

Form **990-T**

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

2018

Department of the Treasury
Internal Revenue Service

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)(1).

Open to Public Inspection for 501(c)(3) Organizations Only

A Check box if address changed

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

C Book value of all assets at end of year
23,160,241

Name of organization (Check box if name changed and see instructions)
ASHEVILLE-BUNCOMBE COMMUNITY CHRISTIAN MINISTRY, INC.

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

City or town, state or province, country, and ZIP or foreign postal code
ASHEVILLE NC 28806

F Group exemption number (See instructions) ▶

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

D Employer identification number (Employees' trust, see instructions)
56-0945001

E Unrelated business activity code (See instructions)
721310 | 722320

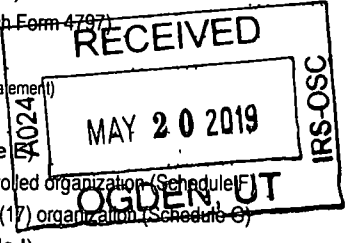
H Enter the number of the organization's unrelated trades or businesses ▶ **3** Describe the only (or first) unrelated trade or business here
▶ **SEE STATEMENT 1** If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete Schedule M for each additional trade or business, then complete Parts III-V

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
If "Yes," enter the name and identifying number of the parent corporation

J The books are in care of ▶ **SCOTT ROGERS** Telephone number ▶ **828-259-5300**

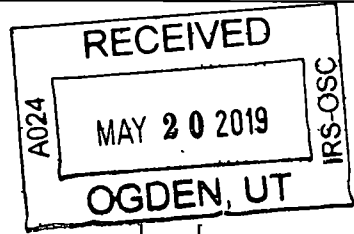
Part I Unrelated Trade or Business Income

	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales 4,511			
b Less returns and allowances			
c Balance ▶	4,511		
Cost of goods sold (Schedule A, line 7)	3,058		
Gross profit Subtract line 2 from line 1c	1,453		1,453
4a Capital gain net income (attach Schedule D)			
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
c Capital loss deduction for trusts			
5 Income (loss) from partnership and S corporation (attach statement)			
6 Rent income (Schedule C)			
7 Unrelated debt-financed income (Schedule E)			
8 Interest, annuities, royalties, and rents from controlled organization (Schedule F)			
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			
10 Exploited exempt activity income (Schedule I)			
11 Advertising income (Schedule J)			
12 Other income (See instructions, attach schedule)			
13 Total. Combine lines 3 through 12	1,453		1,453



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)

14 Compensation of officers, directors, and trustees (Schedule K)		14	
15 Salaries and wages		15	
16 Repairs and maintenance		16	
17 Bad debts		17	
18 Interest (attach schedule) (see instructions)		18	
19 Taxes and licenses		19	
20 Charitable contributions (See instructions for limitation rules)		20	
21 Depreciation (attach Form 4562)		21	
22 Less depreciation claimed on Schedule A and elsewhere on return		22a	0
23 Depletion		23	
24 Contributions to deferred compensation plans		24	
25 Employee benefit programs		25	
26 Excess exempt expenses (Schedule I)		26	
27 Excess readership costs (Schedule J)		27	
28 Other deductions (attach schedule)		28	1,570
29 Total deductions. Add lines 14 through 28		29	1,570
30 Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13		30	-117
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)		31	
32 Unrelated business taxable income Subtract line 31 from line 30		32	-117



SEE STATEMENT 2

9-15

8

Part III Total Unrelated Business Taxable income

Table with 3 columns: Line number, Description, and Amount. Rows include Total of unrelated business taxable income (8,846), Amounts paid for disallowed fringes, Deductions for net operating loss (2,092), Total before specific deduction (6,754), Specific deduction (1,000), and Unrelated business taxable income (5,754).

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Rows include Organizations Taxable as Corporations (1,208), Trusts Taxable at Trust Rates, Proxy tax, Alternative minimum tax, Tax on Noncompliant Facility Income, and Total (1,208).

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Rows include Foreign tax credit, Other credits, General business credit, Credit for prior year minimum tax, Total credits, Subtract line 45e from line 44, Other taxes, Total tax (1,208), 2018 net 965 tax liability paid, Payments (50a-50g), Total payments (51), Estimated tax penalty (52), Tax due (53, 1,260), Overpayment (54), and Credited to 2019 estimated tax (55).

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Line number, Description, and Yes/No. Rows include interest in foreign country (No), distribution to foreign trust (No), and tax-exempt interest received (58).

Sign Here section containing signature of James A. Lee, CPA, dated 5-14-19, as Executive Director. Includes fields for Preparer's name, firm name (Crawley, Lee & Company, P.A.), address (Asheville, NC), and phone number (828-274-5524).

May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [] No

Schedule A – Cost of Goods Sold. Enter method of inventory valuation ► **COST METHOD**

1	Inventory at beginning of year	1		6	Inventory at end of year	6	
2	Purchases	2	3,058	7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	3,058
3	Cost of labor	3					
4a	Additional sec 263A costs (attach schedule)	4a					
b	Other costs (attach schedule)	4b		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
5	Total. Add lines 1 through 4b	5	3,058				X

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1 Description of property		
(1)	N/A	
(2)		
(3)		
(4)		
2 Rent received or accrued		
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ►
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ►		

Schedule E – Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			STMT 3	STMT 4
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)	VETERANS ' RESTORATION QUA	229,781	27,182	169,466
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)	857,648	4,693,901	18.27%	41,981
(2)			%	
(3)			%	
(4)			%	
SEE STATEMENT 5 SEE STATEMENT 6			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Totals			41,981	35,928
Total dividends-received deductions included in column 8				

Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1) N/A					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

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)				
Totals			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1) N/A				
(2)				
(3)				
(4)				
Totals		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	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) N/A						
(2)						
(3)						
(4)						
Totals		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 26

Schedule J – Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	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) N/A						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))						

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.)

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	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) N/A						
(2)						
(3)						
(4)						
Totals from Part I						
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1) N/A		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			

**SCHEDULE M
(Form 990-T)**

**Unrelated Business Taxable Income for
Unrelated Trade or Business**

OMB No 1545-0687

2018

Department of the Treasury
Internal Revenue Service

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).

Open to Public Inspection for
501(c)(3) Organizations Only

Name of the organization

ASHEVILLE-BUNCOMBE COMMUNITY

Employer identification number

56-0945001

Unrelated business activity code (see instructions) ▶ **721310**

Describe the unrelated trade or business ▶ **VETERANS' RESTORATION QUART**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales				
b Less returns and allowances	c Balance ▶	1c		
2 Cost of goods sold (Schedule A line 7)		2		
3 Gross profit Subtract line 2 from line 1c		3		
4a Capital gain net income (attach Schedule D)		4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from partnership and S corporation (attach statement)		5		
6 Rent income (Schedule C)		6		
7 Unrelated debt-financed income (Schedule E)		7 41,981	35,928	6,053
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		
12 Other income (See instructions, attach schedule)		12		
13 Total. Combine lines 3 through 12		13 41,981	35,928	6,053

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.)				
14 Compensation of officers, directors, and trustees (Schedule K)			14	
15 Salaries and wages			15	
16 Repairs and maintenance			16	
17 Bad debts			17	
18 Interest (attach schedule) (see instructions)			18	
19 Taxes and licenses			19	
20 Charitable contributions (See instructions for limitation rules)			20	
21 Depreciation (reported on Form 4562)		21 27,182		
22 Less depreciation claimed on Schedule A and elsewhere on return		22a 27,182	22b	0
23 Depletion			23	
24 Contributions to deferred compensation plans			24	
25 Employee benefit programs			25	
26 Excess exempt expenses (Schedule I)			26	
27 Excess readership costs (Schedule J)			27	
28 Other deductions (attach schedule)			28	
29 Total deductions. Add lines 14 through 28			29	
30 Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13			30	6,053
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)			31	
32 Unrelated business taxable income Subtract line 31 from line 30			32	6,053

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

**SCHEDULE M
(Form 990-T)**

**Unrelated Business Taxable Income for
Unrelated Trade or Business**

OMB No 1545-0687

2018

Department of the Treasury
Internal Revenue Service

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).

Open to Public Inspection for
501(c)(3) Organizations Only

Name of the organization

ASHEVILLE-BUNCOMBE COMMUNITY

Employer identification number

56-0945001

Unrelated business activity code (see instructions) ▶ **446110**

Describe the unrelated trade or business ▶ **AB COMMUNITY PHARMACY**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales 3,126			
b	Less returns and allowances			
	c Balance ▶	3,126		
2	Cost of goods sold (Schedule A line 7)			
3	Gross profit Subtract line 2 from line 1c	3,126		3,126
4a	Capital gain net income (attach Schedule D)			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
c	Capital loss deduction for trusts			
5	Income (loss) from partnership and S corporation (attach statement)			
6	Rent income (Schedule C)			
7	Unrelated debt-financed income (Schedule E)			
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)			
10	Exploited exempt activity income (Schedule I)			
11	Advertising income (Schedule J)			
12	Other income (See instructions, attach schedule) SEE STMT 1	528		528
13	Total. Combine lines 3 through 12	3,654		3,654

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)

14	Compensation of officers, directors, and trustees (Schedule K)			
15	Salaries and wages			
16	Repairs and maintenance			
17	Bad debts			
18	Interest (attach schedule) (see instructions)			
19	Taxes and licenses			
20	Charitable contributions (See instructions for limitation rules)			
21	Depreciation (reported on Form 4562)			
22	Less depreciation claimed on Schedule A and elsewhere on return			
		21		
		22a		22b 0
23	Depletion			
24	Contributions to deferred compensation plans			
25	Employee benefit programs			
26	Excess exempt expenses (Schedule I)			
27	Excess readership costs (Schedule J)			
28	Other deductions (attach schedule) SEE STATEMENT 2			861
29	Total deductions. Add lines 14 through 28			861
30	Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13			2,793
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)			
32	Unrelated business taxable income Subtract line 31 from line 30			2,793

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

Form 990-T	Business Income Schedules Worksheet	2018
Description CULINARY COMMANDOS		

Name ASHEVILLE-BUNCOMBE COMMUNITY	Taxpayer Identification Number 56-0945001
Unincorporated Business Income Tax Code 722320 Activity CATERERS	

Schedule A – Cost of Goods Sold.

1	Inventory at beginning of year	1		5	Inventory at end of year	5
2	Purchases and Other Costs	2	3,058	6	Cost of goods sold. Subtract Line 5 from Line 4, show the amount here and on Line 2 of Sch M or 990T	6
3	Sec 263A Costs	3				
4	Total. Add lines 1 through 3	4	3,058			

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)

1 Description of property	2a Income 10% to 50%	2b Income over 50%	3 Expense
(1)			
(2)			
(3) Total of Schedule C items for this activity, Enter Col 2 on Line 6A and Col 3 on Line 6B			

Schedule E – Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property	2 Gross Income/Expense amounts	3. Debt Ratio	4 Gross income reportable (column 2 x Ratio)	5 Allocable deductions (column 3 x Ratio)
(1)	income	%		
	expense			
(2)	income	%		
	expense			
(3) Total of Schedule E items for this activity, Enter Col 4 on Line 7A and Col 5 on Line 7B				

Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of Controlled Organization	2 EIN	3 Exempt/Nonexempt Controlled Organization	4 Income	5. Expenses
(1)				
(2)				
(3) Total of Schedule F items for this activity (combining Exempt and NonExempt), Enter Col 4 on Line 8A and Col 5 on Line 8B				

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of property	2 Income	3 Deductions	4 Set-Asides	5. Deduction & Set-Aside Total
(1)				
(2)				
(3) Total for Schedule G activities- use on line 9 column (A) and (B)				

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description	2 Gross Income	3 Related Expense	4 Net Income	5. Non-UBIT income	6 Non-UBIT expense	7. Excess expense
(1)						
(2)						
Totals for Schedule I - use on line 10 col (A) and (B)						Sch I amount on line 26

Schedule J – Advertising Income (see instructions)

Consolidated Basis (Part I)						
1 Name of periodical	2 Gross Adv Income	3 Direct costs	4 Advertising gain or (loss) If a gain, compute next 3 columns	5 Circulation income	6 Readership costs	7 Excess readership costs (col 6 - col 5) but not more than col 4
(1)						
(2)						
(3)						
Totals (for Part I)						
Separate Basis (Part II)						
(1)						
(2)						
Totals from Part I						
Totals, Part II (lines 1-5)	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27

Form 990-T	Business Income Schedules Worksheet	2018
Description VETERANS' RESTORATION QUART		Taxpayer Identification Number 56-0945001
Name ASHEVILLE-BUNCOMBE COMMUNITY		
Unincorporated Business Income Tax Code 721310	Activity ROOMING AND BOARDING HOUSES	

Schedule A – Cost of Goods Sold.

1	Inventory at beginning of year	<u>1</u>	5	Inventory at end of year	<u>5</u>
2	Purchases and Other Costs	<u>2</u>	6	Cost of goods sold. Subtract Line 5 from	<u>6</u>
3	Sec 263A Costs	<u>3</u>	Line 4, show the amount here and on Line 2 of Sch M or 990T		
4	Total. Add lines 1 through 3	<u>4</u>			

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)

1. Description of property	2a. Income 10% to 50%	2b. Income over 50%	3. Expense
(1)			
(2)			
(3) Total of Schedule C items for this activity, Enter Col 2 on Line 6A and Col 3 on Line 6B			

Schedule E – Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross Income/Expense amounts	3. Debt Ratio	4. Gross income reportable (column 2 x Ratio)	5. Allocable deductions (column 3 x Ratio)
(1) VETERANS' RESTORATION STMT 3	income 229,781 expense 196,648	18.27%	41,981	35,928
(2)	income expense	%		
(3) Total of Schedule E items for this activity, Enter Col 4 on Line 7A and Col 5 on Line 7B			41,981	35,928

Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of Controlled Organization	2. EIN	3. Exempt/Nonexempt Controlled Organization	4. Income	5. Expenses
(1)				
(2)				
(3) Total of Schedule F items for this activity (combining Exempt and NonExempt), Enter Col 4 on Line 8A and Col 5 on Line 8B				

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of property	2. Income	3. Deductions	4. Set-Asides	5. Deduction & Set-Aside Total
(1)				
(2)				
(3) Total for Schedule G activities- use on line 9 column (A) and (B)				

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description	2. Gross Income	3. Related Expense	4. Net income	5. Non-UBIT income	6. Non-UBIT expense	7. Excess expense
(1)						
(2)						
Totals for Schedule I - use on line 10 col (A) and (B)						Sch I amount on line 26

Schedule J – Advertising Income (see instructions)

Consolidated Basis (Part I)						
1. Name of periodical	2. Gross Adv Income	3. Direct costs	4. Advertising gain or (loss) If a gain, compute next 3 columns	5. Circulation income	6. Readership costs	7. Excess readership costs (col 6 - col 5) but not more than col 4
(1)						
(2)						
(3)						
Totals (for Part I)						
Separate Basis (Part II)						
(1)						
(2)						
Totals from Part I						
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)			Enter here and on page 1, Part II, line 27	
Totals, Part II (lines 1-5)						

56-0945001

Federal Statements

FYE: 12/31/2018

Statement 1 - Form 990-T - Primary Unrelated Business ActivityDescription

CATERING
RESIDENCE FEES
PHARMACY SALES

Statement 2 - Form 990-T, Part II, Line 28 - Other DeductionsDescriptionAmount

MISC. SUPPLIES	\$	390
INSURANCE		504
PROFESSIONAL FEES		333
SALARIES & BENEFITS		343
TOTAL	\$	<u>1,570</u>

Statement 3 - Form 990-T, Schedule E, Column 3a - Straight Line DepreciationDescriptionDeduction

VETERANS' RESTORATION QUART DEPRECIATION		<u>27,182</u>
TOTAL		<u>27,182</u>

Statement 4 - Form 990-T, Schedule E, Column 3b - Other DeductionsDescriptionDeduction

VETERANS' RESTORATION QUART	\$	
HOUSEKEEPING		1,393
INSURANCE		9,912
INTEREST EXPENSE		10,179
MAINTENANCE		11,337
NET SALARIES & CONTRACT S		51,155
OFFICE		693
PROFESSIONAL FEES		28,915
PROMOTION & ADVERTISING		1,215
UTILITIES		49,033
TELECOMMUNICATIONS		5,399
TRAVEL		235
TOTAL		<u>169,466</u>

56-0945001

Federal Statements

FYE: 12/31/2018

Statement 5 - Form 990-T, Schedule E, Column 4 - Average Acquisition Debt

<u>Description</u>	<u>Deduction</u>
VETERANS' RESTORATION QUART	
SUM OF DEBT OUTSTANDING AT FIRST OF EACH MONTH	10,291,771
DIVIDED BY TOTAL NUMBER OF MONTHS PROPERTY HELD	<u>12</u>
AVERAGE ACQUISITION DEBT	<u><u>857,648</u></u>

Statement 6 - Form 990-T, Schedule E, Column 5 - Average Adjusted Basis

<u>Description</u>	<u>Deduction</u>
VETERANS' RESTORATION QUART	
ADJUSTED BASIS ON FIRST DAY PROPERTY WAS HELD	4,726,353
ADJUSTED BASIS ON LAST DAY PROPERTY WAS HELD	<u>4,661,448</u>
	9,387,801
DIVIDED BY 2	<u>2</u>
AVERAGE ADJUSTED BASIS	<u><u>4,693,901</u></u>

56-0945001

Federal Statements

FYE: 12/31/2018

AB COMMUNITY PHARMACY**Statement 1 - Form 990-T, Schedule M, Line 12 - Other Income**

<u>Description</u>	<u>Amount</u>
AB COMMUNITY PHARMACY	\$ 528
TOTAL	\$ <u>528</u>

AB COMMUNITY PHARMACY**Statement 2 - Form 990-T, Schedule M, Line 28 - Other Deductions**

<u>Description</u>	<u>Amount</u>
MISC. SUPPLIES	\$ 200
PROFESSIONAL FEES	333
BILLING AND BANK FEES	<u>328</u>
TOTAL	\$ <u>861</u>

Federal Statements**VETERANS' RESTORATION QUART****Statement 3 - Unrelated Business Worksheet - Schedule E Expense Details**

<u>Description</u>	<u>Deduction</u>
VETERANS' RESTORATION QUART	\$
HOUSEKEEPING	1,393
INSURANCE	9,912
INTEREST EXPENSE	10,179
MAINTENANCE	11,337
NET SALARIES & CONTRACT S	51,155
OFFICE	693
PROFESSIONAL FEES	28,915
PROMOTION & ADVERTISING	1,215
UTILITIES	49,033
TELECOMMUNICATIONS	5,399
TRAVEL	235
DEPRECIATION	27,182
TOTAL	<u>\$ 196,648</u>

56-0945001

Federal Statements

FYE: 12/31/2018

Cumulative Worksheet for Form 990-T, Line 12 - Other Income

<u>Description</u>	<u>Amount</u>
AB COMMUNITY PHARMACY	\$ 528
TOTAL	\$ 528

Cumulative Worksheet for Form 990-T, Line 28 - Other Deductions

<u>Description</u>	<u>Amount</u>
MISC. SUPPLIES	\$ 390
INSURANCE	504
PROFESSIONAL FEES	333
CONTRACT SERVICES	343
MISC. SUPPLIES	200
PROFESSIONAL FEES	333
BILLING AND BANK FEES	328
TOTAL	\$ 2,431