,	Form	990-T	E	exempt Organization Bus					OMB No 1545-0047
			 	(and proxy tax und lendar year 2019 or other tax year beginning JUL 1,			N 30 200		2010
		ment of the Treasury I Revenue Service	1	► Go to www.irs.gov/Form990T for in Do not enter SSN numbers on this form as it may	structi	ons and the latest inform	ation.	_	Open to Public Inspection for 50 1(c)(3) Organizations Only
	A .	Check box if address changed		Name of organization (D Emplo	oyer identification number loyees' trust, see ctions)
	B Fx	empt under section	Print	THE DULUTH CLINIC, LTD				4:	1-0883623
		501(c)(3 0 3	10	Number, street, and room or suite no. If a P.O. box		nstructions.		E Unrela	ated business activity code
		408(e) 220(e)	Туре	400 E 3RD ST				(366 "	isu deligiis į
		408A530(a) 529(a)		City or town, state or province, country, and ZIP o	r foreig	n postal code		62	
	C Boo	k value of all assets	-	F Group exemption number (See instructions.)	>			·	
		<u> </u>	88.	G Check organization type ► X 501(c) corp	poratio	n 501(c) trust	401(a)	trust	Other trust
	H Ent	er the number of the c	organiza	tion's unrelated trades or businesses.	2	Describe	the only (or first) un	related	
	trad	le or business here 🕨	► <u>REE</u>	FERENCE LAB & SKIN RENE	WAL	If only one,	complete Parts I-V.	If more	than one,
				ce at the end of the previous sentence, complete Pa	ırts I an	d II, complete a Schedule	M for each addition	al trade	or
		iness, then complete I					CONTO 3 P	7	
				oration a subsidiary in an affiliated group or a parer	nt-subs	idiary controlled group?	STMT 3▶ [X Ye	s No
				ifying number of the parent corporation.		Talanh	one number > 2	18-	786-8364
	Par			le or Business Income		(A) Income	(B) Expenses		(C) Net
	1a	Gross receipts or sale		1,555,393.		(· / · · · · · · · · · · · · · · · · · ·	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		Less returns and allov		715,817. c Balance	1c	839,576.		ŀ	ĵ
	2	Cost of goods sold (S	chedule	A, line 7)	2				
	3	Gross profit. Subtract	line 2 fr	om line 1c	3	839,576.			839,576.
	4a (Capital gain net incom	e (attac	h Schedule D)	4a				 _
Å	b I	Net gain (loss) (Form	4797, P	art II, line 17) (attach Form 4797)	4b				
		Capital loss deduction			4c				
				hip or an S corporation (attach statement)	5	<i></i>	 -		
		Rent income (Schedul	•	on (Cabadula E)	6/ 7			∤	
=		Unrelated debt-finance			8				
	-	-		nd rents from a controlled organization (Schedule F) in 501(c)(7), (9), or (17) organization (Schedule G)	9				
ာ		Exploited exempt activ			10	<u></u>			
		Advertising income (S	•		11				
200	12	Other income (See ins		· I	12	2.			2.
-	13	Total. Combine lines	3 throu	gh 12	13	839,578.			839,578.
	Par	t II Deduction	ns No	ot Taken Elsewhere (See instructions for	or limita	ations on deductions.)			
		<u></u>		be directly connected with the unrelated busin	ess inc	come.)			
	14		cers, dir	rectors, and trustees (Schedule K) RECE	=17.7	En		14	60 440
	15	Salaries and wages		, NECE	-1 V I			15	60,449.
	16 17	Repairs and maintena Bad debts	ance	MAY 1	Q 21			16 17	11,140.
	18	Interest (attach sche	dule) (se		0 (021 09		18	
	19	Taxes and licenses		/ 		———=		19	11,444.
	20	Depreciation (attach	Form 45	GGDE OGDE	N,	UT 20	3,883.		
	21	Less depreciation cla	imed of	Schedule A and elsewhere on return		21a		21b	3,883.
	22	Depletion						22	
	23	Contributions to defe	/	mpensation plans				23	2,889.
	24	Employee benefit pro						24	15,934.
	25 oc	Excess exempt exper	-	•				25	
	26 27	Excess readership co Other deductions (att				SEE STAT	емемт 2	26 27	482,060.
	28	Total deductions. Ac		•		DEE SIKI		28	587,890.
		,		ncome before net operating loss deduction. Subtract	t line 28	3 from line 13		29	251,688.
		- 1		oss arising in tax years beginning on or after Januai					
		(see instructions)	•					30	0.
			axable in	ncome. Subtract line 30 from line 29				31	251,688.
	923701	01-27-20 LHA Fo	r Papen	work Reduction Act Notice, see instructions.					Form 990-T (2019)

G6,1517t



Form 99	0-1 (2019					41-088	3623	Page 2
Part	ill,	Total Unrelated Business Taxab	ole Income					
32	Total o	unrelated business taxable income computed	from all unrelated trades or businesses (s	see instructions)	Ţ		<u> 51,6</u>	88.
33	Amoun	ts paid for disallowed fringes				33		
34	Charita	ble contributions (see instructions for limitation	n rules)			34		0.
35	Total u	nrelated business taxable income before pre-20	18 NOLs and specific deduction. Subtract	line 34 from the sum of	lines 32 and 335	35 2	51,6	88.
36	Deduct	on for net operating loss arising in tax years b	eginning before January 1, 2018 (see insti	ructions)	(6	36	60,3	
37	Total o	unrelated business taxable income before spe	cific deduction, Subtract line 36 from line	35			91,3	01.
38	Specific	deduction (Generally \$1,000, but see line 38 i	nstructions for exceptions)		. 3	38	1,0	00.
39		ed business taxable income. Subtract line 38		e 37,	•			
II		e smaller of zero or line 37			{	39 1	.90,3	01.
Part	iV.	Tax Computation						
40	Organi	ations Taxable as Corporations. Multiply line	39 by 21% (0.21)			40	39,9	63.
41	Trusts	Faxable at Trust Rates. See instructions for ta	x computation. Income tax on the amount	t on line 39 from:				
	T	ax rate schedule or Schedule D (Form	1041)		>	4,1		
42	Proxy t	ax. See instructions			▶	42		
43	Alterna	tive minimum tax (trusts only)				43		
44		Noncompliant Facility Income. See instruction	ns			44		
45[]]	Total.	4dd lines 42, 43, and 44 to line 40 or 41, which				45	39,9	63.
Part		Tax and Payments						
46a	Foreign	tax credit (corporations attach Form 1118; tru	sts attach Form 1116)	46a				
b	Other o	redits (see instructions)		. 46b]		
C	Genera	business credit. Attach Form 3800	•	46c]		
d	Credit f	or prior year minimum tax (attach Form 8801 o	or 8827)	Q 46d	120.]_ _		
е	Total c	redits. Add lines 46a through 46d		•	le	46e	1	20.
47	Subtrac	t line 46e from line 45				47	39,8	43.
48	Other ta	ixes. Check if from: Form 4255	Form 8611 🔲 Form 8697 🔲 Form	1 8866 🔲 Other	(attach schadule)	48		
49	Total to	x. Add lines 47 and 48 (see instructions)			4	49	39,8	43.
50	2019 n	et 965 tax liability paid from Form 965-A or For	m 965-B, Part II, column (k), line 3			\$0		0.
51 a	Paymer	its: A 2018 overpayment credited to 2019		, 51a				
b	2019 es	stimated tax payments	61	⊘ 5∫b	30,950.]		
C	Tax dep	osited with Form 8868		51c	20,000.]		
d	Foreign	organizations: Tax paid or withheld at source ((see instructions)	51d]		
е	Backup	withholding (see instructions)	6	€ 51e	58,594.]		
f	Credit f	or small employer health insurance premiums		5]1f]]]		
g	Other c	redits, adjustments, and payments: 🔲 Fo	rm 2439			111		
	F	orm 4136 Ot	her Total	► 5jig		J_		
52	Total p	ayments. Add lines 51a through 51g		•	•		09,5	<u>44.</u>
53	Estimat	ed tax penalty (see instructions). Check if Form	n 2220 is attached 🕨 🔲			53		
54	Tax du	e. If line 52 is less than the total of lines 49, 50	, and 53, enter amount owed		<i>l</i> 6 ►	54		
55	Overpa	yment. If line 52 is larger than the total of lines	s 49, 50, and 53, enter amount overpaid		l ₀ ►	55	69,7	
		e amount of line 55 you want; Credited to 202			funded 🕖 🕨	<u> 56 </u>	69,7	<u>01.</u>
Part		Statements Regarding Certain A		 _	ctions)			·
57		ime during the 2019 calendar year, did the org					Yes	No
		inancial account (bank, securities, or other) in					1	
	FinCEN	Form 114, Report of Foreign Bank and Financi	al Accounts. If "Yes," enter the name of the	e foreign country				
	here	>					-	X
58	During	the tax year, did the organization receive a dist	ribution from, or was it the grantor of, or t	transferor to, a forei	gn trust?		<u> </u>	X
		see instructions for other forms the organizati						}
59		e amount of tax-exempt interest received or ac						Ц
Sign	CC	nder penalties of perjury, I declare that I have examined the meet, and complete Declaration of preparer (other than	inis return, including accompanying schedules and taxpayer) is based on all information of which pret	statements, and to the parer has any knowledge	past of my knowle	oge and belief, it is	true,	
Here		K. DR			М	lay the IRS discuss	this return v	vith
		Signature of officer	04/29/2021 FINANO	CE		e preparer shown b		¬
				D-11		structions)?	Yes	No
_		Print/Type preparer's name	Preparer's signature	Date		if PTIN		
Paid					self- employed			
-	arer	Frank name N		<u></u>	Same Silv			
Use	Only	Firm's name	·····		Firm's EIN		=	
		Firm's address			Dhora ac			
022711 /	N1-27-20	Timi 2 duniesa			Phone no.		990-T	(2010)

Schedule A - Cost of Good	s Sold. Enter	method of inve	ntory v	aluation ► N/A				
1 Inventory at beginning of year	1		_	Inventory at end of year			_6	
2 Purchases	2		7	Cost of goods sold. S	ubtract	line 6		
3 Cost of labor	3			from line 5. Enter here	and in	Part I,		
4 a Additional section 263A costs				line 2			_ 7	
(attach schedule)	4a		8	Do the rules of section	263A (with respect to		Yes No
b Other costs (attach schedule)	4b			property produced or a	cquire	for resale) apply to		
5 Total. Add lines 1 through 4b	_ 5			the organization?				X
Schedule C - Rent Income (see instructions)	(From Real	Property and	d Per	sonal Property L	ease	d With Real Prop	erty)	
Description of property								
(1)								·
(2)								
(3)								
(4)								
	2. Rent receiv	ed or accrued						
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	than than	of rent for	personal	onal property (if the percental property exceeds 50% or if ed on profit or income)	ge	3(a) Deductions directly columns 2(a) ar	connec nd 2(b) (a	ted with the income in itlach schedule)
(1)								
(2)								
(3)								
(4)		L						
Total	0.	Total			0.			
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)				0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>	0.
Schedule E - Unrelated Det	t-Financed	Income (see	e instru	ctions)				
			١,	. Gross income from		3 Deductions directly con- to debt-finance		
1. Description of debt-fu	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)
(1)							-	
(2)								
(3)			1					
(4)								
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a	adjusted basis allocable to inced property h 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)	<u> </u>			%			1	
(2)				%				
(3)				%				
(4)				%				
						inter here and on page 1, Part I, line 7, column (A)		inter here and on page 1, Part I, line 7, column (B)
Totals				>		0	.	0.
Total dividends-received deductions in	ncluded in column	n 8			·	>	-	0.

Schedule F - Interest,	Annuities, Roy	ailles, ai		Controlled O			uons	(see ins	struction	<u> </u>
1. Name of controlled organiza	ide	Employer ntification number		elated income instructions)	4. Tot payr	al of specified nents made	include	t of column 4 ad in the contraction's gross	rolling (6. Deductions directly connected with income in column 5
(1)					<u> </u>					
(2)										
(3)							<u> </u>			
(4)			<u> </u>		<u></u>		<u> </u>			
Nonexempt Controlled Organ	T		 						···	
7. Taxable Income	8. Net unrelated in (see instruct		9. Total	of specified payi made	nents	10 Part of colu- in the controll gross	mn 9 that ing organ s income	is included ization's		ductions directly connected income in column 10
(1)	<u> </u>		<u> </u>							
(2)										
(3)										
(4)	<u> </u>	·	<u> </u>							
						Add colun Enter here and line 8, c		1, Part I		dd columns 6 and 11 Iere and on page 1, Part I, Iine 8, column (B)
Totals					•		_	0.	_	
Schedule G - Investme	ent Income of a ructions)	Section	501(c)(7), (9), or (17) Org	anization				
1. Desc	cription of income		·-	2. Amount of	income	3. Deduction directly connected (attach schedu	cted	4. Set-	asides chedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)										
(2)	- <u>-</u>								_	
(3)	<u> </u>									
(4)										
				Enter here and o Part I, line 9, co						Enter here and on page 1 Part I, line 9, column (B)
Tatala					0.					0.
Schedule I - Exploited (see instru	•	ty Incom	e, Other	Than Adv		g Income				
Description of exploited activity	2. Gross unrelated business income from trade or business	directly with pi of ur	xpenses connected roduction related ss income	4. Net incom from unrelated business (co minus colum gain, compute through	I trade or lumn 2 n 3) If a e cols 5	5. Gross inco from activity t is not unrelat business inco	hat ed	6. Exp attributi colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)	İ									
(2)									_	
(3)	ļ									
(4)	Enter here and on page 1, Part I, line 10, col (A)	page	ere and on 1, Part I,), col (B)		1		l			Enter here and on page 1, Part II, line 25
Totals -	0		0.							0.
Schedule J - Advertisi Part I Income From				olidated	Basis					
1. Name of periodical	2. Gross advertisin income	_	3. Direct vertising costs	4. Advert or (loss) (co cot 3) If a ga cots 5 th	ol 2 minus am, compute	5. Circulat		6. Reade		7. Excess readership costs (column 6 minus column 5 but not more than column 4)
(1) (2)			<u>.</u>							
(3)				7						
(4)				7	•				_	
				1						
Totals (carry to Part II, line (5))	•	0.	0	.		<u> </u>				0 . Form 990-T (2019)

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

Form 990-T (2019) THE DULUTH CLINIC, LTD. 41-08836 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 periodic	cal	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)						1	
Totals from Part I		0.	0.				0.
		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)	▶	0.	0.	"	•	•	0.
Schedule K - Comp	ensation	n of Officers, D	Directors, and	Trustees (see in	nstructions)		

	1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)			%	
(2)			%	
(3)			%	
(4)			%	

Form 990-T (2019)

0.

FORM 990-T	OTHER	INCOME	STATEMENT 1
DESCRIPTION			AMOUNT
INTEREST			2.
TOTAL TO FORM 990-T, PAGE 1	, LINE 12		2.
FORM 990-T	OTHER	DEDUCTIONS	STATEMENT 2
DESCRIPTION			AMOUNT
PURCHASED SERVICES OFFICE EXPENSES MEDICAL SUPPLIES LICENSES TRAVEL INFORMATION TECHNOLOGY			453,413. 24,637. 3,085. 584. 283.
TOTAL TO FORM 990-T, PAGE 1	, LINE 27		482,060.

Form 4562

Department of the Treasury Internal Revenue Service

(99)

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

2019

Attachment Sequence No 179

The Duluth Clinic, Ltd	Busir	less or activity to which this	iorm relates		41-0883623	nper	
	ense Certain Prop	erty Under Section 1	79		1		
	-	te Part V before you comple					
Maximum amount (see instruction)						1	
2 Total cost of section 179 prop							
3 Threshold cost of section 179						3	
4 Reduction in limitation Subtra						4	0
5 Dollar limitation for tax year. S				-		1 _ 1	
separately, see instructions .	<u> </u>	<u> </u>	<u></u>		 	5	0
6 (a) Descripti	on of property	(b) C	ost (business use	only)	(c) Elected co	st	
							
	 						
7 Listed property. Enter the amount							
8 Total elected cost of section 1						8	0
9 Tentative deduction Enter the	smaller of line 5 or I	ine 8				9	0
10 Carryover of disallowed deduc	tion from line 13 of y	our 2018 Form 4562				10	
11 Business income limitation. Er	nter the smaller of bu	siness income (not less th	an zero) or lin	ie 5. See instru	ictions	11	
12 Section 179 expense deduction	n Add lines 9 and 10), but don't enter more tha	an line 11 .	<u></u>	<u> </u>	12	0
13 Carryover of disallowed deduc	ction to 2020. Add line	es 9 and 10, less line 12		▶ 13		0	
Note: Don't use Part II or Part III b							
Part II Special Deprecia	tion Allowance a	nd Other Depreciatio	n (Don't incl	ude listed pr	operty. See in:	structions	5.)
14 Special depreciation allowance							
during the tax year. See instru						14	
15 Property subject to section 16						15	
16 Other depreciation (including						16	3,883
Part III MACRS Deprecia	tion (Don't includ	e listed property. See	instructions	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		0,000
in to its popiosis	tion (Don't moide	Section A					
17 MACRS deductions for assets	placed in service in t		2019			17	
18 If you are electing to group an						···	
asset accounts, check here .		-		=	▶ □		
Section B - A	ssets Placed in Ser	vice During 2019 Tax Ye	ar Using the	General Depre	ciation System	<u> </u>	
	(b) Month and	(c) Basis for depreciation	(d) Recovery			-	
(a) Classification of property	year placed	(business/investment use	period	(e) Convention	(f) Method	(g) Deprecia	tion deduction
	in service	only—see instructions)	<u> </u>			<u> </u>	
19 a 3-year property			<u> </u>			<u> </u>	
b 5-year property							
c 7-year property							
d 10-year property							
e 15-year property							
f 20-year property							
g 25-year property			25 yrs.		S/L		
h Residential rental			27.5 yrs.	MM	S/L		
property			27.5 yrs.	MM	S/L		
i Nonresidential real	· · · · · · · · · · · · · · · · · · ·		39 yrs.	MM	S/L	1	
_ property			55,7.0.	MM	S/L	+	
	eate Placed in Servi	ce During 2019 Tax Yea	r Heina the A			<u></u>	
20 a Class life	Sers i laced ill Selvi	So During Edit Tax Tea	Joing the A	itorriative Dep	S/L	'''	
b 12-year	-		12 450	 	S/L	+	
		<u> </u>	12 yrs.	NA14		+	
c 30-year			30 yrs.	MM	S/L	+	
d 40-year			40 yrs.	MM	S/L		
Part IV Summary (See in						T	-
21 Listed property. Enter amount						21	
22 Total. Add amounts from line							
here and on the appropriate lir	nes of your return. Pa	rtnerships and S corporat	tions—see ins	tructions . <u> . </u>	<u> </u>	22	3,883
23 For assets shown above and p	placed in service duri	ng the current year, enter	the		-		
portion of the basis attributable	to section 263A cos	ts		23		1	

Form 4	4562 (2019) The [Duluth Clinic,	Ltd										41-088	3623	Page 2
Part	V Listed	Property (In	nclude automo	biles,	certain	other v	ehicles	s, cer	tain airc	raft, a	nd proj	perty u	sed fo	r	
	entertai	nment, recr	eation, or amu	semer	nt.)										
	Note: Fo	r any vehicle	for which you ar	e using	the sta	andard n	nileage i	ate o	r deductii	ng leas	e expen	se, con	nplete d	nly 24a	
	24b, colu	ımns (a) throu	igh (c) of Section	n A, all	of Sect	ion B, ar	nd Section	on C	f applica	ble.					
	Section A-	-Depreciatio	n and Other Info	ormatio	on (Cau	ition: Se	e the in	struct	ions for I	ımıts fo	r passei	nger au	tomobil	es.)	
24a	Do you have evidence	to support the b	ousiness/investmen	t use cla	ımed?	Yes	No		24b f "	Yes," is 1	the evide	ence wri	tten?	Yes	No
	(a)	(b)	(c)	(d)		(e)		(f)	(g)	(h)	(i)
	Type of property	Date placed	Business/ investment use	Cost or o	ther basis		r depreciations ss/investme		Recovery	Me	thod/	Depre	ciation	Elected s	ection 179
	(list vehicles first)	in service	percentage				e only)		period	Conv	ention	dedu	iction	co	ost
25	Special depreciation	on allowance	for qualified liste	d prope	erty pla	ced in se	ervice du	ırıng			}				
	the tax year and us	sed more than	n 50% in a qualif	ied bus	iness u	se. See	instruct	ons .	· · · ·		25				
26	Property used mor	e than 50% ir	a qualified bus	ness u	se										
	·	ļ	%							<u> </u>				<u> </u>	
			%			<u> </u>		_		<u> </u>		ļ			
			%	<u> </u>		<u> </u>				l		L		L	
27	Property used 50%	or less in a		s use	_							, <u>-</u>			
			%		_					S/L -					
——		ļ	%	<u> </u>		[\dashv		S/L -					
		<u> </u>	%	<u> </u>		<u> </u>				<u>S/L</u> –	T				
28	Add amounts in co		-					_			28	L	0		
29_	Add amounts in co	lumn (ı), line									<u> </u>	· <u>· </u>	29	L	0
_						nation o				_					
	olete this section for ve	-												∌S	
to you	ur employees, first ans	wer the question	ons in Section C to					Г		1		$\overline{}$			
20	T .1-15				a) cle 1	,	o) cle 2		(c) ehicle 3	, .	d) ıcle 4		e) cle 5	,	f) cle 6
30	Total business/inves		-	*****	CIC I	V C	010 2	'`		'	1010 4		0.00		
24	the year (don't inclu	-												 	
31 32	Total commuting mile		-							_					
32	Total other personal miles driven	(noncommuun	9)			1				1				ĺ	
33	Total miles driven du	·	٠.					-							
33	lines 30 through 32	iring the year. 7	-du		0		0		0		0		0		0
34	•	lable for nerso	nal	Yes	No	Yes	No	Yes		Yes	No	Yes	No	Yes	No
٠.	use during off-duty h	•	1101	100		100	···•_	100	<u> </u>	1.55					
35	• •		more than				 			1	 				
-	5% owner or related		. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									Ì		1	ļ
36			sonal use?							 	†		_		
	<u> </u>		Questions for I	mploy	ers Wh	o Provi	de Vehi	cles	for Use b	y Their	r Emplo	vees			·
Answ	er these questions t												ho arer	ı't	
	than 5% owners or		•			, ,						•			
37	Do you maintain a w				ersonal	use of ve	ehicles, ir	ncludir	ng commu	ting, by				Yes	No
	your employees? .														_
38	Do you maintain a w	ritten policy sta	stement that prohi	bits pers	onal us	e of vehic	cles, exc	ept co	mmuting,	by your					
	employees? See the	instructions fo	r vehicles used by	corpor	ate offic	ers, direc	tors, or 1	% or 1	more own	ers					
39	Do you treat all use of	of vehicles by e	employees as pers	sonal us	e?										
40	Do you provide more	than five vehi	cles to your emplo	yees, o	btain inf	ormation	from you	ır emp	oloyees ab	out the					
	use of the vehicles, a	and retain the i	nformation receive	ed?								•			
41	Do you meet the req		-									•		<u></u>	
_	Note: If your answer		40, or 41 is "Yes,"	don't c	omplete	Section	B for the	cover	ed vehicle	s.				<u> </u>	
Part	VI Amortiz	ation						_							
		(a)			(b)		(c)		(d)	l ,	(e) Amortizatio		(1	f)
	Descrip	tion of costs		i	mortizatio	on Am	ortizable a	mount	Code	section	ł	period or		Amortization	for this year
					egins			_			<u> </u>	percentage			
_42	Amortization of cos	ts that begins	s during your 20	19 tax y	ear (se	e instru	ctions)				т -				
									 		ļ				
						1					<u> </u>			 	 -
43	Amortization of cos	-	-	-									43	-	
_44	Total. Add amount	s in column (f). See the instru	ctions f	<u>or whe</u> i	e to rep	oπ				<u></u>		44	<u></u>	0

ENTITY

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning \underline{JUL} $\underline{1}$, $\underline{2019}$, and ending \underline{JUN} $\underline{30}$, $\underline{2020}$

► 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

Name	THE DULUTH CLINIC, LTD	•		41-08		
	Unrelated Business Activity Code (see instructions) 44					
	Describe the unrelated trade or business RETAIL PI	HARM	ACY			
=	t I Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net
1 a	Gross receipts or sales 10,039,620.	T	1			
b	Less returns and allowances2,790. c Balance	1 c	10,036,830			
2	Cost of goods sold (Schedule A, line 7)	2	9,006,206			
3	Gross profit. Subtract line 2 from line 1c	3	1,030,624			1,030,624.
4 a	Capital gain net income (attach Schedule D)	4a				
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
С	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)	1				
	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	Total. Combine lines 3 through 12	13	1,030,624	. •		1,030,624.
Pai	Deductions Not Taken Elsewhere (See instruc			deductions.) (Ded	ductio	ns must be
	directly connected with the unrelated business in	ncome	∌.)			
14	Compensation of officers, directors, and trustees (Schedule K)		_		14	
15	Salaries and wages				15	776,534.
16	Repairs and maintenance				16	1,627.
17	Bad debts				17	1,862.
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses				19	106,752.
20	Depreciation (attach Form 4562)		20	<u>25,687.</u>		
21	Less depreciation claimed on Schedule A and elsewhere on return	n	21a		21b	<u>25,687.</u>
22	Depletion				22	
23	Contributions to deferred compensation plans				23	27,776.
24	Employee benefit programs		-		24	97,927.
25	Excess exempt expenses (Schedule I)				25	
26	Excess readership costs (Schedule J)				26	
27	Other deductions (attach schedule)		SEE ST	ATEMENT 4	27	454,841.
28	Total deductions. Add lines 14 through 27				28	1,493,006.
29	Unrelated business taxable income before net operating loss ded			line 13	29	462,382.
30	Deduction for net operating loss arising in tax years beginning on	or after	January 1, 2018 (see			<u>.</u>
	instructions)			STMT 5	30	0.
<u>31</u>	Unrelated business taxable income. Subtract line 30 from line 29				31	-462,382.
LHA	For Paperwork Reduction Act Notice, see instructions.			S	chedul	e M (Form 990-T) 2019

Page 3

THE DULUT	H CLINI	C, LTD.			41-0883	3623
Schedule A - Cost of Good	s Sold. Ente	r method of invent	tory valuation COS	T	_	
1 Inventory at beginning of year	1		6 Inventory at end of year	ar		6
2 Purchases	2 9	,006,206.	7 Cost of goods sold. S	ubtract	line 6	
3 Cost of labor	_3		from line 5, Enter here	and in l	Part I,	
4 a Additional section 263A costs			line 2		Ĺ	7 9,006,206.
(attach schedule)	4a		8 Do the rules of section	263A (with respect to	Yes No
b Other costs (attach schedule)	_4b		property produced or a	acquired	for resale) apply to	
5 Total Add lines 1 through 4b		,006,206.				X
Schedule C - Rent Income	(From Real	Property and	Personal Property L	.ease	d With Real Prope	erty)
(see instructions)						
1. Description of property						
(1)	· -					
(2)						
(3)						
(4)						
	2. Rent receiv	ed or accrued				
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	than	` of rent for pe	nd personal property (if the percenta ersonal property exceeds 50% or if its based on profit or income)	ge	3(a) Deductions directly of columns 2(a) and	connected with the income in I 2(b) (attach schedule)
(1)						
(2)	<u></u>					
(3)						
(4)						
Total	0.	Total		0.		
(c) Total income. Add totals of columns	2(a) and 2(b). Er	nter			(b) Total deductions. Enter here and on page 1,	
here and on page 1, Part I, line 6, column		<u> </u>		0.	Part I, line 6, column (B)	<u> </u>
Schedule E - Unrelated Deb	t-Financed	Income (see I	nstructions)			
			2. Gross income from		Deductions directly conne to debt-finance	
1. Description of debt-fir	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation	(b) Other deductions
.,			imaneca property		(attach schedule)	(attach schedule)
						ļ.
(1)						
(2)				 		
(3)				 	·	
(4)	1			 		
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or debt-fine	e adjusted basis allocable to anced property h 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)	Ī		%			
(4)			%			
					nter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1 Part I, line 7, column (B)
Totals			•		0.	0.
Total dividends-received deductions in	cluded in colum	n 8	•			0.

FORM 990-T (M)	OTHER DEDUCTIONS	STATEMENT 4
DESCRIPTION		AMOUNT
ALLOCATED		6,739.
PRESCRIPTION CLAIM PROCE	SSING FEES	315,505.
OFFICE EXPENSES		32,854.
OCCUPANCY		25,663.
PURCHASED SERVICES		21,175.
SUPPLIES		19,014.
INFORMATION TECHNOLOGY		15,076.
MISCELLANEOUS		11,482.
TRAVEL		3,077.
LICENSES		2,499.
DUES		1,399.
CONFERENCES, CONVENTIONS	. AND MEETINGS	239.
ADVERTISING	,	74.
PUBLICATIONS & SUBSCRIPT	IONS	45.
TOTAL TO SCHEDULE M, PAR	T II, LINE 27	454,841.

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

Department of the Treasury Internal Revenue Service Name(s) shown on return

► Go to www.irs.gov/Form4562 for instructions and the latest information.

Sequence No 179

Name(s) shown or The Duluth Clinic		1				Identifying number 41-0883623			
	ection To Expense Certai	n Property Un	der Section 1	79		141-0003023			
	te: If you have any listed property								
							11		
	Maximum amount (see instructions)								
							3		
	ion for tax year. Subtract line 4						4 0		
	ee instructions				-		5 0		
6	(a) Description of property			ost (business use		(c) Elected cos			
<u> </u>			† 	`					
7 Listed proper	rty Enter the amount from line	29			7				
	cost of section 179 property.						8 0		
	duction. Enter the smaller of li						9 0		
	disallowed deduction from line						10		
	ome limitation. Enter the small				ie 5. See instru	uctions	11		
	expense deduction. Add lines						12 0		
13 Carryover of	disallowed deduction to 2020.	Add lines 9 and	10, less line 12.		🕨 13		0 1		
	Part II or Part III below for liste								
Part II Sp	ecial Depreciation Allow	ance and Othe	r Depreciation	n (Don't incl	ude listed pr	operty. See ins	structions.)		
14 Special depre	eciation allowance for qualified	property (other to	han listed proper	rty) placed in s	service				
during the tax	x year. See instructions						14		
	ject to section 168(f)(1) election						15		
16 Other deprec	ciation (including ACRS)	<u> </u>	<u> </u>	<u> </u>	<u></u>	<u> </u>	16 25,687		
Part III MA	ACRS Depreciation (Don'	t include listed	property. See i	nstructions.)					
			Section A						
	uctions for assets placed in se						17		
18 If you are ele	cting to group any assets plac	ad in control duri							
•		ed in Service dun	ng the tax year ii	nto one or mo	re generai				
•		· · · · · · · ·	•		_	▶ 🔲			
•		<u> </u>	<u> </u>						
•	section B - Assets Place	d in Service Duri	<u> </u>	ar Using the					
asset accoun	Section B - Assets Place (b) Mo	d in Service Duri	ng 2019 Tax Ye	ar Using the			(g) Depreciation deduction		
asset accoun	Section B - Assets Place (b) Mo year	d in Service Duri	ng 2019 Tax Ye	ar Using the	General Depre	eciation System			
asset accoun	Section B - Assets Place (b) Mo year in se	d in Service Duri	ng 2019 Tax Ye us for depreciation ss/investment use	ar Using the	General Depre	eciation System			
asset accoun	Section B - Assets Place (b) Mo year n se	d in Service Duri	ng 2019 Tax Ye us for depreciation ss/investment use	ar Using the	General Depre	eciation System			
(a) Classifi	Section B - Assets Place (b) Mo year in seroperty roperty	d in Service Duri	ng 2019 Tax Ye us for depreciation ss/investment use	ar Using the	General Depre	eciation System			
(a) Classifi 19 a 3-year pi b 5-year pi c 7-year pi d 10-year pi	nts, check here Section B - Assets Place (b) Mo year in serioperty roperty roperty roperty roperty roperty roperty	d in Service Duri	ng 2019 Tax Ye us for depreciation ss/investment use	ar Using the	General Depre	eciation System			
(a) Classifi 19 a 3-year pi b 5-year pi c 7-year pi d 10-year pi e 15-year pi	nts, check here Section B - Assets Place (b) Mo year in se roperty	d in Service Duri	ng 2019 Tax Ye us for depreciation ss/investment use	ar Using the	General Depre	eciation System			
(a) Classifi 19 a 3-year pr b 5-year pr c 7-year pr d 10-year pr e 15-year pr f 20-year pr	nts, check here Section B - Assets Place (b) Mo year in se roperty	d in Service Duri	ng 2019 Tax Ye us for depreciation ss/investment use	ar Using the (d) Recovery period	General Depre	(f) Method			
(a) Classifi 19 a 3-year pr b 5-year pr c 7-year pr d 10-year pr e 15-year pr f 20-year pr g 25-year pr	nts, check here Section B - Assets Place (b) Mo year in se roperty	d in Service Duri	ng 2019 Tax Ye us for depreciation ss/investment use	ar Using the (d) Recovery period	General Depro	(f) Method			
(a) Classifi 19 a 3-year pr b 5-year pr c 7-year pr d 10-year pr e 15-year pr f 20-year pr	nts, check here Section B - Assets Place (b) Mo year in se roperty	d in Service Duri	ng 2019 Tax Ye us for depreciation ss/investment use	ar Using the (d) Recovery period	General Depre	(f) Method S/L S/L			
(a) Classifi 19 a 3-year pr b 5-year pr c 7-year pr d 10-year pr e 15-year pr f 20-year pr g 25-year pr h Residentia	nts, check here Section B - Assets Place (b) Mo year in se roperty	d in Service Duri	ng 2019 Tax Ye us for depreciation ss/investment use	ar Using the (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs.	(e) Convention MM MM	(f) Method S/L S/L S/L			
(a) Classifi 19 a 3-year pr b 5-year pr c 7-year pr d 10-year pr e 15-year pr f 20-year pr g 25-year pr h Residentia	nts, check here Section B - Assets Place (b) Mo year in se roperty	d in Service Duri	ng 2019 Tax Ye us for depreciation ss/investment use	ar Using the (d) Recovery period 25 yrs. 27.5 yrs.	(e) Convention MM MM MM	S/L S/L S/L S/L S/L			
(a) Classifi 19 a 3-year pr b 5-year pr c 7-year pr d 10-year pr e 15-year pr f 20-year pr g 25-year pr h Residentia	nts, check here Section B - Assets Place (b) Mo year in se roperty al rental	d in Service Duri	ng 2019 Tax Ye is for depreciation ss/investment use see instructions)	(d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	(e) Convention MM MM MM MM	S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction		
(a) Classifi 19 a 3-year pr b 5-year pr c 7-year pr d 10-year pr e 15-year pr f 20-year pr g 25-year pr h Residentia property i Nonreside property	nts, check here Section B - Assets Place (b) Mo year in se roperty	d in Service Duri	ng 2019 Tax Ye is for depreciation ss/investment use see instructions)	(d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	(e) Convention MM MM MM MM	S/L S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction		
(a) Classifi 19 a 3-year pi b 5-year pi c 7-year pi d 10-year pi f 20-year pi f 20-year pi h Residentia property i Nonreside property 20 a Class life	nts, check here Section B - Assets Place (b) Mo year in se roperty al rental	d in Service Duri	ng 2019 Tax Ye is for depreciation ss/investment use see instructions)	ar Using the (d) Recovery period 25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs.	(e) Convention MM MM MM MM	S/L	(g) Depreciation deduction		
(a) Classifi 19 a 3-year pi b 5-year pi c 7-year pi d 10-year pi f 20-year pi f 20-year pi h Residentia property i Nonreside property 20 a Class life b 12-year	nts, check here Section B - Assets Place (b) Mo year in se roperty al rental	d in Service Duri	ng 2019 Tax Ye is for depreciation ss/investment use see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Using the A	(e) Convention MM MM MM MM MM MM ternative Dep	S/L	(g) Depreciation deduction		
(a) Classifi 19 a 3-year pi b 5-year pi c 7-year pi d 10-year pi e 15-year pi f 20-year pi g 25-year pi h Residentia property i Nonreside property 20 a Class life b 12-year c 30-year	nts, check here Section B - Assets Place (b) Mo year in se roperty al rental	d in Service Duri	ng 2019 Tax Ye is for depreciation ss/investment use see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Using the A	(e) Convention MM MM MM MM MM MM MM MM MM	S/L	(g) Depreciation deduction		
(a) Classifi 19 a 3-year pi b 5-year pi c 7-year pi d 10-year pi f 20-year pi g 25-year pi h Residentia property i Nonreside property 20 a Class life b 12-year c 30-year d 40-year	Section B - Assets Place (b) Mo year in servery roperty Section C - Assets Placed	d in Service Duri	ng 2019 Tax Ye is for depreciation ss/investment use see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Using the A	(e) Convention MM MM MM MM MM MM ternative Dep	S/L	(g) Depreciation deduction		
asset account (a) Classifi 19 a 3-year pi b 5-year pi c 7-year pi d 10-year pi f 20-year pi g 25-year pi h Residentia property i Nonreside property 20 a Class life b 12-year c 30-year d 40-year Part IV Su	Section B - Assets Place (b) Mo year property roperty al rental ential real Section C - Assets Placed mmary (See instructions.)	d in Service Duri	ng 2019 Tax Ye is for depreciation ss/investment use see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Using the A	(e) Convention MM MM MM MM MM MM MM MM MM	S/L	(g) Depreciation deduction		
asset account (a) Classifi 19 a 3-year property b 5-year property d 10-year property i Nonreside property 20 a Class life b 12-year c 30-year d 40-year Part IV Sur 21 Listed property	Section B - Assets Place (b) Mo year year year year year year year year	in Service Duri	ng 2019 Tax Ye is for depreciation ss/investment use see instructions)	25 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Using the A	(e) Convention MM MM MM MM MM ternative Dep	S/L	(g) Depreciation deduction		
asset account (a) Classifi 19 a 3-year property c 7-year property d 10-year property f 20-year property i Nonreside property 20 a Class life b 12-year c 30-year d 40-year Part IV Sur 21 Listed proper 22 Total. Add an	Section B - Assets Place (b) Mo year roperty al rental ential real Section C - Assets Placed mmary (See instructions.) ty. Enter amount from line 28 mounts from line 12, lines 14 th	in Service During (c) Bas (busine only— in Service During only— in Service During only— arrough 17, lines 1	ng 2019 Tax Ye is for depreciation ss/investment use see instructions) g 2019 Tax Year g and 20 in colu	25 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Using the All 12 yrs. 30 yrs. 40 yrs.	(e) Convention MM MM MM MM MM MM MM MM MM	S/L	(g) Depreciation deduction		
asset account (a) Classifie 19 a 3-year property c 7-year property d 10-year property i Nonreside property 20 a Class life b 12-year c 30-year d 40-year Part IV Sur 21 Listed proper 22 Total. Add an here and on the	Section B - Assets Place (b) Mo year year year year year year year year	in Service During (c) Bas (busine only— in Service During only— in Service During only— arrough 17, lines 1	ng 2019 Tax Ye is for depreciation ss/investment use see instructions) g 2019 Tax Year g and 20 in colus and S corporat	25 yrs. 27.5 yrs. 27.5 yrs. 27.5 yrs. 39 yrs. Using the A 12 yrs. 30 yrs. 40 yrs.	(e) Convention MM MM MM MM MM MM MM MM MM	S/L	(g) Depreciation deduction		

Form	4562 (2019) Тhe Г	Note the Chara	المط										44 000	202	. 1
Pari	1110 E	Ouluth Clinic,	nclude automo	hilos	oortoin	othory	obiolog		tain aire	roft or	ad pro	204111	41-088		Page 2
rail			eation, or amu			omer v	enicies	s, cei	itaiii aii c	iaii, ai	ia proj	perty t	1560 10	ı	
			for which you a		•	ndard m	uleane r	ate o	r deductir	nn lease	evnen	se con	nnlete c	nlv 24a	
		•	ugh (c) of Section	•	•		•			•	capen	136, COI	iipicie C	iny 2-a,	
			n and Other Inf								passe	nger au	ıtomobil	es.)	
242							No								No
	Do you have evidence	to support the t	Jusiness/investiner	II use cia	iiiieu /	Yes	Пио	[24b f "Y	res, is t	ne evide	ence wn	illen /	Yes	□ NO
	(a) Type of property (list vehicles first)	(b) Date placed In service	(c) Business/ Investment use percentage	1	d) ither basis	(busines	(e) r depreciations/investmente e only)		(f) Recovery period	overy Method/ Depreciation			eciation	(i) Elected section 179 cost	
25					• -				· ·	!					
	the tax year and us					se. See	instructi	ons .	· ·	• • • • •	25	L		<u> </u>	
_26	Property used mor	e than 50% ir		T	se					!					
			%	+				\dashv						<u> </u>	
			%							 					
	D	l	%							L		L		<u> </u>	
_27	Property used 50%	or less in a c								T 6/1		Γ		T	
		ļ	<u>%</u>						· · · · · ·	S/L _		 		ł	
			%	+			·	-		S/L – S/L –				ļ	
	Add amounts in co	lumn (h) line				d on line	21 000	1			28	 	0		
28 29	Add amounts in co		_				: Z 1, paç	je i		• •	20	L	29		0
_25	Add aniounts in co	iumm (i), iine				ation o	n Hea o	f Vah	iclos		<u> </u>	· ·		L	
	olete this section for ve ur employees, first ans		a sole proprietor	, partner	, or othe	r "more ti	han 5% d	owner,	," or relate					es	
				(-	a)	(t)		(c)	(6	 d)	(е)	(1	r)
30	Total business/invest	tment miles dri	ven during	Vehi	cle 1	Vehi	cle 2	∨∈	ehicle 3	Vehi	cle 4	Vehi	ıcle 5	Vehi	cle 6
	the year (don't include	de commuting	miles)												
31	Total commuting mile	es driven durin	g the year												
32	Total other personal miles driven	(noncommutin	g)												
33	Total miles driven du	ring the year	Add												
	lines 30 through 32				0		0		0		0		0		0
34	Was the vehicle avai	lable for perso	nal	Yes	No	Yes	No.	Yes	No	Yes	No	Yes	No	Yes	No
	use during off-duty h	ours? .		L									<u> </u>		
35	Was the vehicle used	d primarily by a	more than]]]		
	5% owner or related	person?	•					<u> </u>					<u> </u>		
_36	Is another vehicle av							<u></u>				<u> </u>	<u> </u>		
			Questions for							-	-	-			
	ver these questions t		•	•	n to com	pleting	Section	B for	vehicles	used by	emplo	yees w	ho arer	ı't	
more	than 5% owners or														
37	Do you maintain a wi	ritten policy sta	atement that prohi	ibits all p	ersonal	use of ve	hicles, ir	ncludir	ng commu	ting, by				Yes	No _
38	Do you maintain a wi														
39	employees? See the			•		ars, direc	1015, 01 1	76 UI I	more owne	515	•	•			
40	Do you treat all use of Do you provide more	•				ormation	from you	ır emn	 Novees sh	out the				-	
40	use of the vehicles, a				viain inii	วเกาสแบก	nom you	n emb	noyees ab	out tile					
41	Do you meet the requ				Ila dama	netration		a inet	ructions					- -	
٠,	Note: If your answer									 s		•			
Part			, 0 103,	33110		200.0071		20.01							
-		(a)		_	(b)	<u> </u>	(c)		1,	t)		(e)		(1	
		tion of costs		,	(b) mortizatio egins	n Am	ortizable a	imount		section		(e) Amortizatio period or percentage		Amortization	
40	Amortization of oor	A - 45 - 4 b		<u> </u>			4.000								

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.

43

44

Form **8827**

Department of the Treasury Internal Revenue Service **Credit for Prior Year Minimum Tax - Corporations**

► Attach to the corporation's tax return.

► Go to www.irs.gov/Form8827 for the latest information.

OMB No. 1545-0123

2019

Name	Embioser iden	uncation number
THE DULUTH CLINIC, LTD.	41-08	83623
1 Minimum tax credit carryforward from 2018. Enter the amount from line 9 of the 2018 Form 8827 STMT 6	1	120.
2 Enter the corporation's 2019 regular income tax liability minus allowable tax credits (see instructions)	2	39,963.
3 Enter the refundable minimum tax credit (see instructions)	3	
4 Add lines 2 and 3	4	39,963.
5a Enter the smaller of line 1 or line 4. If the corporation had a post-1986 ownership change or has pre-acquisition excess credits, see instructions	5a	120.
b Current year minimum tax credit. Enter the smaller of line 1 or line 2 here and on Form 1120, Schedule J, Part I, line 5d (or the applicable line of your return). If the corporation had a post-1986 ownership change or has pre-acquisition excess credits, see instructions. If you made an entry on line		
3, go to line 5c Otherwise, skip line 5c	5b	120.
c Subtract line 5b from line 5a. This is the current year refundable minimum tax credit. Include this amount on Form 1120, Schedule J, Part III, line 20c (or the applicable line of your return)	5c	
6 Minimum tax credit carryforward. Subtract line 5a from line 1. Keep a record of this amount to carry		
forward and use in future years	6	

STATEMENT 7

FORM 990T

PART III - LINE 36 - NET OPERATING LOSS DEDUCTION

NET OPERATING LOSS CARRYFORWARD:

REPEAL OF SECTION

YEAR GENERATED	521(A)(7)	AMOUNT GENERATED	AMOUNT UTILIZED	NOL REMAINING
6/30/2013	-	60,913	-	60,913
2011 Amended:	<u>-</u>	-	20,736	40,177
2012 Amended:	-	-	40,177	-
6/30/2014	-	139,305	-	139,305
6/30/2015	-	35,359	_	174,664
6/30/2016	-	74,709	-	249,373
6/30/2017	-	58,970	-	308,343
6/30/2018	75,904	-	23,848	360,399
6/30/2019	-	_	300,012	60,387
6/30/2020	<u> </u>		60,387	<u> </u>
TOTAL	75,904	369,256	445,160	