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	Form 990-T	Exe	mpt Organization	Busi	ness Income 7	ax Return	ļ	OMB No 1545 0687
F	orm 330-1				section 6033(e))			2018
			2018 or other tax year beginning					2010
Dena	rtment of the Treasury		to www.irs.gov/Form990T fo				ı	Open to Public Inspection for
	rtment of the Treasury nal Revenue Service	► Do not er	nter SSN numbers on this form as		<u></u>			501(c)(3) Organizations Only
A [Check box if saddress changed		CHRISTIAN CREDIT (changed and see instruction	s)	E	mployer (dentification number imployees' trust, see structions)
	Exempt under section X 501(C) (CR.)		838 EDISON PL #13		2201.07		٠ :	38-2956171
ŀ	408(e) 220(Tune C	CARLSBAD, CA 92008				FU	nrelated business activity code
ŀ	408A 530G	· · · · · · · · · · · · · · · · · · ·					(8	See instructions)
j	529(a)	~] [531120 900099
C	Book value of all assets	F Group e	exemption number (See inst	ruction	s) >	· · · · · · · · · · · · · · · · · · ·		
а	t end of year 7,549,042	G Check o	organization type	501(0	c) corporation 50	01(c) trust 40	01(a) 1	trust Other trust
H			s unrelated trades or busin	esses	<u>►1</u>	Describe the only (or first	t) unrelated
	trade or business he	re ►						e, complete Parts I-V
			the blank space at the end	of the	previous sentence, co	mplete Parts I and	II, co	mplete a Schedule M
			, then complete Parts III-V.		un or o perent cuberd	ory controlled aroun		▶ □Vas VINa
	-		tion a subsidiary in an affilia			lary controlled group	þ	► Yes XNo
	The books are in car		ng number of the parent cor	poratio	11	Telephone number	> /7	(60) 804-8515
	rt I Unrelated				(A) Income	(B) Expense:		(C) Net
	a Gross receipts or s		isiness income	1	(1)	(L) Expense		1
	b Less returns and allowa		c Balance▶	1 1 c				,
2				2		<u> </u>		
3	Gross profit Subtra			3				
4	a Capital gain net inc	come (attach Sch	hedule D)	4a				
1	b Net gain (loss) (Form 47	797, Part II, line 17) ((attach Form 4797)	4b				
	c Capital loss deduct			4c				
5	Income (loss) from (attach statement)		r an S corporation ST 1	5	290,951			290,951.
6	Rent income (Sche			6	230, 331	•		230,331.
7	Unrelated debt-fina	•	chedule F)	17	183,579	. 252,1	38	-68,559.
8		•	a controlled organization (Schedule F)	<u> </u>	103,373	232,1	. 50.	00,333.
9		•), or (17) organization (Schedule G)	9				
10	Exploited exempt a			10				
11	Advertising income	(Schedule J)	•	11				
12	Other income (See	instructions, atta	ach schedule)					
			•	12				
	Total. Combine line	<u>~</u>		13	474,530			222,392.
Pa	rt II Deduction	ns Not Taken	Elsewhere (See instr	uction	s for limitations	n deductions.)	(Exc	cept for
-14			ns must be directly co	nneq				ne.)
14 15	Salaries and wages		, and trustees (Schedule K)	_ ام		RS-OSC	14 15	
16	Repairs and mainte		Į.	88 64	APR 1 7 2019) 	16	
17	Bad debts	and icc		^{2D} [<u>œ</u>	17	
18	Interest (attach sch	nedule) (see instr	ructions)		GDEN, UT		18	
19	Taxes and licenses				,000,000		19	
20	Charitable contribut	tions (See instru	ictions for limitation rules)				20	
21	Depreciation (attact	•	•		21	71,656.		
22			dule A and elsewhere on re	turn	22a	71,656.	22b	
23	Depletion						23	
24	Contributions to der	ferred compensa	ation plans			l	24	
25	Employee benefit p	rograms.					25	
26	Excess exempt exp		•		•		26	
27	Excess readership	•	J)				27	
28	Other deductions (a	•	- L 00		•	ļ	28	
29	Total deductions. A		ugh 28 before net operating loss de	aductio	n. Subtract line 20 free	m line 13	29 30	222 202
7 30 31			x years beginning on or after Janual			III IC 13	31	222,392.
			Subtract line 31 from line 3		(See manachons)	ł	32	222,392.
	For Paperwork Red				TEEA0201L 1/	31/19		Form 990-T (2018)

Form	n 990-	T (2018) CHRISTIAN CREDIT	COUNSELORS, INC		38	3-2956171	Page 2
Pai	till[Total Unrelated Business Tax	xable Income				
33		of unrelated business taxable income	computed from all unrelated trades	or businesses (see	;		
		uctions) .				33	222,392.
34		unts paid for disallowed fringes		0010 /		34	
35		iction for net operating loss arising in ta uctions).	ax years beginning before January	r, 2018 (see EE STATEMENT	. 2	35	222,392.
36		of unrelated business taxable income				33	222,332.
•		es 33 and 34	before specific acadetion cabillate			36	0.
37	Spec	ific deduction (Generally \$1,000, but se	ee line 37 instructions for exceptions	;)		37	1,000.
		lated business taxable income. Subtract					
		the smaller of zero or line 36				38	0.
Par	t IV	Tax Computation					
39	-	nizations Taxable as Corporations. Mu	· •		▶.	39	0.
40	Trust	ts Taxable at Trust Rates. See instruction	ons for tax computation. Income tax	on the amount			
	on lin	ne 38 from: Tax rate schedule or	Schedule D (Form 1041)		•	40	
41		y tax. See instructions	• •		>	41	
		native minimum tax (trusts only) .	•			42	
		on Noncompliant Facility Income. See				43	
44	Total	. Add lines 41, 42, and 43 to line 39 or	40, whichever applies			44	0.
Par	t V	Tax and Payments					
		gn tax credit (corporations attach Form	1118, trusts attach Form 1116)	45 a			
		credits (see instructions)		45 b			
		ral business credit Attach Form 3800 (45 c			
		t for prior year minimum tax (attach Fo	rm 8801 or 8827)	45 d		45	•
		credits. Add lines 45a through 45d act line 45e from line 44				45 e	0.
		taxes Check if from. Form 4255	Tearm 8611 Tearm 8697 Tear	m 8866		46	0.
4,		otaxes officer in from:		0000		47	
48	_	tax. Add lines 46 and 47 (see instruction	ons)			48	0.
49		net 965 tax liability paid from Form 965	•	k), line 2		49	<u>.</u>
50 a		nents A 2017 overpayment credited to		1 50 al			
	•	estimated tax payments	2010	50 b	· ·		
		eposited with Form 8868		50 c		1	
		gn organizations Tax paid or withheld	at source (see instructions)	50 d			
		up withholding (see instructions)		50 e			
f	Credi	t for small employer health insurance p	remiums (attach Form 8941)	50 f		1	
g	Other	credits, adjustments, and payments	Form 2439	_			
	∐ F	orm 4136 Oth	er Total	► 50 g			
51	Total	payments. Add lines 50a through 50g			_	51	0.
52	Estim	nated tax penalty (see instructions) Che	eck if Form 2220 is attached		▶∐	52	
53	Tax d	ue. If line 51 is less than the total of lin	es 48, 49, and 52, enter amount ow	ved	•	53	
54	Overp	payment. If line 51 is larger than the tot	al of lines 48, 49, and 52, enter am		•	54	
55		the amount of line 54 you want Credit			Refunded ►	55	
		Statements Regarding Certain					
		y time during the 2018 calendar year, d					Yes No
		cial account (bank, securities, or other) in a f				Form 114,	
		rt of Foreign Bank and Financial Accou					_ X
57	During	g the tax year, did the organization rec	eive a distribution from, or was it th	e grantor of, or trar	nsferor to, a	foreign trust?	X
	If 'Yes	s,' see instructions for other forms the	organization may have to file				
58	Enter	the amount of tax-exempl interest rece			0.		
•		Under penalties of periory, I declare that I have ex belief, it is true, correctly and complete. Declaration	camined this return, including accompanying son n of preparer (other than taxpayer) is based or	chedules and statements, all information of which	and to the best preparer has an	of my knowledge ar y knowledge	nd
Sign			-1-X 9/1/19 b	PRESIDENT		May the IRS discus the preparer shown	s this return with
Here	,	Signature of officer	- Date ,	Title	···	Inctructions)2	Yes No
		Print/Type preparer's name	Preparer's signature	Date	Ohadi 🖼 .	PTIN	
Paid		/			Check X if		NO 4
Pre-		MARK HÚXHOLD	MARK HUXHOLD	3/29/19	self-employed	P006430	
pare Use	r	Firm's name HUXHOLD & ASSO			Firm's EIN	33-065915	
ose Only	,	Firm's address 250 W CREST ST		— <u> </u>	Bhasa	1760) 74	1_0002
		ESCONDIDO, CA	92025		Phone no	(760) 74	
BAA			TEEA0202L 01/24/19			Form	990-T (2018)

Schedule A - Cost of Good	ds Sold. En	ter method of inv	entory valuatio	n 🕨						
1 Inventory at beginning of year		6 Invento	ory at	end of year	6					
2 Purchases	1	2		f good	is sold. Subtract					
3 Cost of labor	İ	3			line 6 from line 5. Enter here					
4 a Additional section 263A costs (attach	schedule)		· · · - ·	and in	Part I	, line 2	7		1::-	
		4 a	-						Yes	No
b Other costs	•	4 b				of section 263A (with duced or acquired fo			* 1 .	'
(attach sch) 5 Total. Add lines 1 through 4b	•	5				zation?	resa	ie) apply		X
Schedule C - Rent Income (Fr	om Real Pro	perty and Per	sonal Proper				ee inst	tructions)		
1 Description of property		7								
(1)	 .		•					···-		
(2)										
(2)				-						
(4)		· -	-							
	2 Rent receive	d or accrued								
(a) From personal prope	rty	(b) From r	eal and person	al property		3(a) Deduction the income in				
(if the percentage of rent for property is more than 10%	personal	(if the perc	entage of rent	or persona	al Is			hedule)	=(0)	
more than 50%)	but not		on profit or in		13					
(1)					-					
(2)										
(3)										
(4)						i				
Total		Total	· · · · · · · · · · · · · · · · · · ·			 				
(c) Total income. Add totals of colu	mns 2(a) and 2	2(b) Enter				(b) Total deductions E here and on page 1, Part				
here and on page 1, Part I, line 6, o		>				I, line 6, column (B)	>			
Schedule E - Unrelated De		d Income (see	instructions)							
	·		2 Gross incor	ome from debt-financed property SEE ST				e to		
1 Description of debt-f	inanced prope	rty	or allocable	to debt-	<u> </u>					
			financed property		depr	(a) Straight line eciation (attach sch)	(b) Other de (attach scl	eductioi hedule)	ns)
(1)	•		27	2,426.	 	71,656		3	02,5	10.
(2)		· · · · · · · · · · · · · · · · · · ·						.		
(3)			-					*		
(4)				-						
4 Amount of average acquisition debt on or allocable to debt-financed	or allocable to	justed basis of debt-financed ach schedule)	dıvıded			7 Gross Income eportable (column 2 x column 6)		Allocable d (column 6 x lumns 3(a)	total c	of
property (attach schedule)	·	2 720 770	- 67	3867 '%		102 570	 		<u> </u>	
(1) 2,513,370.		3,729,770.	67.	<u>3867 '</u> है		183,579	+		52,1	38.
(2)	·	. 			-		 			
(3)				<u>-</u>			+-			
(4)					C-44	. h	 			
					Enter	here and on page 1 I, line 7, column (A)	, Ente Par	er nere and t I, line 7, d	on pa	ye ı, (B)
Totals .		•		>						-
rotals Total dividends-received deduction	e included is a	oluma 9			L	183,579	: 		52,1	30.
total dividends-received deduction	s included in c	olullii o			_	<u> </u>		Form 6	00. T /	0010

Schedule F – Interest, A	minuit	ies, Royalli			trolled Or			Olga	amzauons	(see	Instruction	ns)	
1 Name of controlled organization 2 Employer identification number			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)						T	,						
(3)						1							
(4)	•												
Nonexempt Controlled Organiza	tions	•			_							·	
7 Taxable Income	inc	et unrelated come (loss) instructions)			f specified the made	P.	10 Part of included i organizatio	n the c	ontrolling	11 Deductions directly connected with income in column 10			
(1)													
(2)													
(3)													
(4)													
Totals				/			Add columns here and on p 8, co		, Part I, line		and on p	s 6 and 11 Enter bage 1, Part I, line lumn (B).	
Schedule G - Investmen	t Inco	me of a Se	ctio	n 501	(c)(7), (9)).	or (17) Orga	nizat	tion (see in	structio	ns)		
1 Description of income		2 Amount o			3 direc	Dec	ductions connected schedule)	4 Set-asides (attach schedu		s 5 Tota ule) set-a		otal deductions and et-asides (column 3 plus column 4)	
(1)											<u></u>		
(2)													
(3)													
(4)								L		d 150 1			
Fotals.		Enter here and Part I, line 9,				į,					Enter he Part I, li	re and on page 1, ne 9, column (B)	
Schedule I — Exploited E	xemp	t Activity Ir	icon	ne. Ot	her Tha	nse:	Advertising	Inco	me (see ins	tructio	ns)		
1 Description of exploited ac		2 Gross unrelated business income fro trade or business	d im	3 Expen	ses directly octed with duction nrelated iss income	from or 2 n	Net income (loss) m unrelated trade business (column minus column 3) a gain, compute umns 5 through 7	5 Gross activi unrela	s income from ty that is not sted business income	6 Exp attribu	penses table to imn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)						\vdash			-		<u>-</u>		
(2)		 				\vdash	·					<u> </u>	
(3)										-		,	
(4)													
Fotals	on page 1, Part I, line 10, F column (A)		Enter here and on page 1, Part I, line 10, column (B)								Enter here and on page 1, Part II, line 26		
Schedule J – Advertising	Inco	me (see instr	uctio	ns)		N 2 11 2	West State Control	****	THE PROPERTY OF THE PARTY OF TH		**************************************		
Part I Income From Per					nsolida	ate	d Basis						
1 Name of periodical	•	2 Gross advertisin income		3 D adve	rtising osts	4 A	Advertising gain or oss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7		rculation icome		dership osts	7 Excess readership costs (col 6 minus col 5, but not more than col 4)	
(1)						1	是在2016年17日					THE REPORT OF THE	
(2)		ļ											
(3)		 											
(4)		<u> </u>	\dashv			12.0	多為物質學的發行					9月代達金縣	
otals (carry to Part II, line (5))	· •	<u> </u>					·				- <u></u>		
BAA				ΤE	EA0204 L	12/31	1/18				F	orm 990-T (2018)	

Form 990-T (2018) CHRISTIAN CF	EDIT COUNSE	LORS, INC			38-2956171	· Page 5
Partil Income From Periodic 7 on a line-by-line basis)	als Reported o	n a Separate	Basis (For each p	periodical listed in	Part II, fill in coli	umns 2 through
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 (col 6 minus col 5, but not more than col 4)
(1) .						
	1					
(3)						
(2) (3) (4)					<u> </u>	
Totals from Part I	-		William Co.	\$ 10 m	100	
	Enter here and on page 1, Part I, line 11, column (A)	on page 1,				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1 – 5)	1		STATE OF THE PARTY OF			
Schedule K — Compensation of	of Officers, Dire	ectors, and Tr	'ustees (see instr	ructions)		
1 Name			2 Title	3 Percent of time devoted		ition attributable ted business

to business % ٧ Total. Enter here and on page 1, Part II, line 14

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Form **990-T** (2018)

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FEDERAL STATEMENTS

PAGE 1

CLIENT CCC

CHRISTIAN CREDIT COUNSELORS, INC

38-2956171

4/08/19

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STATEMENT 1 FORM 990-T, PART I, LINE 5 INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS

NAME	<u> </u>	GROSS INCOME	DEDUCTIONS	 INCOME (LOSS)
WEB CHURCH CONNECCT LMF 2, LP AVISTA CAPITAL OPPORTUNITIES	\$	281,534. 475. 10,362.	\$ 0. 0. 0. TOTAL	\$ 281,534. 475. 10,362. 292,371.

STATEMENT 2 FORM 990-T, PART III, LINE 35 NET OPERATING LOSS DEDUCTION

LOSS YEAR ENDING	0	RIGINAL LOSS	LOSS PREVIOUSLY USED		 LOS AVAIL	-
12/31/15 12/31/16 12/31/17	\$	43,797. 109,614. 255,669.	\$	0. 0. 0.	\$ 	43,797. 109,614. 255,669.
NET OPERATING LOSS TAXABLE INCOME NET OPERATING LOSS		(LIMITED TO T	AXABLE INCOME)		\$. \$	409,080. 222,392. 222,392.

STATEMENT 3 FORM 990-T, SCHEDULE E, LINE 3B OTHER DEDUCTIONS ALLOCABLE TO DEBT-FINANCED PROPERTY

CLEANING AND MAINTENANCE GARDENING	\$ 24,587. 9,472.
INSURANCE	5,886.
MISCELLANEOUS .	. 1,469.
INTEREST	95,694.
REPAIRS	52,558.
SUPPLIES	15,910.
TAXES	. 35,871.
UTILITIES	22,236.
BAD DEBT	27,327.
SECURITY	3,918.
SMALL EQUIP & IMPROVEMENTS	7,082.
TAX PREP	500.
	TOTAL \$ 302,510.