| o Form 99U-1 | Exempt Organization bu | | rax neturn | 01115 110 1545-5547 |
|--|--|-----------------------------------|--|--|
| , | | der section 6033(e)) | 1912 | 2010 |
| L · · | For calendar year 2019 or other tax year beginning | , and ending | | ZU 13 |
| Department of the Treasury Internal Revenue Service | ► Go to www.irs gov/Form990T for Do not enter SSN numbers on this form as it m | | | Open to Public Inspection for 501(c)(3) Organizations Only |
| <u> </u> | | e changed and see instructions.) | | mployer identification number |
| A L Check box if address change | | s changed and see mstructions.) | 1 (| Employees' trust, see |
| B Exempt under section | Print UNLTED WAY OF TRUMBUL | I. COINTY | | 34-1083629 |
| 501(c)(3) | or Number, street, and room or suite no. If a P.O. t | | | Inrelated business activity code |
| 408(e) 220(| | | 6 | See instructions) |
| 408A 530(| | | | |
| 529(a) | WARREN, OH 44484 | | | |
| C Book value of all assets at end of year | F Group exemption number (See instructions.) | > | | |
| <u> </u> | 559. G Check organization type ► X 501(c) co | orporation 501(c) trust | 401(a) tru | st Other trust |
| H Enter the number of th | ne organization's unrelated trades or businesses. 🕨 🔃 | 1 Describ | e the only (or first) unrela | ited |
| trade or business here | | | e, complete Parts I-V If n | |
| describe the first in the | e blank space at the end of the previous sentence, complete | Parts I and II, complete a Schedu | ule M for each additional t | rade or |
| business, then comple | | | | |
| • • | as the corporation a subsidiary in an affiliated group or a pai | rent-subsidiary controlled group | > ▶ ∟ | Yes X No |
| | e and identifying number of the parent corporation. | | | 200 1000 |
| | of VIRGINIA PASHA | | hone number (3: | |
| | ed Trade or Business Income | (A) Income | (B) Expenses | (C) Net |
| 1a Gross receipts or s | | | | |
| b Less returns and al | | 1c | | -/ |
| • | (Schedule A, line 7) | 2 | | |
| - · · · · · | act line 2 from line 1c | 3 | | 4 |
| | ome (attach Schedule D) m 4797, Part II, line 17) (attach Form 4797) | 4a | | |
| b Net gain (loss) (Forc Capital loss deduct | | 4c | | |
| • | a partnership or an S corporation (attach statement) | 5 | | |
| 6 Rent income (Sche | | 6 | | |
| • | nced income (Schedule E) | 7 | <u></u> | |
| | royalties, and rents from a controlled organization (Schedule F | 8 | | |
| | of a section 501(c)(7), (9), or (17) organization (Schedule (| _ | | |
| | ctivity income (Schedule I) | 10 | | |
| 11 Advertising income | (Schedule J) | 11 | | |
| 12 Other income (See | instructions, attach schedule) | 12 | | |
| 2 13 Total. Combine lin | es 3 through 12 | 13 0 | <u> </u> | |
| Part II Deduct | ions Not Taken Elsewhere (See instructions | for limitations on deductions |) | |
| (Deduction | ns must be directly connected with the unrelated bus | siness income) | | |
| | officers, directors, and trustees (Schedule K) | Ą | <u> </u> | 4 |
| Salaries and wage | s / +125 | 10420 90420 | 1 | |
| 16 Repairs and maint | enance | 14100 | 1 | ·-· |
| D 17 Bad debts | Rece | 20400 | 1 | |
| | hedule) (see instructions) | 10 1 | 1. | |
| Taxes and licenses 20 Depreciation (attac | | 20 | <u> 1</u> | 9 |
| 20 Depreciation (attac | claimed on Schedule A and elsewhere on return | 21a | 21 | , |
| Depletion | claimed on Schedule A and elsewhere on return | [<u>Z]d</u> | 2 | |
| | eferred compensation plans | | 2 | |
| 24 Employee benefit p | | | 2 | |
| | penses (Schedule I) | | 2 | |
| 1 | costs (Schedule J) | | 2 | |
| 27 Other deductions (| | | 2 | |
| | Add lines 14 through 27 | | 2 | |
| / | s taxable income before net operating loss deduction. Subtra | act line 28 from line 13 | 2 | |
| T / | operating loss arising in tax years beginning on or after Janu | | <u> </u> | |
| (see instructions) | | - • | 30 | 0. |
| / | s taxable income. Subtract line 30 from line 29 | | | 1 - |
| · | For Paperwork Reduction Act Notice, see instructions | | | Form 990-T (2019) |

| Form 99 | 0-T (20 19 | UNITED WAY OF TRUMBULL COUNTY | 34-1083 | <u> 3629</u> | Page 2 |
|---------|------------|--|--|--|------------|
| Part | | Total Unrelated Business Taxable Income | T | | |
| 32 | Total of | unrelated business taxable income computed from all unrelated trades or businesses (see instructions) | 32 | | 0. |
| 33 | Amoun | ts paid for disallowed fringes | 33 | | |
| 34 | Chàrita | ble contributions (see instructions for limitation rules) | 34 | | 0. |
| 35 | Total u | nrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33 | 35 | | |
| 36 | Deduct | on for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) | 36 | | |
| 37 | Total of | funrelated business taxable income before specific deduction. Subtract line 36 from line 35 | 37 | | |
| 38 | | c deduction (Generally \$1,000, but see line 38 instructions for exceptions) | 28 | 1,0 | <u>00.</u> |
| 39 | Unrela | ted business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37, | | | _ |
| | | e smaller of zero or line 37 | 39 | | <u>0.</u> |
| Part | | Tax Computation | | | |
| 40 | | rations Taxable as Corporations. Multiply line 39 by 21% (0.21) | 40 | | 0. |
| 41 | | Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from: | | | |
| | T | ax rate schedule or Schedule D (Form 1041) | 41 | | |
| 42 | Proxy t | ax See instructions | 42 | | |
| 43 | Alterna | tive minimum tax (trusts only) | 43 | | |
| 44 | | Noncompliant Facility Income See instructions | 44 | | |
| 45 | | Add lines 42, 43, and 44 to line 40 or 41, whichever applies | 45 | | 0. |
| Part | | Tax and Payments | | | |
| 46 a | Foreign | tax credit (corporations attach Form 1118; trusts attach Form 1116) | 1 | | |
| b | Other c | redits (see instructions) | 4 | | |
| C | Genera | business credit. Attach Form 3800 | 4 | | |
| đ | Credit f | or prior year minimum tax (attach Form 8801 or 8827) | 4 | | |
| е | Total c | redits Add lines 46a through 46d | 46e | | |
| 47 | Subtrac | et line 46e from line 45 | 47 | | 0. |
| 48 | | exes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule) | 48 | | |
| 49 | | Add lines 47 and 48 (see instructions) | 49 | | 0. |
| 50 | | et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3 | 50 | | 0. |
| | - | nts: A 2018 overpayment credited to 2019 | - | | |
| | | stimated tax payments 51b | - | | |
| | | oosited with Form 8868 | - | | |
| | _ | organizations: Tax paid or withheld at source (see instructions) 51d | - | | |
| | | withholding (see instructions) 51e | - | | |
| | | or small employer health insurance premiums (attach Form 8941) | - | | |
| g | | redits, adjustments, and payments: Form 2439 | | | |
| | | orm 4136 Other Total ▶ 51g | | | |
| 52 | | ayments. Add lines 51a through 51g | 52 | | |
| 53 | | ed tax penalty (see instructions). Check if Form 2220 is attached | 53 | | |
| 54 | | e. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed | 54 | | |
| 55 | • | yment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid | 55 | | |
| | | e amount of line 55 you want: Credited to 2020 estimated tax Statements Regarding Certain Activities and Other Information (see instructions) | 56 | | |
| Part | | | | 7 | No |
| 57 | | ime during the 2019 calendar year, did the organization have an interest in or a signature or other authority inancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file | | Yes | NU |
| | | Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country | | | |
| | | Form 114, Report of Foreign Bank and Financial Accounts. If Tes, enter the name of the foreign country | | | х |
| 50 | here | the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? | | | X |
| 58 | - | | | | |
| 59 | . , | see instructions for other forms the organization may have to file. ie amount of tax-exempt interest received or accrued during the tax year \$ | | | |
| | U | nder penalties of periury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my kno | wledge and belief, it | ıs true, | |
| Sign | co | rrect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge | | | |
| Here | | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | ay the IRS discuss the preparer shown be | | with |
| | | | | es |] No |
| | | | f PTIN | | |
| | | PATRICK P. O'CONNOR Self- employed | | | |
| Paid | | CPA CPA CONNOR DETERMINED STREET STRE | P00095 | 5117 | |
| | arer | Firm's name ▶ O'CONNOR, HOSO, & LOREE, LLC Firm's EIN ▶ | 56-247 | | 1 |
| Use | Only | 8700 E. MARKET ST., SUITE 1 | | <u> </u> | |
| | | | 30-856-9 | 222 | |
| 923711 | 01-27-20 | | | 990-T (| (2019) |

| Schedule A - Cost of Goods | s Sold. Enter | method of inve | ntory va | luation N/A | | | | | |
|---|------------------|---|----------|--|-----------|---|---------|---|----------|
| 1 Inventory at beginning of year | 1 | | 6 | Inventory at end of yea | .r | | 6 | | |
| 2 Purchäses | 2 | | 7 | Cost of goods sold Su | ubtract I | ıne 6 | | | |
| 3 Cost of labor | 3 | | | from line 5. Enter here | and in f | Part I, | | | |
| 4a Additional section 263A costs | | | | line 2 | | 1 | 7 | 1 | |
| (attach schedule) | 4a | | 8 | Do the rules of section | 263A (| with respect to | | Yes | No |
| Other costs (attach schedule) | 4b | | _ | property produced or a | acquired | I for resale) apply to | | | |
| 5 Total. Add lines 1 through 4b | 5 | | | the organization? | | 134531 5 15 | | | <u> </u> |
| Schedule C - Rent Income (see instructions) | (From Real | Property an | id Per | sonal Property | Leas | ed With Real Pro | pen | ry) | |
| 1 Description of property | | | | | | | | | |
| (1) | | | | | | | | | |
| (2) | - | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | <u>-</u> | | | |
| | 2 Rent receiv | ed or accrued | | <u>-</u> - | | 3(a) Deductions directly | | acted with the income | |
| (a) From personal property (if the per rent for personal property is more 10% but not more than 50% | personal p | nal property (if the percenta property exceeds 50% or if d on profit or income) | age | | | (attach schedule) | | | |
| (1) | | | | | | | | | |
| (2) | | | | | | | _ | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| Total | 0. | Total | | | 0. | ļ <u>.</u> | | | |
| (c) Total income Add totals of columns here and on page 1, Part I, line 6, column | (A) | | | | 0. | (b) Total deductions Enter here and on page 1, Part I, line 6, column (B) | | | 0. |
| Schedule E - Unrelated Deb | ot-Financed | lncome (see | Instruc | tions) | | - | | | |
| | | | 2 | Gross income from | | 3 Deductions directly con to debt-finance | | | |
| 1 Description of debt-fir | nanced property | | | or allocable to debt- financed property | (a) | Straight line depreciation (attach schedule) | | (b) Other deduction (attach schedule) | ns |
| (1) | _ | | | | | - a- | + | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| 4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | of or debt-fina | e adjusted basis allocable to anced property h schedule) | 6 | Column 4 divided by column 5 | | 7 Gross income reportable (column 2 x column 6) | | Allocable deductions (column 6 x total of column 3(a) and 3(b)) | |
| (1) | | | | % | | | | | |
| (2) | | | | % | | | | | |
| (3) | | | | % | | | | | |
| (4) | | | | % | | | | | |
| | _ | | | | | nter here and on page 1, Part I, line 7 column (A) | | Enter here and on pag Part I, line 7, column | |
| Totals | | | | • | | 0 | | | 0. |
| Total dividends-received deductions in | cluded in columi | n 8 | | | | • | | | 0. |

| Schedule F - Interest, | Annuille | o, nuya | iucs, a | | Controlled O | | | Lauvi | is (see ins | truction | - | |
|-------------------------------------|----------------------------------|------------------------------------|---------------------------------|--|--|--|---|--|------------------------------|----------|--|--|
| 1 Name of controlled organization | | 2 Em Identifi num | cation | 3 Net uni | related income e instructions) | 4. Tota | al of specified nents made | 5 Part of column 4 that is included in the controlling organization's gross income | | olling | 6 Deductions directly connected with income in column 5 | |
| (1) | | | | | | | | | | | | |
| (2) | | | | | | | | | | | _ | |
| | | | | | | | | | | | | |
| (4) | | | | 1 | | | | <u> </u> | | | | |
| Nonexempt Controlled Organ | izations | | | , | | | | | | | | |
| 7 Taxable Income | | nrelated incon see instructions | | 9. Total | of specified payi made | ments | 10 Part of colu in the controll gross | mn 9 thai ing organ s income | t is included sization's | | ductions directly connected income in column 10 | |
| (1) | | | | 1 | | | | | | | | |
| (2) | J. | | | | - | | | | | | | |
| (3) | 1 . | | | | | | | | | | | |
| (4) | | | | | | | | | | | <u></u> | |
| | | _ | | | | | Add colur Enter here and line 8, | | 1, Part I, \} | Enter h | d columns 6 and 11 ere and on page 1, Part I, line 8, column (B) | |
| Totals | | | | | | <u> </u> | | | 0. | | 0 | |
| Schedule G - Investme | ent Incor tructions) | me of a | Section | n 501(c)(| (7), (9), or | (17) Or | ganizatior | 1 | | | | |
| | cription of inco | me | | | 2. Amount of | ıncome | 3 Deduction directly connected (attach scheduler) | ected | 4 Set-a | | 5 Total deductions and set-asides (col 3 plus col 4) | |
| (1) | | , | | | | | \ | | | | , | |
| (2) | | | | | | | | | | | | |
| (3) | | | | | – | | | | | | | |
| (4) | | | | | | | | | | | | |
| | | | | | Enter here and Part I, line 9, co | | | | | | Enter here and on page Part I, line 9, column (B) | |
| Totals | | | | • | | 0. | | | | | 0 | |
| Schedule I - Exploited | | Activity | Incom | e, Othe | r Than Ad | | ng Income | • | | | | |
| Description of exploited activity | Τ. | e from | directly of with pr of un | spenses connected oduction related as income | 4. Net incon from unrelated business (co minus colum gain, comput through | I trade or blumn 2 n 3) If a e cols 5 | 5 Gross inco from activity is not unrela business inco | that ted | 6 Expi attributa colum | ble to | 7 Excess exempt expenses (column 6 minus column 5, but not more than column 4) | |
| (1) | | | | _ | | | | | | • | | |
| (2) | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | |
| (4) | | | | | | | | | | • | | |
| | Enter her page 1, line 10, | , Part I, col (A) | page | ere and on 1, Part I, , col (B) | | • | | | | | Enter here and on page 1, Part II, line 25 | |
| Totals Schedule J - Advertisi | ing Incor | 0. | netruction | 0. | | | | - | | | 0. | |
| Part I Income From | | | | | solidated | Basis | | | | | | |
| | | 2 Gross | | 3. Direct | | ising gain | 5 Circulai | | 6. Reade | | 7 Excess readership costs (column 6 minus | |
| 1 Name of periodical | | advertising income | adv | ertising costs | or (loss) (co col 3) If a ga cols 5 th | ain, compute | | | costs | | column 5, but not more than column 4) | |
| (1) | | | | | _ | | | | | | | |
| (2) | | | | | _ | | | | | | | |
| (3) | | | | | | | | | | | | |
| (4) | | | | | | | | | | | <u> </u> | |
| Totals (carry to Part II, line (5)) | • | (| 0. | 0 | | | | | | | 0 | |
| | | | | | | | <u> </u> | | | | Form 990-T (2019 | |

Form 990-T (2019) UNITED WAY OF TRUMBULL COUNTY 34-10836

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)

| 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) |
|-----------------------------|---------|--|--|---|-----------------------|--------------------|---|
| (1) | _ | | - | | - | | |
| (2) | | | | | | | |
| (3) | - | | | | | | |
| (4) | | | | | | | |
| Totals from Part I | | 0. | 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 |
| Totals, Part II (lines 1-5) | | 0. | 0. | | | | 0. |
| | | | | | | | |

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

| 1 Name | 2 Title | 3. Percent of time devoted to business | 4 Compensation attributable to unrelated business |
|--|----------------|--|---|
| (1) | | % | |
| (2) | | % | |
| (3) | | % | |
| (4) | | % | |
| Total Enter here and on page 1, Part II, line 14 | | ▶ | 0. |

Form 990-T (2019)

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

990

OMB No 1545-0172

Attachment Sequence No 179

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► Go to www.irs.gov/Form4562 for instructions and the latest information. Business or activity to which this form relates

Identifying number

| | ITED WAY OF TRUMBULL art Election To Expense Certain Propert | | 79 Note: If vo | | | PAGE 10 | rt V hefore | 34-1083629 |
|---|---|--|---|--|--|--|---|--------------------------------|
| | | y onder occuon i | 75 HOLE II YO | od have driy ii | otcu proport | y, complete r a | 1 | 1,020,000. |
| | Maximum amount (see instructions) | | | | | | 2 | 1,020,000. |
| | Total cost of section 179 property place | | |) | | | | 2 550 000 |
| | Threshold cost of section 179 property I | 3 | 2,550,000. | | | | | |
| - | Reduction in limitation Subtract line 3 fr | | | | | | 4 | |
| 5 | Dollar limitation for tax year Subtract line 4 from line | | -0- If married fil | | | 1 150 | 5 | |
| 6 | (a) Description of proj | perty | | (b) Cost (busi | ness use only) | (c) Elected | COST | - |
| | | | | _ | | | | - |
| | | <u> </u> | | | | | | - |
| | <u> </u> | | | | | _ | | - |
| | | | | | | <u></u> | | - |
| 7 | Listed property Enter the amount from I | ine 29 | | | 7 | | | |
| 8 | Total elected cost of section 179 proper | ty Add amounts | s in column (i | c), lines 6 and | 17 | | 8 | |
| 9 | Tentative deduction Enter the smaller of | of line 5 or line 8 | | | | | 9 | |
| 10 | Carryover of disallowed deduction from | line 13 of your 2 | 018 Form 45 | 62 | | | 10 | |
| 11 | Business income limitation. Enter the sm | naller of business | s income (no | t less than ze | ro) or line 5 | | 11 | |
| 12 | Section 179 expense deduction Add lin | es 9 and 10, but | t don't enter | more than lin | e 11 | | 12 | |
| | Carryover of disallowed deduction to 20 | | | | 13 | | | |
| Not | e: Don't use Part II or Part III below for II | sted property_In | stead, use F | Part V | | | | |
| Pa | art II Special Depreciation Allowan | ce and Other D | epreciation | (Don't includ | e listed prop | perty) | | |
| 14 | Special depreciation allowance for qualif | fied property (oth | ner than liste | d property) p | laced in sen | rice during | Ì | |
| | the tax year | | | | | | 14 | |
| 15 | Property subject to section 168(f)(1) elec | ction | | | | | 15 | |
| | Other depreciation (including ACRS) | | | | | | 16 | |
| | art III MACRS Depreciation (Don't | nclude listed pro | perty See in | nstructions) | | | | |
| | <u> </u> | | | ection A | | | | |
| | | | 36 | CUOII A | | | | |
| 17 | MACRS deductions for assets placed in | service in tax ve | | | 9 | | 17 | 10,661. |
| | MACRS deductions for assets placed in | • | ears beginnir | ng before 201 | | re 🕨 | 17 | 10,661. |
| | MACRS deductions for assets placed in fryou are electing to group any assets placed in service Section B - Assets F | ce during the tax year | ears beginnir | ng before 201 general asset acc | ounts, check he | | | |
| | If you are electing to group any assets placed in serving | ce during the tax year | ears beginning into one or more to buring 20 (c) Basis for (business/iii | ng before 201 general asset acc | ounts, check he | ieneral Deprec | iation Syst | |
| 18 | ff you are electing to group any assets placed in serving Section B - Assets F (a) Classification of property | ce during the tax year Placed in Servic (b) Month and year placed | ears beginning into one or more to buring 20 (c) Basis for (business/iii | general asset acc 19 Tax Year or depreciation investment use | Using the G | ieneral Deprec | iation Syst | em |
| 18 19a | Section B - Assets F (a) Classification of property 3-year property | ce during the tax year Placed in Servic (b) Month and year placed | ears beginning into one or more to buring 20 (c) Basis for (business/iii | general asset acc 19 Tax Year or depreciation investment use | Using the G | ieneral Deprec | iation Syst | em |
| 18 19a b | Section B - Assets F (a) Classification of property 3-year property 5-year property | ce during the tax year Placed in Servic (b) Month and year placed | ears beginning into one or more to buring 20 (c) Basis for (business/iii | general asset acc 19 Tax Year or depreciation investment use | Using the G | ieneral Deprec | iation Syst | em |
| 18 19a b | Section B - Assets F (a) Classification of property 3-year property 5-year property 7-year property | ce during the tax year Placed in Servic (b) Month and year placed | ears beginning into one or more to buring 20 (c) Basis for (business/iii | general asset acc 19 Tax Year or depreciation investment use | Using the G | ieneral Deprec | iation Syst | em |
| 19a b c | Section B - Assets F (a) Classification of property 3-year property 5-year property 7-year property 10-year property | ce during the tax year Placed in Servic (b) Month and year placed | ears beginning into one or more to buring 20 (c) Basis for (business/iii | general asset acc 19 Tax Year or depreciation investment use | Using the G | ieneral Deprec | iation Syst | em |
| 18 19a b c | Section B - Assets F (a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property | ce during the tax year Placed in Servic (b) Month and year placed | ears beginning into one or more to buring 20 (c) Basis for (business/iii | general asset acc 19 Tax Year or depreciation investment use | Using the G | ieneral Deprec | iation Syst | em |
| 19a b c d e f | Section B - Assets F (a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property | ce during the tax year Placed in Servic (b) Month and year placed | ears beginning into one or more to buring 20 (c) Basis for (business/iii | general asset acc 19 Tax Year or depreciation investment use | Using the G | ieneral Deprec | iation Syst | em |
| 18 19a b c | Section B - Assets F (a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property | ce during the tax year Placed in Servic (b) Month and year placed | ears beginning into one or more to buring 20 (c) Basis for (business/iii | general asset acc 19 Tax Year or depreciation investment use | Using the Counts, check he Using the Counts, check he Counts the C | (e) Conventio | iation Syst | em |
| 19a b c d e f | Section B - Assets F (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property | ce during the tax year Placed in Servic (b) Month and year placed | ears beginning into one or more to buring 20 (c) Basis for (business/iii | general asset acc 19 Tax Year or depreciation investment use | (d) Recove period 25 yrs 27 5 yrs | (e) Conventio | iation Syst | em |
| 18 19a b c d e f | Section B - Assets F (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property | ce during the tax year Placed in Servic (b) Month and year placed | ears beginning into one or more to buring 20 (c) Basis for (business/iii | general asset acc 19 Tax Year or depreciation investment use | counts, check he Using the G (d) Recove period 25 yrs 27 5 yrs 27 5 yrs | (e) Conventio | iation Syst in (f) Method S/L S/L | em |
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Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for Part V entertainment, recreation, or amusement) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) 24a Do you have evidence to support the business/investment use claimed? Yes 24b If "Yes," is the evidence written? Yes No No (c) (e) (i) (f) (h) (g) Elected Date Business/ Basis for depreciation Recovery Method/ Depreciation Cost or Type of property section 179 placed in investment (business/investment deduction Convention period (list vehicles first) other basis use percentage use only) cost service 25 Special depreciation allowance for qualified listed property placed in service during the tax year and 25 used more than 50% in a qualified business use Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L -S/L -% S/L -% 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (f) (b) (c) (d) (e) (a) Vehicle Vehicle Vehicle 30 Total business/investment miles driven during the Vehicle Vehicle Vehicle year (don't include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driver 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use Yes Yes Yes Yes No Yes No Yes No No No No_ during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles Part VI | Amortization (e) **(f)** (b) (c) (d) Date amortization Description of costs Amortizable amount Code Amortization for this year period or percentage begins 42 Amortization of costs that begins during your 2019 tax year 43 43 Amortization of costs that began before your 2019 tax year 44 Total. Add amounts in column (f) See the instructions for where to report