ري المراجعة	•	-							29393	29	801735		
	Form	990-T	EXTENDED TO MAY 15, 2020 Exempt Organization Business Income Tax Return								OMB No 1545-0687		
		(and proxy tax under section 6033(e)) 900 For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019									2018		
÷		tment of the Treasury al Revenue Service		-	rinstructions and the latest information. lay be made public if your organization is a 501(c)				.	Open to Public Inspection f 501(c)(3) Organizations Only	for ly		
	A	Check box if address changed		Name of organization (Check box if name changed and see instructions.)							loyer identification number ployees' trust, see uctions)		
		kempt under section	Print	MERAKEY WOODHAVEN						23-2784811			
	X] 501(c)(3 ()] 408(e)220(e)	Type	Number, street, and room or suite no. If a P.O. box, see instructions. 620 E. GERMANTOWN PIKE						E Unrelated business activity code (See instructions)			
		408A 530(a) 529(a)		City or town, state or province, country, and ZIP or foreign postal code LAFAYETTE HILL, PA 19444									
	C Boo	F Group exemption number (See instructions.)								1		_	
			trust	Other trust									
			-	tion's unrelated trades or t	related	1							
	tra	de or business here 🕨	PAF	RKING BENEFI	TS			If only one	, complete Parts I-V.	If more	e than one,		
	des	scribe the first in the bl	ank spa	ce at the end of the previou	us sentence, complete Pa	arts I ai	nd II, complete	a Schedu	le M for each addition	al trad	e or		
		siness, then complete											
2020		During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?											
30				ifying number of the paren	t corporation.					1.0	060 4600	_	
11				SIMON WHANG le or Business Inc			(A) In-		none number > 6			_	
130	3	11. 184		ie or business ind	ome		(A) Inc	:ome	(B) Expenses	3 Sestrator de	(C) Net	568	
8		Gross receipts or sale				١.							
		Less returns and allow		A Ima 7)	c Balance	10	•		THE SALES OF THE SALES	มากับเกียม มากออกกา			
55 Towns Ogden		Cost of goods sold (S		•		2			The last of the constraint of	ST TANK			
) O		Gross profit. Subtract		3						_			
اَيِّا مُ		Capital gain net incom	•	48			AMERICA DESCRIPTION OF THE STATE OF THE STAT			_			
٦ .				art II, line 17) (attach Form	14/9/)	4b			SUPPLY AND ALKARD FOR ALL ON	STATE OF THE			
يَيَ		Capital loss deduction		4c 5				Pulk sale file.		_			
K		Rent income (Schedu	thip or an S corporation (at	6	ļ			中国特色		_			
		Unrelated debt-finance	•	na (Cahadula E)		7	 		 		·	_	
	_			,		8	 				· · · · · · · · · · · · · · · · · · ·	—	
	_	•		nd rents from a controlled	•	<u> </u>						_	
		Exploited exempt activ		in 501(c)(7), (9), or (17) or ma (Sabadula 1)	gamzation (Schedule G)	10							
		Advertising income (S				11							
		Other income (See ins		•		12				Ki-Kinek		_	
-		Total. Combine lines		•		13		0.		SAMPLANT.		_	
2020				ot Taken Elsewher	'A (See instructions for	1	ations on de					_	
гэ 2	1,24,00	(Except for o	ontribu	itions, deductions must	be directly connected	d with	the unrelate	d busines	ss income)				
44	14	 		ectors, and trustees (Sche						14	<u> </u>	_	
	15	Salaries and wages	,							15	<u> </u>	-	
MOV	16	Repairs and mainten						16		_			
	17	Bad debts								17		_	
	18	Interest (attach sche		18	·	_							
Z	19	Taxes and licenses								19		_	
SCANNEL	20	Charitable contribution	ns (See	instructions for limitation	rules)					20		_	
3	21	Depreciation (attach	Form 45	i62)				21		这些		_	
G ®∀	22	Less depreciation cla	ımed on	Schedule A and elsewhere	e on return	R # 1	7	22a		22b			
	23	Depletion		162) In Schedule A and elsewher	KECE	VE	$\mathbf{D}_{\mathcal{A}}$			23		_	
	24	Contributions to defe	rred cor	npensation plans	വരി				24				
	25	Employee benefit pro	grams		99 JUL 21	2021				25			
	26	Excess exempt expe	ises (Sc	:hedule I)	 ▼		ျှ			26			
	27	Excess readership costs (Schedule J) OGDEN, UT								27		_	
	28	Uther deductions (attach schedule)								28		_	
	29	Total deductions. Add lines 14 through 28								29	0		
	30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)								30	0		
	31									31	TO ME TO SERVE TO SER	_	
ı	32										0.	_	
	82370	1 01-09-19 LHA Fo	r Paper	work Reduction Act Notice	, see instructions.					V	Form 990-T (2018	8١	

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Part	Total Unrelated Business Taxable Income									
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (so	33	0.							
34	Amounts paid for disallowed fringes	34								
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instr	35								
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the s									
	lines 33 and 34	nes 33 and 34								
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)		3 0	37	1,000.					
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line	36,								
	enter the smaller of zero or line 36			38	0.					
Part	IV/ Tax Computation		<u> </u>							
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)		>	39	0.					
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount									
	Tax rate schedule or Schedule D (Form 1041)	40								
41	Proxy tax. See instructions	·								
42	Alternative minimum tax (trusts only)			42						
43	Tax on Noncompliant Facility Income See instructions			43						
44		44	0.							
	₩ I Tax and Payments									
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a								
b	b Other credits (see instructions)	45b	··· <u>-</u>							
C	General business credit. Attach Form 3800	45c								
	d Credit for prior year minimum tax (attach Form 8801 or 8827)									
	Total credits. Add lines 45a through 45d			45e	0.					
46		Subtract line 45e from line 44								
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 88	366 L Other (attach schedule)	47						
48	Total tax. Add lines 46 and 47 (see instructions)			48	0.					
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	1 1		49	0.					
	a Payments: A 2017 overpayment credited to 2018	50a								
	b 2018 estimated tax payments c Tax deposited with Form 8868	ŠÓЬ	1 050							
	septement	- 100	1,050							
	d Foreign organizations; Tax paid or withheld at source (see instructions)	50d								
	e Backup withholding (see instructions)	50e								
	f Credit for small employer health insurance premiums (attach Form 8941)	50f			•					
8	g Other credits, adjustments, and payments: Form 2439 Form 4136 Other Total	1.1								
£4		50g			1 050					
51	Total payments. Add lines 50a through 50g			51	1,050.					
52 52	, ,, ,			53						
53 54	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid		~	54	1,050.					
55		1 00	funded	0 55	1,050.					
Part,				1 22	1,050.					
56					Yes No					
50	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization		•		CAPE CHARLE					
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the	•	,							
	here									
57		ransferor to a for	eian trust?							
٠.	If "Yes," see instructions for other forms the organization may have to file.		g., .,		Hall Mark					
58										
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and			wledge and	belief, it is true,					
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer	rer has any knowled	_	:=						
Here	7/6/20 ▶ CFO				discuss this return with shown below (see					
	Signature of officer Date Title	structions)?								
-	Print/Type preparer's name Preparer's signature Da	ite	Check	f PTIN						
Paid			self- employed							
Prepa										
Use (Francis manus .	——————————————————————————————————————	Firm's EIN	·						
	Firm's address -		Phone no.							
823711 0	01-09-19				Form 990-T (2018)					