tşi	Repairs and maintenance	8 FEB 2 8 2020	10		
17	Bad debts -	ω == = 0 2020	17		
8	Interest (attach schedule) (see instructions)	000	18		
\$ 9	Taxes and licenses	OGDEN, UT	19	_	
20	Charitable contributions (See instructions for limitation rules)		20		
2 1	Depreciation (attach Form 4562)	21			
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	22b		
23	Depletion	•	23		
24	Contributions to deferred compensation plans		24		
25	Employee benefit programs		25		
26	Excess exempt expenses (Schedule I)		26		
27	Excess readership costs (Schedule J)		27		
28	Other deductions (attach schedule)		28	*	
29	Total deductions Add lines 14 through 28		29		0.
30			30		0.
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)		31		
32	Unrelated business taxable income. Subtract line 31 from line 30		32		0.

823701 01-09-19 LHA For Paperwork Reduction Act Notice, see instructions.

BLIND AND VISION REHABILITATION SERVICES

Form 990-	T (2018) OF PITTSBURGH 25-18	303195	Page 2
Part			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	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 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)	Q 37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,	7977	
	enter the smaller of zero or line 36	38	0.
Part I	V Tax Computation		
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 on line 38 from:	1 1	
	Tax rate schedule or Schedule D (Form 1041)	▶ 40	
41	Proxy tax. See instructions	► 41	
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	0.
Part \			
45 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a	-	
b	Other credits (see instructions)	-	
C	General business credit. Attach Form 3800	⊣	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	→ !	
е	Total credits Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	0.
47	Other taxes. Check if from, Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schodule)		
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	49	<u> </u>
	Payments: A 2017 overpayment credited to 2018	-	
	2018 estimated tax payments 50b 3,717	싁 ㅣ	
	Tax deposited with Form 8868	-	
	Foreign organizations: Tax paid or withheld at source (see instructions)	⊣	
	Backup withholding (see instructions)	-	
	Credit for small employer health insurance premiums (attach Form 8941)	-	
g	Other credits, adjustments, and payments: Form 2439		
	Form 4136 Other Total ▶ \$\(\frac{40g}{} \)	١ ا	3,717.
51 50	Total payments. Add lines 50a through 50g	51	3,/1/.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	
53 54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	<u> </u>	3,717.
55	Enter the amount of line 54 you want. Credited to 2019 catimated tax	14 E5	$\frac{3,717.}{3,717.}$
Part V		*************************************	3,72,7
56	At any time during the 2018 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		100
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country		1 1
	here >		1 1
57	During the tax year, did the organization receive a distribution from, or was it the granter of, or transferor to, a foreign trust?		-
٠.	If "Yes," see instructions for other forms the organization may have to file.		
58	Enter the amount of tay-exempt interest received or accrued during the tay year >\$		
	Under panalties of perjury, I declare that I have examined this return including accompanying schadules and statements, and to the best of my knowl correct, and complete; Declaration of proparor (other than tappayer) is based on all information of which preparer has any knowledge	iedga and boliof, it is	true
Sign		May the IRS discuss	
Here		the preparer shown b	•
	Signature of officer Date / Title	instructions)? X	Yes No
	Print/Type preparer's name Date Check	ıf PTIN	
Paid	Self-employed		
Prepa	rer JEFFREY KENT JEFFREY KENT	P0134	
Use O	la . Nation Director anala la	≻ 25-16	22758
	503 MARTINDALE STREET, SUITE 600	—- 	
	Firm's address ► PITTSBURGH, PA 15212 Phone no	<u>412-471-</u>	5500
		_	000 T