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Par	Total Unrelated Business Taxable Income	, , -	
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see		•
	instructions)	33	
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		
	instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum		
	of lines 33 and 34	36	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	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.
Par	Tay Computation	- 1	
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0 21)	. 39	
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on		
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041),	40	
41	Proxy tax. See instructions		
42	Alternative minimum tax (trusts only).		
43	Tax on Noncompliant Facility Income. See instructions		
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies		
Par		44	
		T T	
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	┥	
	Other credits (see instructions)	-	
	General business credit Attach Form 3800 (see instructions)	-	
	Credit for prior year minimum tax (attach Form 8801 or 8827)	45.	
	Total credits. Add lines 45a through 45d		
46	Subtract line 45e from line 44	46	
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule).		0.
48	Total tax. Add lines 46 and 47 (see instructions)	1	
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	
	Payments A 2017 overpayment credited to 2018	' 	
b	2018 estimated tax payments	-	
	Tax deposited with Form 8868	4 1	
	Foreign organizations Tax paid or withheld at source (see instructions)	-	
	Backup withholding (see instructions)	4	
	Credit for small employer health insurance premiums (attach Form 8941) 50f	-	
g	Other credits, adjustments, and payments Form 2439	1	
	Form 4136 Other Total ▶ 50g	 	7 206
	Total payments. Add lines 50a through 50g	51	7,326.
	Estimated tax penalty (see instructions) Check if Form 2220 is attached ▶ □	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53,	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	5,4	7,326.
55	Enter the amount of line 54 you want	4	7,326.
Par			
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature of		· ——
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may be a financial account (bank, securities, or other) in a foreign country?		1 1
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	foreign cour	
	here >		_ X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore	ign trust?	X
	If "Yes," see instructions for other forms the organization may have to file		
58	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 true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	best of my knowl	edge and belief, it is
Sigr		av the IRS dis	cuss this return
Her	a 1 1 20// // // // - /	•	er shown below
	Signature of officer Date Title (s	ee instructions)?	
	Print/Type preparer's name Preparer's signature Date Cher	k If PT	ÎN
Paid	MARC R BERGER CPA /// / / / / / / / / / / / / / / / / /		01871563
Prep	arer Firm's name BDO USA, LLP	<u> </u>	5381590
use_		eno 215-5	54-1900 -
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			, , , ,

Form 990-T (2018)							Page	
Schedule A - Cost of G	oods Sold. E	nter method	d of inventory valu	ation I	.			
1 Inventory at beginning of y	rear 1		6 Inv	entory a	at end of yea	ar	6	
2 Purchases	2			7 Cost of goods sold. Subtract line				
3 Cost of labor	3		6	from I	ine 5 En	iter here and in		
4a Additional section 263A co	osts		Pa	rt I, line	2		7	
(attach schedule)	4a		8 Do	the	rules of	section 263A (w	with respect to Yes No	
b Other costs (attach schedu						or acquired for		
5 Total. Add lines 1 through			to	the orga	inization?.	 	x	
Schedule C - Rent Income	(From Real F	roperty a	nd Personal Pro	perty	Leased V	Vith Real Prope	rty)	
(see instructions)								
1. Description of property								
(1)								
(2)			7 125.0					
(3)								
(4)								
	2. Rent rece	ved or accru	ed				· · · ·	
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)			(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)			3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)		
(1)								
(2)								
(3)								
(4)								
Total		Total						
(c) Total income. Add totals of co	olumns 2(a) and 2	(b), Enter				(b) Total deductio Enter here and on		
here and on page 1, Part I, line 6						Part I, line 6, colur		
Schedule E - Unrelated De	ebt-Financed I	ncome (se	e instructions)					
			2. Gross income fr	om or	3. C		nnected with or allocable to	
1. Description of det	t-financed property		allocable to debt-fin	able to debt-financed		debt-financ	(b) Other deductions	
			property		(attach schedule)		(attach schedule)	
(1)								
(2)								
(3)								
(4)								
4. Amount of average 5. Average adjus acquisition debt on or allocable to debt-financed property (attach schedule) 5. Average adjus of or allocable to debt-financed property (attach schedule) (attach schedule)		ble to 6. Column property 4 divided		7. Gross income reportable (column 2 x column 6)		8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))		
(1)				%				
(2)				%				
(3)				%				
(4)				%				
						e and on page 1, e 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)	
Totals	ione included in a	· · · · · ·		⊳l				

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Schedule F-Interest, Ann	uities, Royalties						tions (see	: instructio	ns)	·	
1. Name of controlled 2. Employer organization identification number		er 3	3. Net unrelated income (loss) (see instructions)		ganizations 4. Total of specified payments made		included	5. Part of column 4 that is included in the controlling organization's gross income		6. Deductions directly connected with income in column 5	
(1)											
(2)											
(3)											
(4)					<u> </u>					<u> </u>	
Nonexempt Controlled Organi						10 P	art of column	9 that is		1. Deductions directly	
7. Taxable Income	8. Net unrelated income (loss) (see instructions)		9. Total of specified payments made		included in the con organization's gross		introlling co		connected with income in column 10		
(1)											
(2)											
(3)											
			<u>.</u>			Ente	i columns 5 a r here and on I, line 8, colu	page 1,	En	dd columns 6 and 11 ter here and on page 1, art I, line 8, column (B)	
Schedule G-Investment In) Orga	nizatio	n (see inst	tructions)			
1. Description of income	2. Amount of income		3. Deductions		tions inected		4. Se	4. Set-asides (attach schedule)		5. Total deductions and set-asides (col 3 plus col 4)	
(1)				\							
(2)											
(3)											
(4)											
Totals ▶ Schedule I-Exploited Exe	Enter here and Part I, line 9, or	olumn (A)	245.24	Thoras Advisorati		• • •		-4:>		Enter here and on page 1, Part I, line 9, column (B)	
Description of exploited activity	2. Gross unrelated business income from trade or business	3 Exp dire connec produc	penses ectly sted with ction of elated	4. Net income from unrelated or business (co 2 minus colum if a gain, come cols 5 through		5. Gross income from activity that		6. Expenses attributable to column 5		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)									-		
(2)		•	_								
(3)											
(4)											
Totals	Enter here and on page 1, Part I, line 10, col (A)		re and o , Part I, , col (B)		· ·	ی	· •			Enter here and on page 1, Part II, line 26	
Schedule J- Advertising Ir	icome (see instri	uctions)					4			<u> </u>	
Part I Income From Per			Cons	solidated Bas	is					· · · · · · · · · · · · · · · · · · ·	
1. Name of periodical	2. Gross advertising income		rect	4. Advert	ising s) (col ol 3) If mpute		rculation come	6. Reade costs		7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)										. 1	
(2)										_ ·	
(3)										_	
(4)					* *						
Totals (carry to Part II, line (5))										5 990-T (2018)	

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2. Gross 1. Name of periodical 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 ▶		• •- • :				
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)	- 4			Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶		=		1. 1 -		'
Schedule K - Compensatio	n of Officers, D	irectors, and Tr	ustees (see instr			
1. Name		2. Title		3. Percent of time devoted to business	4 Compensation unrelated t	
(1)			•	%		
(2)				%		
(3)	·	,		%		
(4)				%		
Total Enter here and on page 1 P	art II. line 14					