For Paperwork Reduction Act Notice, see instructions.

Form 990-T (2016)

9	Cilici	i cicalis alla payii							1 1			
	F	orm 4136		Other	Total >	45g	L		1 1			
46	Total	payments. Add l	nes 45a through 45g					-	46		1	.,240
47	Estimated tax penalty (see instructions) Check if Form 2220 is attached											
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed											
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid											313
50	Enter	the amount of line 49	you want Credited to	2017 estimated tax ▶	3	18	Refun	ded ▶	50			
Pa	rt V	Statemen	ts Regarding Ce	rtain Activities and	Other Inform	natior	i (see instructio	าร)				
51	At an	y time during the	2016 calendar year, o	did the organization have a	an interest in or a	signat	ture or other autho	rity				es No
				r other) in a foreign country							[
	FinCl	EN Form 114, Rep	ort of Foreign Bank	and Financial Accounts If	YES, enter the n	ame o	f the foreign coun	try				[
	here	>										X
52	Durin	ng the tax year, did	the organization rec	eive a distribution from, or	was it the granto	or of, o	r transferor to, a fe	oreign tri	ust?			X
		-	-	organization may have to f								
53	Enter	r the amount of tax	c-exempt interest rec	eived or accrued during the	e tax year ▶ \$							
	Ur	nder penalties of perjury,	declare that I have examined	this return, including accompanying	schedules and stateme	nts, and t	o the best of my knowled	e and belie	ef, it is			
Sig	n tr	ue, correct, and complete	Declaration of preparer (other	r than taxpayer) is based on all inform	mation of which prepare	r nas any	knowledge			May t	he IRS discus he preparer si	ss this return
Her	e ▶	1 m	2000	11-25-18 PRE	SIDENT					(see	nstructions)?	
	1 _	ignature of officer	0	Date Title	DIDLILI					L	X Yes	No
		Print/Type preparer's r	name	Preparer's signate	ure	-	Da	te	Check	[]	PTIN	
Paid		JEFFREY STROD	ER	JEFFREY ST	RODER		12	/27/17	self-emp	loyed	P00573	001
Prep	arer	Firm's name	BEUSSINK,	HEY & ROE, P	·.C.			Firm's	EIN >	4	3-15	3389
Use			16 SOUTH	SILVER SPRING	S ROAD							
		Firm's address	CAPE GIRA	RDEAU, MO 63	703			Phone	e no	573	-334	-498
											Form 990	-T (2016
												•

	ALLIANCE FO				_2	0-1932525		Page		
Schedule A - Cost of Go	ods Sold. Enter m	etho	d of invent	ory valuation ▶						
1 Inventory at beginning of ye	ventory at beginning of year 1 6 Inventory at end of y				of ye	ar	6			
2 Purchases	2		7	Cost of goods so	Subtract line 6 from	Ì				
3 Cost of labor	3			line 5 Enter here	in Part I, line 2	7	<u> </u>			
4a Additional sec 263A costs (attach schedule)	4a		8	Do the rules of se	ction	n 263A (with respect to		Yes No		
b Other costs (attach schedule)	4b			property produced	or a	acquired for resale) apply				
5 Total. Add lines 1 through		to the organization				<u></u>				
Schedule C – Rent Incon	ne (From Real Pro	pert	y and Per	sonal Property	Lea	ised With Real Prop	erty))		
(see instructions)										
Description of property			·			·				
1) N/A	_ -									
2)										
3)						·				
4)										
	2 Rent received of	or accru	ed							
(a) From personal property (if the p	percentage of rent		(b) From real a	nd personal property (if the	•	3(a) Deductions	directly	connected with the income		
for personal property is more that	an 10% but not		-	for personal property exce		in columns 2	(a) and	d 2(b) (attach schedule)		
more than 50%)			50% or if the rent	is based on profit or incon	10)					
1)										
2)										
3)										
4)								<u></u>		
Total		<u> Total</u>				(b) Total deduction	15.			
c) Total income. Add totals of c		Enter here and on page 1,								
nere and on page 1, Part I, line 6						Part I, line 6, column	(B) ▶	<u> </u>		
<u> Schedule E – Unrelated I</u>	Debt-Financed Inc	come	e (see instru	ictions)						
		į	2 Gro	ess income from or		3. Deductions directly				
1 Description of debt-fi	inanced property	1	_	allocable to debt-financed		STMT 1 debt-finan		ed property STMT 2		
		property		1	(a) Straight line depreciation		(b) Other deductions			
					_	(attach schedule)	<u>-</u> -	(attach schedule)		
(1) COMMERCIAL BI	DG - KINGSW	IA.		29,12	:3	3,54	4-	12,55		
2)			' 							
3)			<u> </u>		-					
4)					-		-			
4. Amount of average 5 Average adjusted basis acquisition debt on or of or allocable to				6. Column		7. Gross income reportable	ĺ	8. Allocable deductions		
allocable to debt-financed	debt-financed property	1	•	4 divided by column 5		(column 2 x column 6)		(column 6 x total of columns 3(a) and 3(b))		
property (attach schedule)	(attach schedule)				_	15.00	 			
(1) 199,097	362,	/59		54.88	3 %	15,98	3	8,83		
(2)					%					
(3)					%					
(4)		لـــا	<u> </u>		%					
SEE STATEMENT 3	SEE STATEMENT	4				Enter here and on page 1 Part I, line 7, column (A)		Enter here and on page 1, Part I, line 7, column (B)		
Totals)	▶ [15,98	3	8,83		
Total dividends resolved dedu	etione included in only	.m. 0			_					

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Schedule F - Interest, Annu	ities. Rovalt	ies, and Ren	ts Fron	n Controll	ed Or	ganiz	ations	(see instru	ctions)		
`			Exem	pt Controlled	Organ	nizatio	ns	1000	<u> </u>		
1 Name of controlled ▶ organization ider		2 Employer ntification number	c: (Total of specified payments made		5 Part of column 4 that is included in the controlling organization's gross inc		ng connected with income	
(1) N/A			ļ					organization o	9.020	***************************************	
(2)										 	
(3)	4									 	
(4)											
Nonexempt Controlled Organiza	tions		L		<u></u>					'	
						1.	Dark of an		T	4. De de et e e e de e de	
7 Taxable Income	Net unrelated income oss) (see instructions)		9 Total of specific 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)						<u> 1</u>					
(3)						<u> </u>					
(4)						<u> </u>					
						Er	nter here ar	ns 5 and 10 nd on page 1, , column (A)	page 1, Enter here and on page		
Totals					<u> </u>	<u> </u>		 _	J		
Schedule G – Investment In	icome of a S	ection 501(c)(7), (9)), or (17) O	rganiz	atio	ı (see II	nstructions)			
1 Description of income		2 Amount of it				4. Set-asides		5. Total deductions and set-asides (col. 3 plus col. 4)			
(1) N/A				1							
(2)				 						·	
(3)				<u> </u>							
(4)											
Totals		Enter here and o Part I, line 9, col	iumn (A)							nter here and on page 1, Part I, line 9, column (B)	
Schedule I - Exploited Exer	npt Activity	Income, Oth	er Thar	n Advertisi	ng Ind	ome	(see in	structions)			
Description of exploited activity	2 Gross unrelated business incom from trade or business	3 Expen directl connected productio unrelate business in	y I with in of ed	4 Net income (from unrelated or business (co 2 minus columing again, compcols 5 through	trade lumn n 3) oute	from is no	oss income activity that it unrelated ess income	attrib	xpenses utable to lumn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1) N/A											
(2)											
(3)											
(4)											
Totals •	Enter here and c page 1, Part I, line 10, col (A)	page 1, P	art I,							Enter here and on page 1, Part II, line 26	
Schedule J - Advertising In	come (see in	structions)		-							
Part I Income From P			Cons	olidated B	asis						
Name of periodical	2 Gross advertising income	3 Dire advertising	ct	4 Advertising gain or (loss) 2 minus col 3 a gain, comprools 5 throug	ng (col i) If		circulation		adership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1) N/A											
(2)											
(3)											
(4)					「						
Totals (carry to Part II, line (5))											
Totals (Carry to Fattil, lille (3))											

Total. Enter here and on page 1, Part II, line 14

Part II Income From	Periodicals Repo	rted on	a Sepa	rate Basis (For	each period	ical list	ed in P	art II, fil	l in columns	
<u>2 through 7 on</u>	a line-by-line basi	s.)								
2 Gross 1 Name of periodical advertising advertising advertising		l 2 minus col 3) If I		5 Circulation income		6. Readership costs		7 Excess readership costs (column 6 minus column 5, but not more than column 4)		
(1) N/A					}					
(2)										
(3)										
(4)										
Totals from Part I										
	Enter here and on page 1, Part I, line 11, col (A)	Enter her page 1, line 11,							Enter here and on page 1, Part II, line 27	
Totals, Part II (lines 1-5)	<u> </u>	<u></u>		<u> </u>						
Schedule K - Compensation	on of Officers, Di	rectors	, and Tr	ustees (see instr	uctions)				 _	
1 Name			2 Title			3 Percent of time devoted to business			Compensation attributable to unrelated business	
(1) N/A							%			
(2)							%			
(3)							%			
							0/			

Form **990-T** (2016)

4636 SEMO ALLIANCE FOR DISABILITY

20-1932525

Federal Statements

FYE: 6/30/2017

Statement 1 - Form 990-T, Schedule E, Column 3a - Straight Line Depreciation

Description	Deduction
COMMERCIAL BLDG - KINGSWAY	
	3,541
TOTAL	3,541

Statement 2 - Form 990-T, Schedule E, Column 3b - Other Deductions

Description	
COMMERCIAL BLDG - KINGSWAY LEGAL FEES ACCOUNTING FEES OCCUPANCY INTEREST INSURANCE	\$ 5,846 44 1,704 4,128 837
TOTAL	12,559

Statement 3 - Form 990-T, Schedule E, Column 4 - Average Acquisition Debt

Description	Deduction
COMMERCIAL BLDG - KINGSWAY	
SUM OF DEBT OUTSTANDING AT FIRST OF EACH MONTH	2,389,169
DIVIDED BY TOTAL NUMBER OF MONTHS PROPERTY HELD	12
AVERAGE ACQUISITION DEBT	199,097

Statement 4 - Form 990-T, Schedule E, Column 5 - Average Adjusted Basis

Description	<u>Deduction</u>
COMMERCIAL BLDG - KINGSWAY ADJUSTED BASIS ON FIRST DAY PROPERTY WAS HELD ADJUSTED BASIS ON LAST DAY PROPERTY WAS HELD	367,751 357,767
DIVIDED BY 2	725,518
AVERAGE ADJUSTED BASIS	362,759