29393340007220
Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

rom14	.		(and proxy to	ax unuer sec	LIUII C	0033(6))			1 (തെ	40
r . ".	•	For cale	ndar year 2019 or other tax year be	ginning	, 2019, a	nd ending	, 20		2	Z W	19
Internal I	ent of the Treasury Revenue Service		► Go to www.irs.gov/Form9 not enter SSN numbers on this for	90T for instructio	ns and t	the latest informat	on.		Open to 501(c)(Public 3) Orga	c Inspection for inizations Only
A D	Check box if iddress changed		Name of organization (box if name changed	and see	iņstructions)					ation number
	pt under section	Print	NATIONAL ASSOCIATION	FOR LATINO CO	'I NUMMC	<u> LY ASSET BUIL</u>	DERS	(Emp	oloyees' t	rust, se	e instructions)
≥ 50)1(c <u>)()3</u>)	or	Number, street, and room or suite r	o, lf a PO box, see	instructio	ns ⁱ		20	-0774	672	
□ 40)8(e) 🔲 220(e)	Type	5404 WURZBACH RD			<u></u>			lated bu		activity code
□ 40)8A 🔲 530(a)		City or town, state or province, cou	ntry, and ZIP or forei	gn postal	code .		(366	instruct	ions)	
52	9(a)		SAN ANTONIO, TX 782			1		. 5	3112	0	
C Book at en	value of all assets d of year		oup exemption number (See			<u> </u>					
1	9,665,930.		ieck organization type 🕨 🗵			☐ 501(c) trust		_401(a) tru <u>st</u>	<u> </u>	Other trust
			organization's unrelated trade						• •	•	unrelated
			Commercial Rental P								
			at the end of the previous se	ntence, complet	e Parts	I and II, comple	te a S	chedul	e M fo	r eac	h additional
			omplete Parts III-V.						•		
			e corporation a subsidiary in an			nt-subsidiary contro	olled g	roup?	▶	□ Y	'es ⊠ No
			and identifying number of the	parent corporat	ion. 🕨					,	
			▶ Fernando Garcia			Telephone r					
Part			e or Business Income			(A) Income	(B)	Expens	es	* c	(C) Net
1a	Gross receipts						232				
b	Less returns a			c Balance ►	1c			2012	X 16 (3.5)	est Ba	
2	_	•	Schedule A, line 7)		2		2.00			KO (PA	
3	-		line 2 from line 1c		3		\$8,60°		1		
4a			ne (attach Schedule D)		4a		1133	10 Acres 10	1-465		
b			4797, Part II, line 17) (attach I		4b		IN THE SEC.	28.22F	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
_, C 71 - C	Capital loss de				4c		4. 10.70		(N)		•
1707 1707			a partnership or an S corp	•							
	•		· · · · · · · · · · · · · · · · · · ·		5				6.748		
$\mathbb{Z}_{\underline{6}}$	Rent income (•		6						
,			ced income (Schedule E)		7	82,174		37	, 173		45,001
NAU 8 8			s, and rents from a controlled organi	•	8						
			ection 501(c)(7), (9), or (17) organiz		9						
Go.	•	•	ivity income (Schedule I)		10						
2 1	_	•	Schedule J)		11		24-793	We State Ohaco	270 DA2H		
Z 2 .		•	structions; attach schedule) .		12	00 154	AR ES	* U.S.	9706		45 001
(13	Total. Combin	e lines	3 through 12		13	82,174			,173		45,001
Part			Taken Elsewhere (See ins		itations	on deductions.	(Dea	uction	s mus	t be c	directly
4.4			he unrelated business incor		RF(CEIVED			14		
14 15	Salaries and w		cers, directors, and trustees (·	· \- \	S	<u>'</u>	• •	15		
16			nce	191	110	2.9 2020 S			16		
17	•				· JUL	[0]		• •	17		_
18			lule) (see instructions)			<u> </u>	i .		18		
19				L L	OGE	DEN, UT	<u> </u>		19		
20			Form 4562)			20	• •				
21			imed on Schedule A and else						21b		
22							-		22		
23			rred compensation plans .						23		
24	Employee ben	efit pro	grams						24		
25	Excess exemn	t exper	nses (Schedule I)						25		
26	Excess reader	ship co	sts (Schedule J)						26		
27			ach schedule)						27		
28		•	Id lines 14 through 27						28		
29			xable income before net ope						29	-	45,001
30			perating loss arising in tax								
									30		
31			xable income. Subtract line 3						31		45,001

_				4
Р	а	a	Φ	

Form 996	D-T (2Q19)		Page 2
Part I	Total Unrelated Business Taxable Income		
	Total of unrelated business taxable income computed from all unrelated trades or businesses (see		
	instructions)	32	45,001
	Amounts paid for disallowed fringes	33	43,001
	· · · · · · · · · · · · · · · · · · ·		
	Charitable contributions (see instructions for limitation rules)	34	
	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line	_	
	34 from the sum of lines 32 and 33	35	45,001
	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		
	ınstructions)	36	
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35 .	37	45,001
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,000
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,		
	enter the smaller of zero or line 37	39	44,001
	V Tax Computation	1 00 1	
	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	9 240
		40	9,240
	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on		
	the amount on line 39 from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041)	41	
12	Proxy tax. See instructions	42	
13	Alternative minimum tax (trusts only)	43	
14	Tax on Noncompliant Facility Income. See Instructions	44	
	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	9,240
art \		-	
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) . 46a	""	
	Other credits (see instructions)	-	
	General business credit. Attach Form 3800 (see instructions)	1	
	· · · · · · · · · · · · · · · · · · ·	-	
	Credit for prior year minimum tax (attach Form 8801 or 8827)	 	
	Total credits. Add lines 46a through 46d	46e	
17	Subtract line 46e from line 45	47	9,240
18	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	48	
19	Total tax. Add lines 47 and 48 (see instructions)	49	9,240
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	
	Payments: A 2018 overpayment credited to 2019		
	2019 estimated tax payments	1 1	
	Tax deposited with Form 8868	7	
	Foreign organizations: Tax paid or withheld at source (see instructions) 51d	'	
		-	
	Backup withholding (see instructions)	- I	
	Credit for small employer health insurance premiums (attach Form 8941)	∤ 	
g	Other credits, adjustments, and payments: Form 2439		
	☐ Form 4136 ☐ Other ☐ Total ► 51g	J	
52	Total payments. Add lines 51a through 51g	52	10,108
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	53	
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	868
	Enter the amount of line 55 you want Credited to 2020 estimated tax 868 . Refunded	56	
art \		100	
			rity Yes No
	At any time during the 2019 calendar year, did the organization have an interest in or a signature or oth		"" ¹
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the fore	ıgn cour	·
	here		×
8	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreig	gn trust?	×
	If "Yes," see instructions for other forms the organization may have to file.		
	Enter the amount of tax-exempt interest received or accrued during the tax year > \$		
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best	of my know	vledge and belief, it is
ign	true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge 📂		
-			S discuss this return eparer shown below
lere	CHIEF FINANCIAL OFFICER		tions)? ∐Yes ⊠No
	Signature of officer Date Title		
aid	Print/Type preparer's name Preparer's signature Date Chec	k 🗌 ıf	PTIN
repa	self_c	employed	
•	Errola nama	s EIN ▶	
se C)niv		
	Firm's address ▶ Phon		QQO_T /004

2	00 1 (2010)					 				
$\overline{}$	dule A—Cost of Goods S									
1 `	Inventory at beginning of ye		1	6		at end of year				
2	Purchases	—	2	7		oods sold. Subtract line				
3	Cost of labor	· —	3			5. Enter here and in Par		_		
4a	Additional section 263A							<u> </u>	134	
	(attach schedule)	<u></u> ⊢	la	8		les of section 263A (wi			Yes	No
	Other costs (attach schedul	· , —	lb			roduced or acquired for				
	Total. Add lines 1 through		5			inization?				Щ_
	dule C-Rent Income (Fi	rom Rea	al Property and	Persona	Property I	Leased With Real Pro	perty	')		
	instructions)									
	ription of property									
(1)	<u> </u>	_								
(2)										
(3)										
(4)										
	2.	Rent receive	ed or accrued			_				
	om personal property (if the percenta personal property is more than 10% more than 50%)		(b) From real an percentage of rent to 50% or if the rent	or personal pr	operty exceeds	3(a) Deductions directly in columns 2(a) an				ie
(1)										
(2)										
(3)									_	
(4)					·			•		
Total			Total			(1) 7-1-1-1-1-1-1-1				
here a	tal income. Add totals of column and on page 1, Part I, line 6, colum	mn (A)	. •			 (b) Total deductions. Enter here and on page Part I, line 6, column (B 				
Sche	dule E—Unrelated Debt-	-Finance	ed Income (see	instructions	s)					
	1. Description of debt-fin	anced prop	erty		come from or debt-financed	3. Deductions directly co debt-finan	ced prop	perty		
				property		(a) Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)		
(1) Co	ommercial Building -	- 5404	Wurzbach		84,338.	5,255.	<u> </u>		32,8	397.
(2)			_				<u> </u>			
(3)							<u> </u>			
(4)			<u> </u>				ļ			
	Amount of average acquisition debt on or illocable to debt-financed property (attach schedule)	of or debt-fina	e adjusted basis allocable to anced property h schedule)	4 d	Column Iivided olumn 5	7. Gross income reportable (column 2 × column 6)		Allocable omn 6 × tota 3(a) and	al of col	
(1)	263,528.		270,467.	9	97.4344%	82,174.			37,1	173.
(2)					%			•		
(3)					%					
(4)			-		%					
						Enter here and on page 1, Part I, line 7, column (A).		here and I, line 7,		
Totals			•		. •	82,174.			37,1	L73.
Total	dividends-received deductions	s included	ın column 8 .		<u> </u>					
$\overline{}$									~~~	

Schedule F—Interest, Ann	uities, Royalties,	and Ren	ts From '	Controlled Org	j anizations (se	e instruc	tions)	
		Exempt	Controlled	Organizations				
Name of controlled organization	2. Employer identification number		lated income instructions)	4. Total of specified payments made	5. Part of colum included in the corganization's gro	controlling	conne	eductions directly ected with income in column 5
(1)					1			
(2)							<u> </u>	
(3)								
(4)	_						1	
Nonexempt Controlled Organia	zations	•		•	•			
7. Taxable Income	8. Net unrelated in (loss) (see instruct			otal of specified yments made	10. Part of column included in the column organization's ground the column included in the	controlling	connec	eductions directly cted with income in column 10
(1)	<u> </u>						 	
(2)				· · · · · · · · · · · · · · · · · · ·			·	
(3)								
(4)	,					-		
			,		Add columns 5 Enter here and c Part I, line 8, co	on page 1,	Enter h	columns 6 and 11 lere and on page 1, line 8, column (B)
Totals Schedule G—Investment	Income of a Soci	ion 501/	· · · · · · · · · · · · · · · · · · ·	or (17) Organi	zation (see inst	tructions	<u> </u>	<u> </u>
1. Description of income	2. Amount o		3. direc	Deductions ctly connected ach schedule)	4. Set-aside	s	5. To and se	otal deductions et-asides (col. 3 plus col. 4)
(1)	<u> </u>		1 (81)	acii scriedalej			<u> </u>	5143 CO1 47
(2) .								
(3)								
(4)								
Totals Schedule I—Exploited Exe	Enter here and Part I, line 9, o	column (A)		Advantage			Part I, III	re and on page 1, ne 9, column (B)
Description of exploited active	2. Gross unrelated business inco	me conn	Expenses directly lected with duction of	4. Net income (loss) from unrelated trade or business (column 2 minus column 3)	5. Gross income from activity that is not unrelated	6. Exp	enses able to	7. Excess exempt expenses (column 6 minus column 5, but not
	from trade of business	ur	nrelated ess income	If a gain, compute cols 5 through 7	business income	colur	nn ə	more than column 4)
(1)								
(2)		I						
(3)								
(4) Totals	Enter here and page 1, Part line 10, col (I, page	here and on e 1, Part I, I0, col (B)					Enter here and on page 1, Part II, line 25
Schedule J-Advertising I			•					
Part I Income From P	eriodicals Repor	ted on a	Consoli	dated Basis 🕦				· · · · · · · · · · · · · · · · · · ·
Name of periodical	2. Gross advertising income		. Direct tising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Read		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)		1				 		1000 A
(2)								
(3)								
(4)	- 			The second				
Totals (carry to Part II, line (5))	>							A Company of the Comp
								000 T

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	. >			30%小小公司			
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

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		•	

Form **990-T** (2019)

Additional information from your 2019 Federal Exempt Tax Return

Form 990-T: Exempt Organization Business Income Tax Return

Schedule E (1)

Schedule E, Column 3a

Itemization Statement

Description		Amount
Building-Motor Bank		5,255.
	Total	5,255.

Form 990-T: Exempt Organization Business Income Tax Return

Schedule E (1)

Schedule E, Column 3b

Itemization Statement

Description	Amount
Salaries and benefits	1,127.
Professional services	3,220.
Building occupancy	14,498.
Interest expense	13,997.
Office	55.
Total	32,897.

Form 990-T: Exempt Organization Business Income Tax Return

Schedule E Continued (1)

Schedule E, Column 4

Itemization Statement

Description	Amount
Note payable - land and building	262,935.
Note payable - HVAC	593.
	Total 263,528.

Form 990-T: Exempt Organization Business Income Tax Return

Schedule E Continued (1)

Schedule E, Column 5

Itemization Statement

Description	Amount
Wurzbach building - motor bank	177,134.
Land	93,333.
Tota	270,467.