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For Paperwork Reduction Act Notice, see instructions.

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Par	t III, Total Unrelated Business Taxable Income				
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see				
	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			
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38			
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	33			
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0 21)	40			
41					
+ 1	Trusts Taxable at Trust Rates. See instructions for tax computation Income tax on	44			
40	the amount on line 39 from Tax rate schedule or Schedule D (Form 1041),	41			
42	Proxy tax. See instructions	42			
	Alternative minimum tax (trusts only)	43			
	Tax on Noncompliant Facility Income. See Instructions				
	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45			
Par		· ·			
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 46a				
	Other credits (see instructions),				
	General business credit Attach Form 3800 (see instructions)				
d	Credit for prior year minimum tax (attach Form 8801 or 8827)				
е	Total credits. Add lines 46a through 46d	46e			
47	Subtract line 46e from line 45	47			
48	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule).	48			
19	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			
51a	Payments A 2018 overpayment credited to 2019				
	2019 estimated tax payments				
	Tax deposited with Form 8868				
	Foreign organizations Tax paid or withheld at source (see instructions) 51d				
	Backup withholding (see instructions)				
	Credit for small employer health insurance premiums (attach Form 8941) 51f				
	Other credits, adjustments, and payments Form 2439				
9	Form 4136 Other Total ▶ 51g				
52	Total payments. Add lines 51a through 51g	52		12,	165
	Estimated tax penalty (see instructions) Check if Form 2220 is attached	53			
53 - 4		54		-	
54 	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	\rightarrow		12,	165
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55		12,	
56	Enter the amount of line 55 you want Credited to 2020 estimated tax	56		12,	105
Par				T Vaa	No
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or			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	foreigr	1 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 trus	t?	<u> </u>	Х
	If "Yes," see instructions for other forms the organization may have to file				
59	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$				
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the bitrue, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	est of m	ny knowledge	and bel	ief it
Sigr	Ma	v the	IRS discuss	this	retum
Here	e PERIC ANGEL 08/14/2020 EXECUTIVE DIRECTOR with	•	preparer si		
	Signature of officer Date Title (se	e instructi	ions)?XY	98	No
	Print/Type preparer's name Preparer's signature Date Check	, T.	PTIN		
Paid	BRIAN W DOW, CPA 2 self-e	mployed			
	Firm's name SARFINO AND RHOADES, LLP		52-096	165	7
Use	Only Firm's address 11921 ROCKVILLE PIKE, SUITE 501, NORTH BETHESDA, MD 20852-2794 Phone	e no 3	01-770-	5500)
JSA			Form 9		
41 1 00					GE .
., 100	70493S C021 V 19-6.3F 45115			PA	GE

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Enter here and on page 1,

Part I, line 7, column (B)

(3)

(4)

Total dividends-received deductions included in column 8

%

%

Enter here and on page 1,

Part I, line 7, column (A)

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Schedule F - Interest, Ann	unies, Noyanie			ntrolled Org			zations (s	ee mstructi	10115)		
, 1 Name of controlled organization	2 Employer identification numb	iei	et unrelated income s) (see instructions)		4 Total of specified payments made		ified include	5 Part of column 4 th included in the control organization's gross in		6 Deductions directly connected with income in column 5	
(1)				•							
(2)											
(3)										ļ	
(4)										L	
Nonexempt Controlled Organia	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)		<u></u>					dd columns 5		 	dd columns 6 and 11	
Totals	ncome of a Sec	 ction 501(d	: : : c)(7),	(9), or (17		Pa		umn (A)		ter here and on page 1, art I, line 8, column (B) 5 Total deductions	
1. Description of income	2. Amount of	income		directly con (attach sch	nected	ected 4. Set-asides				and set-asides (col 3 plus col 4)	
<u>(1)</u>			+								
(2)			+				-:-				
(3) (4)			+								
Totals ▶ Schedule I – Exploited Exe	Enter here and on page 1, Part I, line 9, column (A)		er Tha	Than Advertising Ir			ncome (see instructions)			Enter here and on page 1 Part I, line 9, column (B)	
Description of exploited activity	2 Gross unrelated business income from trade or business	3. Expens directly connected production unrelate business ind	city or business (column title are trade or business (column title are trade) or busi		Gross income a activity that not unrelated iness income	6 Expenses attributable to column 5		attributable to		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)			• •							-	
(2)											
(3)								 			
(4)											
Totals ▶	Enter here and on page 1, Part I, line 10, col (A)	Enter here a page 1, Pa line 10, col	irt I,					Enter here and on page 1, Part II, line 25			
Schedule J- Advertising In Part I Income From Per			onsoli	dated Bas	is		_				
1. Name of periodical	2 Gross 3. D		4. Advertigan or (los 2 minus coasts a gain, co cols 5 three		s) (col 5 Circulation income npute			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	

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

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) 4. Advertising 7. Excess readership costs (column 6 gain or (loss) (col 2. Gross 3. Direct 5. Circulation 6. Readership minus column 5, but 1. Name of periodical advertising 2 minus col 3) If advertising costs income 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, on page 1, page 1, Part I, Part II. line 26 line 11, col (A) line 11, col (B) Totals, Part II (lines 1-5) ▶ Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3 Percent of 4. Compensation attributable to 1 Name 2. Title time devoted to unrelated business business (1) (2) % (3) % (4) %

Form 990-T (2019)

ATTACHMENT 1

ORGANIZATION'S ONLY UNRELATED TRADE OR BUSINESS ACTIVITY

QUALIFIED TRANSPORTATION FRINGE REPEALED IN 2018 - REQUESTING REFUND OF ESTIMATED TAXES PAID