Eorm 8879-TE

IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2023, or fiscal year beginning 09/01 , 2023, and ending 08/31 , 20 24

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879TE for the latest information. EIN or SSN Name of filer UNIVERSITY OF HOUSTON SYSTEM 74-6001399 Name and title of officer or person subject to tax KIMBERLY D ROBINSON - ASSIST CONTROLLER PAYROLL TAX Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a 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, 7b, 8b, 9b, or 10b, 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. Form 990 check here . . . **b Total revenue**. if any (Form 990, Part VIII, column (A), line 12) . . . Form 990-EZ check here . . . **b Total revenue**, if any (Form 990-EZ, line 9) **b Total tax** (Form 1120-POL, line 22) Form 1120-POL check here . . 3a Form 990-PF check here . . . 4a **b** Tax based on investment income (Form 990-PF, Part V, line 5) . 4b **b Balance due** (Form 8868, line 3c) Form 8868 check here 5a 5b Form 990-T check here . . X **b Total tax** (Form 990-T, Part III, line 4) Form 4720 check here **b Total tax** (Form 4720, Part III, line 1) 7a 7b Form 5227 check here . . . **b** FMV of assets at end of tax year (Form 5227, Item D) . . Form 5330 check here **b Tax due** (Form 5330, Part II, line 19) 92 9b Form 8038-CP check here . . . **b** Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10a **Declaration and Signature Authorization of Officer or Person Subject to Tax** Part II Under penalties of perjury, I declare that 🛛 I am an officer of the above entity or 🔲 I am a person subject to tax with respect to (name of entity) , (EIN) and that I have examined a copy of the 2023 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. PIN: check one box only to enter my PIN as my signature Enter five numbers, but on the tax year 2023 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 entity, I will enter my PIN as my signature on the tax year 2023 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. 07/14/2025 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 5 number (EFIN) followed by your five-digit self-selected PIN. 5 8 0 9 Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2023 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. ABOVE ONLY ENTERPRISES LLC ERO's signature Date <u>07/14/2025</u>

> ERO Must Retain This Form — See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

Form **990-T**

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No. 1545-0047

For calendar year 2023 or other tax year beginning 09/01, 2023, and ending 08/31, 20 24Go to www.irs.gov/Form990T for instructions and the latest information. 2023

2 2 3 Add lines 1 and 2 3 3809172 4 Charitable contributions (see instructions for limitation rules) 4 5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 5 3809172 6 Deduction for net operating loss. See instructions 6 3809172 7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 7 8 Specific deduction (generally \$1,000, but see instructions for exceptions) 8 1000 9 Trusts. Section 199A deduction. See instructions 9 10 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero 11 Part II Tax Computation 1 Organizations taxable as corporations. Multiply Part I, line 11, by 21% (0.21) 1 2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11, from:		nent of the Treasury Revenue Service	Do not enter SSN numbers on this form as it may be made public if your organization is a 501(or	e)(3).	for 501(c)(3) Organizations Only
Descript under section Orling Orl	_				
S29(a)	☐ 5 ☐ 4	.001(a) () .08(e)	E Group e. (see inst	xemption number ructions)	
G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust State college/university 6417(d)(1)(A) Applicable entity 6417(d)(1)(A) Applicable entity H Check if filing only to claim Credit from Form 8941 Refund shown on Form 2439 Elective payment amount from Form 3800 Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation J Enter the number of attached Schedules A (Form 990-T) 4	=		·		
G417(g)(1)(A) Applicable entity		·			
Check if filing only to claim	G Or	ieck organizatio		e college	5/ UTIIVE SILY
Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation J	H Ch	neck if filing only		nent amoi	ınt from Form 3800
JEntre the number of attached Schedules A (Form 990-T) K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes Not if "Yes," enter the name and identifying number of the parent corporation L The books are in care of TAX_DEPARTMENT Total Unrelated Business Taxable Income 1 Total of unrelated Business Taxable Income 2 Reserved 3 Add lines 1 and 2 4 Charitable contributions (see instructions for limitation rules) 5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 6 Deduction for net operating loss. See instructions for substructions Subtract line 6 from line 5 7 Total of unrelated business taxable income before peedific deduction and section 199A deduction. Subtract line 6 from line 5 8 Specific deduction (generally \$1,000, but see instructions for exceptions) 7 Total deductions. Add lines 8 and 9 10 Total deductions. Add lines 8 and 9 11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero 11 Tax Computation 1 Organizations taxable as corporations. Multiply Part I, line 11, by 21% (0.21) 1 Trust staxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11, from: Tax rate schedule or Schedule D (Form 1041) 2 Proxy tax. See instructions 4 Other tax amounts. See instructions 5 Alternative minimum tax 6 Tax on noncompliant facility income. See instructions 1 Tax and Payments 1 Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 1 Credit for prior-year minimum tax (attach Form 8801 or 8827) 1 Credit for prior-year minimum tax (attach Form 8801 or 8827) 1 Subtract line 1e from Part II, line 7.					
K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?					
If "Yes," enter the name and identifying number of the parent corporation The books are in care of TAX DEPARTMENT Total Unrelated Business Taxable Income Total Unrelated Business Taxable Income 1 Total Unrelated Business Taxable Income 2			, ,		
The books are in care of TAX DEPARTMENT Telephone number (713) 743-8799		-		3 - 1	
Total Unrelated Business Taxable Income 1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 2 Reserved				(713)	743-8799
2 Reserved 2 3 Add lines 1 and 2 3 3809172 4 Charitable contributions (see instructions for limitation rules) 4 4 5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 5 3809172 6 Deduction for net operating loss. See instructions 6 3809172 7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 7 8 Specific deduction (generally \$1,000, but see instructions for exceptions) 8 1000 9 Trusts. Section 199A deduction. See instructions 9 10 100 1000 9 Trusts. Section 199A deduction. See instructions 9 10 1000 10 1000 10 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero 11 10 1000 10 1000 11 Trusts Computation 1 1 1 11 11 11 11 11 11 11 11 11 11 11 11 11 11 12	Part	Total Ur			
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4 Charitable contributions (see instructions for limitation rules)	2	Reserved		. 2	
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	3	Add lines 1 and	d 2	. 3	3809172
6 Deduction for net operating loss. See instructions 7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5 8 Specific deduction (generally \$1,000, but see instructions for exceptions) 9 Trusts. Section 199A deduction. See instructions 10 Total deductions. Add lines 8 and 9 10 Total deductions. Add lines 8 and 9 11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero 12 Trusts taxable as corporations. Multiply Part I, line 11, by 21% (0.21) 13 Proxy tax. See instructions for tax computation. Income tax on the amount on Part I, line 11, from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041) 14 Proxy tax. See instructions 15 Alternative minimum tax 16 Tax on noncompliant facility income. See instructions 17 Total. Add lines 3 through 6 to line 1 or 2, whichever applies 18 Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 19 Credit for prior-year minimum tax (attach Form 8801 or 8827) 10 Total credits. Add lines 1a through 1d 10 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 10 Total credits. Add lines 1a through 1d 10 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 10 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 10 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 10 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 11 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 12 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 13 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 14 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 15 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 16 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 17 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 18 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 19 Curelit for prior-year minimum tax (attach Form 8801 or 8827) 1	4	Charitable con	tributions (see instructions for limitation rules)	. 4	
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Subtract line 6 from line 5 Specific deduction (generally \$1,000, but see instructions for exceptions). Trusts. Section 199A deduction. See instructions Total deductions. Add lines 8 and 9. Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero. Tax Computation Trusts taxable as corporations. Multiply Part I, line 11, by 21% (0.21). Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11, from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041). Proxy tax. See instructions. Tother tax amounts. See instructions. Atternative minimum tax. Total. Add lines 3 through 6 to line 1 or 2, whichever applies. Total. Add lines 3 through 6 to line 1 or 2, whichever applies. Total. Add lines 3 through 6 to line 1 or 2, whichever applies. Total cerdits (see instructions). General business credit. Attach Form 3800 (see instructions). Ceneral business credit. Attach Form 8801 or 8827). Total credits. Add lines 1 a through 1d. Subtract line 1e from Part II, line 7.					3809172
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enter zero					1000
Part II Tax Computation 1 Organizations taxable as corporations. Multiply Part I, line 11, by 21% (0.21)	11		· · · · · · · · · · · · · · · · · · ·	·	
1 Organizations taxable as corporations. Multiply Part I, line 11, by 21% (0.21)	Dart			• 11	
Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11, from:			•	1	
Part I, line 11, from: Tax rate schedule or Schedule D (Form 1041) 2 3 Proxy tax. See instructions		_			
3 Proxy tax. See instructions 3 4 Other tax amounts. See instructions 4 5 Alternative minimum tax 5 6 Tax on noncompliant facility income. See instructions 6 7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies 7 Part III Tax and Payments 1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 1a b Other credits (see instructions) 1b c General business credit. Attach Form 3800 (see instructions) 1c d Credit for prior-year minimum tax (attach Form 8801 or 8827) 1d e Total credits. Add lines 1a through 1d 1e 2 Subtract line 1e from Part II, line 7 2	_				
4 Other tax amounts. See instructions	3		· · · · · · · · · · · · · · · · · · ·		
5 Alternative minimum tax		-		. 4	
6 Tax on noncompliant facility income. See instructions 7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies 7 Total and Payments 1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) b Other credits (see instructions) c General business credit. Attach Form 3800 (see instructions) d Credit for prior-year minimum tax (attach Form 8801 or 8827) e Total credits. Add lines 1a through 1d 2 Subtract line 1e from Part II, line 7.	5			. 5	
Part III Tax and Payments 1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) b Other credits (see instructions)	6	Tax on nonco	mpliant facility income. See instructions	. 6	
1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 1a b Other credits (see instructions)	7	Total. Add line	s 3 through 6 to line 1 or 2, whichever applies	. 7	
b Other credits (see instructions)	Part				
c General business credit. Attach Form 3800 (see instructions)	1a				
d Credit for prior-year minimum tax (attach Form 8801 or 8827) e Total credits. Add lines 1a through 1d	b				
e Total credits. Add lines 1a through 1d 1e 2 Subtract line 1e from Part II, line 7 2	С		· · · · · · · · · · · · · · · · · · ·		
2 Subtract line 1e from Part II, line 7					
			<u> </u>		
				2	
	3a				
c Amount due from Form 8697					
e Other amounts due (see instructions)					
f Total amounts due. Add lines 3a through 3e				3f	
4 Total tax. Add lines 2 and 3f (see instructions). Check if includes tax previously deferred under				01	
section 1294. Enter tax amount here	-			4	
5 Current net 965 tax liability paid from Form 965-A, Part II, column (k)	5	Current net 96	5 tax liability paid from Form 965-A, Part II, column (k)	-	

Form 990-T (2023)

Part	Tax and Payments (continued)							
6a	Payments: Preceding year's overpayment credited to the current year	6a						
b	Current year's estimated tax payments. Check if section 643(g) election applies	6b						
С	Tax deposited with Form 8868	6c		\neg				
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	Elective payment election amount from Form 3800	6g						
h	Payment from Form 2439	6h						
i	Credit from Form 4136	6i						
j	Other (see instructions)	6j						
7	Total payments. Add lines 6a through 6j			_	7			
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached .			\sqcup	8			
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount o			. -	9			
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amou	int ove	•		10			
11 Part	Enter the amount of line 10 you want: Credited to 2024 estimated tax V Statements Regarding Certain Activities and Other Information	ion (s	Refund		11			
1	At any time during the 2023 calendar year, did the organization have an inter-				or outh	ority	Yes	No
'	over a financial account (bank, securities, or other) in a foreign country? If "						100	110
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes,"							
	here				J	1		Χ
2	During the tax year, did the organization receive a distribution from, or was it the g	rantor	of, or transferor	to, a fo	reign tr	ust?		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 y							
4	Enter available pre-2018 NOL carryovers here \$ 3809172 . Do not in shown on Schedule A (Form 990-T). Don't reduce the NOL carryover show Part I, line 6.	nclude vn here	any post-2017 e by any dedu	7 NOL ction r	carryov eported	ver d on		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available pot the amounts shown below by any NOL claimed on any Schedule A, Part II, line							
	Business Activity Code		able post-2017					
	71	}	1047899			<u> </u>		
	53200	5	434215					
	52300	B	5416614					
		\$						
	Reserved for future use							
b	Reserved for future use					.		
Part								
	e any additional information. See instructions.							
	T							
	Under penalties of perjury, I declare that I have examined this return, including accompanying s belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on a						owledg	ge and
Sign	solid, in a way, contact, and complete solid and of propare (contact and tarpayer) to success on the		ianon or milon pro					
Here	Kimberly Robinson 107/14/2025 Assistant Co		- "		May the IF with the p			
	Signature of officer Date Signature of officer Date Signature of officer	ntroller	Payroll & Tax		(see instru			
	Print/Type preparer's name Preparer Standard		Date	Ch '		PTIN		
Paid	PAMEL A THIRDHER		07/14/2025	Check self-em	if nployed	P020	2205	5.0
Prep	Firm's name ADOVE ONLY ENTED DOTCEC LLC		0./11/2023	Firm's E		<u> </u>	0005	<i>.</i>
Use Only Firm's address PO BOX 245. DESOTO. TX 75123-0245 Phone no.(214) 868-32						282		

UNIVERSITY OF HOUSTON SYSTEM 74-6001399

Statements for Form 990-T:

Pre-2018 Net Operating Loss Statement:

Description	Amount
1. Pre-2018 NOLs Carried Forward from Prior Year	3809172
2. Pre-2018 NOLs Included in NOL Deduction	3809172
3. Total Pre-2018 NOLs Included on Schedule A	0
4. Total Pre-2018 NOLs Applied	3809172
5. Balance Remaining After Total Pre-2018 NOLs Applied	0
6. Pre-2018 NOLs Expiring This Year	0
7. Pre-2018 NOLs Carried Over to Subsequent Years	0

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

B Employer identification number

74-6001399

Department of the Treasury Internal Revenue Service

A Name of the organization

UNIVERSITY OF HOUSTON SYSTEM

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Open to Public Inspection for 501(c)(3) Organizations Only

Open to Public Inspection for

C Unrelated business activity code (see instructions) . 71						1 0	of	4
E Des	scribe the unrelated trade or business THEATER COMPANI	ES A	AND					
Par	Unrelated Trade or Business Income		(A) Income	(B) Expense	es		(C) Net	
1a	Gross receipts or sales 446227							
b	Less returns and allowances c Balance	1c	446227	7				
2	Cost of goods sold (Part III, line 8)	2						
3	Gross profit. Subtract line 2 from line 1c	3	446227	7			446	5227
4a	Capital gain net income (attach Schedule D (Form 1041 or							
	Form 1120)). See instructions	4a						
b	Net gain (loss) (Form 4797) (attach Form 4797). See							
	instructions	4b						
c	Capital loss deduction for trusts	4c						
5	Income (loss) from a partnership or an S corporation (attach statement)	5						
6	Rent income (Part IV)	6						
6 7	Unrelated debt-financed income (Part V)	7						
-	, ,							
8	Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8						
9	Investment income of section 501(c)(7), (9), or (17)							
	organizations (Part VII)	9						
10	Exploited exempt activity income (Part VIII)	10						
11	Advertising income (Part IX)	11						
12	Other income (see instructions; attach statement)	12						
13	Total. Combine lines 3 through 12	13	446227					5227
Par	Deductions Not Taken Elsewhere. See instruction directly connected with the unrelated business inco		limitations on de	eductions. Dec	ductio	ns mu	st be	
1	Compensation of officers, directors, and trustees (Part X) $$. $$.				1			
2	Salaries and wages				2		142	2139
3	Repairs and maintenance				3			
4	Bad debts				4			
5	Interest (attach statement). See instructions				5			
6	Taxes and licenses		1 1		6			
7	Depreciation (attach Form 4562). See instructions							
8	Less depreciation claimed in Part III and elsewhere on return $\ .$				8b			
9	Depletion				9			
10	Contributions to deferred compensation plans				10			
11	Employee benefit programs				11			
12	Excess exempt expenses (Part VIII)				12			
13	Excess readership costs (Part IX)				13			
14	Other deductions (attach statement)				14			2503
15	Total deductions. Add lines 1 through 14				15		464	1642
16	Unrelated business income before net operating loss deduction column (C)				16		-18	3415
17	Deduction for net operating loss. See instructions				17			
18	Unrelated business taxable income. Subtract line 17 from lin				18		-18	3415

ъ.					9
Part	III Cost of Goods Sold Enter me				
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6.	Enter here and in Pai	rt I, line 2	8	
9	Do the rules of section 263A (with respect to prope				on? 🗌 Yes 🗌 No
Part	IV Rent Income (From Real Property an	d Personal Prope	rty Leased With	Real Property)	
1	Description of property (property street address,	city, state, ZIP code). Check if a dual-us	se. See instruction	IS.
	A 🗆				
	D \square				
	<u> </u>				
	D 🗌				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
u	rent for personal property is more than 10%				
	but not more than 50%)				
_	· · · · · · · · · · · · · · · · · · ·				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income) .				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
	•	ļ	· ·		
3	Total rents received or accrued. Add line 2c, colum	ns A through D. Enter	here and on Part I, I	ine 6, column (A)	
	5				
4	Deductions directly connected with the income				
	in lines 2a and 2b (attach statement)				
5	Total deductions. Add line 4, columns A through	n D. Enter here and o	n Part I line 6 colu	ımn (B)	
				(=)	
Par	Unrelated Debt-Financed Income (se				
1	Description of debt-financed property (street add	dress, city, state, ZIP	code). Check if a d	lual-use. See instr	uctions.
	A 🗌	-	•		
	B □				
	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		%	%		90
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A throu	igh D). Enter here an	d on Part I line 7	column (A)	
9	,	-9.1 D _J . Littor Here all			
9	Allocable deductions. Multiply line 3c by line 6				
10	•	A through D. Catair b	ore and on Dort Live	7 oolumn (D)	
10	Total allocable deductions. Add line 9, columns	•			
11	Total dividends — received deductions include	ea in line 10			

74-6001399

Page 3 Schedule A (Form 990-T) 2023

Par	Part VI Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)							
	Exempt Controlled Organizations							
	Name of controlled organization	2. Employer identification number	3. Net unrelations income (los (see instruction)	s)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income		Deductions directly connected with come in column 5
(1)								
(2)								
(3)								
(4)								
			Nonexemp	t Cor	ntrolled Organization	ns		
	7. Taxable income	inco	t unrelated me (loss) estructions)		. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)								
(2)								
(3)								
(4)								
Add columns 5 and 10. Enter here and on Part I, line 8, column (A). Totals						r here and on Part I,		
Par	Investment Inc	ome of a Sec	ction 501(c)(7	7), (9), or (17) Organiza	ation (see instructions)		
	1. Description of income	2. Amou	int of income		3. Deductions lirectly connected attach statement)	4. Set-asides (attach statement)		Total deductions and set-asides d columns 3 and 4)
(1)								
(2)								
(3)								
(4)								
Tota	Add amounts in column 2. Enter here and on Part I, line 9, column (A).				Ente	amounts in column 5. or here and on Part I, ne 9, column (B).		
	-	pt Activity I	ncome. Othe	r Th	an Advertising Inc	come (see instructions	3)	
1	Description of exploited		-,			(
2	· · ·		n trade or busir	ness.	Enter here and on P	art I, line 10, column (A)	2	
3								
4						4		
5	Gross income from acti						5	
6	Expenses attributable t	•					6	
7						than the amount on line		
	4. Enter here and on Part II, line 12						7	

Part	IX Advertising Income				
1	Name(s) of periodical(s). Check box if reporting	ng two or more periodic	als on a consolid	dated basis.	
	A 🗌				
	В				
	C □				
	D 🗌				
Enter	amounts for each periodical listed above in the	corresponding column	٦.		
		Α	В	С	D
2	Gross advertising income				
а	Add columns A through D. Enter here and on	Part I, line 11, column	(A)		
3	Direct advertising costs by periodical				
а	Add columns A through D. Enter here and on	Part I, line 11, column	(B)		·
4	Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gair complete lines 5 through 8. For any column line 4 showing a loss or zero, do not comple lines 5 through 7, and enter -0- on line 8	in, in te			
5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less that line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter -0-	ss			
8	Excess readership costs allowed as deduction. For each column showing a gain cline 4, enter the lesser of line 4 or line 7	on			
а	Add line 8, columns A through D. Enter the Part II, line 13				
Par	X Compensation of Officers, Director	ors. and Trustees (se	ee instructions)		·
	1. Name	2. Title		3. Percentage of time devoted to business	Compensation attributable to unrelated business
(1)				%	
(2)				%	
(3)				%	
(4)				%	
Tota	I. Enter here and on Part II, line 1				
Part	XI Supplemental Information (see ins	tructions)			

UNIVERSITY OF HOUSTON SYSTEM 74-6001399

Statements for Form 990-T Schedule A: Sequence 1 of 4 Activity: 71 - THEATER COMPANIES AND DINNER THEATERS

Other Deductions Statement:

Description	Amount
ADVERTISING	40908
ATHLETIC SPECIAL EVENT EXPENSES	98092
COMMUNICATION AND POSTAGE	624
ADMINISTRATIVE EXPENSES	3924
OPERATING EXPENSES	163551
PROFESSIONAL SERVICES	2020
SUPPLIES	12329
TRAVEL	1055
Total:	322503

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

B Employer identification number

74-6001399

Department of the Treasury Internal Revenue Service

A Name of the organization

UNIVERSITY OF HOUSTON SYSTEM

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Open to Public Inspection for 501(c)(3) Organizations Only

Open to Public Inspection for

11 Advertising income (Part IX) 11 12 Other income (see instructions; attach statement) 12 13 Total. Combine lines 3 through 12 13 1727750 Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income. 1 Compensation of officers, directors, and trustees (Part X) 1 2 Salaries and wages 2 268895 3 Repairs and maintenance 3 81818 4 Bad debts 4 4 5 Interest (attach statement). See instructions 5 40597 6 Taxes and licenses 6 7 7 Depreciation (attach Form 4562). See instructions 7 458068 8 Less depreciation claimed in Part III and elsewhere on return 8a 8b 458068 9 Depletion 9 10 Contributions to deferred compensation plans 10 10 11 56780 12 Excess exempt expenses (Part VIII) 12 13 Excess readership costs (Part IX) 13	C Uni	related business activity code (see instructions) . 53200			D Sequence:		2	of	4
1	E Des	scribe the unrelated trade or business RENTAL AND LEAS	ING	SE					
b Less returns and allowances 2 Cost of goods sold (Part III, line 8). 3 Gross profit. Subtract line 2 from line 1c	Par	Unrelated Trade or Business Income		(A) Income	(B) Expense	es		(C) Net	
2 Cost of goods sold (Part III, line 8)	1a	Gross receipts or sales 1727750							
2 Cost of goods sold (Part III, line 8)	b	Less returns and allowances c Balance	1c	1727750)				
4a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions 4a b Net gain (loss) (Form 4797) (attach Form 4797). See instructions 4b c Capital loss deduction for trusts 4c 5 Income (loss) from a partnership or an S corporation (attach statement) 5 6 Rent income (Part IV) 6 7 7 Unrelated debt-financed income (Part V) 7 8 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 9 9 9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) 10 4a 11 Advertising income (Part IX) 11 12 12 Other income (see instructions; attach statement) 12 12 13 Total. Combine lines 3 through 12 13 1727750 Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income. 1 Compensation of officers, directors, and trustees (Part X) 1 2 Salaries and wages 2 2.68895 3 Repairs and maintenance 3 3.81818 4 Bad debts 4	2	Cost of goods sold (Part III, line 8)	2						
Form 1120]). See instructions 4a	3	Gross profit. Subtract line 2 from line 1c	3	1727750)			1727	7750
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions 4b c Capital loss deduction for trusts 4c 5 Income (loss) from a partnership or an S corporation (attach statement) 5 6 Rent income (Part IV) 6 7 Unrelated debt-financed income (Part V) 7 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 8 9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) 9 10 Exploited exempt activity income (Part VII) 10 11 Advertising income (Part IX) 11 12 Other income (see instructions; attach statement) 12 13 Total. Combine lines 3 through 12 13 1727750 Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income. 1 2 Salaries and wages 2 2 68895 3 Repairs and maintenance 3 8 1818 4 Bad debts 4 4 5 Interest (attach statement	4a								
Instructions 4b 4c		Form 1120)). See instructions	4a						
c Capital loss deduction for trusts 4c 5 Income (loss) from a partnership or an S corporation (attach statement) 5 6 Rent income (Part IV) 6 7 Unrelated debt-financed income (Part V) 7 8 Interest, annuities, royalties, and rents from a controlled organization (Part VI) 8 9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII) 9 10 Exploited exempt activity income (Part VIII) 10 11 Advertising income (Part IX) 11 12 Other income (see instructions; attach statement) 12 12 Total. Combine lines 3 through 12 13 1727750 1727750 Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income. 1 2 2 Salaries and wages 2 2 268895 3 Repairs and maintenance 3 8 1818 4 Bad debts 4 4 5 Interest (attach statement). See instructions 5 4 0597 6 Taxes and licenses 7 458068 8 Less depreciation claimed in Part III and elsewhere on return 8a 8b 4 58068	b	Net gain (loss) (Form 4797) (attach Form 4797). See							
1		instructions	4b						
Statement	С	Capital loss deduction for trusts	4c						
6 Rent income (Part IV) 6 7 7 Unrelated debt-financed income (Part V) 7	5	Income (loss) from a partnership or an S corporation (attach							
7		statement)	5						
Interest, annuities, royalties, and rents from a controlled organization (Part VI) 8	6	Rent income (Part IV)	6						
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 13 1727750 17	7	Unrelated debt-financed income (Part V)	7						
9	8	Interest, annuities, royalties, and rents from a controlled							
organizations (Part VII) 10 Exploited exempt activity income (Part VIII) 11 Advertising income (Part IX) 12 Other income (see instructions; attach statement) 13 Total. Combine lines 3 through 12 14 1 1 2		organization (Part VI)	8						
10	9	Investment income of section 501(c)(7), (9), or (17)							
11 Advertising income (Part IX) 11 Determination (Part IX) 12 Determination (Part IX) 12 Determination (Part IX) 12 Determination (Part IX) 12 Determination (Part IX) 13 1727750 1727750 Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income. 1 Compensation of officers, directors, and trustees (Part X) 1 1 2 Salaries and wages 2 2 268895 3 Repairs and maintenance 3 81818 4 Bad debts 4 5 5 Interest (attach statement). See instructions 5 40597 6 Taxes and licenses 6 7 7 Depreciation (attach Form 4562). See instructions 7 458068 8 8 Less depreciation claimed in Part III and elsewhere on return 8a 8b 458068 9 Depletion 9 9 10 Contributions to deferred compensation plans 10 11 56780 12 Excess exempt expenses (Part IX) 12 13 14 740321 15 Total deductions, Add lines 1 through 14 15 1646479 16 81271 16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)		organizations (Part VII)	9						
12	10	Exploited exempt activity income (Part VIII)	10						
13	11	Advertising income (Part IX)	11						
Part II Deductions Not Taken Elsewhere. See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income. 1 Compensation of officers, directors, and trustees (Part X) 1 2 Salaries and wages 2 268895 3 Repairs and maintenance 3 81818 4 Bad debts 4 4 5 Interest (attach statement). See instructions 5 40597 6 Taxes and licenses 6 7 7 Depreciation (attach Form 4562). See instructions 7 458068 8 Less depreciation claimed in Part III and elsewhere on return 8a 8b 458068 9 Depletion 9 9 10 Contributions to deferred compensation plans 10 11 56780 12 Excess exempt expenses (Part VIII) 12 12 13 Excess readership costs (Part IX) 13 14 740321 15 Total deductions. Add lines 1 through 14 15 1646479 16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	12	Other income (see instructions; attach statement)	12						
directly connected with the unrelated business income. 1	13	Total. Combine lines 3 through 12	13	1727750)			1727	7750
2 Salaries and wages 2 268895 3 Repairs and maintenance 3 81818 4 Bad debts 4 4 5 Interest (attach statement). See instructions 5 40597 6 Taxes and licenses 6 6 7 Depreciation (attach Form 4562). See instructions 7 458068 8 Less depreciation claimed in Part III and elsewhere on return 8a 8b 458068 9 Depletion 9 10 Contributions to deferred compensation plans 10 11 Employee benefit programs 11 56780 12 Excess exempt expenses (Part VIII) 12 13 Excess readership costs (Part IX) 13 14 Other deductions (attach statement) 14 740321 15 Total deductions. Add lines 1 through 14 15 1646479 16 81271 17 Deduction for net operating loss. See instructions 17	Par			limitations on de	eductions. Dec	luctio	ns m	ust be	
3 Repairs and maintenance 3 81818 4 Bad debts 4 5 Interest (attach statement). See instructions 5 40597 6 Taxes and licenses 6 7 Depreciation (attach Form 4562). See instructions 7 458068 8 Less depreciation claimed in Part III and elsewhere on return 8a 8b 458068 9 Depletion 9 9 10 Contributions to deferred compensation plans 10 10 11 Employee benefit programs 11 56780 12 Excess exempt expenses (Part VIII) 12 13 Excess readership costs (Part IX) 13 14 740321 15 Total deductions. Add lines 1 through 14 15 1646479 16 B1271 17 Deduction for net operating loss. See instructions 17	1	Compensation of officers, directors, and trustees (Part X)				1			
3 Repairs and maintenance 3 81818 4 Bad debts 4 5 Interest (attach statement). See instructions 5 40597 6 Taxes and licenses 6 7 Depreciation (attach Form 4562). See instructions 7 458068 8 Less depreciation claimed in Part III and elsewhere on return 8a 8b 458068 9 Depletion 9 9 10 Contributions to deferred compensation plans 10 10 11 Employee benefit programs 11 56780 12 Excess exempt expenses (Part VIII) 12 13 Excess readership costs (Part IX) 13 14 740321 15 Total deductions. Add lines 1 through 14 15 1646479 16 B1271 17 Deduction for net operating loss. See instructions 17	2	Salaries and wages				2		268	3895
5 Interest (attach statement). See instructions 5 40597 6 Taxes and licenses 6 7 Depreciation (attach Form 4562). See instructions 7 458068 8 Less depreciation claimed in Part III and elsewhere on return 8a 8b 458068 9 Depletion 9 10 Contributions to deferred compensation plans 10 11 Employee benefit programs 10 12 Excess exempt expenses (Part VIII) 12 13 Excess readership costs (Part IX) 13 14 Other deductions (attach statement) 14 740321 15 Total deductions. Add lines 1 through 14 15 1646479 16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) 16 81271 17 Deduction for net operating loss. See instructions 17	3					3		8.7	1818
6 Taxes and licenses 6 7 Depreciation (attach Form 4562). See instructions 7 458068 8 Less depreciation claimed in Part III and elsewhere on return 8a 8b 458068 9 Depletion 9 10 Contributions to deferred compensation plans 10 11 Employee benefit programs 11 56780 12 Excess exempt expenses (Part VIII) 12 13 Excess readership costs (Part IX) 13 14 Other deductions (attach statement) 14 740321 15 Total deductions. Add lines 1 through 14 15 1646479 16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) 16 81271 17 Deduction for net operating loss. See instructions 17	4	Bad debts				4			
7 Depreciation (attach Form 4562). See instructions 7 458068 8 Less depreciation claimed in Part III and elsewhere on return 8a 8b 458068 9 Depletion 9 10 Contributions to deferred compensation plans 10 11 Employee benefit programs 11 56780 12 Excess exempt expenses (Part VIII) 12 13 Excess readership costs (Part IX) 13 14 Other deductions (attach statement) 14 740321 15 Total deductions. Add lines 1 through 14 15 1646479 16 81271 17 Deduction for net operating loss. See instructions 17	5	Interest (attach statement). See instructions				5		4(0597
7 Depreciation (attach Form 4562). See instructions 7 458068 8 Less depreciation claimed in Part III and elsewhere on return 8a 8b 458068 9 Depletion 9 10 Contributions to deferred compensation plans 10 11 Employee benefit programs 11 56780 12 Excess exempt expenses (Part VIII) 12 13 Excess readership costs (Part IX) 13 14 Other deductions (attach statement) 14 740321 15 Total deductions. Add lines 1 through 14 15 1646479 16 81271 17 Deduction for net operating loss. See instructions 17	6	Taxes and licenses				6			
9 Depletion . 9 10 Contributions to deferred compensation plans . 10 11 Employee benefit programs . 11 56780 12 Excess exempt expenses (Part VIII) . 12 13 Excess readership costs (Part IX) . 13 14 Other deductions (attach statement) . 14 740321 15 Total deductions. Add lines 1 through 14 . 15 1646479 16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) . 16 81271 17 Deduction for net operating loss. See instructions . 17	7								
10 Contributions to deferred compensation plans 10 11 Employee benefit programs	8	Less depreciation claimed in Part III and elsewhere on return .		8a		8b		458	3068
10 Contributions to deferred compensation plans 10 11 Employee benefit programs 11 56780 12 Excess exempt expenses (Part VIII) 12 13 Excess readership costs (Part IX) 13 14 Other deductions (attach statement) 14 740321 15 Total deductions. Add lines 1 through 14 15 1646479 16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) 16 81271 17 Deduction for net operating loss. See instructions 17	9	Depletion				9			
12 Excess exempt expenses (Part VIII) 12 13 Excess readership costs (Part IX) 13 14 Other deductions (attach statement) 14 740321 15 Total deductions. Add lines 1 through 14 15 1646479 16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) 16 81271 17 Deduction for net operating loss. See instructions 17	10	Contributions to deferred compensation plans				10			
13 Excess readership costs (Part IX) 13 14 Other deductions (attach statement) 14 740321 15 Total deductions. Add lines 1 through 14 15 1646479 16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) 16 81271 17 Deduction for net operating loss. See instructions 17	11	Employee benefit programs				11		56	5780
14 Other deductions (attach statement) 14 740321 15 Total deductions. Add lines 1 through 14 15 15 1646479 16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C) 16 81271 17 Deduction for net operating loss. See instructions 17	12	Excess exempt expenses (Part VIII)				12			
Total deductions. Add lines 1 through 14	13	Excess readership costs (Part IX)				13			
Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	14	Other deductions (attach statement)				14		740	321
column (C)	15	Total deductions. Add lines 1 through 14				15		1646	5479
17 Deduction for net operating loss. See instructions	16					16		Ω.	1271
	17					_			/ -
						-			1271

ъ.					9
Part	III Cost of Goods Sold Enter me				
1	Inventory at beginning of year			1	
2	Purchases			2	
3	Cost of labor			3	
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6.	Enter here and in Pai	rt I, line 2	8	
9	Do the rules of section 263A (with respect to prope				on? 🗌 Yes 🗌 No
Part	IV Rent Income (From Real Property an	d Personal Prope	rty Leased With	Real Property)	
1	Description of property (property street address,	city, state, ZIP code). Check if a dual-us	se. See instruction	IS.
	A 🗆				
	D \square				
	<u> </u>				
	D 🗌				
		Α	В	С	D
2	Rent received or accrued				
а	From personal property (if the percentage of				
u	rent for personal property is more than 10%				
	but not more than 50%)				
_	· · · · · · · · · · · · · · · · · · ·				
b	From real and personal property (if the				
	percentage of rent for personal property exceeds				
	50% or if the rent is based on profit or income) .				
С	Total rents received or accrued by property.				
	Add lines 2a and 2b, columns A through D				
	•	ļ	Į.		_
3	Total rents received or accrued. Add line 2c, colum	ns A through D. Enter	here and on Part I, I	ine 6, column (A)	
	5				
4	Deductions directly connected with the income				
	in lines 2a and 2b (attach statement)				
5	Total deductions. Add line 4, columns A through	n D. Enter here and o	n Part I line 6 colu	ımn (B)	
				(=)	
Par	Unrelated Debt-Financed Income (se				
1	Description of debt-financed property (street add	dress, city, state, ZIP	code). Check if a d	lual-use. See instr	uctions.
	A 🗌	-	•		
	B □				
	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		%	%		90
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A throu	igh D). Enter here an	d on Part I line 7	column (A)	
9	,	-9.1 D _J . Littor Here all			
9	Allocable deductions. Multiply line 3c by line 6				
10	•	A through D. Catair b	ore and on Dort Live	7 oolumn (D)	
10	Total allocable deductions. Add line 9, columns	•			
11	Total dividends — received deductions include	ea in line 10			

6

7

UNIVERSITY OF HOUSTON SYSTEM 74-6001399 Schedule A (Form 990-T) 2023 Page 3 Part VI Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions) **Exempt Controlled Organizations** 2. Employer 3. Net unrelated 4. Total of specified 5. Part of column 4 6. Deductions directly 1. Name of controlled identification income (loss) payments made connected with organization that is included in the number (see instructions) controlling organization's income in column 5 gross income (1) (2)(3)(4) Nonexempt Controlled Organizations 10. Part of column 9 11. Deductions directly 7. Taxable income 8. Net unrelated 9. Total of specified income (loss) payments made that is included in the connected with (see instructions) controlling organization's income in column 10 gross income (1) (2) (3) (4) Add columns 5 and 10. Add columns 6 and 11. Enter here and on Part I, Enter here and on Part I. line 8, column (A). line 8, column (B). Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) 1. Description of income 2. Amount of income 3. Deductions 4. Set-asides 5. Total deductions directly connected (attach statement) and set-asides (attach statement) (add columns 3 and 4) (1) (2)(3)(4) Add amounts in column 2. Add amounts in column 5. Enter here and on Part I, Enter here and on Part I, line 9, column (A). line 9, column (B). Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1 Description of exploited activity: 2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) 2 3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, 3 4 Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete 4 5 Gross income from activity that is not unrelated business income 5

Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line

6

Part	IX Advertising Income					
1	Name(s) of periodical(s). Check box if repo	orting tw	o or more periodic	als on a consolid	dated basis.	
	A 🗆	Ü	·			
	В 🗌					
	C 🗆					
	D [
Enter a	amounts for each periodical listed above in	the con	esponding columr	l.		
			Α	В	С	D
2	Gross advertising income					
а	Add columns A through D. Enter here and	l on Part	I, line 11, column	(A)		
3	Direct advertising costs by periodical .					
а	Add columns A through D. Enter here and	l on Part	I, line 11, column	(B)		·
4	Advertising gain (loss). Subtract line 3 from 2. For any column in line 4 showing a complete lines 5 through 8. For any column line 4 showing a loss or zero, do not complete 5 through 7, and enter -0- on line 8	gain, mn in nplete				
5	Readership costs					
6	Circulation income	_				
7	Excess readership costs. If line 6 is less line 5, subtract line 6 from line 5. If line 5 is than line 6, enter -0	is less				
8	Excess readership costs allowed a deduction. For each column showing a galine 4, enter the lesser of line 4 or line 7.	ain on				
а	Add line 8, columns A through D. Enter	r the gre	eater of the line 8	a columns total	or -0- here and	on
	Part II, line 13					
Par	X Compensation of Officers, Dire	ectors,	and Trustees (se	ee instructions)		
	1. Name		2. Title		3. Percentage of time devoted to business	 Compensation attributable to unrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
Tota	I. Enter here and on Part II, line 1					
Part	XI Supplemental Information (see	instruc	tions)			

UNIVERSITY OF HOUSTON SYSTEM 74-6001399

Statements for Form 990-T Schedule A: Sequence 2 of 4 Activity: 53200 - RENTAL AND LEASING SERVICES

Other Deductions Statement:

Description	Amount
ADVERTISING	1775
MEALS	127
TRAVEL	6398
SUPPLIES	7903
OPERATING EXPENSES	497360
ADMINISTATIVE EXPENSES	75755
PROFESSIONAL SERVICES	151003
Total:	740321

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

B Employer identification number

Department of the Treasury Internal Revenue Service

A Name of the organization

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Open to Public Inspection to 501(c)(3) Organizations Only

UN	IVERSITY OF HOUSTON SYSTEM	74-6001399					
C Ur	Unrelated business activity code (see instructions) . 52300 D Sequence:						4
E De	scribe the unrelated trade or business QUALIFIED PARTN	IERSI	HIP				
Pa			(A) Income	(B) Expense	es	(C) Net	
1a	Gross receipts or sales						
b	Less returns and allowances c Balance	1c					
2	Cost of goods sold (Part III, line 8)	2					
3	Gross profit. Subtract line 2 from line 1c	3					
4a							
	Form 1120)). See instructions	4a	226944	1		226	5944
b	Net gain (loss) (Form 4797) (attach Form 4797). See						
	instructions	4b	208408	3		208	3408
С	Capital loss deduction for trusts	4c					
5	Income (loss) from a partnership or an S corporation (attach						
	statement)	5	3591662	2		3591	L662
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)						
3	organizations (Part VII)	9					
10	Exploited exempt activity income (Part VIII)	10					
11	Advertising income (Part IX)	11					
12	Other income (see instructions; attach statement)	12					
13	Total. Combine lines 3 through 12	13	4027014	1		4027	7014
	Deductions Not Taken Elsewhere. See instruction directly connected with the unrelated business income		limitations on de	eductions. Dec	duction	s must be	
1	Compensation of officers, directors, and trustees (Part X)				1		
2	Salaries and wages				2		
3	Repairs and maintenance				3		
4	Bad debts				4		
5	Interest (attach statement). See instructions				5		
6	Taxes and licenses				6		
7	Depreciation (attach Form 4562). See instructions		7				
8	Less depreciation claimed in Part III and elsewhere on return .				8b		
9	Depletion				9		
10	Contributions to deferred compensation plans				10		
11	Employee benefit programs				11		
12	Excess exempt expenses (Part VIII)				12		
13	Excess readership costs (Part IX)				13		
14	Other deductions (attach statement)				14		
15	Total deductions. Add lines 1 through 14				15		
16	Unrelated business income before net operating loss deduction	n. Sul	otract line 15 from	Part I, line 13,			
	column (C)				16	4027	7014
17	Deduction for net operating loss. See instructions				17	302	2841
18	Unrelated business taxable income. Subtract line 17 from lin	ne 16			18	3724	1173

ъ.					9			
Part	III Cost of Goods Sold Enter me							
1	Inventory at beginning of year			1				
2	Purchases			2				
3	Cost of labor							
4	Additional section 263A costs (attach statement)							
5	Other costs (attach statement)							
6	Total. Add lines 1 through 5							
7	Inventory at end of year							
8	Cost of goods sold. Subtract line 7 from line 6.	Enter here and in Pai	rt I, line 2	8				
9	Do the rules of section 263A (with respect to prope				on? 🗌 Yes 🗌 No			
Part	IV Rent Income (From Real Property an	d Personal Prope	rty Leased With	Real Property)				
1	Description of property (property street address,	city, state, ZIP code). Check if a dual-us	se. See instruction	IS.			
	A 🗆							
	D \square							
	<u> </u>							
	D 🗌							
		Α	В	С	D			
2	Rent received or accrued							
а	From personal property (if the percentage of							
u	rent for personal property is more than 10%							
	but not more than 50%)							
_	· · · · · · · · · · · · · · · · · · ·							
b	From real and personal property (if the							
	percentage of rent for personal property exceeds							
	50% or if the rent is based on profit or income) .							
С	Total rents received or accrued by property.							
	Add lines 2a and 2b, columns A through D							
	•	ļ	Į.					
3	Total rents received or accrued. Add line 2c, colum	ns A through D. Enter	here and on Part I, I	ine 6, column (A)				
	5							
4	Deductions directly connected with the income							
	in lines 2a and 2b (attach statement)							
5	Total deductions. Add line 4, columns A through	n D. Enter here and o	n Part I line 6 colu	ımn (B)				
				(=)				
Par	Unrelated Debt-Financed Income (se							
1	Description of debt-financed property (street add	dress, city, state, ZIP	code). Check if a d	lual-use. See instr	uctions.			
	A 🗌	-	•					
	B □							
	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		%	%		90			
7	Gross income reportable. Multiply line 2 by line 6							
8	Total gross income (add line 7, columns A throu	igh D). Enter here an	d on Part I line 7	column (A)				
9	,	-9.1 D _J . Littor Here all						
9	Allocable deductions. Multiply line 3c by line 6							
10	•	A through D. Catair b	ore and on Dort Live	7 oolumn (D)				
10	Total allocable deductions. Add line 9, columns	•						
11	Total dividends — received deductions include	ea in line 10						

Page **3**

Par	t VI Interest, Annuit	ies, Royaltie	s, and Rents	s Fro	m Controlled Org	ganizations (see instru	ctions)
	Name of controlled organization	2. Employer identification number			Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)							
(2)							
(3)							
(4)							
			Nonexemp	t Cor	ntrolled Organization	ns .	
	income		unrelated me (loss) structions)	ne (loss) payments made		10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)							
(2)							
(3)							
(4)							
Tota	ıls					Add columns 5 and 10. Enter here and on Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on Part I, line 8, column (B).
Part	VII Investment Inco	ome of a Sec	ction 501(c)(7	7), (9	, or (17) Organiza	ation (see instructions)	
	1. Description of income	2. Amou	nt of income		3. Deductions lirectly connected attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)							
(2)							
(3)							
(4)							
Tota	do.	Enter here	nts in column 2. and on Part I, column (A).				Add amounts in column 5. Enter here and on Part I, line 9, column (B).
	VIII Exploited Exem	nt Activity l	ncome Othe	r Th	an Advertising Inc	come (see instructions	<u> </u>
1	Description of exploited	·	icome, ouic		an Advertising in	come (see instructions	
2	Gross unrelated busines		n trade or busin	220	Enter here and on P	art L line 10, column (A)	2
3						Enter here and on Part I,	
	line 10, column (B)						3
4	Net income (loss) from lines 5 through 7					e 2. If a gain, complete	4
5	Gross income from acti	vity that is not	unrelated bus	iness	income		5
6	Expenses attributable to	o income ente	red on line 5				6
7						than the amount on line	
	4. Enter here and on Pa		7				

T al	IX Advertising Income					
1	Name(s) of periodical(s). Check box if re	eporting two	or more periodic	als on a consolid	ated basis.	
	A 🗌					
	В 🗌					
	C 🗆					
	D 🗌					
Enter	amounts for each periodical listed above	in the corres	ponding column	1.		
			Α	В	С	D
2	Gross advertising income					
а	Add columns A through D. Enter here a	nd on Part I,	line 11, column	(A)		
3	Direct advertising costs by periodical					
а	Add columns A through D. Enter here a	nd on Part I,	line 11, column	(B)		·
4	Advertising gain (loss). Subtract line 3 ft 2. For any column in line 4 showing complete lines 5 through 8. For any co- line 4 showing a loss or zero, do not co- lines 5 through 7, and enter -0- on line 8	a gain, olumn in omplete				
5	Readership costs					
6	Circulation income					
7	Excess readership costs. If line 6 is le line 5, subtract line 6 from line 5. If line than line 6, enter -0-	5 is less				
8	Excess readership costs allowed deduction. For each column showing a line 4, enter the lesser of line 4 or line 7	gain on				
а	Add line 8, columns A through D. En Part II, line 13					
Par	t X Compensation of Officers, Di	rectors, an	nd Trustees (se	ee instructions)		<u> </u>
	1. Name	,	2. Title		3. Percentage of time devoted to business	Compensation attributable to unrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
Tc+-						
Par	al. Enter here and on Part II, line 1 . XI Supplemental Information (see	e instructio	ns)			
Par	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . XI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . XI Supplemental Information (se	ee instructio	ns)			
Par	al. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . XI Supplemental Information (se	ee instructio	ns)			
Par	al. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Pari	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	Supplemental Information (se	ee instructio	ns)			

Statements for Form 990-T Schedule A: Sequence 3 of 4 Activity: 52300 - QUALIFIED PARTNERSHIP INVESTMENTS

Other Income Statement:

Description	Amount
400 CAPITAL CREDIT OPP 26-4091106	479062
ADVENT INTERNATIONAL 81-1150648	-3718
ADVENT INTERNATIONAL 98-1635338	-42724
ADVENT INTERNATIONAL 98-1476221	140810
AI GPE X 98-1703817	-2471
ASF VIII B LP 98-1439310	-50757
BLACKSTONE REAL ESTATE 98-1273213	-9893
BLACKSTONE REAL ESTATE 98-1294553	-66952
BLACKSTONE REAL ESTATE 47-2277242	-340812
BLACKSTONE REAL ESTATE 84-4937908	-11195
BLACKSTONE REAL ESTATE 84-4930298	-252
BLACKSTONE REAL ESTATE 84-4938147	-2061
BLACKSTONE REAL ESTATE 84-4952241	-82492
BLACKSTONE REAL ESTATE 83-2211767	-532
BREP EUROPE VI 98-1535615	3874
BREP EUROPE VI 98-1482125	-64179
BLACKSTONE REAL ESTATE 98-1535497	61
BLACKSTONE REAL ESTATE 98-1238563	9
BLACKSTONE REAL ESTATE 98-1238556	-56991
BLACKSTONE REAL ESTATE 47-3716505	-141695
COMMONFUND CAPTIAL 20-8306306	8858
COMMONFUND CAPITAL 20-8306306	-6
COMMONFUND CAPITAL 11-3814030	-99
DENHAM COMMODITY 45-3212336 ENCAP ENERGY CAPITAL 47-2732735	-84
ENCAP ENERGY CAPITAL 47-2732735 ENCAP ENERGY CAPITAL 81-4648210	1426369 1105545
ENCAP FLATROCK MIDSTREAM 82-2890021	425344
ENCAP FLATROCK MIDSTREAM 62-2690021 ENCAP FLATROCK MIDSTREAM 46-4943834	1002677
ENERGY SPECTRUM 35-2637262	-19995
FRANCISCO PARTNERS 98-1520367	-39730
FRANCISCO PARTNERS 98-1384738	1744
GCM GROSVENOR ADVANCE 84-2001566	-72579
GREAT HILL EQUITY 81-5105538	-41397
GREAT HILL EQUITY 84-1939008	-11151
GREAT HILL EQUITY 98-1775882	-3132
KIA X ARTIC 85-4334439	-2054
KIA X BREATHE 85-2765788	57141
KIA X HEIGHTS 83-3381101	-25797
KIA X IFS 84-3063451	456970
KIA X SAFFRON 87-2858726	-18891
KIA X WATCHTOWER 84-1961177	-40864
KIA X ARMADA 93-2979134	-59239
KLCP DOMESTIC FUND 86-3366452	58606
NEWLIN REALITY 20-5785327	745
PENZANCE DC REAL ESTATE 82-2247468	22448
PENZANCE DC REAL ESTATE 84-4285194	-449
TRACE ENERGY RESOURCES 47-3010122	-672228
TRIDENT VII LP 98-1321105	740
TRIDENT VIII LP 98-1455374	7195
TRUEBRIDGE KAUFFMAN 80-0917098	1628

LCP VIII LP 47-2290521

LEXINGTON CAPITAL 46-3751020

Statements for Form 990-T Schedule A: Sequence 3 of 4 Activity: 52300 - QUALIFIED PARTNERSHIP INVESTMENTS

<pre>Income(loss) from Partnerships and S Corporations Statement: Name of Partnership or S Corporation</pre>	Gain/Loss
TRUEBRIDGE KAUFFMAN 47-4398785	6403
TRUEBRIDGE GE CAPITAL 82-2022562	1197
TRUEBRIDGE GE 84-1921100	2242
TRUEBRIDGE GE CAPITAL 86-2897191	9353
WINDROSE HEALTH 87-3421719	13616
ENERVEST XIV LP 47-2575103	47179
INSIGHT EQUITY 464143731	224942
LEXINGTON CAPITAL 82-4652122	-18673
LEXINGTON CAPITAL 98-1455224	-588

Total:			
Post-2017 Net Operation Loss Deduction Statement:			
Post-2017 Net Operation Loss Carried Forward from Prior Year	5416614		
Post-2017 Net Operating Loss Deduction Included on Schedule A	302841		
Post-2017 Net Operation Loss Carried Over to Subsequent Years	5113773		

-5095

-4321

SCHEDULE A (Form 990-T)

Unrelated Business Taxable Income From an Unrelated Trade or Business

OMB No. 1545-0047

B Employer identification number

74-6001399

Department of the Treasury Internal Revenue Service

A Name of the organization

UNIVERSITY OF HOUSTON SYSTEM

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Open to Public Inspection to 501(c)(3) Organizations Only

C Un	related business activity code (see instructions) . 72100			D Sequence	ce:	4	of	4
E De	scribe the unrelated trade or business ACCOMODATION AN	ID FO	OOD					
Par	Unrelated Trade or Business Income		(A) Income	(B) Exp	enses		(C) Ne	t
1a	Gross receipts or sales 45520							
b	Less returns and allowances c Balance	1c	4552	0				
2	Cost of goods sold (Part III, line 8)	2						
3	Gross profit. Subtract line 2 from line 1c	3	4552	0				15520
4a	Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions	4a						
b	Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b						
С	Capital loss deduction for trusts	4c						
5	Income (loss) from a partnership or an S corporation (attach							
	statement)	5						
6	Rent income (Part IV)	6						
7	Unrelated debt-financed income (Part V)	7						
8	Interest, annuities, royalties, and rents from a controlled							
	organization (Part VI)	8						
9	Investment income of section 501(c)(7), (9), or (17)							
	organizations (Part VII)	9						
10	Exploited exempt activity income (Part VIII)	10						
11	Advertising income (Part IX)	11						
12	Other income (see instructions; attach statement)	12						
13	Total. Combine lines 3 through 12	13	4552	0			4	15520
Par	Deductions Not Taken Elsewhere. See instruction directly connected with the unrelated business inco		limitations on de	eductions. [Deductio	ns r	nust be)
1	Compensation of officers, directors, and trustees (Part X)				1			
2	Salaries and wages				2			17116
3	Repairs and maintenance							2683
4	Bad debts				4			
5	Interest (attach statement). See instructions				5			
6	Taxes and licenses				6			
7	Depreciation (attach Form 4562). See instructions							
8	Less depreciation claimed in Part III and elsewhere on return .		8a		8b			
9	Depletion				9			
10	Contributions to deferred compensation plans				10			
11	Employee benefit programs				11			5101
12	Excess exempt expenses (Part VIII)				12			
13	Excess readership costs (Part IX)				13			
14	Other deductions (attach statement)				14			L6892
15	Total deductions. Add lines 1 through 14				15		4	1792
16	Unrelated business income before net operating loss deductio	n. Sul	otract line 15 from	Part I, line 1	3,			
	column (C)							3728
17	Deduction for net operating loss. See instructions				17			
18	Unrelated business taxable income. Subtract line 17 from lin	ne 16			18			3728

	0 - 1 - C 0 - 1 - C 0 - 1 - C 0 - 1 - C 0 - 1 - C 0 - 1 - C 0 - 1 - C 0 - 1 - C 0 - 1 - C 0 - 1 - C 0 - 1 - C 0 - 1 - C 0 - 1 - C 0 - 1 - C 0 -				raye Z
		thod of inventory va		1.1	
1	Inventory at beginning of year				
2	Purchases				
3	Cost of labor				
4	Additional section 263A costs (attach statement)				
5	Other costs (attach statement)				
6	Total. Add lines 1 through 5				
7	Inventory at end of year				
8	Cost of goods sold. Subtract line 7 from line 6.				
9	Do the rules of section 263A (with respect to proper				? Yes No
	Pescription of property (property street address,				
1	A -		•	se. See instructions.	
	A				
	c □				
	D -				
		Α	В	С	
2	Rent received or accrued	Α		•	
_	From personal property (if the percentage of				
а	rent for personal property is more than 10%				
	but not more than 50%)				
b	From real and personal property (if the				
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				
•	T	A.I		l' 0 l (A)	
3	Total rents received or accrued. Add line 2c, colum	ns A through D. Enter	nere and on Part I,	line 6, column (A)	
4	Deductions directly connected with the income				
	in lines 2a and 2b (attach statement)				
5	Total deductions. Add line 4, columns A through	D Enter here and	on Part I line 6 colu	ımn (R)	
			on art i, line o, con		
Par	· ·				
1	Description of debt-financed property (street add	dress, city, state, ZIP	code). Check if a c	lual-use. See instruc	tions.
	<u>A</u>				
	B				
	D 🗌			С	
•		Α	В	C	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)				
	Total deductions (add lines 3a and 3b,				
С	columns A through D)				
4	Amount of average acquisition debt on or allocable				
4	to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-				
5	financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6	70	70	70	
8	Total gross income (add line 7, columns A through	ugh D). Enter here ar	nd on Part I, line 7, o	column (A) __	
9	Allocable deductions. Multiply line 3c by line 6				
10	, ,	A through D. Catair b	ore and an Dart I III	20.7 column (D)	
10	Total allocable deductions. Add line 9, columns	•		• • • • • • • • • • • • • • • • • • • •	
11	Total dividends — received deductions include	ed in line 10			

Page 3

Schedule A (Form 990-T) 2023

Part VI Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions) **Exempt Controlled Organizations** 2. Employer 3. Net unrelated 4. Total of specified 5. Part of column 4 6. Deductions directly 1. Name of controlled identification income (loss) payments made connected with organization that is included in the number (see instructions) controlling organization's income in column 5 gross income (1) (2)(3)(4) Nonexempt Controlled Organizations 10. Part of column 9 11. Deductions directly 7. Taxable income 8. Net unrelated 9. Total of specified income (loss) payments made that is included in the connected with (see instructions) controlling organization's income in column 10 gross income (1) (2) (3) (4) Add columns 5 and 10. Add columns 6 and 11. Enter here and on Part I, Enter here and on Part I. line 8, column (A). line 8, column (B). Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) 1. Description of income 2. Amount of income 3. Deductions 4. Set-asides 5. Total deductions directly connected (attach statement) and set-asides (attach statement) (add columns 3 and 4) (1) (2)(3)(4) Add amounts in column 2. Add amounts in column 5. Enter here and on Part I, Enter here and on Part I, line 9, column (A). line 9, column (B). Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1 Description of exploited activity: 2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) 2 3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, 3 4 Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete 4 5 Gross income from activity that is not unrelated business income 5 6 6 7 Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line

T al	IX Advertising Income					
1	Name(s) of periodical(s). Check box if re	eporting two	or more periodic	als on a consolid	ated basis.	
	A 🗌					
	В 🗌					
	C 🗆					
	D 🗌					
Enter	amounts for each periodical listed above	in the corres	ponding column	1.		
			Α	В	С	D
2	Gross advertising income					
а	Add columns A through D. Enter here a	nd on Part I,	line 11, column	(A)		
3	Direct advertising costs by periodical					
а	Add columns A through D. Enter here a	nd on Part I,	line 11, column	(B)		·
4	Advertising gain (loss). Subtract line 3 ft 2. For any column in line 4 showing complete lines 5 through 8. For any co- line 4 showing a loss or zero, do not co- lines 5 through 7, and enter -0- on line 8	a gain, olumn in omplete				
5	Readership costs					
6	Circulation income					
7	Excess readership costs. If line 6 is le line 5, subtract line 6 from line 5. If line than line 6, enter -0-	5 is less				
8	Excess readership costs allowed deduction. For each column showing a line 4, enter the lesser of line 4 or line 7	gain on				
а	Add line 8, columns A through D. En Part II, line 13					
Par	t X Compensation of Officers, Di	rectors, an	nd Trustees (se	ee instructions)		<u> </u>
	1. Name	,	2. Title		3. Percentage of time devoted to business	Compensation attributable to unrelated business
(1)					%	
(2)					%	
(3)					%	
(4)					%	
Tc+-						
Par	al. Enter here and on Part II, line 1 . XI Supplemental Information (see	e instructio	ns)			
Par	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . XI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . XI Supplemental Information (se	ee instructio	ns)			
Par	al. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . XI Supplemental Information (se	ee instructio	ns)			
Par	al. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Pari	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	II. Enter here and on Part II, line 1 . EXI Supplemental Information (se	ee instructio	ns)			
Par	Supplemental Information (se	ee instructio	ns)			

UNIVERSITY OF HOUSTON SYSTEM 74-6001399

Statements for Form 990-T Schedule A: Sequence 4 of 4 Activity: 72100 - ACCOMODATION AND FOOD SERVICES

Other Deductions Statement:

Description	Amount
OPERATING EXPENSES	16892
Total:	16892

SCHEDULE D (Form 1120)

Name

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

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

Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No. 1545-0123

2023

Employer identification number

74-6001399 UNIVERSITY OF HOUSTON SYSTEM Did the corporation dispose of any investment(s) in a qualified opportunity fund during the tax year? . ☐ Yes 🖾 No If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Part I Short-Term Capital Gains and Losses – Assets Held One Year or Less See instructions for how to figure the amounts to enter on (g) Adjustments to gain (h) Gain or (loss) (d) the lines below or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part I, line 2, column (d) and combine This form may be easier to complete if you round off cents to (or other basis) (sales price) column (g) the result with column (a) whole dollars. 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1b Totals for all transactions reported on Form(s) 8949 with **Box A** checked 2 Totals for all transactions reported on Form(s) 8949 with **Box B** checked 3 Totals for all transactions reported on Form(s) 8949 6740 5329 1411 with **Box C** checked 4 Short-term capital gain from installment sales from Form 6252, line 26 or 37. 4 5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824 . 5 **6** Unused capital loss carryover (attach computation) 6 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column h 1411 7 Long-Term Capital Gains and Losses—Assets Held More Than One Year See instructions for how to figure the amounts to enter on the (g) Adjustments to gain (h) Gain or (loss) (d) lines below or loss from Form(s) Subtract column (e) from Proceeds Cost 8949, Part II, line 2, column (d) and combine This form may be easier to complete if you round off cents to (or other basis) (sales price) column (a) the result with column (a) whole dollars. 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8b Totals for all transactions reported on Form(s) 8949 with **Box D** checked 9 Totals for all transactions reported on Form(s) 8949 with **Box E** checked 10 Totals for all transactions reported on Form(s) 8949 242384 16851 225533 with **Box F** checked 11 Enter gain from Form 4797, line 7 or 9 11 12 Long-term capital gain from installment sales from Form 6252, line 26 or 37. 12 13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824 13 **14** Capital gain distributions (see instructions) 14 15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column h 225533 15 Summary of Parts I and II Part III 16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15) 16 1411 225533 17 Net capital gain. Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7) 17 226944 18 Add lines 16 and 17. Enter here and on Form 1120, page 1, line 8, or the applicable line on other returns . 18

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

Form **8949**

Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Go to www.irs.gov/Form8949 for instructions and the latest information.

2023 Attachment Sequence No. 12A

OMB No. 1545-0074

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

Social security number or taxpayer identification number 74 - 6001399

UNIVERSITY OF HOUSTON SYSTEM

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your

broker and may even tell you which box to check.

Part I Short-T

Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

☐ (B) Short-term transactions☑ (C) Short-term transactions	•	` '	•	sis wasn't report	ed to the IF	RS	
1 (a) Description of property	(b)	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)	Date acquired (Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions.	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
400 CAPITAL CREDIT O	VARIOUS	VARIOUS		2618			-2618
ASF VIII B LP	VARIOUS	VARIOUS	2515				2515
BLACKSTON REAL ESTAT	VARIOUS	VARIOUS	173				173
ENCAP FLATROCK MIDST	VARIOUS	VARIOUS	2718				2718
GCM GROSVENOR ADVANC	VARIOUS	VARIOUS	1321				1321
KLCP DOMESTIC FUND	VARIOUS	VARIOUS	13				13
LEXINGTON CAPITAL	VARIOUS	VARIOUS		2711			-2711
2 Totals. Add the amounts in column negative amounts). Enter each tot	al here and inc	lude on your					

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

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

Form 8949 (2023) Attachment Sequence No. **12A** Page **2**

Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side UNIVERSITY OF HOUSTON SYSTEM

Social security number or taxpayer identification number 74-6001399

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box D, E, *or* F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (b) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired (Mo., day, yr.)	(c) Date sold or disposed of (Mo., day, yr.)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis See the Note below and see <i>Column</i> (e) in the separate instructions.	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e)
(Example: 100 sh. XYZ Co.)					(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g).
400 CAPITAL CREDIT O	VARIOUS	VARIOUS	3740				3740
ASF VIII B LP	VARIOUS	VARIOUS	175106				175106
BLACKSTONE REAL ESTA	VARIOUS	VARIOUS	4436	16782			-12346
COMMONFUND CAPITAL	VARIOUS	VARIOUS	6702	69			6633
ENCAP FLATROCK MIDST	VARIOUS	VARIOUS	2367				2367
GCM GROSVENOR ADVANC	VARIOUS	VARIOUS	6905				6905
KELSO DOMESTIC FUND	VARIOUS	VARIOUS	3611				3611
KLCP DOMESTIC FUND	VARIOUS	VARIOUS	920				920
LEXINGTON CAPITAL	VARIOUS	VARIOUS	38597				38597
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 8b (if Box D above above is checked), or line 10 (if Box I	I here and incl is checked), lin	ude on your ne 9 (if Box E	242384	16851			225533

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See *Column* (g) in the separate instructions for how to figure the amount of the adjustment.

QNA Form **8949** (2023)

4562

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

Attachment

OMB No. 1545-0172

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form4562 for instructions and the latest information. Sequence No. 179 Name(s) shown on return Business or activity to which this form relates Identifying number LINK:T-14 UNIVERSITY OF HOUSTON SYSTEM FORM 990-T 74-6001399 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 1 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) . Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the **smaller** of line 5 or line 8 9 **10** Carryover of disallowed deduction from line 13 of your 2022 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2024. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 **16** Other depreciation (including ACRS) 16 458068 Part III MACRS Depreciation (Don't include listed property. See instructions.) **Section A** 17 MACRS deductions for assets placed in service in tax years beginning before 2023 17 18 If you are electing to group any assets placed in service during the tax year into one or more general Section B-Assets Placed in Service During 2023 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 3-year property 5-year property 7-year property d 10-year property e 15-year property **f** 20-year property 25 yrs. S/L g 25-year property 27.5 yrs. MM S/L h Residential rental 27.5 yrs. MM S/L property 39 yrs. ММ S/L i Nonresidential real property MM S/L Section C-Assets Placed in Service During 2023 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. **b** 12-year S/L c 30-year 30 yrs. MM ММ S/L d 40-year 40 yrs. Part IV Summary (See instructions.) 21 Listed property. Enter amount from line 28 21 . 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 22 458068

portion of the basis attributable to section 263A costs.

23 For assets shown above and placed in service during the current year, enter the

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

OMB No. 1545-0184

Department of the Treasury Internal Revenue Service

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

Attachment Sequence No. 27

Name(Name(s) shown on return							 dentifying number			
	VERSITY OF HOUS	TON SYSTEM				74-60013					
1a	Enter the gross procees substitute statement) the			•	n Form(s) 1099-B o	r 1099-S (or	1a				
b	Enter the total amount MACRS assets	of gain that you ar	e including on lin	nes 2, 10, and 24 d	ue to the partial dis	spositions of	1b				
С	Enter the total amount assets	of loss that you are	including on lines	2 and 10 due to th	e partial disposition	s of MACRS	1c				
Part		anges of Proper or Theft—Most					sions	From Other			
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or of basis, plu improvements expense of	is s and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)			
3	Gain, if any, from Form	,					3				
4	Section 1231 gain from						4				
5	Section 1231 gain or (lo	,	J				5				
6	Gain, if any, from line 32	•	•				6				
7	Combine lines 2 through	· ·	` '				7				
	Partnerships and S co line 10, or Form 1120-S				tions for Form 1065,	Schedule K,					
	Individuals, partners, from line 7 on line 11 to 1231 losses, or they we Schedule D filed with your schedules are scheduled by the schedule D filed with your schedules are scheduled by the schedules are scheduled b	pelow and skip lines are recaptured in an e our return and skip lir	8 and 9. If line 7 earlier year, enter thes 8, 9, 11, and 1	is a gain and you d the gain from line 7 a 2 below.	idn't have any prior	year section					
8 9	Nonrecaptured net sect Subtract line 8 from line line 9 is more than zero	e 7. If zero or less, e	nter -0 If line 9 i	s zero, enter the gai			8				
	capital gain on the Sche						9				
Part	I Ordinary Gains	s and Losses (s	ee instructions	s)							
10	Ordinar 🎖 😥 and loss	ses not included on lir	nes 11 through 16	(include property he	eld 1 year or less):						
	Attached										
	Statement										
11	Loss, if any, from line 7						11	(
12	Gain, if any, from line 7	or amount from line	3, if applicable .				12				
13	Gain, if any, from line 3						13				
14	Net gain or (loss) from F	Form 4684, lines 31 a	nd 38a				14				
15	Ordinary gain from insta	allment sales from Fo	rm 6252, line 25 c	or 36			15				
16	Ordinary gain or (loss) for	rom like-kind exchan	ges from Form 88	24			16				
17	Combine lines 10 through	gh 16					17	208408			
18	For all except individua a and b below. For indiv	·			line of your return a	nd skip lines					
а	If the loss on line 11 inclu	udes a loss from Form	4684, line 35, colu	umn (b)(ii), enter that p	oart of the loss here.	Enter the loss					
	from income-producing	property on Schedule	A (Form 1040), lin	ne 16. (Do not include	e any loss on propert	y used as an					
	employee.) Identify as fro	om "Form 4797, line 18	Ba." See instruction	ns			18a				
b	Redetermine the gain of (Form 1040), Part I, line						18b				

Form **8868**

(Rev. January 2024)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

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 up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form

OMB No. 1545-0047

8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions. 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. Part I — Identification Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) Type or UNIVERSITY OF HOUSTON SYSTEM 74-6001399 Print Number, street, and room or suite no. If a P.O. box, see instructions. File by the due date for C/O TAX DEPT 5000 GULF FWY 202 filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions. return. See instructions. HOUSTON, TX 77204-0907 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application Is For** Return Application Is For Return Code Code Form 990 or Form 990-EZ Form 4720 (other than individual) 01 09 Form 4720 (individual) 03 10 Form 5227 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 8870 12 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 Form 990-T (corporation) Form 5330 (other than individual) 07 14 80 Form 1041-A After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Year Ending (MM/DD/YYYY) Part II — Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of UNIVERSITY OF HOUSTON Telephone No. (713) 743-8799 Fax No. • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) a list with the names and TINs of all members the extension is for.

Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.

3a \$

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.

3b \$

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

3c \$

I request an automatic 6-month extension of time until 07/15, 20 25, to file the **exempt organization return** for

 \boxtimes tax year beginning 09/01 , 2023 , and ending 08/31 , 20 24 .

If the tax year entered in line 1 is for less than 12 months, check reason:

Initial return

Final return

alendar year 20

the organization named above. The extension is for the organization's return for:

Part II

	Date	Date	Sales	Depr	Cost or	
Description	Acquired	Sold	Price	Allowed	Basis	Gain/Loss
ASF AZTEC GROUP	VARIOUS	VARIOUS	2231	0	0	2231
BLACKSTONE REAL E	VARIOUS	VARIOUS	109541	0	32013	77528
COMMONFUND CAPITA	VARIOUS	VARIOUS	0	0	2607	-2607
ENCAP FLATROCK	VARIOUS	VARIOUS	140851	0	0	140851
FRANCISCO PARTNER	VARIOUS	VARIOUS	16	0	0	16
GCM GROSVENOR ADV	VARIOUS	VARIOUS	0	0	2211	-2211
GREAT HILL EQUITY	VARIOUS	VARIOUS	0	0	2918	-2918
KIA X LP	VARIOUS	VARIOUS	0	0	41	-41
TRACE ENERGY RESO	VARIOUS	VARIOUS	7	0	0	7
INSIGHT EQUITY	VARIOUS	VARIOUS	1732	0	0	1732
LEXINGTON CAPITAL	VARIOUS	VARIOUS	0	0	6180	-6180
TOTALS			254378	0	45970	208408