

Form **990-T****Exempt Organization Business Income Tax Return**
(and proxy tax under section 6033(e))

OMB No 1545-0687

1805 2017

Department of the Treasury
Internal Revenue Service

For calendar year 2017 or other tax year beginning June 1, 2017, and ending May 31, 2018

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

A Check box if address changed B Exempt under section ☒ 501(c)(3) ☐ 408(e) ☐ 220(e) ☐ 408A ☐ 530(a) ☐ 529(a) C Book value of all assets at end of year 16,002,640	Print or Type Name of organization (☐ Check box if name changed and see instructions) Maryville College Number, street, and room or suite no. If a P.O. box, see instructions 502 East Lamar Alexander Parkway City or town, state or province, country, and ZIP or foreign postal code Maryville, TN 37804	D Employer identification number (Employees' trust, see instructions) 62-0475691
		E Unrelated business activity codes (See instructions) 711310 525990
		F Group exemption number (See instructions.) ▶
		G Check organization type ▶ ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust

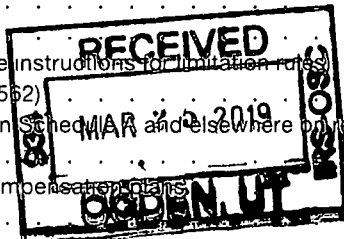
H Describe the organization's primary unrelated business activity. ▶ **Civic and performing arts center ; alternative investments****I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ ☐ Yes ☒ No
If "Yes," enter the name and identifying number of the parent corporation. ▶**J** The books are in care of ▶ **Julie Ramsey, Controller**Telephone number ▶ **(865) 981-8246****Part I Unrelated Trade or Business Income**

	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales 304,605			
b Less returns and allowances 0			
c Balance ▶	1c 304,605		
2 Cost of goods sold (Schedule A, line 7)	2 6,877		
3 Gross profit Subtract line 2 from line 1c	3 297,728		297,728
4a Capital gain net income (attach Schedule D)	4a 0		0
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b 0		0
c Capital loss deduction for trusts	4c 0		0
5 Income (loss) from partnerships and S corporations (attach statement)	5 (21,157)		(21,157)
6 Rent income (Schedule C)	6 165,839	90,188	75,651
7 Unrelated debt-financed income (Schedule E)	7 0	0	0
8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	8 0	0	0
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9 0	0	0
10 Exploited exempt activity income (Schedule I)	10 0	0	0
11 Advertising income (Schedule J)	11 0	0	0
12 Other income (See instructions, attach schedule)	12 0		0
13 Total. Combine lines 3 through 12	13 442,410	90,188	352,222

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)	14 0
15 Salaries and wages	15 429,319
16 Repairs and maintenance	16 463,455
17 Bad debts	17 126
18 Interest (attach schedule)	18 0
19 Taxes and licenses	19 34,085
20 Charitable contributions (See instructions for limitation rules)	20 0
21 Depreciation (attach Form 4562)	21 144,279
22 Less depreciation claimed on Schedule A and elsewhere on return	22a 0
23 Depletion	23 0
24 Contributions to deferred compensation plans	24 9,433
25 Employee benefit programs	25 47,853
26 Excess exempt expenses (Schedule I)	26 0
27 Excess readership costs (Schedule J)	27 0
28 Other deductions (attach schedule)	28 959,597
29 Total deductions. Add lines 14 through 28	29 2,088,147
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30 (1,735,925)
31 Net operating loss deduction (limited to the amount on line 30)	31 0
32 Unrelated business taxable income before specific deduction Subtract line 31 from line 30	32 (1,735,925)
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	33 0
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34 (1,735,925)

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Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here ☐ See instructions and		
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order) (1) \$ <u>0</u> (2) \$ <u>0</u> (3) \$ <u>0</u>		
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ <u>0</u> (2) Additional 3% tax (not more than \$100,000) \$ <u>0</u>		
c Income tax on the amount on line 34	35c	<u>0</u>
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from ☐ Tax rate schedule or ☐ Schedule D (Form 1041)	36	<u>0</u>
37 Proxy tax. See instructions	37	<u>0</u>
38 Alternative minimum tax	38	<u>0</u>
39 Tax on Non-Compliant Facility Income. See instructions	39	<u>0</u>
40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies	40	<u>0</u>

Part IV Tax and Payments

41a Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	41a	<u>0</u>
b Other credits (see instructions)	41b	<u>0</u>
c General business credit. Attach Form 3800 (see instructions)	41c	<u>0</u>
d Credit for prior year minimum tax (attach Form 8801 or 8827)	41d	<u>0</u>
e Total credits. Add lines 41a through 41d	41e	<u>0</u>
42 Subtract line 41e from line 40	42	<u>0</u>
43 Other taxes. Check if from ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule)	43	<u>0</u>
44 Total tax. Add lines 42 and 43	44	<u>0</u>
45a Payments: A 2016 overpayment credited to 2017	45a	<u>0</u>
b 2017 estimated tax payments	45b	<u>0</u>
c Tax deposited with Form 8868	45c	<u>0</u>
d Foreign organizations. Tax paid or withheld at source (see instructions)	45d	<u>0</u>
e Backup withholding (see instructions)	45e	<u>0</u>
f Credit for small employer health insurance premiums (Attach Form 8941)	45f	<u>0</u>
g Other credits and payments: ☐ Form 2439 ☐ Form 4136 ☐ Other <u> </u> Total	45g	<u>0</u>
46 Total payments. Add lines 45a through 45g	46	<u>0</u>
47 Estimated tax penalty (see instructions). Check if Form 2220 is attached ☐	47	<u>0</u>
48 Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed	48	<u>0</u>
49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	49	<u>0</u>
50 Enter the amount of line 49 you want Credited to 2018 estimated tax Refunded	50	<u>0</u>

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51 At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here <u>Cayman Islands</u>	Yes	No
52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		✓
53 Enter the amount of tax-exempt interest received or accrued during the tax year <u>\$ 0</u>		

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer [Signature]Date 3-5-2019Title VP For Finance and AdministrationMay the IRS discuss this return with the preparer shown below (see instructions)? ☐ Yes ☒ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name	Firm's EIN			
Firm's address	Phone no			

Schedule A—Cost of Goods Sold. Enter method of inventory valuation ►

1 Inventory at beginning of year	1	3,481	6 Inventory at end of year	6	3,438
2 Purchases	2	6,834	7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	6,877
3 Cost of labor	3	0	8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a Additional section 263A costs (attach schedule)	4a	0			
b Other costs (attach schedule)	4b	0			
5 Total. Add lines 1 through 4b	5	10,315			✓

Schedule C—Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property		
(1) Civic and performing arts center theatre and space rental for various events		
(2)		
(3)		
(4)		
2. Rent received or accrued		
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1) 0	165,839	90,188
(2)		
(3)		
(4)		
Total 0	Total 165,839	
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ►
165,839		90,188

Schedule E—Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 × column 6)	8. Allocable deductions (column 6 × total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B).
Totals				
Total dividends-received deductions included in column 8				

Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. 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)					

Nonexempt Controlled Organizations

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. 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 page 1,
Part I, line 8, column (A)

Add columns 6 and 11
Enter here and on page 1,
Part I, line 8, column (B)

Totals**Schedule G—Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				

Enter here and on page 1,
Part I, line 9, column (A)

Enter here and on page 1,
Part I, line 9, column (B)

Totals**Schedule I—Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business 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. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						

Enter here and on
page 1, Part I,
line 10, col (A)

Enter here and on
page 1, Part I,
line 10, col (B)

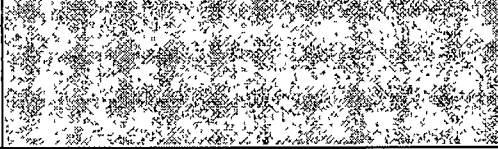
Enter here and
on page 1,
Part II, line 26

Totals**Schedule J—Advertising Income** (see instructions)**Part I Income From Periodicals Reported on a Consolidated 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 (carry to Part II, line (5))

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-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 27
Totals, Part II (lines 1–5)						

Schedule K—Compensation of Officers, Directors, and Trustees (see instructions)

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

MARYVILLE COLLEGE CLAYTON CENTER FOR THE ARTS		
Form 990-T Schedules		
EIN: 62-0475691		
		Year End
		<u>5/31/2018</u>
Form 990-T		
Part II Line 28 Other Deductions:		
	Advertising expense	70,295
	Artist fees	255,420
	Legal & professional fees	1,055
	Meals & entertainment	5,438
	Memberships & meetings	4,904
	Nonemployee compensation	61,027
	Office expense	16,326
	Property rental	360,000
	Small tools & equipment	16,910
	Supplies	14,192
	Travel	15,042
	Utilities	138,988
	Total other deductions line 28	959,597

MARYVILLE COLLEGE CLAYTON CENTER FOR THE ARTS					
Form 990-T Schedules					
EIN: 62-0475691					
		Year End			
		<u>5/31/2018</u>			
Form 990-T					
Schedule C Line 3(a) Deductions directly connected with income:					
	Alcoholic Beverages	\$1,431			
	Assistant Technical Director	\$600			
	Audio Technician	\$500			
	Bartenders	\$1,100			
	Equipment Rental	\$294			
	Event Manager	\$9,093			
	Event Setup - Partner	\$725			
	House Manager	\$50			
	Lighting Engineer	\$900			
	Miscellaneous	\$150			
	Police Officer	\$1,172			
	Porter/Cleaning Services	\$11,793			
	Security	\$19,988			
	Shuttle	\$1,800			
	Stagehand	\$794			
	Technical Director	\$8,580			
	Technical Services (Basic)	\$5,514			
	Ticket Sales	\$100			
	A La Carte Items	\$2,729			
	Cafeteria Meals- Lunch	\$805			
	Catered - Supper	\$9,160			
	Catered- Breakfast	\$1,500			
	Catered- Lunch	\$9,937			
	Equipment Rental	\$272			
	Labor	\$480			
	Refreshment Break - AM	\$681			
	Refreshment Break - PM	\$40			
	Total	\$90,188			