Form 920-T.	Exempt Organization Business Income Tax Return	OMB No 1545-0047
rum OZ 5	(and proxy tax under section 6033(e))	0040
,	For calendar year 2019 or other tax year beginning JUL 1, 2019, and ending JUN 30, 2020	2 2019
Department of the Treasury Internal Revenue Service	 ▶ 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). 	Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if address changed	Name of organization (Employer identification number (Employees' trust, see instructions)
B Exempt under section	Print THE ARC OF SOUTHWEST WASHINGTON	91-0759016
X 501(c)(3 0	1 - I NUITIUGI, SUIGEL AND TOUTH OF SUILE HO. IF A F.O. DOX. SEE HISU UCUOHS.	Unrelated business activity code (See instructions)
408(e)220(e)	Type PO BOX 2608	(coo maradiana)
408A 530(a) 529(a)		531190
C Book value of all assets at end of year	F Group exemption number (See instructions.)	
324,8	333. G Check organization type X 501(c) corporation 501(c) trust 401(a)	trust Other trust
H Enter the number of the	organization's unrelated trades or businesses. 1 Describe the only (or first) unr	elated
trade or business here	► <u>OFFICE BILLBOARD RENTS</u> . If only one, complete Parts I-V. I	f more than one,
describe the first in the b	plank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each addition	al trade or
business, then complete		
	s the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?	Yes X No
	and identifying number of the parent corporation.	
	f ► JEFFREY ANGELO Telephone number ► 3	
	ed Trade or Business Income (A) Income (B) Expenses	(C) Net
1 a Gross receipts or sale		
b Less returns and allo		
2 Cost of goods sold (S		
3 Gross profit. Subtrac		
· -	me (attach Schedule D)	·
	n 4797, Part II, line 17) (attach Form 4797)	
c Capital loss deductio		
	a partnership or an S corporation (attach statement) 1	20 701
6 Rent income (Schedi	· · · · · · · · · · · · · · · · · · ·	20,701.
	oyalties, and rents from a controlled organization (Schedule F)	
	of a section 501(c)(7), (9), or (17) organization (Schedule G)	
	tivity income (Schedule I)	
11 Advertising income (· · · · · · · · · · · · · · · · · · ·	
,	nstructions; attach schedule)	
13 Total. Combine line		20,701.
Part II Deduction	one Not Taken Fleawhere (See justing for limitations on deductions)	20,701.
(Deduction	is must be directly connected with the unrelated business income.)	
	officers, directors, and trustees (Schedule K)	14
15 Salaries and wages		15
16 Repairs and mainte		16
17 Bad debts		17
18 Interest (attach sch	nedule) (see instructions) OGDEN, U	18
19 Taxes and licenses	OGDEN, C	19
20 Depreciation (attack	th Form 4562) <u>20</u>	
21 Less depreciation of	claimed on Schedule A and elsewhere on return 21a	21b
22 Depletion		22
23 Contributions to de	eferred compensation plans	23
24 Employee benefit p	programs	24
25 Excess exempt exp		25
26 Excess readership		26
27 Other deductions (a		27 63.
	Add lines 14 through 27	28 63.
	s taxable income before net operating loss deduction. Subtract line 28 from line 13	29 20,638.
	operating loss arising in tax years beginning on or after January 1, 2018	_
(see instructions)		30 0.
	s taxable income. Subtract line 30 from line 29	31 20,638.
923701 01-27-20 LHA	For Paperwork Reduction Act Notice, see instructions.	Form 990-T (2019)

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ا Form 99 <u>0</u>	Q-T (2019)	THE ARC OF SOUTHWEST WASHINGTON			91-1	075901	6 _{Раде} 2
Part		otal Unrelated Business Taxable Income				<u> </u>	
32	Total of u	inrelated business taxable income computed from all unrelated trades or businesses (see in	structions)	1	32	20,	638.
33	Amounts	paid for disallowed fringes			33		
		e contributions (see instructions for limitation rules)		_	3/4		0.
35	Total unr	elated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 3	4 from the sur	m of lines 32 and 33	35		<u>638.</u>
		n for net operating loss arising in tax years beginning before January 1, 2018 (see instruction		STMT 2	2 36	20,	<u>638.</u>
37	Total of u	inrelated business taxable income before specific deduction. Subtract line 36 from line 35		,	37		
38	•	deduction (Generally \$1,000, but see line 38 instructions for exceptions)		7	38	1,	000.
39		d business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37,					
-		smaller of zero or line 37			39		0.
		ax Computation					
40		ations Taxable as Corporations. Multiply line 39 by 21% (0.21)		•	40		0.
41		axable at Trust Rates. See instructions for tax computation. Income tax on the amount on I	line 39 trom	:			
		x rate schedule or Schedule D (Form 1041)		.	41		
	-	x. See instructions		•	42		
43		ve minimum tax (trusts only)			43		
44		Ioncompliant Facility Income. See instructions			44		
45		Id lines 42, 43, and 44 to line 40 or 41, whichever applies			45		0.
Part		ax and Payments	40 T				
	-	tax credit (corporations attach Form 1118; trusts attach Form 1116)	46a		-		
p		edits (see instructions)	46b		\dashv \sqcup		
C		business credit. Attach Form 3800	46c				
đ		r prior year minimum tax (attach Form 8801 or 8827)	46d		┥ │		
		edits Add lines 46a through 46d			46e		
47		: line 46e from line 45 xes. Check if from:	—		47		0.
48			06 L UII	16f (attach schedule)		·	
49		x. Add lines 47 and 48 (see instructions)			49		0.
50 51 -		t 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	E40		50		0.
		ts: A 2018 overpayment credited to 2019	51a		-		
		timated tax payments	51b		- I		
	-	osited with Form 8868	51c		\dashv \sqcup		
	-	organizations: Tax paid or withheld at source (see instructions)	51d		\dashv \vdash		
	•	withholding (see instructions)	51e 51f		\dashv \vdash		
ĭ -		or small employer health insurance premiums (attach Form 8941) edits, adjustments, and payments: Form 2439	311		-		
g			E4.				
F0		nyments. Add lines 51a through 51g	51g		52		
52 53		ed tax penalty (see instructions). Check if Form 2220 is attached			53		
54		e. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed			- 54		
55 55		ment. If line 52 is less than the total of lines 49, 50, and 53, enter amount overpaid			55		
56		e amount of line 55 you want: Credited to 2020 estimated tax		Refunded >	56		- · ·
		Statements Regarding Certain Activities and Other Information	on (see ins		- 56		
57		ime during the 2019 calendar year, did the organization have an interest in or a signature or				v	es No
37	-	inancial account (bank, securities, or other) in a foreign country? If "Yes," the organization m		-		10	ES 140
		Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the fo	-				
	here	L	roigh count	· y			X
58		the tax year, did the organization receive a distribution from, or was it the grantor of, or trans	eferor to a	foreign trust?			X
30		see instructions for other forms the organization may have to file.	31010110, 0	loroigh trast:		 	
59		e amount of tax-exempt interest received or accrued during the tax year					
	Un	nder penalties of periury. I declare that I have examined this return, including accompanying schedules and s	statements, an	d to the best of my k	nowledge and	d belief, it is true	e,
Sign	າ	rrect, and complete Declaration of preparer (other than taxpayer) is based on all information of which prepar	er has any kn	owledge T			
Here	е 👠	DIRECTO	R	-	-	discuss this ret shown below (s	
		Signature Date Title				7 X Yes	No
		Print/Type preparer's name Preparer's signature Dat	te	Check	if PTIN		
n. ·	:-1	Topard Sugnature		self- employe			
Pai		MICHAEL GILLESPIE MICHAEL GILLESPIE 02	/02/2			023774	45
	parer	Firm's name ▶ PLYMALE & GILLESPIE CPAS, PLLC	.,, -	Firm's EIN		7-32899	
USE	e Only	P.O. BOX 765					-
		Firm's address VANCOUVER, WA 98666-0765		Phone no.	(360)	695-00	068
923711	1 01-27-20				•	Form 990	

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions) 1. Description of property (i) BILLBOARD AND OFFICE RENTS (2) (3) (4) 2. Rent received or secretary (a) From personal property (if the personal property (if	Schedule A - Cost of Goods	s Sold. Enter	method of invent	tory valuation N/A					
3 Cost of labor 4 A Additional section 263A costs (attach schedule) 4 B Do ther rolles of section 263A (with respect to properly produced or acquired for resale) apply to the organization? Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions) 1. Description of property (1) BTLLBOARD AND OFFICE RENTS (2) (3) (4) 2. Rent received or security (if the personal property (1 Inventory at beginning of year	1		6 Inventory at end of year	r		6		
4a Additional section 283A costs (attach schedule) 4b	2 Purchases	2		7 Cost of goods sold. Su	btract li	ne 6		•	
(attach schedule) 4a 4b 5 Total Add lines 'through 4b 6 Total Add lines 'through 4b 6 Total Add lines 'through 4b 6 Total Add lines 'through 4b 7 Total State 'through 4b 8 Do the rules of section 263A (with respect to property of the percentage of through 4b 9 Total State 'through 4b 9	3 Cost of labor	3_		from line 5. Enter here	and in P	art I,	l		
b Other costs (attach schedule) 5 Total Add lines I through 4b 5 Total Add lines Add lines Add with the income I through 4b 5 Total Add lines Add lines Add with the income I through 4b 5 Total Add lines Add li	4 a Additional section 263A costs			line 2			7	<u></u>	
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Schedule E - Unrelated Debt-Financed Income (see instructions) 2. Gross income from or allocable to debt-financed property 1. Description of debt-financed property 2. Gross income from or allocable to debt-financed property (a) Straight line depreciation (attach schedule) (b) Other deductions (attach schedule) (1) (2) (3) (4) 4. Amount of average acquisition debt-financed property (attach schedule) 5. Average adjusted basis of or allocable to debt-financed property (attach schedule) 5. Average adjusted basis of or allocable to debt-financed property (attach schedule) (1) (2) (3) (4) 4. Amount of average acquisition 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 (6) Column 5 (7) Gross income reportable (column 6 x total of columns 3(a) and 3(b)) (1) (2) (3) (4) (4) (5) (6) (7) (7) (8) (8) (8) (9) (9) (9) (1) (9) (1) (1) (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (9) (9) (9) (1) (1) (1) (1			iter -		0.	Enter here and on page 1,	•		0.
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1. Description of debt-financed property (1) (2) (3) (4) 4. Amount of average acquisition debt of initiation of a locable 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 x total of columns 3(e) aird 3(b)) (1) (2) (3) (4) 6. Column 4 divided by column 5 7. Gross income reportable (column 2 x column 6 x total of columns 3(e) aird 3(b)) (2) (3) (4) (4) (5) (6) (7) (7) (8) (8) (8) (8) (8) (8				2. Gross income from					
(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 8) (column 6 x total of columns 3(a) aird 3(b)) (1) % (2) % (3) (4) Enter here and on page 1, Part I, line 7, column (B) Totals	1. Description of debt-fi	nanced property			(a)				
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(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) (column 6 x total of columns 3(a) arrd 3(b)) (1) (2) (3) (4) Enter here and on page 1, Part I, line 7, column (A) Fortals Totals							_		
(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) (column 6 x total of columns 3(a) and 3(b)) (1) (2) (3) (4) Enter here and on page 1, Part I, line 7, column (A) Totals			.						
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. Altocable deductions (column 6 x total of columns 3(a) and 3(b)) (1) (2) (3) (4) Enter here and on page 1, Part I, line 7, column (A) Fortals	-								
(2)	Amount of average acquisition debt on or allocable to debt-financed	of or a	allocable to inced property			reportable (column		(column 6 x total of co	
(2)	(1)	 		%	<u> </u>		+		
(3)		<u> </u>	· · · · · ·				\top		_
(4) % Enter here and on page 1, Part I, line 7, column (A) Totals O • O •							1		
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) O • O •				+ · · · · · ·					
	_X./L	•	· · · ·						
	Totals			.		n	,		Λ.
	-	ncluded in columi	n 8				-		0.

Schedule F - Interest,	Amunde	o, noyal	ues, di		Controlled O			<u> atiol</u>	(see ins	truction	s)	
1. Name of controlled organiza	ation	2. Emp Identific numt	ation	3. Net unr	elated income instructions)	dated income nstructions) 4 Total of payments		s pecified s made 5. Part of column 4 that is included in the controlling organization's gross income		rolling	Deductions directly connected with income in column 5	
(1)							· · · · · · · · · · · · · · · · · · ·					
(2)												
(3)												
(4)				1								
Nonexempt Controlled Organ	nizations											
7. Taxable Income		inrelated incom see instructions		9. Total	of specified pay made	ments	10. Part of colu in the control gros	ımn 9 tha lıng orgai s income	nization's	11. De with	ductions directly connected income in column 10	
(1)												
(2)					_							
(3)										٠		
(4)												
							Add colu Enter here an line 8,		1, Part I,	Enter h	id columns 6 and 11 ere and on page 1, Part I, line 8, column (B)	
Totals						<u> </u>			0.		0.	
Schedule G - Investm (see ins	ent Inco tructions)	me of a	Sectio	n 501(c)((7), (9), or	(17) O	rganizatio	n				
1. Des	scription of inco	ome			2. Amount o	Income	3. Deduction directly connumber (attach sche	ected	4 Set- (attach s	asides schedule)	5, Total deductions and set-asides (col 3 plus col 4)	
(1)												
(2)	-			-								
(3)												
(4)												
					Enter here and Part I, line 9, c					,	Enter here and on page 1 Part I, line 9, column (B)	
Totals				<u> </u>		0.	ļ				0.	
Schedule I - Exploited (see inst		t Activity	Incon	ne, Othe	r Than A	dvertis	ing Incom	е				
Description of exploited activity	unrelated	Gross d business ne from business	directly with p of ur	xpenses connected roduction nrelated ss income	4. Net incorfrom unrelate business (cominus colun gain, computhrough	d trade or olumn 2 nn 3) If a te cols 5	5. Gross inc from activity is not unrela business inc	that ated	attribut	penses able to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)										-		
(2)												
(3)												
(4)												
	page	ere and on 1, Part I, , col (A)	page	ere and on 1, Part I, 0, col (B)				,		,	Enter here and on page 1, Part II, line 25	
Totals	<u> </u>	0.		0.	<u>. </u>		.1 4	,			0.	
Schedule J - Advertis												
Part I Income From	Periodi	cals Rep	orted o	on a Cor	nsolidated	d Basis	5					
1. Name of periodical		2. Gross advertising income	ad	3. Direct vertising costs	or (loss) (col 3) If a	rtising gain col 2 minus gain, compi through 7	s 5. Circula		6. Read		7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)				-		•						
(2)]	
(3)												
(4)			_ _		┨				<u> </u>		•	
Totals (carry to Part II, line (5))	•		0.).						0.	
			 1		• • • • • • • • • • • • • • • • • • • •							

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	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	0.	0.	the strategic of the	1,5	150	0
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5)	0.	0.	- A A CO C	13 11	and the same	0

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			0.

Form 990-T (2019)

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FORM 990-T		OTHER I	DEDUCTIONS	STATEMENT	1
DESCRIPTIO	и			NUOMA	r.
ALLOCATED	 INTEREST EXPENSE			 	63.
TOTAL TO F	ORM 990-T, PAGE 1,	LINE 27			63.
FORM 990-T	NET	OPERATING	LOSS DEDUCTION	STATEMEN	ր 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOU APPLI			
06/30/18	88,928.	16	,779.	72,149. 72,	149.
NOL CARRYO	VER AVAILABLE THIS	YEAR		72,149. 72,:	149.