Form 990-T (2019)

	OF (2019) ST VINCENT DE PAUL SOCIETY DISTRICT COUNCIL OF GREEN B	39-1035429 Page 2
Par	t III Total Unrelated Business Taxable Income	·
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	9,171.
33	Amounts paid for disallowed fringes	88
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 335	35 9,171.
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	3x 9,171.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38 1,000.
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	
1)	Sentar the smaller of zero or line 37	39 8,171.
Par	Tax Computation	
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40 1,716.
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:	
	Tax rate schedule or Schedule D (Form 1041)	41
42	Proxy tax. See instructions	42
43、	Alternative minimum tax (trusts only)	48
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, 1,716.
Par	Y Tax and Payments	=7.=-
46 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	
ь	Other credits (see instructions) 48b	f
	General business credit. Attach Form 3800	
ď	Credit for prior year minimum tax (attach Form 8801 or 8827)	
6		480
47	Subtract line 46e from line 45	47 1,716.
48	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (ettach schodule)	48
49	/1_F	1,716.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50 0.
51 a	Payments: A 2018 overpayment credited to 2019	<u> </u>
	2019 estimated tax payments 51b	
-	Toy described with Form 0000	
ď	Foreign organizations: Tax paid or withheld at source (see instructions) 516	
e	Backup withholding (see instructions)	
Ĭ	Credit for small employer health insurance premiums (attach Form 8941)	
-	Other credits, adjustments, and payments: Form 2439	
v	Form 4136 Other Total > 51g	
52	Table and Add Base 54 Abourt 54	1,432.
58	· · · · · · · · · · · · · · · · · ·	63. 3.
54	~ · ·	54 287.
55		55
56	Entrophy amount of the English and Annual Control of the Annual Co	58
Part		
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority	Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file	100 100
	FINCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country	
	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?	<u> </u>
	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 eccompanying echedules and statements, and to the best of my knowledge compety and complete Degrazation of preparet less any knowledge.	and belief, it is true,
Sign		
Here		the IRS discuss this return with reparer shown below (see
	Construe of older	etions)? X Yes No
	Preparer's signature Date Check if	PTIN
Paid		
	arer JEFFREY DANEN (Mifrey Women 2/5/21	P01236582
•	Only Firm's name ► HAWKINS ASH CPASI, LLP Firm's EIN ►	39-0912608
USU	520 N BROADWAY, SUITE 250	
	·	0.336.9850

1 Inventory at beginning of year 2 Purchases 2 7 Cest of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2 7 (attach schedule) 4a 8 Do the rules of section 263A (with respect to year 1)	Schedule A - Cost of Goods	Sold. Enter met	hod of invent	tory valuation N/A				
2 Purchases 2 To Ceat of geodes sold. Subtract line 6 To Ceat line 6 To Ceat of geodes sold. Subtract line 6 To Ceat of geodes				T	St.		6	
4a Additional section 263A costs (statch schedule) 4a	2 Purchases	. 2		1	•••	Ins 6		
(attach schedule) b Other osts (attach schedule) 5 Total. Add lines it through 40 6 Total 50 6 Total 40 7 Total 50 7 Total 50 7 Total 60 7 Total 60 8 Total 50 9 Total 50	8 Cost of labor	. 8		from line 5. Enter here	and in I	Part I,		
b Other costs (attach schedule) 5 Tetal. Add lines 1 through 40 5 Tetal. Add lines 1 through 40 5 Tetal. Add lines 1 through 40 5 Tetal (see instructions) 1. Description of property (see instructions) 1. Description of property (fine previous property (fine previous groups)	4a Additional section 263A costs			line 2		·	7	_
Tetal. Add lines I through 4b 5 the organization? The control of the property of the percentage of rect of the percentage of the percenta	(attach schedule)	4a_		8 Do the rules of section	263A (with respect to	,	fes No
Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (cee instructions) 1. Description of property (1) (2) (3) (4) 2. Rent resolved or sourced (a) From personal property (if the	b Other costs (attach schedule)	4b		property produced or a	acquired	for resale) apply to	Γ	
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1. Description of income			2. Amount of income		directly connected 4. Set-			5, Total deductions and set-asides (col. 3 plus col. 4)
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	a Section 3. direct with of busin Enter pagine ine as instructi eported as inspire e	a Section 501(c)(7) ity Income, Other 3. Expenses directly connected with production of urrelated business income Enter here and on page 1, Part I, line 10, col. (8). 0. se instructions) eported on a Cons as 3. Direct advertising costs	a Section 501(c)(7), (9), or (1 2. Amount of it 2. Amount of it Enter here and or Part I, line 9, column of unrelated business (norme through 7) Enter here and on page 1, Part I, line 10, col. (B). 3. Expenses directly connected with production of unrelated business (norme through 7) Enter here and on page 1, Part I, line 10, col. (B). 3. Direct advertising costs 3. Direct advertising costs 4. Advertising (ost) (col. 3) If a gain cole 5 three	a Section 501(c)(7), (9), or (17) Org 2. Amount of Income Enter here and on page 1, Part I, line 9, column (A). 3. Expenses directly connected with production of unrelated business (column 2 minus column 3), if a gain, compute cols 5 through 7 Enter here and on page 1, Part I, line 10, col. (B). 3. Direct advertising costs 4. Advertising gain or (loss) (col. 2 minus cols 5 through 7	Add colum Enter here and line 8, or 2. Amount of income directly connect (attach schedular). Enter here and on page 1, Part I, line 9, column (A). In the second of the	Add columns 6 and 1 Enter here and on page 1 Ine 8, column (A). 2. Amount of moome 2. Amount of moome 2. Amount of moome 3. Deductions directly connected (attach schedule) Enter here and on page 1, Part I, line 9, column (A). 0. ity Income, Other Than Advertising Income 4. Not income (loss) from urrelated tade or business (column 2 minus column 3), If a gain, compute cols 5 through 7 Enter here and on page 1, Part I, Ine 10, col (8). 3. Deductions from urrelated tade or business (column 2 minus column 3), If a gain, compute cols 5 through 7 4. Advertising gain or (loss) eported on a Consolidated Basis 4. Advertising gain or (loss) eported on a Consolidated Basis 4. Advertising gain or (loss) as a advertising costs 4. Advertising gain or (loss) ing advertising costs 5. Circulation from activity that from	Add columns 6 and 10. Enter here and on page 1, Part I, line 8, column (A). 2. Amount of income directly connected (attach echedula) Enter here and on page 1, Part I, line 8, column (A). Part I, line 8, column (A). 1. Enter here and on page 1, Part I, line 8, column (A). 1. Enter here and on page 1, Part I, line 8, column (A). 1. Enter here and on page 1, Part I, line 8, column (A). 1. Enter here and on page 1, Part I, line 9, column (A). 1. Enter here and on page 1, Part I, line 9, column (A). 2. Enter here and on page 1, Part I, line 9, column (A). 2. Enter here and on page 1, Part I, line 10, column (B). 2. Enter here and on page 1, Part I, line 10, column (B). 3. Expense directly connected (attach echedula) 4. Not income (loss) 5. Cross Income from activity that is not urrelated business income business income column (B). 6. Expense of the column (B). 8. Expense of the column (B). 8. Expense of the column (B). 9. Crocutation (B). 9. Crocu	Add columne 5 and 10. Enter here and on page 1, Part I, line 9, column (A). 2. Amount of income 2. Amount of income 2. Amount of income 3. Deskutions directly connected (attach schedule) Enter here and on page 1, Part I, line 9, column (A). D . Inity Income, Other Than Advertising Income 4. Set-asideo (attach schedule) Inity Income, Other Than Advertising Income 4. Net income (cosa) from urrelated trade or basiness (column 2 minus column 3 I a gain, colled business income 4. Net income (cosa) from urrelated trade or business (column 2 minus column 3 I a gain, colled business income 5. Gross income from activity that income activity that gain, column 5 through 7 Enter here and on page 1, Part I, line 10, col (B). D . See instructions) See instructions) See instructions 4. Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cods 3 through 7 4. Advertising gain occurs in gain controls occurs occ

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ST VINCENT DE PAUL SOCIETY DISTRICT

Form 990-T (2019) COUNCIL OF GREEN BAY, INC.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in 39-1035429 Page 6 columns 2 through 7 on a line-by-line basis.) 4. Advertising gain or (loss) (col. 2 minus col 3) 11 a gain, compute cols. 5 through 7 7. Excess readership costs (column 6 minus column 5, but not more than column 4). 2. Gross advertising income 3. Direct 5. Circulation 6. Readership 1. Name of periodical advertising costs income costs (1) (2) (3) (4) ▶ 0. 0. Totals from Part I 0. Enter here and on page 1, Part I, line 11, cot (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. Schedule K - Compensation of Officers, Directors, and Trustees (see Instructions) 0. 3. Percent of time devoted to business 4. Compensation attributable to unrelated business (1) (2) (3) %

Form 990-T (2019)

0.

%

>

17

(4)

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

う

FORM 990-T SCHEDULE E - DE	PRECIATION DEDUCTION		STATEMENT 1
DESCRIPTION	ACTIVITY NUMBER A	MOUNT	TOTAL
DEPRECIATION - SUBT	OTAL - 1	34,546.	34,546
TOTAL OF FORM 990-T, SCHEDULE E, CO	OLUMN 3(A)		34,546
FORM 990-T SCHEDULE E -	OTHER DEDUCTIONS		STATEMENT 2
DESCRIPTION	ACTIVITY NUMBER A	MOUNT	TOTAL
WAGES INTEREST	,	500. 13,666.	
INSURANCE REPAIRS AND MAINTENANCE		3,529. 22.178.	
REPAIRS AND MAINTENANCE WI 4T TAXES	DTAL - 1	3,529. 22,178. 4,000.	43,873.

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ST.	VINCENT	DE	PAUL	COUNCIL	OF	GREEN	BAY

39-1035429

FORM 990-T		ACQUISITION TO DEBT-FIN			STATEMENT	3
DESCRIPTION			ACTIVITY NUMBER	AMOUNT	TOTAL	
AVERAGE PRINCIP DURING THE TAX	YEAR	Anding - Subtotal -	1	640,803.	640,8	303.
TOTAL OF FORM 9	90-T, SCHEDULI	E, COLUMN	4		640,8	303.

	A 990-T AVERAGE ADJUSTED BASIS OF OR ALLOCABLE TO DEBT-FINANCED PROPERTY							
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL					
AVERAGE ADJUSTED BASIS IN PROPERTY - SUBTOTAL -	- 1	744,361.	744,361.					
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN	5		744,361.					

Depreciation and Amortization (Including Information on Listed Property)

Attach to your tax return.

	nal Revenue Service (89) Go	to www.irs.gov/F	orm4562 fo	r instruction	s and t	he lates	t information			Sequence No 179
Nam	e(s) shown on return	-					ich this form relate			Identifying number
ST	VINCENT DE PAUL SOC	CIETY DIS	TRICT							
CO	UNCIL OF GREEN BAY,	INC.		cor	MMER	CIAL	BUILDI	NG		39-1035429
	art Election To Expense Certain Proper		79 Note: If ye						e voi	
1	Maximum amount (see instructions)							1		1,020,000.
	Total cost of section 179 property place	ad in conject (cas		•••••	•••••			·	-	
	Threshold cost of section 179 property					• ••••	• • • • •	3	_	2,550,000.
	Reduction in limitation. Subtract line 3				• • •		-	4	-	2,330,000.
			•			·· ··· ··		. 5	_	
	Dollar limitation for tax yeer. Subtract line 4 from line (a) Description of pro-		O-, It inserting film	(b) Cost (bust			(c) Elected			·
<u>6</u>	the promise of the	-pa iy	····-	(c) Odai (Daai	1000 030	Uluy,	(C) Elected	CUSI	\dashv	
_							 			
_						-+		·		
									4	
									_	
7	Listed property. Enter the amount from	line 29				7			_	
8	Total elected cost of section 179 prope	rty. Add amounts	in column (c), lines 6 and	7 .			8		
8	Tentative deduction. Enter the smaller	of line 5 or line 8						9	<u>. </u>	
10	Carryover of disallowed deduction from	line 13 of your 20	018 Form 45	62				. 10	Л	
11	Business income limitation. Enter the si	maller of business	income (not	less than zer	ro) or lu	ne 5		11	Т	
	Section 179 expense deduction. Add lir		•		•			12	_	
	Carryover of disallowed deduction to 20	•				13	· · · · · · · · · · · · · · · · · · ·		+	
	e: Don't use Part II or Part III below for					101				
	rt II Special Depreciation Allowa				le lister	1 propert	v 1			
14	Special depreciation allowance for qual					<u> </u>			\top	
		med property (our	ioi uiani listet	a broberra) br	aceu in	Service	during		.	
	the tax year							. 14		
	Property subject to section 168(f)(1) ele	ction				••		16	_	
	Other depreciation (including ACRS)	_						. 16	ட	34,546.
Pa	rt III MACRS Depreciation (Don't	include listed pro	perty. See in	structions.)						
			Se	etion A						
17	MACRS deductions for assets placed in	n service in tax ye	ars beginning	g before 2019				17	<u>'</u>	
18	f you are electing to group any assets placed in servi	ce during the tex year in	nto one or more g	eneral asset accor	unts, che	ck here	🕨 🗀			
	Section B - Assets	Placed in Servic	e During 20	19 Tax Year	Using 1	the Gene	erel Deprecia	tion Sys	tem	
	(a) Classification of property	(b) Month and year placed in service	(business/ir	r depreciation rvestment use instructions)		Recovery period	(e) Convention	(f) Method	٦	(g) Depreciation deduction
19a	3-year property				+		 		┰	
<u>ю</u>	5-year property	†			†		†		╁	
-	7-year property	†			+		†	 	┰	
_		 			+		+		+-	
	10-year property				\vdash			 	+-	
-	15-year property	 			┿	····	+		+	
<u>_f</u>	20-year property	+			+				+	
_9	25-year property	 .			1	5 yrs.		S/L	+	<u></u>
h	Residential rental property	/			+	'.5 yrs.	MM	S/L	_	
		/			27	'.5 yrs.	MM	S/L	丄	
- 1	Nonresidential real property	/			3	9 yrs.	MM	S/L		
		1					MM	S/L		
	Section C - Assets P	laced in Service	During 2019	Tax Year U	sing th	e Alterna	ative Depreci	ation Sy	ster	n
20a	Class life							S/L		
ь	12-year				1	2 yrs.		S/L	\Box	
C	30-year	/			3	0 yrs.	MM	S/L	T	
d	40-year	/		•	4	0 yrs.	MM	S/L		
Pa	rt IV Summary (See instructions.)				_					
21	isted property. Enter amount from line	28						. 21	Т	
	Fotal. Add amounts from line 12, lines 1		 10 hng 19 ga	In column /a	 Nandi	 ine 21		·· -=-	+	
	Enter here and on the appropriate lines	•		_	•			22	,	34,546.
	For assets shown above and placed in a	-		•	.~. io · t	, ce mau.	-: ···· ·	1 22	+	J4, J40.
	portion of the basis attributable to section	•	•	-		23				
	<u></u>	= 	*********	*******		ا بع				

ST VINCENT DE PAUL SOCIETY DISTRICT

39-1035429 Page 2 COUNCIL OF GREEN BAY, INC. Form 4582 (2019) 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 No 24b if "Yes," is the evidence written? Yes No (b) Date (c) (e) **(f)** (g) (a)
Type of property
(list vehicles first) Elected Business la for depreciatio Recovery Cost or Method/ Depreciation placed in investment section 179 deduction other basis period Convention service use percentage use only) cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use: 96 % % 27 Property used 50% or less in a qualified business use: 96 S/L 96 S/L 96 S/L -28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 28 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. (a) (b) (c) (e) (1) 30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle year (don't include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven . . 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use Yes Yes No Yes No Yes No Yes Yes 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 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 No employees? 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 (c) (e) period or percentage 42 Amortization of costs that begins during your 2019 tax year:

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

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