

AMENDED RETURN - SECTION 512(A)(7) REPEAL

Form 990-T

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

OMB No. 1545-0687

2018

For calendar year 2018 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).

Department of the Treasury Internal Revenue Service

A Check box if address changed

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

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

B Exempt under section 501(c)(3) 408(e) 220(e) 408A 530(a) 529(a)

Print or Type

MIDWEST HOUSING EQUITY GROUP, INC.

47-0767984

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

515 N 162ND AVE, NO. 202

E Unrelated business activity code (See instructions.)

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

OMAHA, NE 68118

C Book value of all assets at end of year 46,501,589.

F. Group exemption number (See instructions.)

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

H Enter the number of the organization's unrelated trades or businesses. 1 Describe the only (or first) unrelated trade or business here NONE; QUALIFIED FRINGE BENEFITS

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

J The books are in care of JASON MAIN Telephone number 402-334-8899

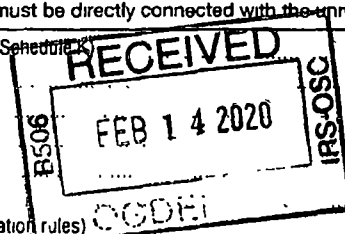
Part I Unrelated Trade or Business Income

Table with 4 columns: (A) Income, (B) Expenses, (C) Net, and a description column. Rows 1-13 include items like Gross receipts or sales, Cost of goods sold, and Total.

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.)

Table with 4 columns: (A) Income, (B) Expenses, (C) Net, and a description column. Rows 14-32 include items like Compensation of officers, Charitable contributions, and Unrelated business taxable income.



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Part III Total Unrelated Business Taxable Income

Table with 2 columns: Description and Amount. Rows include: 33 Total of unrelated business taxable income... 34 Amounts paid for disallowed fringes... 35 Deduction for net operating loss... 36 Total of unrelated business taxable income before specific deduction... 37 Specific deduction... 38 Unrelated business taxable income.

Part IV Tax Computation

Table with 2 columns: Description and Amount. Rows include: 39 Organizations Taxable as Corporations... 40 Trusts Taxable at Trust Rates... 41 Proxy tax... 42 Alternative minimum tax... 43 Tax on Noncompliant Facility Income... 44 Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies.

Part V Tax and Payments

Table with 2 columns: Description and Amount. Rows include: 45a Foreign tax credit... 46 Subtract line 45e from line 44... 47 Other taxes... 48 Total tax... 49 2018 net 965 tax liability... 50a Payments: 2017 overpayment... 50b 2018 estimated tax payments... 50c Tax deposited with Form 8868... 50d Foreign organizations... 50e Backup withholding... 50f Credit for small employer health insurance... 50g Other credits, adjustments, and payments... 51 Total payments... 52 Estimated tax penalty... 53 Tax due... 54 Overpayment... 55 Enter the amount of line 54 you want: Credited to 2019 estimated tax / Refunded.

Part VI Statements Regarding Certain Activities and Other Information

Table with 2 columns: Question and Yes/No. Rows include: 56 At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account... 57 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?... 58 Enter the amount of tax-exempt interest received or accrued during the tax year.

Sign Here: 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: [Signature] Date: 12/5/2020 Title: CFO

Preparer information section: Print/Type preparer's name: ELLEN WILDE; Preparer's signature: Ellen Wilde; Date: 2-20-20; Check self-employed; PTIN: P01254265; Firm's name: DAUBY O'CONNOR & ZALESKI, LLC; Firm's address: 501 CONGRESSIONAL BLVD #300, CARMEL, IN 46032; Firm's EIN: 35-1750664; Phone no.: (317) 848-5700.

MIDWEST HOUSING EQUITY GROUP, INC.

47-0767984

FORM 990-T

OTHER CREDITS AND PAYMENTS

STATEMENT 1

DESCRIPTION

AMOUNT

REFUND OF TAX PAID FOR QUALIFIED FRINGE BENEFITS

978.

TOTAL INCLUDED ON FORM 990-T, PAGE 2, PART V, LINE 50G

978.