

990-T

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

2017

Department of the Treasury
Internal Revenue Service

For calendar year 2017 or other tax year beginning

and ending

Go to 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

Check box if address changed

Exempt under section

☒ 501(c)(3)

☐ 408(e) ☐ 220(e)

☐ 408A ☐ 530(a)

☐ 529(a)

Name of organization (☐ Check box if name changed and see instructions)

HEBRON HOUSE OF HOSPITALITY, INC.

Number, street, and room or suite no. If a P.O. box, see instructions

111 EAST MAIN STREET

City or town, state or province, country, and ZIP or foreign postal code

WAUKESHA WI 53186

D Employer identification number
(Employees' trust, see instructions)

39-1414365

E Unrelated business activity codes
(See instructions)

531390 531390

Book value of all assets
at end of year

1,307,728

F Group exemption number (See instructions.)

G Check organization type ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust

Describe the organization's primary unrelated business activity.

SEE STATEMENT 1

During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?

Yes ☐ No ☒

If "Yes," enter the name and identifying number of the parent corporation.

The books are in care of CHRISTOPHER LAMBERT

Telephone number 262-549-8720

Part I Unrelated Trade or Business Income

	(A) Income	(B) Expenses	(C) Net
Gross receipts or sales			
Less returns and allowances			
Cost of goods sold (Schedule A, line 7)			
Gross profit Subtract line 2 from line 1c			
Capital gain net income (attach Schedule D)			
Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
Capital loss deduction for trusts			
Income (loss) from partnerships and S corporations (attach statement)			
Rent income (Schedule C)			
Unrelated debt-financed income (Schedule E)			
Interest, annuities, royalties, and rents from controlled organizations (Schedule F)			
Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			
Exploited exempt activity income (Schedule I)			
Advertising income (Schedule J)			
Other income (See instructions, attach schedule)			
Total. Combine lines 3 through 12			

SEE STMT 2

-20,489

-20,489

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

Compensation of officers, directors, and trustees (Schedule K)	14	
Salaries and wages	15	
Repairs and maintenance	16	
Bad debts	17	
Interest (attach schedule)	18	
Taxes and licenses	19	
Charitable contributions (See instructions for limitation rules)	20	
Depreciation (attach Form 4562)	21	
Less depreciation claimed on Schedule A and elsewhere on return	22a	
Depletion	23	
Contributions to deferred compensation plans	24	
Employee benefit programs	25	
Excess exempt expenses (Schedule I)	26	
Excess readership costs (Schedule J)	27	
Other deductions (attach schedule)	28	
Total deductions. Add lines 14 through 28	29	
Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13	30	-20,489
Net operating loss deduction (limited to the amount on line 30)	31	
Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	-20,489
Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	33	1,000
Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	-20,489

For Paperwork Reduction Act Notice, see instructions.

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Part III Tax Computation

Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here ☐ **See instructions and**
 Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order).

(1) \$ (2) \$ (3) \$

Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)

\$

(2) Additional 3% tax (not more than \$100,000)

\$

Income tax on the amount on line 34

35c

Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on

the amount on line 34 from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041)

36

Proxy tax. See instructions

37

Alternative minimum tax

38

Tax on Non-Compliant Facility Income. See instructions

39

Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies

40

Part IV Tax and Payments

Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)

41a

Other credits (see instructions)

41b

General business credit. Attach Form 3800 (see instructions)

41c

Credit for prior year minimum tax (attach Form 8801 or 8827)

41d

Total credits. Add lines 41a through 41d

41e

Subtract line 41e from line 40

42

Other taxes ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (att. sch.)

43

Total tax. Add lines 42 and 43

44

0

Payments: A 2016 overpayment credited to 2017

45a

2017 estimated tax payments

45b

Tax deposited with Form 8868

45c

Foreign organizations: Tax paid or withheld at source (see instructions)

45d

Backup withholding (see instructions)

45e

Credit for small employer health insurance premiums (Attach Form 8941)

45f

Other credits and payments: ☐ Form 2439

☐ Form 4136 ☐ Other Total

45g

Total payments. Add lines 45a through 45g

46

Estimated tax penalty (see instructions) Check if Form 2220 is attached

☐

47

Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed

48

Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid

49

Enter the amount of line 49 you want Credited to 2018 estimated tax

Refunded

50

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

At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here

Yes No

X

During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?

X

If YES, see instructions for other forms the organization may have to file.

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 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 of officer *Valorie A. Boczkiwicz* Date *6/25/18*

TREASURER

May the IRS discuss this return with the preparer shown below (see instructions)?

☒ Yes ☐ No

Firm/Type preparer's name *WALKOWICZ, BOCZKIEWICZ & CO., S.C.* Preparer's signature *Valorie A. Boczkiwicz* Date *6/25/18* Check ☐ if self-employed PTIN *P00165204*
 Firm's name *WALKOWICZ, BOCZKIEWICZ & CO., S.C.* Firm's EIN *39-1500415*
 Firm's address *1800 E MAIN ST STE 100 WAUKESHA, WI 53186-6800* Phone no *262-548-0444*

Form 990-T (2017)

Part I Schedule A – Cost of Goods Sold. Enter method of inventory valuation ►

Inventory at beginning of year	1		6 Inventory at end of year	6	
Purchases	2		7 Cost of goods sold. Subtract		
Cost of labor	3		line 6 from line 5. Enter here and		
Additional sec. 263A costs			in Part I, line 2	7	
(attach schedule)	4a		8 Do the rules of section 263A (with respect to		
Other costs	4b		property produced or acquired for resale) apply		Yes
(attach schedule)			to the organization?		No
Total. Add lines 1 through 4b	5				

Part II Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)

See instructions)

Description of property

N/A

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)	
Total		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ►

Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ►

Part III 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)
N/A				
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))
		%		
		%		
		%		
		%		
			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).

Dividends

Dividends-received deductions included in column 8.

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
N/A					

Exempt 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
			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)

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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)
N/A				
	Enter here and on page 1, Part I, line 9, column (A).			Enter here and on page 1, Part I, line 9, column (B)

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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)
N/A						
	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 26

als

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)
N/A						

als (carry to Part II, line (5))

Statement 1 - Form 990-T - Primary Unrelated Business Activity

Description

ORGANIZATION'S SHARE OF PARTNERSHIP LOSS FROM 3% INTEREST
IN ST.CATHERINE COMMONS, LLC, 3% INTEREST IN ST. CATHERINE
COMMONS II, LLC, 1% INTEREST IN CAPRI WEST ALLIS, LLC,
3% INTEREST IN KILLARNEY KOURT, LLC AND 3% INTEREST IN
ABLES HIMMEL PROPERTY, LLC.

Statement 2 - Form 990-T, Part I, Line 5 - Income (Loss) from Partnerships or S-Corps

Name of Partnership or S-Corp	Gross Income	Direct Deductions (Part. only)	Net Income
CAPRI WEST ALLIS, LLC	\$ 1,861	\$	\$ 1,861
ABLES HIMMEL PROPERTY, LLC	-1,984		-1,984
KILLARNEY KOURT, LLC	-31,602		-31,602
ST CATHERINE COMMONS II, LLC	3,375		3,375
ST. CATHERINE COMMONS LLC	7,861		7,861
TOTAL	\$ -20,489	\$ 0	\$ -20,489