42	12/11/2019 9 21 AM	ľ					2	9393	3620	3 4 1 8 9 OMB No 1545-0687
Forr	-990-T		· (ai	nd proxy tax un	ider s	ectic	ncome Tax R on 6033(e))	eturn		2018
Depa	رخ' artment of the Treasury	For cale	endar year 2018 or other tax				and ending U5/3U and the latest informat		$\chi_{\alpha} \models_{\overline{\alpha}}$	pen to Public Inspection for
Inter	nal Révenue Service	▶ D	o not enter SSN number							01(c)(3) Organizations Only
Α	Check box if address changed	[Name of organization	(Check box if name			instructions)		loyer Identifica	
_	Exempt under section		KENTUCKY R					(Emp	loyees' trust, se	e instructions)
إ	X 501(C)(<u>03</u>)	Print	DEVELOPMEN	T COUNCIL,	, IN	<u>c.</u>				
ļ	408(e) 220(e)	or	Number, street, and room or		instructions			6	<u>1-0650</u>	0246
ļ	408A 530(a)	Туре	309 SPANGL	ER DR.					lated business	activity code
	529(a)		City or town, state or province	ce, country, and ZIP or foreign			40455		instructions)	1
	Book value of all assets		RICHMOND			KY	40475	5.	31120	
•	at end of year		roup exemption numbe			_		<u> </u>		
			heck organization type				501(c) trust		a) trust	Other trust
I	Enter the number of the of REAL ESTAT	E RE	NTAL						If o	nly one, complete
	Parts I–V If more than or			•	of the pre	evious	s sentence, complete	Parts I and I	i, complete	
	Schedule M for each add	_								
	During the tax year, was If "Yes," enter the name a				r a pare	nt-sut	osidiary controlled gro	oup?		Yes X No
	Tes, enter the hame a	and Iden	mying number of the pa	arent corporation						
J	The books are in care of	▶ S	PENCER CATH	EY				elephone num	ber ▶ 8	59-624-204
vi	The resource of		or Business Inco	ome			(A) Income		penses	(C) Net
1a	Gross receipts or sales									
b	Less returns and allowa	ances		c Balance	•	1c]				
2	Cost of goods sold (Sci	hedule A	A, line 7)			2				
3	Gross profit Subtract II	ne 2 fro	m line 1c			3				
4a	Capital gain net income	e (attach	Schedule D)			4a				
b	Net gain (loss) (Form 4797	, Part II, li	ine 17) (attach Form 4797)			4b				
С	Capital loss deduction f	for trusts	3			4c				
5	Income (loss) from partnership a	nd S corpo	ration (attach statement)		L	5				
6	Rent income (Schedule	: C)				6				
7	Unrelated debt-finance		•		L	7	42,23	7	55,195	-12,958
8	Interest, annuities, royalties		-	, ,	-	8		 		
9	Investment income of a sec			ion (Schedule G)	- }	9		 		
10	Exploited exempt activi				-	10		 		
11	Advertising income (Sc		•		-	11		HEADAIR HABIN		
12	Other income (See inst		•		-	12	42,23		55,195	
13	Total. Combine lines 3 Table Deduction		Taken Elsewhere	/Soc instruction	s for l	13 muta				
	deductions	s must	be directly connect	ted with the unre	lated b	ousir	ness income)	ilis) (Exce	pt for con	itributions,
14	Compensation of office			1.1.10					14	
15	Salaries and wages			REC	VEI V	<u> </u>	-701		15	
16	Repairs and maintenan	ce							16	
17	Bad debts			DEC	20	2019	0-0		17	
18	Unterest (attach schedul	e) (see	instructions)	43			1 <u>%</u>		18	
19	Taxes and licenses			OGE)EN	UF)		19	
	Charitable contributions (Se		•				1 1		20	
	Depreciation (attach Fo		•				21	28,		_
22	ባ	ed on S	chedule A and elsewhe	ere on return			22a	28,	653 22b	0
23	Depletion								23	
24	Contributions to deferre		ensation plans						24	
25.	Employee benefit progr		1. I IS						25	
26; 8चे	Excess exempt expens	•	•						26	<u> </u>
27:	Excess readership cost								27	
	Other deductions (attack							1	6 28 29	
(3) (3) (3) (3) (3) (3) (3) (3) (3) (3)	Total deductions. Add		-	المائد المتعالم معمليين			Manual live = 40	U	0 29 30	-12 050
	Unrelated business taxa			_				2	$O_1 = \begin{bmatrix} 30 \\ 31 \end{bmatrix}$	-12,958
31	Deduction for net opera	-	_	_	anuary	1, 201	o (see instructions)	Å.	31 32	-12,958
32	Unrelated business taxa								1 32	Form 990-T (2018)
DAA	For Paperwork Reduc	HOII ACI	. 1400.ce, 566 1115(fUCtio	J113.						roin 330-1 (2018)

	Total Unrelated Business Taxable income			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see			
	instructions)		33	
34	Amounts paid for disallowed fringes		34	
35	Deductions for net operating loss arising in tax years beginning before January 1, 2018 (see			
	instructions)	i	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum			
	of lines 33 and 34	4	36	0
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	76 1	37	1,000
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,			
	enter the smaller of zero or line 36		38	0
	Tax Computation			
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0 21)		39	
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on		40	
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041)		40	
41	Proxy tax. See instructions		41	
42	Alternative minimum tax (trusts only)	ŀ	42	
43	Tax on Noncompliant Facility Income. See instructions	ł	44	0
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies Tax and Payments		44	
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a	1		
45a	Other credits (see instructions) 45b			
b c	General business credit Attach Form 3800 (see instructions) 45c			
d	Credit for prior year minimum tax (attach Form 8801 or 8827) 45d			
e	Total credits. Add lines 45a through 45d		45e	
46	Subtract line 45e from line 44	- 1	46	
47	Other texes	- 1	47	
	Total tax Add lines 46 and 47 (see instructions)	ſ	48	0
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k) line 2		49	
	Payments: A 2017 overpayment credited to 2018			
b	2018 estimated tax payments 50b			
c	Tax deposited with Form 8868			
d	Foreign organizations Tax paid or withheld at source (see instructions) 50d			
	Backup withholding (see instructions) 50e			
f	Credit for small employer health insurance premiums (attach Form 8941)			
g	Other credits, adjustments, and payments Form 2439			
	Form 4136			
51	Total payments. Add lines 50a through 50g	<u></u> }	51	
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached	LJ	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed		53	0
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid		54	
	Enter the amount of line 54 you want. Credited to 2019 estimated tax ▶ Refunded	•	55	
-	Statements Regarding Certain Activities and Other Information (see instructions)			Tyes I Ne
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "YES," the organization may have to file			Yes No
	FINCEN Form 114, Report of Foreign Bank and Financial Accounts If "YES," enter the name of the foreign country			
	here ▶			X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign	trust?		X
58	If "YES," see instructions for other forms the organization may have to file Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$			
<u> </u>		holiof il	ıe	
	Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and titrue, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	ocher, it		ay the IRS discuss this return
Sig			wil (s/	ith the preparer shown below ee instructions)?
Her			[``	X Yes No
	Signature of officer Date Title Print/Type preparer's name Preparer's signature O/// Date		Check T	f PTIN
D	7/1//		salf-employed	P00322012
Paid	COMPANY DITCH	/19]		38-3658083
Prep	Tilliania Diagram and Diagram	5		
Use (DICUMOND BY ADATE	Phone n	. 85	59-623-4027
	Firm's address RICHMOND, RI 404/5			Form 990-T (2018)

64.88%

%

%

%

▶ 42,237 55,195 **▶**

42,237

Enter here and on page 1,

Part I, line 7, column (A)

55,195

Enter here and on page 1,

Part I, line 7, column (B)

Form 990-T (2018)

(1)

(2)

(3)

Totals

property (attach schedule)

See Statement 3

192,918

Total dividends-received deductions included in column 8

(attach schedule)

See Statement 4

297,361

Form 990-T (2018) KENTUCI	KY RIVER	FOOTHILI	LS		6:	1-06502	46	_	Page
Schedule F - Interest, Annu	iities, Royalti	es, and Rent	s From	Controlled	Orgar	nizations (s	ee instruction	าร)	
				pt Controlled					
1. Name of controlled		2 Employer	0.1101	lated income	4 7-1		S. Dont of polymer	4 that is	C Deductions describe
organization	ıdı	entification number	1	nrelated income ee instructions)		al of specified nents made	6 Part of column included in the co		6 Deductions directly connected with income
•	1		(1000) (01		poy		organization's gros	-	ın column 5
(1) N/A									<u> </u>
							-		
(2)									
(3)			 						
(4)			L						<u> </u>
Nonexempt Controlled Organizat	ions				Т				
		Net unrelated income	- 1	9 Total of specifie	.	10 Part of co	dumn 9 that is	1.	1 Deductions directly
7 Taxable Income	1	oss) (see instructions)		payments made	`	included in t	ne controlling	cor	nnected with income in
						organization's	gross income		column 10
(1)									
(2)									
(3)									
(4)									
•						Add column	ns 5 and 10	Ac	dd columns 6 and 11
						Enter here ar			er here and on page 1,
Tatala					_ [Part I, line 8,	column (A)	Par	rt I, line 8, column (B)
Totals Control of the		-4' - 504(-)4'	7) (0)	(47) 0	<u> </u>				
Schedule G – Investment In	come of a Se	ction 501(c)(7), (9), (or (17) Orga	ınızatı	on (see inst	ructions)		
		г							
				3 Dedu				1	5 Total deductions
1 Description of income		2 Amount of in	come	directly co		,,	4. Set-asides		and set-asides (cot 3
				(attach so	aredule)	,,	ttach schedule)		plus col 4)
(1) N/A						_			
(2)									
(3)									
(4)					 -				-
		Enter here and or Part I, line 9, col							ter here and on page 1, art I, line 9, column (B)
Tatala	_	raiti, iiie 5, coi	uiiii (^)						art i, iiile 3, coluitii (D)
Totals			Thom 4					##5 #	
Schedule I – Exploited Exen	npt Activity if	icome, Otner	inan A	avertising	Incom	ie (see instri	Jetions)		
,				4 Not recent floor					
)	2 Gross unrelated	3 Expeni		4 Net income (los from unrelated tra		6 Gross income	6 Expe	oncac	7 Excess exempt expenses
1 Description of exploited activity	business income	annanatad.		or business (colur	กก	from activity that	attributa		(column 6 minus
,	from trade or	productio	f	2 minus column 3		is not unrelated	colun	nn 5	column 5, but not
\	business	unrelate business in		If a gain, comput cols 5 through 7		business income			more than column 4)
			1	Ū					Codamir 4)
(1) N/A				· <u>-</u> ·					
(2)								_	
(3)									
		- 							
(4)	Enter here and or	Enter here a	and on						Enter here and
	page 1, Part I,	page 1, Pa	J##						on page 1,
	line 10, col (A)	line 10, col	(B)						Part II, line 26
Totals -									
Schedule J – Advertising Inc									
Part I Income From P	<u>eriodicals Re</u>	ported on a	<u>Consoli</u>	idated Basis	<u> </u>				
				4 Advertising					7 Excess readership
	2 Gross advertising	3. Direc	xt	gain or (loss) (col 2 minus col 3) I		5 Circulation	6 Read	ership	costs (column 6 minus column 5, but
1 Name of periodical	income	advertising	costs	a gain, compute		income	cos	ts	not more than
		[cols 5 through 7					column 4)
(1) N/A			1	44 - 1, 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1					
	-						 -		
(2)	 						 		
(3)		- 							-0.4277
(4)			ļii i						
Totals (carry to Part II, line (5))			1		- 1		1		1

¥ .

Totals, Part II (lines 1-5)

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) 7 Excess readership 4 Advertising 2 Gross gain or (loss) (col costs (column 6 5 Circulation 6 Readership 3 Direct advertising 2 minus col 3) If minus column 5, but 1 Name of periodical advertising costs income costs not more than ıncome a gain, compute column 4) cols 5 through 7 (1) N/A Totals from Part I Enter here and Enter here and on Enter here and on page 1, Part I, on page 1, Part II, line 27 page 1, Part I, line 11, col (A) line 11, col (B)

Schedule K - Compensation of Officers, Directors, a	and Trustees (see instructions) 2 Title	3 Percent of time devoted to business	Compensation attributable to unrelated business
(1) N/A		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			

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Form 990-T (2018)

Form **990-T**

Schedule M Charitable Contribution and Loss Calculation

Description Unrelated Business Activity

12,958

12,958

Name

2

3

KENTUCKY RIVER FOOTHILLS

Taxpayer Identification Number

61-0650246

3

531120 Unincorporated Business Income Tax Code

Amount of loss used in the current year

Prior year losses carried over to next year

Losses generated by current year activity

Total loss carried forward to 2019

Lessors of nonresidential buildi Activity

Worksheet Activity Charitable Contribution Deduction		
1 Activity Income (Schedule M, Line 13, col C)	1	-12,958
2 Activity Expense (does not include amount needed for Line 20)	2	
3 Net Income (Line 1 minus Line 2), if less than zero, enter -0-	3	0
4 Current activity contribution limit (Multiplier used is 10 %)	4	
5 Current year contributions	5	0
6 Prior year contributions (corporations only)	6	
7 Total available contributions (Add lines 5 and 6)	7	
8 Take the lesser of Line 4 or 7, Enter here and on Line 20 (Form 990T or Sch M)	8	
9 Remaining contributions (subtract line 8 from line 7)	9	
10 Allocate any remaining amount of Line 9 to taxable fringe benefits (within percent limits),		
Enter amount here and on Form 990-T, Line 33 as a negative amount	10	
11 Remaining contributions (carried forward for corporations only, See Worksheet 3)	11	0
Worksheet 2 Activity Losses and Carryforward Amounts		
1 Activity losses (do not include amounts before 2018)	1	

		Prior Year		Current Year	Next Year
Prior Tax Years	Contributions	Used	Carryover	Amount Used	Carryover
th 06/30/14					
th 06/30/15					
rd 06/30/16					
nd 06/30/17					
st 06/30/18					
Charitable Contribution Carryover T	o Current Year		0		
Current Year Amount					

4742 KENTUCKY RIVER FOOTHILLS

61-0650246

Federal Statements

FYE: 6/30/2019

Statement 1 - Form 990-T, Schedule E, Column 3a - Straight Line Depreciation

Description	Deduction
309 SPANGLER DRIVE 309 & 311 SPANGLER DRIVE BUILDING IMPROVEMENTS	28,477 176
Total	28,653

Statement 2 - Form 990-T, Schedule E, Column 3b - Other Deductions

	Deduction
309 SPANGLER DRIVE Interest	27,348
SUPPLIES, MAINTENANCE, & OFFICE	29,071
Total	56,419

Statement 3 - Form 990-T, Schedule E, Column 4 - Average Acquisition Debt

Description	Deduction
309 SPANGLER DRIVE	
Sum of Debt Outstanding at First of Each Month	2,315,010
Divided by Total Number of Months Property Held	12
Average Acquisition Debt	192,918

Statement 4 - Form 990-T, Schedule E, Column 5 - Average Adjusted Basis

Description	<u>Deduction</u>		
309 SPANGLER DRIVE Adjusted Basis on First Day Property Was Held Adjusted Basis on Last Day Property Was Held	311,687 31034		
Divided by 2	594,721 2		
Average Adjusted Basis	297,361		

Form 4562

Department of the Treasury

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.

OMB No 1545-0172

2018

hment ence No 17

Internal Revenue Service
Name(s) shown on return

KENTUCKY RIVER FOOTHILLS

Identifying number

DEVELOPMENT COUNCIL, INC. 61-0650246 Business or activity to which this form relates 309 SPANGLER DRIVE Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I 1,000,000 1 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2 2,500,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property Enter the amount from line 29 7 8 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 9 9 10 10 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 12 Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11 Carryover of disallowed deduction to 2019 Add lines 9 and 10, less line 12 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Don't include listed property See instructions Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions 14 15 15 Property subject to section 168(f)(1) election 28,653 Other depreciation (including ACRS) MACRS Depreciation (Don't include listed property. See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2018 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2018 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property placed in (business/investment use only-see instructions) 19a 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property S/L 25 yrs 25-year property 27 5 yrs S/L MM Residential rental property 27 5 yrs MM S/L 39 yrs MM S/L Nonresidential real property MM S/L Section C—Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System S/L 20a Class life S/L 12-year 12 yrs C 30-year 30 yrs MM S/L 40-year 40 yrs ММ S/L Part IV Summary (See instructions) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter

here and on the appropriate lines of your return. Partnerships and S corporations—see instructions

For assets shown above and placed in service during the current year, enter the

28,653

23