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trade or business here ▶ OPERATION OF A BOWLING ALLEY If norly one, complete Parts I-V. If more than one, describe the first in the ball space at the and of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III. During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ ▼ Yes INDEDITION TO THE PARTS IN THE PARTS		98. G Check organization typ	pe ► X 501(c) corp	poration	501(c) trust	401(a) trust	Other trust
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Excess readership costs (Schedule J) Other deductions (attach schedule) Total deductions Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 See instructions) Unrelated business taxable income. Subtract line 30 from line 29 26 27 44, 936. 28 247, 084. 29 -20, 864.								20,438.
Other deductions (attach schedule) Total deductions Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 30 from line 29 Total deductions Add lines 14 through 27 28 247,084. 29 -20,864.								
Total deductions Add lines 14 through 27 29 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 29 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 See instructions 30					ann an-	1773.4773.4777 4		44 036
Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 see instructions) 30 0. Unrelated business taxable income. Subtract line 30 from line 29 31 -20,864.		-			SEE STAT	EWENT, T	\rightarrow	
Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) 30 0. Unrelated business taxable income. Subtract line 30 from line 29 31 -20, 864.							-	
See instructions) 30 0. 31 Unrelated business taxable income. Subtract line 30 from line 29 31 -20,864.	/						29	-20,864.
31 Unrelated business taxable income. Subtract line 30 from line 29 31 -20, 864.	,	rating loss arising in tax years beg	ginning on or after Januar	y 1, 20	าช		_	0
	•	avahla maama. Cuhtraat liina 00 fira	ım lına 20					
						 	31	Form 990-T (2019)

	Form 99	PROGRAMS EMPLOYING PEOPLE	23-71188	47 Page 2
	Part	ोध् Total Unrelated Business Taxable Income		
	32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		<u>,864.</u>
	33	Amounts paid for disallowed fringes	33	
	34	Charitable contributions (see instructions for limitation rules)	3,4	0.
	35	Total unrelated business taxable income before pre 2018 NOLs and specific deduction Subtract line 34 from the sum of lines 32 and 33 5	35 <u>-20</u>	,864.
	36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) STMT 2	36	0.
	37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37 -20	,864.
	38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38 1	,000.
٠.	30	Unrelated business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37,		
II		enter the smaller of zero or line 37	39 -20	,864.
	Part	IV Tax Computation		
,	40	Organizations Taxable as Corporations Multiply line 39 by 21% (0.21)	40	0.
	41	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	
	42	Proxy tax. See instructions	42	
	43	Alternative minimum tax (trusts only)	43	
	44	Tax on Noncompliant Facility Income. See instructions	44	
"		Total Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	0.
``	Part			
		Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a		
	b	Other credits (see instructions) 46b	4	
	C	General business credit Attach Form 3800 46c		
	d	Credit for prior year minimum tax (attach Form 8801 or 8827)		
		Total credits. Add lines 46a through 46d	46e	
	47	Subtract line 46e from line 45	47	0.
	48	Other taxes Check if from. Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	48	
	49	Total tax Add lines 47 and 48 (see instructions)	49	0.
	50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	0.
		Payments: A 2018 overpayment credited to 2019		
	b		`	
	_	Tax deposited with Form 8868		
		Foreign organizations Tax paid or withheld at source (see instructions) 51d		
		Backup withholding (see instructions) 51e		
		Credit for small employer health insurance premiums (attach Form 8941) 51f		
		☐ Form 4136 ☐ Other ☐ Total ► 51g		
	52	Total payments. Add lines 51a through 51g	52	
	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	
	55	Overpayment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	
	56	Enter the amount of line 55 you want: Credited to 2020 estimated tax	56	
	Part	VI Statements Regarding Certain Activities and Other Information (see instructions)		
•	57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Yes No
		over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file	į.	·
		FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country	-	1
		here		X
	58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		Х
		If "Yes," see instructions for other forms the organization may have to file.		-
	59	Enter the amount of tax-exempt interest received or accrued during the tax year 🕨 \$		
	٠.	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge correct, and complete Declaration of preparer (other than texpayer) is based on all information of which preparer has any knowledge	ge and belief, it is true,	
	Sign	Ma	y the IRS discuss this re	turn with
	Here		preparer shown below ($\overline{}$
			ructions)? X Yes	No
		Print/Type preparer's name Preparer's signature Date Check if	PTIN -	
	Paid	self- employed	D004010	0.7
	Prep	parer CONNIE M. LIRA CONNIE M. LIRA 05/05/21	P004810	
	Use	Only Firm's name ► CLIFTONLARSONALLEN LLP Firm's EIN ►	41-0746	149
		610 W GERMANTOWN PIKE, SUITE 400	215\ 642	3000
		Firm's address ► PLYMOUTH MEETING, PA 19462 Phone no. (2)	<u> 215) 643-</u>	J J U U

Form 990-T (2019) PROGRAMS EMPLOYING PEOPLE

Schedule A - Cost of Goods Sold. E	nter method of inve	ntory valuation N/A		
1 Inventory at beginning of year 1		6 Inventory at end of year	ır	6
2 Purchases 2	-	7 Cost of goods sold St	ubtract line 6	
3 Cost of labor 3		from line 5. Enter here		
4 a Additional section 263A costs		line 2		7
(attach schedule) 4a		8 Do the rules of section	263A (with respect to	Yes No
b Other costs (attach schedule) 4b		property produced or a		
5 Total. Add lines 1 through 4b 5		the organization?		X
Schedule C - Rent Income (From Re (see instructions)	eal Property and	d Personal Property L	eased With Real Prop	perty)
1. Description of property				
(1)				
(2)				
(3)				
(4)				
	eceived or accrued			
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	of rent for	and personal property (if the percenta personal property exceeds 50% or if int is based on profit or income)	ge 3(a) Deductions directly columns 2(a) a	y connected with the income in and 2(b) (attach schedule)
(1)				
(2)				
(3)				
(4)				
Total () . Total		0.	
(c) Total income. Add totals of columns 2(a) and 2(b here and on page 1, Part I, line 6, column (A)	•		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B))
Schedule E - Unrelated Debt-Finance	ed Income (see	instructions)		
		2. Gross income from	3. Deductions directly cor to debt-finan	ced property
 Description of debt-financed property 	•	or allocable to debt- financed property	(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 5 Avi	erage adjusted basis of or allocable to t-financed property attach schedule)	6 Column 4 divided by column 5	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)		%		
			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			0	. 0.
Total dividends-received deductions included in col	lumn 8		•	0.

Form **990-T** (2019)

Form 990-T (2019) PROGRA	MS EM	PLOYI	NG PE	OPLE					23-71	1884	.7_ Page
Schedule F - Interest, A	nnuities	s, Royal	ties, an	d Rents	From Co	ntrolle	d Organiza	tion	S (see in:	struction	ns)
				Exempt	Controlled O	rganızat	ions				
1. Name of controlled organizat	on		iployer ication iber	3. Net ur (loss) (se	related income e instructions)	4. To	tal of specified ments made	inclu	art of column 4 ded in the cont zation's gross	rolling	6. Deductions directly connected with income in column 5
<u></u>	-			+							
_(1)				+				├		-+	
_(2)				+			 	-			
_(3)								├		-+	
_(4)				<u></u>							
Nonexempt Controlled Organiz	ations			_							
7 Taxable Income		related incon se instruction		9. Tota	l of specified payn made	nents	10 Part of colur in the controlli gross	nn 9 tha ng orga a income	nization's		eductions directly connected h income in column 10
_(1)											
_(2)											
				 							-
_(3)		 -		 							
_(4)											
							Add colum Enter here and line 8, c	on page	e 1, Part I,		dd columns 6 and 11 here and on page 1, Part I, line 8, column (B)
Totals						•			0.		0.
Schedule G - Investme	nt Incom	e of a S	Section	501(c)(7) (9) or (1	7) Ord	nanization		•		<u>_</u>
(see instr		ie oi a c	CCLIOII	301(0)(,, (s), or (11,019	gamzation				
	iption of incom	ne			2. Amount of	ncome	3 Deduction directly connect (attach schedu	cted	4. Set-	asides chedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
_(1)					 		(attaon bonous				(cor a pida cor 4)
			 -								
(2)					/						
_(3)		•							 		
_(4)							are warre	- ~ (a , ?	Lataria with		* 12
Totals Schedule I - Exploited I		Activity	Income	► Other	Part I, line 9, col	umn (A)	A Income				Enter here and on page 1 Part I, line 9, column (B)
(see instru	-	todivity		o, Otiloi	mannav	0	ig income				
(650 11.51.5	0110110)				T 4						
Description of exploited activity	2, Gr unrelated t income trade or b	trom	directly of with pro of uni	penses connected oduction related s income	4. Net incom from unrelated business (col minus column gain, compute through	trade or umn 2 3) If a cols 5	5. Gross inco from activity the is not unrelated business income	nat ed	6 Exp attributi colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(2)			-		 						
(2)									h		
(4)				•			 -				
_(4)	Enter here page 1, line 10, c	Part I,		re and on i, Part I, col (8)							Enter here and on page 1,
Totals •		0.		0.	MANAGE AND THE PARTY OF THE PAR	型 美国		机湖		扩展基础	0.
Schedule J - Advertisin											
Partile Income From F	Periodica	als Repo	orted o	n a Con	solidated l	Basis					
1. Name of periodical		2. Gross advertising income		3. Direct artising costs	4. Advertion (loss) (co col 3) If a ga cols 5 th	1 2 minus in, comput ough 7		on	6. Reade cost		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)		•			Proni		and gran	-			
(2)						HEELE	<u> </u>				
(3)			+				5				
	_						\$ 				
_(4)			 -		6. Apr. 07.94 (8) (8)	eadir-Just	X1				
Totals (carry to Part II, line (5))	>	().	0							0.

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

orm 990-T (2019) PROGRAMS	EMPLOYING	PEOPLE			23-	711884	7 Pag	je_5
Part III Income From Perio	dicals Reporte	ed on a Separ	ate Basis (For ea	ch periodical l	isted in Pa	art II, fill in		-
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)	s
(1)	· ·							_
(2)								_
(3)								_
(4)								
otals from Part I	0.	0.					() .
	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	
otals, Part II (lines 1-5)	0.	0.	"",""					<u>.</u>
Schedule K - Compensation	n of Officers, D	oirectors, and	Trustees (see in	structions)				
1. Name			2 Title	time	ercent of devoted to isiness		insation attributable elated business	
(1)					%			_
(2)					%			
(3)			· · · · ·		%			

Form 990-T (2019)

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PROGRAMS	EMPLOYING	PEOPLE
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23-7118847

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 1
DESCRIPTION		AMOUNT
OFFICE EXPENSES OCCUPANCY PROGRAM EXPENSES TRAVEL/AUTO INSURANCE ADVERTISING AND PROMOTION		12,040. 12,710. 8,120. 489. 11,487.
TOTAL TO FORM 990-T, PAGE 1, LIN	NE 27	44,936.