

1906

Form 990-T

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

OMB No 1545-0687

For calendar year 2018 or other tax year beginning JUL 1, 2018 and ending JUN 30, 2019

2018

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

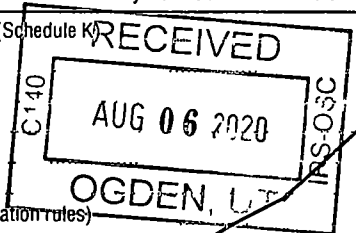
Form sections A through H: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets; D Employer identification number; E Unrelated business activity code; F Group exemption number; G Check organization type; H Enter the number of the organization's unrelated trades or businesses.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? STMT 1 [X] Yes [] No. If "Yes," enter the name and identifying number of the parent corporation. COVE 13-2725416

J The books are in care of JEN WEIKERT, EXECUTIVE DIRECTOR Telephone number 215-951-5411

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows 1a-13: 1a Gross receipts or sales; 1b Less returns and allowances; 2 Cost of goods sold; 3 Gross profit; 4a-4c Capital gain/loss; 5-12 Other income; 13 Total. Total income is 0.

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows 14-32: 14 Compensation of officers; 15 Salaries and wages; 16-28 Various deductions; 29 Total deductions; 30-32 Unrelated business taxable income. Total deductions is 0, and total taxable income is 0.



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Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Rows 33-38. Total amount 0.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Rows 39-44. Total amount 0.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Rows 45a-56. Total payments 1,300.

Part VI Statements Regarding Certain Activities and Other Information

Table with 3 columns: Line number, Description, and Yes/No. Rows 56-58.

Signature of officer: Garrett M. Higgins, Date: 7/14/20, Title: EXECUTIVE DIRECTOR

Paid Preparer Use Only: GARRETT M. HIGGINS, PKF O'CONNOR DAVIES, LLP, 500 MAMARONECK AVENUE, HARRISON, NY 10528-1633

FORM 990-T PARENT CORPORATION'S NAME AND IDENTIFYING NUMBER STATEMENT 1

CORPORATION'S NAME

IDENTIFYING NO

COVENANT HOUSE

13-2725416