

Form 990-T

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

OMB No 1545-0047

2019

For calendar year 2019 or other tax year beginning 1912, 2019, and ending 20

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

Department of the Treasury Internal Revenue Service

- A Check box if address changed
B Exempt under section
X 501(c)(3)
408(e) 220(e)
408A 530(a)
529(a)

Name of organization () Check box if name changed and see instructions
URBAN RECIPE INC
Number, street, and room or suite no. If a P.O. box, see instructions
645 GRANT STREET SE
City or town, state or province, country, and ZIP or foreign postal code
ATLANTA, GA 30312

D Employer identification number (Employees' trust, see instructions)
27-0000606
E Unrelated business activity code (See instructions)

C Book value of all assets at end of year
445,356

F Group exemption number (See instructions)
G Check organization type
[X] 501(c) corporation
501(c) trust
401(a) trust
Other trust

H Enter the number of the organization's unrelated trades or businesses
0 Describe the only (or first) unrelated trade or business here
If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?
Yes [] No [X]

J The books are in care of JEREMY LEWIS Telephone number (404) 688-0871

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Includes rows for Gross receipts, Cost of goods sold, Capital gain, etc. A diagonal line is drawn through the table.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income)

Table with 2 columns: Description, Amount. Includes rows for Compensation of officers, Salaries and wages, Repairs and maintenance, etc.

For Paperwork Reduction Act Notice, see instructions.

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Part III Total Unrelated Business Taxable Income

Table with 2 columns: Description and Amount. Rows 32-39. Row 39 amount is 0.

Part IV Tax Computation

Table with 2 columns: Description and Amount. Rows 40-45.

Part V Tax and Payments

Table with 2 columns: Description and Amount. Rows 46a-56. Includes sub-rows 46a-46d, 51a-51g.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question, Yes, No. Rows 57-59.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer (Jeremy Lewis), Date (11/11/2020), Title (EXECUTIVE DIRECTOR). May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [] No. Paid Preparer Use Only: Print/Type preparer's name (Susan K Miller CPA), Preparer's signature (Susan K Miller CPA), Date (11-11-2020), Check self-employed, PTIN (P0120688), Firm's name (Susan K Miller CPA LLC), Firm's EIN (47-2469959), Firm's address (P O Box 923351, Norcross GA 30010), Phone no (678-595-5583).