723701 01-22-18 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-T (2017

| Part I | | ic | 59-187 | 79968 | Page 2 |
|--------|---|--|-----------------|-----------------|-------------------------|
| | Organizations Taxable as Corporations. See instructions for tax computation. | | | T | |
| . 33 | Controlled group members (sections 1561 and 1563) check here See instructions and | 1. | | | |
| _ | Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): | | | | |
| a | | | | 1 1 | |
| | (1) \(\\$ \\ \\ \\$ \\ \\$ \\ \\ \\$ \\ \\ \\ \\ \\ \\ \\ | | | | |
| D | Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) | | | , | |
| | (2) Additional 3% tax (not more than \$100,000) [\$ | | | <u> </u> | 0 |
| C | Income tax on the amount on line 34 | | | 35c | 0. |
| 36 | Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount of | n line 34 from: | | | |
| | Tax rate schedule or Schedule D (Form 1041) | | | 36 | |
| 37 | Proxy tax. See instructions | | • | 37 | |
| 38 | Alternative minimum tax | | | 38 | |
| 39 | Tax on Non-Compliant Facility Income. See Instructions | | | 39 | |
| 40 | Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies | | | 40 | 0. |
| Part I | | | | | |
| 41a | Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) | 41a | | | |
| b | Other credits (see instructions) | 416 | |] , • . | |
| C | General business credit. Attach Form 3800 | 41c | | 」 . | |
| d | Credit for prior year minimum tax (attach Form 8801 or 8827) | 41d | | | |
| е | Total credits. Add lines 41a through 41d | | | 41e | |
| 42 | Subtract line 41e from line 40 | | | 42 | 0. |
| 43 | Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 886 | 6 🔲 Other (at | tach schedule) | 43 | |
| 44 | Total tax. Add lines 42 and 43 | _ | | 44 | 0. |
| 45 a | Payments: A 2016 overpayment credited to 2017 | 45a | | | |
| | 2017 estimated tax payments | 45b | . | 1. | |
| | Tax deposited with Form 8868 | 45c | | 1 · · ∤ | |
| | Foreign organizations: Tax paid or withheld at source (see instructions) | 45d | | - • | |
| | Backup withholding (see instructions) | 45e | | ┦´ (| |
| | Credit for small employer health insurance premiums (Attach Form 8941) | | | ┨ - | |
| | | 45f | | | |
| 9 | | | | | |
| 40 | | 45g | | | |
| | Total payments. Add lines 45a through 45g | | | 46 | |
| 47 | Estimated tax penalty (see instructions). Check if Form 2220 is attached | | | 47 | |
| 48 | Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed | | | 48 | <u>0.</u> |
| 49 | Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid | 1 | | 49 | |
| | Enter the amount of line 49 you want: Credited to 2018 estimated tax | Refu | | 50 | |
| Part V | Statements Regarding Certain Activities and Other Information | | ions) | | - 1:: 1:: - |
| 51 | At any time during the 2017 calendar year, did the organization have an interest in or a signature o | • | | | Yes No |
| | over a financial account (bank, securities, or other) in a foreign country? If YES, the organization in | • | | | |
| | FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the fo | reign country | | | |
| | here > | | | | <u>X</u> |
| 52 | During the tax year, did the organization receive a distribution from, or was it the grantor of, or train | nsferor to, a forei | gn trust? | | X |
| | If YES, see instructions for other forms the organization may have to file. | | | | |
| 53 | Enter the amount of tax-exempt interest received or accrued during the tax year >\$ | | | | ! |
| 0: | Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and state correct, and complete Declaration of preparer (other than taxpayer) is pased on all information of which preparer is | ements, and to the be has any knowledge | st of my knowle | dge and belief | f, it is true, |
| Sign | 1. 1. 4 1 1/10 | | ſ _N | lay the IRS dis | cuss this return with |
| Here | Interim | CEO | t <i>t</i> | ne preparer sh | own below (see |
| | Signature of officer Date Title | | ın | structions)? | X Yes No |
| | Print/Type preparer's name Preparer's signature Date | C | heck | if PTIN | |
| Paid | 1 / 1.11 | | elf- employed | } | |
| Prepa | rer Scott Y. Haynes 5-2 | 20-2019 | | P01 | .366363 |
| Use O | | | ırm's EIN 🕨 | 65- | 1083521 |
| 2000 | 125 Butler Street | | | | |
| | Firm's address ▶ West Palm Beach, FL 33407 | F | Phone no. (| 561) | 689-6000 |
| | | | | | orm 990-T (2017) |

| Schedule A - Cost of Goods Sc | old. Enter method of invente | ory valuation N/A | | |
|--|--|--|--|---|
| 1 Inventory at beginning of year | 1. | 6 Inventory at end of yea | r | 6 |
| 2 Purchases | 2 | 7 Cost of goods sold. Su | | |
| 3 Cost of labor | 3 | from line 5. Enter here | | |
| 4a Additional section 263A costs | | line 2 | 7 | |
| (attach schedule) | 4a | 8 Do the rules of section | 263A (with respect to | Yes No |
| b Other costs (attach schedule) | 4b | | equired for resale) apply to | |
| 5 Total. Add lines 1 through 4b | 5 | the organization? | | |
| Schedule C - Rent Income (Fro | | Personal Property L | eased With Real Prop | erty) |
| Description of property | | | | |
| | | | | |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | Rent received or accrued | | | |
| (a) From personal property (if the percentage rent for personal property is more than | ge of (b) From real an of rent for pe | d personal property (if the percentages sonal property exceeds 50% or if | | connected with the income in ad 2(b) (attach schedule) |
| 10% but not more than 50%) (1) | the rent | is based on profit or income) | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | - | · · · · · · · · · · · · · · · · · · · |
| Total | O . Total | | 0. | |
| (c) Total income. Add totals of columns 2(a) here and on page 1, Part I, line 6, column (A) | <u> </u> | | (b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) | > 0. |
| Schedule E - Unrelated Debt-F | inanced Income (see if | nstructions) | | |
| | | 2. Gross income from | 3. Deductions directly cont to debt-finance | |
| Description of debt-finance | d property | or allocable to debt- financed property | (2) Straight line depreciation (attach schedule) | (b) Other deductions (attach schedule) |
| | | | Statement 1 | Statement 2 |
| (1) Rental by non-prof: | it | 7,600. | 250 | 7,266. |
| (2) | | | | <u> </u> |
| (3) | | | | |
| (4) | | | | <u> </u> |
| 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 states schedule) Statement 4 | 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)) |
| Statement 3 | | | 0.050 | 0.010 |
| (1) 1,022,750. | 2,633,248. | 38.84% | 2,952 | 2,919. |
| (2) | | % | | <u> </u> |
| (3) | | % | | |
| (4) | | % | | |
| | | | 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 | | | 2,952 | 2,919. |
| Total dividends-received deductions include | ed in column 8 | | | 0. |

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Totals (carry to Part II, line (5))

· 0 .

0.

Form 990-T (2017)

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) | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| Totals from Part I | | 0. | 0. | | K. S. L. AV 2767.7 S. | | 0 | | |
| | | 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 | | |
| Totais, Part II (lines 1-5) | ▶ | 0. | 0. | | 数基的运动物 | | 0 | | |

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

| 1. Name | 2. Title | 3. Percent of time devoted to business | Compensation attributable to unrelated business |
|---|----------|--|---|
| (1) | | % | |
| (2) | | % | |
| (3) | | % | |
| (4) | | % | |
| Total. Enter here and on page 1, Part II, line 14 | | > | 0. |

Form 990-T (2017)

| Form 990-T S | Schedule E - Depreciation Deduc | ction | Statement 1 |
|---------------------------------|---------------------------------|--------------|-------------|
| Description | Activity Number | Amount | Total |
| Depreciation | - SubTotal - 1 | 250. | 050 |
| Depreciation reporte | | | 250 |
| Total of Form 990-T, | Schedule E, Column 3(a) | | 250 |
| Form 990-T | Schedule E - Other Deduction | 18 | Statement 2 |
| Description | Activity Number | Amount | Total |
| Salaries | | 4,311. | |
| Benefits | | 672. | |
| Fees | | 503. | |
| Advertising | | 80. | |
| Rentals | | 4. | |
| Supplies | | 14. | |
| Interest Expenses | | 123. 450. | |
| Insurance Licenses and Taxes | | 450. 17. | |
| Misc, Exp. | | 98. | |
| Office Supplies | | 47. | |
| Postage | | 276. | |
| Repairs | , | 241. | |
| Occupancy | | 58. | |
| Materials | | 147. | |
| Taxes | , | 10. | |
| Telephone | | 39. | |
| Jtilities | Quibmat a 1 | 176. | E 066 |
| Intomost Francis | - SubTotal - 1 | | 7,266 |
| Interest Expenses Insurance | | | |
| Occupancy | | | |
| Administration | | | |
| Compensation | | | |

| Form 990-T | Average Acquisition Allocable to Debt-Fin | | Statement 3 | | |
|--------------------|--|--------------------|-------------|------------|--|
| Description | | Activity Number | Amount | Total | |
| Average Debt | - SubTotal - | 1 | 1,022,750. | 1,022,750. | |
| Average Debt | Sublocal - | • | | 1,022,730. | |
| Total of Form 990- | r, Schedule E, Column | 4 | | 1,022,750. | |

| Form 990-T | 1 | Average Adjusted 1 Allocable to Debt-Fir | | | Statement 4 | | |
|---------------|--------|---|--------------------|------------|-------------|--|--|
| Description | | , | Activity Number | Amount | Total | | |
| Average Fixed | Assets | G-bm-6-1 | | 2,633,248. | 0.633.040 | | |
| Average Fixed | Assets | - SubTotal - | 1 | | 2,633,248. | | |
| Total of Form | 990-T, | Schedule E, Column ! | 5 | | 2,633,248. | | |

Name(s) shown on return

Department of the Treasury Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

Business or activity to which this form relates

990

OMB No 1545-0172

| Seagull Industries fo | r the Disa | bled. Inc For | m 990 P | age 10 | | 59-1879968 | | |
|--|---|--|------------------------|--|---------------|---------------------------------------|--|--|
| Part Election To Expense Certain Prop | | | | | V before v | | | |
| 1 Maximum amount (see instructions) | , | , | <u></u> | , | 1 | 510,000. | | |
| 2 Total cost of section 179 property pla | ced in service (see ii | nstructions) | | | 2 | 020,000 | | |
| 3 Threshold cost of section 179 propert | • | | | | 3 | 2,030,000. | | |
| 4 Reduction in limitation. Subtract line | • | • | - | | 4 | 2/000/0000 | | |
| 5 Dollar limitation for tax year Subtract line 4 from lin | | | instructions | | 5 | | | |
| 6 (a) Description of | | | ness use only) | (c) Elected | cost | | | |
| | | | | | | | | |
| | | | | | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| | | | | | | | | |
| 7 Listed property. Enter the amount from | m line 29 | | 7 | | | | | |
| .8 Total elected cost of section 179 prop | | n column (c) lines 6 and | | | 8 | | | |
| 9 Tentative deduction. Enter the smaller | - | · · | • | | 9 | | | |
| 10 Carryover of disallowed deduction fro | | 16 Form 4562 | | | 10 | | | |
| • | Business income limitation. Enter the smaller of business income (not less than zero) or line 5 | | | | | | | |
| 12 Section 179 expense deduction. Add | 11 | | | | | | | |
| • | • | | | | 12 | POSTGERON STORENSE | | |
| 13 Carryover of disallowed deduction to Note: Don't use Part II or Part III below fo | | | ▶ 13 | | | [大文文文文文] | | |
| Part III Special Depreciation Allow | | | to listed assault | | | | | |
| V XXX C FFX | | · <u> </u> | | | \neg | | | |
| 14 Special depreciation allowance for qu | alified property (other | er than listed property) pl | aced in service | during . | | l . | | |
| the tax year | | | | | 14 | | | |
| 15 Property subject to section 168(f)(1) e | lection | | | | 15 | 175 622 | | |
| 16 Other depreciation (including ACRS) | | | | | 16 | 175,632. | | |
| Part III MACRS Depreciation (Don | 't include listed prop | | | _ | | | | |
| | | Section A | | | | 20 510 | | |
| 17 MACRS deductions for assets placed | in service in tax yea | rs beginning before 2017 | 7 | | 17 | 39,718. | | |
| 18 If you are electing to group any assets placed in se | | | | | 1 14 7 394 73 | no wadani interiori | | |
| Section B - Asset | | During 2017 Tax Year | Using the Gen | eral Deprecia | tion Syste | em I | | |
| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only - see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction | | |
| 19a · 3-year property | | | <u> </u> | | L | | | |
| b 5-year property | | | | | | | | |
| c 7-year property | | | | | | | | |
| d 10-year property | | • | | | | | | |
| e 15-year property | | | [| 1 | | | | |
| f 20-year property | | | | | | | | |
| g 25-year property | | | 25 yrs. | | S/L | | | |
| | 7 | | 27.5 yrs. | ММ | S/L | · · · · · · · · · · · · · · · · · · · | | |
| h Residential rental property | 7. | | 27.5 yrs. | MM | S/L | | | |
| | | | 39 yrs. | MM | S/L | | | |
| Nonresidential real property | ', ' | | Ja yis. | MM | S/L | | | |
| Section C - Assets | Placed in Service [| During 2017 Tax Year U | sing the Altern | | | tem | | |
| | | | T T | 1 | S/L | | | |
| | ─ ^^^ | | 12 yrs. | | | | | |
| | 1,436,445,946,9C | | | 1 1 | S/L | | | |
| c 40-year Part V Summary (See instructions.) | | | 40 yrs. | MM | _S/L | | | |
| | | | | | Τ | | | |
| 21 Listed property. Enter amount from lin | | . 40 . 400 | | | 21 | | | |
| 22 Total. Add amounts from line 12, lines | | | | | | 015 350 | | |
| Enter here and on the appropriate line | | | ions · see instr. | | 22 | 215,350. | | |
| 23 For assets shown above and placed in | - | current year, enter the | | | - | | | |
| portion of the basis attributable to sec | | | 23 | | | | | |
| 718251 01-25-18 LHA For Paperwork Red | luction Act Notice, | see separate instruction | 1S . . | | | Form 4562 (2017) | | |

| Form 4562 (2017) | <u>Sea</u> | gull In | <u>dust</u> | <u>ries</u> | <u>for</u> | <u>the</u> | _Dis | sabled | 1,_ i r | 1C | _59- | 1879 | <u>968 </u> | Page 2 |
|---|--|------------------|------------------------|--------------------|---------------------|----------------------|----------|-----------------|----------------|---------------------------|-----------------|--------------------|--|----------------|
| Part V Listed Proper recreation, or a | | | rtain oth | ner vehic | les, cer | taın aırcı | aft, ce | rtaın comp | uters, a | nd prop | erty used | for ente | ertainme | nt, |
| Note: For any | | | sing the | standard | d milea | ge rate o | r dedu | cting lease | expens | e, com | olete or | ılv 24a, ? | 24b. colu | ımns |
| (a) through (c) | of Section A, | all of Section | B, and | Section C | of app | licable. | | | | | | | | |
| | | on and Other | | | ution: | See the I | nstruc | tions for lii | nits for i | passeng | er auton | nobiles.) | | |
| 24a Do you have evidence to s | 1 | | nt use cla | aimed? | <u> </u> | /es | _ No | 24b If "Y | es," is th | <u>ne evide</u> | nce writt | :en? | Yes | No |
| _ (a) | (b) Date | (c) Business/ | | (d) | l _{Ra} | (e) sis for depre | ciation | (f) | | (g) | | (h) | | (i) |
| Type of property (list vehicles first) | placed in | investment | | Cost or ther basis | | usiness/inve | stment | Recovery period | | thod/ ention | | eciation uction | | cted on 179 |
| (nat venicles mar) | service | use percenta | je j | | | use only |) | period | Conv | - T | 460 | 100001 | CC | ost |
| 25 Special depreciation allo | owance for q | ualified listed | property | placed i | n servic | ce during | the ta | x year and | l | | | | İ | |
| used more than 50% in | | | | | | | | | | 25 | 1 | | <u> </u> | |
| 26 Property used more tha | n 50% in a qi | ualified busine | ss use: | | | | | г | | | | | | |
| | | | 6 | | | | | | <u> </u> | | | | —— | |
| | | | 6 | | | | | _ | | | | | | |
| | | | 6 | | | | | L | <u> </u> | | L | | | |
| 27 Property used 50% or le | ss in a qualif | 1 | | | | | | | | | | | | |
| | | | 6 | | | | | | S/L· | | Ļ | | 1 | |
| | | | <u>~</u> | | + | | | ļ <u>-</u> | S/L - | | | | l | |
| | <u> </u> | | 6 | | | | | <u> </u> | S/L· | | | | 1 | |
| 28 Add amounts in column | | = | | | | , page 1 | | | | 28 | <u> </u> | | <u> </u> | |
| 29 Add amounts in column | (i), line 26. E | nter here and | on line | 7, page 1 | | | | | | | | 29 | L | |
| | | 8 | ection | B - Infori | mation | on Use | of Veh | icles | | | | | | |
| Complete this section for ve | | | - | | | | | | | • | | | | |
| to your employees, first ans | wer the ques | tions in Section | n C to s | ee if you | meet a | an except | ion to | completin | g this se | ection fo | r those v | rehicles. | | |
| | | | | | | | - | | | | | | | |
| | | | (| (a) | (| (b) | | (c) | (| d) | (| e) | (f | ŋ |
| 30 Total business/investment | miles driven di | uring the | Ve | hicle | Ve | hicle | v | 'ehicle | Vel | ncle | Vel | nicle | Veh | ncle |
| year (don't include commu | ting miles) | | | | | | | | | | | | L | |
| 31 Total commuting miles | driven during | the year | | | | | <u> </u> | | <u> </u> | | <u> </u> | | | _ |
| 32 Total other personal (no | ncommuting |) miles | | | | | | | | | | | 1 | |
| driven | | | | | | | <u> </u> | | | | | | | |
| 33 Total miles driven during | the year. | | İ | | | | | | | | | ľ | 1 | |
| Add lines 30 through 32 | | | | | | | | | | | | | | |
| 34 Was the vehicle available | e for persona | al use | _Yes | No | Yes | No | Yes | No | Yes | No_ | Yes | No | Yes | No |
| during off-duty hours? | , | | <u> </u> | | | <u> </u> | | | | | <u> </u> | | | |
| 35 Was the vehicle used pr | imanly by a r | more | | | | | | - | | | 1 | | | İ |
| than 5% owner or relate | d person? | | | | | <u> </u> | | | | | | | | |
| 36 Is another vehicle availa | ble for perso | nal | | | | | | | | | | | | |
| use? | | | <u> </u> | | | | | | | | | | | |
| | Section C | - Questions f | or Empl | loyers W | ho Pro | vide Veh | icles f | or Use by | Their E | mploye | es | | | |
| Answer these questions to d | letermine if y | ou meet an ex | ception | to comp | leting S | Section B | for ve | hicles use | d by em | ployees | who a | r en't mo | re than 5 | 5% |
| owners or related persons. | | | | | | | | | | | | | | |
| 37 Do you maintain a writte | n policy stat | ement that pro | hibits a | II persona | al use c | of vehicle | s, ınclı | uding com | muting, | by your | | | Yes | No |
| employees? | | | | | | | | | | | | | <u> </u> | 1 |
| 38 Do you maintain a writte | n policy state | ement that pro | ohibits p | ersonal u | use of v | ehicles, e | except | commutir | ng, by yo | ur | | | 1 | l |
| employees? See the ins | tructions for | vehicles used | by corp | orate offi | cers, di | rectors, | or 1% (| or more ov | vners | | | | <u> </u> | <u></u> |
| 39 Do you treat all use of ve | ehicles by em | nployees as pe | ersonal u | use? | | | | | | | | | | |
| 40 Do you provide more that | an five vehicle | es to your em | oloyees, | obtain in | nformati | ion from | your e | mployees | about | | | | [| |
| the use of the vehicles, | and retain the | e information i | eceived | ? | | | | - | | | | | | |
| 41 Do you meet the require | ments conce | erning qualified | autom | obile dem | nonstra | tion use? |) | | | | | | | |
| Note: If your answer to | | - | | | | | | vered veh | cles | | | _ | | |
| Part VI Amortization | | | | | | - | | <u></u> | | | | | | |
| (a) | | T | (b) | 1 | (c) | | | (d) | | (e) | | | (f) | |
| Description of | costs | Date | amortization begins | 1_ | Amortizat amount | ble t | | Code section | | Amortiza period or per | | An fo | nortization r this year | |
| 42 Amortization of costs the | at begins dui | ring your 2017 | | | | | | | | | <u> </u> | | | |
| | 7.0 | | | <u> </u> | | | | | T | | | | | |
| | #* ·- | | | | | | 1 | | | | $\neg \uparrow$ | | | |
| 43 Amortization of costs the | at began bef | ore your 2017 | tax year | | | | • | | | | 43 | | 2,4 | 478. |
| 44 Total. Add amounts in c | _ | = | - | | report | | | | | | 44 | | | 478. |
| 716252 01-25-18 | | | | | | | | | | | | Fr | orm 456 2 | |
| | | | | | | | | | | | | | | . , |