	Form	990-T		•	nd proxy tax un	der se	ection	6033(e))		()ń		OMB No	1545-0047 N 10
	Denar	tment of the Treasury			irs gov/Form990T for	instructi	ons and t		ation	20 0			JIJ
		al Revenue Service		Do not enter SSN numbe					ation is a 5	01(c)(3)			blic Inspection for ganizations Only
	A [Check box if address changed		Name of organization (Check box if name	changed	l and see	instructions.)			(Empl	oyer identifi oyees' trus ctions)	cation number it, see
	B E	xempt under section	Print	Barry University	Inc.							-06243	
•	Х]501(c)(3)	Or	Number, street, and room	n or suite no. If a P O b	ox, see ii	nstruction	ıs		_		ated busine instructions	ess activity code
		408(e) 220(e)	Туре	11300 NE 2nd Aver									
		408A530(a)	•	City or town, state or pro	• • •	or foreig	n postal (code					
]529(a)		Miamı Shores, FL							53		
	C Bo	ok value of all assets end of year		F Group exemption num		<u> </u>	0928	T		1			
				G Check organization typ		-	<u> 1. L.</u>	_] 501(c) trust		401(a)			Other trust
			-	tion's unrelated trades or l	businesses.	1			the only (or	•			
		de or business here				<u> </u>		If only one,					,
	,		•	ce at the end of the previo	us sentence, complete	Parts I an	ia II, com	piete a Schedule	IVI for each	addition	iai trade	or	
K		siness, then complete			affiliated arous or o so	rant auba	.d.or oo	stralled aroun?			Ye	. v	No
,	,	-		oration a subsidiary in an tifying number of the parer		ent-subs	idialy coi	itrolled group?			16	5 <u>r</u>) NO
し		e books are in care of		<u> </u>	it corporation >			Telenho	ne numbe	r 🕨 30	05-89	9-4042	
-				de or Business Inc	come		(A	() Income		xpenses			(C) Net
		Gross receipts or sale					`	·		•			
\sim		Less returns and allow			c Balance	. 1c							
2022		Cost of goods sold (S		A. line 7)	,	2							
-	3	Gross profit. Subtract		· ·		3							
-	4 a	Capital gain net incom				4a							
>=			-	art II, line 17) (attach Forn	n 4797)	4b							
MAY		Capital loss deduction				4c							
	5	Income (loss) from a	partners	ship or an S corporation (a	ttach statement)	5	/						
里	6	Rent income (Schedu	le C)			6							
SCANNED	7	Unrelated debt-financ	ed incor	ne (Schedule E)		3/			_,				
₹	8			nd rents from a controlled									
8	9	Investment income of	a section	on 501(c)(7), (9), or (17) o	rganization (Schedule (G) 9							
••	10	Exploited exempt activ				10							
	11	Advertising income (S		•		11				_			
	12			is, attach schedule) See	Statement 2	12		26,059.					26,059.
		Total. Combine lines		^{gn 12} ot Taken Elsewhe	7 (S)	13	******	26,059.					26,059.
	Га	(Deductions	must b	e directly connected w	ith the unrelated bus	siness in	come)						
	14	Compensation of off	icers, dii	rectors, and trustees (Sche	dule K) RECEI	VED					14		
	15	Salaries and wages									15	_	1,043.
	16	Repairs and mainten	апсе		75 JUN 01	ንሰ ኃ ት	RS-OSC				16		17,904.
	17	Bad debts			101 2011 AT	. 2021	S				17		
	18	Interest (attach sche	dule) (si	ee instructions)	OCDEN	<u> </u>					18		
	19	Taxes and licenses	F 45	-00	OGDEN	1, U I		Look		3,000.	19		
	20	Depreciation (attach		1 Schedule A and elsewher	o on roturn			20 21a		3,000.	21b		3,000.
	21		imied of	i Schedule A and eisewhei	e on return			[214]	_		22		
	22 23	Depletion Contributions to defe	rrad co	mnensation plans							23		
	23 24	Employee benefit pro		mpensation pians							24		
	25	Excess exempt expe	-	chedule I)							25		
	26	Excess readership co		· ·							26		
	27	Other deductions (at					Se	e Statement	: 3		27		5,983.
	28	Total deductions A									28		27,930.
	29/	,		ncome before net operating	g loss deduction Subtr	act line 2	8 from lin	e 13			29		-1,871.
_/	30			oss arising in tax years be	-								
		(see instructions)	·		•	•					30		0.
	31		axahle ir	ncome. Subtract line 30 fro	m line 29						31		-1,871.

Part		otal Unrelated Business Taxable Income				rage z
		unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		32	-1	871.
	•	·	1			,0,1,
		s paid for disallowed fringes		33		
		le contributions (see instructions for limitation rules)		34		0.
		related business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of	lines 32 and 33		-1	,871.
		on for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	يسمغن	36		-
37	Total of	unrelated business taxable income before specific deduction. Subtract line 36 from line 35	_	37	-1	,871.
38	Specific	deduction (Generally \$1,000, but see line 38 instructions for exceptions)	φ	38	1	,000.
39	Unrelat	ed business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37,	ب	(
	enter th	smaller of zero or line 37		39	-1	,871.
Part	IV 1	ax Computation	•			
40	Organiz	ations Taxable as Corporations Multiply line 39 by 21% (0.21)	•	40		0.
41	Trusts 1	axable at Trust Rates See instructions for tax computation. Income tax on the amount on line 39 from				
,	Та	x rate schedule or Schedule D (Form 1041)	•	41		
42	Proxy ta	x See instructions	•	42		
	-	ve minimum tax (trusts only)	-	43		
		Noncompliant Facility Income See instructions		44		
		dd lines 42, 43, and 44 to line 40 or 41, whichever applies		45		0.
Part		ax and Payments				
		tax credit (corporations attach Form 1118, trusts attach Form 1116) 46a		1 1		
	-			\dashv		
		edits (see instructions) business credit, Attach Form 3800 46c		- 		
_				-		
		r prior year minimum tax (attach Form 8801 or 8827)		- -		
		edits. Add lines 46a through 46d		46e		
		line 46e from line 45		47		0.
			ittach schedule)			
		x. Add lines 47 and 48 (see instructions)		49		0.
		t 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3		50		0.
		ts. A 2018 overpayment credited to 2019 51a		 		
b	2019 es	timated tax payments 51b		」		
C	Tax dep	osited with Form 8868 51c		_		
d	Foreign	organizations: Tax paid or withheld at source (see instructions) 51d				
е	Backup	withholding (see instructions) 51e				
f	Credit fo	r small employer health insurance premiums (attach Form 8941) 51f		1 1		
		edits, adjustments, and payments Form 2439		7		
•	Fo	rm 4136 ☐ Other Total ► 51g		1 1		
52	Total pa	yments. Add lines 51a through 51g		52		
		d tax penalty (see instructions). Check if Form 2220 is attached		53		
		If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	•	54		
		ment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	•	55		
		•	unded 🕨	56		•
Part		statements Regarding Certain Activities and Other Information (see instruc	tions)			
		me during the 2019 calendar year, did the organization have an interest in or a signature or other authority			Yes	No
	-	nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file			1.00	- 1
		Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign country			1	
		• • •				لــــــا
		Cayman Islands			<u> </u>	<u></u>
		ne tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreig	n trust?		—	<u> </u> ^_,
		see instructions for other forms the organization may have to file.				
		amount of tax-exempt interest received or accrued during the tax year 🕨 \$				
C:	Un	der penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the rect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledg	ne best of my kn ge	owledge and belief, if	is true,	
Sign		A man thomas a Chelle	_	May the IRS discuss	his return	with
Here		VP for Business & Fina		he preparer shown b	elow (see	_
		Signature of officer Date Title		nstructions)? X	Yes	No
		Print/Type preparer's name Preparer's signature Date C	Check	ıf PTIN		
Paid			self- employed	1		
Prep		red R. Batson, Jr. Led R Batson J. 5/11/2021		P0072195	1	
Use		Firm's name ▶ Capin Crouse LLP	Firm's EIN	> 36-39908	92	
026	Unity	1255 Lakes Parkway, Suite 105				
		, and the second	Phone no.	505-502 - 2746		

Page 3

Schedule A - Cost of Good	s Sold. Enter	method of inve	ntory v	aluation N/A				·	_
1 Inventory at beginning of year	1		6	Inventory at end of year	ar		6		
2 Purchases	2		7	Cost of goods sold Si	ubtract I	ine 6			
3 Cost of labor	3			from line 5. Enter here	and in F	Part I,			
4 a Additional section 263A costs			1	line 2			7_		
(attach schedule)	4a		8	Do the rules of section	263A (\	with respect to		Yes No)
b Other costs (attach schedule)	4b	_		property produced or a	acquired	l for resale) apply to			
5 Total Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income (see instructions)	(From Real	Property an	d Pe	rsonal Property	Leas	ed With Real Pro	per	ty)	
1 Description of property									
(1)								· ·	Т
(2)									Τ
(3)									
(4)									
	2 Rent receiv	ed or accrued				2(-)-			
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	than	of rent for	personal	conal property (if the percent property exceeds 50% or if ed on profit or income)	age	3(a) Deductions directly columns 2(a) ar	conne nd 2(b)	(attach schedule)	
(1)									
(2)									
(3)									_
(4)									
Total	0.	Total			0.				
(c) Total income Add totals of columns here and on page 1, Part I, line 6, column		ter			0.	(b) Total deductions Enter here and on page 1 Part I, line 6, column (B)	•	0	١.
Schedule E - Unrelated Del	ot-Financed	l Income (see	ınstru	ctions)					
			2	Gross income from or allocable to debt-		3 Deductions directly con to debt-finance		perty	
1 Description of debt-fil	nanced property			financed property	(a)	Straight line depreciation (attach schedule)		(D) Other deductions (attach schedule)	
(1)							1		_
(2)				1			1		_
(3)	7								_
(4)									_
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property n schedule)	6	Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)		Allocable deductions (column 6 x total of columns 3(a) and 3(b))	;
(1)				%					_
(2)			\top	%					_
(3)				%					_
(4)			1	%					_
						nter here and on page 1, Part I, line 7, column (A)		Enter here and on page 1, Part I, line 7, column (B)	
Totals				▶		O		0	١.
Total dividends-received deductions in	cluded in columr	n 8				•	+		٠.
									_

Schedule F - Interest,	Annuitie	es, noyai	ties, ai		Controlled O			allo	(see ins	struction	<u> </u>	
Name of controlled organization		2 Emp identific numl	ation	3 Net unr	elated income instructions)	payments made inclu		includ	art of column 4 that is uded in the controlling nization's gross income		6. Deductions directly connected with income in column 5	
(1)						,						
(2)												
(3)					-							
(4)												
Nonexempt Controlled Organi	zations											
7 Taxable Income		unrelated incom see instructions		9 Total	of specified payi made	ments	10 Part of coluin the controllingross		nization's	11 De with	eductions directly connected in income in column 10	
(1)												
(2)												
(3)												
(4)												
Totals						•	Add colun Enter here and line 8, c		e 1, Part I,		dd columns 6 and 11 nere and on page 1, Part I, line 8, column (B)	
Schedule G - Investme	nt Inco	me of a s	Section	501(c)(7), (9), or	(17) Or	ganization	`		L		
(see instr		01 4 (. 55 (6)(. ,, ,,,,,	,, OI	J~E41101	-				
1. Descr	ription of inco	ome			2 Amount of	ıncome	3 Deductio directly conne (attach sched	cted	4 Set-	asides schedule)	5 Total deductions and set-asides (col 3 plus col 4)	
(1)												
(2)												
(3)			_									
(4)												
					Enter here and Part I, line 9, co						Enter here and on page 1, Part I, linc 3 column (B)	
Totals		<u> </u>		•		0.					0.	
Schedule I - Exploited (see instru	-	t Activity	Incom	e, Other	r Than Ad	lvertisi	ng Income) 			,	
1 Description of exploited activity	unrelated incom	Gross I business ie from business	directly of with pro of unr	penses connected oduction related s income	4 Net incomfrom unrelated business (cominus columingain, compute through	trade or dumn 2 n 3) If a cols 5	5 Gross inco from activity t is not unrelat business inco	hat ed	6 Exp attribut colur	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)											-	
(2)									<u> </u>			
(3)									<u> </u>			
(4)									T :			
	page 1	re and on i, Part I, col (A)								-	Enter here and on page 1, Part II, line 25	
Totals Debadule L Advertisis	na Inco	0.		0.							0.	
Schedule J - Advertising Part I Income From I					aglidatad	Pacia						
Part I income From I	Periodic	ais nepo		n a Con	Sonuateu	Dasis			T			
1 Name of periodical		2 Gross advertising income		3 Direct ertising costs	4 Advert or (loss) (co col 3) If a ga cols 5 th	ol 2 minus iin, compute	5 Circulat income		6. Reade cost		7 Excess readership costs (column 6 minus column 5 but not more than column 4)	
(1)												
(2)												
(3)												
(4)												
Totals (carry to Part II, line (5))	▶		0.	0).						0.	

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	▶ 0.	0.				0.
	Enter here and on page 1, Part I, line 11, cot (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1 Part II line 26
Totals, Part II (lines 1-5)	0.	0.			•	0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2019)

Footnotes	Statement 1
FEDERAL NET OPERATING LOSS ARISING IN TAX YEARS BEGIND BEFORE JANUARY 1, 2019:	NING
NOL GENERATED 06/30/2013 NOL GENERATED 06/30/2014 NOL GENERATED 06/30/2015 NOL GENERATED 06/30/2016 NOL GENERATED 06/30/2017 NOL GENERATED 06/30/2018	568. 86. 707. 3,253. 599. 4,690.
NET OPERATING LOSS CARRIED FORWARD TO FYE 06/30/2021	9,903.
FEDERAL NET OPERATING LOSS ARISING IN TAX YEARS BEGIND BEFORE JANUARY 1, 2019:	NING
UNRELATED TRADE OR BUSINESS: FACILITY RENTAL	
NOL GENERATED 06/30/2019 NOL GENERATED 06/30/2020	4,344. 1,871.
NET OPERATING LOSS CARRIED FORWARD TO FYE 06/30/2021	6,215.

FORM 990-T, PAGE 1, ACTIVITY 1;

Unrelated business activity code: 532000 Describe the unrelated trade or business: Facility Rental

Election to waive the net operating loss carryback period for the fiscal year ending June 30, 2020:

Barry University Inc. hereby elects, pursuant to Sec. 172(B)(3) of the internal revenue code, to relinquish the entire carryback period with respect to the net oppoerating loss incurred for the tax year ended June 30, 2020, and will have such loss available for carryforward only.

Form 990-T	Other	Income	Statement 2
Description			Amount
Athletics facilities a	and field rental		26,059
Total to Form 990-T, F	Page 1, line 12		26,059
Form 990-T	Other	Deductions	Statement 3
Description			Amount
Utilities			1,690.
Security Tax Preparation Fee			3,193. 1,100.
Total to Form 990-T, I	Page 1, line 27		5,983.