

Form 990-T

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

For calendar year 2018 or other tax year beginning JUL 1, 2018, and ending JUN 30, 2019

2018

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)

Department of the Treasury Internal Revenue Service

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

Form 990-T header section including: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets; D Employer identification number; E Unrelated business activity code; F Group exemption number; G Check organization type.

H Enter the number of the organization's unrelated trades or businesses. 1 Describe the only (or first) unrelated trade or business here PUBLICATION OF NEWSPAPER.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

J The books are in care of DEBBIE SWISHER Telephone number (859) 253-1993

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Includes rows for Gross receipts, Cost of goods sold, and Total. Includes a RECEIVED stamp dated MAR 02 2020.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions)

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Lists various deduction categories from 14 to 32.

SCANNED JUL 22 2020

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Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Includes lines 33-38 for unrelated business taxable income calculation.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 39-44 for tax computation.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 45a-45e, 46-49, 50a-50g, 51-55 for tax and payments.

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

Table with 3 columns: Question number, Question text, and Yes/No response. Includes questions 56-58 regarding foreign activities and tax-exempt interest.

Sign Here

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.

Signature of officer: [Signature] Date: 2/10/2020 Title: FINANCIAL OFFICER

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

Table with 4 columns: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's EIN, Firm's address, Phone no.

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ► **N/A**

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

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

(see instructions)

1. Description of property

(1)	
(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	0.	Total 0.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ►

(b) Total deductions. Enter here and on page 1, Part I, line 8, column (B) ► 0.

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		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
		STATEMENT 4	STATEMENT 5	
(1) CLIFFVIEW RETREAT CENTER	183,854.	48,343.	228,594.	
(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) 386,387.	768,873.	50.25%	92,387.	139,161.
(2)		%		
(3)		%		
(4)		%		
STATEMENT 2		STATEMENT 3		
Totals		Enter here and on page 1, Part I, line 7, column (A)		Enter here and on page 1, Part I, line 7, column (B).
Total dividends-received deductions included in column 8		92,387.		139,161.
				0.

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)					
(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)					
			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)	
Totals			0.	0.	

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)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)
Totals		0.		0.

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)						
(2)						
(3)						
(4)						
	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 28
Totals	0.	0.				0.

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) CROSSROADS	16,886.	44,225.				
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))	16,886.	44,225.	-27,339.			0.

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)						
(2)						
(3)						
(4)						
Totals from Part I	16,886.	44,225.				0.
Totals, Part II (lines 1-5)	16,886. <small>Enter here and on page 1, Part I, line 11, col (A)</small>	44,225. <small>Enter here and on page 1, Part I, line 11, col (B)</small>				0. <small>Enter here and on page 1, Part II, line 27</small>

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)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

FORM 990-T

NET OPERATING LOSS DEDUCTION

STATEMENT 1

AX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
6/30/13	166,533.	0.	166,533.	166,533.
6/30/14	113,369.	0.	113,369.	113,369.
6/30/15	69,926.	0.	69,926.	69,926.
6/30/16	169,455.	0.	169,455.	169,455.
6/30/17	200,993.	0.	200,993.	200,993.
6/30/18	116,186.	0.	116,186.	116,186.
OL CARRYOVER AVAILABLE THIS YEAR			836,462.	836,462.

FORM 990-T SCHEDULE E - UNRELATED DEBT-FINANCED INCOME STATEMENT 2
 AVERAGE ACQUISITION DEBT

DESCRIPTION OF DEBT-FINANCED PROPERTY	ACTIVITY NUMBER	AMOUNT OF OUTSTANDING DEBT
CLIFFVIEW RETREAT CENTER	1	
BEGINNING FIRST MONTH		386,387.
BEGINNING SECOND MONTH		386,387.
BEGINNING THIRD MONTH		386,387.
BEGINNING FOURTH MONTH		386,387.
BEGINNING FIFTH MONTH		386,387.
BEGINNING SIXTH MONTH		386,387.
BEGINNING SEVENTH MONTH		386,387.
BEGINNING EIGHTH MONTH		386,387.
BEGINNING NINTH MONTH		386,387.
BEGINNING TENTH MONTH		386,387.
BEGINNING ELEVENTH MONTH		386,387.
BEGINNING TWELFTH MONTH		386,387.
TOTAL OF ALL MONTHS		4,636,644.
NUMBER OF MONTHS IN YEAR		12
AVERAGE ACQUISITION DEBT		386,387.

TOTALS TO FORM 990-T, SCHEDULE E, COLUMN 4

FORM 990-T SCHEDULE E - UNRELATED DEBT-FINANCED INCOME STATEMENT 3
 AVERAGE ADJUSTED BASIS

DESCRIPTION OF DEBT-FINANCED PROPERTY	ACTIVITY NUMBER	AMOUNT
CLIFFVIEW RETREAT CENTER	1	
AVERAGE ADJUSTED BASIS OF PROPERTY FIRST DAY OF YEAR		793,044.
AVERAGE ADJUSTED BASIS OF PROPERTY LAST DAY OF YEAR		744,701.
AVERAGE ADJUSTED BASIS OF PROPERTY FOR THE YEAR		768,873.
TOTAL TO FORM 990-T, SCHEDULE E, COLUMN 5		

FORM 990-T SCHEDULE E - DEPRECIATION DEDUCTION STATEMENT 4

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION		48,343.	
- SUBTOTAL -	1		48,343.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 3(A)			48,343.

FORM 990-T SCHEDULE E - OTHER DEDUCTIONS STATEMENT 5

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
PROGRAM EXPENSES		6,080.	
SALARIES AND WAGES		75,744.	
ROLL TAXES AND FEES		6,155.	
EMPLOYEE BENEFITS		15,089.	
OPERATING SUPPLIES		1,645.	
OFFICE EXPENSE		803.	
TAXES AND LICENSES		596.	
BUILDING AND GROUNDS		5,538.	
VEHICLE AND TRUCK EXPENSE		2,920.	
SERVICE CONTRACTS		6,804.	
FOOD SUPPLIES		39,296.	
EQUIPMENT EXPENSES		7,893.	
TELEPHONE		5,821.	
UTILITIES		24,794.	

DUES AND SUBSCRIPTIONS			699.
ADVERTISING AND PROMOTION			3,235.
INSURANCE			9,913.
BANK CHARGES			160.
INTEREST			36.
PROFESSIONAL SERVICES			15,373.
MISCELLANEOUS			
	- SUBTOTAL -	1	228,594.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 3(B)			<u>228,594.</u>