(of of x)		,				29	3-43	32814214
Form 990-T	Exe				iness Incom			OMB No 1545-0687
rom JJU I	For colone				der section 603		2018	മ∧ 4 7
Department of the Treasury	For calendar year 2017 or other tax year beginning 07/01, 2017, and ending 06/30, 201 Go to www irs gov/Form990T for instructions and the latest information.						20 =	<u> </u>
Internal Revenue Service	▶ Do n				y be made public if your		(c)(3)	Open to Public Inspection for 50.50 (c)(3) Organizations Only
A Check box if address changed		Name of organization (Check bo	х ıf лап	ne changed and see instruc	ctions)	D Emplo	yer identification number
]						(Emple	yees trust see manacaons ;
B Exempt under section	Print	FAMILY TREE,			 			720072
X 501(C)(S)	or l'	Number, street, and roo	m or suite no li	raPO	box, see instructions			730973
408(e) 220(e 408A 530(a	ן שקעיון	3805 MARSHAI	J. STREET	r				structions)
529(a)	1 -				IP or foreign postal code		7	
C Book value of all assets	1	WHEAT RIDGE,			.		5320	00
at end of year	F Grou	p exemption number	(See instructi	ons) I	>	· · ·		
4,873,193.		k organization type				1(c) trust	401(a)	trust Other trust
H Describe the organi								
I During the tax year,						ary controlled group	'. <i>.</i>	▶ Yes X No
J The books are in car		dentifying number of		poration	on ▶ Talaa	phone number ▶ 3	03-422-	-2122
Part I Unrelated	•				(A) Income	(B) Expe		(C) Net
1a Gross receipts or		- Dasiness incor			(A) medite	578 600 a 800 c . 798 000	CONTROL SALAR	
b Less returns and allow			c Balance ▶	1c				
2 Cost of goods so	old (Schedul	le A, line 7)		2		Described to		
3 Gross profit Sul	otract line 2	from line 1c		3		多是科技等等議會		
4a Capital gain net	income (att	tach Schedule D)		4a		A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		n
		art II, line 17) (attach F		4b				
		usts		4c		ESSENSE SE		
		s and S corporations (att		5		3.444	(W###)(#	*
		ome (Schedule E)		7	5,534	1.	9,090	-3,556.
_		s from controlled organizati		8	0,00		2,000	3,000.
		(c)(7), (9), or (17) organizat	•	-				
10 Exploited exemp	t activity ind	come (Schedule I) .		10				
		ıle J)		11				
		ions, attach schedule)		12		200000000		
13 Total, Combine I	ines 3 thro	ugh 12	/Coo.:50t	13	5,534	L	9,090	1
Part II Deduction					ons for ilmitations o orelated business i		(Except	for contributions,
							14	
17 Bad debts							17	
								9
21 Depreciation (at 22 Less depreciation	tach Form 4	4562)	· · · · · · · · · · · · · · · · · · ·	RE	CEIVE D: H			
				atom			225	
24 Contributions to	deferred co	ompensation plans .	. : [음] .	NOV	/ 1:9 2018 : Q		· · ·	
25 Employee benef	it programs		[四]					
26 Excess exempt e	expenses (S	ichedule I)	1111	~~	D. 17 h 1 . 4 4 T		1	
27 Excess readersh	ip costs (Sc	chedule J)		<u>UG</u>	DEN, UT			
28 Other deduction	s (attach so	chedule)						
29 Total deductions	s Add lines	s 14 through 28					29	
					deduction Subtract			
								2 556
					tract line 31 from line 30			
					for exceptions)			1,000.
					ne 32 ii iiie 33 is	-	. 1	-3,556.
For Panerwork Podus					 			

For Paperwork Reduction Act Notice, see instructions
7X2740 2000 8628FZ 5974 10/30/2018 12:38:28 PM

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Pai	t III Tax Computation	
35	Organizations Taxable as Corporations. See instructions for tax	x computation Controlled group
	members (sections 1561 and 1563) check here See instructions are	i I
	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable inci-	
- 4	(1) \$ (2) \$ (3) \$	bine brackets (in that broof)
h		
U	Enter organization's share of (1) Additional 5% tax (not more than \$11,750).	• • • • • • • • • • • • • • • • • • • •
	(2) Additional 3% tax (not more than \$100,000)	
36	Income tax on the amount on line 34	
30	Trusts Taxable at Trust Rates. See instructions for tax	·
		(Form 1041) ▶ 36
37	Proxy tax. See instructions	
38	Alternative minimum tax	
39	Tax on Non-Compliant Facility Income. See instructions)
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies	
Pa	rt IV Tax and Payments	
41 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	41a
þ	Other credits (see instructions)	41b
C	General business credit Attach Form 3800 (see instructions)	41c
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	41d
	Total credits Add lines 41a through 41d	
42	Subtract line 41e from line 40	42
43	Other taxes Check if from Form 4255 Form 8611 Form 8697 F	
44	Total tax. Add lines 42 and 43	44 0.
45 a	Payments A 2016 overpayment credited to 2017	
	2017 estimated tax payments	
	Tax deposited with Form 8868	[· [· [· [· [· [· [· [· [· [·
	Foreign organizations Tax paid or withheld at source (see instructions)	, I
۵	Backup withholding (see instructions)	
f		
	Other credits and payments Form 2439	* * * *
9	Form 4136 Other T	[otal \ 45 n
46	Total payments. Add lines 45a through 45g	
47	Estimated tax penalty (see instructions) Check if Form 2220 is attached	
48	Tax due If line 46 is less than the total of lines 44 and 47, enter amount owed	
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount over	
50	Enter the amount of line 49 you want Credited to 2018 estimated tax	Refunded 50
	t V Statements Regarding Certain Activities and Oth	
51	At any time during the 2017 calendar year, did the organization have	
٠.	over a financial account (bank, securities, or other) in a foreign coi	· · · · · · · · · · · · · · · · · · ·
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts	
	here	X
52	During the tax year, did the organization receive a distribution from, or was it	the grantor of, or transferor to, a foreign trust?
5 2	If YES, see instructions for other forms the organization may have to file	
<u>53</u>	Enter the amount of tax-exempt interest received or accrued during the tax yea Under penalties of penalties	
e:-	tale correct and amplet. Deplaration of preparer (other than taypayer) is based on all informs	ation of which preparer has any knowledge
Sig		May the IRS discuss this return
He		with the preparer shown below
	Sighatyre Welfield Date	Title (see Instructions)? X Yes No
Paid	Prohit/Type preparer's name Preparer's signature	Date Check If PTIN
	inarer ADAIT & SMITH CEA	mult 11-5-2018 self-employed P00958966
	e Only	Firm's EIN ▶ 44-0160260
	Firm's address > 111 SOUTH TEJON, SUITE 800, COLORADO	Those to
		Form 990-T (2017)

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Form 990-T (2017)

9,090.

Total dividends-received deductions included in column 8

5,534.

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Schedule F - Interest, Annu	ides, Royaldes		pt Controlled			tions (see	IIISU UCUOI	13)		
Name of controlled organization	2 Employer identification number	31	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 Organiz	ations	ı								
7 Taxable Income	8 Net unrelated in (loss) (see instruct		9 Total of sp payments r		inclu	art of column ided in the cor iization's gross	trolling		Deductions directly ected with income in column 10	
(1)										
(2)										
(3)										
(4)									r	
Totals	come of a Sec	tion 501(c	:)(7), (9), or		Par	r here and on p t I, line 8, colur n (see inst	nn (A)		here and on page 1, I, line 8, column (B)	
1 Description of income	2 Amount of income		directi	3 Deductions directly connected (attach schedule)		4 Set-asides (attach schedule)			5 Total deductions and set-asides (col. 3 plus col. 4)	
(1)			l .							
(2)			ļ							
(3)			 					-		
(4)	Fatanban and		A service of a consister	Tub on the Make in	100000000000000000000000000000000000000	2.5 Sec 1050	7 U 8 L A 7 L A 26. (LA	72 SU -		
Totals ▶	Enter here and Part I, line 9, c	olumn (A)							nter here and on page 1, Part I, line 9, column (B)	
Schedule I - Exploited Exe	mpt Activity In	come, Oth	er Than Adv	ertising Ir	come	(see instru	ctions)			
1 Description of exploited activity	2 Gross unrelated business income from trade or business	Gross directly connected with production of trade or		income (loss) hrelated trade ness (column is column 3) ain, compute 5 through 7	5 Gross income from activity that is not unrelated		6 Expenses attributable to column 5		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)					 					
(2)									 	
(3)	1								-	
(4)	T				 			-	 	
Totals	Enter here and on page 1, Part I, line 10, col (A)	Enter here a page 1, Pa line 10, col	anti, 🦄						Enter here and on page 1, Part II, line 26	
Schedule J - Advertising In						····	,			
Part I Income From Per	iodicals Report	ted on a C	<u>onsolidated</u>	Basis						
1 Name of periodical	2 Gross advertising income	3 Dire advertising	ct gain costs 2 mil a ga	or (loss) (col nus col 3) If nus, compute 5 through 7	s) (col 5 Circulation 3) If income inpute		6 Readership costs		7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)			78 86 K				1			
(2)										
(3)								-		
(4)										
Totals (carry to Part II, line (5))	,					······································			Form 990-T (2017)	

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 costs (column 6 2 Gross gain or (loss) (col 3 Direct 5 Circulation 6 Readership minus column 5, but 1 Name of periodical advertising 2 minus col 3) If advertising costs ıncome costs a gain, compute not more than ıncome cols 5 through 7 column 4) (1) (2) (3) (4) Totals from Part I. Enter here and on Enter here and on Enter here and page 1, Part I, page 1, Part I, on page 1, line 11, col (A) line 11, col (B) 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)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			

Form 990-T (2017)

FEDERAL FOOTNOTES

FORM 990-T, PART II, LINE 31 NET OPERATING LOSS DEDUCTION

			UTILIZED OR	UTILIZED OR	
			EXPIRED IN	EXPIRED IN	CARRIED
TAX YEAR GENE	RATED (UTILIZED)	ORIGINAL	PRIOR YEARS	CURRENT YEAR	FORWARD
1995	6/30/1996	3,843	(3,843)	-	-
1996	6/30/1997	15,069	(15,069)	-	-
1997	6/30/1998	1,229	(1,229)	-	-
1998	6/30/1999	-	-	-	-
1999	6/30/2000	2,716	-	-	2,716
2000	6/30/2001	2,781	-	-	2,781
2001	6/30/2002	-	-	-	-
2002	6/30/2003	117	-	•	117
2003	6/30/2004	4,563	-	-	4,563
2004	6/30/2005	810	-	-	810
2005	6/30/2006	2,642	-	-	2,642
2006	6/30/2007	-	-	-	-
2007	6/30/2008	3,604	•	-	3,604
2008	6/30/2009	-	-	-	•
2009	6/30/2010	-	-	-	•
2010	6/30/2011	1,220	-	-	1,220
2011	6/30/2012	2,361	-	-	2,361
2012	6/30/2013	917	-	-	917
2013	6/30/2014	2,488	-	-	2,488
2014	6/30/2015	5,810	-	-	5,810
2015	6/30/2016	3,680	-	-	3,680
2016	6/30/2017	1,261	-	-	1,261
2017	6/30/2018	3,556	-	-	3,556
NO. 0400V 505	W.D.D. TO 0040				
NOL CARRY FORM	VARD 10 2018				\$ 38,526