

Form **990-T**

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

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](http://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

**A**  Check box if address changed

**B** Exempt under section  
 501(c)(3) **(03)**  
 408(e)  220(e)  
 408A  530(a)  
 529(a)

**C** Book value of all assets at end of year  
**4,161,711**

**D** Employer identification number (Employees' trust, see instructions)  
**56-2142829**

**E** Unrelated business activity code (See instructions)  
**423000**

**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  
**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.

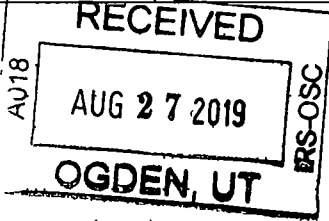
**I** During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?  Yes  No  
If "Yes," enter the name and identifying number of the parent corporation

**J** The books are in care of ▶ **KATHLEEN DE LA TORRE** Telephone number ▶ **828-885-7800**

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Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales	361,554		
b	Less returns and allowances			
	<b>c Balance</b>	<b>361,554</b>		
2	Cost of goods sold (Schedule A, line 7)	360,275		
3	Gross profit Subtract line 2 from line 1c	1,279		1,279
4a	Capital gain net income (attach Schedule D)			
4b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
4c	Capital loss deduction for trusts			
5	Income (loss) from partnership and S corporation (attach statement)			
6	Rent income (Schedule C)	43,046	22,680	20,366
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	<b>Total.</b> Combine lines 3 through 12	<b>44,325</b>	<b>22,680</b>	<b>21,645</b>

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 (attach Form 4562)		
22	Less depreciation claimed on Schedule A and elsewhere on return		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)		
29	<b>Total deductions.</b> Add lines 14 through 28		
30	Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13		21,645
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)		
32	<b>Unrelated business taxable income</b> Subtract line 31 from line 30		<b>21,645</b>



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Part III Total Unrelated Business Taxable income

Table with 3 columns: Line number, Description, Amount. Rows 33-38. Total 20,645.

Part IV Tax Computation

Table with 3 columns: Line number, Description, Amount. Rows 39-44. Total 4,335.

Part V Tax and Payments

Table with 3 columns: Line number, Description, Amount. Rows 45a-55. Total 2,439.

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

Table with 3 columns: Line number, Description, Yes/No. Rows 56-58.

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.

Sign Here

Signature of officer: Kenneth Stroman 8/21/19, Date: 8/21/19, Title: TREASURER

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

Table with 3 columns: Field, Value, Field. Rows: Preparer's name (TERRY B ANDERSEN CPA), Date (08/15/19), Firm's name (CARLAND & ANDERSEN, INC.), Firm's address (89 N. CALDWELL ST. BREVARD, NC 28712), Firm's EIN (04-3729830), Phone no (828-884-2021).

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

<b>1</b> Inventory at beginning of year	<b>1</b>		<b>6</b> Inventory at end of year	<b>6</b>	
<b>2</b> Purchases	<b>2</b>		<b>7</b> <b>Cost of goods sold.</b> Subtract		
<b>3</b> Cost of labor	<b>3</b>		line 6 from line 5. Enter here and		
<b>4a</b> Additional sec. 263A costs (attach schedule)	<b>4a</b>		in Part I, line 2	<b>7</b>	<b>360,275</b>
<b>b</b> Other costs (attach schedule) <b>STMT 3</b>	<b>4b</b>	<b>360,275</b>	<b>8</b> Do the rules of section 263A (with respect to	<b>Yes</b>	<b>No</b>
<b>5</b> <b>Total.</b> Add lines 1 through 4b	<b>5</b>	<b>360,275</b>	property produced or acquired for resale) apply		<b>X</b>
			to the organization?		

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

(see instructions)

<b>1</b> Description of property		
<b>(1) GRAVY STORE RENTAL</b>		
<b>(2)</b>		
<b>(3)</b>		
<b>(4)</b>		
<b>2</b> Rent received or accrued		
<b>(a)</b> From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	<b>(b)</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)	<b>3(a)</b> Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
		<b>SEE STATEMENT 2</b>
<b>(1)</b>	<b>43,046</b>	<b>22,680</b>
<b>(2)</b>		
<b>(3)</b>		
<b>(4)</b>		
<b>Total</b>	<b>Total 43,046</b>	<b>(b) Total deductions.</b> Enter here and on page 1, Part I, line 6, column (B) ► <b>22,680</b>
<b>(c) Total income.</b> Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ► <b>43,046</b>		

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

<b>1</b> Description of debt-financed property		<b>2</b> Gross income from or allocable to debt-financed property	<b>3</b> Deductions directly connected with or allocable to debt-financed property	
			<b>(a)</b> Straight line depreciation (attach schedule)	<b>(b)</b> Other deductions (attach schedule)
<b>(1) N/A</b>				
<b>(2)</b>				
<b>(3)</b>				
<b>(4)</b>				
<b>4</b> Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	<b>5</b> Average adjusted basis of or allocable to debt-financed property (attach schedule)	<b>6</b> Column 4 divided by column 5	<b>7</b> Gross income reportable (column 2 x column 6)	<b>8</b> Allocable deductions (column 6 x total of columns 3(a) and 3(b))
<b>(1)</b>		%		
<b>(2)</b>		%		
<b>(3)</b>		%		
<b>(4)</b>		%		
<b>Totals</b>			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
<b>Total dividends-received deductions</b> included in column 8				

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

Table with 6 columns: 1 Name of controlled organization, 2 Employer identification number, 3 Net unrelated income (loss), 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. Row (1) contains 'N/A'.

Nonexempt Controlled Organizations

Table with 5 columns: 7 Taxable Income, 8 Net unrelated income (loss), 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. Includes a Totals row with instructions for adding columns.

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

Table with 5 columns: 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). Row (1) contains 'N/A'. Includes a Totals row with instructions.

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

Table with 7 columns: 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, 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). Includes a Totals row.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

Table with 7 columns: 1 Name of periodical, 2 Gross advertising income, 3 Direct advertising costs, 4 Advertising gain or (loss) (col 2 minus col 3), 5 Circulation income, 6 Readership costs, 7 Excess readership costs (column 6 minus column 5, but not more than column 4). Row (1) contains 'N/A'. Includes a Totals row.

**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)						
<b>Totals from Part I</b> ▶						
<b>Totals, Part II (lines 1-5)</b> ▶	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)		%	
<b>Total.</b> Enter here and on page 1, Part II, line 14 ▶			

**Statement 1 - Form 990-T - Primary Unrelated Business Activity**Description

THE BOYS AND GIRLS CLUB OPERATES A THRIFT STORE AT A SEPARATE LOCATION THAT GENERATES SALES AND HAS SPACE THAT IS LEASED BY LOCAL VENDORS. THIS GENERATES SOME RENTAL INCOME AND THE ORGANIZATION RECEIVES A PERCENTAGE OF THE VENDOR'S SALES.

**Statement 2 - Form 990-T, Schedule C, Column 3 - Deductions**

<u>Description</u>	<u>Deduction</u>
GRAVY STORE RENTAL LEASE EXPENSE	22,680
TOTAL	<u>22,680</u>

**Statement 3 - Form 990-T, Schedule A, Line 4b - Other Costs**

<u>Description</u>	<u>Amount</u>
GRAVY STORE	\$ 360,275
TOTAL	<u>\$ 360,275</u>