

Form **990-T**

Extended to May 15, 2019  
**Exempt Organization Business Income Tax Return**  
 (and proxy tax under section 6033(e))

OMB No 1545-0687

**2017**For calendar year 2017 or other tax year beginning JUL 1, 2017 and ending JUN 30, 2018Go to [www.irs.gov/Form990T](http://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

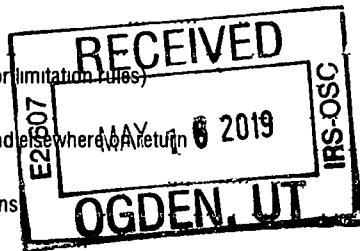
Department of the Treasury  
Internal Revenue Service

<b>A</b> <input type="checkbox"/> Check box if address changed  <b>B</b> Exempt under section <input checked="" type="checkbox"/> 501(c)(03) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)	Print or Type	Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.) <b>Trustees of Saint Joseph's College</b> <b>Saint Joseph's College of Maine</b>	<b>D</b> Employer identification number (Employees' trust, see instructions) <b>01-0212542</b>
		Number, street, and room or suite no. If a P.O. box, see instructions. <b>278 Whites Bridge Road</b>	<b>E</b> Unrelated business activity codes (See instructions) <b>713940</b>
		City or town, state or province, country, and ZIP or foreign postal code <b>Standish, ME 04084-5263</b>	
		<b>C</b> Book value of all assets at end of year <b>66,564,108.</b>	
<b>F</b> Group exemption number (See instructions.) <input type="checkbox"/>		<b>G</b> Check organization type <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust	

H Describe the organization's primary unrelated business activity. **See Statement 1**
 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 **Karen A. Shea** Telephone number **(207) 893-7733**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales <b>653,654.</b>			
b	Less returns and allowances			
c	Balance	<b>653,654.</b>		
2	Cost of goods sold (Schedule A, line 7)			
3	Gross profit. Subtract line 2 from line 1c	<b>653,654.</b>		<b>653,654.</b>
4a	Capital gain net income (attach Schedule D)			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
c	Capital loss deduction for trusts			
5	Income (loss) from partnerships and S corporations (attach statement)			
6	Rent income (Schedule C)			
7	Unrelated debt-financed income (Schedule E)			
8	Interest, annuities, royalties, and rents from controlled organizations (Sch. F)			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			
10	Exploited exempt activity income (Schedule I)			
11	Advertising income (Schedule J)			
12	Other income (See instructions; attach schedule) <b>Statement 2</b>	<b>10,359.</b>		<b>10,359.</b>
13	<b>Total.</b> Combine lines 3 through 12	<b>664,013.</b>		<b>664,013.</b>

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	Salaries and wages	<b>341,951.</b>
16	Repairs and maintenance	
17	Bad debts	
18	Interest (attach schedule)	<b>22,827.</b>
19	Taxes and licenses	
20	Charitable contributions (See instructions for limitation rules)	
21	Depreciation (attach Form 4562)	<b>52,250.</b>
22	Less depreciation claimed on Schedule A and elsewhere on return	
23	Depletion	
24	Contributions to deferred compensation plans	
25	Employee benefit programs	
26	Excess exempt expenses (Schedule I)	
27	Excess readership costs (Schedule J)	
28	Other deductions (attach schedule)	
29	<b>Total deductions.</b> Add lines 14 through 28	<b>266,202.</b>
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	<b>683,230.</b>
31	Net operating loss deduction (limited to the amount on line 30)	<b>19,217.</b>
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	<b>-19,217.</b>
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	<b>1,000.</b>
34	<b>Unrelated business taxable income.</b> Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	<b>-19,217.</b>



See Statement 3

See Statement 4

See Statement 5

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**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation **N/A**

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

(2)

(3)

(4)

2. Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(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)	
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) **0.**

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) **0.**

**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 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		

Totals	Enter here and on page 1, Part I, line 7, column (A) <b>0.</b>	Enter here and on page 1, Part I, line 7, column (B) <b>0.</b>
Total dividends-received deductions included in column 8	<b>0.</b>	<b>0.</b>

**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)
<b>Totals</b>			0.	0.

**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)
<b>Totals</b>		0.		0.

**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
<b>Totals</b>		0.	0.			0.

**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)						
<b>Totals (carry to Part II, line (5))</b>		0.	0.			0.

Trustees of Saint Joseph's College

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**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)						
<b>Totals from Part I</b>	<b>0.</b>	<b>0.</b>				<b>0.</b>
<b>Totals, Part II (lines 1-5)</b>	<b>0.</b>	<b>0.</b>				<b>0.</b>

**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)		%	
<b>Total. Enter here and on page 1, Part II, line 14</b>			<b>0.</b>

Form 990-T (2017)

Form 990-T	Description of Organization's Primary Unrelated Business Activity	Statement 1
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Facility service fees to the community for aquatics usage and event space rental.

To Form 990-T, Page 1

Form 990-T	Other Income	Statement 2
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Description	Amount
Amounts paid for disallowed fringes	10,359.
Total to Form 990-T, Page 1, line 12	10,359.

Form 990-T	Interest Paid	Statement 3
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Description	Amount
Interest	22,827.
Total to Form 990-T, Page 1, line 18	22,827.

Form 990-T	Other Deductions	Statement 4
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Description	Amount
Other Expenses	266,202.
Total to Form 990-T, Page 1, line 28	266,202.

Form 990-T	Net Operating Loss Deduction			Statement	5
Tax Year	Loss Sustained	Loss Previously Applied	Loss Remaining	Available This Year	
06/30/00	97,357.	0.	97,357.	97,357.	
06/30/01	112,136.	0.	112,136.	112,136.	
06/30/02	84,872.	0.	84,872.	84,872.	
06/30/03	66,015.	0.	66,015.	66,015.	
06/30/04	58,858.	0.	58,858.	58,858.	
06/30/05	61,132.	0.	61,132.	61,132.	
06/30/06	86,568.	0.	86,568.	86,568.	
06/30/07	177,655.	0.	177,655.	177,655.	
06/30/08	114,433.	0.	114,433.	114,433.	
06/30/09	76,039.	0.	76,039.	76,039.	
06/30/10	71,898.	0.	71,898.	71,898.	
06/30/11	64,937.	0.	64,937.	64,937.	
06/30/12	68,489.	0.	68,489.	68,489.	
06/30/13	53,516.	0.	53,516.	53,516.	
06/30/14	53,961.	0.	53,961.	53,961.	
06/30/15	75,303.	0.	75,303.	75,303.	
06/30/16	83,386.	0.	83,386.	83,386.	
06/30/17	125,706.	0.	125,706.	125,706.	
NOL Carryover Available This Year			1,532,261.	1,532,261.	