Form 990-T		Exempt Organization Business Income Tax Return							OMB No. 1645-0047		
					nd proxy tax ur				Ì	2019	
			For calendar year 2019 or other tax year beginning, and ending, and ending Go to www.irs.gov/Form990T for instructions and the latest information.						_ 2019		
į	Departm Internal	nent of the Treasury Revenue Service	▶	Do not enter SSN numbe					. 6	pan to Public Inspection for 1(c)(3) Organizations Only	
	A 🗀	Check box if address changed Name of organization (Check box if name changed and see instructions.)							D Employer identification number (Employees' trust, see instructions.)		
ĺ		mpt under section	Print	NEIGHBORHOO	D HOUSE, I	NC.				0568305	
		501(c ()3)	Type	Number, street, and room						ed business activity code structions)	
	-	408(e) 220(e)	.,,,,	1225 S. WEL							
		408A [530(a) 529(a)		City or town, state or pro		or foreig	n postal code				
	r Book	value of all assets	↓	F Group exemption num		<u> </u>	· · · · · · · · · · · · · · · · · · ·	······································	J	· · · · · · · · · · · · · · · · · · ·	
	at en	13,509,2	91.	G Check organization typ			501(c) trus	401(a	trust	Other trust	
	H Ento			ation's unrolated trades or		1		o the only (or first) ur			
	trade	e or business here 🕽	► <u>IR</u>	C 512(A)(7)	FRINGE TAX	ζ	. If only on	e, complete Parts I-V.	If more t	han one,	
				ace at the end of the previo	ous sentence, complete	Parts I an	d II, complete a Sched	ulc M for each addition	nal trado	or	
		ness, then complete			and a l					— — 	
				poration a subsidiary in an stifying number of the pares		arent-subs	idiary controlled group	7▶ {	Yes		
				STEPHEN HURD		DIRE	CTOR Teles	phone number 🕨 2	06-4	161-8430	
				de or Business Inc		<u> </u>	(A) income	(B) Expense		(C) Net	
֝֞֞֞֞֞֞֞֞֞֞֞֞֜֞֜֞֜֞֜֞֜֞֜֜֞֜֝	1a (Gross receipts or sale	es							-,-	
Ĵ	b L	ess returns and allo	wances] c Balance ▶	► <u>1c</u>				,	
3		Cost of goods sold (S				2					
4		Gross profit. Subtrac				3		<u> </u>	,		
5		Capital gain net incor	-	•		4a		G.	.	· · · · · · · · · · · · · · · · · · ·	
1				Part II, line 17) (attach Forr				<u> </u>			
2	5 I	apitai ioss deductio neoma (iosa) from a	n ior iru Loortaa	ists		4c					
불		Rent income (Sched					· · · · · · · · · · · · · · · · · · ·			* .	
ż				ome (Schedule E)		7					
5				and rents from a controlled		F) 8					
カ				ion 501(c)(7), (9), or (17) (organization (Schedule	G) 9					
		Exploited exempt act				10					
	11 /	Advertising Income (Schedu	le J)		. 11					
				ons; attach schedule)							
	18 Par			_{ugh 12} ot Taken Elsewhe		e for limit	ations on deduction	•]	1		
			s must	be directly connected v	with the unrelated be	ıl eaenieu	ations on deduction rcome.)	3.)			
	14	Compensation of or	fficers, c	lirectors, and trustees (Sch	nedule K)				14		
	15	Salaries and wages		·	BEC	FIVE			15		
	16	Repairs and mainte	nance			,			16		
	17	Bad debts				2 7 20	20 10		17		
	18	interest (attach sch	eanie) (see instructions)	\rightharpoonup	<u> </u>	ALLEN STORY OF THE STORY		18		
	19	raxes and licenses			0.00	7年 乳によ	!T				
	20	Depreciation (attack	n Form 4	9562)	\		<u>20</u>		- 1		
	21 22	Depletion	iaimeo i	on Schedule A and elsewhe				· · · · · · · · · · · · · · · · · · ·	21b		
	23	•	forred c				· · · · · · · · · · · · · · · · · · ·				
	24	Employee benefit p	outions to deferred compensation plans						23		
	25		-	Schedule I)	***************************************	••••		, , , , , , , , , , , , , , , , , , , ,	25		
	26	Excess readership	costs (S	chedule J)	***** *** *****	• • • • • • • • • • • • • • • • • • • •	•••• • • • • • • • • • • • • • • • • • •		26		
	27	Other deductions (a	attach se	chedule)		· · · · ·			27	· 	
	28	Total deductions.	Add line	s 14 through 27					28	0.	
	20	Unrelated bubliness	taxable	Incomo bofore net operation	ng loss deduction. Sut	tract line	28 from line 13		29	0.	
	30	Deduction for net o	perating) loss arising in tax years b	eginning on or after Ja	inuary 1, 2	018				
		(see instructions)							30	0.	
	31	Unrelated business	taxable	income. Subtract line 30 fi	<u>rom line 29</u>				31	<u> </u>	
	92370	1 01-27-20 LHA	or Pape	erwork Reduction Act Notic	ce, see instructions.					Form 990-T (2019)	

	hill Total Unvoleted Desirons Toyable Income	<u> </u>	06303Page 2
Par			
32	Total of unrolated business taxable income computed from all unrelated trades or businesses (see instructions)	32	0.
83	Amounts paid for disallowed fringes	33	
34	Charitable contributions (see instructions for limitation rules)	34	0.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33	35	
36	Deduction for not operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36	
87	Total of unrolated business taxable income before specific deduction. Subtract line 36 from line 35	37	
38	Specific doduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,000.
30	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,		
	enter the smaller of zero or line 37	39	0.
Par	t IV Tax Computation		
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	0.
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from;		
	Tax rate schedule or Schedule D (Form 1041)	41	
42	Proxy tax. See Instructions	42	
43	Alternative minimum tax (trusts only)	43	
44	Tax on Noncompliant Facility Income. See instructions	44	
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	0.
Par	t V Tax and Payments	<u> </u>	
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)		
b		†	
c	General business credit. Attach Form 3800		
d			
-	Total credits. Add ilnes 46a through 46d	46e	
47	Subtract line 46e from line 45	47	0.
48	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	48	
49	Total tax. Add lines 47 and 48 (see instructions)	49	0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	<u> </u>
	Payments: A 2018 overpayment credited to 2019	50	
		ł ⁻ 1	
	2019 estimated tax payments 51b 4,520.	∤ ·	
	Tax deposited with Form 8868	4	
	1 Foreign organizations: Tax paid or withheld at source (see instructions)	†	
	Backup withholding (see instructions)	}	
ī	Credit for small employer health insurance premiums (attach Form 8941)	-	
6	Credit for small employer health insurance premiums (attach Form 8941) 51f Other credits, adjustments, and payments: Form 2439 Form 4136 Other 51g		
	Form 4136 Other ' Total ▶ <u>51g</u>	4 1	
52	Total payments. Add lines 51a through 51g	52	4,520.
53	Fstimated tax penalty (see instructions). Check if Form 2220 is attached	53	
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	64	····
55	Overpayment. If linc 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	4,520.
56	Enter the amount of line 55 you want: Credited to 2020 estimated tax	56	4,520.
	t VI Statements Regarding Certain Activities and Other Information (see instructions)		
67	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		1, 1
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country		
	here		X
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		X
	If "Yes," see Instructions for other forms the organization may have to file.		
_59	Enter the amount of tax-exempt Interest received or accrued during the tax year		1 1
	Under penalties of perjury, I declare that I have exemined this return, including accompanying schedules and statements, and to the best of my known	wiedge and bei	ief, it is true,
Sigr	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
Sign	Under penalties of perjury, I declare that I have exemined this return, including accompanying schedules and statements, and to the best of my known or confect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	lay the IRS disc	use this return with
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known of the complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. 3 23 20 FINANCE DIRECTOR		use this return with vn below (see
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known of the penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known of the penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known of the penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known of the penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known of the penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known of the penalties of the p	May the IRS disc the preparer shown astructions)?	use this return with vn below (see
Her	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 complete Declaretion of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. 3 3 20 FINANCE DIRECTOR	May the IRS discrete shown astructions)?	use this return with vn below (see
Here Pai	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known of the confect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. 3 3 20 FINANCE DIRECTOR 1 1 1 1 1 1 1 1 1	May the IRS disc the preparer show nstructions)?	use this return with vn below (see K Yes No
Pai Pre	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known of the confect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. 3 3 20 FINANCE DIRECTOR Itilities	May the IRS disconne preparer shown astructions)?	use this return with vn below (see K. Yes No
Pai Pre	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known of the confect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Significate Date Check Self-employed	May the IRS disconne preparer shown astructions)?	use this return with vn below (see K Yes No
Pai Pre	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known of the confect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Significate Date Tittle	Asy the IRS discone preparer shownstructions)?	use this return with yn below (see K. Yes No
Pai Pre Use	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my known of the confect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Significate Date Check Self-employed	Asy the IRS discovered shown structions)? PTIN POO: 91-2	use this return with vn below (see K. Yes No

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FOOTNOTES

STATEMENT

FORM 990-T, PART III, LINE 33 SECTION 512(A)(7) REPEAL FRINGE TAX RETROACTIVELY AND TAXPAYER REQUESTS A FULL REFUND OF ESTIMATED TAX PAID

4,520.

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ORM 990-T	CON	TRIBUTIONS SUMMARY	·	STATEMENT	
QUALIFIED	CONTRIBUTIONS SUBJEC	CT TO 100% LIMIT			
FOR TAX FOR TAX FOR TAX	OF PRIOR YEARS UNUS YEAR 2014 YEAR 2015 YEAR 2016 YEAR 2017 YEAR 2018	ED CONTRIBUTIONS 90,710			
TOTAL CARI	RYOVER RENT YEAR 10% CONTRI	BUTIONS	90,710		
	TRIBUTIONS AVAILABLE NCOME LIMITATION AS	90,710			
EXCESS 10	& CONTRIBUTIONS 0% CONTRIBUTIONS ESS CONTRIBUTIONS		90,710 0 90,710		
ALLOWABLE	CONTRIBUTIONS DEDUC	TION	· · · · · · · · · · · · · · · · · · ·	:	
TOTAL CON	TRIBUTION DEDUCTION				