Form **990-T** (2018)

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823701 01-09-19 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-	I (2018) MASTERY SCHOOLS OF CAMDEN INC	C	46-515848	Page 2
Part i				
33	Total of unrelated business taxable income computed from all unrelated tra	des or businesses (see instructions)	33	0.
34	Amounts paid for disallowed fringes			
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)			
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of			
	lines 33 and 34	act line 55 ir oin the 3am of	26	
37		tions)	$\frac{36}{37}$	1,000.
38	Specific deduction (Generally \$1,000, but see line 37 instructions for excep		7 0 3	1,000.
30	Unrelated business taxable income. Subtract line 37 from line 36. If line 3 enter the smaller of zero or line 36	7 is greater than tine 30,		0.
enter the smaller of zero or line 36 38 0. Part IV. Tax Computation				
			—	0
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)		39	0.
40	Trusts Taxable at Trust Rates See instructions for tax computation. Incom	ne tax on the amount on line 38 from:		
	Tax rate schedule or Schedule D (Form 1041)		40	
41	Proxy tax. See instructions		► 41	-
42	Alternative minimum tax (trusts only)		42 43	-
43	Tax on Noncompliant Facility Income. See instructions			
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies		44	<u> </u>
	Tax and Payments		Townships (
45 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116			
b	Other credits (see instructions)	45b	 	
C	General business credit. Attach Form 3800	45c		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d		
е	Total credits. Add lines 45a through 45d		45e	· -
·, 46	Subtract line 45e from line 44		46	<u> </u>
- 47	Other taxes. Check if from: Form 4255 Form 8611 Form	8697 Form 8866 Other (attach schedule) 47	
- 48	Total tax Add lines 46 and 47 (see instructions)		_48	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, colu		49	0.
′ 50 a	Payments: A 2017 overpayment credited to 2018	50a		
' - b	2018 estimated tax payments	5 0 b		
C	Tax deposited with Form 8868	50 500	1,250.	
: + d	Foreign organizations: Tax paid or withheld at source (see instructions)	\$04		
٠, e	Backup withholding (see instructions)	50e		
S f	Credit for small employer health insurance premiums (attach Form 8941)	Sof		
· g	Other credits, adjustments, and payments: Form 2439			
	Form 4136 Other	Total ▶ 50g		
\$1	Total payments. Add lines 50a through 50g		51	1,250.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached	. 🔲	52	
\$3	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amoun		→ 53	
54	Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter	amount overpaid	55 ▶ 54	1,250.
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax	i _	funded > 55	1,250.
Part VI Statements Regarding Certain Activities and Other Information (see instructions)				
56	At any time during the 2018 calendar year, did the organization have an inte	rest in or a signature or other authorit	ty '	Yes No
	over a financial account (bank, securities, or other) in a foreign country? If	-	•	
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," (
	here ▶	,		X
57	During the tax year, did the organization receive a distribution from, or was	it the grantor of, or transferor to, a for	eign trust?	X
٠,	If "Yes," see instructions for other forms the organization may have to file.		g	****
58	Enter the amount of tax-exempt interest received or accrued during the tax	vear ▶ \$		
	Under penalties of perjury, I declare that I have examined this return, including accom-	panying schedules and statements, and to t		id belief, it is true,
Sign	correct and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge SCHOOL BUSINESS			
Here	3 18 July ADMINISTRATOR			discuss this return with shown below (see
	Signature of officer Date	Title	instructions	
	Print/Type preparer's name Preparer's signature	Date	Check If PTIN	
ъ	BRUCE BRAUNEWELL, BRUCE BRAUN	j j	self- employed	•
Paid	GD3	03/04/20		00075336
Prepa	S - CI TEMONI AD CONSTITUTE	03/04/20		1-0746749
Use C	Only 610 W. GERMANTOWN PIK	KE, STE. 400	THREE T	L U/4U/43
		19462	Phone no. $215-6$	5 <u>43</u> -3900 _
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