	, 5	990-T	E×	cempt Organization	Bus	siness Income	Tax Retui	in_	OMB No 1545-0047			
	FORM	330 1		and proxy tax) ndar year 2019 or other tax year begin	un	der section 6033(e	≓)) (12/31 :	1 2	ഉപ 10			
	_		For cale	ndar year 2019 or other tax year begin ► Go to www.irs gov/Form990				·• <u></u> -	<u> </u>			
		ment of the Treasury	▶ Do	not enter SSN numbers on this form a				:)(3)	Open to Public Inspection for 501(c)(3) Organizations Only			
	Ā	Check box if	1 50	Name of organization (Check be				D Empl	oyer identification number			
	_	address changed						(Empl	oyees trust, see instructions)			
	B Exe	mpt under section	1	WHITE'S RESIDENTIAL	& F	AMILY SERVICES,	INC.					
	X	501(C)(3)	- Print	Number, street, and room or suite no. I	f a P O	box, see instructions		35-0	883520			
		408(e) 220(e)	Type						lated business activity code nstructions)			
		408A530(a)		5233 S 50 E				,	•			
		529(a)	1	City or town, state or province, country	y, and a	ZIP or foreign postal code						
		k value of all assets and of year		WABASH, IN 46992								
		,		up exemption number (See instructi	<u>_</u>		- T	401(0)	trust Other trust			
				ck organization type X 501 x		rporation 501(c)		401(a)	y (or first) unrelated			
		ade or business her	_		3363				re than one, describe the			
				end of the previous sentence, cor	mnlete		•					
		ade or business, th										
				corporation a subsidiary in an affili	ated g	roup or a parent-subsidiary of	controlled group?		Yes X No			
				identifying number of the parent con		on >						
		ne books are in cari	0-563	-1158								
202	Par	tl Unrelated	Trade o	or Business Income		(A) Income	(B) Exper	ses	(C) Net			
7	1 a	Gross receipts or	sales									
9	b	Less returns and allows		c Balance ▶					*			
63	2			ule A, line 7)	2							
AUG	3	•		2 from line 1c			-					
A	4a			attach Schedule D)	4a							
	b			Part II, line 17) (attach Form 4797)	4b 4c							
Щ	5	·		r an S corporation (attach statement)	5	Jimi.	mai Revenu	a Baryi	el -			
ź	6			· · · · · · · · · · · · · · · · · · ·	EBU LANGE BUNG							
CANNED	7			come (Schedule E)	7		हो0ि ह					
$S_{\mathcal{S}}$	8			ents from a controlled organization (Schedule F)	8		00F 10	3000				
	9	Investment income of	a section 50	1(c)(7) (9) or (17) organization (Schedule G)	9		וטט ואַ	2020				
	10	Exploited exempt	activity ii	ncome (Schedule I)	10		Ondon	·				
	11	Advertising incon	ne (Sched	dule J)	1		Ogden,	<u>ni,</u>	<u> </u>			
	12			ctions, attach schedule)	12							
	13	Total Combine li	nes 3 thr	ough 12	13				ana must ba diractly			
	Par	Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income)										
				directors, and trustees (Schedule K)				14	<u> </u>			
	14 15											
	16	Renairs and main	ntenance					16				
	17											
	18	Interest (attach s	chedule)	(see instructions)				18				
	19			. /				1	1			
	20	Depreciation (atta	ach Form	4 562)		20						
	21		,	on Schedule A and elsewhere on re		· · · · · · · · · · · · · · · · · · ·		21t				
	22								•			
	23	/		compensation plans								
	24	,		s								
	25	,		Schedule I)								
	26			Schedule J)								
	27 28	/		schedule)				1				
	28 29	/		ole income before net operating				F				
	30 /	/		ig loss arising in tax years beginni								
	31			e income Subtract line 30 from line	-							
	/			Notice, see instructions	•				Form 990-T (201			
(9X2	JSA 740 1 0	00										
-	_	QV4266 D32	20 10,	/6/2020 10:38:47 AM	V 1	9-7.1F	99802 TX10	00	97			
									<i>y</i> /			

Under penalties of penjury I declare that I have examined this return, including accompanying schedules and statements and to the best of my knowledge and belief it is ct and complete. Declaration of preparer (other than taxpaver) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return with the preparer shown below (see instructions)? X Yes No Here Signature of officer Date Preparer's signature Print/Type preparers name Date 10/8/2020 Paid Anne White P01708202 ANNE E WHITE self-employed Preparer Firm's name BKD, LLP Firm's EIN > 44-0160260 Use Only Phone no 260-460-4000 Firm's address ▶ 200 E. MAIN ST. SUITE 700, FORT WAYNE, IN 46802 Form 990-T (2019)

JSA 9X2741 1 000

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Enter here and on page 1,

Part I, line 7, column (B)

(4)

%

Enter here and on page 1,

Part I, line 7, column (A)

99802 TX1000

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Total dividends-received deductions included in column 8

Schedule F –Interest, Anni	uities, Royaltie	s, and Re	nts Fre	om Contro	lled O	rganiza	ti ons (see	<u>instruction</u>	ons)	
	·= -	Exe	mpt Co	ntrolled Org	anızatıc	ons				
Name of controlled organization	2 Employer identification numb	er	3 Net unrelated income (loss) (see instructions)		4 Total of specified payments made		5 Part of column 4 that is included in the controlling organization's gross income		6 Deductions directly connected with income in column 5	
(1)	*****				-		_			
(2)										
(3)										
(4)										
Nonexempt Controlled Organiz	ations	.			-					
7 Taxable Income	8 Net unrelated in (loss) (see instruc			Total of specific ayments made		includ	rt of column ed in the con zation's gross	ntrolling		Deductions directly nected with income in column 10
(1)										
(2)										
(3)										
(4)										
Totals			 (c)(7),	 (9), or (17	▶) Orga	Enter Part	columns 5 a here and on I, line 8, colui	page 1, nn (A)	Ent	Id columns 6 and 11 er here and on page 1 rt I, line 8, column (B)
1 Description of income				3 Deductions 4 S			t-acides		5 Total deductions and set-asides (col. 3 plus col. 4)	
(1)										
(2)										
(3)										
(4)										
Totals	Enter here and Part I line 9 c									Enter here and on page 1 Part I, line 9 column (B)
Schedule I-Exploited Exe	mpt Activity In	come, Ot	her Th	an Adverti	sing In	icome (see instru	ctions)		
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Experience direct connecte production unrelated business	nses tly d with on of ted	4 Net inconfrom unrelated or business 2 minus coll fagain, colors 5 through the second	ne (loss) ed trade (column umn 3) ompute	5 Gros from acus s not	ss income clivity that unrelated ss income	6 Exper attributa colum	ble to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)										
(1) (2)				<u> </u>						
(3)		-								
(4)		-				. <u>-</u>				-
_	Enter here and on page 1, Part I, line 10, col (A)	Enter here page 1, I line 10, c	Part I,					<u> </u>		Enter here and on page 1, Part II line 25
Totals ▶ Schedule J− Advertising In	Come (see instr	uctions)		<u> </u>		_				_
Part I Income From Per			Oneol	idated Ras	is					
Part income i font i en	Culcula Report	eu on a	2011301	Idated Dat	,,,			Γ		
1 Name of periodical	2 Gross 1 Name of periodical advertising advertising of advertisin			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 (carry to Part II, line (5))										

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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)		18		_		ļ
Totals from Part I ▶						
	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) ▶						

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)		%	
)		%	
otal Enter here and on page 1, Part II, line 14.		. ,	

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ATTACHMENT 1

THE TAXPAYER DOES NOT HAVE ANY ACTIVITIES GENERATING UNRELATED BUSINESS TAXABLE INCOME (AS DEFINED IN IRC §512(A)) IN THE CURRENT YEAR. FORM 990-T IS BEING FILED TO COMMENCE RUNNING ON THE PERIOD UNDER THE STATUTE OF LIMITATION FOR REPORTING UNRELATED BUSINESS INCOME.