## **Exempt Organization Business Income Tax Return**

OMB No. 1545-0687

257.768

Form 990-T (2016)

990-T (and proxy tax under section 6033(e)) 2016 For calendar year 2016 or other tax year beginning July 1 , 2016, and ending June 30 , 20 17 ▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t. Department of the Treasury Internal Revenue Service ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3), A Check box if address changed D Employer identification number (Employees' trust, see instructions.) University of Arkansas - Fayetteville Campus B Exempt under section Print ☑ 501( c )( 3 ) Number, street, and room or suite no. If a P.O. box, see instructions. 71-6003252 or E Unrelated business activity codes 408(e) 220(e) 222 ADMN, 1 University of Arkansas Type (See instructions.) City or town, state or province, country, and ZIP or foreign postal code 530(a) 408A 529(a) Favetteville, AR 72701 451211 721000 C Book value of all assets at end of year Group exemption number (See instructions.) ▶ G Check organization type ► 7 501(c) corporation 501(c) trust Other trust Describe the organization's primary unrelated business activity. ► Bookstore & Athletics Store During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? . . . > 🔲 Yes 📝 No If "Yes," enter the name and identifying number of the parent corporation. The books are in care of ▶ Colin French, Tax Compliance Officer Telephone number > 479-575-4717 Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales 2,097,676 c Balance ▶ b Less returns and allowances 1c 2,097,676 2 Cost of goods sold (Schedule A, line 7) . . . 2 1,225,738 Gross profit. Subtract line 2 from line 1c. . . . 3 871,938 871,938 Capital gain net income (attach Schedule D) . . . . . **4**a 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b C 4c 5 Income (loss) from partnerships and S corporations (attach statement) 5 6 6 9,318 9,318 Unrelated debt-financed income (Schedule E) . . . . . 7 7 8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F) 8 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 10 Exploited exempt activity income (Schedule I) . . . . . 10 11 Advertising income (Schedule J) . . . . . . . . . 11 Other income (See instructions; attach schedule) . . . . . 12 12 1,195,064 1,195,064 13 Total. Combine lines 3 through 12 13 2,076,320 2,076,320 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K) . . 15 15 534,788 16 Repairs and maintenance 16 17,346 17 17 18 Interest (attach schedule) 18 16,943 Taxes and licenses . . . . . . 19 19 110 20 Charitable contributions (See instructions for limitation rules) . . . 20 21 Less depreciation claimed on Schedule A and elsewhere on return . . . 22 22b 23 23 24 Contributions to deferred compensation plans . . . 24 25 25 26 26 27 27 28 28 1,248,365 29 Total deductions. Add lines 14 through 28 1.817,552 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 258,768 31 Net operating loss deduction (limited to the amount on line 30) . . . . . . . . . . . . . . . . . . 31 32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 . . . . 258,768 33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions) . . . . . 33 1.000 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, 34

Part	II Ta	ax Computation						
35	Organi	zations Taxable as Corporations. See instructions for tax computation	n. Controlled grou	qt				
	membe	ers (sections 1561 and 1563) check here 🕨 🔲 See instructions and:						
а	Enter y	our share of the \$50,000, \$25,000, and \$9,925,000 taxable income bracke	ts (in that order):					
	(1) \$	(2) \$ (3) \$						
b	Enter o	rganization's share of: (1) Additional 5% tax (not more than \$11,750) \$		1				
	(2) Add	itional 3% tax (not more than \$100,000)		Ĺ				
c	Income	tax on the amount on line 34		<b>▶</b> .	35c	83,	780	
36		Taxable at Trust Rates. See instructions for tax computation		on [				
	the amo	ount on line 34 from: 🔲 Tax rate schedule or 🔲 Schedule D (Form 1041)		▶	36			
37	Proxy t	ax. See instructions		▶ [	37			
38	Alterna	tive minimum tax		Γ	38			
39	Tax on	Non-Compliant Facility Income. See instructions			39			
40	Total. A	Add lines 37, 38 and 39 to line 35c or 36, whichever applies			40	83,	780	
Part	V Ta	ax and Payments						
41a	Foreign	tax credit (corporations attach Form 1118; trusts attach Form 1116) . 4	1a					
b	Other o	redits (see instructions)	1b					
С	Genera	l business credit. Attach Form 3800 (see instructions) 4	1c					
đ	Credit f	or prior year minimum tax (attach Form 8801 or 8827) 4	1d					
е		redits. Add lines 41a through 41d			41e			
42		et line 41e from line 40		L	42	83,	780	
43		xes. Check if from: 🔲 Form 4255 🔲 Form 8611 🔲 Form 8697 🔲 Form 8866 🗍 Oth	ner (attach schedule) .	L	43			
44		ax. Add lines 42 and 43			44	83,	780	
45a	-	<u></u>	<b>5a</b> 48,691					
b			<b>5b</b> 118,000					
c		<u> </u>	5c					
d	_		5d					
е			5e	_				
, f			15f					
g		redits and payments:		ì				
	Forn		5g		Managaria			
46	_	ayments. Add lines 45a through 45g			46   .	166,	691	
47		ted tax penalty (see instructions). Check if Form 2220 is attached			47		_	
48		e. If line 46 is less than the total of lines 44 and 47, enter amount owed.		▶	48			
49	_	syment. If line 46 is larger than the total of lines 44 and 47, enter amount of		•	49	82,	911	
50 Doet	_	e amount of line 49 you want: Credited to 2017 estimated tax   82,911	<del>'</del>		50			
Part		tatements Regarding Certain Activities and Other Information					Yes	No
51		time during the 2016 calendar year, did the organization have an interest financial account (bank, securities, or other) in a foreign country? If YES,	•			″iiy [_		
		I Form 114, Report of Foreign Bank and Financial Accounts. If YES, ente						
	here ►		or the realite or the	, ,010	Jigir cou	11tt y	3200325	<u>√</u>
52		he tax year, did the organization receive a distribution from, or was it the grantor o	of or transferor to a	forei	ian truet?		-	<del>"</del>
J.	-	see instructions for other forms the organization may have to file.	A, OI GANSICIOI IO, A	10:0	ıgıı uust:	•		
53		ne amount of tax-exempt interest received or accrued during the tax year	<b>▶</b> \$					
		penalties of perjury, I declare that I have examined this return, including accompanying schedules are		e best	of my kno	wiedge ar	nd belie	ef. it is
Sign		orrect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	preparer has any knowle	dge.	May the IF	· · · ·		
Here		61 DR   11,15.2019 Dir. Financial	Affairs Compliance	e	with the p	reparer si	nown b	pelow
		ure of officer Date Title			(see instruc	tions)?	Yes [	]No
Deid	, ,	Print/Type preparer's name Preparer's signature	Date	<u>-</u>	. 🗀	PTIN	1	
Paid					ck ∐ if employed			
Prep		Firm's name ▶			's EIN ►			
Use (	Only	Firm's address ►			ne no.			
		· · · · · · · · · · · · · · · · · · ·		,				

Sche	dule A-Cost of Goods Sold	. Ente	r method of in	vento	ory va	aluation <b>&gt;</b>						-
1	Inventory at beginning of year	1	980,105		6		at end of yea	ar	6	1.02	7,193	
2	Purchases	2	1,272,826		7	•	-	d. Subtract				
3	Cost of labor	3		·			-	er here and				
4a	Additional section 263A costs	;				in Part I, Iir	ne2		7	1.22	5.738	
	(attach schedule)	4a			8			on 263A (wit			Yes	No
b	Other costs (attach schedule)	4b				property p	roduced or	acquired for	resale	) apply		i i i
5	Total. Add lines 1 through 4b	5	2,252,931			to the orga	anization?					1
	dule C-Rent Income (From instructions)	Real	Property and	Pers	onal	Property I	Leased W	th Real Pro	perty	)		
	ription of property											
	dia Equipment Rental											
							,					
(3)	ilities Management Rental		***									
(4)	2 Rent r	havian	or accrued				1					
		<del></del>						ato are a re-				
	om personal property (if the percentage of r personal property is more than 10% but no more than 50%)		(b) From real an percentage of rent f 50% or if the rent i	or pers	onal pr	operty exceeds		ductions directly columns 2(a) and				9
(1)	4.	389										
(2)		929										
(3)		020										
(4)							<u> </u>					
Total	9.	318 T	otal									
	al income. Add totals of columns 2(a							deductions. e and on page	1			
here a	nd on page 1, Part I, line 6, column (A	) 411012	.(b). Enter			9,31	I	e and on page e 6, column (B)				
Sche	dule E-Unrelated Debt-Fina	inced	Income (see	instru	ctions	s)			<u>,                                     </u>			
				1		come from or	3. Deduc	tions directly cor			cable to	,
	<ol> <li>Description of debt-financed</li> </ol>	propert	у		able to	debt-financed	(a) Straight if	debt-finane ne depreciation		erty ) Other de	ductions	
					pro	perty		schedule)	'`	(attach sch		•
(1)												
(2)			:									
(3)												
(4)			<u> </u>									
	acquisition debt on or llocable to debt-financed debt	of or allo	djusted basis ocable to sed property schedule)		4 di	olumn vided olumn 5		ome reportable : x column 6)		Allocable d nn 6 × tota 3(a) and	l of colu	
(1)						%					······	
(2)						%						
(3)						%						
(4)						%	<u> </u>					
- •						70	Enter here a	and on page 1,	Enter	here and	on pac	ze 1.
								7, column (A).		1, line 7, c		
Totals												
	dividends-received deductions inclu	ded in	column 8					>	-		-	

Schedule F-Interest, Ann	uities, Royalties,			Controlled Org I Organizations	janizations (se	e instruc	tions)	
Name of controlled organization	2. Employer identification number	3. Net unrel	ated income nstructions)		included in the o	5. Part of column 4 that is included in the controlling organization's gross income		eductions directly ected with income in column 5
(1)								
(2)						***		
(3)	]							
(4)								
Nonexempt Controlled Organi	zations							
7. Taxable Income	8. Net unrelated in (loss) (see instruct			otal of specified yments made	10. Part of column included in the column organization's ground in the column in the c	ontrolling	conne	eductions directly cted with income in column 10
(1)								
(2)								
(3)								
(4)								
Totals	. ,			1	Add columns 5 Enter here and c Part I, line 8, co	n page 1,	Enter h	columns 6 and 11, here and on page 1, line 8, column (B).
Schedule G-Investment				or (17) Organi	zation (see inst	ructions	)	
1. Description of income	2. Amount a		3. dire	Deductions ctly connected ach schedule)	4. Set-aside (attach schedu	S	5. To and s	otal deductions et-asides (col. 3 plus col. 4)
(1)			-			1		
(2)								
(3)								
(4)						Ì		
Totals	Enter here and Part I, line 9, o	column (A).					Part I, li	re and on page 1, ne 9, column (B).
Schedule I—Exploited Exe	empt Activity inc	ome, Otr	ner i nan	Advertising In	icome (see inst	ructions)	)	1
1. Description of exploited activ	2. Gross unrelated business inco from trade of business	directly connected with production of		4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Exp attribut colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)	***************************************							
(4)								
Totals	Enter here and page 1, Part line 10, col. (	i, page	here and on e 1, Part I, 0, col. (B).					Enter here and on page 1, Part II, line 26.
Schedule J-Advertising I	ncome (see instru	ctions)		I CHARLES THE STATE OF THE STAT				II
Part I Income From P	eriodicals Repor	ted on a	Consoli	dated Basis				
1. Name of periodical	2. Gross advertising income		. Direct tising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Read		7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)		_			-			Ç Ç Ç Ç Ç Ç Ç Ç Ç Ç
(2)				1				
(3)				1				
(4)				1				
Totals (carry to Part II, line (5))	>	<b>V</b> erange, <b>V V</b> extends <b>V</b>						

Part II	Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in col	umns
	2 through 7 on a line-by-line basis.)	

		cols. 5 through 7.		costs	minus column 5, but not more than column 4).
ge 1, Part I,	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27,
ers. Direct	ors, and Trus	stees (see instru	ctions)	torrist, chilitarioniani ankui anno	
	ers, Direct	ers, Directors, and Tru	ers, Directors, and Trustees (see instru	ers, Directors, and Trustees (see instructions)	ers, Directors, and Trustees (see instructions)

1. Name	<b>2.</b> Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		>	

Form **990-T** (2016)

## University of Arkansas, Fayetteville Campus FYE 06/30/2017 71-6003252

## Additional Information

Line 12 - Other Income:								
	Bus advertising	138,342						
	Commissions							
	Conference housing	· ·						
	Garvan Gardens Sponsorship with Benefits	494,467 554,640 7,615 1,195,064 2,223 14,403 805 22,092 253 4,609 2,218 8,902 4,051 11,004 460,147 6,879 6,818						
	Total	1,195,064						
		· · · · ·						
ine 28 - Other Deduction	s:							
	Travel 80s							
	•							
	<del>-</del>							
	Contract Labor	4,609						
	Mailing	2,218						
	Advertising	8,902						
	Credit card fees	4,051						
	Custodial	11,004						
	Rent, security, utilities	460,147						
	Telephone	6,879						
	Cable	6,818						
	Miscellaneous	10,932						
	Conference bed expense	513,298						
	Indirect expense	179,731						
	 Total	1,248,365						