	990-T		Exempt Organizatio	on Business	inc	ome Tax Ro	eturi	n	Or	MB No. 1545-0047
Form	33U-1	l	(and proxy t	ax under sec	tion 6	6033(e))				
		For cale	endar year 2019 or other tax year be			` ''	0 00	20		20 19
Denart	ment of the Treasury	l or out	► Go to www.irs.gov/Forms	200T for instruction	, 2015, d	he latest informal	0,20			
	l Revenue Service	▶Doi	not enter SSN numbers on this for	m as it may be mad	e public	if vour organization	is a 50°	1(c)(3).	Open t	o Public Inspection for (3) Organizations Only
$\overline{\Box}$	Check box if address changed		Name of organization (Check						_	lentification number
	mpt under section	1	University of Arkansas - Faye		una scc	manachoria.,				trust, see instructions.)
	501(C)(3)	Print	Number, street, and room or suite		nstruction	ns.			71.	6003252
	408(e) 220(e)	or Type	222 ADMN, 1 University of Art	· ·				E Unrel		usiness activity code
_	408A 🗆 530(a)	Type	City or town, state or province, cou		n postal	code			instruct	
	529(a)		Fayetteville, AR 72701	,,						45
C Boo	k value of all assets nd of year	F Gr	roup exemption number (See	instructions.)						40
ate	nd or year	G Ch	neck organization type 🕨 🔽	501(c) corporati	on	☐ 501(c) trust		401(a)	trust	Other trust
H E	nter the number		organization's unrelated trade							first) unrelated
	ade or business			lf c						
fir	rst in the blank s	space a	at the end of the previous se	ntence, complete	Parts	I and II. comple	te a S	chedule	Mf	or each additiona
tr	ade or business,	then c	omplete Parts III-V.	,						or odon additiona
I D	uring the tax year,	was the	e corporation a subsidiary in an	affiliated group or	a paren	t-subsidiary contro	olled a	roup?	_	□ Ves ☑ No
lf	"Yes," enter the	name a	and identifying number of the	parent corporati	on. ►	T Caporala, y Collar	omod gi	оар	.,	_ 103 <u>_</u> 140
			Colin French, Tax Complia			Telephone r	umbe	r 🕨	-	479-575-4717
			e or Business Income			(A) Income		Expense		(C) Net
1a	Gross receipts	or sale	es954,523					11.4	18,91	
b	Less returns ar	nd allov	wances	c Balance ▶	1c	954,523				
2	Cost of goods	sold (S	Schedule A, line 7)		2	1,028,100				
3			line 2 from line 1c		3	(73,577)				(73,577)
4a			ne (attach Schedule D)		4a					(10,1)
b	Net gain (loss)	(Form 4	4797, Part II, line 17) (attach I	Form 4797) .	4b					
C	Capital loss de	duction	n for trusts , , , , ,		4c				111	
5	Income (loss)	from a	a partnership or an S corp	oration (attach			18 18 1			
	statement) .				5					
6	Rent income (S	Schedul	le C)		6				\neg	
7			ed income (Schedule E)		7					
8			s, and rents from a controlled organiz		8					
9			ection 501(c)(7), (9), or (17) organiza		9					
10			vity income (Schedule I)		10					
11	Advertising inc	ome (S	chedule J)		11				\neg	
12	Other income (See ins	structions; attach schedule) .		12					
13	Total. Combine	e lines 3	3 through 12	6 6 6 6 6	13	(73,577)				(73,577)
Part	Deduction	s Not	Taken Elsewhere (See inst	ructions for limit	ations	on deductions.)	(Dedu	uctions	mus	t be directly
	connected	with th	as uprolated business tream	201						,
14	Compensation		ers, directors, and trustees (14	
15	Salaries and wa				e se se	(8) TE E E E	e na n	e ne [15	96,404
16	Repairs and ma	aintenai	nce			500 500 - 80 - 80 - 80 - 10	e 18 1		16	2,238
17	Bad debts				6 90 160			. ee	17	
18	Interest (attach	schedu	ule) (see instructions) ,					3 00	18	1,906
19	Taxes and licer	ises .				continue to the		[19	73
20	Depreciation (a	ttach F	orm 4562)			. 20			20	
21			med on Schedule A and else						21b	
22	Depletion			5					22	
23	Contributions to	defer	red compensation plans .						23	
24	Employee bene	fit prog	grams					[24	
25	Excess exempt	expens	ses (Schedule I)						25	
26	Excess readers	hip cos	sts (Schedule J)					. [26	
27	Other deduction	ns (atta	ch schedule)					. [27	279,431
28	Total deduction	ns. Add	d lines 14 through 27					. [28	380,052
29	Unrelated busin	ess tax	cable income before net oper	ating loss deduct	ion. Su	btract line 28 fro	m line	13	29	(453,629)
30	Deduction for i	net ope	erating loss arising in tax y	ears beginning o	on or a	tter January 1,	2018			
04									30	
_31	Unrelated busin	ess tax	cable income. Subtract line 3	U from line 29					31	(453,629)

Part	Ш.	Total Unrelated Business Taxabl	e Income					
32		of unrelated business taxable incom						
	instru	otions)				32	3	,590
33	Amou	nts paid for disallowed fringes			1	33		
34		able contributions (see instructions fo				34		
35		unrelated business taxable income be						
						35	3	,590
36	Deduc	ction for net operating loss arising	in tax years beginning before J	lanuary 1, 2018	(see			1070
		ctions)				36		
37		of unrelated business taxable income				37	2	,590
38		ic deduction (Generally \$1,000, but se				38		,000
39	Unrel	ated business taxable income. Sub	tract line 38 from line 37. If line 38 i	e areater than line	. 27	30		,000
00	enter	the smaller of zero or line 37	tract line oo nom line or. If line oo	s greater than line	, 37,			
Part	IV	ax Computation				39		,590
40		izations Taxable as Corporations.	Author line 20 h; 010/ (0.01)			40		
41	Truct	Toyoble of Truct Detail Co.	violations for the communication		•	40		544
41	the an	Taxable at Trust Rates. See nount on line 39 from: ☐ Tax rate sch	e instructions for tax computations	on. Income tax	on	EL OF		
40						41		
42		tax. See instructions				42		
43	Altern	ative minimum tax (trusts only)			. [43		
44	Tax o	Noncompliant Facility Income. Se	e instructions		·]	44		
45	Total.	Add lines 42, 43, and 44 to line 40 or	41, whichever applies	6 K. 6 K. K. K. K.	0 +0	45		544
Part		ax and Payments						
46a		n tax credit (corporations attach Form		46a				
b		credits (see instructions)		46b				
С		al business credit. Attach Form 3800 (46c				
d		for prior year minimum tax (attach Fo		46d		223		
е		credits. Add lines 46a through 46d				46e		
47	Subtra	ct line 46e from line 45		8 848 348 548 540 540 540	s a.e. [47		544
48	Other to	exes. Check if from: Form 4255 Form	n 8611 🔲 Form 8697 🔲 Form 8866 📋	Other (attach schedu	ule)	48		
49		ax. Add lines 47 and 48 (see instructi				49		544
50		et 965 tax liability paid from Form 965				50		
51a	Payme	nts: A 2018 overpayment credited to	2019	51a 8	31,556			
b	2019 €	stimated tax payments		51b		37		
С	Tax de	posited with Form 8868		51c		100		
d		n organizations: Tax paid or withheld		51d				
е		withholding (see instructions)		51e		1, 1,		
f		for small employer health insurance p		51f		10		
q		credits, adjustments, and payments:				41		
·		n 4136 Oth		510		4.3		
52		payments. Add lines 51a through 51g				52	81	556
53		ted tax penalty (see instructions). Che			\Box	53		
54		e. If line 52 is less than the total of lin				54		_
55		ayment. If line 52 is larger than the to				55	81	012
56		e amount of line 55 you want: Credited		81,012 Refunde		56	- 01,	-
Part		tatements Regarding Certain A				-		_
57		time during the 2019 calendar year, o			or other	r authori	ity Yes I	No
0,		financial account (bank, securities, or						
		Form 114, Report of Foreign Bank a						
	here >	·			, 1010ig	in ocam		~
58		he tax year, did the organization receive a	distribution from or was it the granter	of or transferor to a	foreign	truot?		~
50		" see instructions for other forms the		or, or transferor to, a	ioreign	uustr 🥫		_
59		ne amount of tax-exempt interest rece	- ,	• •				
39	Under	penalties of penjury, I declare that I have examined	this return, including accompanying schedules a	nd statements, and to the	a hast of	pov knowle	adea and balief	it in
Sign	true, ç	brrect, and complete. Declaration of preparer (other	than taxpayer) is based on all information of which	preparer has any knowle	dge.			-7
_	/	6 Dadel	15helana Vyce one w	FILES F. IANIS			discuss this ret parer shown be	
Here		ire of officer	Date Title	ELLUR FINANCI	(se		ons)? Yes	
	- orginati			Det-			DTIN	
Paid		Print/Type preparer's name	Preparer's signature	Date	Check		PTIN	
Prepa	arer				self-em			
Use (Only	Firm's name			Firm's E	2.02		_
	-	Firm's address ▶			Phone	40		

UNIVERSITY OF ARKANSAS - FAYETTEVILLE CAMPUS 71-6003252 PARTS I AND II: BOOKSTORE

Form 9	90-T (2019)									F	Page 3
Sche	dule A-Cost of Goods Solo	d. En	ter method of	inven	tory va	aluation >					
1	Inventory at beginning of year		1 15	5,950	6	Inventory a	at end of year	6			0
2	Purchases		2 87	2,150	7	Cost of g	oods sold. Subtract line				
3	Cost of labor		3				5. Enter here and in Part	4 - 1			
4a	Additional section 263A cost	s				I, line 2		7		1.02	8,100
	(attach schedule)	4	la		8		les of section 263A (with		ect to	Yes	No
b	Other costs (attach schedule)		lb		_		produced or acquired for re				
5	Total. Add lines 1 through 4b	_		8,100		to the orga	anization?				1
	dule C-Rent Income (From				rsonal	Property	Leased With Real Prop	ertv)			
	instructions)							0.137			
1. Desc	ription of property										
(1)										_	
(2)											
(3)											_
(4)											
	2. Rent	receive	ed or accrued								
(a) From personal property (if the percentage of rent (b) From real and personal property (if the						3(a) Deductions directly co	onnecte	d with the	incom	ne	
	personal property is more than 10% but n		percentage of rent	t for pe	rsonal pro	perty exceeds					
	more than 50%)	50% or if the ren	t is bas	ed on pro	ofit or income)						
(1)											
(2)											
(3)											
(4)											
Total			Total				(b) Total deductions				
(c) Tot	al income. Add totals of columns 2(a) and	2(b), Enter				 (b) Total deductions. Enter here and on page 1. 				
here ar	nd on page 1, Part I, line 6, column (A	V	a(a)				Part I, line 6, column (B)				
Sche	dule E-Unrelated Debt-Fin	ance	d Income (see	instr	uctions)					
				2.	Gross inc	ome from or	 Deductions directly conne debt-finance 			able to	2
	 Description of debt-financed 	d prope	erty	allo		debt-financed	(a) Straight line depreciation		Other ded	uction	S.
					pro	perty	(attach schedule)		ttach sche		
(1)											
(2)											
(3)											
(4)											
			adjusted basis		6. Co	olumn	7.0	8. All	ocable de	ductio	ns
	acquisition debt on or locable to debt-financed de		Illocable to nced property	1		/ided _	7. Gross income reportable (column 2 × column 6)	(column	6 × total	of colu	
pr	operty (attach schedule)		schedule)		ру со	umn 5	(colonia 2 w colonia c)		3(a) and 3	(b))	
(1)						%					
2)						%					
3)						%					
4)						%					
									ere and o line 7, co		
rotals	ividends-received deductions inclu		2.30		(*)	>					
OTOLD	nucenac_recowed deductions is al-	INON IF	2 OOLUMA S				The state of the s				

Schedule F-Interest, Ann	uities, Royalties,				janizations (se	e instruc	ctions)	
		Exempt	Controlled	Organizations				
Name of controlled organization	2. Employer identification number		lated income instructions)	4. Total of specified payments made	5. Part of column included in the organization's gr	controlling	conr	eductions directly nected with income in column 5
(1)					· .			
(2)								
(3)								
(4)							1	
Nonexempt Controlled Organiz	zations							
7. Taxable Income		B. Net unrelated income (loss) (see instructions)		9. Total of specified payments made		nn 9 that is controlling oss income	conne	Deductions directly ected with income in column 10
(1)								
(2)								
(3)								
(4)								
					Add columns 5 Enter here and c Part I, line 8, co	on page 1, olumn (A).	Enter Part I	columns 6 and 11. here and on page 1, , line 8, column (B).
Schedule G-Investment I	ncome of a Sect	ion 501(zation (see ins	tructions		
1. Description of income	2. Amount of	income	direc	Deductions on connected ach schedule)	4. Set-asides (attach schedule)		5. Total deductions and set-asides (col. 3 plus col. 4)	
(1)								
(2)								
(3)								3
(4)								
Totals	Enter here and Part I, line 9, c	olumn (A).					Part I, I	ere and on page 1, ine 9, column (B).
Schedule I-Exploited Exe	mpt Activity Inco	ome, Otr	ier Than	Advertising In	come (see inst	ructions))	
1. Description of exploited activit	2. Gross unrelated business incor from trade o business			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. (A	on Enter h page). line 1	on Enter here and on page 1, Part I, line 10, col. (B).					Enter here and on page 1, Part II, line 25.
Schedule J-Advertising In	ncome (see instruc	tions)						•
Part I Income From Po	eriodicals Report	ed on a	Consolid	dated Basis				
1. Name of periodical	2. Gross advertising income		Direct ising 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)								
(2)								
(3)								
(4)				(DEDEC ROS				
Totals (carry to Part II, line (5)) .	•							

Form 990-T (2019)

PARTS I AND II: BOOKSTORE

Form 990-T (2019)		1711(1517114	D II. DOORS	OKE		Page 5
Part II Income From Periodi 2 through 7 on a line-b		l on a Separat	e Basis (For ea	ch periodical lis	sted in Part II	, fill in columns
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I						
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 26.
Totals, Part II (lines 1-5)						
Schedule K—Compensation of (Officers, Direc	tors, and Trus	stees (see instru	ctions)		
1. Name			2. Title	3. Percent of time devoted to business	Compensation attributable t unrelated business	
(1)				%		
(2)				%		
(3)				%		
(4)				%		
Total. Enter here and on page 1, Part II, lin	e 14			N N N N N		
-						Form 990-T (2019)

University of Arkansas, Fayetteville Campus FYE 06/30/2020 71-6003252

Additional Information - Bookstore

Line 18 - Interest Expense: Boo		1,906	
(man) (man) (man)			
Line 27 - Other Deductions:			
	Computing Services support		1,879
	Insurance		19
	Travel		456
	Supplies		3,400
	Printing		50
	Contract Labor		3,404
	Mailing		1,295
	Advertising		255
	Credit card fees		2,026
	Custodial		5,081
	Rent, security, utilities		230,562
	Telephone		1
	Cable		4,390
	Miscellaneous		404
	Indirect expense		26,209
		Total	279,431

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No. 1545-0047

2019

Department of the Treasury Internal Revenue Service

University of Arkansas - Fayetteville Campus

For calendar year 2019 or other tax year beginning July 1 , 2019, and ending June 30 , 20 20 ► Go to www.irs.gov/Form990T for instructions and the latest information.

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

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

71-6003252

Unrelated Business Activity Code (see instructions) ▶

Describe the	unrelated trade or business Bus Transit System					
Part I Unre	ated Trade or Business Income		(A) Income	(B) Expens	ses	(C) Net
1a Gross rec	eipts or sales	1 1		TELLY SUBJECT	Tarana a	12 page 1
b Less returns	and allowances c Balance ▶	1c		125 317		
2 Cost of ge	oods sold (Schedule A, line 7)	2			16 17 17	
	fit. Subtract line 2 from line 1c	3		8 + E + 76=		
4a Capital ga	in net income (attach Schedule D)	4a		51 - 13		
b Net gain (oss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
	ss deduction for trusts	4c				
	oss) from a partnership or an S corporation (attach			TX III ST		
)	5		TO STATE OF		
	me (Schedule C)	6				
	debt-financed income (Schedule E)	7				
	nnuities, royalties, and rents from a controlled					
	on (Schedule F)	8				
	t income of a section 501(c)(7), (9), or (17)					
	on (Schedule G)	9				
	exempt activity income (Schedule I)	10				
	g income (Schedule J)	11				
	me (See instructions; attach schedule)	12	53,346			53,346
	mbine lines 3 through 12	13	53,346			53,346
conne	ctions Not Taken Elsewhere (See instructions for cted with the unrelated business income.) ation of officers, directors, and trustees (Schedule K					- To directly
Salaries a					14	04.004
	•	*	*: *: *: *: *: *:	*0 *0 *0 X	15	36,836
	d maintenance				16	30,184
					17	
Interest (a	tach schedule) (see instructions)	*0	E 5 E 6 E 6	## ## ## ##	18	
9 Taxes and Depreciati	licenses	• •	1 1		19	37
	on (attach Form 4562)					
	eciation claimed on Schedule A and elsewhere on re				21b	
Depletion					22	
3 Contribution	ons to deferred compensation plans				23	
# Employee	benefit programs				24	
	empt expenses (Schedule I)				25	
	dership costs (Schedule J)				26	
7 Other ded	uctions (attach schedule)				27	13,686
B Total ded	uctions. Add lines 14 through 27				28	80,743

29

30

Unrelated business taxable income before net operating loss deduction, Subtract line 28 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see

Unrelated business taxable income. Subtract line 30 from line 29

(27,397)

(27,397)

29

30

31

University of Arkansas, Fayetteville Campus FYE 06/30/2020 71-6003252

Additional Information - Schedule M: Bus Transit System

Line 12 - Other Income:			
and is other modific.	Bus advertising		39,375
	Bus charters		13,971
		Total	53,346
Line 27 - Other Deduction	s:		
Line 27 - Other Deduction	s: Insurance		1,766
Line 27 - Other Deduction			1,766 49
Line 27 - Other Deduction	Insurance		
Line 27 - Other Deduction	Insurance Supplies		49
Line 27 - Other Deduction	Insurance Supplies Printing		49 31
Line 27 - Other Deduction	Insurance Supplies Printing Rent, security, utilities		49 31 161
Line 27 - Other Deduction	Insurance Supplies Printing Rent, security, utilities Telephone		49 31 161 718

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No. 1545-0047

2019

Department of the Treasury Internal Revenue Service For calendar year 2019 or other tax year beginning July 1 , 2019, and ending June 30 , 20 20

► 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

	of the organization			Employer ident		
	rsity of Arkansas - Fayetteville Campus				71-60032	52
	nrelated Business Activity Code (see instructions) 53 escribe the unrelated trade or business Personal Property Re	mtol .				
		ntai		1		
Par	Unrelated Trade or Business Income		(A) Income	(B) Expens	es	(C) Net
1a	Gross receipts or sales					
b	Less returns and allowances c Balance ▶	1c				
2	Cost of goods sold (Schedule A, line 7)	2				IN KEY LV S
3	Gross profit. Subtract line 2 from line 1c	3				
4a	Capital gain net income (attach Schedule D)	4a				
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5		24	100	
6	Rent income (Schedule C)	6	14,392			14,392
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled					
	organization (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				
12	Other income (See instructions; attach schedule)	12				
_13	Total. Combine lines 3 through 12	13	14,392			14,392
Part	Deductions Not Taken Elsewhere (See instructions fo connected with the unrelated business income.)	r limitat	ions on deduct	ions.) (Deduction	ons must	be directly
14	Compensation of officers, directors, and trustees (Schedule K)				14	
15	Salaries and wages				15	5,311
16	Repairs and maintenance				16	46
17	Bad debts				17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses	• 500)		a destre des per	19	
20	Depreciation (attach Form 4562)				1	
21	Less depreciation claimed on Schedule A and elsewhere on re				21b	
22	Depletion				22	
23	Contributions to deferred compensation plans				23	
24	Employee benefit programs				24	
25	Excess exempt expenses (Schedule I)				25	
26	Excess readership costs (Schedule J)				26	
27	Other deductions (attach schedule)				27	5,445
28	Total deductions. Add lines 14 through 27				28	10,802
29	Unrelated business taxable income before net operating loss d				29	3,590
30	Deduction for net operating loss arising in tax years beginn					
0.4	instructions)				30	0.555
31	Unrelated business taxable income, Subtract line 30 from line	29			31	3,590

UNIVERSITY OF ARKANSAS - FAYETTEVILLE CAMPUS 71-6003252 SCHEDULE M: PERSONAL PROPERTY RENTAL

Form 990-T (2019) Page 3 Schedule A-Cost of Goods Sold. Enter method of inventory valuation ▶ Inventory at beginning of year Inventory at end of year 2 Purchases 2 Cost of goods sold. Subtract line 3 Cost of labor 6 from line 5. Enter here and in Part 3 4a Additional section 263A costs I, line 2 (attach schedule) . . . Do the rules of section 263A (with respect to 4a Yes No b Other costs (attach schedule) 4b property produced or acquired for resale) apply to the organization? 5 Total. Add lines 1 through 4b 5 Schedule C-Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions) 1. Description of property (1) Facilities Management Rental-Media Equipment and Furniture (3) (4) 3(a) Deductions directly connected with the income (a) From personal property (if the percentage of rent (b) From real and personal property (if the in columns 2(a) and 2(b) (attach schedule) for personal property is more than 10% but not percentage of rent for personal property exceeds more than 50%) 50% or if the rent is based on profit or income) (1) 14,392 (2)(3) (4) 14,392 Total Total (b) Total deductions. (c) Total income. Add totals of columns 2(a) and 2(b). Enter Enter here and on page 1, here and on page 1, Part I, line 6, column (A) 14,392 Part I, line 6, column (B) ▶ Schedule E-Unrelated Debt-Financed Income (see instructions) 3. Deductions directly connected with or allocable to 2. Gross income from or debt-financed property 1. Description of debt-financed property allocable to debt-financed (a) Straight line depreciation (b) Other deductions property (attach schedule) (attach schedule) (1)(2)(3) (4) 4. Amount of average Average adjusted basis 6. Column 8. Allocable deductions acquisition debt on or of or allocable to 7. Gross income reportable 4 divided (column 6 x total of columns allocable to debt-financed debt-financed property (column 2 × column 6) by column 5 3(a) and 3(b)) property (attach schedule) (attach schedule) (1) % (2) % (3)% (4)% Enter here and on page 1. Enter here and on page 1, Part I, line 7, column (A). Part I, line 7, column (B).

Total dividends-received deductions included in column 8

Form 990-T (2019)

Schedule F-Interest, Ann	uities, Royalties,	and Ren	ts From	Controlled Or	ganizations (se	e instru	ctions)	
		Exempt	Controlled	Organizations				
Name of controlled organization	2. Employer identification number		lated income instructions)	4. Total of specifie payments made		controlling	con	Deductions directly nected with income in column 5
(1)							1	
(2)								
(3)								
(4)								
Nonexempt Controlled Organiz	zations							
7. Taxable Income		Net unrelated income loss) (see instructions)		9. Total of specified payments made		nn 9 that is controlling oss income	conn	Deductions directly ected with income in column 10
(1)								
(2)								
(3)								
(4)								
Totals	noons of a Section		-1/71 (0)		Add columns 5 Enter here and 6 Part I, line 8, co	on page 1, olumn (A).	Enter Part	columns 6 and 11. here and on page 1, I, line 8, column (B).
Schedule G-Investment I	ncome of a Sect	ion 501(c)(/), (9),	Or (17) Organi Deductions				taral deal of
1. Description of income	2. Amount of	income	direc	ctly connected	4. Set-asides (attach schedule)			otal deductions set-asides (col. 3
(1)			(alla	ach schedule)	,			plus col. 4)
(2)								
(3)								
(4)								
Totals Schedule I - Exploited Exe	Enter here and Part I, line 9, co	olumn (A).		Advertising Ir	come (see inst		Part I,	ere and on page 1, ine 9, column (B).
*				4. Net income (loss)	(======================================			7 Evenes evempt
1. Description of exploited activit	2. Gross unrelated business incon from trade or business			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		, page). line 1	nere and on e 1, Part I, 0, col. (B).					Enter here and on page 1, Part II, line 25.
Schedule J-Advertising Ir	ncome (see instruc	tions)						
Part I Income From Pe	eriodicals Report	ed on a	Consolic	dated Basis				
1. Name of periodical	2. Gross advertising income		Direct ising 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)								1 1881 Tawayida
(2)								
3)		1						
4)								
Totals (carry to Part II, line (5)) .	•							

Form 990-T (2019)

SCHEDULE M: PERSONAL PROPERTY RENTAL

Form 990-T (2019)				FERTI KENT		Page 5
Part II Income From Periodi	cals Reported	on a Separat	e Basis (For ea	ch periodical lis	sted in Part II	, fill in columns
2 through 7 on a line-b	y-line basis.)					
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I						
	Enter here and on page 1, Part I, line 11, col. (A),	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 26.
Totals, Part II (lines 1-5)						
Schedule K—Compensation of	Officers, Direc	tors, and True	stees (see instru	ictions)		
1. Name		2	. Title	3. Percent of time devoted to business	time devoted to	
(1)				%		
(2)				%		
(3)				%		
(4)				%		
Total. Enter here and on page 1, Part II, lin	e 14	3 3 10 10 3	(a) (a) (a) (a) (a) (a)	e ar ar a 🕨		

Form 990-T (2019)

University of Arkansas, Fayetteville Campus FYE 06/30/2020 71-6003252

Additional Information - Schedule M: Personal Property Rental

	271
	3,679
	1,495
Total	5,445
	Total

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No. 1545-0047

2019

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning July 1 , 2019, and ending June 30 , 20 20

► 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

Name of the organization Employer identification number University of Arkansas - Fayetteville Campus 71-6003252 Unrelated Business Activity Code (see instructions) ▶ Describe the unrelated trade or business > Museum/Theater Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net Gross receipts or sales b Less returns and allowances Balance > 76,267 1c 2 Cost of goods sold (Schedule A, line 7) . . . 2 42,396 3 Gross profit. Subtract line 2 from line 1c. . 3 33,871 33,871 4a Capital gain net income (attach Schedule D) 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b Capital loss deduction for trusts C 4c Income (loss) from a partnership or an S corporation (attach 5 5 6 6 3,775 3,775 Unrelated debt-financed income (Schedule E) 7 7 8 Interest, annuities, royalties, and rents from a controlled 8 Investment income of a section 501(c)(7), (9), or (17) 9 organization (Schedule G) 9 Exploited exempt activity income (Schedule I) 10 10 Advertising income (Schedule J) 11 11 Other income (See instructions; attach schedule) 12 12 8,755 8,755 Total. Combine lines 3 through 12 13 13 46,401 46,401 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K) 14 15 15 55.946 16 Repairs and maintenance 16 17 17 18 Interest (attach schedule) (see instructions) 18 19 19 20 21 Less depreciation claimed on Schedule A and elsewhere on return . . . 21b 22 22 23 23 24 Employee benefit programs 24 25 Excess exempt expenses (Schedule I) 25 Excess readership costs (Schedule J) 26 26 27 27 18,849 28 Total deductions. Add lines 14 through 27 28 74,795 29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 29 (28,394)

30

31

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see

Unrelated business taxable income, Subtract line 30 from line 29

(28,394)

30

SCHEDULE M: MUSEUM/THEATER Form 990-T (2019) Page 3 Schedule A-Cost of Goods Sold. Enter method of inventory valuation ▶ Inventory at beginning of year 13,243 1 Inventory at end of year 6 15,272 2 Purchases 44,425 2 7 Cost of goods sold. Subtract line 3 Cost of labor 3 6 from line 5. Enter here and in Part 4a Additional section 263A costs I, line 2 42,396 (attach schedule) 4a Do the rules of section 263A (with respect to No Other costs (attach schedule) 4b property produced or acquired for resale) apply to the organization? 5 Total. Add lines 1 through 4b 5 57,668 V Schedule C-Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions) 1. Description of property (1) Media Equipment Rental (3) (4) 2. Rent received or accrued (a) From personal property (if the percentage of rent 3(a) Deductions directly connected with the income (b) From real and personal property (if the in columns 2(a) and 2(b) (attach schedule) for personal property is more than 10% but not percentage of rent for personal property exceeds more than 50%) 50% or if the rent is based on profit or income) (1) 3,775 (2)(3) (4)Total 3,775 Total (b) Total deductions. (c) Total income. Add totals of columns 2(a) and 2(b). Enter Enter here and on page 1, here and on page 1, Part I, line 6, column (A) 3,775 Part I, line 6, column (B) Schedule E-Unrelated Debt-Financed Income (see instructions) 3. Deductions directly connected with or allocable to 2. Gross income from or debt-financed property 1. Description of debt-financed property allocable to debt-financed (a) Straight line depreciation (b) Other deductions property (attach schedule) (attach schedule) (1) (S) (3)(4) 4. Amount of average 5. Average adjusted basis 6. Column 8. Allocable deductions acquisition debt on or of or allocable to 7. Gross income reportable 4 divided (column 6 x total of columns allocable to debt-financed debt-financed property (column 2 × column 6) by column 5 3(a) and 3(b)) property (attach schedule) (attach schedule)

%

%

%

%

Enter here and on page 1,

Part I, line 7, column (A).

(1)

(2)

(3)

(4)

Total dividends-received deductions included in column 8

Form 990-T (2019)

Enter here and on page 1.

Part I, line 7, column (B).

Page 4

Schedule F-Interest, Ann	uities, Royalties,	and Rer	Its From	Controlled Or d Organizations	ganizations (se	e instru	ctions)	
Name of controlled organization	2. Employer identification number	3. Net unre	elated income instructions)	T		controlling	con	Deductions directly nected with income in column 5
(1)					1 - 3 3		-	in column o
(2)							+	
(3)								
(4)							-	
Nonexempt Controlled Organiz	ations							
7. Taxable Income	8. Net unrelated in (loss) (see instruct			otal of specified yments made	10. Part of colur included in the organization's gr	controlling	conn	Deductions directly ected with income in column 10
(1)								
(2)								
(3)								
(4)								
Totals	in the second second	 Ion 501/	-)(7) (0)	, , , , ,	Add columns to Enter here and of Part I, line 8, co	on page 1, olumn (A).	Enter Part	columns 6 and 11. here and on page 1, I, line 8, column (B).
Schedule G-Investment I	ncome of a Sect	ion 501(c)(/), (9),	Or (17) Organ				Tetal dedication
1. Description of income	2. Amount of	income	dire	ctly connected ach schedule)	4. Set-aside (attach sched			otal deductions set-asides (col. 3 plus col. 4)
(1)								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2)								
(3)								
(4)								
Totals		olumn (A).		Advertising Ir	come (see inst	ructions	Part I,	ere and on page 1, line 9, column (B).
Description of exploited activit	2. Gross unrelated	ne conn prod ur	Expenses lirectly ected with duction of nrelated ess income	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	penses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)					-			
(2)								
(4)								
Totals		, page), line 1	nere and on e 1, Part I, 0, col. (B).					Enter here and on page 1, Part II, line 25.
Schedule J-Advertising In	come (see instruc	tions)						
Part I Income From Pe	riodicals Report	ed on a	Consolic	lated Basis				
1. Name of periodical	2. Gross advertising income		Direct ising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Read cos		7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)								THE STATE OF THE S
2)								
3)								
4)				TAR SHAPE				
Totals (carry to Part II, line (5)) .	>							

Form 990-T (2019)

SCHEDULE M: MUSEUM/THEATER

Page 5

Part II Income From Periodi 2 through 7 on a line-b	y-line basis.)	on a Separat	e Basis (For ea	ich periodical li	sted in Part I	l, fill in columns
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation Income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(8)						
(3)						
(4)						
Totals from Part I					SEL LIVE	8
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 26,
Totals, Part II (lines 1-5)						
Schedule K—Compensation of	Officers, Direc	tors, and Trus	stees (see instru	ctions)		
1. Name			. Title	3. Percent of time devoted to business	4. Compensa unrelat	tion attributable to ed business
(1)				%		
(2)				%		
(3)				%		
(4)				%		
Total. Enter here and on page 1, Part II, lin	e 14	e ce je e e e	6 6 6 6 6			

Form **990-T** (2019)

University of Arkansas, Fayetteville Campus FYE 06/30/20 71-6003252

Additional Information - Schedule M: Museum/Theater

Line 12 - Other Income:		
	Commissions	3
	Garvan Gardens Sponsorship with Benefits	8,72
	Total	8,75
,		
Line 27 - Other Deductions:		
Line 27 - Other Deductions:	Supplies	1,52
Line 27 - Other Deductions:	Supplies Custodial	1,52 ⁻ 7:
Line 27 - Other Deductions:	100 to 10	•
Line 27 - Other Deductions:	Custodial	7:
Line 27 - Other Deductions:	Custodial Rent, security, utilities	7: 10