		1					. , , ,	1			
	Exempt Organization Business Income Tax Return							OMB No 1545-0687			
Form	(and proxy tax under section 6033(e))										
•	For calendar year 2018 or other tax year beginning June 1 , 2018, and ending May 31 , 20 19 .								, 20 18		
Departn	Department of the Treasury So to www.irs.gov/Form990T for instructions and the latest information.									Public Inspect	ioo fa
	ternal Revenue Service Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).) Organization	s Only
<u>A 🗆 :</u>	address changed									ntification nu ust, see instruc	
	npt under section	Freed-Hardeman University									,uons j
	501(C) 03) Number, street, and room or suite no. If a PO box, see instructions									518288 iness activity	
☐ 40		Туре	158 E Main St						nstructio		code
_	408A										
C Book	29(a) cyalue of all assets nd of year	E G	Henderson, TN 38340 roup exemption number (See instruction	nc \ \			•		43	1211	
at en	id of year		neck organization type F 501(c) c		on \square	501(c) tru	ıst 🗆	401(a)	trust	☐ Other	trust
H Fr			organization's unrelated trades or busin			wo				irst) unrelat	
			Religious Bookstore				_		-		
			at the end of the previous sentence, of	omplete	Parts I ar	nd II. com	nolete a S	schedule	M for	each addi	itiona
			omplete Parts III-V.	ompioto.		,				040444.	
			e corporation a subsidiary in an affiliated	aroup or a	a parent-su	bsidiary c	ontrolled o	roup? .	. •	☐ Yes 🔽	1 No
			and identifying number of the parent c				5 o g	. очр	• •		,
			Richard Taylor, Jr			Telepho	ne numbe	er ▶	73	31-989-6006	,
			e or Business Income		(A) In			kpenses		(C) Net	
1a	Gross receipts	or sale	es 309,360				٠ .			. 7.1	
b	Less returns and a	allowance	es c Balance	► 1c	309	,360	i	" ·		• ' !	
2	Cost of goods	sold (S	Schedule A, line 7)	2	209	,846					
3	Gross profit. S	ubtrac	t line 2 from line 1c	3	99	,514					
4a	Capital gain ne	et incor	me (attach Schedule D)	4a			l .				
b	Net gain (loss)	(Form	4797, Part II, line 17) (attach Form 4797) 4b			-				
C	•		n for trusts				ļ				
5	, ,	-	tnership or an S corporation (attach stateme	·							
6	· ·		ıle C)		ļ						
7			ced income (Schedule E)		ļ		ļ				
8			and rents from a controlled organization (Schedul								
9			ction 501(c)(7), (9), or (17) organization (Schedule								<u> </u>
10	•	•	ivity income (Schedule I)						_ -		<u> </u>
11	Advertising inc	-			ļ		ļ.,	 			
12			tructions; attach schedule)	12			ļ				
13 Part			3 through 12			,514) (F	46	4 - 15	99,514	
rait			Taken Elsewhere (See instructions be directly connected with the unrel				ons.) (Exc	ept for (contrib	utions,	
14			cers, directors, and trustees (Schedute			one.,		14	4		
15	Salaries and w		RECE	NA COL					5	86,155	
16		•		1. 2010	. 101 .			<u> </u>	6	3,770	-
17	Bad debts .		i lel oct I	1. 2019	18			_	7		
18	Interest (attach	sched	lule) (see instructions) . R					_	8		
19	Taxes and lice	nses .	dule) (see instructions)	ENL	اسسله			_	9	1,256	
20			ons (See instructions for limitation rules)				<u> </u>	0		
21			Form 4562)	•	2	1					
22	Less depreciat	ion cla	imed on Schedule A and elsewhere on	return .	22	la l		2	2b	ļ	
23	Depletion	`			.			. 2	3		
24	Contributions t	to defe	rred compensation plans					_	4		
25			grams						5	16,155	
26			nses (Schedule I)						:6		
27			sts (Schedule J)						7		
28			ach schedule)						8	38,610	
29			dd lines 14 through 28						9	145,946	
30			xable income before net operating loss						0	(46,432)	
31			ating loss arising in tax years beginning of		January 1,	2018 (see	nstructio	· -	1	9	
32	Unrelated husi	nace to	vable income. Subtract line 31 from lin	20				1 2	2	(44 422)	1

1	age	2

							-3-
Part	III T	otal Unrelated Business Taxable Income					
33	Total o	f unrelated business taxable income computed from all unrelated trade	s or businesses (s	ee			
•	instruct	tions)			33	0	1
34	Amoun	ts paid for disallowed fringes			34		
35		ion for net operating loss arising in tax years beginning before Ja			 		
33		tions)	CC	25			
		•	35		∔ -		
36		f unrelated business taxable income before specific deduction. Subtract	line 35 from the su	ım			ļ
	of lines	33 and 34			36		<u>L</u>
37	Specific	c deduction (Generally \$1,000, but see line 37 instructions for exceptions		37			
38	Unrela	ted business taxable income. Subtract line 37 from line 36. If line 37 is	greater than line 3	36,			
		ne smaller of zero or line 36			38	0	,
Part		ax Computation					
	_	<u> </u>		_	39		_
39		zations Taxable as Corporations. Multiply line 38 by 21% (0.21)		>	39		├
40		Taxable at Trust Rates. See instructions for tax computation		on			
	tne am	ount on line 38 from: Tax rate schedule or Schedule D (Form 104	1)		40		ļ
41	Proxy t	tax. See instructions		▶	41		
42	Alterna	tive minimum tax (trusts only)			42		
43	Tax on	Noncompliant Facility Income. See instructions			43		
44		Add lines 41, 42, and 43 to line 39 or 40, whichever applies			44	0	
Part		ax and Payments					
45a			45a				т—
	-	· · ·					
			45b				ł
С		` '	45c		}		1
d		· · · · · · · · · · · · · · · · · · ·	45d				l
е	Total c	redits. Add lines 45a through 45d			45e		<u> </u>
46	Subtrac	ct line 45e from line 44		46			
47	Other ta	xes. Check if from: Grown 4255 Grown 8611 Grown 8697 Grown 8866 Grown 8697 Rorm 8866 Grown 8697 Grown 8866 Grown 8697 Grown 8866 Grown 8697 Grown 8697 Grown 8866 Grown 8697 Gro		47			
48		ax. Add lines 46 and 47 (see instructions)			48		
		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (49		
		· ·	50a		 		
	_				1		
		' '	50b				
		-	50c				
	_	9	50d				
е	Backup	withholding (see instructions)	50e				
f	Credit f	or small employer health insurance premiums (attach Form 8941) .	50f				
g	Other o	redits, adjustments, and payments: Form 2439					
_	☐ Form	1 4136 ☐ Other ☐ Total ►	50g				1
		ayments. Add lines 50a through 50g	· · · · ·		51		ł
52		ed tax penalty (see instructions). Check if Form 2220 is attached		П	52		
		e. If line 51 is less than the total of lines 48, 49, and 52, enter amount ow			53	0	\vdash
		yment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount ow					
	•	•			54		├ ──
		amount of line 54 you want: Credited to 2019 estimated tax	Refunded	<u> </u>	55		Ь
Part \		atements Regarding Certain Activities and Other Information	 			,	
56	At any	time during the 2018 calendar year, did the organization have an interest	t in or a signature o	or ot	her authority	Yes	No
		inancial account (bank, securities, or other) in a foreign country? If "Yes					1
	FinCEN	Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," en	ter the name of the	e for	eign country	/ l	
		Belglum				\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
		he tax year, did the organization receive a distribution from, or was it the grantor	of or transferor to a	fore	ian truet?	- 	V
	_	" see instructions for other forms the organization may have to file.	01, 01 (141101010101 10, 2	1010	agn trust: .		
_58	Linter (f	ne amount of tax-exempt interest received or accrued during the tax year penalties of perjury, I declare that I have examined this return, including accompanying schedules	and statements and to the	o b	المادة مناسبة المام	70 577 5	lunt it is
Sign	true, co	penames of perjury, i declare that i have examined this return, including accompanying schedules a prect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which	and statements, and to th h preparer has anv knowle	e dae .	t of my knowled	ye and bê	uer, ICIS
_	l			- 3-	May the IRS d		
Here		reface fayler f. 10/4/19 Financial Ana	lyst		with the prepa (see instruction:		
	Signatu	re of officer Date Title			,	U.es	□
Paid		Print/Type preparer's name Preparer's signature	Date	Chr	eck 🗆 if	PTIN	
				,	-employed		
Prepa		Firm's name ▶		! 	n's EIN ▶		
Use C	nly	Firm's address >		15111	I S EIIN		

-0			
nd of year	6	165,987	7
ods sold. Subtract	; [
ne 5. Enter here and	·		
2	7	209,986	5
of section 263A (w	ith respec	ct to Yes	No
luced or acquired fo			
ation?			1
ased With Real Pr	operty)		
3(a) Deductions direction in columns 2(a) ar			me
		•	
(b) Total deductions.			
Enter here and on page Part I, line 6, column (E			
	nced propert	ty	
 Straight line depreciation (attach schedule) 		other deduction tach schedule	
	 		
	—		
. Gross income reportable (column 2 × column 6)	(column	ocable deductr 6 × total of co 3(a) and 3(b))	
iter here and on page 1 art I, line 7, column (A).			
	I, line 7, column (A).	I, line 7, column (A). Part I, i	I, line 7, column (A). Part I, line 7, column

Schedule F-Interest, Ann	luities, Royalties,			Organizations	janizations (se	e instruc	tions)		
Name of controlled organization	2. Employer identification number	3. Net unrelated incom (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)	<u> </u>								
Nonexempt Controlled Organi	zations				.,				
7. Taxable Income	8. Net unrelated in (loss) (see instruct			otal of specified yments made	10. Part of column 9 that is included in the controlling organization's gross income		connected with income in		
(1)									
(2)									
(3)									
(4)									
Totals				1	Add columns 5 Enter here and columns 7 Part I, line 8, columns	on page 1, olumn (A)	Enter h Part I,	columns 6 and 11 nere and on page 1, line 8, column (B).	
Schedule G-Investment	Income of a Sect	ion 501(c)(7), (9),	or (17) Organi	zation (see ins	tructions)		
1. Description of income	2. Amount o			Deductions ctly connected- ach schedule)	4. Set-aside (attach sched		and s	otal deductions set-asides (col. 3 plus col. 4)	
(1)						1			
(2)									
(3)									
(4)									
Totals	Enter here and Part I, line 9, c	olumn (A)					Part I, III	re and on page 1, ne 9, column (B).	
Schedule I—Exploited Exc	empt Activity Inc	ome, Otl	her Than	Advertising In	come (see inst	tructions)		
. 1. Description of exploited activ	2. Gross unrelated business inco from trade of business	me conr prod	Expenses directly nected with duction of nrelated less 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 attribut colui	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, pag	here and on e 1, Part I, 10, col (B)					Enter here and on page 1, Part II, line 26	
Schedule J-Advertising I	ncome (see instruc	ctions)		X4.275.437	1444 1877 (9, + A, 441) VANDE	\$50 4. Pr 41 / J.	15.045.41 8 (30.17)	<u> </u>	
	eriodicals Repor		Consoli	dated Basis					
				4. Advertising				7. Excess readership	
1. Name of periodical	2. Gross advertising income	I 3 Direct		gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Read		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 Periodi 2 through 7 on a line-b	•	on a Separat	e Basis (For ea	ach periodical I	isted 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				Comment of the second		
Totals, Part II (lines 1–5)	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
Schedule K—Compensation of	Officers, Direc	tors. and Tru	stees (see instru	uctions)	A CONTRACTOR OF THE CONTRACTOR	· · · · · · · · · · · · · · · · · · ·
1. Name		· · · · · · · · · · · · · · · · · · ·	2. Title	3. Percent of time devoted to business		on attributable to d business
(1)				9	6	
(2)				9	6	
(3)				9	6	
(4)				9	6	
Total. Enter here and on page 1, Part II, lir	ne 14				<u> </u>	

Form **990-T** (2018)

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No. 1545-0687

Department of the Treasury Internal Revenue Service

For calendar year 2018 or other tax year beginning______, 2018, and ending _____, 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 Employer identification number Freed-HArdeman University 62-0518288 Unrelated business activity code (see instructions) ▶ 531120 Describe the unrelated trade or business ▶ Lease of 50% of building to other universities and a non-profit Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net Gross receipts or sales Less returns and allowances c Balance ▶ b 1c 2 Cost of goods sold (Schedule A, line 7) . . . 2 3 Gross profit. Subtract line 2 from line 1c. . . 3 Capital gain net income (attach Schedule D) 4a 4a ь Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b 4c 5 Income (loss) from a partnership or an S corporation (attach statement) 5 6 Rent income (Schedule C) 6 119,181 7 7 Unrelated debt-financed income (Schedule E) Interest, annuities, royalties, and rents from a controlled 8 8 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 Exploited exempt activity income (Schedule I) 10 10 Advertising income (Schedule J) 11 11 12 Other income (See instructions; attach schedule) 12 102,172 13 Total. Combine lines 3 through 12 13 221.353 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 15 Salaries and wages 15 48.507 16 16 22,064 17 17 18 Interest (attach schedule) (see instructions) 18 19 19 2,378 20 Charitable contributions (See instructions for limitation rules) 20 21 21 22 Less depreciation claimed on Schedule A and elsewhere on return . 23 23 24 Contributions to deferred compensation plans 24 25 23,494 26 26 27 Excess readership costs (Schedule J) 27 28 Other deductions (attach schedule) 156,329 28 29 Total deductions. Add lines 14 through 28 29 252,772 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 (31,419)Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see 31 32 Unrelated business taxable income. Subtract line 31 from line 30 (31.419)

Freed-Hardeman University Year Ended May 31, 2019 Form 990–T

Part II, Line 28

	<u> Page 1</u>	<u>Sch M</u>
Postage and Shipping	\$ 637	\$
Travel and Food	\$ 4,904	\$
Electricity	\$ 3,790	\$ 81,308
Gas and Water	\$ 1,123	\$ 34,546
Property Insurance	\$ 1,451	\$ 8,484
Service Contracts	\$ 3,767	\$ 10,080
Event Expense	\$	\$ 1,125
Credit Card Fees	\$ 4,556	\$ 1,866
Administrative Expense	\$ 15,468	\$ 11,068
Supplies and Misc.	\$ 2,914	\$ <u>7,852</u>
Total Other Deductions	\$ 38,610	\$ 156,329