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Form 990-T (2019)

Unrelated business taxable income. Subtract line 30 from line 29

923701 01-27-20 LHA For Paperwork Reduction Act Notice, see instructions.

		GATEWAY REGION YOUNG MEN'S CHRISTIAN ASSOCIATION	1	43-	·0653616 Page 2
Part	רן און	Total Unrelated Business Taxable Income			
32 🎉	Total of	unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	i	32	79,864.
⋅ 33 ິ	Amount	s paid for disallowed fringes		33	
34	Charitat	ole contributions (see instructions for limitation rules)		34	0.
		related business taxable income before pre-2018 NOLs and specific deduction Subtract line 34 from the sum of	lines 32 and 33 5	35	79,864.
		on for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)		36	
		unrelated business taxable income before specific deduction. Subtract line 36 from line 35	7	37	79,864.
		deduction (Generally \$1,000, but see line 38 instructions for exceptions)	ġ	38	1,000.
	-	ed business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,		17	
		e smaller of zero or line 37	11	39	78,86 4.
		Tax Computation		1 33 1	7070011
	7		•	40	16,561.
	-	ations Taxable as Corporations. Multiply line 39 by 21% (0.21)		1 10 1	10,301.
41		Taxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 39 from:	_	41	
		x rate schedule or Schedule D (Form 1041)			·
	-	ix. See instructions		42	
		ive minimum tax (trusts only)		43	
		Noncompliant Facility Income. See instructions	-	44	46 564
_		dd lines 42, 43, and 44 to line 40 or 41, whichever applies	<u>1</u>	45	16,561.
Part	<u>y </u>	Tax and Payments			
46 a	Foreign	tax credit (corporations attach Form 1118; trusts attach Form 1116)		4 11	
b	Other co	edits (see instructions) 46b		1 []	
C	General	business credit. Attach Form 3800		1 11	
d	Credit fo	business credit. Attach Form 3800 or prior year minimum tax (attach Form 8801 or 8827) 46c 46d			
е	Total cr	edits. Add lines 46a through 46d		46e	
47	Subtrac	t line 46e from line 45		47	16,561.
48	Other ta	xes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other	(attach schedule)	48/	
49	Total ta	x Add lines 47 and 48 (see instructions)	4	49	16,561.
		it 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3		50	0.
		ts: A 2018 overpayment credited to 2019	4,421.		
	-	timated tax payments 6 b 51b	4,421. 3,979.	1 11	
		osited with Form 8868		1 11	
	•	organizations; Tax paid or withheld at source (see instructions)		1 11	
	_	withholding (see instructions) 51e		1 11	
_	•	, , , , , , , , , , , , , , , , , , ,		1 / [
				.	
g-		redits, adjustments, and payments: - Form 2439		1 / 1	
		orm 4136 Other Total ▶ 51		╃╌┋╌┦	0 400
		syments. Add lines 51a through 51g	8	52	8,400.
		ed tax penalty (see instructions). Check if Form 2220 is attached	. 0	 	297.
		. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	▶ 1	54	8,458.
		ment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	•	55	
			funded >	56	
Part	VI :	Statements Regarding Certain Activities and Other Information (see Instru	ctions)	<u> </u>	
57	At any t	ime during the 2019 calendar year, did the organization have an interest in or a signature or other authority			Yes No
		nancial 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	>			X
58	During	the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign	gn trust?		X
		see instructions for other forms the organization may have to file.			
		e amount of tax-exempt interest received or accrued during the tax year 🕒 \$			
	Ur	der penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the		dge and be	lief, it is true,
Sign	СО	rrect; and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge SR VP OF FINAN	CK =		
Here		SUM Aby 6/18/200 \ AND CFO	N	-	discuss this return with shown below (see
		Signature of officer Date Title			X Yes No
		Print/Type preparer's name Preparer's signature Date		f PTIN	1221.00 100
_		Frankryke highard 2 manie Frankra 2 signature Date		" 「	
Paid		TAMES R. RITTS Dans 17 Ptg	self- employed	50	0362910
Prep		DIMINED IC. ICITIES 100 10	F F N		-0765316
Use	Only	Firm's name ► RUBINBROWN LLE	Firm's EIN	43	-0103310
		ONE NORTH BRENTWOOD	, ,	2141	200 2200
		Firm's address ► SAINT LOUIS, MO 63105	Phone no. (314)	
	1-27-20				Form 990-T (2019)

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Form 990-T (2019) CHRISTIAN ASSOCIATION

Schedule A - Cost of Good	e Sold Fater	mathed of inver	atony voluntion N / 7						
	Sold. Enter	method of inver							
1 Inventory at beginning of year		6 Inventory at end of year			6				
	Purchases 2			7 Cost of goods sold. Subtract line 6					
3 Cost of labor				from line 5. Enter here and in Part I,					
4 a Additional section 263A costs	4.		8 Do the rules of section	263A (with reened	to.		Yes	No	
(attach schedule)	4a		property produced or	•			 		
b Other costs (attach schedule)	4b 5		the organization?	acquired for resale)	арріу і				
5 Total Add lines 1 through 4b Schedule C - Rent Income		Property and	l Personal Property I	eased With F	Real Prope	rtv)	<u> </u>		
(see instructions)	(i rom near	roperty une	i i ci con ai i i oporty :		.ош торо	· · · · ·			
Description of property		_	3,0-3						
(1) CELL TOWER RENTA	L INCOME	- EMERS	ON BRANCH		4.				
(2) CELL TOWER RENTA	L INCOME	- OZARK	BRANCH						
(3)			·						
(4)	•			 r					
() Farm are and are artified the re-		ed or accrued	and personal property (if the percent	3(a) De	3(a) Deductions directly connected with the income in				
(a) From personal property (if the personal property is more 10% but not more than 50%	re than	of rent for	personal property exceeds 50% or if nt is based on profit or income)	columns 2(a) and	2(b) (attach sched	ule)			
(1)	·			12,240.					
(2)			32,088.						
(3)									
(4)									
Total	0.	Total	44,3		1 - 4				
(c) Total income. Add totals of columns		ter	44.2	Enter here a	leductions. nd on page 1,			0	
here and on page 1, Part I, line 6, column Schedule E - Unrelated De		Income (see	instructions)	328 • Part I, line 6	, column (B)	<u> </u>		0.	
Scriedule L - Officialed De	Dt-i manced	meome (see	Tinstructions)	3 Deducti	ons directly conne	cted with or alloca	ble		
			2. Gross income from	0	d property				
Description of debt-financed property			or allocable to debt- financed property	(a) Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)		ì	
				,	,	,	,		
(1)						·			
(2)	W4								
(3)		-				<u> </u>			
(4)									
debt on or allocable to debt-financed of or all property (attach schedule) debt-finan		adjusted basis allocable to nced property h schedule)	able to by cotumn 5 d property		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)			%						
									
				Enter here and	on page 1,	Enter here an	d on page	11,	
				Enter here and Part I, line 7, c		Enter here an Part I, line 7,			
Totals			•						

Form 990-T (2019)

43-0653616 Form 990-T (2019) CHRISTIAN ASSOCIATION Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions) **Exempt Controlled Organizations** 3 Net unrelated income 4. Total of specified 5 Part of column 4 that is 6. Deductions directly 2 Employer 1. Name of controlled organization payments made identification (loss) (see instructions) included in the controlling connected with income in column 5 number organization's gross income _(1) (2) (3) (4) Nonexempt Controlled Organizations 10. Part of column 9 that is included 9 Total of specified payments 11 Deductions directly connected 7. Taxable Income Net unrelated income (loss) in the controlling organization's gross income (see instructions) with income in column 10 (1) (2) (3) (4) Add columns 5 and 10 Add columns 6 and 11 Enter here and on page 1, Part I, Enter here and on page 1, Part I, tine 8, column (A) line 8, column (B) 0 0. Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions) 3. Deductions 5. Total deductions 1. Description of income 2. Amount of income directly connected (attach schedule) (attach schedule) (col 3 plus col 4) (1) (2)(3) (4) Enter here and on page 1. Enter here and on page Part I, line 9, column (A) Part I, line 9, column (B) 0. Totals Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) 4. Net income (loss) 3. Expenses 7. Excess exempt 2. Gross m unrelated trade or 5. Gross income directly connected 6 Expenses expenses (column business (column 2 from activity that 1 Description of unrelated business attributable to 6 minus column 5. with production exploited activity income from minus column 3) If a is not unrelated column 5 but not more than of unrelated gain, compute cols 5 trade or business column 4) business income through 7 (1) (2)(3) (4) Enter here and Enter here and on Enter here and on page 1, Part I, line 10, col (A) page 1, Part I, line 10, col (B) on page 1, Part II, line 25 0 Totals Schedule J - Advertising Income (see instructions) Part I Income From Periodicals Reported on a Consolidated Basis 4. Advertising gain 7. Excess readership 2. Gross 5. Circulation 6. Readership costs (column 6 minus 3. Direct or (loss) (col. 2 minus advertising col 3) If a gain, compute cols 5 through 7 1 Name of periodical costs column 5, but not more advertising costs ıncome than column 4) (1) (2)(3) (4)

Form 990-T (2019)

0.

0.

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

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990T for instructions and the latest information.

Open to Public Inspection for Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). 501(c)(3) Organizations Only

ENTITY

Name of the organization

GATEWAY REGION YOUNG MEN'S CHRISTIAN ASSOCIATION

Employer identification number

43-0653616

Unrelated Business Activity Code (see instructions)

	Describe the unrelated trade or business TIMBER SA	<u>LES</u>			
Part I Unrelated Trade or Business Income			(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales 35,536.				
b	Less returns and allowances c Balance ▶	1c	35,536.		
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit Subtract line 2 from line 1c	3	35,536.		35,536.
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)				
	organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10		,	
11	Advertising income (Schedule J)	11		<u></u>	
12	Other income (See instructions, attach schedule)	12			
13	Total. Combine lines 3 through 12	13	35,536.		35,536.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (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) (see instructions)	18	
Taxes and licenses	19	
Depreciation (attach Form 4562)		
Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	
Depletion	22	
Contributions to deferred compensation plans	23	
Employee benefit programs	24	
Excess exempt expenses (Schedule I)	25	
Excess readership costs (Schedule J)	26	
Other deductions (attach schedule)	27	
Total deductions. Add lines 14 through 27	28	0.
Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	35,536.
Deduction for net operating loss ansing in tax years beginning on or after January 1, 2018 (see		
instructions)	30	0.
Unrelated business taxable income Subtract line 30 from line 29	31	35,536.
	Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on return Depletion Contributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I) Excess readership costs (Schedule J) Other deductions (attach schedule) Total deductions. Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 Deduction for net operating loss ansing in tax years beginning on or after January 1, 2018 (see instructions)	Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) Taxes and licenses Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on return Depletion Contributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I) Excess readership costs (Schedule J) Other deductions (attach schedule) Total deductions. Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 Deduction for net operating loss ansing in tax years beginning on or after January 1, 2018 (see instructions)

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

CHRISTIAN			,		43-0653	616	'	ayo t
Schedule A - Cost of Goods	Sold. Enter	method of invent	ory valuation > N/A					
1 Inventory at beginning of year	1		6 Inventory at end of year	3r 		6		
2 Purchases	2		7 Cost of goods sold. S					
3 Cost of labor	3		from line 5. Enter here					
4a Additional section 263A costs			line 2	7				
(attach schedule)	4a		8 Do the rules of section	vith respect to	Ľ	Yes	No	
b Other costs (attach schedule)	4b		property produced or	property produced or acquired for resale) apply to				
5 Total Add lines 1 through 4b	5		the organization?			X		
Schedule C - Rent Income (From Real	Property and	Personal Property L	_ease	d With Real Prope	rty)		
(see instructions)								
Description of property								
(1)								
(2)		 						
(3)			<u></u>					
(4)								
<u> </u>		ed or accrued			3(a) Deductions directly of	onnected with the inco	me in	
(a) From personal property (if the perconent for personal property is more 10% but not more than 50%)	centage of than	of rent for pe	nd personal property (if the percenta ersonal property exceeds 50% or if is based on profit or income)	columns 2(a) and	2(b) (attach schedule)			
(1)	,							
(2)								
(3)								
(4)								
Total	′0.	Total		0.				
(c) Total income Add totals of columns		ter			(b) Total deductions. Enter here and on page 1,			
here and on page 1, Part I, line 6, column		>		0.	Part I, line 6, column (B)	<u> </u>		0.
Schedule E - Unrelated Deb	t-Financed	Income (see i	nstructions)					
			2. Gross income from		3 Deductions directly conne to debt-financed			
1. Description of debt-financed property			or allocable to debt-	(a) Straight line depreciation		(b) Other deduction		
			financed property		(attach schedule)	(attach schedule)		
(1)								
(2)				-	-			
(3)				├				
(4)								
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 5 Average adjust of or allocate debt-financed debt-financed (attach schedule)		allocable to nced property	by column 5 repo		7. Gross income reportable (column 2 x column 6)	8 , Allocable de (column 6 x total 3(a) and 3	of colu	
(1)			%					
(2)			%					
(3)			%					
(4)			%					
					nter here and on page 1, art I, line 7, column (A)	Enter here and or Part I, line 7, coli		

Form 990-T (2019)

Totals

Total dividends-received deductions included in column 8