~	en e										
	Exempt Organization Business Income Tax Retu							ırn	n OMB No 1545		
Form	(and proxy tax under section 6033(e))										
		For calendar year 2019 or other tax year beginning, 2019, and ending, 20								.	
Depart	ment of the Treasury		► Go to www.irs.go						12	Open to Bub	is inspection for
Interna	Revenue Service	▶ 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		
A [Check box if address changed		Name of organization (Check bo	ox if nar	me changed and see	instruction	s)		oyer identifica oyees' trust, see ii	
\neg	F Unrelated business ac									activity code	
-	408(e) 220(e) Type 16415 ADDISON ROAD 200										
	529(a) City or town, state or province, country, and ZIP or foreign postal code										
	C Book value of all assets ADDISON, TX 75001										
at e	nd of year	F Gro	up exemption number ((See instruct	ions)	<u> </u>	_				
1	7,571,807.	G Che	ck organization type	X 501	(c) co	rporation	501(c	trust	401(a)	trust	Other trust
H En	iter the number of	the orga	nization's unrelated trad	les or busine	sses			Descri	be the only	(or first) unre	elated
	ide or business her						•	complete Parts			escribe the
fire	st in the blank spa	ice at the	end of the previous se	entence, cor	mplete	Parts I and II, com	plete a S	chedule M for e	ach addition	nal	
	ide or business, th										Yes X No
			corporation a subsidiar				bsidiary o	controlled group	·	▶⊔	Yes X No
			identifying number of t IBER E KINNEY,				Telenhor	e number 🕨 (214)217	7-2600	 -
			or Business Incom			(A) Incom		(B) Expe) Net
1a	Gross receipts or					(, ,		(=, =:-			
	Less returns and allowa			c Balance	1 c						
2			ule A, line 7)	, 	2						i
3	-	•	2 from line 1c		3						
4 a	Capital gain net income (attach Schedule D) 4a										
b										ļ	
c	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)							_			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)				9 10						
10 11	Exploited exempt activity income (Schedule I)				11						
12	Advertising income (Schedule J)			12							
13		-	ough 12		13		0.				
Par		ns Not	Taken Elsewhere	(See inştı	ructio	ons for limitatio	ns on c	leductions.)	(Deducti	ons must l	oe directly
			ne unrelated busin	\sim							
14			directors, and trustees	Schedule K)			REF	SE TIVE	<u> 14</u>		
15	Salaries and wage	es	$\sim \mathcal{O}(1)$			· · · · · · _ f			NE		
16	Repairs and main Bad debts	tenance		<i>.</i>		B640	EXI III	AVG 1 8 20	120		
17							J. 199	. .	8	1	
18			(see instructions)				1	COLNI		<u> </u>	
19	Depresenting (att	S	4562)		• • •	· · · · · · · <u>[-]</u>		MEC, ENT	U 19	<u> </u>	
20 21			on Schedule A and els						21b	-	
22	· · · · · · · · · · · · · · · · · · ·					· · · · · · · · · · · · · · · · · · ·			1		<u> </u>
23											
24	Contributions to deferred compensation plans										
25	Excess exempt expenses (Schedule I)										
26	Excess readership costs (Schedule J)							1			
27	Other deductions	(attach s	schedule)						27	ļ	
28			s 14 through 27								
29			ole income before ne	-						ļ	
30		•	g loss arising in tax ye	-						ļ	
31			e income Subtract line		29 .	<u> </u>	<u></u>		31		990-T (2019)

	PARTNERSHIP WITH NATIVE AMERICANS	47-3730147 Pa	age 2
Par	200-1 (2010)	1, 0,0021, 10	
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	1	
-	instructions)	32	
33	Amounts paid for disallowed fringes	33	
34	Charitable contributions (see instructions for limitation rules)	34	
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction Subtract line		
	34 from the sum of lines 32 and 33	35	0.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		
	instructions)	36	
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35,	37	00
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38 1,0	00.
39	Unrelated business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37,	39	0.
Par	enter the smaller of zero or line 37	T	
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0 21)	40	
41	Trusts Taxable at Trust Rates. See instructions for tax computation income tax on		
٠.	the amount on line 39 from Tax rate schedule or Schedule D (Form 1041)	41	
42	Proxy tax See instructions	42	
43	Alternative minimum tax (trusts only)	43	
44	Tax on Noncompliant Facility Income. See instructions	44	
<u>45</u>	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	
Par	t V Tax and Payments	_	
46 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)		
	Other credits (see instructions)		
	General business credit Attach Form 3800 (see instructions)		
	Credit for prior year minimum tax (attach Form 8801 or 8827)	46e	
47	Total credits. Add lines 46a through 46d	47	
48	Subtract line 46e from line 45	48	
49	Total tax. Add lines 47 and 48 (see instructions)	49	0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	
-	Payments A 2018 overpayment credited to 2019		
	2019 estimated tax payments		
C	Tax deposited with Form 8868,		
	Foreign organizations Tax paid or withheld at source (see instructions)		
	Backup withholding (see instructions)		
f	Credit for small employer health insurance premiums (attach Form 8941)		
g	Other credits, adjustments, and payments Form 2439		
	Form 4136 Other Total ▶ 51g	52	
52	Total payments. Add lines 51a through 51g	53	
53 54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	
56	Enter the amount of line 55 you want Credited to 2020 estimated tax Refunded	56	
	Statements Regarding Certain Activities and Other Information (see instructions	s)	
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or	other authority Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the		
	here ▶		<u>X</u>
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?	
	If "Yes," see instructions for other forms the organization may have to file		
<u>59</u>	Enter the amount of tax-exempt interest received or accrued during the tax year > \$ Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the b	est of my knowledge and belief	f, it is
Sigr	true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge		_
Her		y the IRS discuss this re h the preparer shown be	
		e instructions)? X Yes	No
		PTIN	
Paid	JEANETTE VERRELLI (Dauette Veneth) 0//28/2020 self-e	mployed P00742631	L
•	Firm's name BKD, LLP	EIN > 44-0160260	
use 	Only Firm's address ▶ 14241 DALLAS PARKWAY, SUITE 1100, DALLAS, TX 75254 Phone	eno 972-702-8262	
JSA 741 1 0		Form 990-T (2	
_	0401DV K920 6/22/2020 9:43:38 AM	PAGI	E 56

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Total dividends-received deductions included in column 8

Form 990-T (2019)	PARTNERS	HIP W	ITH	NATIVE AME	RICAN	S		4	7-3	730147 Page 4	
Schedule F - Interest, Ann	uities, Royalties	, and F	Rents	From Contro	lled O	rganizat	i ons (se	e instructio	ons)		
		E	xemp	t Controlled Or	ganızatı	ons					
Name of controlled organization	2. Employer identification number					of specified ents made	· Included in the control			lling connected with income	
(1)	·										
(2)											
(3)											
(4)											
Nonexempt Controlled Organiz	zations										
7 Taxable Income	8. Net unrelated income (loss) (see instructions)		9 Total of specified payments made			10 Part of column 9 that is included in the controlling organization's gross income			11 Deductions directly connected with income in column 10		
(1)											
(2)											
(3)											
(4)											
Tatala						Enter	columns 5 a nere and on , line 8, colu	page 1,	Ent	ld columns 6 and 11 er here and on page 1, rt I, line 8, column (B)	
Schedule G-Investment In	come of a Sec	tion 50	01(c)	(7) (9) or (17	Orga	nization	(see ins	tructions)			
1. Description of income	2. Amount of		3.1(3)	3 Deductions directly connected (attach schedule)			4. Set-asides (attach schedule)			5 Total deductions and set-asides (col 3 plus col 4)	
(1)				(0.1.00)							
(2)											
(3)											
(4)										· -	
	Enter here and on page Part I, line 9, column (Enter here and on page Part I, line 9, column (B		
Totals ▶	<u> </u>										
Schedule I-Exploited Exe	mpt Activity Inc	come, (Other	Than Advert	ising Ir	come (s	see instru	ictions)			
1. Description of exploited activity	2 Gross unrelated business income from trade or business	3. Expenses directly connected w production unrelated business inco		If a gain, compute		5. Gross income from activity that is not unrelated business income		6 Expenses attributable to column 5		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)											
(2)				· -							
(3)											
(4)											
Enter here and on page 1, Part I, page 10, col (A)		page 1	er here and on age 1, Part I, e 10, col (B)							Enter here and on page 1, Part II, line 25	
Totals ▶ Schedule J-Advertising Ir	icome (see instri	ictions)									
Part I Income From Per			Con	solidated Bas	sis						
arti income i fom i ci		<u> </u>								Τ	
1 Name of periodical	2. Gross advertising income	3 Direct advertising co		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)											
Totals (carry to Part II, line (5))										Form 990-T (2019)	

(4)

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

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns Part II 2 through 7 on a line-by-line basis) 7. Excess readership costs (column 6 4 Advertising 2 Gross gain or (loss) (col 3 Direct 5 Circulation 6 Readership 2 minus col 3) If minus column 5, but 1 Name of periodical advertising advertising costs ıncome costs a gain, compute not more than income cols 5 through 7 column 4) (1) (2) (3) (4) Totals from Part I. Enter here and on Enter here and on Enter here and page 1, Part I, page 1, Part I, on page 1, line 11, col (A) line 11, col (B) Part II, line 26 Totals, Part II (lines 1-5) ▶ Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

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

Form 990-T (2019)

%

ATTACHMENT 1

THE TAXPAYER DOES NOT HAVE ANY ACTIVITIES GENERATING UNRELATED BUSINESS TAXABLE INCOME (AS DEFINED IN IRC \$512(A)) IN THE CURRENT YEAR. FORM 990-T IS BEING FILED TO COMMENCE RUNNING ON THE PERIOD UNDER THE STATUTES OF LIMITATION FOR REPORTING UNRELATED BUSINESS INCOME.