Cand proxy tax under section 6033(e) Cand proxy tax under section for instructions and the latest information. Cand Cand Cand proxy tax under section for instructions and the latest information of the proxy tax under section for instructions and the latest information in the latest in the latest information in the lat
Department of the Treasury Internal Revenues Services Do not enter SSN numbers on this form as it may be made public if your organization is a \$01(c)(3). Department of the previous services Department of the Treasury Internal Revenues Services Department of the previous Department of
Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3) A
B Exempt under section First SO1(C) (3 O) Winther, street, and room or soute no. If a P.O. box, see instructions. So1(C) (3 O) So2(G) 408(e) 220(e) 408A 530(a) 529(a) So2(G) C 100 So2(G)
Number, street, and room or suite no. If a P.O. box, see instructions. European 24 03 AUBURN AVE 24 03 AUBURN AVE City or town, state or province, country, and ZIP or foreign postal code CINCINNATI OH 45219 531110
Mole 20(e) 20(e) 20(e) 17 2
4008
Cincinnati, OH 45219 Figure exemption number (See instructions.) Figure exemption number (See instructions.) High Enter the number of the organization's unrelated trades or businesses. I Describe the only (or first) unrelated trade or businesses. I Describe the only (or first) unrelated trade or businesses. It 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. During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? The books are in care of ▶ DEBORAH AVERY Telephone number ▶ (513) 632-7149 High Energy enter the name and identifying number of the parent corporation. The books are in care of ▶ DEBORAH AVERY Telephone number ▶ (513) 632-7149 In Gross recepts or sales b Less returns and allowances c Cost of goods sold (Schedule A, line 7) Gross profit. Subtract line 2 from line to 4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach statement) Rent income (Schedule C) Unrelated debt-financed income (Schedule E) Interest, annutities, royalties, and rents from a controlled organization (Schedule F) Interest annutities, royalties, and rents from a controlled organization (Schedule F) Interest annutities, royalties, and rents from a controlled organization (Schedule F) Exploited exempt activity income (Schedule I) Advertising income (Schedule I) City in the trust income (Schedule I) Advertising income (Schedule I) City in the trust income (Schedule I) City in the trust income (Schedule I) City in the trust in the end of the previous sentence, complete Parts I and III, complete a Sch
The books are in care of ▶ DEBORAH AVERY The tear the remease and identifying number of the parent corporation. If a cost of goods sold (Schedule A, line 7) Gross profit. Subtract line 2 from line 1. 4a Capital gain net income (Schedule B) Nos goods sold (Schedule C) Turnelated debt-financed income (Schedule C) Unrelated debt-financed income (Schedule C) Unrelated debt-financed income (Schedule I) Investment income (5 a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt attrouber 3 through 12 F Group exemption number (See instructions.) A 501(c) corporation 501(c) trust
H Enter the number of the organization's unrelated trades or businesses. ▶ 1 Describe the only (or first) unrelated trade or business here ▶ NON—QUALIFIBD TENANT RENTALS If only one, complete Parts IV-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. During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes ▼ No If Yes," enter the name and identifying number of the parent corporation. ▶ Telephone number ▶ (513)632-7149 Part Is
trade or business here NON-QUALIFIED TENANT RENTALS 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. During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If Yes, enter the name and identifying number of the parent corporation. In the books are in care of DEBORAH AVERY Telephone number (513)632-7149 Part I; Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales b Less returns and allowances c Balance 1 c 2 Cost of goods sold (Schedule A, line 7) 3 Gross profit. Subtract line 2 from line 1c 4a Capital giain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Cher income (Sce enstructions; attach schedule) 13 Total. Combine lines 3 through 12
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. During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?
business, then complete Parts III-V. During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes X No
During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If Yes, enter the name and identifying number of the parent corporation. In the books are in care of ▶ DEBORAH AVERY Telephone number ▶ (513) 632-7149 Part I; Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales b Less returns and allowances c Cost of goods sold (Schedule A, line 7) 3 Gross profit. Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuties, royalties, and rents from a controlled organization (Schedule G) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (Schedule J) 13 Total. Combine lines 3 through 12
If Yes," enter the name and identifying number of the parent corporation. In The books are in care of ▶ DEBORAH AVERY Part I; Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net
The books are in care of DEBORAH AVERY Telephone number (513) 632-7149
Part I; Unrelated Trade or Business Income 1a Gross receipts or sales b Less returns and allowances 2 Cost of goods sold (Schedule A, line 7) 3 Gross profit. Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuties, royalties, and rents from a controlled organization (Schedule G) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 Total, Combine lines 3 through 12
1a Gross receipts or sales b Less returns and allowances 2 Cost of goods sold (Schedule A, line 7) 3 Gross profit. Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule G) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12
b Less returns and allowances 2 Cost of goods sold (Schedule A, line 7) 3 Gross profit. Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12
2 Cost of goods sold (Schedule A, line 7) 3 Gross profit. Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) 4 Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12
3 Gross profit. Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 6, 272 8, 4692, 197
4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 6, 272. 8, 4692, 197
c Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach statement) Rent income (Schedule C) Unrelated debt-financed income (Schedule E) Interest, annuities, royalties, and rents from a controlled organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) Advertising income (Schedule J) Other income (See instructions; attach schedule) Total. Combine lines 3 through 12 Advantage of the composition (attach statement) 5 6 7 6,272. 8,469. -2,197 10 11 12 13 6,272. 8,469. -2,197
Income (loss) from a partnership or an S corporation (attach statement) Rent income (Schedule C) Unrelated debt-financed income (Schedule E) Interest, annuities, royalties, and rents from a controlled organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) Advertising income (Schedule J) Other income (See instructions; attach schedule) Total. Combine lines 3 through 12 Schedule F) 10 11 12 13 6,272. 8,469. -2,197
6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12 14 6, 272. 8, 4692, 197
7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12 14 6, 272. 8, 4692, 197
Interest, annuities, royalties, and rents from a controlled organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) Advertising income (Schedule J) Other income (See instructions; attach schedule) Total. Combine lines 3 through 12 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 10 11 12 13 6,272. 8,469. -2,197
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12 14 5 6, 272. 8, 4692, 197
10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12 10 11 12 12 13 6,272. 8,469. -2,197
11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12 14 15 16,272. 8,4692,197
12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12 13 6,272. 8,4692,197
13 Total. Combine lines 3 through 12 13 6,272. 8,4692,197
(Deductions must be directly connected with the unrelated business income)
Compensation of officers, directors, and trustees (Schedule K)
Salaries and wages . 15
16 Repairs and maintenance
Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income) 14
Interest (attach schedule) (see instructions)
Taxes and licenses 20 Depreciation (attach Form 4562) MAR 2 3 20201
(0)
Depletion Contributions to deferred compensation plans Employee benefit programs Contributions to deferred compensation plans Employee benefit programs Contributions to deferred compensation plans Contributions to deferred compensation plans
24 Employee benefit programs 24
25 Excess exempt expenses (Schedule I)
26 Excess readership costs (Schedule J)
27 Other deductions (affach schedule)
28 Total deductions: Add lines 14 through 27
29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 29 -2, 197
30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018
(see instructions) SEE STATEMENT 1 30 0
31 Unrelated business taxable income. Subtract line 30 from line 29 31 -2,197

	0-T (2019) EXCEL DEVELOPMENT COMPANY, INC.		L-1240	/15	Page 2
Part					
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	 	2,19	<u> 7.</u>
33	Amounts paid for disallowed fringes .	33	↓		
34	Charitable contributions (see instructions for limitation rules)	34	↓		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 (35		2,19	<u>97.</u>
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36			
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	_:	2,19	7.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38		1,00	
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	,	1		
	enter the smaller of zero or line 37	39	-:	2,19	97.
Part	<u></u>	1 24			
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	Τ		0.
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:	170			••
~1			-		
40	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	 		
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	ــــــــــــــــــــــــــــــــــــــ		0.
Parl					
46 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	-			
b	Other credits (see instructions)	4	1		
C	General business credit. Attach Form 3800	4	ł		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	⅃ ▗▗▗	_		
е	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	T		0.
	Payments: A 2018 overpayment credited to 2019		1		
	2019 estimated tax payments 51b	↑			
	Tax deposited with Form 8868 51c	┦.	1		
	Foreign organizations: Tax paid or withheld at source (see instructions) 51d	┪┈			
	Backup withholding (see instructions) 51e	┥	1		
		┨			
	Credit for small employer health insurance premiums (attach Form 8941)	┥			
9	Other credits, adjustments, and payments: Form 2439		1		
	Form 4136 Other Total ▶ 51g	 <u></u> -			
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			
Par				_	
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority		i	Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file				
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country		İ		
	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?				X
	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 > \$				
_	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my know correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	ledge an	d belief, it is true	э,	
Sign	CHIEF FINANCIAL F	Marra	IDS diaming		
Here	2 1	-	IRS discuss this earer shown below		VIII
	Signature of officer Date / Title		ons)? X Ye	·	No
	Print/Type preparer's name Preparer's signature Date Check	ıf P	PTIN		
p-:	and any law				
Pai	M NAMO (113 DITTERY 0.2 / 0.5 / 0.1		P01225	377	
	Palel CARDE CONTREED HACKEDING COO		$\frac{101225}{31-080}$		3
Use	Only Firm's name CLARK, SCHAEFER, HACKETT & CO. HIRTSEIN		<u> </u>	203	-
		512	-241-3	111	
922744		<u> </u>	Form 9		(2010)
943/11	0 01-27-20		rorm 3	J .	(ZU19)

Schedule A - Cost of Goods	Sold. Enter	method of invento	ry valuation N/A			
1 Inventory at beginning of year	1		6 Inventory at end of year	7		6
2 Purchases	2		7 Cost of goods sold. Su		ne 6	765
3 Cost of labor	3		from line 5. Enter here		1.3	
4a Additional section 263A costs			line 2			7
(attach schedule)	4a		8 Do the rules of section	263A (v	vith respect to	Yes No
b Other costs (attach schedule)	4b		property produced or a	-	•	30 5 5 3 4
5 Total. Add lines 1 through 4b	5		the organization?	•	,	*
Schedule C - Rent Income (F		Property and F		ease	With Real Prope	rty)
(see instructions)						
1. Description of property						
(1)						
(2)						
(3)						
(4)						
	2. Rent receiv	ed or accrued				
(a) From personal property (if the perce rent for personal property is more the 10% but not more than 50%)	ntage of nan	` of rent for per	personal property (if the percental sonal property exceeds 50% or if s based on profit or income)	ge	3(a) Deductions directly of columns 2(a) and	onnected with the income in 2(b) (attach schedule)
(1)						
(2)						
(3)						
(4)	, , , , , , , , , , , , , , , , , , , ,					.
Total	0.	Total		0.		
(c) Total income. Add totals of columns 2 here and on page 1, Part I, line 6, column (ter		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	0.
Schedule E - Unrelated Debt	-Financed	Income (see in	structions)			- · · · · · · · · · · · · · · · · · · ·
			2. Grass income from		3. Deductions directly conne to debt-finance	ected with or allocable id property
1. Description of debt-fina	nced property		or allocable to debt- financed property	' '	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
				<u> </u>	TATEMENT 4	STATEMENT 5
(1)			15,400.	<u> </u>	2,156.	18,637.
(2)						
(3)				<u> </u>		<u> </u>
(4)				ļ		<u> </u>
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) STATEMENT 6	of or	e adjusted basis allocable to anced property h schedule MENT 7	 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) 2,113,282.	5	,188,393.	40.73%		6,272.	8,469.
(2)			%	i		
(3)			%			
(4)	•		%			
STATEMENT 2	STAT	EMENT 3			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			•		6,272	8,469.
Total dividends-received deductions and	cluded in colum	n 8			>	0.
			· · · · · · · · · · · · · · · · · · ·			Form 990-T (2019)

Schedule F - Interest,	Annuities, Roy	yalties, ar					itions (see	nstructio	ns)
				ontrolled O	-		Υ		
Name of controlled organization		Employer entification number	3. Net unre (loss) (see	lated income instructions)	4. Tot payr	al of specified nents made	5. Part of colur included in the organization's gr	controlling	6. Deductions directly connected with income in column 5
(1)			<u> </u>						
(2)									
(3)		· · · · · · ·							
(4)						_	 		
Nonexempt Controlled Organ	uzations					-	L		
	T		T =			40.0.4			
7. Taxable Income	8. Net unrelated i		9. Total o	of specified pays made	nents	in the controll	mn 9 that is including organization's s income		eductions directly connected th income in column 10
(1)			 						
(2)									
(3)	† — — — — — — — — — — — — — — — — — — —								
(4)	† "		T					— ——	
_(4)	<u> </u>								
						Enter here and	nns 5 and 10 I on page 1, Part I, column (A).		Add columns 6 and 11 here and on page 1, Part I, line 8, column (B)
Totals					•		(o.	0.
Schedule G - Investme	ent Income of	a Section	501(c)(7), (9), or (17) Ora	anization		·	
	tructions)	2 2001101	. 55 (6)(7	,, (~), ~! (, ৩.	,			
	scription of income			2. Amount of	ıncome	3. Deduction directly connect (attach scheduler)	octed 4.	Set-asides ach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)			-			· · · · · · · · · · · · · · · · · · ·			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
(2)									
(3)		-							
(4)	 	•					- -		
Totals		-	•	Enter here and Part I, line 9, co					Enter here and on page 1 Part I, line 9, column (8)
Schedule I - Exploited (see insti	-	ity Incom	e, Other	Than Ad	ertisir/	ng Income	·		
Description of exploited activity	2. Gross unrelated business income from trade or business	directly with p	expenses connected production in elated ess income	4. Net incor from unrelate business (cominus colum gain, comput through	trade or olumn 2 in 3). If a e cols 5	5. Gross inc from activity is not unrela business inc	that st	Expenses tributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)	<u> </u>								
(2)	—					1			
(3)	 								
(4)	 					 			
	Enter here and or page 1, Part I, line 10, col (A).	page line 1	nere and on a 1, Part I, 0, col (B).						Enter here and on page 1, Part II, line 25
Totals		0.	0.	The Later Control			<u> </u>	Alles in	<u>.</u> 0.
Schedule J - Advertis Part I Income From				solidated	Basis				
1. Name of periodical	2. Gr adverti incor	sing a	3. Direct divertising costs	or (loss) (col 3). If a (tising gain of 2 minus pain, compu brough 7	5. Circula		Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						3			•
						\$. \			
(2)				二八河一峽	. 				
(3)		+	_		Taylor Marian Language Santan	<u>}</u>			
_(4)				16.27	Tata Section 12	£			12 3 4 数据 44 2 4 2 4 2 4 2 4 2 4 2 4 2 4 2 4 2 4
Totals (carry to Part II, line (5))		0.	0						0
									Form 990-T (201

%

%

%

▶

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.) 4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 7. Excess readership 2. Gross advertising 6. Readership 3. Direct 5. Circulation costs (column 6 minus column 5, but not more 1. Name of periodical advertising costs income than column 4) (1) (2) (3) (4) 0 0. 0. Totals from Part I Enter here and on Enter here and on Enter here and page 1, Part I, line 11, col (B). page 1, Part I, line 11, col (A). on page 1, Part II, line 26 0. 0 Totals, Part II (lines 1-5) Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of time devoted to business 4. Compensation attributable to unrelated business 1. Name 2. Title (1) %

Form 990-T (2019)

0.

(2)

(3) (4)

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

4,226,564.

352,214.

FORM 990-T	NET	OPERATING LOSS D	EDUCTION	STATEMENT 1
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19	2,599.	0.	2,599.	2,599.
NOL CARRYOV	VER AVAILABLE THIS	YEAR	2,599.	2,599.
FORM 990-T		UNRELATED DEBT-F RAGE ACQUISITION ED PROPERTY		AMOUNT OF
			1	OUTSTANDING DEBT
BEGINNING BEGINNING BEGINNING BEGINNING BEGINNING BEGINNING BEGINNING BEGINNING	FOURTH MONTH FIFTH MONTH SIXTH MONTH SEVENTH MONTH EIGHTH MONTH NINTH			2,159,307.
BEGINNING				

TOTALS TO FORM 990-T, SCHEDULE E, COLUMN 4

TOTAL OF ALL MONTHS

NUMBER OF MONTHS IN YEAR

AVERAGE AQUISITION DEBT

FORM 990-T		E - UNRELATED DEBT-FINANC AVERAGE ADJUSTED BASIS	ED INCOME	STATEMENT 3
DESCRIPTION O	F DEBT-FINA	NCED PROPERTY	ACTIVITY NUMBER	
			1	AMOUNT
		F PROPERTY FIRST DAY OF YE F PROPERTY LAST DAY OF YEA		5,246,865, 5,129,922,
AVERAGE ADJUS	TED BASIS (F PROPERTY FOR THE YEAR		5,188,394

FORM 990-T SO	CHEDULE E - DEPRECIA	TION DEDUCT	ION	STATEMENT 4
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION EXPENSE	- SUBTOTAL -	1	2,156.	2,156.
TOTAL OF FORM 990-T,	SCHEDULE E, COLUMN	3(A)		2,156.
FORM 990-T	SCHEDULE E - OTHER	R DEDUCTIONS		STATEMENT 5
FORM 990-T DESCRIPTION	SCHEDULE E - OTHER	ACTIVITY NUMBER	AMOUNT	STATEMENT 5
		ACTIVITY NUMBER		TOTAL

FORM 990-T	AVERAGE ACQUISITION ALLOCABLE TO DEBT-FINA			STATEMENT 6
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
AVERAGE DEBT	- SUBTOTAL -	1	2,113,282.	2,113,282.
TOTAL OF FORM 99	90-T, SCHEDULE E, COLUMN 4	1		2,113,282.

	AVERAGE ADJUSTED BASIS OF OR ALLOCABLE TO DEBT-FINANCED PROPERTY				
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL		
ADJUSTED BASIS OF BUILDING - SUBTOTAL	- 1	5,188,393.	5,188,393.		
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN	5		5,188,393.		