	-73	١.					Ĭ	MB No 1545-0047			
	990-T]	Exempt Organization Business				<u> </u>	1343-041			
Form u	330 .	İ	(and proxy tax under sec			~~ .	1	2019			
		For cale	ndar year 2019 or other tax year beginning Jul 1				·				
	ent of the Treasury Revenue Service	► Do	Go to www.irs.gov/Form990T for instruction not enter SSN numbers on this form as it may be made				Open	to Public Inspection for)(3) Organizations Only			
	Check box if address changed		dentification number trust, see instructions)								
	B Exempt under section Solic Number, street, and room or suite no. If a PO box, see instructions Print or Number, street, and room or suite no. If a PO box, see instructions										
☐ 40		ousiness activity code									
☐ 40	e instruc	ctions)									
52	54180	00									
C Book value of all assets											
	305,860.		neck organization type 🕨 🗵 501(c) corporati		☐ 501(c) trust	<u></u> 401(a) trus	t			
			organization's unrelated trades or businesses.					r first) unrelated			
			Advertising revenue in parent education publication If C								
			at the end of the previous sentence, complete	Parts	s I and II, comple	te a Schedu	ile M f	or each additional			
			omplete Parts III-V.		 						
			e corporation a subsidiary in an affiliated group or and identifying number of the parent corporation		nt-subsidiary contr	ollea group?	•	· [] Yes [X] No			
			 Kathryn Tate 	JII. 🚩	Telephone r	number > (989)	496-1425			
			e or Business Income		(A) Income	(B) Expen		(C) Net			
1a	Gross receipts										
b	Less returns a			1c							
2	Cost of goods	sold (S	Schedule A, line 7)	2							
3	Gross profit. S	Subtract	line 2 from line 1c	3		20000000000000000000000000000000000000					
4a	Capital gain ne	et incor	ne (attach Schedule D)	4a		Par M					
b			4797, Part II, line 17) (attach Form 4797) .	4b			7				
C	•		n for trusts	4c		12.00		 			
5		trom	a partnership or an S corporation (attach				**				
•	statement) .	·, ·		5		La Section	MAT STATE				
6	=		le C)	7		 		<u> </u>			
7 8			sed income (Schedule E)	8							
9	•	•	ection 501(c)(7), (9), or (17) organization (Schedule G)	9							
10			Ivity income (Schedule I)	10	/						
11	Advertising inc	•	•	11/	22,453	15	,784	6,669			
12	-	-	structions; attach schedule)	12		TEP OF E					
13	Total. Combin			13	22,453		,784	6,669			
Part			Taken Elsewhere (See instructions for limit	tation	s on deductions.	(Deduction	s mus	st be directly			
			he unrelated business income.)								
14	•		cers, directors, and trustees (Schedule K) .				14				
15			· · · · · · · · / · · · ·				15	<u> </u>			
16	-		ance			• • • •	16				
17 18			ulule) (see instructions)				17				
19							19				
20	Depreciation (a				20						
21			imed on Schedule A and elsewhere on return				21b				
22	Depletion				· · <u> —· · · · · · · · · · · · · · · · · ·</u>		22				
23			rred compensation plans . RECEIV	<u>-D</u>			23				
24	Employee ben	efit pro	grams		ျပ္သု		24				
25			nses (Schedule I) 😂	ბე 4	180 180 180 180 180 180 180 180 180 180		25				
26			nses (Schedule I) JAN 0 4 2	ŲΖΙ	· 🐼 · · · · ·		26	6,669			
27	Other deduction		ach schedule)		-1 ⊈		27	<u> </u>			
28			dd lines 14 through 27 . OGDEN,)		28	6,669			
29 30			exable income before net operating loss deduction				29	0			
30	instructions) .		perating loss arising in tax years beginning		-	•	30				
31	•		exable income. Subtract line 30 from line 29	•			31				

Form 99	ю-т (2019)					Page 2					
Part		otal Unrelated Business Taxable Income									
32	Total of instruct	f unrelated business taxable income computed from all unrelated trades ions)	•	- 1	32	0					
33	Amount	ts paid for disallowed fringes		. [33						
34	Charital		34								
35	Total ur	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33									
36		ion for net operating loss arising in tax years beginning before Janu	iary 1, 2018 (s	see	35 36	0					
37		unrelated business taxable income before specific deduction. Subtract line		<u> </u>	37						
38		deduction (Generally \$1,000, but see line 38 instructions for exceptions) .		-	38						
39	Unrelat	ted business taxable income. Subtract line 38 from line 37. If line 38 is go smaller of zero or line 37	reater than line	37,							
					39	0					
Part		ax Computation			40	0					
40 ′		zations Taxable as Corporations. Multiply line 39 by 21% (0.21) Taxable at Trust Rates. See instructions for tax computation.			40						
41		punt on line 39 from: Tax rate schedule or Schedule D (Form 104			 						
					41						
42		ax. See instructions			42						
43		tive minimum tax (trusts only)			43 44						
44		Noncompliant Facility Income. See instructions			45	0					
45		Add lines 42, 43, and 44 to line 40 or 41, whichever applies	<u> </u>		43	- 0					
Part			Sa l		1						
			bb								
b			SC SC	-	1 1						
C			Sd Sd		1 1						
d		• • • • • • • • • • • • • • • • • • • •			46e						
e 47				F	47	0					
47 49		kes Check if from. Form 4255 Form 8611 Form 8697 Form 8866 Oth		- 1	48						
48 49		ax. Add lines 47 and 48 (see instructions)			49	0					
49 50		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), li			50						
50 51a				.	10						
b	-		ib	\neg	1 1						
C			lc		1						
d			d		1						
e	_	· · · · · · · · · · · · · · · · · · ·	e		:1						
f	•		of .	\dashv	.1						
g		redits, adjustments, and payments: Form 2439	<u> </u>		1						
9	Forn		 a		1						
52		ayments. Add lines 51a through 51g	ía I		52						
53	-	red tax penalty (see instructions). Check if Form 2220 is attached		-j	53						
54		e. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed		_	54						
55 /	-	syment. If line 52 is larger than the total of lines 49, 50, and 53, enter amoun	t overpaid	•	55	0					
56		e amount of line 55 you want Credited to 2020 estimated tax	Refunded	ı ▶ │	56						
Part		tatements Regarding Certain Activities and Other Information (se			V .						
57		time during the 2019 calendar year, did the organization have an interest in		r othe	r authori	ty Yes No					
٥.	over a f	financial account (bank, securities, or other) in a foreign country? If "Yes," the	ne organization	may h	nave to fi	le , ,					
		Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter									
	here ▶					×					
58	During t	he tax year, did the organization receive a distribution from, or was it the grantor of,	or transferor to, a	foreigi	n trust? .	×					
	-	" see instructions for other forms the organization may have to file.	-	,		, ,					
59	Enter th	ne amount of tax-exempt interest received or accrued during the tax year	\$.					
	Under	penalties of periury. I declare that I have examined this return, including accompanying schedules and	statements, and to the	best o	f my knowle	edge and belief, it is					
Sign	true, co	orrect, and complete Declaration of preparer (other than taxpayer) is based on all information of which pre	parer nas any knowied	M		discuss this return					
Here	ell Ka	the 12/28/20 Executive D	irector			arer shown below ns)? ⊠Yes □No					
_		ure of officer Date Title				⊠ies □iio					
Paid		Print/Type preparer's name Preparer's signature	Date	Check	c 🔀 ıf	PTIN					
	arer	Tina Hop	_		mployed	P00287237					
Prep	1	Firm's name ▶ TMH CONSULTING		Fırm's	EIN ▶ 26	-1142364					
Use	Offity	Firm's address ▶ 3743 E HUBBARD RD, MIDLAND, MI 48642				9)600-4051					

Sche	dule A-Cost of Goods	Sold. En	ter method of ir	nventor	y va	luation ►						
1	nventory at beginning of year 1 6 Inventory			it end of year	6							
2	Purchases	. [2		7	Cost of go	goods sold. Subtract line					
3	Cost of labor		3			6 from line	5 Enter here and in Part					
4a	Additional section 263A	costs				I, line 2		7_				
	(attach schedule)	4	ŧa 💮		8	Do the rul	es of section 263A (with	respe	ect to	Yes	No	
b	Other costs (attach sched		lb				roduced or acquired for re	esale)	apply			
5	Total. Add lines 1 through		5			to the orga			· ·			
	dule C-Rent Income (instructions)	From Re	al Property and	d Perso	onal	Property I	_eased With Real Prop	erty)				
1. Desc	nption of property									-		
(1)				-								
(2)												
(3)										_		
(4)												
		2. Rent receiv	ed or accrued									
	om personal property (if the percen personal property is more than 109 more than 50%)	(b) From real ar percentage of rent 50% or if the rent	for person	nal pro	perty exceeds		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)					
(1)												
(2)												
(3)												
(4)												
Total	·		Total				(b) Total deductions.					
	al income. Add totals of colu						Enter here and on page 1					
	nd on page 1, Part I, line 6, col						Part I, line 6, column (B)					
Sche	dule E—Unrelated Deb	t-rinance	ea income (see				3 Deductions directly conn	ected w	uth or allo	cable to	<u> </u>	
	1 Description of debt-	financed prop	erty			ome from or lebt-financed	debt-financed property					
Description of debt-financed propriate in the second control of the second control				property			(a) Straight line depreciation (b) Other deduction (attach schedule) (attach schedule)				s 	
(1)												
(2)												
(3)		-										
(4)		F A										
acquisition debt on or of or allocable to debt-financed debt-financed			e adjusted basis allocable to anced property ch schedule)		4 div	olumn rided umn 5	7. Gross income reportable (column 2 × column 6)		llocable d n 6 × tota 3(a) and	l of colu		
(1)			<u> </u>			%						
(2)						%						
(3)						%						
(4)						%						
							Enter here and on page 1, Part I, line 7, column (A)		nere and , line 7, d			
Totals						>						
Total o	dividends-received deduction	ns included	ın column 8				•					

Schedule F-Interest, Ann	uities	, Royalties,				Controlled Org	janizations (se	e instruc	ctions)	 		
Name of controlled organization		2 Employer fication number			ted income structions)	4. Total of specified payments made	5. Part of colum included in the organization's gro	controlling	conn	eductions directly ected with income in column 5		
(1)									<u> </u>	**		
(2)												
(3)					_							
(4)												
Nonexempt Controlled Organiz	zation	s 										
/ Laxable Income I		J. Net unrelated in (loss) (see instruct				tal of specified iments made	10 Part of column included in the corganization's great transfer of the column included in	controlling	conne	11. Deductions directly connected with income in column 10		
(1)												
(2)		•										
(3)												
(4)					_		-					
Totals							Add columns 5 Enter here and c Part I, line 8, co	on page 1,	Enter h	columns 6 and 11 here and on page 1, line 8, column (B)		
Schedule G-Investment	ncon	ne of a Sect	ion 5	01(c	1(7), (9),	or (17) Organi	zation (see inst	tructions	 :)			
1. Description of income		2. Amount o			3. direc	Deductions city connected ach schedule)	4. Set-aside	s	5. To and s	5. Total deductions and set-asides (col 3 plus col 4)		
(1)					·	· · · · · · · · · · · · · · · · · · ·						
(2)												
(3)												
(4)												
Totals Schedule I—Exploited Exe	▶	Part I, line 9, c	olumn	ĭ (A)	or Than	Advertising Ir	ocome (coo inst	ructions	Part I, II	re and on page 1, ne 9, column (B)		
Description of exploited activity		2. Gross unrelated business inco from trade of business	me or	3. Ex dir conne produ unr	penses rectly cted with uction of elated ss 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. Exp	penses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)		
(1)												
(2)						.= -						
(3)												
(4) Totals	.	Enter here and page 1, Part line 10, col (/	1	page	ere and on 1, Part I, I, col (B)					Enter here and on page 1, Part II, line 25		
Schedule J-Advertising I	ncon	ne (see instruc	ctions)								
Part I Income From P					Consoli	dated Basis						
1. Name of periodical		2. Gross advertising income			Direct sing costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	1	dership ests	7. Excess readership costs (column 6 minus column 5, but not more than column 4)		
(1) Youth Connections		22,45	3.	1	5,784.		0.	20	,595.	1		
(2)												
(3)												
(4)												
Totals (carry to Part II, line (5))	>	22,45	3.	1	5,784.	6,669.	0.	20	,595.	6,669.		

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	22,453.	15,784.		-		6,669.
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)	,		1	Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1–5)	22,453.	15 <u>,</u> 784.	-		<u> </u>	6,669.

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			

Form **990-T** (2019)