Form	8879-EO
FOUL	

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

For calendar year 2020, or fiscal year beginning $_$ JUL 1 , 2020, and ending $_$ JUN 30 , 2021

Do not send to the IRS. Keep for your records.
 Go to www.irs.gov/Form8879EO for the latest information.

Taxpayer identification number

Name of exempt organization or person subject to tax

3	5	_	6	n	Λ	2	n	Λ	1
J	2		U.	υ	υ	4	υ	-	ж.

TRUSTEES OF PURDUE UNIVERSITY Name and title of officer or person subject to tax

KATHLEEN THOMASON

COMPTROLLER

(name of organization)

 Part I
 Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, **5a**, **6a**, or **7a** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, **5b**, **6b**, or **7b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	Form 990 check here b	Tot	al revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	
2a	Form 990-EZ check here	b	Total revenue, if any (Form 990-EZ, line 9)	2b	
3a	Form 1120-POL check here		b Total tax (Form 1120-POL, line 22)	Зb	
4a	Form 990-PF check here	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a	Form 8868 check here	b	Balance due (Form 8868, line 3c)	5b	
6a	Form 990-T check here	b	Total tax (Form 990-T, Part III, line 4)	6b	0.
	Form 4720 check here	b	Total tax (Form 4720, Part III, line 1)	7b	
	out II Declaration and Gau	-	hura Authorization of Officer or Dereen Subject to Tay		

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that 🚺 I am an officer of the above organization or I am a person subject to tax with respect to

(EIN)

and that I have examined a copy

of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

X I authorize	PLANTE	&	MORAN,	PLLC	to enter my PIN	75206
				ERO firm name		Enter five numbers, but do not enter all zeros

as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax	Date 🕨
Part III Certification and Authentication	
ERO's EFIN/PIN. Enter your six-digit electronic filing identification	
number (EFIN) followed by your five-digit self-selected PIN.	38384313579
	Do not enter all zeros
I certify that the above numeric entry is my PIN, which is my signature on the 2020 that I am submitting this return in accordance with the requirements of Pub. 4163 IRS <i>e-file</i> Providers for Business Returns.	5
ERO's signature PLANTE & MORAN, PLLC	Date D
ERO Must Retain This Form Do Not Submit This Form to the IRS	Unless Requested To Do So
LHA For Paperwork Reduction Act Notice, see instructions.	Form 8879-EO (2020)

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2 2020.05094 TRUSTEES OF PURDUE UNIVER 75206__1

			RETURN EXTENDED TO MAY 16, 2022		
Form	990-T	E	Exempt Organization Business Income Tax Return	ר L	OMB No. 1545-0047
			(and proxy tax under section 6033(e))		
		For cal	endar year 2020 or other tax year beginning JUL 1, 2020 , and ending JUN 30, 202	21	2020
Dana	rtment of the Treasury		► Go to www.irs.gov/Form990T for instructions and the latest information.		
	al 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
Α	Check box if address changed.		Name of organization (Check box if name changed and see instructions.)	DEmplo	yer identification number
ΒE	xempt under section	Print	TRUSTEES OF PURDUE UNIVERSITY	3	5-6002041
X	501(c)(3)	or	Number, street, and room or suite no. If a P.O. box, see instructions.		exemption number structions)
	408(e) 220(e)	Type	2550 NORTHWESTERN AVE, NO. 1100	(,
	408A 530(a)		City or town, state or province, country, and ZIP or foreign postal code		
	529(a) 529S		WEST LAFAYETTE, IN 47906	F	Check box if
			ok value of all assets at end of year > 7,768,331,726.		an amended return.
G	Check organization	type 🕨		Applicab	le reinsurance entity
	Check if filing only to		Claim credit from Form 8941 Claim a refund shown on Form 2439		
<u> </u>	Check if a 501(c)(3)	organiz	ation filing a consolidated return with a 501(c)(2) titleholding corporation		<u> </u>
			ed Schedules A (Form 990-T)		-
			e corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?		Yes X No
			d identifying number of the parent corporation.		
			KATHLEEN THOMASON Telephone number	(765)) 494-4600
Pa			d Business Taxable Income		
1		busine	ss taxable income computed from all unrelated trades or businesses (see		0 0 0 0 0 0 0 1
				1	2,367,931.
2				2	0 0 0 0 0 0 0 0 1
3	Add lines 1 and 2			3	2,367,931.
4			see instructions for limitation rules)	4	$\frac{0}{2}$
5			taxable income before net operating losses. Subtract line 4 from line 3	5	2,367,931.
6		•	ng loss. See instructions STATEMENT 1	6	2,367,931.
7			ss taxable income before specific deduction and section 199A deduction.		
_	Subtract line 6 fro			7	1,000.
8			rally \$1,000, but see instructions for exceptions)	8	1,000.
9			duction. See instructions	9	1,000.
10	Total deductions			10	1,000.
11		ss taxa	ble income. Subtract line 10 from line 7. If line 10 is greater than line 7,		0.
Pa	enter zero	outati	on	11	0.
			s corporations. Multiply Part I, line 11 by 21% (0.21)	1	0.
1 2			ates. See instructions for tax computation. Income tax on the amount on		
2	Part I, line 11 from		Tax rate schedule or Schedule D (Form 1041)	2	
3	Proxy tax. See ins			3	
4	Other tax amounts			4	
4 5	Alternative minimu			5	
6			cility income. See instructions	6	
7	-		h 6 to line 1 or 2, whichever applies	7	0.
, LHA			ion Act Notice, see instructions.	. • .	Form 990-T (2020)
					()

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Form 9	90-T (2020)			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)			
е	Total credits. Add lines 1a through 1d	1e		
2	Subtract line 1e from Part II, line 7	2		0.
3	Other taxes. 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	2020 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4	5		0.
6a	Payments: A 2019 overpayment credited to 2020 6a			
b	2020 estimated tax payments. Check if section 643(g) election applies			
с	Tax deposited with Form 8868			
d	Foreign organizations: Tax paid or withheld at source (see instructions) 6d			
е	Backup withholding (see instructions) 6e			
f	Credit for small employer health insurance premiums (attach Form 8941) 6f			
g	Other credits, adjustments, and payments: Form 2439			
	□ Form 4136 Other Total ▶ 6g			
7	Total payments. Add lines 6a through 6g	7		
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached	8		
9	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 2021 estimated tax Refunded	11		
Part	IV Statements Regarding Certain Activities and Other Information (see instructions)			
1	At any time during the 2020 calendar year, did the organization have an interest in or a signature or other authority		Yes	No
	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 AFGHANISTAN		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			
4a	Did the organization change its method of accounting? (see instructions)			X
b	If 4a 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>	<u></u>	
Part	V Supplemental Information			

Provide the explanation required by Part IV, line 4b. Also, provide any other additional information. See instructions.

	Under penalties of perjury, I declare that I have examined correct, and complete. Declaration of preparer (other that				wledge	e and belief, it is true,
Here			ROLLER			the IRS discuss this return with reparer shown below (see
	Signature of officer	Date Title			instru	uctions)? X Yes No
	Print/Type preparer's name	Preparer's signature	Date	Check	if	PTIN
Paid				self- employ	ed	
Preparer	DORI J. EGGETT	DORI J. EGGETT	05/13/22			P00645252
Use Only		AN, PLLC		Firm's EIN		38-1357951
eee enig	4444 W. BR	ISTOL ROAD, SUITE	360			
	Firm's address 🕨 FLINT , MI	48507		Phone no.	(8	10) 767-5350
						Form 990-T (2020)

023711 02-02-21

FORM 990-T	PRE 2018 NOL SCHEDULE	STATEMENT 1
	FORWARD FROM PRIOR YEAR ION INCLUDED IN PART I, LINE 6	21,320,257. 2,367,931.
SCHEDULE A PORTION SCHEDULE A ENTITY	OF PRE-2018 NOL SCHEDULE A SHARE	
1	0.	
2 3	0. 0.	
4	0.	
5 6	0.	
Ö	0.	
TOTAL SCHEDULE A SH	ARE OF PRE-2018 NOL	0.
NET OPERATING DEDUC BALANCE AFTER PRE-2		2,367,931. 0.
EXPIRING NET OPERAT		0.
CARRY FORWARD OF NE	T OPERATING LOSS	18,952,326.

				ENT	ידע 1
	IEDULE A Unrelated Busin	222	Taxable Incon	פו	OMB No. 1545-0047
For	From an Unrelated				
	From an Unrelate		rade or busine	255	2020
	► Go to www.irs.gov/Form990T fo	or instru	ctions and the latest info	rmation.	LOLO
	I Revenue Service Do not enter SSN numbers on this form as it	may be	made public if your organiza	tion is a 501(c)(3).	Open to Public Inspection for 501(c)(3) Organizations Only
A N	lame of the organization			B Employer identifi	
• •	TRUSTEES OF PURDUE UNIVERSITY			35-60020	
cι	Inrelated business activity code (see instructions) 🕨 45000	0		D Sequence:	1 _{of} 6
Ξ [Describe the unrelated trade or business ► RETAIL TRADE		T		T
Pa	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
	Gross receipts or sales 229,216.		229,216.		
	Less returns and allowances c Balance >	1c 2	229,210.		
2 3	Cost of goods sold (Part III, line 8) Gross profit. Subtract line 2 from line 1c	2	229,216.		229,216
	Capital gain net income (attach Sch D (Form 1041 or Form	3	225,210.		225,210
4a	1120)) (see instructions)	4a			
b	Net gain (loss) (Form 4797) (attach Form 4797) (see instructions)	4b			
	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Part IV)	6			
7	Unrelated debt-financed income (Part V)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Part VI)	8			
9	Investment income of section 501(c)(7), (9), or (17)				
	organizations (Part VII)	9			
10	Exploited exempt activity income (Part VIII)	10			
11	Advertising income (Part IX)	11			
12	Other income (see instructions; attach statement)	12	220 216		220.216
13	Total. Combine lines 3 through 12	13	229,216.		229,216.
Pa	t II Deductions Not Taken Elsewhere (See instruct		or limitations on dedu	ctions) Deduction	ns must be
	directly connected with the unrelated business in	come			
1	Compensation of officers, directors, and trustees (Part X)			1	
2	Salaries and wages				
3	Repairs and maintenance				
4	Bad debts				
5	Interest (attach statement) (see instructions)				
6	Taxes and licenses				
7	Depreciation (attach Form 4562) (see instructions)				
8	Less depreciation claimed in Part III and elsewhere on return		8a	8b	
9	Depletion				
10	Contributions to deferred compensation plans				
11	Employee benefit programs				
12	Excess exempt expenses (Part VIII)				
13	Excess readership costs (Part IX)				
14	Other deductions (attach statement)				
15 16	Total deductions. Add lines 1 through 14				0.
16	Unrelated business income before net operating loss deduction. Su				229,216.
	column (C)			<u>10</u>	

Deduction for net operating loss (see instructions)

17

18

0.

229,216.

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12300513 147228 75206

17

-		hod of inventory valuation			
	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 I	,			
ľ	Do the rules of section 263A (with respect to property) Rent Income (From Real Property and				Yes No
		•	*		
	Description of property (property street address, city, s	tate, ZIP code). Check i	r a dual-use (see instructio	ins)	
	в 🗌				
	c 🗆				
	D				
		Α	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%)				
	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.				
	Add lines 2a and 2b, columns A through D				
		iter here and on Part I, li ee instructions)	ne 6, column (B)		0.
: \	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En	iter here and on Part I, li ee instructions)	ne 6, column (B)		
t V	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. En Unrelated Debt-Financed Income (so Description of debt-financed property (street address, of A	iter here and on Part I, li ee instructions)	ne 6, column (B)		
t V	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, li ee instructions)	ne 6, column (B)		
: \	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	iter here and on Part I, li ee instructions)	ne 6, column (B)		
	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	nter here and on Part I, li ee instructions) city, state, ZIP code). Ch	ne 6, column (B)	ructions)	0.
	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	nter here and on Part I, li ee instructions) city, state, ZIP code). Ch	ne 6, column (B)	ructions)	0.
: \	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	nter here and on Part I, li ee instructions) city, state, ZIP code). Ch	ne 6, column (B)	ructions)	0.
: \	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	nter here and on Part I, li ee instructions) city, state, ZIP code). Ch	ne 6, column (B)	ructions)	0.
	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (si Description of debt-financed property (street address, of B	nter here and on Part I, li ee instructions) city, state, ZIP code). Ch	ne 6, column (B)	ructions)	0.
: \	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	nter here and on Part I, li ee instructions) city, state, ZIP code). Ch	ne 6, column (B)	ructions)	0.
	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	einstructions) biter here and on Part I, li ee instructions) bity, state, ZIP code). Ch	ne 6, column (B)	ructions)	0.
t V	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (s) Description of debt-financed property (street address, of B	einstructions) biter here and on Part I, li ee instructions) bity, state, ZIP code). Ch	ne 6, column (B)	ructions)	0.
: •	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (s) Description of debt-financed property (street address, of A	einstructions) biter here and on Part I, li ee instructions) bity, state, ZIP code). Ch	ne 6, column (B)	ructions)	0.
: V	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (si Description of debt-financed property (street address, of B	einstructions) biter here and on Part I, li ee instructions) bity, state, ZIP code). Ch	ne 6, column (B)	ructions)	0.
: \	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (si Description of debt-financed property (street address, of B	A A	ne 6, column (B)	ructions)	0.
<u>. N</u>	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	A A	ne 6, column (B) neck if a dual-use (see inst	C	D.
V	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	A A	ne 6, column (B)	ructions)	0.
Ň	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	A Merina	ne 6, column (B) neck if a dual-use (see inst	C	D
: V	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)	A Merina	ne 6, column (B) neck if a dual-use (see inst	C	D
tv	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (su Description of debt-financed property (street address, of 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 (atd 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 Total gross income (add line 7, columns A through D)	A Merina	ne 6, column (B) neck if a dual-use (see inst	C	D
: <u>v</u>	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (si Description of debt-financed property (street address, of B	A A A A A A A A A A A A A A A A A A A	ne 6, column (B) neck if a dual-use (see inst B B Image: See inst Image: See inst <td>C</td> <td>0. D</td>	C	0. D
Ň	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. Er Unrelated Debt-Financed Income (su Description of debt-financed property (street address, of 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 (atd 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 Total gross income (add line 7, columns A through D)		ne 6, column (B) neck if a dual-use (see inst B B Image: See inst B See inst Image: See inst B Image: See inst B Image: See inst B Image: See inst	C C %	0. D

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<u> </u>											
Part	ule A (Form 990-T) 2020 VI Interest, Annu) uities, Ro	oyalties, and Re	ents fror	n Contro	led Or	ganization	s (see ins	tructions)		Page 3
						E	Exempt Contro	lled Organiza	ations		
	 Name of controlle organization 	d	2. Employer identification number	3. Net unrelated income (loss) (see instructions)		4. Total of specified payments made		5. Part of column 4 that is included in the controlling organiza- tion's gross income		co	eductions directly onnected with ome in column 5
(1)											
(2)											
(3)											
(4)										<u> </u>	
<u>(+)</u>			I No	nexempt (Controlled O	roanizati	ions			L	
7	'. Taxable Income	ir	Net unrelated ncome (loss) e instructions)	9. To	otal of speci yments mac	fied	10. Part that is included controlling	of column 9 cluded in the organization s income	's	conn	uctions directly nected with in column 10
(1)							U				
(2)											
(3)											
(4)											
Totals								and on Part column (A)	I, Ent		e and on Part I, , column (B) 0 .
Part	VII Investment	Income	of a Section 50	1(c)(7)	9) or (17)	Organ	l nization (a	ee instructio			0.
		cription of		<u>- (- // / / / / / / / / / / / / / / / / </u>	2. Amou incor	int of	3. Deduction directly conn (attach state)	ons 4. ected (atta	Set-asides ch stateme	ent)	Total deductions and set-asides add cols 3 and 4)
(1)										\rightarrow	
(2)										-+	
(3)										$ \rightarrow$	
(4)											
Totals				►	Add amo column 2 here and o line 9, colu	. Enter n Part I,				h	Add amounts in column 5. Enter ere and on Part I, ine 9, column (B) 0 •
Part	VIII Exploited E	xempt A	Activity Income,	, Other T	Than Adv	ertising	g Income	(see instructi	ons)		
1	Description of exploite	ed activity:							_		
2	Gross unrelated busin	ess incom	e from trade or busi	ness. Ente	r here and o	n Part I,	line 10, colum	n (A)	2		
3	Expenses directly con	nected wit	h production of unre	elated busi	ness incom	e. Enter l	here and on Pa	art I,			
	line 10, column (B)								. 3		
4	Net income (loss) from	n unrelated	l trade or business.	Subtract lir	ne 3 from lin	e 2. If a 🤉	gain, complete	•			
	lines 5 through 7								4	<u> </u>	
5	3										
6	Expenses attributable								6	┣──	
7	Excess exempt expen			,							
	4. Enter here and on F	Part II, line	12						7		

Schedule A (Form 990-T) 2020

Sched Part	Iule A (Form 990-T) 2020 IX Advertising Income					Page 4
1	Name(s) of periodical(s). Check box if reportin	na two or more periodica	als on a co	nsolidated basis		
		5				
	в 🗌					
	c					
	D					
Enter :	amounts for each periodical listed above in the	corresponding column				
Linton		A		В	С	D
2	Gross advertising income				~	
-	Add columns A through D. Enter here and or		Δ)			0.
а	Add coldmins A through D. Enter here and or		~,			
3	Direct advertising costs by periodical					
a	Add columns A through D. Enter here and or		B)			0.
	, ad columno , an orgin D. Entor horo and or					
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	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					
Ū	deduction. For each column showing a gain	on l				
	line 4, enter the lesser of line 4 or line 7					
а	Add line 8, columns A through D. Enter the g		Imne total	or zero here and	lon	
a	Part II. line 13	reater of the line oa, con		of zero nere and		0.
Part		rectors and Truste		instructions)		
1 are			1300 (300		3. Percentage	4. Compensation
	1. Name	2	Title		of time devoted	attributable to
	I. Name	۷.	THE		to business	unrelated business
(1)					%	
(<u>1</u>)					%	
(<u>2)</u>					%	
<u>(3)</u>					%	
<u>(4)</u>					70	
Total	. Enter here and on Part II, line 1					0.
Part		ee instructions)				••

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					ENT	ТІТҮ 2
	IEDULE A m 990-T)	Unrelated Busin	ess	Taxable Incon		OMB No. 1545-0047
(101	in 550-17	From an Unrelate	ed T	rade or Busine	ess	0000
						2020
Depart	ment of the Treasury	Go to www.irs.gov/Form990T fo				Onen to Dublic lacencetion for
	Revenue Service	Do not enter SSN numbers on this form as it	may be	made public if your organiza	ation is a 501(c)(3).	Open to Public Inspection for 501(c)(3) Organizations Only
A N	lame of the organization	OF PURDUE UNIVERSITY			B Employer identif	
<u>c</u> ι	Inrelated business	activity code (see instructions) <a>51000	0		D Sequence:	2 of 6
<u>e</u> D	escribe the unrelat	ed trade or business ADVERTISING		1		
Par	t I Unrelated	Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or s	sales 974,790.				
	Less returns and allo		1c	974,790.		
2	Cost of goods sole	d (Part III, line 8)	2			
3	Gross profit. Subt	ract line 2 from line 1c	3	974,790.		974,790.
4 a	Capital gain net in	come (attach Sch D (Form 1041 or Form				
	1120)) (see instruc	,	4a			
		rm 4797) (attach Form 4797) (see instructions)	4b			
		tion for trusts	4c			
5	()	a partnership or an S corporation (attach				
~		NA	5 6			
6 7		IV)	7			
8		anced income (Part V) royalties, and rents from a controlled	–			
0		VI)	8			
9		e of section 501(c)(7), (9), or (17)				
Ŭ		t VII)	9			
10		activity income (Part VIII)	10			
11		e (Part IX)	11			
12		instructions; attach statement)	12			
<u>13</u>		es 3 through 12	13	974,790.		974,790.
Par	directly co	IS Not Taken Elsewhere (See instruct nnected with the unrelated business in	come		,	ns must be
1		officers, directors, and trustees (Part X)				
2		s				
3		enance				
4		······				
5 6		atement) (see instructions)				
7	Depreciation (atta	s ch Form 4562) (see instructions)		7		
8		claimed in Part III and elsewhere on return			8b	
9						
10		eferred compensation plans				
11		programs				
12		penses (Part VIII)				
13		costs (Part IX)				
14	Other deductions	(attach statement)				
15		Add lines 1 through 14				0.
16		s income before net operating loss deduction. So		,	, ,	
	column (C)					-
17		operating loss (see instructions)				
<u>18</u>		ss taxable income. Subtract line 17 from line 16	o			
LHA	For Paperwork F	Reduction Act Notice, see instructions.			Sched	ule A (Form 990-T) 2020

					ENTITY 2
	ule A (Form 990-T) 2020				Page 2
Part		od of inventory valuation			
1	Inventory at beginning of year				
2 3	Purchases				
4	Cost of labor Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year			_	
8	Cost of goods sold. Subtract line 7 from line 6. Enter he				
9	Do the rules of section 263A (with respect to property pr	oduced or acquired fo	r resale) apply to the c	rganization?	Yes No
Part	IV Rent Income (From Real Property and	Personal Propert	y Leased with Re	eal Property)	
1	Description of property (property street address, city, sta	ate, ZIP code). Check i	f a dual-use (see instru	ctions)	
	A				
	в				
	c				
	D []		I		
		Α	В	C	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
	rent for personal property is more than 10%				
b	but not more than 50%) From real and personal property (if the				
D D	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
с	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
4 5	in lines 2(a) and 2(b) (attach statement)	er here and on Part I. I		I	0.
Part					0.
1	Description of debt-financed property (street address, ci		neck 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 Straight line depreciation (attach statement)				
a b	Other deductions (attach statement)				
c	Total deductions (add lines 3a and 3b,				
Ŭ	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 Parl	I, line 7, column (A)	>	0.
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A thro		on Part I, line 7, colun	nn (B) 🕨	0.
11	Total dividends-received deductions included in line 1	0			0.
023721	12-23-20			Schedule A	A (Form 990-T) 2020

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12 2020.05094 TRUSTEES OF PURDUE UNIVER 75206__1

<u> </u>	(=										
Part	ile A (Form 990-T) 2020) Jities, Ro	ovalties, and Re	ents fron	n Contro	led Or	ganization	s (see inst	ructions)		Page 3
							Exempt Contro	\	,		
	 Name of controlle organization 	d	2. Employer identification number	incon	unrelated ne (loss) structions)	4. Tota	al of specified nents made	5. Part of column 4 that is included in th controlling organiza tion's gross incom		co	eductions directly onnected with ome in column 5
(1)											
(2)											
(3)											
(4)											
<u> /</u>			No	nexempt C	Controlled O	rganizati	ions	1		1	
7	. Taxable Income	ir	Net unrelated ncome (loss) e instructions)	9. To	otal of speci yments mac	fied	10. Part that is included controlling	of column 9 cluded in the organization	's	conn	actions directly ected with in column 10
(1)											
(2)											
(3)											
(4)											
Totals								and on Part column (A)	l, Ent		e and on Part I, column (B) 0 •
Part	VII Investment	Income	of a Section 50	1(c)(7), (9), or (17)	Orgar	hization (s	ee instructio			
		cription of			2. Amou incor	int of	3. Deduction directly conn (attach state)	ons 4. ected (attac	Set-asides ch stateme	ent)	Total deductions and set-asides add cols 3 and 4)
(1)											
(2)											
(3)											
(4)										_	<u> </u>
Totals					Add amo column 2 here and o line 9, colu	. Enter n Part I,				h	Add amounts in column 5. Enter ere and on Part I, ine 9, column (B) 0 •
Part	VIII Exploited E	xempt A	Activity Income,	, Other T	Than Adv	ertising	g Income	(see instructi	ons)		
1	Description of exploite	ed activity:							_		
2	Gross unrelated busin	ess incom	e from trade or busi	ness. Entei	r here and o	n Part I,	line 10, colum	n (A)	2		
3	Expenses directly con	nected wit	h production of unre	elated busi	ness incom	e. Enter l	here and on Pa	art I,			
	line 10, column (B)								. 3		
4	Net income (loss) from						5 , 1				
	lines 5 through 7								. 4		
5	Gross income from ac	tivity that	is not unrelated busi	iness incor	ne				5		
6	Expenses attributable								6		
7	Excess exempt expen			•					_		
	4. Enter here and on F	art II, line	12						7		

Schedule A (Form 990-T) 2020

Page 4

Sched Part	ule A (Form 990-T) 2020 IX Advertising Income					Page 4
1	Name(s) of periodical(s). Check box if reporti A B C C D D	ng two or more periodic	als on a co	onsolidated basis	3.	
Enter a	amounts 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.
а						
3	Direct advertising costs by periodical					
а	Add columns A through D. Enter here and or	n Part I, line 11, column	(B)		►	0.
4	Advertising gain (loss). Subtract line 3 from l	ine				
	2. For any column in line 4 showing a gain,					
	complete lines 5 through 8. For any column	in				
	line 4 showing a loss or zero, do not comple	te				
	lines 5 through 7, and enter zero on line 8 $_{\odot}$					
5	Readership costs					
6	Circulation income					
7	Excess readership costs. If line 6 is less than	n l				
	line 5, subtract line 6 from line 5. If line 5 is le					
	than line 6, enter zero					
8	Excess readership costs allowed as a					
	deduction. For each column showing a gain					
	line 4, enter the lesser of line 4 or line 7					
а	Add line 8, columns A through D. Enter the g	greater of the line 8a, col	umns tota	l or zero here and	d on	0
Part	Part II, line 13 X Compensation of Officers, Di	rootors and Trust				. 0.
Fail	Compensation of Officers, D		ees (see	e instructions)		1.0
	1 Nome		. Title		3. Percentage	4. Compensation
	1. Name	2	. nue		of time devoted to business	attributable to unrelated business
(1)					%	unrelated business
(2)					%	
(3)					%	
(4)					%	
<u> ,</u>						
Total	. Enter here and on Part II, line 1					0.
Part	XI Supplemental Information (s	ee instructions)				

Schedule A (Form 990-T) 2020 14 2020.05094 TRUSTEES OF PURDUE UNIVER 75206_1

							ENT	YTT	3
	EDULE A n 990-T)	Unrelated Busin	ess	Taxable	Inco	me		OMB No.	. 1545-0047
	1 990-1)	From an Unrelate	d T	rade or	Busin	ess		00	
								21)20
	ent of the Treasury	Go to www.irs.gov/Form990T fo					- 1/01	Open to Publ	ic Inspection for
Internal F	Revenue Service	Do not enter SSN numbers on this form as it	may be	made public il j	/our organi	-			anizations Only
A Na	me of the organizatio	OF PURDUE UNIVERSITY					eridentif	ication numb	er
	INODIEED	OF TORDOE ONIVERSITI					0020	T T	
C Un	related business a	activity code (see instructions) > 54000	0			D Sequer	nce:	3 of	6
E De	scribe the unrelate	ed trade or business PROFESSIONAL	<u>/SCI</u>	ENTIFIC	/TECH	NICAL S	ERVI	CES	
Part	I Unrelated	Trade or Business Income		(A) Incor	me	(B) Expen	ses	(C) Net
10 (Gross receipts or s	ales 218,617.							
	Less returns and allo		1c	218	,617.				
	Cost of goods sold		2		,024.				
	•	act line 2 from line 1c	3	169	,593.			16	59,593.
		come (attach Sch D (Form 1041 or Form							
		tions)	4a						
		m 4797) (attach Form 4797) (see instructions)	4b						
		tion for trusts	4c						
		a partnership or an S corporation (attach							
		· · · · · ·	5						
		IV)	6						
		anced income (Part V)	7						
		royalties, and rents from a controlled							
c	organization (Part)	VI)	8						
		e of section 501(c)(7), (9), or (17)							
c	organizations (Part	VII)	9						
10 E	Exploited exempt a	activity income (Part VIII)	10						
11 A	Advertising income	e (Part IX)	11						
		instructions; attach statement)	12						
<u>13</u> 1	Fotal. Combine lin	es 3 through 12	13	169,	,593.			16	59,593.
	directly cor	s Not Taken Elsewhere (See instruction nected with the unrelated business in officers, directors, and trustees (Part X)	come						
		s							
		enance							
5 I	nterest (attach sta	tement) (see instructions)					. 5		
6 7	Taxes and licenses	S					6		
		h Form 4562) (see instructions)			7	4,175	5.		
		claimed in Part III and elsewhere on return			la		8b		4,175.
		eferred compensation plans							
11 E	Employee benefit p	programs					11		
		penses (Part VIII)							
		costs (Part IX)							
		attach statement)							4 175
		Add lines 1 through 14					. 15		4,175.
		s income before net operating loss deduction. Su			,	,		1	E 110
								+ 10	<u>55,418.</u> 0
	Jeduction for net o	operating loss (see instructions)					. 17		υ.
18 L	Involote et le !	ss taxable income. Subtract line 17 from line 16						14	55,418.

	ule A (Form 990-T) 2020					Page 2
Part	III Cost of Goods Sold Enter met	hod of inventory valua	tion 🕨 N/A			
1	Inventory at beginning of year				1	0.
2	Purchases				2	0.
3	Cost of labor				3	5,183.
4	Additional section 263A costs (attach statement)				4	0.
5	Other costs (attach statement)		STATEM	ENT 2	5	43,841.
6	Total. Add lines 1 through 5				6	49,024.
7	Inventory at end of year				7	0.
8	Cost of goods sold. Subtract line 7 from line 6. Enter l				8	49,024.
9	Do the rules of section 263A (with respect to property)					Yes X No
Part					ty)	
1	Description of property (property street address, city, s		-			
	D	-	_	_		_
		Α	В	C		D
2	Rent received or accrued					
а	From personal property (if the percentage of					
	rent for personal property is more than 10%					
	but not more than 50%)					
b	From real and personal property (if the					
	percentage of rent for personal property exceeds					
	50% or if the rent is based on profit or income)					
с	Total rents received or accrued by property.					
	Add lines 2a and 2b, columns A through D					
4 5 Part	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement) Total deductions. Add line 4 columns A through D. Er V Unrelated Debt-Financed Income (s		line 6, column (B)		•	0.
1	Description of debt-financed property (street address, o	city, state, ZIP code).	Check if a dual-use (see	instructions)		
	A 🗌					
	в 🗌					
	c 🗌					
	D					
		A	В	С		D
2	Gross income from or allocable to debt-financed					
	property					
3	Deductions directly connected with or allocable					
	to debt-financed property					
а	Straight line depreciation (attach statement)					
b	Other deductions (attach statement)					
с	Total deductions (add lines 3a and 3b,					
	columns A through D)					
4	Amount of average acquisition debt on or allocable					
	to debt-financed property (attach statement)					
5	Average adjusted basis of or allocable to debt-					
-	financed property (attach statement)					
6	Divide line 4 by line 5	%	%		%	%
7	Gross income reportable. Multiply line 2 by line 6		/0		75	/0
8	Total gross income (add line 7, columns A through D)	Enter here and on Pa	rt L line 7 column (A)			0.
5		. Entor hore and off Fa				5.
9	Allocable deductions. Multiply line 3c by line 6					
9 10	Total allocable deductions. Add line 9, columns A thr	iugh D. Entor horo on	l on Part Lling 7, activ	mn (B)		0.
11	Total dividends-received deductions included in line	-				0.
23/21	12-23-20			5		A (Form 990-T) 2020

16 2020.05094 TRUSTEES OF PURDUE UNIVER 75206__1

ENTITY

3

Sabad	ulo A (Earm 000 T) 2020	`								DINITII J
Part	ule A (Form 990-T) 2020 VI Interest, Annu	uities, Ro	oyalties, and Re	ents fror	n Contro	led Or	ganization	s (see instruc	tions)	Page 3
						E	Exempt Contro	lled Organizatio	ns	
	 Name of controlle organization 	d	2. Employer identification number	3. Net unrelated income (loss) (see instructions)		4. Total of specified payments made		5. Part of column 4 that is included in the controlling organiza- tion's gross income		6. Deductions directly connected with income in column 5
(1)										
(2)										
(3)										
(4)										
<u>(+)</u>			I No	nexempt (Controlled O	ı roanizati	ions			
7	'. Taxable Income	ir	Net unrelated ncome (loss) e instructions)	9. To	otal of speci yments mac	fied	10. Part of that is inclusion controlling	of column 9 cluded in the organization's income		Deductions directly connected with ome in column 10
(1)							<u>J</u>			
(2)										
(3)										
(4)										
Totals Part	VII Investment		of a Saction 50)1/_)/7) //	0) or (17)	>		column (A) 0 •		ne 8, column (B) Ó •
Part			of a Section 50	1(C)(7), (-	T	ee instructions)		– – – – – –
	1. Des	cription of	income		2. Amou incor		3. Deduction directly connormal (attach stater	ected (attach s	-asides tatemen	t) 5. Total deductions and set-asides (add cols 3 and 4)
(1)										
(2)										
(3)										
(4)										
Totals					Add amo column 2 here and o line 9, colu	. Enter n Part I,				Add amounts in column 5. Enter here and on Part I, line 9, column (B) 0 •
Part	VIII Exploited E	xempt A	Activity Income	, Other T	Than Adv	ertising	g Income ((see instructions	5)	
1	Description of exploite	ed activity:								
2	Gross unrelated busin	ness incom	e from trade or busi	ness. Ente	r here and o	n Part I,	line 10, colum	n (A)	2	
3	Expenses directly con	nected wit	th production of unre	elated busi	iness incom	e. Enter l	here and on Pa	art I,		
	line 10, column (B)								3	
4	Net income (loss) fron									
	lines 5 through 7								4	
5				iness incor	ne				5	
6	Expenses attributable								6	
7	Excess exempt expen									
	4. Enter here and on F	Part II, line	12						7	

Schedule A (Form 990-T) 2020

D

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 greater	of the lin	e 8a, columns total o	r zero here and o	n		
	Part II, line 13						0.
Part 2	Part II, line 13 Compensation of Officers, Directer	ors, and	I Trustees (see ir	nstructions)			
					3. Percentage	4. Compens	sation
	1. Name		2. Title		of time devoted	attributab	le to
					to business	unrelated bu	siness
(1)					%		
(2)					%		
(3)					%		
(4)					%		
Total.	Enter here and on Part II, line 1						0.
Part 2	XI Supplemental Information (see ins	tructions)					
023732 1	2-23-20				Sche	dule A (Form 9	90-T) 2020
520102 1			18		Gene		
0051	3 147228 75206		2020.05094	TRUSTERS		UNTVER	75206
5051			202000000	11001000	51 101000		, , , , , , , , , , , , , , , , , , , ,

Gross advertising income

Advertising Income

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

Direct advertising costs by periodical

Readership costs

Circulation income

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

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

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

Α

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

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

Part IX

Α В С D

1

2

а 3

а

4

5

6

7

12300513

С

►

►

В

Page 4

0.

0.

_1

FORM 990-T (A)	COST OF	GOODS	SOLD	- OTHER	COSTS	STATEMENT 2
DESCRIPTION						AMOUNT
UNIVERSITY OVERHEAD TESTING SUPPLIES						13,499. 30,342.
TOTAL TO FORM 990-T, S	CHEDULE 2	A, LIN	E 5			43,841.

								ENT	ITY	4
	DULE A	Unrelated Busin	000	Tavah	ا ما	loor	no		OMB No	. 1545-0047
(Form	990-T)							ŀ		
		From an Unrelate	ed I	rade o	r Bu	ISING	ess		20)20
		Go to www.irs.gov/Form990T fo	r inetr	uctions and	l tha la	tast inf	ormation		20	JZU
	t of the Treasury	 Do not enter SSN numbers on this form as it 						-)(3)		lic Inspection for
	venue Service		may by		, ii youi	organiz				ganizations Only
	e of the organizatio						B Employ			ber
	TRUSTEES	OF PURDUE UNIVERSITY					35-0	00204	41	
		activity code (see instructions) 53000	0						4 of	6
C Unre	elated business a	activity code (see instructions) 5 3000	0				D Sequer	ice:	4 of	0
	cribe the unrelate	ed trade or business PREAL ESTATE	REN	PAT./T.EZ	ASTN	G				
Part I	Unrelated	Trade or Business Income		(A) Inc	come		(B) Expen	ses	(C	;) Net
1a Gr	oss receipts or s	sales								
	ss returns and allo		1c							
		d (Part III, line 8)	2							
		act line 2 from line 1c	3							
		come (attach Sch D (Form 1041 or Form								
	20)) (see instruc		4a							
b Ne	et gain (loss) (For	m 4797) (attach Form 4797) (see instructions)	4b							
c Ca	apital loss deduc	tion for trusts	4c							
5 Inc	come (loss) from	a partnership or an S corporation (attach								
sta	atement)		5							
		IV)	6							
		anced income (Part V)	7							
		royalties, and rents from a controlled								
		VI)	8							
		e of section 501(c)(7), (9), or (17)								
		: VII)	9							
		activity income (Part VIII)	10							
		e (Part IX)	11	10	2 01	71			1	02 071
		instructions; attach statement) STMT 3	12		<u>3,9'</u> 3,9'					<u>03,971.</u> 03,971.
		es 3 through 12	13		-					-
	directly co	s Not Taken Elsewhere (See instruction nected with the unrelated business in	come)					is must l	ре
		officers, directors, and trustees (Part X)								
		s								
		enance								
		tomont) (soo instructions)								
	,	tement) (see instructions)								
6 Ta 7 De		s ch Form 4562) (see instructions)			7			0	<u> </u>	
		claimed in Part III and elsewhere on return								
		eferred compensation plans								
		programs								
12 Ex	cess exempt ex	penses (Part VIII)						12		
		costs (Part IX)						13		
14 Ot	her deductions ((attach statement)		SE	EE S	TATE	MENT 4			27,032.
		Add lines 1 through 14								27,032.
		s income before net operating loss deduction. Su								
								16	· ·	76,939.
		operating loss (see instructions)								0.
		ss taxable income. Subtract line 17 from line 16								76,939.
LHA FO	or Paperwork R	eduction Act Notice, see instructions.			_			Schedu	le A (Form	n 990-T) 2020

					ENTITY 4
Schedu Part	ule A (Form 990-T) 2020	nethod of inventory valuat	ion 🕨		Page 2
1				1	
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7					
8	Cost of goods sold. Subtract line 7 from line 6. Ent				
9 Part	Do the rules of section 263A (with respect to proper IV Rent Income (From Real Property a				
1	Description of property (property street address, city A B C	y, state, ZIP code). Check	if a dual-use (see instru	uctions)	
	D			•	
-		Α	В	C	D
2	Rent received or accrued				
а	From personal property (if the percentage of rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income)				
с	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
4 5	in lines 2(a) and 2(b) (attach statement)		line 6, column (B)		0.
Part \					
1	Description of debt-financed property (street addres	s, city, state, ZIP code). C	heck if a dual-use (see	instructions)	
	A				
	в				
	c				
	D			•	
•	Ourses income from an allocable to dabt financed	Α	В	С	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)				
с	Total deductions (add lines 3a and 3b,				
	columns A through D)				
4	Amount of average acquisition debt on or allocable				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
	financed property (attach statement)				
6	Divide line 4 by line 5		%	%	%
7	Gross income reportable. Multiply line 2 by line 6			►	
8	Total gross income (add line 7, columns A through	D). Enter here and on Pa	rt I, line 7, column (A)	▶	0.
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A	through D. Enter here and	d on Part I. line 7. colur	nn (B)	0.
11	Total dividends-received deductions included in I				0.
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											ENILLI 4
	ule A (Form 990-T) 2020 VI Interest, Annu		ovalties, and Re	ents fror	n Control	led Or	ganization	S (se	e instruct	ions)	Page 3
	••	,,	, ,				Exempt Contro				
	1. Name of controlle organization	d	2. Employer identification number	incon	unrelated ne (loss) structions)	4. Tota	al of specified nents made	5. Pa that is contr	irt of colur included olling orga	nn 4 in the iniza-	Deductions directly connected with ncome in column 5
(1)									gross inc		
(1) (2)											
(3)											
<u>(4)</u>											
<u></u>			No	nexempt C	Controlled O	rganizati	ions	1		I	
7	'. Taxable Income	in	Net unrelated Icome (loss) e instructions)	9. To	otal of specif yments mad	ied	10. Part that is inc	luded i	in the ation's	C	eductions directly onnected with me in column 10
(1)							5				
(2)											
(3)											
(4)											
Totals						►	Enter here line 8, c		,		nere and on Part I, e 8, column (B) 0 •
Part	VII Investment	Income	of a Section 50	1(c)(7), (9), or (17)	Orgar	nization (s	ee inst	ructions)		
	1. Desc	cription of	income		2. Amou incor		3. Deduction directly conn (attach state)	ected	4. Set- (attach st		5. Total deductions and set-asides (add cols 3 and 4)
(1)											
(2)											
(3)											
(4)											
Totals					Add amou column 2 here and o line 9, colu	. Enter n Part I,					Add amounts in column 5. Enter here and on Part I, line 9, column (B) 0 •
Part	VIII Exploited E	xempt A	Activity Income,	Other T	Than Adve	ertising	g Income	(see ins	structions)		
1	Description of exploite	ed activity:									
2	Gross unrelated busin	ess incom	e from trade or busir	ness. Ente	r here and o	n Part I,	line 10, colum	n (A)		2	
3	Expenses directly con	nected wit	h production of unre	elated busi	iness income	e. Enter l	here and on Pa	art I,			
	line 10, column (B)									3	
4	Net income (loss) from	n unrelated	trade or business. S	Subtract lir	ne 3 from lin	e 2. If a g	gain, complete	•			
										4	
5	Gross income from ac									5	
6	Expenses attributable									6	
7	Excess exempt expen										
	4. Enter here and on F	Part II, line	12							7	

Schedule A (Form 990-T) 2020

Sched Part	Iule A (Form 990-T) 2020 IX Advertising Income					Page 4
1	Name(s) of periodical(s). Check box if reportin	ng two or more	e periodicals on a	consolidated basis	S.	
		5	,			
	B					
	c 🗌					
	D					
Enter :	amounts for each periodical listed above in the	corresponding	a column			
Linton			A	В	с	D
2	Gross advertising income		<i>, , , , , , , , , ,</i>		v	
-	Add columns A through D. Enter here and or		column (A)			0.
а	Add boldmine A through D. Enter here and or		, oolanni (y		·····	
3	Direct advertising costs by periodical					
a	Add columns A through D. Enter here and or		column (B)			0.
u	Add coldmins A through D. Enter here and or	ri arci, inc ri	, column (b)		••••	
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	n				
	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					
	than line 6, enter zero					
8	Excess readership costs allowed as a					
0	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 g		ine 8a. columns to	tal or zero here an	d on	
a	Part II, line 13	reater of the h				0.
Part	*	rectors, an	d Trustees	see instructions)		
					3. Percentage	4. Compensation
	1. Name		2. Title		of time devoted	attributable to
	1. Name		2. The		to business	unrelated business
(1)					%	
(2)					%	
(3)					%	
(<u>3)</u> (4)					%	
<u>(-)</u>					/0	
Total	. Enter here and on Part II, line 1					0.
Part		ee instructions				
			~/			

FORM 990-T (A)	OTHER	INCOME	STATEMENT 3
DESCRIPTION			AMOUNT
WBBA CELL TOWER			21,000. 82,971.
TOTAL TO SCHEDULE A, PART	r I, LINE 12		103,971.
FORM 990-T (A)	OTHER	DEDUCTIONS	STATEMENT 4
DESCRIPTION			AMOUNT
URTAS TV TOWER UNIVERSITY WBAA RADIO COMMUNICATIONS	-	RSITY OVERHEAD	21,572. 5,460.

					ENTI	ITY 5
IEDULE A	Uprolated Busin	000	Taxabla Inco	mo		OMB No. 1545-0047
т 990-Т)					F	
	From an Unrelate	ed I	rade or Busin	ess		2020
	Go to www.irs.gov/Eorm990T.fr	or inetru	uctions and the latest in	formation		ζυζυ
-					3)	Open to Public Inspection for
Revenue Service		may be				501(c)(3) Organizations Only
-						
TRUSTEES	OF PORDOE UNIVERSITY			35-60	0204	<u>: ⊥</u>
Involuted business		0		D Sequence		o _f 6
inelated business a		<u> </u>		D Sequence	. .	01 0
escribe the unrelat	ed trade or business ARTS/ENTERTA	INME	NT/RECREATIO	N		
					es	(C) Net
				() - 1		
			0 070 600			
						211 516
-		3	211,510.			211,516.
<i>n</i> (,					
		40				
		– /				
organization (Part	VI)	8				
			211 516			211,516.
		· · ·				
			or limitations on ded	uctions) Ded	uction	s must be
Compensation of (officers directors and trustees (Part X)					
					1	
Salaries and wage					1	
	s				2	
Repairs and maint	senance					
Repairs and maint Bad debts	s enance				2 3	50,006.
Repairs and maint Bad debts Interest (attach sta	s enance atement) (see instructions)		SEE STATI	ement 5	2 3 4	50,006.
Repairs and maint Bad debts Interest (attach sta Taxes and licenses	s enance atement) (see instructions) s		SEE STATI	ement 5	2 3 4 5 6	50,006.
Repairs and maint Bad debts Interest (attach sta Taxes and licenses Depreciation (attac	satement) (see instructions)sch Form 4562) (see instructions)		SEE STATI	ement 5	2 3 4 5 6	50,006.
Repairs and maint Bad debts Interest (attach sta Taxes and licenses Depreciation (attac Less depreciation	s		SEE STATI	EMENT 5 244,749.	2 3 4 5 6	
Repairs and maint Bad debts Interest (attach sta Taxes and licenses Depreciation (attac Less depreciation Depletion	satement) (see instructions)sch Form 4562) (see instructions)		SEE STATI 7 8a	EMENT 5 244,749.	2 3 4 5 6 8b	
Repairs and maint Bad debts	s		SEE STATI	EMENT 5 244,749.	2 3 4 5 6 8b 9	
Repairs and maint Bad debts	s		SEE STATI 7 8a	EMENT 5 244,749.	2 3 4 5 6 8 8 9 10	
Repairs and maint Bad debts	ss		SEE STATI	EMENT 5 244,749.	2 3 4 5 6 8b 9 10 11	
Repairs and maint Bad debts	ss		SEE STATI	EMENT 5 244,749.	2 3 4 5 6 8 b 9 10 11 12	244,749.
Repairs and maint Bad debts	ss		SEE STATI	EMENT 5 244,749.	2 3 4 5 6 8b 9 10 11 12 13	244,749.
Repairs and maint Bad debts	ss		SEE STATI	EMENT 5 244,749.	2 3 4 5 6 8b 9 10 11 12 13 14	244,749.
Repairs and maint Bad debts	s	ubtract	SEE STATI	EMENT 5 244,749.	2 3 4 5 6 8b 9 10 11 12 13 14	244,749. 294,755. -83,239.
Repairs and maint Bad debts	s	ubtract	SEE STATI	EMENT 5 244,749.	2 3 4 5 6 8b 9 10 11 12 13 14 15 	244,749.
	TRUSTEES Inrelated business a Describe the unrelated Describe the unrelated TI Unrelated Gross receipts or s Less returns and allo Cost of goods solo Gross profit. Subtr Capital gain net inc 1120)) (see instruct Net gain (loss) (For Capital loss deduct Income (loss) from statement) Rent income (Part Unrelated debt-fina Interest, annuities, organization (Part Unrelated debt-fina Interest, annuities, organizations (Part Exploited exempt a Advertising income Other income (see Total. Combine lim directly con	m 990-T) Unrelated Busin From an Unrelated ment of the Treasury Devenue Service Go to www.irs.gov/Form990T for Do not enter SSN numbers on this form as it ame of the organization TRUSTEES OF PURDUE UNIVERSITY Inrelated business activity code (see instructions) 71000 71000 Describe the unrelated trade or business ARTS/ENTERTA 71000 Gross receipts or sales 2,378,632. c Balance Cost of goods sold (Part III, line 8) c Balance c Balance Gross profit. Subtract line 2 from line 1c capital gain net income (attach Sch D (Form 1041 or Form 1120)) (see instructions) Net gain (loss) (Form 4797) (attach Form 4797) (see instructions) 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 statement) ment income of section 501(c)(7), (9), or (17) organization (Part VI) Intrelated debt-financed income (Part V) Investment income of section 501(c)(7), (9), or (17) organizations (Part VI)	m 990-T) Unrelated Business From an Unrelated T	m 990-T) Unrelated Business Taxable Incor From an Unrelated Trade or Busin ▶ Go to www.irs.gov/Form990T for instructions and the latest im ▶ Do not enter SSN numbers on this form as it may be made public if your organization TRUSTEES OF PURDUE UNIVERSITY Immediated business activity code (see instructions) > 710000 Immediated trade or business >ARTS / ENTERTAINMENT / RECREATION Immediated trade or business >ARTS / ENTERTAINMENT / RECREATION Immediated trade or business C Balance Immediated gain (loss) (Form 4797) (attach Form 1041 or Form 1 1120) (see instructions) 4a Net gain (loss) (Form 4797) (attach Form 4797) (see instructions) 4a Rent income (Part IV) 6 Unrelated detring and rents from a controlled organization (Part VI) 7 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VI) 10 Advertising income (Part IV) 11 Other exempt activity income (Part VIII) 10 Advertising income (Part IX) 11 Ourselated debt-financed income (Part VIII) 10 Advertising income (Part IX) 11 Inteset, annuities, royalties, and rents from a controll	m 990-T) Unrelated Business Taxable Income From an Unrelated Trade or Business	m 990-T) Unrelated Business I axable 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). ame of the organization TRUSTEES OF PURDUE UNIVERSITY B Employer identifica 35-600204 Inrelated business activity code (see instructions) > 710000 D sequence: Inrelated trade or business > ARTS/ENTERTAINMENT/RECREATION I Unrelated Trade or Business Income (A) Income (B) Expenses Gross receipts or sales 2,378,632. 2 2,167,116. Less returns and allowances c Balance 1c 2,378,632. 2 Less returns and allowances

Schedu	ule A (Form 990-T) 2020				Page 2
Part	III Cost of Goods Sold	Enter method of inventory valuation	► N/A		
1	Inventory at beginning of year				139,365.
2					
3	Cost of labor				883,757.
4	Additional section 263A costs (attach statem	nent)			ı <u>0.</u>
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	· · · · · · · · · · · · · · · · · · ·				
8	Cost of goods sold. Subtract line 7 from line				
9 Dort	Do the rules of section 263A (with respect to				Yes X No
Part		· · _ · _ · _ ·			
1	Description of property (property street addre	ess, city, state, ZIP code). Check if a c	lual-use (see instru	lctions)	
	A [] B [
	c 🗌				
	D				
		A	В	С	D
2	Rent received or accrued			v	
a	From personal property (if the percentage of				
-	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
	percentage of rent for personal property exce	eeds			
	50% or if the rent is based on profit or income	e)			
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 of		on Part I, line 6, co	olumn (A) 🕨 🕨	0.
	Deductions directly connected with the incon				
4	in lines 2(a) and 2(b) (attach statement)				
-			D	•	0.
5 Part '	Total deductions. Add line 4 columns A thro V Unrelated Debt-Financed Incompared		5, COlumn (B)		0•
1	Description of debt-financed property (street		if a dual use (see	instructions)	
•	A	address, city, state, ZIF code). Check	li a dual-use (see	instructions)	
	в 🗌				
	c 🗌				
	D				
		A	В	С	D
2	Gross income from or allocable to debt-finance	ced			
	property				
3	Deductions directly connected with or allocal				
	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 allo				
	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to deb				
	financed property (attach statement)				
6	Divide line 4 by line 5		%		% %
7	Gross income reportable. Multiply line 2 by lin				
8	Total gross income (add line 7, columns A t	through D). Enter here and on Part I, li	ne 7, column (A)	►	0.
-			r		
9	Allocable deductions. Multiply line 3c by line	· · · · ·		nn (D)	0.
10	Total allocable deductions. Add line 9, colu Total dividends-received deductions include				0.
11		ded in line 10			
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ENTITY 5

<u> </u>		_								ENITIT 2
	ule A (Form 990-T) 2020 VI Interest, Annu		oyalties, and Re	ents fror	n Contro	led Or	ganization	s (see instruc	ctions)	Page 3
				1			-	lled Organizatio	,	
	 Name of controlle organization 	ed	2. Employer identification number	incon	unrelated ne (loss) structions)	4. Tota	al of specified nents made	5. Part of colu that is included controlling org tion's gross in	umn 4 d in the janiza-	5. Deductions directly connected with income in column 5
(1)										
(2)										
(3)										
(4)										
<u> </u>			No	nexempt C	Controlled O	rganizati	ions	•	•	
7	. Taxable Income	in	Net unrelated Icome (loss) e instructions)		otal of speci yments mac		that is inc controlling	of column 9 cluded in the organization's income	0	Deductions directly connected with ome in column 10
(1)							<u>J</u>			
(2)										
(3)										
(4)										
Totals						•		and on Part I, column (A) 0 •	lir	here and on Part I, ne 8, column (B) 0 •
Part	VII Investment	Income	of a Section 50	1(c)(7). (9). or (17)	Orgar	ا nization رە	ee instructions)	' I	<u>.</u>
		cription of i			2. Amou incor	int of	3. Deduction directly connection (attach state)	ons 4. Se ected (attach s	t-asides statement	t) (add cols 3 and 4)
(1)										
(2)										
(3)										
(4) Totals				•	Add amo column 2 here and o line 9, colu	. Enter n Part I,				Add amounts in column 5. Enter here and on Part I, line 9, column (B) 0 •
Part	VIII Exploited E	xempt A	ctivity Income	, Other T	han Adv	-	g Income	(see instructions	3)	
1	Description of exploite									
2	Gross unrelated busin			ness. Ente	r here and o	n Part I,	line 10, colum	n (A)	2	
3	Expenses directly con							. ,		
	line 10, column (B)								3	
4	Net income (loss) from									
	lines 5 through 7						-		4	
5	Gross income from ac	ctivity that i	s not unrelated bus	iness incor	ne				5	
6	Expenses attributable								6	
7	Excess exempt expen	nses. Subtra	act line 5 from line 6	6, but do no	ot enter mor	e than th	ne amount on l	ine		
	4. Enter here and on F	Part II, line	12						7	

Schedule A (Form 990-T) 2020

Sched Part	ule A (Form 990-T) 2020 IX Advertising Income						Page 4
1	Name(s) of periodical(s). Check box if reportir A B C D D	ng two or	more periodicals on a	consolidated basi	S.		
Enter a	amounts for each periodical listed above in the	correspo	ndina column.				
	······································		A	В	С		D
2	Gross advertising income						
	Add columns A through D. Enter here and on		e 11. column (A)	•		•	0.
а	C C	,	, , ,				
3	Direct advertising costs by periodical						
а	Add columns A through D. Enter here and on		ne 11, column (B)			·	0.
4	Advertising gain (loss). Subtract line 3 from lir						
4	2. For any column in line 4 showing a gain,						
	complete lines 5 through 8. For any column ir						
	line 4 showing a loss or zero, do not complete						
	lines 5 through 7, and enter zero on line 8						
5							
6	Readership costs						
7	Circulation income						
'	Excess readership costs. If line 6 is less than						
	line 5, subtract line 6 from line 5. If line 5 is le						
0	than line 6, enter zero						
8	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						
•	Add line 8, columns A through D. Enter the g			l tal ar zara bara an			
а							0.
Part	Part II, line 13 X Compensation of Officers, Dir	ectors	and Trustees	an instructions)			0.
I UIT		COLOID			3. Percentage	4	Componention
	1. Name		2. Title		of time devoted		Compensation attributable to
	I. Name		2. Inte				elated business
(1)					to business %	un	elated busilless
					%		
(<u>2</u>)					%		
<u>(3)</u> (4)					%		
(4)					70		
Total	Enter here and on Part II, line 1						0.
Part		o instruc	tions)				

35-6002041

FORM 990-T (A)	INTEREST PAID	STATEMENT 5
DESCRIPTION		AMOUNT
BOND INTEREST		50,006.
TOTAL TO SCHEDULE A, PART	II, LINE 5	50,006.

FORM 990-T (A)	COST OF	GOODS	SOLD	- 0	OTHER	COSTS		STATEMENT	6
DESCRIPTION								AMOUNT	
RELATED SERVICE EXPEN	SE						-	1,128,4	84.
TOTAL TO FORM 990-T,	SCHEDULE	A, LIN	E 5				-	1,128,4	84.

								ENT	ITY	6
	IEDULE A	Unrelated Busin	660	Tara	hla l	lcon	ne		OMB No.	1545-0047
(For	m 990-T)							ŀ		
		From an Unrelate	a I	rade	or B	isine	ess		20	20
		► Go to www.irs.gov/Form990T fo	r inst	ructions a	and the la	test info	ormation.		20	20
	ment of the Treasury I Revenue Service	Do not enter SSN numbers on this form as it						3).		Inspection for
					,,	- 3	1		501(c)(3) Orga	
AN	lame of the organizatio הסוופיים	OF PURDUE UNIVERSITY					B Employer			r
	INOSIEES	OF FORDOE ONIVERSIII					55-00	020	± 1	
C I	Inrelated business	activity code (see instructions) > 72000	0				D Sequenc	e. (6 of	6
<u>•</u> •			<u> </u>					0.		
EC	escribe the unrelat	ed trade or business ACCOMODATION	&	FOOD	SERVI	CES				
		Trade or Business Income					(D) Evenera			Not
Par				(A)	Income		(B) Expense	es	(U)	Net
1a	Gross receipts or	sales 4,449,022.								
		wances c Balance ►	1c	4,4	49,02	22.				
2		d (Part III, line 8)	2		277,4					
3	Gross profit. Subt	ract line 2 from line 1c	3	3,1	.71,62	20.			3,17	1,620.
4 a	Capital gain net in	come (attach Sch D (Form 1041 or Form								
	1120)) (see instruc	2	4a							
	• • • •	rm 4797) (attach Form 4797) (see instructions)	4b							
		tion for trusts	4c							
5	. ,	a partnership or an S corporation (attach								
			5							
6		IV)	6 7							
7		anced income (Part V)	⊢ ∕							
8		, royalties, and rents from a controlled								
9		VI) (12)	8							
9		e of section 501(c)(7), (9), or (17) t VII)	9							
10		activity income (Part VIII)	10							
11		e (Part IX)	11							
12		instructions; attach statement)	12							
13	Total. Combine lir		13	3,1	.71,62	20.			3,17	1,620.
		ns Not Taken Elsewhere (See instruct	•				uctions) Ded	uction	-	
Fai		nnected with the unrelated business in				n ueuu	ictions) Ded	uction	is must b	5
1	Compensation of									
2		officers, directors, and trustees (Part X)						1		
		s						1 2		
3								2 3		
3 4	Repairs and maint Bad debts	s enance						2 3 4		
4 5	Repairs and maint Bad debts Interest (attach sta	senanceatement) (see instructions)						2 3 4 5		
4 5 6	Repairs and maint Bad debts Interest (attach sta Taxes and license	satement) (see instructions)						2 3 4 5 6		
4 5 6 7	Repairs and maint Bad debts Interest (attach sta Taxes and license Depreciation (attac	satement) (see instructions)sch Form 4562) (see instructions)			. 7			2 3 4 5 6	1 55	2.067
4 5 6 7 8	Repairs and maint Bad debts Interest (attach sta Taxes and license Depreciation (attac Less depreciation	satement) (see instructions)s			7 8a	1,5	552,067.	2 3 4 5 6 8b	1,55	2,067.
4 5 6 7 8 9	Repairs and maint Bad debts Interest (attach sta Taxes and license Depreciation (attac Less depreciation Depletion	satement) (see instructions)s ch Form 4562) (see instructions) claimed in Part III and elsewhere on return			7 8a	1,5	552,067.	2 3 4 5 6 8 b 9	1,55	2,067.
4 5 7 8 9 10	Repairs and maint Bad debts	satement) (see instructions)atement) (see instructions)s			7 8a	1,5	552,067.	2 3 4 5 6 8 b 9 10	1,55	2,067.
4 5 7 8 9 10 11	Repairs and maint Bad debts Interest (attach sta Taxes and license Depreciation (attac Less depreciation Depletion Contributions to d Employee benefit	satement) (see instructions)atement) (see instructions)atement) (see instructions)			7 8a	1,5	552,067.	2 3 4 5 6 8 b 9 10 11	1,55	2,067.
4 5 7 8 9 10 11	Repairs and maint Bad debts	satement) (see instructions) satement) (see instructions) ch Form 4562) (see instructions) claimed in Part III and elsewhere on return eferred compensation plans programs penses (Part VIII)			7 8a	1,5	552,067.	2 3 4 5 6 8 b 9 10 11 12	1,55	2,067.
4 5 7 8 9 10 11 12 13	Repairs and maint Bad debts Interest (attach sta Taxes and license Depreciation (attac Less depreciation Depletion Contributions to d Employee benefit Excess exempt ex Excess readership	satement) (see instructions) satement) (see instructions) ch Form 4562) (see instructions) claimed in Part III and elsewhere on return eferred compensation plans programs penses (Part VIII) costs (Part IX)			7 8a	1,5	552,067.	2 3 4 5 6 8 b 9 10 11 12 13		
4 5 7 8 9 10 11 12 13 14	Repairs and maint Bad debts Interest (attach sta Taxes and license Depreciation (attac Less depreciation Depletion Contributions to d Employee benefit Excess exempt ex Excess readership Other deductions	ssatement) (see instructions)ssss			7 8a SEE S	<u>1, !</u> TATE	552,067. MENT 7	2 3 4 5 6 8b 9 10 11 12 13 14	69	7,985.
4 5 7 8 9 10 11 12 13	Repairs and maint Bad debts	ss			7 8a SEE S	<u>1,5</u>	552,067. MENT 7	2 3 4 5 6 8 b 9 10 11 12 13	69	2,067. 7,985. 0,052.
4 5 7 8 9 10 11 12 13 14 15	Repairs and maint Bad debts Interest (attach sta Taxes and license Depreciation (attac Less depreciation Depletion Contributions to d Employee benefit Excess exempt ex Excess readership Other deductions Total deductions Unrelated busines	satement) (see instructions) satement) (see instructions) ch Form 4562) (see instructions) claimed in Part III and elsewhere on return eferred compensation plans programs penses (Part VIII) costs (Part VIII) costs (Part IX) (attach statement) . Add lines 1 through 14 s income before net operating loss deduction. Su	ubtrac	t line 15 fi	SEE S	<u>1,5</u> TATE , line 13,	552,067. MENT 7	2 3 4 5 6 8b 9 10 11 12 13 14	69 2,25	7,985. 0,052.
4 5 7 8 9 10 11 12 13 14 15	Repairs and maint Bad debts	satement) (see instructions) satement) (see instructions) ch Form 4562) (see instructions) claimed in Part III and elsewhere on return eferred compensation plans programs penses (Part VIII) costs (Part VIII) costs (Part IX) (attach statement) . Add lines 1 through 14 s income before net operating loss deduction. Su	ubtrac	t line 15 fi	SEE S	<u>1,5</u> TATE	552,067. MENT 7	2 3 4 5 6 8b 9 10 11 12 13 14 15	69 2,25	7,985.
4 5 7 8 9 10 11 12 13 14 15 16	Repairs and maint Bad debts Interest (attach sta Taxes and license Depreciation (attac Less depreciation Depletion Contributions to d Employee benefit Excess readership Other deductions Total deductions Unrelated business column (C) Deduction for net	satement) (see instructions) satement) (see instructions) ch Form 4562) (see instructions) claimed in Part III and elsewhere on return eferred compensation plans programs penses (Part VIII) costs (Part VIII) costs (Part IX) (attach statement) . Add lines 1 through 14 s income before net operating loss deduction. Su	ubtrac	t line 15 fi	SEE S	<u>1,5</u> TATE	552,067. MENT 7	2 3 4 5 6 8b 9 10 11 12 13 14 15 16	69 2,25 92	7,985. 0,052. 1,568.

ENTITY	6
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						ENTITY 6
	ule A (Form 990-T) 2020					Page 2
Part	III Cost of Goods Sold Enter met	hod of inventory valua	ation 🕨 N/A			
1	Inventory at beginning of year				1	0.
2	Purchases				2	0.
3	Cost of labor				3	0.
4	Additional section 263A costs (attach statement)				4	0.
5	Other costs (attach statement)				5	1,277,402.
6	Total. Add lines 1 through 5				6	1,277,402.
7	Inventory at end of year				7	0.
8	Cost of goods sold. Subtract line 7 from line 6. Enter l	,		•	8	1,277,402.
9	Do the rules of section 263A (with respect to property					Yes X No
Part					<u>y)</u>	
1	Description of property (property street address, city, s	tate, ZIP code). Chec	k if a dual-use (see instru	ctions)		
	B					
	D					
		Α	В	C		D
2	Rent received or accrued					
а	From personal property (if the percentage of					
	rent for personal property is more than 10%					
	but not more than 50%)					
b	From real and personal property (if the					
	percentage of rent for personal property exceeds					
	50% or if the rent is based on profit or income)					
с	Total rents received or accrued by property.					
	Add lines 2a and 2b, columns A through D					
4 5	in lines 2(a) and 2(b) (attach statement)	ter here and on Part	I, line 6, column (B)		►	0.
Part	V Unrelated Debt-Financed Income (s	ee instructions)				
1	Description of debt-financed property (street address, o	city, state, ZIP code).	Check if a dual-use (see	nstructions)		
	Α					
	В					
	C					
	D					
		Α	В	С		D
2	Gross income from or allocable to debt-financed					
	property					
3	Deductions directly connected with or allocable					
	to debt-financed property					
а	Straight line depreciation (attach statement)					
b	Other deductions (attach statement)					
С	Total deductions (add lines 3a and 3b,					
	columns A through D)					
4	Amount of average acquisition debt on or allocable					
	to debt-financed property (attach statement)					
5	Average adjusted basis of or allocable to debt-					
	financed property (attach statement)					
6	Divide line 4 by line 5	9	6 %		%	%
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 P	art I, line 7, column (A) _		▶	0.
~		[1		<u> </u>	
9 10	Allocable deductions. Multiply line 3c by line 6 Total allocable deductions. Add line 9, columns A thr	L	I ad on Part L line 7 active	n (P)		0.
11	Total dividends-received deductions included in line	-				0.
023721						A (Form 990-T) 2020
023121	12-20-20			30	neuule	~ (i 0i li 330-1) 2020

31 2020.05094 TRUSTEES OF PURDUE UNIVER 75206__1

<u> </u>		_								ENIII 0					
	ule A (Form 990-T) 2020 VI Interest, Annu		yalties, and Re	ents fror	n Contro	led Or	ganization	s (see instruc	tions)	Page 3					
					Exempt Controlled Organizations										
	 Name of controlle organization 	ed	2. Employer identification number	incon			al of specified nents made	5. Part of colu that is included controlling orgation's gross inc	mn 4 6 in the aniza-	Deductions directly connected with income in column 5					
(1)															
(2)															
(3)															
(4)															
<u></u>		•	No	nexempt C	Controlled O	rganizati	ons	•							
7	7. Taxable Income 8. Net unrelated income (loss) (see instructions)		9. Total of specified payments made			that is inc controlling	of column 9 Iuded in the organization's income	с	Deductions directly connected with ome in column 10						
(1)															
(2)															
(3)															
(4)															
Totals						•		and on Part I, column (A) 0 •		here and on Part I, le 8, column (B) 0 •					
Part	VII Investment	Income of	of a Section 50	1(c)(7). (9). or (17)	Orgar	ا hization رە	ee instructions)							
	Part VII Investment Income of a Section 50 1. Description of income			2. Amount of income				-asides tatement)	5. Total deductions and set-asides (add cols 3 and 4)						
(1)															
(2)															
(3)															
(4) Totals					Add amo column 2 here and o line 9, col	. Enter n Part I,				Add amounts in column 5. Enter here and on Part I, line 9, column (B) 0 •					
Part	VIII Exploited E	xemnt A	ctivity Income	Other T	han Adv	-	a Income	see instructions)						
1	Description of exploite	-		, ••			y eee		, 						
2	Gross unrelated busin	· · ·		ness Enter	r here and o	n Part I	line 10 colum	n (A)	2						
3	Expenses directly con						-	. ,							
Ū								-	3						
4	Net income (loss) from														
	lines 5 through 7						o , 1		4						
5	Gross income from ac	ctivity that is	s not unrelated bus	iness incor	ne				5						
6	Expenses attributable								6						
7	Excess exempt expen														
	4. Enter here and on F	Part II, line 1	12						7						

Schedule A (Form 990-T) 2020

D

Page 4

0.

0.

а	Add columns A through D. Enter here and on	Part I, line 11,	, column (B)			▶	•	0.
4	Advertising gain (loss). Subtract line 3 from lir 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column ir line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8	n e						
5	Readership costs							
6	Circulation income							
7	Excess readership costs. If line 6 is less than							
	line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero							
8	Excess readership costs allowed as a							
	deduction. For each column showing a gain of	on						
	line 4, enter the lesser of line 4 or line 7							
а	Add line 8, columns A through D. Enter the g		ne 8a, columns t	otal or zero h	nere and o	n	•	
	Part II, line 13					•	•	0.
Part 2	X Compensation of Officers, Dir	rectors, and	d Trustees	(see instructi	ons)			
	1. Name		2. Title			3. Percentage of time devoted to business	4. Comper attributat unrelated b	ole to
(1)						<u>%</u>	difference b	0311033
(2)						%		
(3)						%		
(4)						%		
Total.						▶		0.
Part 2	XI Supplemental Information (se	ee instructions))					

В

С

023732 12-23-20

Schedule A (Form 990-T) 2020

Advertising Income

Gross advertising income

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

Direct advertising costs by periodical

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

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

Α

Part IX

Α В С D

1

2

а 3

(1) (2) (3) (4)

35-6002041

HER DEDUCTIONS	STATEMENT 7
	AMOUNT
	674,935. 23,050.
2 14	697,985.
	THER DEDUCTIONS

FORM 990-T (A)	COST OF GOODS SOLD - OTHER COST	rs statement 8								
DESCRIPTION AMOUNT										
SUPPLIES & SERVICE EXP	1,277,402.									
TOTAL TO FORM 990-T, S	CHEDULE A, LINE 5	1,277,402.								

Form 4562		-			ortizatio			OMB No. 1545-0172
Form HUUL		(Including			ted Property) A PG	1 6	2020
Department of the Treasury Internal Revenue Service (99)	► Go to	www.irs.gov/F	Attach to y			information		Attachment Sequence No. 179
Name(s) shown on return		www.iis.gov/i			ess or activity to whic			Identifying number
				ACC	COMODATIC	N & FO	OD	
TRUSTEES OF					VICES			35-6002041
Part I Election To Ex	pense Certain Property	y Under Section 17	79 Note: If you	have any lis	sted property, co	omplete Part	V before yo	
1 Maximum amount (s	, ,,							1,040,000.
2 Total cost of section								
3 Threshold cost of se	ction 179 property b	before reduction	in limitation					2,590,000.
4 Reduction in limitation			-					
5 Dollar limitation for tax year			0 If married filing s			·····	5	
6	(a) Description of prop	perty		(b) Cost (busin	ness use only)	(c) Elected	cost	
7 Listed property. Ente			···· · · · · · · · · · · · · · · · · ·					
8 Total elected cost of								
9 Tentative deduction								
10 Carryover of disallow					· · · -			
11 Business income lim			•		,			
12 Section 179 expens							12	
13 Carryover of disallow Note: Don't use Part II of					🏲 13			
					la listad proport	()		
	preciation Allowan		•		,			
14 Special depreciation						-		
•							14	
15 Property subject to a							15	1,552,067.
16 Other depreciation (Part III MACRS D	preciation (Don't i	ncludo listod pro					16	1,332,007.
	epreciation (Don't h	ficiade listed pro	. ,	ion A				
	four operation in large of the	iii			<u>, </u>		47	
17 MACRS deductions	-	-				▶ □	<u>17 </u>	
18 If you are electing to group	Bection B - Assets F					nal Deprecia	tion System	n
	Bection D - Assets P	(b) Month and	(c) Basis for de		1 -			1
(a) Classification	of property	year placed in service	(búsiness/inve only - see ins	stment use	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property								
b 5-year property								
c 7-year property								
d 10-year property	,							
e 15-year property	,							
f 20-year property	,							
g 25-year property	,				25 yrs.		S/L	
h Residential renta	al property	/			27.5 yrs.	MM	S/L	
		/			27.5 yrs.	MM	S/L	
i Nonresidential r	al property	/			39 yrs.	MM	S/L	
		/				MM	S/L	
Se	ction C - Assets Pla	aced in Service	During 2020 T	ax Year Us	sing the Alterna	tive Depreci	ation Syste	em
20a Class life							S/L	
b 12-year					12 yrs.		S/L	
c 30-year		/			30 yrs.	MM	S/L	
d 40-year		/			40 yrs.	MM	S/L	
Part IV Summary	(See instructions.)							
21 Listed property. Ent	er amount from line 2	28					21	
22 Total. Add amounts	from line 12, lines 1	4 through 17, lin	es 19 and 20 ir	n column (g), and line 21.			
Enter here and on th	e appropriate lines o	of your return. Pa	artnerships and	S corporat	ions - s <u>ee instr.</u>		22	1,552,067.
23 For assets shown at	ove and placed in s	ervice during the	e current year, e	enter the				
portion of the basis					23			
016251 12-18-20 LHA Fo	Paperwork Reduc	tion Act Notice	, see separate	Instruction	ıs.			Form 4562 (2020)

12300513 147228 75206

2020.05094 TRUSTEES OF PURDUE UNIVER 75206_1

Form 4562 (2020) TRUSTEES OF PURDUE UNIVERSITY 35-6002041													041	Page 2	
Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)															
1	Note: For any vel 24b, columns (a)	hicle for w	hich you are u	, sing the	standare ection B.	d milea , and S	age rate o Section C	r dedu if appli	cting lease	e expens	e, comp	olete on	ily 24a,		
	Section A - D	<u> </u>								mits for p	asseng	er auton	nobiles.)		
24a Do you ha	we evidence to sup	port the bu		nt use cla	aimed?		Yes	No	24b If "Y	es," is th	e evide	nce writt	ten?] Yes [No
Type of	a) property cles first)	(b) Date placed in service	(c) Business/ investment use percentag		(d) Cost or ther basis	10	(e) asis for depro ousiness/inve use only	estment	(f) Recovery period	Met	g) hod/ ention	Depre	(h) eciation uction	Ele sectio	(i) ected on 179 ost
25 Special de	epreciation allow			-	placed i	in servi	ice during	the ta	ix year and	1					001
used mor	e than 50% in a c	qualified bu	usiness use				<u></u>		<u></u>		25				
26 Property	used more than 5	50% in a qı	ualified busine	ss use:											
		: :		6											
		: :	-	6											
07 Proportivi	used 50% or less	in a qualif		<u>// / / / / / / / / / / / / / / / / / /</u>										<u> </u>	
27 Property (6						S/L -					
				%						S/L -					
		: :		6						S/L -					
28 Add amou	unts in column (h), lines 25	through 27. E	nter here	e and on	line 2 ⁻	1, page 1				28				
	unts in column (i)												29		
			S	Section	B - Infor	matio	n on Use	of Veh	nicles						
Complete this	section for vehic	cles used b	oy a sole prop	rietor, pa	artner, or	r other	"more that	an 5%	owner," or	related	person.	If you pr	rovided \	ehicles	
to your emplo	yees, first answe	er the ques	tions in Sectio	on C to s	ee if you	ı meet	an excep	tion to	completin	g this se	ction fo	r those v	/ehicles.		
				, I		1	<i>(</i> ,)	T							
20 Total huain	aaa/invootmont mil	loo drivon di	uring the		a) biolo		(b) Vehicle		(c)	(d) Vehicle		(e) Vehicle		(f) Vehicle	
	ess/investment mil include commutin		0	Vei	nicle	V	enicie		/ehicle	Ven	ICIE	vei	licie	Vei	licie
	muting miles driv							-							
	er personal (nonc														
33 Total mile	s driven during tl	he year.													
	30 through 32			Yes	No	Yes	No	Yes	s No	Yes	No	Yes	No	Yes	No
	-duty hours?					103				103		103		103	
	/ehicle used prim														
	owner or related														
	r vehicle available														
use?															
Answer these	questions to det		- Questions f	-	-				-				ron't		
	owners or relate			Coption	10 0011	Joung	Occuon			d by cm	pioyees				
	aintain a written			ohibits a	II person	al use	of vehicle	es, incl	uding com	muting,	by your			Yes	No
	s?														
	aintain a written														
employee	s? See the instru	actions for	vehicles used	by corp	orate off	icers, o	directors,	or 1%	or more o	wners					
	eat all use of vehi														_
	ovide more than														
	f the vehicles, an														
	eet the requirem														
	our answer to 37 mortization	, 30, 39, 4	U, OF 4 FIS FE	s, don	L Comple	te Sec		the co	overed veri	icies.					
	(a)			(b)		(c)			(d)		(e)			(f)	
	Description of co	osts	Date	amortization begins		Amortiz amou	able		Code section		Amortiza period or per		Ar fo	nortization r this year	
42 Amortizat	ion of costs that	begins du	ring your 2020	-	ır:							<u> </u>			
				: :											
				: :											
	ion of costs that											43			
44 Total. Ad	d amounts in col	umn (f). Se	e the instruct	ons for	where to	report	t					44			
016252 12-18-20							_						F	orm 456	2 (2020)

36 2020.05094 TRUSTEES OF PURDUE UNIVER 75206__1

Form 4562	
Department of the Treasury Internal Revenue Service	(99
Name(s) shown on return	

►

Depreciation and Amortization (Including Information on Listed Property)

A PG1

4560 for instructions and the latest information

Attach to your tax return.

Attachmen Sequence No. 179 Identifying number

OMB No. 1545-0172

20

30 to www.irs.gov/Form4362 for mstruc	cions and the fatest information.
	Business or activity to which this form relates

ARTS / ENTERTA INMENT / RECRE

5

TR	USTEES OF PURDUE UNI	VERSITY		ATI	ION		1,11201	35-6002041
Pa	rt I Election To Expense Certain Proper	ty Under Section 17	79 Note: If yo	ou have any li	sted property,	complete Part	V before y	ou complete Part I.
1	Maximum amount (see instructions)						1	1,040,000.
2	Total cost of section 179 property place	ed in service (see i	instructions)				2	
3	Threshold cost of section 179 property	before reduction	in limitation				3	2,590,000.
4	Reduction in limitation. Subtract line 3	from line 2. If zero	or less, ente	er -0-			4	
5 [Dollar limitation for tax year. Subtract line 4 from line	1. If zero or less, enter -	0 If married filin	ng separately, see i	instructions		5	
6	(a) Description of pro	operty		(b) Cost (busir	ness use only)	(c) Elected	cost	
7	Listed property. Enter the amount from	line 29			7			
8 -	Total elected cost of section 179 prope	rty. Add amounts	in column (c	c), lines 6 and	7		8	
9 -	Tentative deduction. Enter the smaller	of line 5 or line 8					9	
10 (Carryover of disallowed deduction from		10					
11	Business income limitation. Enter the s	11						
12 \$	Section 179 expense deduction. Add lir	12						
	Carryover of disallowed deduction to 20				🕨 13			
	e: Don't use Part II or Part III below for	listed property. In:	stead, use P	art V.				
Pa	rt II Special Depreciation Allowa	nce and Other De	epreciation	(Don't incluc	le listed proper	ty.)		
14 \$	Special depreciation allowance for qual	ified property (oth	er than liste	d property) pla	aced in service	during		
1	the tax year						14	
15	Property subject to section 168(f)(1) ele	ction					15	
	Other depreciation (including ACRS)						16	244,749.
Ра	rt III MACRS Depreciation (Don't	include listed pro	perty. See ir	nstructions.)				
			Se	ection A				
17	MACRS deductions for assets placed in	n service in tax ye	ars beginnin	g before 2020)	·····	17	
18	f you are electing to group any assets placed in servi					>		
	Section B - Assets				Using the Gen	eral Deprecia	tion Syste	m
	(a) Classification of property	(b) Month and year placed in service	(business/i	or depreciation nvestment use e instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
<u>19a</u>	3-year property							
b	5-year property							
C	7-year property							
d	10-year property							
e	15-year property							
f	20-year property							
g	25-year property				25 yrs.		S/L	
h	Residential rental property	/			27.5 yrs.	MM	S/L	
		/			27.5 yrs.	MM	S/L	
i	Nonresidential real property	/			39 yrs.	MM	S/L	
		/				MM	S/L	
	Section C - Assets P	laced in Service	During 2020	0 Tax Year U	sing the Alterr	ative Depreci	ation Syst	iem
<u>20a</u>	Class life						S/L	
b					12 yrs.		S/L	
<u> </u>		/			30 yrs.	MM	S/L	
d		/			40 yrs.	MM	S/L	
	rt IV Summary (See instructions.)							
	Listed property. Enter amount from line						21	
	Total. Add amounts from line 12, lines	•						244 740
	Enter here and on the appropriate lines				ions - see instr	• • • • • • • • • • • • • • • • • • • •	22	244,749.
	For assets shown above and placed in	•						
	portion of the basis attributable to section			÷	23			F
01625	1 12-18-20 LHA For Paperwork Redu	cτion Act Notice,	, see separa	ne Instruction	ns.			Form 4562 (2020)

Form	4562 (2020)	TRU	STEES O	F PU	RDUE	UN	11/	/ERS	ITY				35-	6002	041	Page 2	
Par	Listed Proper entertainment,	ty (Include au	utomobiles, ce	ertain oth	ner vehic	les, c	certa	ain aircra	aft, an	d property	used fo	or					
	Note: For any 24b, columns (vehicle for w	hich you are u	ising the	standare ection B	d mil . and	eage Sec	e rate or ction C i	^r dedu f appli	cting leas	e expens	se, comp	olete or	ily 24a,			
	· · · · ·		on and Other								mits for	passeng	jer autor	nobiles.)			
24a [)o you have evidence to s	support the bu	siness/investme	ent use cla	aimed?] Ye	es 🗌	No	24b If "Y	'es," is tl	ne evide	nce writ	ten?] Yes [No	
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percenta	t of	(d) Cost or ther basis			(e) s for depre iness/inve use only	stment	(f) Recovery period	Me	(g) hthod/ vention	Depre	(h) eciation uction	Ele secti	(i) ected on 179 ost	
25 S	pecial depreciation allo	owance for q	ualified listed	property	placed i	in sei	rvice	e during	the ta	x year and	1 1				_		
u	sed more than 50% in	a qualified bu	usiness use							<u></u>	<u></u>	25					
26 P	roperty used more that	n 50% in a q	ualified busine	ess use:													
		: :		%													
		: :		%													
07 D	operty used 50% or le			%											<u> </u>		
<u>27 P</u>	operty used 50% or le			wse. %							S/L -						
				%							S/L -						
		: :		%							S/L -						
28 A	dd amounts in column	(h), lines 25	through 27. E	inter here	e and on	line	21, 1	page 1				28					
	dd amounts in column													29			
			ę	Section	B - Infor	mati	on c	on Use	of Veh	nicles							
Comp	lete this section for ve	hicles used l	by a sole prop	rietor, pa	artner, or	r othe	er "n	nore tha	in 5%	owner," o	r related	person.	lf you p	rovided \	ehicles		
to you	ir employees, first ans	wer the ques	tions in Section	on C to s	see if you	ı mee	et an	n except	ion to	completir	ng this s	ection fo	or those v	vehicles.			
				T ,		<u> </u>							· .			-	
00 T		ام مدينيام ما			a)		(b	-		(c)		d)	(e)			f)	
	otal business/investment ar (don't include commu		0	ve	hicle		Veh	ICIE	V V	/ehicle	ve	hicle	ve	Vehicle		Vehicle	
	otal commuting miles of																
	otal other personal (no																
	iven	•															
33 To	otal miles driven during	g the year.															
	dd lines 30 through 32 /as the vehicle availabl			Yes	No	Ye	20	No	Yes	s No	Yes	No	Yes	No	Yes	No	
	uring off-duty hours?			103			53		103		103		163		103		
	as the vehicle used pr																
	an 5% owner or relate	, ,															
	another vehicle availa																
u	se?																
Answ	er these questions to c		- Questions f	-	-					-				ren't			
	than 5% owners or rela																
37 D	o you maintain a writte	en policy stat	ement that pr	ohibits a	II person	nal us	se of	vehicle	s, incl	uding com	nmuting,	by your			Yes	No	
er	nployees?																
	o you maintain a writte											our					
	nployees? See the ins			• •	-												
	o you treat all use of v	-															
	o you provide more the																
	e use of the vehicles, a o you meet the require																
	ote: If your answer to a																
Par		07,00,00,4			t oompio		00110										
	(a)			(b)			c)			(d)		(e)			(f)		
	Description of	fcosts	Date	e amortization begins		Amor am	rtizabl Iount	le		Code section		Amortiza period or pe		Ar fo	nortization r this year		
42 A	mortization of costs th	at begins du	ring your 2020) tax yea	ar:				_								
				: :													
				: :													
	nortization of costs th												43				
	otal. Add amounts in c	column (f). Se	ee the instruct	ions for	where to	repo	ort						44	_		a (0000)	
016252	12-18-20													F	orm 456	2 (2020)	

38 2020.05094 TRUSTEES OF PURDUE UNIVER 75206__1

Form 430 Z
Department of the Treasury Internal Revenue Service (99

Depreciation and Amortization (Including Information on Listed Property) A PG1

Attach to your tax return.

Attachment Sequence No. **179**

OMB No. 1545-0172

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

	Identifying number
--	--------------------

L

3

Name(s)	snown on return					ich this form relates		Identifying number
						AL/SCIE		
	STEES OF PURDUE UNI					SERVICE		35-6002041
Part	Election To Expense Certain Proper	ty Under Section 17	9 Note: If you have	e any listed	property, o	complete Part	V before y	1
1 M	aximum amount (see instructions)						1	1,040,000.
2 To	otal cost of section 179 property place	ed in service (see i	nstructions)				2	
3 Th	reshold cost of section 179 property		2,590,000.					
4 Re	eduction in limitation. Subtract line 3	from line 2. If zero	or less, enter -0-					
5 Do	llar limitation for tax year. Subtract line 4 from line	5						
6	(a) Description of pro	operty	(b) C	Cost (business us	e only)	(c) Elected	cost	-
								-
								-
								-
								-
	sted property. Enter the amount from				7			
	otal elected cost of section 179 prope							
	entative deduction. Enter the smaller							
10 Ca	arryover of disallowed deduction from	line 13 of your 20	19 Form 4562				10	
	usiness income limitation. Enter the s		•	,				
12 Se	ection 179 expense deduction. Add li	nes 9 and 10, but	don't enter more th	han line 11	··· ·····		12	
	arryover of disallowed deduction to 20)	13			
	Don't use Part II or Part III below for	listed property. Ins	stead, use Part V.					
Part	II Special Depreciation Allowa	nce and Other De	preciation (Don't	include list	ed proper	ty.)		1
14 Sp	pecial depreciation allowance for qual	ified property (oth	er than listed prop	erty) placed	in service	during		
	e tax year							
15 Pr	operty subject to section 168(f)(1) ele	15						
	ther depreciation (including ACRS)						16	4,175.
Part	III MACRS Depreciation (Don't	include listed pro						
			Section	Α				T
17 M	ACRS deductions for assets placed in	n service in tax yea	ars beginning befo	re 2020		·····	17	
18 If y	ou are electing to group any assets placed in servi					<u></u>		
	Section B - Assets	1 1			the Gen	eral Deprecia	tion Syste	* m T
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for deprec (business/investmer only - see instructi	ntuse (d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
100	3-year property			,				
<u>19a</u> b	5-year property 5-year property							
	7-year property							
 d	10-year property							
	15-year property							
 f	20-year property							
	25-year property				25 yrs.		S/L	
<u>g</u>		/			27.5 yrs.	MM	S/L	
h	Residential rental property	/			27.5 yrs.	MM	S/L	
		/			39 yrs.	MM	S/L	
i	Nonresidential real property	/			00 yrs.	MM	S/L	
	Section C - Assets P	laced in Service	During 2020 Tax \	Year Using	the Altern			tem
20a	Class life						S/L	
<u>200</u> b	12-year				12 yrs.		S/L	
 C	30-year	/			30 yrs.	ММ	S/L	
d	40-year	/			40 yrs.	MM	S/L	
Parl		/			10 910.		0,2	
	sted property. Enter amount from line	28					21	1
	otal. Add amounts from line 12, lines		as 19 and 20 in co	lumn (a) and	l line 91		21	1
	nter here and on the appropriate lines	-					22	4,175.
	or assets shown above and placed in					• • • • • • • • • • • • • • • • • • • •	22	
	ortion of the basis attributable to section	•			23			
			<u> </u>	<u> </u>				

016251 12-18-20 LHA For Paperwork Reduction Act Notice, see separate 3nstructions.

	562 (2020)		STEES O										35-	6002	041	Page 2
Part	V Listed Propert entertainment,				ner vehic	les, c	certa	ain aircra	aft, an	d property	used fo	r				
	Note: For any 24b, columns (vehicle for w	hich you are u	, sing the	standard ection B,	d mil	eage Sec	e rate or ction C i	[.] dedu f appli	cting lease	e expens	se, comp	olete or	nly 24a,		
			on and Other								mits for	basseng	er autor	nobiles.))	
24a Do	you have evidence to s	support the bu	siness/investme	nt use cla	aimed?		Ye	es 🗌	No	24b If "Y	es," is th	ne evide	nce writ	ten?] Yes [No
	(a) ype of property ist vehicles first)	(b) Date placed in service	(c) Business/ investment use percenta		(d) Cost or ther basis			(e) s for depre iness/inves use only	stment	(f) Recovery period	Me	(g) thod/ vention	Depre	(h) eciation uction	secti	(i) ected on 179 cost
25 Spe	ecial depreciation allo	owance for q	ualified listed	property	placed i	n ser	rvice	e during	the ta	x year and	ـــــــــــــــــــــــــــــــــــــ					
use	ed more than 50% in	a qualified bu	usiness use	<u></u>						<u></u>		25				
26 Pro	perty used more tha	n 50% in a q	ualified busine	ss use:												
		: :		%											<u> </u>	
		: :		%												
07 Dro	perty used 50% or le			%											<u> </u>	
27 Pro	perty used 50% or le			//////////////////////////////////////							S/L -					
				%							S/L -					
		: :		%							S/L -					
28 Add	d amounts in column	(h), lines 25	through 27. E	nter here	e and on	line	21,	page 1				28				
	d amounts in column													29		
			5	Section I	B - Infor	mati	on d	on Use (of Veh	nicles						
Comple	ete this section for ve	hicles used l	by a sole prop	rietor, pa	artner, or	othe	er "n	nore tha	ın 5%	owner," or	related	person.	lf you p	rovided \	/ehicles	
to your	employees, first ans	wer the ques	tions in Section	on C to s	ee if you	mee	et ar	n except	ion to	completin	ig this se	ection fo	or those v	vehicles.		
												-1				
00 Tot	al husinggo (investment	milaa drivan d	uring the		a)		(b	-		(c)		d)	-	e)	(f)	
	al business/investment r (don't include commu		0	Ver	nicle		Veh	ICIE	v	/ehicle	Ver	nicle	vei	hicle	vei	hicle
	al commuting miles			<u> </u>												
	al other personal (no															
	/en	•	•													
33 Tot	al miles driven during d lines 30 through 32	g the year.														
	is the vehicle availab			Yes	No	Ye	es	No	Yes	s No	Yes	No	Yes	No	Yes	No
	ring off-duty hours?															
	is the vehicle used p															
tha	in 5% owner or relate	ed person?													<u> </u>	
36 Is a	nother vehicle availa	ble for perso	nal													
use	?															
	these questions to a	determine if y			-					-				ren't		
	nan 5% owners or rela	· · · · · · · · · · · · · · · · · · ·														
	you maintain a writte														Yes	No
	ployees? you maintain a writte															
	ployees? See the ins			-												
	you treat all use of v				~											
	you provide more the															
the	use of the vehicles,	and retain th	e information	received	?											
41 Do	you meet the require	ements conce	erning qualifie	d autom	obile der	nons	strati	ion use?	?							
	te: If your answer to	37, 38, 39, 4	0, or 41 is "Ye	s," don'i	t comple	te Se	ectic	on B for	the co	overed veh	icles.					
Part				(6)	1		(-)			(م)		(0)			(4)	
	(a) Description of	f costs	Date	(b) amortization begins		Amor	(C) rtizabl iount	le		(d) Code section		(e) Amortiza period or pe	ation	Ar fc	(f) mortization or this year	ı.
42 Am	ortization of costs th	at begins du	ring your 2020) tax yea	ır:											
				: :												
				: :												
	ortization of costs th												43			
	tal. Add amounts in d	column (f). Se	e the instruct	ions for v	where to	repo	ort	<u></u>					44	-		0,0000
016252 1	2-18-20													F	orm 456	52 (2020)

40 2020.05094 TRUSTEES OF PURDUE UNIVER 75206_1

(Rev. January 2020)

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

Department of the Treasury Internal Revenue Service File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Туре с	r Name of exempt organization or other filer, see instru	Taxpaye	Taxpayer identification number (TIN)					
print	TRUSTEES OF PURDUE UNIVERSI		35-6002041					
File by the due date for filing your return. See instructions. 2550 NORTHWESTERN AVE, NO. 1100 City, town or post office, state, and ZIP code. For a foreign address, see instructions. WEST LAFAYETTE, IN 47906								
Enter t	he Return Code for the return that this application is for (file	e a separat	e application for each return)			0 7		
Application Return Application								
Is For		Code	ls For	Code				
Form 9	90 or Form 990-EZ	01	Form 990-T (corporation)	07				
Form 9		02	Form 1041-A			08		
Form 4	720 (individual)	03	Form 4720 (other than individual)			09		
Form 9	90-PF	04	Form 5227					
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11		
Form 9	90-T (trust other than above)	06	Form 8870 2550 NORTHWESTERN			12		
box 1 I t	 is is for a Group Return, enter the organization's four digited in the group, check this box . If it is for part of the group, check this box . request an automatic 6-month extension of time until he organization named above. The extension is for the organization named above. The extension named	and atta	ch a list with the names and TINs of Z 16, 2022 , to file return for: d ending JUN 30, 2021	all memb	ers the extension of th			
	f this application is for Forms 990-BL, 990-PF, 990-T, 4720, any nonrefundable credits. See instructions.	, or 6069, e	enter the tentative tax, less	3a	\$	0.		
-	*	38	а Т	0.				
	b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.					0.		
-	Balance due. Subtract line 3b from line 3a. Include your pa			<u>3b</u>	\$			
ι	ising EFTPS (Electronic Federal Tax Payment System). See	e instructio	ns.	3c	\$	0.		
Cautio instruc	n: If you are going to make an electronic funds withdrawal tions. For Privacy Act and Paperwork Reduction Act Notice,			453-EO an		79-EO for payment 8868 (Rev. 1-2020)		