Form 990	-T (20,19)	INCHARGE EDUCATION FOUNDATION, INC.	20-0152	720	Page 2
		Total Unrelated Business Taxable Income			
		unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32		0.
	•	is paid for disallowed fringes	33		
34	Charital	ole contributions (see instructions for limitation rules)	34		0.
		arelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33	35		
		on for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36		0.
		unrelated business tayable income before specific deduction. Subtract line 36 from line 35	37		
		eduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,0	00.
		ed business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37,	7		
		e smaller of zero or line 37	39		0.
Part	IV .	Tax Computation			
40	Organiz	ations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40		0.
41	Trusts 7	Faxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 39 from:			
[	Та	ex rate schedule or Schedule D (Form 1041)	41		
42	Proxy ta	ax See instructions	42		
43	Alternat	ive minimum tax (trusts only)	43		
44	Taxon	Noncompliant Facility Income See instructions	44		
45	Total. A	dd lines 42, 43, and 44 to line 40 or 41, whichever applies	45		0.
Part	<b>V</b>   <sup>-</sup>	Tax and Payments			
46a	Foreign	tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a			
b (	Other c	redits (see instructions) 46b			
C	General	business credit. Attach Form 3800			
d I	Credit f	or prior year minimum tax (attach Form 8801 or 8827)			
e	Total ci	redits Add lines 46a through 46d	46e		
47	Subtrac	t line 46e from line 45	47		0.
48	Other ta	ixes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	48		
49	Total ta	x Add lines 47 and 48 (see instructions)	49		0.
50	2019 ne	et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50		0.
		nts: A 2018 overpayment credited to 2019			
b :	2019 es	stimated tax payments 51b			
c ·	Tax dep	osited with Form 8868			
d i	Foreign	organizations: Tax paid or withheld at source (see instructions)  51d			
е	Backup	withholding (see instructions) 51e			
f	Credit f	or small employer health insurance premiums (attach Form 8941)  51f			
9	Other c	redits, adjustments, and payments Form 2439			
[	Fo	orm 4136 Other Total ▶ 51g			
52	Total p	ayments Add lines 51a through 51g	52		
53	Estimat	ed tax penalty (see instructions). Check if Form 2220 is attached 🕨 🔲	53		
54	Tax du	e. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54		
55	Overpa	yment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55		
56		e amount of line 55 you want: Credited to 2020 estimated tax	56		
Part	<u>VI :</u>	Statements Regarding Certain Activities and Other Information (see instructions)			
57	At any t	ime during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Yes	No
		inancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		•	
1	FinCEN	Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country			
	here	<u> </u>			<u>X</u>
58	During :	the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?			_X_
		see instructions for other forms the organization may have to file			
59		e amount of tax-exempt interest received or accrued during the tax year 🕨 💲			
C:	Ur	ider penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowl rrect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	edge and belief, it is	true,	
Sign		5/ // 6: / / / / May	the IRS discuss this	s return v	with
Here			preparer shown belo	`	, l
			ructions)? X Ye	s	No
		Print/Type preparer's name Preparer's signature Date Check If	PTIN		
Paid		Self- employed			
Prep		DAVID JONES ' / // C// - // L// W	P01361		
Use		Firm's name ► JONES, MARESCA & MCQUADE, P.A. Firm's EIN ►	<u>52-185</u>	<u> 393</u>	<u>3</u>
	,	10500 LITTLE PATUXENT PARKWAY, SUITE			
		Firm's address ► COLUMBIA, MD 21044 Phone no 41	<u> 10-884-0</u>		
923711 0	1-27-20		Form 99	90-T	(2019)

Form 990-T (2019)

Schedule A - Cost of Good	s Sold. Enter	method of inver	tory v	aluation > N/A					
1 Inventory at beginning of year	1		6	Inventory at end of year	r		6		
2 Purchases	2		7	Cost of goods sold Su	ibtract l	пе 6			
3 Cost of labor	3			from line 5. Enter here	and in F	Part I,		.	
4 a Additional section 263A costs				line 2			7_	<u></u>	
(attach schedule)	4a		8	Do the rules of section	263A (v	with respect to		Ye	s No
b Other costs (attach schedule)	4b		]	property produced or a	cquirec	for resale) apply to			
5 Total Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income (see instructions)	(From Real	Property and	d Pe	rsonal Property I	Leas	ed With Real Pro	per	ty) 	
1 Description of property									
(1)									
(2)								<u> </u>	
(3)									
(4)				··		·			
		ed or accrued				3(a) Deductions directi	v conn	ected with the incom	ne in
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	e than	of rent for p	persona	sonal property (if the percental property exceeds 50% or if sed on profit or income)	age			(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		nter -			0.	(b) Total deductions Enter here and on page 1, Part I line 6 column (B)	<b>•</b>		0.
Schedule E - Unrelated Del	bt-Financed	Income (see	ınstru	ictions)					
			Τ,			3 Deductions directly co to debt-finar			
1 Description of debt-fi	nanced property		•	Gross income from or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	locd pic	(b) Other deduction (attach schedu	
(1)			1						
(2)						<del></del>			
(3)									
(4)									
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or debt-fine	e adjusted basis allocable to anced property h schedule)	(	Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)		8 Allocable ded (column 6 x total of 3(a) and 3(b	fcolumns
(1)				%					
(2)				%					
(3)				%					
(4)				%					
						inter here and on page 1, Part I, line 7, column (A)		Enter here and on p Part I, line 7, colum	
Totals				•		C			0.
Total dividends-received deductions if	ncluded in colum	n 8		•	-		<b>-</b>		0.

Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated husiness 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) MARKETING FEE						
(2) REVENUE FROM						
(3) DEBT . ORG	367,424.	110,182.	257,242.		303,466.	257,242.
(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 25
Totals	367,424.	110,182.				257,242.

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)						1
Totals (carry to Part II, line (5))	0.	_ 0.				0

Form 990-T (2019)

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)	ŧ				-		
(4)	_				<del></del>		
Totals from Part I	<b></b>	0.	0.				0
		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
Totais, Part II (lines 1-5)	<b>•</b>	0.	0.				0

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			0.

Form 990-T (2019)

FORM 990-T	DESCRIPTION OF	ORGANIZATION'S	PRIMARY	UNRELATED	STATEMENT	1
		BUSINESS ACTIVI	ΓY			

MARKETING FEE REVENUE FROM USUAGE OF EDUCATIONAL WEBSITE.

TO FORM 990-T, PAGE 1

FORM 990-T	NET	OPERATING LO	SS DEDUCT	PION	STATEMENT 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED		LOSS EMAINING	AVAILABLE THIS YEAR
12/31/14 12/31/15 12/31/16	37,959. 28,272. 18,415.		0. 0. 0.	37,959. 28,272. 18,415.	37,959. 28,272. 18,415.
	ER AVAILABLE THIS	YEAR		84,646.	84,646.
FORM 990-T	SCHEDULE I - PRODUCTION	EXPENSES DIRE OF UNRELATED			STATEMENT 3
DESCRIPTION	ſ		ACTIVITY NUMBER	AMOUNT	TOTAL
WEB DEVELOR PROFESSIONA	PMENT/MAINTENANCE AL FEES	- SUBTOTAL -	1	74,832. 35,350.	110,182.
TOTAL OF FO	ORM 990-T, SCHEDUL	E I, COLUMN 3	3		110,182.
FORM 990-T	SCHEDULE I - WITH PRODUCTI				STATEMENT 4
DESCRIPTION	1		ACTIVITY NUMBER	AMOUNT	TOTAL
SALARIES BENEFITS OCCUPANCY	· IPPORT			204,314. 32,540. 18,018. 48,594.	
UMEBREAD OF			_	40,554.	202 466
OVERHEAD SU		- SUBTOTAL -	1		303,466.