

**Exempt Organization Business Income Tax Return**  
(and proxy tax under section 6033(e))

**2019**

For calendar year 2019 or other tax year beginning JUL 1, 2019, and ending JUN 30, 2020

Go to [www.irs.gov/Form990T](http://www.irs.gov/Form990T) for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury  
Internal Revenue Service

**A**  Check box if address changed

**B** Exempt under section  
 501(c)(3)  408(e)  220(e)  
 408A  530(a)  
 529(a)

**C** Book value of all assets at end of year: 12,583,111.

**D** Employer identification number (Employees' trust, see instructions): 39-1342890

**E** Unrelated business activity code (See instructions): 561000

**F** Group exemption number (See instructions):

**G** Check organization type:  501(c) corporation  501(c) trust  401(a) trust  Other trust

**H** Enter the number of the organization's unrelated trades or businesses: 1

Name of organization (  Check box if name changed and see instructions.): **FORWARD SERVICE CORPORATION**

Number, street, and room or suite no. If a P.O. box, see instructions.  
**4600 AMERICAN PARKWAY, NO. 301**

City or town, state or province, country, and ZIP or foreign postal code  
**MADISON, WI 53718**

**F** Group exemption number (See instructions.):

**G** Check organization type:  501(c) corporation  501(c) trust  401(a) trust  Other trust

**H** Enter the number of the organization's unrelated trades or businesses: 1 Describe the only (or first) unrelated trade or business here: MANAGEMENT SERVICE FEES. 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-subsidary controlled group?  Yes  No

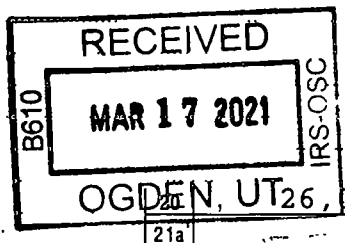
The books are in care of: MICHELLE SZABROWICZ Telephone number: 608-244-3526

**Part I Unrelated Trade or Business Income**

	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales <u>1,547,841.</u>			
b Less returns and allowances <u>                    </u> c Balance	1c <u>1,547,841.</u>		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit. Subtract line 2 from line 1c	3 <u>1,547,841.</u>		<u>1,547,841.</u>
4a Capital gain net income (attach Schedule D)	4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from a partnership or an S corporation (attach statement)	5		
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	11		
12 Other income (See instructions; attach schedule)	12		
13 <b>Total.</b> Combine lines 3 through 12	13 <u>1,547,841.</u>		<u>1,547,841.</u>

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.)  
(Deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)	14	<u>240,877.</u>
15 Salaries and wages	15	<u>31,557.</u>
16 Repairs and maintenance	16	
17 Bad debts	17	
18 Interest (attach schedule) (see instructions)	18	
19 Taxes and licenses	19	<u>17,714.</u>
20 Depreciation (attach Form 4562)		
21 Less depreciation claimed on Schedule A and elsewhere on return	21a	<u>26,080.</u>
22 Depletion	22	
23 Contributions to deferred compensation plans	23	<u>161,180.</u>
24 Employee benefit programs	24	<u>585,376.</u>
25 Excess exempt expenses (Schedule I)	25	
26 Excess readership costs (Schedule J)	26	
27 Other deductions (attach schedule)	27	<u>485,056.</u>
28 <b>Total deductions</b> Add lines 14 through 27	28	<u>1,547,840.</u>
29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	<u>1.</u>
30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	30	<u>0.</u>
31 Unrelated business taxable income Subtract line 30 from line 29	31	<u>1.</u>



SEE STATEMENT 1

SEE STATEMENT 2

SCANNED MAY 09 2022

Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Includes lines 32-39 for unrelated business taxable income calculation.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 40-45 for tax computation.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 46-56 for tax and payments.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question number, Question text, and Yes/No response. Includes questions 57-59 regarding foreign activities and tax-exempt interest.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature and Preparer Information section. Includes fields for officer signature (Michelle Szabowicz), date (3/15/2021), title (CHIEF FINANCIAL OFFICER), and preparer information (John Hemming, WIPFLI LLP).

Schedule A - Cost of Goods Sold. Enter method of inventory valuation <span style="float: right;">▶ N/A</span>				
1 Inventory at beginning of year	1		6 Inventory at end of year	6
2 Purchases	2		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7
3 Cost of labor	3			
4a Additional section 263A costs (attach schedule)	4a		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes No
b Other costs (attach schedule)	4b			<input type="checkbox"/> <input type="checkbox"/>
5 Total. Add lines 1 through 4b	5			

**Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)**  
(see instructions)

2. Rent received or accrued			3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)		
(1)			
(2)			
(3)			
(4)			
Total	0.	Total	0.
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) <span style="float: right;">▶</span>			(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) <span style="float: right;">▶</span>
			0.

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. 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)		%		
(3)		%		
(4)		%		
Totals <span style="float: right;">▶</span>			Enter here and on page 1, Part I, line 7, column (A) <span style="float: right;">▶</span>	Enter here and on page 1, Part I, line 7, column (B) <span style="float: right;">▶</span>
			0.	0.
Total dividends-received deductions included in column 8 <span style="float: right;">▶</span>				0.

**Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		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 Organizations**

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
<b>Totals</b>			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)
			0.	0.

**Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
<b>Totals</b>		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)
		0.		0.

**Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
<b>Totals</b>		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 25
		0.	0.			0.

**Schedule J - Advertising Income** (see instructions)

**Part I Income From Periodicals Reported on a Consolidated 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)						
<b>Totals (carry to Part II, line (5))</b>		0.	0.			0.

**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)						
<b>Totals from Part I</b>	<b>0.</b>	<b>0.</b>				<b>0.</b>
<b>Totals, Part II (lines 1-5)</b>	<b>0.</b>	<b>0.</b>				<b>0.</b>

**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)	CHIEF EXECUTIVE	%	
(2) <b>MARCIA CHRISTIANSEN</b>	OFFICER	50.00%	142,838.
(3)	CHIEF FINANCIAL	%	
(4) <b>MICHELLE SZABROWICZ</b>	OFFICER	50.00%	98,039.
<b>Total. Enter here and on page 1, Part II, line 14</b>			<b>240,877.</b>

Form 990-T (2019)

FORM 990-T

OTHER DEDUCTIONS

STATEMENT 1

DESCRIPTION	AMOUNT
PROFESSIONAL FEES	101,617.
OFFICE EXPENSE	43,695.
INFORMATION TECHNOLOGY	2,569.
OCCUPANCY EXPENSE	130,761.
TRAVEL	9,305.
CONFERENCES, CONVENTIONS, MEETINGS	4,137.
INSURANCE	15,710.
BOARD EXPENSE	163,326.
MISCELLANEOUS EXPENSE	476.
MEMBERSHIP DUES	178.
ACCOUNTING EXPENSE	12,434.
LEGAL EXPENSE	848.
TOTAL TO FORM 990-T, PAGE 1, LINE 27	485,056.

FORM 990-T

NET OPERATING LOSS DEDUCTION

STATEMENT 2

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/19	24,683.	0.	24,683.	24,683.
NOL CARRYOVER AVAILABLE THIS YEAR			24,683.	24,683.

FORM 990-T

NET OPERATING LOSS DEDUCTION

STATEMENT 3

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/18	27,966.	0.	27,966.	27,966.
NOL CARRYOVER AVAILABLE THIS YEAR			27,966.	27,966.