

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

OMB No. 1545-0687

2014For calendar year 2014 or other tax year beginning 6/01, 2014, and ending 5/31, 2015▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

▶ 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 OnlyDepartment of the Treasury
Internal Revenue Service

A <input type="checkbox"/> Check box if address changed	Print or Type ABILENE CHRISTIAN UNIVERSITY ACU BOX 29120 ABILENE, TX 79699-9120 TAXPAYER COPY	D Employer identification number (Employees' trust, see instructions.) 75-0851900
B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)		E Unrelated business activity codes (See instructions.) 451211 812900
C Book value of all assets at end of year 608,829,340.	F Group exemption number (See instructions.)	
G 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.
▶ **RETAIL SALES, RENTALS, INVESTMENT INCOME****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 ▶ **STEVEN HOLLEY**

Telephone number ▶ 325-674-2539

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales	891,898.			
b Less returns and allowances		1 c 891,898.		
2 Cost of goods sold (Schedule A, line 7)		2 203,942.		
3 Gross profit. Subtract line 2 from line 1 c		3 687,956.		687,956.
4 a Capital gain net income (attach Schedule D)		4 a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4 b		
c Capital loss deduction for trusts		4 c		
5 Income (loss) from partnerships and S corporations (attach statement) ST 1		5 5,192.		5,192.
6 Rent income (Schedule C)		6 206,752.	65,911.	140,841.
7 Unrelated debt-financed income (Schedule E)		7		
8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)		8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Sch G)		9		
10 Exploited exempt activity income (Schedule I)		10		
11 Advertising income (Schedule J)		11		
12 Other income (See instructions; attach schedule)				
SEE STATEMENT 2		12 32,737.		32,737.
13 Total. Combine lines 3 through 12.		13 932,637.	65,911.	866,726.

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	416,990.
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule)	18	
19 Taxes and licenses	19	
20 Charitable contributions (See instructions for limitation rules)	20	
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22 a	
23 Depletion	23	4,910.
24 Contributions to deferred compensation plans	24	
25 Employee benefit programs	25	83,333.
26 Excess exempt expenses (Schedule I)	26	
27 Excess readership costs (Schedule J)	27	
28 Other deductions (attach schedule) SEE STATEMENT 3	28	165,206.
29 Total deductions. Add lines 14 through 28.	29	670,439.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13.	30	196,287.
31 Net operating loss deduction (limited to the amount on line 30) SEE STATEMENT 4	31	196,287.
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30.	32	0.
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	33	
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	0.

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) \$ (2) \$ (3) \$

b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$

(2) Additional 3% tax (not more than \$100,000) \$

c Income tax on the amount on line 34. **35 c** 0.**36 Trusts Taxable at Trust Rates** See instructions for tax computation. Income tax on the amounton line 34 from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041). **36****37 Proxy tax.** See instructions. **37****38 Alternative minimum tax.** **38****39 Total.** Add lines 37 and 38 to line 35c or 36, whichever applies. **39** 0.**Part IV Tax and Payments****40 a** Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116).b Other credits (see instructions). **40 b**c General business credit. Attach Form 3800 (see instructions). **40 c**d Credit for prior year minimum tax (attach Form 8801 or 8827). **40 d**e **Total credits.** Add lines 40a through 40d. **40 e** 0.**41** Subtract line 40e from line 39. **41** 0.**42** Other taxes. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866☐ Other (attach schedule). **42****43 Total tax.** Add lines 41 and 42. **43** 0.**44 a** Payments: A 2013 overpayment credited to 2014. **44 a**b 2014 estimated tax payments. **44 b**c Tax deposited with Form 8868. **44 c**d Foreign organizations: Tax paid or withheld at source (see instructions). **44 d**e Backup withholding (see instructions). **44 e**f Credit for small employer health insurance premiums (Attach Form 8941). **44 f**g Other credits and payments: ☐ Form 2439☐ Form 4136 ☐ Other Total... **44 g****45 Total payments.** Add lines 44a through 44g. **45** 0.**46** Estimated tax penalty (see instructions). Check if Form 2220 is attached. ☐ **46****47 Tax due.** If line 45 is less than the total of lines 43 and 46, enter amount owed. **47****48 Overpayment.** If line 45 is larger than the total of lines 43 and 46, enter amount overpaid. **48****49** Enter the amount of line 48 you want: **Credited to 2015 estimated tax** **Refunded** **49****Part V Statements Regarding Certain Activities and Other Information** (see instructions)1 At any time during the 2014 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 **UNITED KINGDOM**

Yes No

X

2 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.

Yes No

X

3 Enter the amount of tax-exempt interest received or accrued during the tax year \$ 0.

Yes No

X

Schedule A — Cost of Goods Sold. Enter method of inventory valuation **FIFO**1 Inventory at beginning of year. **1** 49,508. **6** Inventory at end of year. **6** 50,360.2 Purchases. **2** 204,794. **7** **Cost of goods sold.** Subtract3 Cost of labor. **3** line 6 from line 5. Enter here4 a Additional section 263A costs (attach schedule). **4 a** and in Part I, line 2. **7** 203,942.b Other costs (attach sch). **4 b**5 **Total.** Add lines 1 through 4b. **5** 254,302. **8** Do the rules of section 263A (with respect to

property produced or acquired for resale) apply

to the organization? **8** X

Yes No

X

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 Date Title

May 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
JOE MELSON, CPA
Firm's name **DAVIS KINARD & CO, PC** Firm's EIN **75-1332266**
Firm's address **400 PINE ST., STE. 600**
ABILENE, TX 79601 Phone no. **(325) 672-4000**

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1 Description of property		
(1) TOWER RENTALS		
(2) HWC CONFERENCE ROOMS		
(3) CHAPEL ON THE HILL		
(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)
		SEE STATEMENT 5
(1)	105,458.	
(2)	97,894.	62,876.
(3)	3,400.	3,035.
(4)		
Total	Total 206,752.	
(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)
206,752.		65,911.

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 sch)	(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)

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
(1)					6 Deductions directly connected with income in column 5
(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)					
Totals			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).	