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Forr	₋ 990-T		•	Organization (and proxy ta	n Busine ax under s	ectio	n 6033	e lax Re (e))	turn	2018		
	artment of the Treasury nal Revenue Service		endar year 2018 or other ►Go to w Do not enter SSN nur	ww.irs gov/Form99		ions an					to Public Inspection for c)(3) Organizations Only	
Α	Check box if address changed		Name of organization	(Check box	x if name changed	and see	instructions)	D Employer ide			
	Exempt under section	_	ODEN ADM	C OF MIN	TECOMA				(Employees' tr	ust, see in	isiruciions)	
ļ	X 501(C)(<u>03</u>)	Print		S OF MINI					41-1	6813	R17	
l	408(e) 220(e) 408A 530(a)	Type		om or suite no If a P O b OMINGTON	•	5			E Unrelated bu		· - · · · · · · · · · · · · · · · · · ·	
Ì	529(a)	Type		province, country, and Z		l code			(See instruction		1	
	Book value of all assets	1	MINNEAPO	•	-		55404	1	7223	20		
_	at end of year	F G	roup exemption nur	mber (See instruct	tions) ▶							
			heck organization ty		01(c) corpora			01(c) trust	401(a) trus		Other trust	
	Enter the number of the	-						ly (or first) un	related trade or b			
	SPACE RENT		CATERING							-	y one, complete	
	Parts I–V If more than or Schedule M for each add					evious	sentence	, complete Pa	arts i and ii, comp	nete		
	During the tax year, was					nt-subs	ıdıarv coı	ntrolled aroup			Yes X No	
	If "Yes," enter the name a					0020	ididi'y oo.	g. g. 0 ap				
J	The books are in care of	▶ K	ATERI ROU	TH				Tele	phone number	61	2-767-7342	
_P	art I Unrelated	<u>d Trade</u>	e or Business				(A)	Income	(B) Expenses		(C) Net	
1a	Gross receipts or sales		37,0					25 25		-		
b	Less returns and allow			c Balance	•	1c		37,076				
2	Cost of goods sold (Sc		•			3		37,076			37,076	
23 3 3 4a	Gross profit Subtract le Capital gain net income					4a	 	31,010			3,,0,0	
o b	Net gain (loss) (Form 479)	•	·	1797)		4b						
- C	Capital loss deduction			,		4c						
- 5	Income (loss) from partnership	and S corpo	oration (attach statement)		Ţ	5						
5 6	Rent income (Schedule	e C)				6		<u>17,5</u> 00			17,500	
7	Unrelated debt-finance		•			7						
8	Interest, annuities, royaltie				ſ	8						
9	Investment income of a se			inization (Schedule C	غ) (غ	9 10				+		
10	Exploited exempt active Advertising income (So	•	, ,			11				+		
12	Other income (See ins		•			12						
13	Total. Combine lines 3		•			13		54,576			54,576	
P	art II Deduction	ns Not	t Taken Elsewi	here (See inst	ructions for	limita	ations o	on deduction	ons) (Except t	for co	ntributions,	
14	Compensation of office				io di ii olatot	<u> </u>	11000 11	1001110.7		14		
15	Salaries and wages	,	,			—				15	40,005	
16	Repairs and maintenar	nce		REC	EIVED	[16		
17	Bad debts			<u>ω</u>		၂ଧା	_	. .		17	700	
18	Interest (attach schedu	ıle) (see	instructions)	SEP SEP	1 0 2019	S-0S(See	Statem	ent 1	18	720	
19	Taxes and licenses Charitable contributions (S	`aa matau	ations for limitation rule	1 1		기쯨				19 20		
20 21	Depreciation (attach Fo			OGD	EN, UT	1		21 [5,701			
22	Less depreciation clain		•	where on return	· · · · · · · · · · · · · · · · · · ·			22a	, , ,	22b	5,701	
23	Depletion									23		
24	Contributions to deferre	ed comp	ensation plans							24		
25	Employee benefit prog	rams								25		
26	Excess exempt expens	,							ļ	26		
27	Excess readership cos	•	•				800	Statem	ent 2	27	36,229	
28	Other deductions (attached		•				ಎಆಆ	o La Cell	EIIC Z	28	82,655	
29 30	Total deductions. Add Unrelated business tax		•	erating loss deduct	tion Subtract	line 29	from line	13		30	-28,079	
31	Deduction for net opera									31		
32	Unrelated business tax	-	-					·		32	-28,079	
DAA	For Paperwork Redu							. —			Form 990-T (2018	

34

41-1681317 OPEN ARMS OF MINNESOTA Form 990-T (2018) Page 2 Total Unrelated Business Taxable income Part III Total of unrelated business taxable income computed from all unrelated trades or businesses (see 33 33 instructions) 34 34 Amounts paid for disallowed fringes Deductions for net operating loss arising in tax years beginning before January 1, 2018 (see 35 35 instructions) 36 Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum 36 of lines 33 and 34 37 37 Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions) Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, 38 enter the smaller of zero or line 36 Tax Computation Organizations Taxable as Corporations. Multiply line 38 by 21% (0 21) 39 39 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from Schedule D (Form 1041) 40 Tax rate schedule or 41 41 Proxy tax. See instructions 42 42 Alternative minimum tax (trusts only) 43 Tax on Noncompliant Facility Income. See instructions 43 Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies 44 44 Part V Tax and Payments Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a 45a 45b Other credits (see instructions) b 45c General business credit Attach Form 3800 (see instructions) C 45d Credit for prior year minimum tax (attach Form 8801 or 8827) d 45e Total credits. Add lines 45a through 45d e 46 Subtract line 45e from line 44 46 Other taxes Check if from 47 47 Form 4255 Form 8611 48 Total tax. Add lines 46 and 47 (see instructions) 48 49 2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k) line 2 49 50a Payments A 2017 overpayment credited to 2018 50a 50b 2018 estimated tax payments h 50c С Tax deposited with Form 8868 Foreign organizations Tax paid or withheld at source (see instructions) 50d 50e Backup withholding (see instructions) e 50f Credit for small employer health insurance premiums (attach Form 8941) Other credits, adjustments, and payments Form 2439 α 50a Form 4136 Other 51 Total payments. Add lines 50a through 50g 51 Estimated tax penalty (see instructions) Check if Form 2220 is attached 52 52 53 Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed 53 Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid 54 54 55 Refunded > 55 Enter the amount of line 54 you want Credited to 2019 estimated tax Statements Regarding Certain Activities and Other Information (see instructions) Yes No At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority 56 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 X X During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? 57 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 e that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, corr ther than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this return with the preparer shown below (see instructions)? EXECUTIVE DIRECTOR No Yes Title PTIN Date Print/Type preparer's name Preparer's signature Check MAYDOMICHOLE FAIRBANKS 08/06/19 self-employed P00967515 Paid NICHOLE FAIRBANKS HARRINGTON LANGER & ASSOCIATES 41-1532347

Sign Here

Firm's EIN

Preparer **Use Only**

Firm's name 563 PHALEN BLVD

SAINT PAUL, MN

55130

651-481-1128 Phone no

<u>Forn</u>	1 990-T (2018) OPEN ARM	MS OF MI	NNESOTA			41-1	991311			Pa	<u>sge ک</u>
Sch	nedule A - Cost of Goods	Sold. Enter i	nethod of inve	entor	y valuation ▶						
1	Inventory at beginning of year	1		6	Inventory at end of y	ear		6			
2	Purchases	2		7	Cost of goods sold	. Subtrac	ot				
3	Cost of labor	3	-	1	line 6 from line 5 En						
4a	Additional sec 263A costs			1	ın Part I, line 2			7			
	(attach schedule)	4a		8	Do the rules of section	on 263A	(with respect to		1	Yes	No
b	- · · · · · · · · · · · · · · · · · · ·	4b		1	property produced or		, '				
5	(attach schedule) Total. Add lines 1 through 4b	5		1	to the organization?	2042	a (a, (a)a,a) app.,				
	nedule C – Rent Income (F		operty and P	erso		ased V	Vith Real Prope	rtv)			
	ee instructions)	Tom Real I	oponty and i	0.00	mai i roporty zo		······································	,,			
	scription of property				· -					-	
(1)	SPACE RENTAL							_			
		-					·				
(2)	···	-					-		·		
(3)											
(4)		2 Rent receive	d or accord						_		
	(1)	-	•		d company of the	<u>.</u>	3(a) Dodustinas	dirocti	v connected with the in	ncomo	
	(a) From personal property (if the percental for personal property is more than 10%	_			d personal property (if the or personal property exceeds				y connected with the in id 2(b) (attach schedul		
	more than 50%)	, but not	-		s based on profit or income)			-(-,		-,	
(1)		17,500	·-··					-			
(1)								-			
(2)		_									
(3)											_
⁽⁴⁾ Tota		17,500	Total				(b) Takal daduatian				
	otal income. Add totals of column						(b) Total deduction Enter here and on pa				
	and on page 1, Part I, line 6, colum		Linter		17	,500			•		
	nedule E – Unrelated Debt		come (see ins	truct					-		
			1				3 Deductions directly of	conne	cted with or allocable t	0	
			li li		s income from or		•		property		
	1 Description of debt-financed	d property	a		to debt-financed property	(a) S	Straight fine depreciation	Т	(b) Other dedu	ctions	
					p. 5p. 5. 1,	\	(attach schedule)		(attach sche		
(1)	N/A									-	
(2)			† "·						-		
(3)											
(4)											
-/	4 Amount of average 5	Average adjusted ba	ISIS		S Column				8 Allocable dec	fuctions	
	acquisition debt on or	of or allocable to	ŀ		4 divided	1	Bross income reportable		(column 6 x total o		s
	allocable to debt-financed property (attach schedule)	debt-financed proper (attach schedule)	9	b	y column 5	"	column 2 x column 6)		3(a) and 3(b))	
11)					%						
(1)		 -			%	1					
(2)		<u> </u>		-	%	1		\top	-		
(3)					%			+			
(4)			1			1	here and on page 1,	\dashv	Enter here and o	n page	· 1.
							I, line 7, column (A)		Part I, line 7, co		
Tota	le				•						
	is I dividends-received deductions	s included in col-	mn 8				-	_			-
. via	. 4.1.461143-16661464 46446110113	,	,. 0								

Schedule F – Interest, Annu	ities. Rovalti	es. and Rent	s From	Controlle	d Ord	ianizatio	ns (s	ee instruction	ons)	
				t Controlled						
1 Name of controlled		2 Employer			<u> </u>					
organization	ider	ntification number	3 Net unr	elated income	4 T	otal of specified		5 Part of column		6 Deductions directly
0.30//			(loss) (se	e instructions)	pa	yments made		included in the co	-	connected with income
							٥	organization's gros	s income	ın column 5
1) N/A										
		_				- "				
2)							$\overline{}$		_	
3)							-			·
4)										- ::
Nonexempt Controlled Organizat	ions					.,				
	1					10 Par	t of colu	mn 9 that is	1:	1 Deductions directly
7 Taxable Income		Net unrelated income		9 Total of specif		4		controlling		nnected with income in
7 Paxable Income	l (lo	oss) (see instructions)		payments mad	е			ross income		column 10
· · · · · · · · · · · · · · · · · · ·		_				 				
1)			-							
2)						ļ				
3)						<u> </u>				
(4)										
								5 and 10		dd columns 6 and 11
								on page 1 olumn (A)		ter here and on page 1, art I, line 8, column (B)
Totala										(-,
Totals			(7) (0)	(47) O-		otion /or	4	\\		
Schedule G – Investment In	come of a Se	ection 501(c)	(7), (9),	or (17) Or	ganız	ation (se	e inst	ructions)		
										
				3 De	ductions					5 Total deductions
1 Description of income		2 Amount of income		directly connected			4 Set-asides			and set-asides (col. 3
			(attach)	(attach schedule)		plus col 4)			
1) N/A										
		-			_					
2)				 	-					
3)								· · ·		
4)	-			-						
		Enter here and or	n page 1,						Er	nter here and on page 1,
		Part I, line 9, col	umn (A)						P	art I, line 9, column (B)
Totals	•			!						
Schedule I – Exploited Exen	npt Activity I	ncome. Othe	r Than	Advertisir	na Inc	ome (se	e instr	ructions)		
			1				•			
	2 Gross	3 Expens	ses	4 Net income (loss)					7 Excess exempt
	unrelated	directly		from unrelated		5 Gross II	ncome	6 Exp	enses	ехрелѕеѕ
1 Description of exploited activity	business income	connected		or business (co		from active	ty that			(column 6 minus
,	from trade or	production		2 minus column		is not unre		colur	ทก 5	column 5, but not
	business	unrelate business in	- 1	If a gain, comp cols 5 through		business ii	ncome			more than
		Casilloss III		cois 5 tiroogi	''					column 4)
1) N/A				_				-		
								-		
2)					+					-
3)			<u> </u>							
4)								<u> </u>		
	Enter here and or									Enter here and
	page 1, Part I, line 10, col (A)	page 1, Pa line 10, col								on page 1, Part II, line 26
Γotals ▶		,,,,,,	``							
Schedule J – Advertising In	come (see ins	tructions)	<u>-</u>		_					<u> </u>
<u> </u>			Conso	lidated Pa	eie					
Part I Income From P	eriouicais Re	eporteu on a	CONSO				_			T
	2 Gross			4 Advertisin						7 Excess readership costs (column 6
	advertising	3 Direc	et	gain or (loss) (2 minus col 3		5 Circula	ation	6 Read	dership	minus column 5, but
Name of periodical	income	advertising	costs	a gain, compl		incom	e	co	sts	not more than
!		İ		cals 5 through						column 4)
1) N/A										
					Ì					7
2)					F					7
3)					}	`				\dashv
4)					-+	•	_	_		
			1							
Totale (carpy to Part II Juno (6))		1	J					ı		L

41-1681317

Page 5

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.)

2 through 7 on a	<u>i line-by-line basi</u>	s)				
1 Name of penodical	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) N/A						
(2)				·		ļ
(3)						
(4)						
Totals from Part I						
	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 27
Totals, Part II (lines 1-5)						

Schedule K – Compensation of Officers, Direct	ctors, and Trustees (see instructions)
---	--

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1) N/A		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1 Part II line 14		•	1

Form **990-T** (2018)

Federal Statements

Statement 1 - Form 990-T, Part II, Line 18 - Interest

Description	Amount	
MORTGAGE INTEREST	\$7	20
Total	\$7	20

Statement 2 - Form 990-T, Part II, Line 28 - Other Deductions

Description		Amount
FOOD KITCHEN & FARM SUPPLIES	\$	31,456 4,773
Total	\$	36,229