45,117.
NOL CARRYO	VER AVAILABLE THIS	YEAR	45,117.	45,117.

SCHE	DULE A
(Form	990-T)

Department of the Treasury

Internal Revenue Service

E

Unrelated Business Taxable Income From an Unrelated Trade or Business

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

ntor CON umba a thia fa ada publia if o ti e . E01(a)(2) . . . Do no

Open to Public Inspection for

6

A Name of the organization	Α	Name of the organization	
----------------------------	---	--------------------------	--

ot ente	r SSN numb	ers on this	form as it m	ay be made	e public if yo	our organization	is a 501(c)(3).

501(c)(3) Organizations Only B Employer identification number 38-6004447

of

6

CENTRAL MICHIGAN UNIVERSITY

<u>C</u> Unrelated business activity code (see instructions) ► 720000

Describe the unrelated trade or business **CATERING**, **BEVERAGE SRVS**, **CONCESSIONS** & **BEAVER**

D Sequence:

Pa	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	s	(C) Net
1a	Gross receipts or sales265,977.					
b	Less returns and allowances c Balance ►	1c	265,977.			
2	Cost of goods sold (Part III, line 8)	2	145,312.			
3	Gross profit. Subtract line 2 from line 1c	3	120,665.			120,665.
4 a						
	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 20	12	1,789.			1,789.
13	Total. Combine lines 3 through 12	13	122,454.			122,454.
	t II Deductions Not Taken Elsewhere See instructi directly connected with the unrelated business in	come	•			must be
1	Compensation of officers, directors, and trustees (Part X)				1	6 561
2	Salaries and wages				2	6,561.
3	Repairs and maintenance				3	
4	Bad debts				4	
5	Interest (attach statement). See instructions				5	
6	Taxes and licenses				6	
7	Depreciation (attach Form 4562). See instructions					
8	Less depreciation claimed in Part III and elsewhere on return				8b	
9	Depletion				9	
10	Contributions to deferred compensation plans				10	
11	Employee benefit programs				11	
12	Excess exempt expenses (Part VIII)				12	
13	Excess readership costs (Part IX)		<u> </u>	ЕМЕ МФ 01	13	217,405.
14 15	Other deductions (attach statement)				14	223,966.
15 16			ling 15 from Dort L ling 1		15	44J,300.
16	Unrelated business income before net operating loss deduction. Su		,	,	16	-101,512.
17	column (C)				10	<u> </u>

17	Deduction for net operating loss. See instructions	17	0.
18	Unrelated business taxable income. Subtract line 17 from line 16	18	-101,512.
LHA	For Paperwork Reduction Act Notice, see instructions.	Schedu	le A (Form 990-T) 2021

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09000501 147228 43642

OMB No. 1545-0047

					6
Sched Part	ule A (Form 990-T) 2021 III Cost of Goods Sold Enter meth	nod of inventory val	uation > N/A		Page 2
1	Inventory at beginning of year			1	0.
2	Purchases				145,312.
3	Cost of labor				0.
4	Additional section 263A costs (attach statement)				0.
5	Other costs (attach statement)				0.
6	Total. Add lines 1 through 5				145,312.
7	Inventory at end of year				0.
8	Cost of goods sold. Subtract line 7 from line 6. Enter h				145,312.
9 Part	Do the rules of section 263A (with respect to property p Rent Income (From Real Property and				Yes X No
1	Description of property (property street address, city, si	-	-		
•	A				
	B				
	c 🗌				
	D				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
с	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c columns A	through D. Enter he	ere and on Part I, line 6, c	olumn (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. En	ter here and on Par	t Lline 6. column (B)	•	0.
Part					
1	Description of debt-financed property (street address, c	ity, state, ZIP code)). Check if a dual-use. See	instructions.	
	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				
a L	Straight line depreciation (attach statement) Other deductions (attach statement)				
b	Total deductions (add lines 3a and 3b,				
С	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				
8	Total gross income (add line 7, columns A through D).	Enter here and on	Part I, line 7, column (A)	>	0.
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A thr				0.
11	Total dividends-received deductions included in line	10			0.
123721 (01-28-22	4.0		Schedule A	A (Form 990-T) 2021

												6
Sched	ule A (Form 990 T) 2021						<u> </u>					Page 3
Part	VI Interest, Annu	lities, Ro	oyalties, and Re	ents fron	n Control		-		e instruct	,		
					<u> </u>	1	Exempt Contro	1			• •	
	1. Name of controlled 2. Employer organization identification number			-	unrelated ne (loss)		al of specified nents made		rt of colur included			ductions directly
				structions)	payi	nems made	contro	olling orga	aniza-		me in column 5	
(4)			(000				tion's	gross inc	come			
(<u>1</u>) (2)												
<u>(2)</u> (3)												
(4)												
<u></u>			No	nexempt C	Controlled O	rganizati	ons					
7	7. Taxable Income	8. N	let unrelated	-	otal of specif	-	10. Part	of co l ui	mn 9	11.	Dedu	ctions directly
		ine	come (l oss)	pa	yments mad	е	that is inc				conne	ected with
		(see	instructions)				controlling organization's gross income			income in column 10		
(1)												
<u>(2)</u>												
<u>(3)</u>												
<u>(4)</u>												
							Add colum					mns 6 and 11
							Enter here line 8, c		,			e and on Part I, column (B)
									. ,			()
Totals Part					0) (17)	<u> </u>	<u> </u>		0.			0.
Fait		cription of i	of a Section 50	(C)(7), (ructions)	• •	6	Total deductions
	1. Desc	cription of i	ncome		2. Amou incon		3. Deduction		4. Set (attach st			and set-asides
							(attach state		(unaon or	atomo		dd co l s 3 and 4)
(1)												
(2)												
(3)												
(4)												
<u>. </u>					Add amou							Add amounts in
					column 2 here and o							column 5. Enter ere and on Part I.
					line 9, colu							ne 9, column (B)
Totals				►		Ο.						0.
Part	VIII Exploited E	xempt A	ctivity Income	, Other T	han Adve	ertising	g Income ((see ins	tructions)			
1	Description of exploite											
2	Gross unrelated busine	ess income	e from trade or busi	ness. Enter	r here and o	n Part I ,	line 10, colum	n (A)		2		
3	Expenses directly con	nected with	n production of unr	elated busi	ness income	e. Enter l	here and on Pa	art I ,				
										3		
4	Net income (loss) from	n unre l ated	trade or business.	Subtract l ir	ne 3 from l ine	e 2. If a g	gain, comp l ete	•				
										4		
5	Gross income from ac									5		
6	Expenses attributable									6		
7	Excess exempt expense											
	4. Enter here and on P	art II, line 1	12		<u></u>	<u></u>		<u></u>		7		

Schedule A (Form 990-T) 2021

123731 01-28-22

Sched Part	ule A (Form 990-T) 2021 IX Advertising Income					Page	4
1	Name(s) of periodical(s). Check box if reportin A B C D	ng two or more periodic	als on a consolida	ted basis.			_
Enter a	mounts for each periodical listed above in the	corresponding column.					_
		A		В	С	D	_
2	Gross advertising income						
_	Add columns A through D. Enter here and or	n Part I, line 11, column	(A)		►	0	<u>•</u>
а З	Direct advertising costs by periodical						-
a	Add columns A through D. Enter here and or		(B)	1	•	0	-
	5	, ,	()				_
4	Advertising gain (loss). Subtract line 3 from li	ne					_
	2. For any column in line 4 showing a gain,						
	complete lines 5 through 8. For any column i						
	line 4 showing a loss or zero, do not complet						
F	lines 5 through 7, and enter zero on line 8						—
5 6	Readership costs Circulation income						-
7	Excess readership costs. If line 6 is less than						-
	line 5, subtract line 6 from line 5. If line 5 is le						
	than line 6, enter zero						
8	Excess readership costs allowed as a						
	deduction. For each column showing a gain						
	line 4, enter the lesser of line 4 or line 7						_
а	Add line 8, columns A through D. Enter the g Part II, line 13	reater of the line 8a, co			•	0	
Part	,	rectors, and Trust	ees (see instruc				<u> </u>
					Percentage	4. Compensation	_
	1. Name	2	Title	of	time devoted	attributable to	
					to business	unrelated business	
<u>(1)</u>					%		_
<u>(2)</u>					<u>%</u>		—
<u>(3)</u> (4)					%		-
<u>(+)</u>					,,,		-
Total	Enter here and on Part II, line 1				▶	0	•
Part	XI Supplemental Information (si	ee instructions)					_
							_
							_
							-
							_
							_
							_
							-
							_

CENTRAL MICHIGAN UNIVERSITY

38-6004447

	_	
FORM 990-T (A)	OTHER INCOME	STATEMENT 20
DESCRIPTION		AMOUNT
OTHER INCOME		1,789
TOTAL TO SCHEDULE A, PART	1,789	
FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 21
DESCRIPTION		AMOUNT
SUPPLIES AND EQUIPMENT	217,405	
TOTAL TO SCHEDULE A, PART	217,405	
FORM 990-T DESCRIPTION SCHEDULE A	OF ORGANIZATION'S UNRELATE BUSINESS ACTIVITY	D STATEMENT 22

CATERING, BEVERAGE SRVS, CONCESSIONS & BEAVER ISLAND

TO FORM 990-T, SCHEDULE A, LINE E

990-T SCH	A POST-201	7 NET OPERATING	LOSS DEDUCTION	STATEMENT 23			
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR			
06/30/21	87,209.	0.	87,209.	87,209.			
NOL CARRYO	VER AVAILABLE THIS	YEAR	87,209.	87,209.			

Department of the Treasury Internal Revenue Service

Name

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

21

Employer identification number

CENTRAL MICHIGAN UN	38-6004447				
Did the corporation dispose of any investmer	nt(s) in a qualified opportuni	ty fund during the tax ye	ar?		Yes X No
If "Yes," attach Form 8949 and see its instruc					
Part I Short-Term Capital Gai	ns and Losses - Ass	ets Held One Year	or Less		
See instructions for how to figure the amounts to enter on the lines below.	(d) Proceeds	(e) Cost	(g) Adjustments to ga or loss from Form(s) 89	949,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Part I, line 2, column	(g)	result with column (g)
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					1,444.
4 Short-term capital gain from installment sales	from Form 6252 line 26 or 37	1		4	_,
5 Short-term capital gain or (loss) from like-kind				5	· · · · · · · · · · · · · · · · · · ·
	0			6	
6 Unused capital loss carryover (attach computa				0 7	1,444.
7 Net short-term capital gain or (loss). Combine Part II Long-Term Capital Gain	and Losses - Asse	nts Held More Than	n One Vear	1	, <u>, , , , , , , , , , , , , , , ,</u>
See instructions for how to figure the amounts			(g) Adjustments to ga	ain	(h) Gain or (loss)
to enter on the lines below. This form may be easier to complete if you	Proceeds Cost or loss from Form(s)		or loss from Form(s) 89 Part II, line 2, column	949,	Subtract column (e) from column (d) and combine the
round off cents to whole dollars.	(baloe price)			(9)	result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on					
Form(s) 8949 with 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					494,488.
				11	ļ
12 Long-term capital gain from installment sales				12	
13 Long-term capital gain or (loss) from like-kind	l exchanges from Form 8824			13	
14 Capital gain distributions				14	
15 Net long-term capital gain or (loss). Combine	lines 8a through 14 in column	ıh		15	494,488.
Part III Summary of Parts I and					

Part III Summary of Parts I and II		
16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)	16	1,444.
17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 1	7) 17	494,488.
18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns		495,932.
Note: If losses exceed gains, see Capital Losses in the instructions.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1120. Schedule D (Form 1120) 2021

121051 12-17-21



Name(s) shown on return

Sales and Other Dispositions of Capital Assets

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

OMB No. 1545-007	74
2021	

Attachment Sequence No. 12A Social security number or

taxpayer identification no.

CENTRAL MICHIG	38-6	38-6004447					
Before you check Box A, B, or C below statement will have the same information broker and may even tell you which b	ation as Form 10	you received any 99-B. Either will s	y Form(s) 1099-B o show whether you	or substitute statem r basis (usually you	ent(s) from r cost) was	n your broker. A su reported to the IF	ibstitute RS by your
Part Short-Term. Transact		al assets you held	1 year or less are ge	nerally short-term (see	instruction	s). For long-term	
transactions, see page 2. Note: You may aggregate all codes are required. Enter the	e totals directly on S	Schedule D, line 1a	a; you áren't required	l to report these transa	actions on F	orm 8949 (see instru	ictions).
You must check Box A, B, or C below. (If you have more short-term transactions than will							r each applicable box.
(A) Short-term transactions rep	ported on Form(s) 1099-B showin	ng basis was repor	ted to the IRS (see	Note ab	ove)	
(B) Short-term transactions rep	· · ·	,	5	eported to the IRS			
X (C) Short-term transactions no	t reported to you	u on Form 1099-I	В	1			
1 (a) Description of property	(b) Date acquired	(c) Date so l d or	(d) Proceeds (sales price)	(e) Cost or other basis. See the	loss. If yo in column	it, if any, to gain or bu enter an amount (g), enter a code in	(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(sales price)	Note below and	column (f)	See instructions.	from column (d) &
		(Mo., day, yr.)		see <i>Column (e)</i> in the instructions	(f) Code(s)	(g) Amount of adjustment	combine the result with column (g)
GLOUSTON PRIVATE							
EQUITY							
OPPORTUNITIES V,							1,236.
LANDMARK EQUITY							
PARTNERS XV, L.P.							51.
THE BARING ASIA							
PRIVATE EQUITY							
FUND VII							29.
THOMA BRAVO							
DISCOVER FUND II							100
LP							128.
2 Totals. Add the amounts in colur	mns (d), (e), (g), a	nd (h) (subtract					
negative amounts). Enter each to	tal here and inclu	ude on your					
Schedule D, line 1b (if Box A abo	ove is checked),	line 2 (if Box B					
above is checked), or line 3 (if B			l				1,444.
Note: If you checked Box A above b	ut the hasis rend	NATED TO THE IPS N	was incorrect ent	er in column (e) the	hasis as r	anortad to the IRS	s and enter an

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 adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

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Form 8949 (2021)				Attachm	nent Sequen	ce No. 12A	Page 2
Name(s) shown on return. Name and	SSN or taxpaye	er identification n	o. not required if			Social secur	ity number or ntification no.
CENTRAL MICHIG	AN HNTVE	RETTY				. ,	004447
Before you check Box D, E, or F below statement will have the same informat broker and may even tell you which b	w, see whether y tion as Form 109		Form(s) 1099-B o show whether you	or substitute statem Ir basis (usually you	ent(s) from y r cost) was r		
Part II Long-Term. Transaction		al assets you held n	nore than 1 year are	generally long-term (s	ee instruction	s). For short-term tr	ansactions,
see page 1. Note: You may aggregate all codes are required. Enter the							
You must check Box D, E, or F below. C	heck only one bo	x. If more than one b	ox applies for your long	-term transactions, compl	ete a separate Fo	orm 8949, page 2, for e	
If you have more long-term transactions than will (D) Long-term transactions rep					-		
(E) Long-term transactions rep	•	,	° 1	,	NOLE ADOV	6)	
(F) Long-term transactions rep	• •		5				
				(0)	Adjustment	if any, to gain or	(b)
1 (a) Description of property	(b) Date acquired	(c) Date so l d or	(d) Proceeds	(e) Cost or other	loss. If you	enter an amount	(h) Gain or (loss).
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of	(sales price)	basis. See the	in column (g	g), enter a code in See instructions .	Subtract column (e)
(((Mo., day, yr.)		Note below and	(f)	(g)	from column (d) & combine the result
				see Column (e) in the instructions	Code(s)	Amount of adjustment	with column (g)
ARCLIGHT ENERGY						aujustment	
PARTNERS FUND VI,							
L.P.							1,498.
GLOUSTON PRIVATE							
EQUITY							
OPPORTUNITIES V,							67,120.
LANDMARK EQUITY							
PARTNERS XV, L.P.							14.
SDC DIGITAL							
INFRASTRUCTURE							
OPPORTUNITY F							394,502.
THE BARING ASIA							
PRIVATE EQUITY							
FUND VII							12,064.
WARBURG PINCUS							,
(GANYMEDE) PRIVATE							
EQUITY							18,504.
BROOKFIELD							
STRATEGIC							
REALESTATE							
PARTNERS							7.
HIGHBAR PARTNERS							
III, L.P.							779.
2 Totals. Add the amounts in colum	nns (d), (e), (g), a	nd (h) (subtract					
negative amounts). Enter each to	tal here and inclu	ude on your					
Schedule D, line 8b (if Box D abo	ove is checked),	line 9 (if Box E					
above is checked), or line 10 (if E	lox F above is cl	necked) 🕨 🕨					494,488.
Note: If you checked Box D above b	ut the basis repo	orted to the IRS	was incorrect, ent	ter in co l umn (e) the	basis as rep	ported to the IRS	, and enter an
adjustment in column (g) to correct t	he basis. See C	olumn (g) in the s	separate instructi	ons for how to figur	e the amour		
123012 12-14-21						F	orm 8949 (2021)

Form	4562	
	nent of the Treasury Revenue Service	(99

Depreciation and Amortization

OMB No. 1545-0172

Form 4JUZ		1 2	2021				
Department of the Treasury			Attachment				
Internal Revenue Service (99)	► Go t	o www.irs.gov/F	orm4562 for instruc				Sequence No. 179
Name(s) shown on return				Business or activity to whi	ch this form relates	6	Identifying number
CENTRAL MICH				BOOKSTORE			38-6004447
Part I Election To Exp	ense Certain Proper	ty Under Section 17	79 Note: If you have a	any listed property, o	complete Part	V before y	
1 Maximum amount (s	ee instructions)					1	1,050,000.
2 Total cost of section	179 property place	ed in service (see	instructions)			2	
3 Threshold cost of se	ction 179 property	before reduction	in limitation			3	2,620,000.
4 Reduction in limitation	on. Subtract line 3 f	rom line 2. If zero	or less, enter -0			4	
5 Dollar limitation for tax year	Subtract line 4 from line	1. If zero or less, enter -	0 If married filing separatel	, see instructions		5	
6	(a) Description of pro	operty	(b) Cost	: (business use on l y)	(c) Elected	cost	
7 Listed property. Ente	er the amount from	line 29	•	7			
			in column (c), lines 6			8	
			020 Form 4562				
			s income (not less tha				
12 Section 179 expense							
						12	
13 Carryover of disallov Note: Don't use Part II c				P 13			
		,		aduda liatad propar	5.)		
	-		epreciation (Don't in				
14 Special depreciation	•			571	0		
15 Property subject to s		ction					
16 Other depreciation (i					<u></u>	16	
Part III MACRS De	preciation (Don't	include listed pro	perty. See instruction	IS.)			
			Section A				01
17 MACRS deductions	for assets p l aced ir	n service in tax ye	ars beginning before	2021		17	21.
18 If you are electing to group							
	ection B - Assets		e During 2021 Tax Y		eral Deprecia	tion Syste	em I
(a) Classification	of property	(b) Month and year placed	(c) Basis for depreciati (business/investment u	ise (d) Recovery	(e) Convention	(f) Method	(g) Depreciation deduction
		in service	only - see instruction:				
19a 3-year property							
b 5-year property							
c 7-year property							
d 10-year property							
e 15-year property							
f 20-year property							
g 25-year property				25 yrs.		S/L	
		/		27.5 yrs.	ММ	S/L	
h Residential renta	l property	/		27.5 yrs.	ММ	S/L	
		/ /		39 yrs.	MM	S/L	
i Nonresidential re	eal property	/ /		0.9 yrs.	MM	S/L S/L	
Q	ction C - Assets P	laced in Service	During 2021 Tax Ye	ar Using the Δltern			ı tem
	0.011 0 - A33613 F						
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	1
	See instructions.)						
21 Listed property. Ente	er amount from l ine	28				21	ļ
22 Total. Add amounts	from line 12, lines ⁻	14 through 17, l in	es 19 and 20 in co l ur	nn (g), and l ine 21.			
Enter here and on th	e appropriate lines	of your return. Pa	artnerships and S cor	porations - s <u>ee instr</u>	<u> </u>	22	21.
		-	e current vear, enter t				

116251 12-21-21 LHA For Paperwork Reduction Act Notice, see separate Systematics. 09000501 147228 43642

portion of the basis attributable to section 263A costs

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For	rm 4562 (2021)	CEN	TRAL MI	CHIG.	AN U	NIVE	RSIT	Y				38-	6004	447	Page 2
P	art V Listed Propert				ner vehic	es, cer	tain aircr	aft, an	d property	used for	r				
	entertainment, Note: For any				standar	d milea	ge rate o	r dedu	cting lease	e expens	e, com	olete on	v 24a,		
	24b, columns (a) through (c	c) of Section A,	all of Se	ection B,	, and Se	ection C	if app l i	cable.				-		
		-	on and Other I					_							
<u>24a</u>	a Do you have evidence to s	1		nt use cla	aimed?	<u> </u>	∕es ∟	_ No	24b If "Y	T		nce writt T	en?	_ Yes ∟ I	<u>No</u>
	(a)	(b) Date	(c) Business/		(d)	Ва	(e) sis for depr	eciation	(f) Recovery		g)		(h) eciation		(i) ected
	Type of property (list vehicles first)	placed in	investment	ot	Cost or ther basis	l (hi	usiness/inve use only	stment	period		:hod/ ention		uction	section	on 179
		service	use percentag						I	I				C C	ost
25	Special depreciation allo			• •					,		05				
	used more than 50% in Property used more tha										25				
<u>26</u>	Troperty used more that			<u>6</u>											
			9												
				6											
27	Property used 50% or le	<u>i : :</u> es in a quali								1					
21				6						S/L-					
			9							S/L-					
		: :		6						S/L -					
28	Add amounts in column	(h). lines 25			and on	line 21	page 1		•		28				
	Add amounts in column											1	29		
		())					on Use								
Co	mplete this section for ve	hicles used	by a sole propr	rietor, pa	artner, or	r other '	'more tha	an 5% (owner," oi	r related	person.	If you pr	rovided	/ehic l es	
toy	your employees, first ans	wer the ques	tions in Sectio	n C to s	see if you	ı meet a	an excep	tion to	completin	ng this se	ction fo	r those \	/ehicles.		
					_		-		-	-					
				(a)		(b)		(c)	(0	d)	(e)	(f)
30	Total business/investment	miles driven d	uring the	Ver	nicle	Ve	hicle	V	/ehicle	Veh	icle	Ver	nicle	Ver	nicle
	year (don't include commu	ting miles)													
31	Total commuting miles of	driven during	the year												
32	Total other personal (no	ncommuting) mi l es												
	driven														
33	Total miles driven during	g the year.													
	Add lines 30 through 32	2													
34	Was the vehicle availab			Yes	No	Yes	No	Yes	s No	Yes	No	Yes	No	Yes	No
	during off-duty hours?								_						
35	Was the vehicle used pr														
	than 5% owner or relate						_								
36	Is another vehicle availa	ble for perso	na												
	use?														
			- Questions for												
	swer these questions to c	-		ception	to comp	pleting \$	Section E	s for ve	ehicles use	ed by em	ployees	who a i	ren't		
-	re than 5% owners or rela														T
37	Do you maintain a writte										by your			Yes	No
20	employees? Do you maintain a writte														
38	employees? See the ins		•					•							
20	Do you treat all use of v				~										
	Do you provide more that								molovees						
40	the use of the vehicles,								inployees						
41	Do you meet the require														
	Note: If your answer to a														1
P	art VI Amortization	01,00,00,1	0,0111010	<u>o, aon </u>											
	(a)			(b)		(c)			(d)		(e)			(f)	
	Description of	f costs		amortization begins		Amortiza amour			Code section		Amortiza period or per	ation	Ai fo	mortization or this year	
42	Amortization of costs th	at begins du		v	ır:			•		1		v: 1			
		~													
				: :						Ì					
43	Amortization of costs th	at began be	fore your 2021	tax yea	r							43			
<u>44</u>	Total. Add amounts in c											44			
	252 12-21-21												F	orm 456	2 (2021)

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

Sales of Business Property (Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2)) Attach to your tax return.

OMB No.	1545-0184

27

Attachmen

Seauence No.

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

		anarying number
CENTRAL MICHIGAN UNIVERSITY		38-6004447
1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20	1a	
b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of MACRS assets	1b	
c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS	10	

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

						(000 1101 000)			
2 S1	(a) Description of property EE STATEMENT 2	25	(b) Date acquired (mo., day, yr.)	(C) Date sold (mo., day, yr.)	(d) Gross sales price	(6) Depreciation allowed or allowable since acquisition	(f) Cost or basis, plu improvement expense of	ıs s and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
3	Gain, if any, from Form 4	1684, l ine 39				•		3	
4	Section 1231 gain from i							4	
5	Section 1231 gain or (los							5	
6	Gain, if any, from line 32							6	
7								7	-108.
 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. 							_		
	Individuals, partners, S from line 7 on line 11 bel 1231 losses, or they wer the Schedule D filed with	low and skip l re recaptured	ines 8 and 9. If I in an ear l ier yea	ine 7 is a gain ar r, enter the gain	nd you didn't have from line 7 as a lor	any prior year sect	tion		
8	Nonrecaptured net section	ion 1231 l osse	es from prior yea	rs. See instructi	ons			8	
9									
	capital gain on the Sche				-			9	
D,	ort II Ordinary G	aine and l	06606 (****						

Part II Ordinary Gains and Losses (see instructions)

10	Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):		
		_	
11	Loss, if any, from line 7	11	(108.)
12	Gain, if any, from line 7 or amount from line 8, if applicable	12	
13	Gain, if any, from line 31	13	
14	Net gain or (loss) from Form 4684, lines 31 and 38a	14	
15	Ordinary gain from installment sales from Form 6252, line 25 or 36	15	
16	Ordinary gain or (loss) from like-kind exchanges from Form 8824	16	
17	Combine lines 10 through 16	17	-108.
18	For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines		
	a and b below. For individual returns, complete lines a and b below.		
а	If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the		
	loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used		
	as an employee.) Identify as from "Form 4797, line 18a." See instructions	18a	
k	Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1		
	(Form 1040), Part I, line 4	18b	
LH	A For Paperwork Reduction Act Notice, see separate instructions.		Form 4797 (2021)

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5	8	
1	0 5 0 0 0	MTO

38-6004447 Page 2

Part III	Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255	(see instructions)
----------	---	--------------------

19 (a) Description of section 1245,	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)			
Α					
В					
с					
D					
These columns relate to the p	roperties on				
lines 19A through 19D.	▶	Property A	Property B	Property C	Property D
20 Gross sales price (Note: See line 1	a before completing.) 20				
21 Cost or other basis plus expens	e of sale 21				
22 Depreciation (or depletion) allow					
23 Adjusted basis. Subtract line 22					
24 Total gain. Subtract line 23 from					
25 If section 1245 property:					
a Depreciation allowed or allowab	le from line 22 25a				
b Enter the smaller of l ine 24 or 2					
26 If section 1250 property: If stra was used, enter -0- on line 26g, exc subject to section 291.	ight line depreciation				
a Additional depreciation after 1975. S	See instructions 26a				
b Applicable percentage multiplier of line 24 or line 26a. See instru	d by the smaller ctions <u>26b</u>				
c Subtract line 26a from line 24. If property or line 24 isn't more th lines 26d and 26e	nan line 26a, skip				
d Additional depreciation after 1969 a					
e Enter the smaller of line 26c or					
f Section 291 amount (corporatio g Add lines 26b, 26e, and 26f					
 27 If section 1252 property: Skip this dispose of farmland or if this form is a partnership. a Soil, water, and land clearing ex 	s section if you didn't s being completed for				
b Line 27a multiplied by applicable pe					
c Enter the smaller of line 24 or 2					
 28 If section 1254 property: a Intangible drilling and development for development of mines and other mining exploration costs, and deplet 	costs, expenditures natural deposits,				
b Enter the smaller of line 24 or 2	28a 28b				
 29 If section 1255 property: a Applicable percentage of payme from income under section 126. 					
b Enter the smaller of line 24 or 29	a. See instructions 29b				

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

Pa	art IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to	50%	or Less
	from other than casualty or theft on Form 4797, line 6	32	
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion		
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
30	Total gains for all properties. Add property columns A through D, line 24	30	

			(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33		
34	Recomputed depreciation. See instructions	34		
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35		
1180	12 12-17-21			Form 4797 (2021)

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CENTRAL MICHIGAN UNIVERSITY

FORM 4797	PRO	PERTY HELI	O MORE THAN	N ONE YEAR	STATEMENT 25		
DESCRIPTION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPR.	COST OR BASIS	GAIN OR LOSS	
ARCLIGHT ENERGY							
PARTNERS FUND VI, L.P.						95.	
LANDMARK EQUITY PARTNERS XV, L.P. SDC DIGITAL						-794.	
INFRASTRUCTURE OPPORTUNITY F WARBURG PINCUS						-13.	
PRIVATE EQUITY (E&P) XII						604.	
TOTAL TO 4797, PA	RT I, LINE	2				-108.	