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## Enter the number of the organization's unrelated trades or businesses # 1 Describe the city (or first) unrelated trade or business here.    If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and it complete a Schedule M for each additional trade or business. Near complete Parts I and it complete a Schedule M for each additional trade or business. Near complete Parts I and it complete a Schedule M for each additional trade or business. Near complete Parts I and it complete a Schedule M for each additional trade or business. Near complete Parts I and it complete a Schedule M for each additional trade or Business. Near complete Parts I and it complete a Schedule M it was a sentence or Lucy Bush Schedule M in a still part of the previous sentence, complete Parts I and it complete a Schedule M in the previous sentence, complete Parts I and it complete a Schedule M in the previous sentence, complete Parts I and it complete a Schedule M in the previous sentence, complete Parts I and it complete a Schedule M in the previous sentence, complete Parts I and it complete a Schedule M in the previous sentence, complete Parts I and it complete a Schedule M in the previous sentence of the previous sentence, complete Parts I and it complete a Schedule M in the previous sentence of		l end of year	C Chas					nn 🗆 50	))(c) trust	401(a)	trust	Other trust
trade or business here.  If only one complete Parts III and the oblank space at the end of the previous sentence, complete Parts III and II complete a Schedule M for each additional frade or business. then completic Parts IIII—V  I During the bay year, was the corporation a subsidiary in an affiliated group or a parent subsidiary controlled group?  I The books are in care of ** Lucy Bush Carter*  Telephone number* (704) 333–2112  Part III Unrelated Trade or Business Income  (A) Income  (B) Expenses  (C) Net  Telephone number* (704) 333–2112  Telephone number*  (C) Net  Telephone number*  (T) All states and allowances  2 Cost of goods sold (Schedule A Ine ?)  3 Gross profit Subtract line 2 from line 1c  4 a Capital gain net income (affact) Schedule 5)  b Ns gain (bas) (from 337 Part II line II) (affact) from 4/57)  c Capital loss deduction for trusts  5 Income (86s) from a partnership of an S corporatio (affact) statemen)  6 Rent income (Schedule C)  7 Unrelated debi-financed income (Schedule E)  8 Interest, enumber smylles, and rists from a controlled organization (stanles) in the complete statemen)  10 Exploited evempt activity income (Schedule E)  11 Advertising income (Schedule E)  12 Other income (Schedule C)  13 Total Conthine lines 3 through 12  Part III Deductions Not Taken Elsewhere (See Institutions) of the complete statemen (See Institutions)  14 Complemsation of officers, directors and ingaleses of cellule (S)  15 Salanes and wages  16 Repears and maintenance  17 Bad debts  18 Indeed; (affact) schedule (See institutions)  19 Taxes and ficeneses  Depreciation (statich Form 4562)  20 Less depreciation claimed on Schedule A and elsewhere on return  21 Depreciation (statich Form 4562)  21 Less depreciation claimed on Schedule (See institutions)  22 Depreciation (statich Schedule)  23 Contributions to defire compensation plans  24 Employee beneal, programs  25 Excess readgraph costs (Schedule J)  26 Diversidation (affact of Schedule J)  27 Other deductions Act Interes existing in large see instructions  3	H 6	<del></del>	<u> </u>			`	<i>&gt;</i> 1		_ <del></del>			
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23 Contributions to deferred compensation plans 24 Employee beneal programs 25 Excess exempt expenses (Schedule I) 26 Excess readership costs (Schedule J) 27 Other deductions (attach schedule) 28 Total deductions Add lines 14 through 27 29 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 30 Deduction for net operating loss arising in tax years beginning on or after January 1 2018 (see instructions) 31 Unrelated business taxable income Subtract line 30 from line 29  BAA For Paperwork Reduction Act Notice, see instructions  23			claimed on Sc	thequie A and els	ewhere on ret	นเก		21 a			<u> </u>	
Employee benefit programs  Excess exempt expenses (Schedule I)  Excess readership costs (Schedule J)  Other deductions (attach schedule)  Total deductions Add lines 14 through 27  Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13  Deduction for net operating loss arising in tax years beginning on or after January 1 2018 (see instructions)  Junelated business taxable income Subtract line 30 from line 29  BAA For Paperwork Reduction Act Notice, see instructions  24  25  26  27  28  29  5,671  5,671		•	. /							<u> </u>	<u> </u>	
25 Excess exempt expenses (Schedule I) 26 Excess readership costs (Schedule J) 27 Other deductions (attach schedule) 28 Total deductions Add lines 14 through 27 29 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 30 Deduction for net operating loss arising in tax years beginning on or after January 1 2018 (see instructions) 31 Unrelated business taxable income Subtract line 30 from line 29 31 5, 671  BAA For Paperwork Reduction Act Notice, see instructions 32 Form 990-T (2019)			/	nsation plans						<del></del>		
Excess readership costs (Schedule J)  Other deductions (attach schedule)  Total deductions Add lines 14 through 27  Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13  Deduction for net operating loss arising in tax years beginning on or after January 1 2018 (see instructions)  Junelated business taxable income Subtract line 30 from line 29  BAA For Paperwork Reduction Act Notice, see instructions  26  27  28  29  5,671  30  5,671		· · · /										
27 Other deductions (attach schedule) 28 Total deductions Add lines 14 through 27 29 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 30 Deduction for net operating loss arising in tax years beginning on or after January 1 2018 (see instructions) 31 Unrelated business taxable income Subtract line 30 from line 29 31 5, 671  BAA For Paperwork Reduction Act Notice, see instructions 50 51 52 53 54 55 671 671 671 672 673 674 675 676 677 677 677 677 677 677 677 677		,										
Total deductions Add lines 14 through 27  Unrelated business Laxable income before net operating loss deduction Subtract line 28 from line 13  Deduction for net operating loss arising in tax years beginning on or after January 1 2018 (see instructions)  June lated business taxable income Subtract line 30 from line 29  31  5,671  BAA For Paperwork Reduction Act Notice, see instructions		,									<u> </u>	
Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13  Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions).  June lated business taxable income. Subtract line 30 from line 29.  BAA For Paperwork Reduction Act Notice, see instructions.  29 5, 671  30 5, 671  Form 990-T (2019)		/	•	•							1	
30 Deduction for net operating loss arising in tax years beginning on or after January 1 2018 (see instructions) 31 Unrelated business taxable income Subtract line 30 from line 29 31 5, 671  BAA For Paperwork Reduction Act Notice, see instructions Form 990-T (2019)					erating loss de	educin	on Subtrac	t line 28 fr	om line 13		<del>  _</del>	5 671
BAA For Paperwork Reduction Act Notice, see instructions Form 990-T (2019)											<del>                                     </del>	
	_31	Unrelated busines	s taxable inco	me Subtract line	30 from line 2	29				31		5,671
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Form 990-T (2019) Friendship	Trays, Inc.			<u>56</u>	-1201 <u>496</u>	Page 3		
Schedule A - Cost of Goods	<b>Sold.</b> Enter method of inve	ntory valuation 🟲			-			
1 Inventory at beginning of year	1	6 Inventor	y at er	nd of year	6			
2 Purchases	2	7 Cost of	of goods sold. Subtract 5 from line 5 Enter here					
3 Cost of labor	3	line 6 fro	om line	e 5 Enter here				
4 a Additional section 263A costs (attach sch	redule)	and in P	art I, I	ine ∠	7	14 1 N		
	4 a					Yes No		
b Other costs	4 b	8 Do the r	ules of	f section 263A (wit iced or acquired fo	h respect to			
(attach sch)  5 Total Add lines 1 through 4b	5	to the or			resule) apply			
Schedule C – Rent Income (F	rom Real Property and	l Personal Property	Lease	ed With Real P	roperty) (see	instructions)		
1 Description of property					77 (			
(1)								
(2)								
(3)	<del></del>							
(4)								
	Rent received or accrued							
(a) From personal property		eal and personal property		<b>3(a)</b> Deduction	s directly conne	cted with		
(if the percentage of rent for per	rsonal (if the perce	entage of rent for persona	ıl		n columns 2(a) : ach schedule)	ana ∠(b)		
property is more than 10% but more than 50%)		ceeds 50% or if the rent is on profit or income)	s	<b>\</b> *- · · ·	,			
(1)	50300	on prom or meaning						
(2)								
(3)		<u></u>			··-			
(4)					<del></del>			
Total	Total			<del></del>				
				(b) Total deductions				
(c) Total income. Add totals of columhere and on page 1, Part I, line 6, co				here and on page 1, Pa I, line 6, column (B)	rt ►			
Schedule E — Unrelated Debt		instructions)		, , , , , , , , , , , , , , , , , , ,				
Schedule E - Officialed Debt	- mar eza meome (see	mstractions)	3 Dec	ductions directly co	nnected with or	allocable to		
		2 Gross income from	<b>3</b> Dec		nced property	anocable to		
1 Description of debt-fin	anced property	or allocable to debt- financed property	(	a) Straight line	(b) Other	deductions		
		depr		ciation (attach sch		schedule)		
(1)								
(2)	*. <u>*</u> .			•				
(3)								
(4)				1,200				
	Average adjusted basis of	6 Column 4	7	Gross income	8 Allocable	deductions		
acquisition debt on or or	allocable to debt-financed	divided by	repo	rtable (column 2 x		x total of		
allocable to debt-financed property (attach schedule)	property (attach schedule)	column 5		column 6)	columns 3(	a) and 3(b))		
(1)		%						
(2)		%			-			
(3)		%	_					
(4)		%						
			Enter	here and on page	1, Enter here a	nd on page 1,		
			Part I	, line 7, column (A	i) Part I, line 7	, column (B)		
Totals		•						
Total dividends-received deductions	included in column 8	l			<b>&gt;</b>			
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Schedule F Interest, A	nnuitie							)rga	nızations	(see ins	structions	)
•			Exem	pt Con	trolled Or	rganı	zations		,			
1 Name of controlled organization	ıden	mployer tification umber	3 Net unrelated income (loss) (see instructions)			4 Total of specified payments made				in c	eductions directly onnected with ome in column 5	
(1)				•								·
(2)												
(3)						1-	-	-				
(4)						1-						
Nonexempt Controlled Organiz	ations	,									<u> </u>	
<b>7</b> Taxable Income	inco	et unrelated ome (loss) instructions)		Total of specified payments made normal norm				the o	controlling		connected	tions directly d with income dumn 10
(1)						1				-		
(2)							•					<del> </del>
(2)												
(4)												·
	I.,						Add columns here and on p 8, co		, Part I, line		and on p	6 and 11 Enter age 1, Part I, line lumn (B)
Totals Schedule G — Investmen	at Inco	ma of a Ca	otion	E01/	a)(7) (0	) o	(17) Organ	-it	ion /	_1	\	
1 Description of income		2 Amount			3 dire	Ded ctly o	uctions connected		4 Set-aside	s	<b>5</b> Tota set-as	I deductions and sides (column 3
					(alla	acii s	chedule)				Pit	us column 4)
(1)			<del></del>				_					
(3)					<del>                                     </del>							
(4)					<del> </del>							
Totals Schedule I — Exploited E	<b>&gt;</b>	Enter here an Part I, line 9,	colum		her Tha	ın A	dvertisina	Inco	<b>ne</b> (see ins	truction	Part I, II	re and on page ne 9, column (B)
1 Description of exploited a		2 Gross unrelated business income from		3 Expenses directly connected with production of unrelated		from or b	et income (loss) i unrelated trade usiness (column inus column 3)			6 Ex	penses itable to imn 5	7 Excess exempt expenses (column minus column 5, be not more than
		trade oi busines		busin	ess income	If a	gain, compute nns 5 through 7					column 4)
(1)			-	-		1						
(1)			- +				-					<del></del>
(3)			-			<u> </u>						
(4)		<del> </del>										
Totals		Enter here on page Part I, line column (	1, e 10,	on page 1,		41-0						Enter here and on page 1, Part II, line 25
Schedule J – Advertisin	a Inco	me (see inst	ruction	ns)		1 / 1	MILE STRUCKION	rag	acadar s salars.	C.20. 7 6 650		-1
Part I Income From Pe					nsolida	ated	Basis					
Marka Tu		2 Gross			Direct		dvertising gain or	5.0	Circulation	6 Rea	adership	7 Excess readershi
1 Name of periodica	l	advertisii income	ng		ertising osts	(lo:	ss) (col 2 minus ol 3) If a gain, compute cols 5 through 7		ncome		osts	costs (col 6 minus col 5, but not mor than col 4)
(1)					*							4.200
(2)						- 1° 4				_		
(3) (4)												
		<u> </u>				2.40%	- C000 04004 / yr					A THE STATE OF THE
Totals (carry to Part II, line (5)	') -		į			<u> </u>				<u></u>		000 7 (0010)
BAA				TI	EEA0204 L	09/19	/19				ŀ	Form <b>990-T</b> (2019)

## Form 990-T (2019) Friendship Trays, Inc 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	<b>2</b> Gross advertising income	<b>3</b> Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	<b>6</b> Readership costs	7 Excess readership costs (col 6 minus col 5, but not more than col 4)
(1) (2) (3) (4)						
Totals from Part I				3.5		,
Totals, Part II (lines 1 – 5) ▶	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B)	0.31.704			Enter here and on page 1, Part II, line 26

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

1 Name	<b>2</b> Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		%	
		%	
		%	
		%	
Total Enter here and on page 1, Part II, line 14		<b>•</b>	

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## **Federal Statements**

Page 1

Friendship Trays, Inc.

56-1201496

Statement 1 Form 990-T, Part III, Line 36 Net Operating Loss Deduction

Loss Year Ending	Origina Loss	1	Pr	Loss eviously <u>Used</u>	Loss Avaılable		
12/31/15 Total Net Operating I	•	20,576.	\$	15,331.	\$	5,245. \$ 5,245.	