

Form **990-T**

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No 1545-0047

For calendar year 2019 or other tax year beginning 07/01, 2019, and ending 06/30, 2020

2019

Department of the Treasury
Internal Revenue Service

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

Check box if address changed

B Exempt under section
 501(c) 03
 408(e) 220(e)
 408A 530(a)
 529(a)

C Book value of all assets at end of year
382,414,958.

F Group exemption number (See instructions) ▶

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

Name of organization (Check box if name changed and see instructions)
A T STILL UNIVERSITY OF HEALTH SCIENCES

Number, street, and room or suite no If a P O box, see instructions
800 W. JEFFERSON

City or town, state or province, country, and ZIP or foreign postal code
KIRKSVILLE, MO 63501

D Employer identification number (Employees' trust, see instructions)
43-0356250

E Unrelated business activity code (See instructions)

H Enter the number of the organization's unrelated trades or businesses ▶ 1 Describe the only (or first) unrelated trade or business here ▶ ATCH 1 If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V

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 ▶ RICHARD K. RIEDER Telephone number ▶ (660) 626-2009

Part I Unrelated Trade or Business Income

	(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales		
b	Less returns and allowances		
1c	c Balance ▶ <u>02229</u>		
2	Cost of goods sold (Schedule A, line 7)		
3	Gross profit Subtract line 2 from line 1c		
4a	Capital gain net income (attach Schedule D)		
4b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		
4c	Capital loss deduction for trusts		
5	Income (loss) from a partnership or an S corporation (attach statement)		
6	Rent income (Schedule C)		
7	Unrelated debt-financed income (Schedule E)		
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule 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)		
13	Total. Combine lines 3 through 12		

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	Salaries and wages	15
16	Repairs and maintenance	16
17	Bad debts	17
18	Interest (attach schedule) (see instructions)	18
19	Taxes and licenses	19
20	Depreciation (attach Form 4562)	20
21	Less depreciation claimed on Schedule A and elsewhere on return	21a
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
28	Total deductions. Add lines 14 through 27	28
29	Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13	29
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	30
31	Unrelated business taxable income Subtract line 30 from line 29	31

For Paperwork Reduction Act Notice, see instructions.

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Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Includes lines 32-39 for unrelated business taxable income calculations.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 40-45 for tax computation.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 46a-56 for tax and payment details.

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

Table with 3 columns: Line number, Description, and Yes/No. Includes lines 57-59 regarding foreign interests and tax-exempt interest.

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.

Sign Here: Signature of officer (Richard Rieder), Date (02/09/2021), Title (VP Finance/CFO).

May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [] No

Paid Preparer Use Only: Preparer's name (MICHAEL J ENGLE), Date (2/9/2021), Firm's name (BKD, LLP), Firm's EIN (44-0160260).

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶

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							
b	Other costs (attach schedule)	4b							
5	Total. Add lines 1 through 4b	5							
				8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		Yes	No	X

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		
(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)		
(2)		
(3)		
(4)		
Total	Total	
(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) ▶

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)	Enter here and on page 1, Part I, line 7, column (B)
Total dividends-received deductions included in column 8 ▶				

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

Table with 6 columns: 1. Name of controlled organization, 2. Employer identification number, 3. Net unrelated income (loss), 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.

Nonexempt Controlled Organizations

Table with 5 columns: 7. Taxable Income, 8. Net unrelated income (loss), 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. Includes a Totals row with instructions for adding columns.

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

Table with 5 columns: 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). Includes a Totals row with instructions.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

Table with 7 columns: 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, 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). Includes a Totals row with instructions.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

Table with 7 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). Includes a Totals row with instructions.

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. ▶						
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 26

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) ATCH 2		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14 ▶			

ORGANIZATION'S ONLY UNRELATED TRADE OR BUSINESS ACTIVITY

THE TAXPAYER DOES NOT HAVE ANY ACTIVITIES GENERATING UNRELATED BUSINESS TAXABLE INCOME (AS DEFINED IN IRC §512(A)) IN THE CURRENT YEAR. FORM 990-T IS BEING FILED TO COMMENCE RUNNING ON THE PERIOD UNDER THE STATUTES OF LIMITATION FOR REPORTING UNREALIZED BUSINESS INCOME.

ATTACHMENT 2SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
ANN THIELKE 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
BERTHA A. THOMAS 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
C. LISETTE DOTTAVIO 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
CHESTER W. DOUGLASS 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
CRAIG PHELPS 800 W. JEFFERSON KIRKSVILLE, MO 63501	PRESIDENT	0	0.
G. SCOTT DREW 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
GARY M. WILTZ 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
JAMES CANNON 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
LINETTE SELLS 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE/CHAIRPERSON	0	0.
MICHELLE MAYO 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.

ATTACHMENT 2 (CONT'D)SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
PAULINA VAZQUEZ MORRIS 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
REID W. BUTLER 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
RICHARD RIEDER 800 W. JEFFERSON KIRKSVILLE, MO 63501	VICE PRESIDENT	0	0.
ROSIE ALLEN-HERRING 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE/SECRETARY	0	0.
STANLEY E. GROGG 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
TISHA R. KICE-BRIGGS 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
GERALD R. DOWNEY 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE/VICE CHAIRPERSON	0	0.
HERB KUHN 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
GEOFFREY HOFFA 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
ISAAC NAVARRO 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.

ATTACHMENT 2 (CONT'D)

SCHD. K, FORM 990-T, COMPENSATION OF OFFICERS, DIRECTORS, & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE</u>	<u>BUSINESS PERCENT</u>	<u>COMPENSATION</u>
JOHNATHON CLEAVER 800 W. JEFFERSON KIRKSVILLE, MO 63501	TRUSTEE	0	0.
TOTAL COMPENSATION			<u>0.</u>