Form	990-T	E	empt Organizat			siness Inco der section				ОМ	B No 1545-0687
. 0		For cale	dario prox ndar year 2018 or other tax ye						406	4	∂ M 10
D		ror cale	Go to www.irs.gov/F						, 20	-	<u> </u>
	ment of the Treasury I Revenue Service	▶ Do	not enter SSN numbers on th						1(c)(3)	Open to	Public Inspection for 3) Organizations Only
A	Check box if address changed					me changed and see			D En	nployer ident	ification number see instructions)
B Exe	mpt under section		BRYANT UNIVERSI	YT							
X	501(C)(\infty \infty	Print	Number, street, and room or s	suite no l	fa P O	box, see instructions	;		05-	-0258810	ס
	408(e) 220(e)	Type									ness activity code
	408A 530(a)	.,,,,,	1150 DOUGLAS PI	KE			_			e instructions)	
	529(a)		City or town, state or province	e, country	y, and a	ZIP or foreign postal c	ode				
	k value of all assets nd of year		SMITHFIELD, RI	0291	7-12	84			520	0000	
	-		up exemption number (See			_		······································		_	
	05,943,499.		ck organization type 🕨				501(c) trust	401	(a) trust	Other trust
			nization's unrelated trades o	r busine	sses	<u>3</u>		Descr	be the o	nly (or first)	unrelated
	ide or business her	_						complete Part			e, describe the
	· .		end of the previous senter	nce, cor	nplete	Parts I and II, com	plete a S	ichedule M for e	each add	tional	
	ide or business, the						 -			1	
	-		corporation a subsidiary in		-		bsidiary (controlled group	⁹ ···	▶ l	Yes X No
			identifying number of the particle. BARRY F. MORRI				Tolonbon	ne number ▶ 4	01-23	2-6017	
			or Business Income	3014,	CFA	(A) Incom		(B) Exp		1	(C) Net
			Dusiness income		Ι	(A) IIICOIII		(6) CXP	CIISCS		7 1
b	Gross receipts or s			alance 🕨	1c			1 . ^			` .
2			ule A, line 7)		2						
3			2 from line 1c		3		_	-		,	
4a			ttach Schedule D)		4a	169	724.			•	169,724.
b			Part II, line 17) (attach Form 47		4b				3	_	
c			rusts		4c		_	-3-		_	
5			an S corporation (attach statement)		5	131,	880.	ATCH	1		131,880.
6					6						
7			come (Schedule E)		7						
8	Interest, annuities, roya	ilties, and re	nts from a controlled organization (So	chedule F)	8						
9	Investment income of a	section 50	(c)(7), (9), or (17) organization (Sci	hedule G)	9						
10	Exploited exempt	activity in	ncome (Schedule I)		10						
11	Advertising incom	e (Sched	ule J)		11						
12	Other income (Se	e instruc	tions, attach schedule)		12			7. 11		. `,	
13			ough 12		13		604.	<u> </u>			301,604.
Par			Taken Elsewhere (Se					-	(Excep	ot for cont	ributions,
			be directly connected								
14	Compensation of	officers,	directors, and trustees (School	SHE SHE)FI	VED··· ·			· · · ·	4	22,685.
15	Salaries and wage	s	onectors, and trustees (SCI)					• • • • • • •	. –	5	22,663.
16	repairs and main	terrance		300	21	Should Inch			–	7	
17 18	Interest (attach se			. ببب	. ~ . ÷			ATCH 2	· · · —	8	3,852.
19					<u></u>		• • • •	. ,,,,,,,,,,,		9	470.
20	Charitable contrib	utions (S	Gee instructions for limitation	とのり	FN	<u>; Ul · · · · · </u>			· · ·	20	7,041.
21		•	4562)	•		· · · · · · · · · · · · · · · · · · ·			• • • •		
22			on Schedule A and elsewhe						2	2b	
23	•									23	
24			compensation plans							24	
25										25	7,940.
26			Schedule I)							26	
27			chedule J)							7	
28			chedule)						_ [28	80,356.
29			s 14 through 28,							9	122,344.
30			le income before net op							0	179,260.
31	Deduction for net	operatin	g loss arising in tax years t	oeginnin	g on c	or after January 1, 2	2018 (see	•		31	. 7 3
32			income Subtract line 31 f	rom line	30 .	<u> </u>	<u></u>	<u> </u>	<u>.31. [3</u>	2	179,260.
For P	aperwork Reducti	on Act N	otice, see instructions.					=	-	F	orm 990-T (2018)
U.L. 41) ¹ 53518N M20	W					į	56294			

Form	990-T (2				Page 2
Par	t III	Total Unrelated Business Taxable Income			
33	Total	of unrelated business taxable income computed from all unrelated trades or businesses (se	e		
	ınstruc	tions)	. 33	18	9,032.
34	Amoun	ts paid for disallowed fringes	. 34		
35	Deduct	ion for net operating loss arising in tax years beginning before January 1, 2018 (see	a		
	ınstruc	tions)	. 35	12	4,666.
36		of unrelated business taxable income before specific deduction. Subtract line 35 from the sun			_
		33 and 34	1 1	6	4,366.
37	Specifi	c deduction (Generally \$1,000, but see line 37 instructions for exceptions)	8 37		1,000.
38		ted business taxable income. Subtract line 37 from line 36 If line 37 is greater than line 36			
•		ne smaller of zero or line 36		ϵ	3,366.
Par		Tax Computation	1		<u> </u>
39		zations Taxable as Corporations. Multiply line 38 by 21% (0 21)	▶ 3,9	1	3,307.
40	Trusts	Taxable at Trust Rates. See instructions for tax computation Income tax or		_	
•••		ount on line 38 from Tax rate schedule or Schedule D (Form 1041)			
44		ax. See instructions			
41		tive minimum tax (trusts only)			
42 43		Noncompliant Facility Income. See instructions		·	
44		Add lines 41, 42, and 43 to line 39 or 40, whichever applies		1	3,307.
Par		Tax and Payments	3 44		3,307.
			, ,,		
		n tax credit (corporations attach Form 1118, trusts attach Form 1116)	 ։"		
		credits (see instructions)	-		
		Il business credit Attach Form 3800 (see instructions)	—լ. ⁻		
		for prior year minimum tax (attach Form 8801 or 8827)	ا م		
		redits. Add lines 45a through 45d		1	3,307.
46		ct line 45e from line 44		_	3,307.
47		xes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	. 47		3,307.
48	Total to	xx. Add lines 46 and 47 (see instructions)	. 48	7	3,307.
49		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2			
		nts A 2017 overpayment credited to 2018	<u> </u>		
		stimated tax payments · · · · · · · · · · · · · · · · · · ·	-		
		posited with Form 8868 50c			
		organizations Tax paid or withheld at source (see instructions)	⊣		
		withholding (see instructions)	-l 1		
		or small employer health insurance premiums (attach Form 8941) 50f	⊣ ' I		
g	Other c	redits, adjustments, and payments Form 2439			
		orm 4136 Other Total ▶ 50g	_	_	
		ayments. Add lines 50a through 50g		8	0,921.
52	Estima	ed tax penalty (see instructions) Check if Form 2220 is attached	52		
53		e. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	▶ 53	_	
54	Overpa	yment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid \dots	54	6	7,614.
55	Enter th	e amount of line 54 you want Credited to 2019 estimated tax ▶ 67, 614. Refunded	► 55		
Par	t VI	Statements Regarding Certain Activities and Other Information (see instruction	ons)	•	
56	At any	time during the 2018 calendar year, did the organization have an interest in or a signature	or other	authority Y	es No
	over a	financial account (bank, securities, or other) in a foreign country? If "Yes," the organization	may hav	e to file '	í
	FinCEN	Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	e foreign	country :	` ; ; *
	here 🕨				X
57	During	the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fol	eign trust	?	X
	If "Yes,"	see instructions for other forms the organization may have to file		<u>;</u> ,	-
58	Enter ti	ne amount of tax-seempt interest received & accrued during the tax year ▶ \$2,631.			<u> </u>
	U	nder penalties of penium. I declar the paye expensed this return, including accompanying schedules and statements, and to the	best of m	y knowledge and	belief, it is
Sigr	ו 🖍 "		May the	IDS discuss 45	ue rotum
Her				IRS discuss the preparer show	
			see instruction		No
		Print/Type preparer's name Preparer's signature Date Ch	eck I if	PTIN	
Paid		MADY HANTAY	eck If f-employed	1 20104	1578
Prep		1 1011-() F (3)00-0-		13-55652	
Use	Only			7-988-10	
	-			Form 990	
JSA					. (20.0)

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Form 990-T (2018)								Page		
Schedule A - Cost of Go	ods Sold. Er	ter metho	d of invent					_ ,		
1 Inventory at beginning of ye	ear . 1		_	6 In	ventory	at end of yea	ar	. 6		
2 Purchases	2	<u> </u>		7 C	ost of	goods so	ld. Subtract line			
3 Cost of labor	3			6	from	line 5 En	iter here and in			
4a Additional section 263A co	sts			P	art I, line	2		. 7		
(attach schedule)	4a			8 D	o the	rules of	section 263A (with respect to Yes No		
b Other costs (attach schedul	le) . 4b			рі	roperty	produced	or acquired fo	r resale) apply		
5 Total. Add lines 1 through				to	the orga	anization?	<u> </u>			
Schedule C - Rent Income	(From Real P	roperty a	nd Perso	nal Pr	operty	Leased V	Vith Real Prope	erty)		
(see instructions)										
Description of property										
(1)										
(2)										
(3)					<u> </u>					
(4)										
	2. Rent recei	ved or accru	ed							
for personal property is more than 10% but not percentage			rom real and age of rent for r if the rent is	or person	al property	exceeds		directly connected with the income (a) and 2(b) (attach schedule)		
(1)			-							
(2)					_					
(3)			-							
(4)										
Total		Total								
(c) Total income. Add totals of co	• •	•					(b) Total deduction Enter here and or Part I, line 6, colu	n page 1,		
Schedule E - Unrelated De			e instructi	ions)				, , ,		
1 Description of deb	t-financed property		2 Gross allocable					directly connected with or allocable to debt-financed property		
			p	property	l		ch 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 adjuster of or allocable debt-financed pro (attach schedule)		ble to property	4	Column divided column 5			income reportable n 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))		
(1)					%					
(2)					%					
(3)					%					
(4)					%					
							e and on page 1, le 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)		
Totals				 	⊳ l	<u> </u>				

Form 990-T (2018)

Exempt Controlled Organizations 3 Net innerlated norme (Osa) (see instructions) 4 Total of specified in the controlled with score or controlled organizations gross income included in the controlled with score or column 5 1 Net unrelated norme (Osa) (see instructions) 7 Tacable Income 8 Net unrelated norme (Osa) (see instructions) 1 Part (Ine 6, column 6) 1 Part (Ine 6, column 6) 2 Amount of income 1 Description of income 2 Amount of income 1 Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1 Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 2 Closs 2 Closs 2 Closs (see instructions) 3 Net innerlated income (osa) (see instructions) 4 Advertising Income (see instructions) 4 Advertising Income (see instructions) 5 Totals 5 Chedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1 Description of exploited activity 5 Chedule J - Advertising Income (see instructions) 5 Chedule J - Advertising Income (see instructions) 1 Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 2 Closs (see instructions) 3 Net innerlated income (see instructions) 4 Advertising Income (see instructions) 5 Chedule J - Advertising Income (see instructions) 5 Chedule J - Advertising Income (see instructions) 7 Enter here and on page 1, Part 1, ine 8, column (s) in 8, gross income (see instructions) 9 Constant (see instructions) 1 Name of periodical story 1 Name of periodical story 1 Name of periodical Reported on a Consolidated Basis 1 Name of periodical Reported on a Consolidated Basis 1 Name of periodical Reported on a Consolidated Basis 1 Name of periodical See (see instructions) 2 Closs (see instructions) 3 Notation (see instructions) 4 Advertising Income (see instructions) 5 Croalidate (see instructions) 5 Croalidate (see instructions) 5 Croalidate (see instructions) 5 Croalidate (see instructions) 7 Enter here and on pa	Schedule F-Interest, Ann	uities, Royaltie							atio	ns (see	instruction	ons)			
## Total of specified 1				Exem	pt Co	ntrolled Or	ganızatı	ons							
(2) (3) (4) Nonexempt Controlled Organizations 7 Taxable income (loss) (see instructions) 8 Net unrelated income (loss) (see instructions) 10. Part of column 8 that is organizations gress income (loss) (see instructions) 11. Deductions directly consecuted in the first payments made organization gress income (loss) (see instructions) 12. Add columns 8 and 10. Enter here and on page 1. Part I, line 8, column (A) 13. Deductions directly consecuted in the first payments made organization gress income (loss) 14. Description of income 2 Amount of income (loss) 15. Description of income (loss) 15. Totals 2 Gross unrelated activity Income, Other Than Advertising Income (see instructions) 15. Expenses of the first part I in the 5 column (A) 2 Gross unrelated in the first part I in the 5 column (B) 2 Gross unrelations of the first part I in the 5 column (B) 15. Expenses or the first part I in the 5 column (B) 2 Gross unrelated with production of business income (loss) 1 Description of exploited activity Income, Other Than Advertising Income (see instructions) 2 Gross unrelated in the first part I in the 5 column (B) 2 Gross unrelated in the first part I in the 5 column (B) 2 Gross unrelated in the first part I in the 5 column (B) 2 Gross unrelated with production of business income (loss) 3 Expenses or the first part I in the 5 column (B) 4 Aut columns a that is an in the first part and in the first part I in the 5 column (B) 4 Enter here and on page 1. Part I in the 5 column (B) 5 Crear recome (see instructions) 7 Excess exempt (column 6) 2 Gross income (loss) (loss) 3 Gross income (loss) (loss			ber				4		اما	ed included in the controlling		olling	connected with income		
(1) Totals T	(1)	*													
(4) Nonexempt Controlled Organizations 7 Taxable income (Income) 8 Net unrelated income (Income) (I															
Nonexempt Controlled Organizations 7 Taxable Income 8 Net unrelated income (less) (see instructions) 9 Total of specified payments made included in the controlling organizations gross accome (less) (see instructions) 10 Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (8) 1 Description of income 2 Amount of income 2 Amount of income 3 Delations (attach schedule) 1 Description of organization 1 Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 2 Cross 1 Description of exploited activity 2 Cross 1 Description of exploited activity 3 Delations (attach schedule) 4 Seasings (attach schedule) 5 Totals 5 Totals 5 Totals 5 Totals 5 Totals 5 Totals 6 Enter here and on page 1, Part I, line 9, column (8) 7 Totals 5 Chedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1 Description of exploited activity 1 Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1 Description of exploited activity 1 Description of exploited activity 1 Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1 Description of exploited activity 1 Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1 Description of exploited activity 2 Cross 2 Cross 2 Cross 2 Cross 3 Description of exploited activity 3 Description of exploited Exempt Activity Income 4 Advertising Income 5 Cross accome 7 Description of exploited activity 8 Cross accome 9 Secretary of Part II, line 9 (see instructions) 1 Description of exploited activity 2 Cross activities activ			-						\dashv			-			
Totals Schedule General Part Income Section 501(c)(7), 9), or (17) Organization (see instructions) Schedule General Part Income Section 501(c)(7), 9), or (17) Organization (see instructions) Schedule General Part Income Section 501(c)(7), 9), or (17) Organization (see instructions) Schedule General Part Income Section 501(c)(7), 9), or (17) Organization (see instructions) Schedule General Part Income Section 501(c)(7), 9), or (17) Organization (see instructions) Schedule General Part Income Section 501(c)(7), 9), or (17) Organization (see instructions) Schedule General Part Income Section 501(c)(7), 9), or (17) Organization (see instructions) Schedule General Part Income Section 501(c)(7), 9), or (17) Organization (see instructions) Schedule General Part Income Section 501(c)(7), 9), or (17) Organization (see instructions) Schedule General Part Income Section 501(c)(7), 9), or (17) Organization (see instructions) Schedule General Part Income Section 501(c)(7), 9), or (17) Organization (see instructions) Schedule General Part Income Section 501(c)(7), 9), or (17) Organization (see instructions) Schedule General Part Income Section 501(c)(7), 9), or (17) Organization (see instructions) Schedule General Part Income Section 501(c)(7), 9), or (17) Organization Section 50			- -												
7 Taxable Income 8 Not unrelated income (loss) (see instructions) 10 Part (in the contemporary payments made included an the contemporary payments made in the contemporary payments and the payments of the payments made in the contemporary payments and the pay		zations													
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(2) (3) (4) Enter here and on page 1, Part I, line 9, column (A) Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1. Description of exploited activity 2. Gross income from activity has a connected where a connected with a column 5, but not more than column 4) 1. Description of exploited activity 1. Description of exploited activity 2. Gross income from activity has a connected with a column 5, but not more than column 4) 1. Description of exploited activity 2. Gross income from activity has a connected with a column 5, but not more than column 4) 1. Name of penodical 1. Name of penodical 1. Name of penodical 1. Name of penodical 2. Gross advertising income 2. Gross advertising costs adve	1 Description of income	2 Amount o	f income			directly cor	nected		,				and set-asides (col 3		
(2) (3) (4) Enter here and on page 1, Part I, line 9, column (A) Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1. Description of exploited activity 2. Gross income from activity has a connected where a connected with a column 5, but not more than column 4) 1. Description of exploited activity 1. Description of exploited activity 2. Gross income from activity has a connected with a column 5, but not more than column 4) 1. Description of exploited activity 2. Gross income from activity has a connected with a column 5, but not more than column 4) 1. Name of penodical 1. Name of penodical 1. Name of penodical 1. Name of penodical 2. Gross advertising income 2. Gross advertising costs adve	(1)														
(3) (4) Enter here and on page 1. Part I, line 9, column (A) Totals Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 1. Description of exploited activity in rade or business income from trade or business income 1. Description of exploited activity in rade or business income 1. Description of exploited activity in rade or business income from trade or business income 1. Description of exploited activity in rade or business income from schivity that is not unrelated trade or business income from activity that is not unrelated business income from activity that the properties of activities from activity that the properties of activities from activity that the properties of activities fr															
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Enter here and on page 1, Part I, line 9, column (A) Totals Carss unrelated with promote developed activity business income from trade or business income from trade or business income 1. Description of exploited activity business income from trade or business income from trade or business income 1. Description of exploited activity business income from trade or business income from activity that a not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or business income from activity that is not unrelated trade or b															
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1. Description of exploited activity 2. Description of exploited activity 3. Description of exploited activity 3. Description of exploited activity 4. Net included from activity that is not unrelated business income from activity that is not unrelated for a part of a part o		empt Activity In	come.	Othe	er Th	an Adverti	ising Ir	come	(se	e instru	ctions)				
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(2) (3) (4) Enter here and on page 1, Part I, line 10, col (A) Totals Schedule J-Advertising Income (see instructions) Part I Income From Periodicals Reported on a Consolidated Basis 1 Name of penodical 2 Gross advertising income 2 Gross advertising income 2 Gross advertising costs advertising costs 1 Name of penodical (1) (2) (3) (4) Totals (carry to Part II, line (5))	(1)	 													
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Enter here and on page 1, Part I, line 10, col (A) Schedule J – Advertising Income (see instructions) Part I Income From Periodicals Reported on a Consolidated Basis 1 Name of penodical 2 Gross advertising income 2 Gross advertising costs 3 Direct advertising costs 1 Name of penodical (1) (2) (3) (4) Totals (carry to Part II, line (5))													-		
Part I Income From Periodicals Reported on a Consolidated Basis 1 Name of penodical 2 Gross advertising income 2 Gross advertising costs 1 Name of penodical 1 Name of penodical 2 Gross advertising costs 3 Direct advertising costs 2 Gross advertising costs 3 Direct advertising costs 3 Direct advertising costs 4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute costs (recomposed minus column 5, but not more than column 4) (1) (2) (3) (4) Totals (carry to Part II, line (5))		page 1, Part I,	page	1, Par	tI,	247	• ,	۔۔۔۔ :	•	•		. ,	on page 1,		
I Name of penodical 2 Gross advertising income 3. Direct advertising costs 3. Direct advertising costs 3. Direct advertising costs 3. Direct advertising costs 4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 (1) (2) (3) (4) Totals (carry to Part II, line (5))		ncome (see instr	uctions)											
1 Name of penodical 2 Gross advertising income 3. Direct advertising costs 3. Direct advertising costs 3. Direct advertising costs 3. Direct advertising costs 4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 (1) (2) (3) (4) Totals (carry to Part II, line (5))					nsol	idated Bas	sis								
(2) (3) (4) Totals (carry to Part II, line (5))		2 Gross advertising	3. Direct		Direct gain or (los 2 minus c a gain, co		ising is) (col 5 Circ in 3) If inc						costs (column 6 minus column 5, but not more than		
(2) (3) (4) Totals (carry to Part II, line (5))	(1)						ţ.						٠		
(3) (4) Totals (carry to Part II, line (5))							•								
Totals (carry to Part II, line (5)) ▶				-		1: ••••									
Totals (carry to Part II, line (5)) ▶						1	•				-	-	٦ !		
	<u> </u>		-			, ,	-						1 2 1		
	Totals (carry to Part II, line (5))									•	:		Form 990-T (2018)		

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)						<u> </u>
(3)						
(4)						
Totals from Part I ▶			では、	第二级联系	The state of the s	
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, 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	•		

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 07/01 , 2018, and ending

► 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)

Name of organization BRYANT UNIVERSITY Employer identification number 05-0258810

Unrelated business activity code (see instructions) ▶ 530000 Describe the unrelated trade or business ► CONFERENCES

Advertising income (Schedule J)

Other income (See instructions, attach schedule) ATCH. 4 .

Total. Combine lines 3 through 12.....

Part I Unrelated Trade or Business Income (C) Net (A) Income (B) Expenses Gross receipts or sales b Less returns and allowances c Balance ▶ 1c 2 Cost of goods sold (Schedule A, line 7) 2 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 Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach 6 Unrelated debt-financed income (Schedule E). 7 Interest, annuities, royalties, and rents from a controlled Investment income of a section 501(c)(7), (9), or (17) 9 10 Exploited exempt activity income (Schedule I)

417,599.

417,599.

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)

11

12

13

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	167,146.
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)		
19	Taxes and licenses		133.
20	Charitable contributions (See instructions for limitation rules)		
21	Depreciation (attach Form 4562)		
22	Less depreciation claimed on Schedule A and elsewhere on return	22b	
23	Depletion	23	
24	Contributions to deferred compensation plans	1	
25	Employee benefit programs	1	
26	Excess exempt expenses (Schedule I).		
27	Excess readership costs (Schedule J)		
28	Other deductions (attach schedule)		333,668.
29	Total deductions. Add lines 14 through 28		500,947.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-83,348.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	31	
32	Unrelated business taxable income Subtract line 31 from line 30		-83,348.

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2018

417,599.

417,599.

11

12

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687

2018

Department of the Treasury Internal Revenue Service

For calendar year 2018 or other tax year beginning $\frac{07/01}{}$, 2018, and ending $\frac{}{}$

(A) Income

▶ 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

(C) Net

Name of organization BRYANT UNIVERSITY

Employer identification number 05-0258810

(B) Expenses

Unrelated business activity code (see instructions) ▶ 540000 Describe the unrelated trade or business ► ADVERTISING

Part I Unrelated Trade or Business Income

						<u> </u>	
1 a	Gross receipts or sales				٠,		<u> </u>
þ	Less returns and allowances c Balance	e ▶ 1	1c				
2	Cost of goods sold (Schedule A, line 7)	· ·	2	. `		,	
3	Gross profit Subtract line 2 from line 1c	• • ∟	3			ļ	
4a	Capital gain net income (attach Schedule D)	🚅	4a	•	F	<u> </u>	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	٠ . ا_٩	4b	•			
С	Capital loss deduction for trusts	🔼	4c	. 1	• ,		
5	Income (loss) from a partnership or an S corporation (attack	ch				Ì	
	statement)		5	. • '			
6	Rent income (Schedule C)		6				
7	Unrelated debt-financed income (Schedule E)	L	7				
8	Interest, annuities, royalties, and rents from a controlled	1					
	organization (Schedule F)	L	8				
9	Investment income of a section 501(c)(7), (9), or (17)						
	organization (Schedule G)	L	9				
10	Exploited exempt activity income (Schedule I)	[1	10				
11	Advertising income (Schedule J)	1	11				
12	Other income (See instructions, attach schedule) ATCH.	ნ. 🛭 1	12 12,750.		• '		12,750.
13	Total. Combine lines 3 through 12		13 12,750.				12,750.
14	deductions must be directly connected with the Compensation of officers, directors, and trustees (Schedule				14		
15	Salaries and wages	,			15		
16	Repairs and maintenance				16		
17	Bad debts						
18	Dad 00010				17	1	
19	Interest (attach schedule) (see instructions)				17		
20	Interest (attach schedule) (see instructions)				18		133.
	Taxes and licenses				18 19		133.
21	Taxes and licenses Charitable contributions (See instructions for limitation rule	 es)			18		133.
21 22	Taxes and licenses	es)	21		18 19		133.
	Taxes and licenses Charitable contributions (See instructions for limitation rule Depreciation (attach Form 4562). Less depreciation claimed on Schedule A and elsewhere of	es)			18 19 20		133.
22 23	Taxes and licenses Charitable contributions (See instructions for limitation rule Depreciation (attach Form 4562). Less depreciation claimed on Schedule A and elsewhere of Depletion.	es)	turn 21 22a		18 19 20 		133.
22	Taxes and licenses Charitable contributions (See instructions for limitation rule Depreciation (attach Form 4562). Less depreciation claimed on Schedule A and elsewhere of Depletion. Contributions to deferred compensation plans.	es)	turn 21 22a		18 19 20 22b 23		133.
22 23 24	Taxes and licenses Charitable contributions (See instructions for limitation rule Depreciation (attach Form 4562). Less depreciation claimed on Schedule A and elsewhere of Depletion. Contributions to deferred compensation plans Employee benefit programs	es)	turn 21 22a		18 19 20 22b 23 24		133.
22 23 24 25	Taxes and licenses Charitable contributions (See instructions for limitation rule Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere of Depletion Contributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I)	es)	turn 21 22a		18 19 20 22b 23 24 25		133.
22 23 24 25 26	Taxes and licenses Charitable contributions (See instructions for limitation rule Depreciation (attach Form 4562). Less depreciation claimed on Schedule A and elsewhere of Depletion. Contributions to deferred compensation plans Employee benefit programs	es)	turn 21 22a		18 19 20 22b 23 24 25 26		2,845.
22 23 24 25 26 27	Taxes and licenses Charitable contributions (See instructions for limitation rule Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere of Depletion Contributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I) Excess readership costs (Schedule J)	es)	turn 21 22a	ATCH 7	18 19 20 22b 23 24 25 26 27		
22 23 24 25 26 27	Taxes and licenses Charitable contributions (See instructions for limitation rule Depreciation (attach Form 4562). Less depreciation claimed on Schedule A and elsewhere of Depletion. Contributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I). Excess readership costs (Schedule J). Other deductions (attach schedule)	es)	turn 21 22a	ATCH 7	18 19 20 22b 23 24 25 26 27 28		2,845.
22 23 24 25 26 27 28	Taxes and licenses Charitable contributions (See instructions for limitation rule Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere of Depletion Contributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I) Excess readership costs (Schedule J) Other deductions (attach schedule) Total deductions. Add lines 14 through 28.	es)	turn 21 22a 22a 22a 22a 22a 22a 22a 22a 22a	ATCH 7	18 19 20 22b 23 24 25 26 27 28 29		2,845. 2,978.
22 23 24 25 26 27 28 29	Taxes and licenses Charitable contributions (See instructions for limitation rule Depreciation (attach Form 4562). Less depreciation claimed on Schedule A and elsewhere of Depletion. Contributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I). Excess readership costs (Schedule J). Other deductions (attach schedule) Total deductions. Add lines 14 through 28. Unrelated business taxable income before net operations.	es)	turn 21 22a 22a 22a 22a 22a 22a 22a 22a 22a	ATCH 7. 29 from line 13 ry 1, 2018 (see	18 19 20 22b 23 24 25 26 27 28 29 30		2,845. 2,978.

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2018

SCHEDULE D (Form 1120)

Capital Gains and Losses

OMB No 1545-0123

Department of the Treasury Internal Revenue Service

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

► Go to www irs.gov/Form1120 for instructions and the latest information

BRYANT UNIVERSITY

Employer identification number 05-0258810

Part	Short-Term Capital Gains and Losses	(See instructions)			
	See instructions for how to figure the amounts to enter on the lines below	(d) Proceeds	(e) Cost	(g) Adjustments t or loss from Form 8949, Part I, line	(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine
	This form may be easier to complete if you round off cents to whole dollars	(sales pnce)	(or other basis)	column (g)	۷,	the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					,
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	272.				16,732.
4	Short-term capital gain from installment sales from	Form 6252, line 26 or 3	7		4	
5	Short-term capital gain or (loss) from like-kind excha	nges from Form 8824			5	
6	Unused capital loss carryover (attach computation)				6_	()
7	Net short-term capital gain or (loss) Combine lines	1a through 6 in column	h	. .	7	16,732.
Part	■ Long-Term Capital Gains and Losses	(See instructions)				
	See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents to	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to or loss from Form 8949, Part II, line	(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine
	whole dollars Totals for all long-term transactions reported on Form	(Sales price)	(or other basis)	column (g)		the result with column (g)
	1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b			a ·		
8b	Totals for all transactions reported on Form(s) 8949					
	with Box D checked			 		
	Totals for all transactions reported on Form(s) 8949 with Box E checked					
10	Totals for all transactions reported on Form(s) 8949 with Box F checked	408.				152,276.
11	Enter gain from Form 4797, line 7 or 9				11	716.
12	Long-term capital gain from installment sales from F	Form 6252, line 26 or 3	7		12	
13	Long-term capital gain or (loss) from like-kind exchar	nges from Form 8824			13	
14	Capital gain distributions (see instructions)				14	
15	Net long-term capital gain or (loss) Combine lines 8	a through 14 in column	h		15	152,992.
Part	Summary of Parts I and II					
16	Enter excess of net short-term capital gain (line 7) of	ver net long-term capita	il loss (line 15)		16	16,732.
17	Net capital gain. Enter excess of net long-term capi	tal gain (line 15) over no	et short-term capital lo	ss (line 7)	17	152,992.
18	Add lines 16 and 17 Enter here and on Form 1120				18	169,724.
	Note, If losses exceed gains, see Capital losses in th	e instructions				

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) 2018

Form 8949

Sales and Other Dispositions of Capital Assets

▶ Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No 1545-0074

Internal Revenue Service Name(s) shown on return ▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Attachment Sequence No

BRYANT UNIVERSITY				000,2, 000	05-	0258810		
Before you check Box A, B, or C below statement will have the same informat broker and may even tell you which bo	tion as Form 10							
Part I Short-Term. Transactinstructions) For long Note: You may aggreeported to the IRS Schedule D, line 1a	g-term trans egate all sho and for whic	actions, see ort-term trar h no adjustr	page 2. esactions repor ments or codes	ted on Form(s are required	s) 1099-B sl . Enter the t	nowing basis w otals directly or	as 1	
You must check Box A, B, or C be complete a separate Form 8949, for one or more of the boxes, con (A) Short-term transactions (B) Short-term transactions X (C) Short-term transactions	page 1, for e nplete as mai reported on F reported on F	ach applicab ny forms with Form(s) 1099 Form(s) 1099	le box If you ha the same box ch B showing basis B showing basis	ve more short- necked as you r s was reported t	term transac need to the IRS (se	tions than will fit o		
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the Note below and see Column (e)	If you enter an enter a co	any, to gain or loss. amount in column (g), de in column (f) arate instructions.	(h) Gain or (loss). Subtract column (e)	
(Example 100 sh XYZ Co)	(Mo , day, yr)	disposed of (Mo , day, yr)	(sales pnce) (see instructions)	in the separate	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)	
FROM SCH K-1 (1065)							16,460	
FORM 6781 PART I			272				272	
	<u> </u>							
					-			
		·						
							-	
							_	
Totals Add the amounts in columns negative amounts) Enter each total Schedule D, line 1b (if Box A above)	I here and inc	lude on your	272				16, 732	

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

272.

above is checked), or line 3 (if Box C above is checked)

16,732

Form 8949 (2018)	Attachment Sequence No 12A	Pag
Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side	Social security number or taxpayer identification number	
BRYANT UNIVERSITY	05-0258810	

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check

Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see Part II

instructions) For short-term transactions, see page 1 Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported

to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a, you aren't required to report these transactions on Form 8949 (see instructions)

You must check Box D. E. or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
(E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS

X (F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property	(b) Date acquired	(c) Date sold or disposed of	(d) Proceeds	(e) Cost or other basis See the Note below	If you enter an enter a co	any, to gain or loss amount in column (g), de in column (f) arate instructions	(h) Gain or (loss) Subtract column (e) from column (d) and
(Example 100 sh XYZ Co)	(Mo,day,yr)	(Mo , day, yr)	(sales pnce) (see instructions)	and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
FROM SCH K-1 (1065)							151,868
FORM 6781 PART I			408				408
						-	
						-	
		-					
	- "						
			. <u></u> .				
							
		<u></u>					
			-			-	_
2 Totals Add the amounts in columns (negative amounts) Enter each total Schedule D, line 8b (if Box D above is above is checked), or line 10 (if Box	here and inclusions checked), line	ide on your 9 (if Box E	408				152,276

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2018)

ATTACHMENT 1

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS OR S CORPORATIONS

INCOME (LOSS) FROM PARTNERSHIPS

131,880.

INCOME (LOSS) FROM PARTNERSHIPS

131,880.

TOTAL CITY CONTRACT	$\overline{}$	-
ATTACHMENT	2	

FORM 990T - PART II - LINE 18 - INTEREST

INTEREST EXPENSE

3,852.

PART II - LINE 18 - INTEREST

3,852.

ATTACHMENT 3

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

PROFESSIONAL FEES - TAX PREPARATION

PROFESSIONAL FEES - INVESTMENT MANAGEMENT

4,345. 76,011.

PART II - LINE 28 - OTHER DEDUCTIONS

80,356.

ATTACHMENT 4			
777 777 7	ATTACHMENT	4	

SCHEDULE M - LINE 12 OTHER INCOME

CONFERENCE REVENUE

417,599.

LINE 12 - OTHER INCOME

417,599.

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ATTACHMENT 5

SCHEDULE M - PART II LINE 28 TOTAL OTHER DEDUCTIONS

OFFICE EXPENSES 67 DIRECT EXPENSES 27 INDIRECT EXPENSES 42	7,335. 7,280. 2,492.	193,716. 67,335. 27,280. 42,492. 2,845.	67,335. 27,280. 42,492.	DIRECT EXPENSES INDIRECT EXPENSES
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PART II - LINE 28 - OTHER DEDUCTIONS

333,668.

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ATTACHMENT	6	

SCHEDULE M - LINE 12 OTHER INCOME

ADVERTISING REVENUE

12,750.

LINE 12 - OTHER INCOME

12,750.

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ATTACHMENT 7

SCHEDULE M - PART II LINE 28 TOTAL OTHER DEDUCTIONS

PROFESSIONAL FEES - TAX PREPARATION

2,845.

PART II - LINE 28 - OTHER DEDUCTIONS

2,845.

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FEDERAL FORM 990-T NET OPERATING LOSS CARRYFORWARD

Fiscal Year	Loss Generated	Converted Charitable Contributions	Loss Utilized in Prior Years	Loss Utilized in Current Year	Amount Remaining
6/20/2015		14 246		(14 246) ++	
6/30/2015	-	14,346	-	(14,346) **	-
6/30/2016	34,005	-	(12,913)	(21,092)	
6/30/2017	72,610	-	-	(72,610)	-
6/30/2018	16,640	*	-	(16,640)	-
Total	123,255	14,346	(12,913)	(124,688)	

- * THE NET OPERATING LOSS GENERATED IN THE TAX YEAR ENDED 6/30/2018 HAS BEEN ADJUSTED IN ACCORDANCE WITH REVENUE RULING 81-88. THE \$12,565 INCREASE IN AVAILABLE NOL IS DUE TO THE RETROACTIVE REPEAL OF IRC SECTION 512(A)(7) FOR UBTI FROM QUALIFIED TRANSPORTATION FRINGE BENEFITS.
- ** A PORTION OF 6/30/2015 GENERATED NET OPERATING LOSS IS UTILIZED AGAINST SECTION 965 UNRELATED BUSINESS INCOME OF \$22. SEE ATTACHMENT 10

EIN· 05-0258810 ATTACHMENT 9

FEDERAL FORM 990-T CHARITABLE CONTRIBUTIONS SCHEDULE

Tax Year	Charitable Contributions	Charitable Contributions Previously Deducted	Charitable Contributions Deducted	Amount Converted to NOL	Amount Expired	Carryover To Next Year
6/30/2014	26,150	-	_	(17,162)	(8,988)	- -
6/30/2015	36,154	(1,324)	-	(14,346)	-	20,484
6/30/2016	27,000	· -	-	-	-	27,000
6/30/2017	20,350	-	-	-	-	20,350
6/30/2018	2,431	-	-	-	-	2,431
6/30/2019	7,340	. -	(7,041)		-	299
Total	112,085	(1,324)	(7,041)	(31,508)	(8,988)	70,265