990-T Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e)) *2*017 For calendar year 2017 or other tax year beginning ► Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3) Internal Revenue Service D Employer identification number (Employees' trust, see Name of organization (Check box if name changed and see instructions.) Check box if address changed B Exempt under section Print CONSEJO COUNSELING & REFERRAL SERVICE 91-1021247 E Unrelated business activity codes X 501(c)(3) or Number, street, and room or suite no. If a P.O. box, see instructions. See instructions) Type 408(e) [1220(e) 3808 S ANGELINE ST 408A _]530(a) City or town, state or province, country, and ZIP or foreign postal code 529(a) SEATTLE, WA 531120 98118 C Book value of all assets at end of year F Group exemption number (See instructions.) 10,352,700. G Check organization type ► X 501(c) corporation 501(c) trust 401(a) trust Other trust H Describe the organization's primary unrelated business activity. DEBT FINANCED RENTAL ACTIVITY During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If "Yes," enter the name and identifying number of the parent corporation. The books are in care of IRINA ROJKOVA Telephone number \triangleright 206-461-4880 Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales b Less returns and allowances c Balance 1c 2 Cost of goods sold (Schedule A, line 7) 2 Gross profit. Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D) 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b c Capital loss deduction for trusts 4c 59 ncome (loss) from partnerships and S corporations (attach statement) 60 Rent income (Schedule C) 5 6 Unrelated debt-financed income (Schedule E) 110,186. 118,415. -8,2297 Interest, annuities, royalties, and rents from controlled organizations (Sch. F) 8 B Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 P Exploited exempt activity income (Schedule I) 10 0 Advertising income (Schedule J) 11 Other income (See instructions; attach schedule) 12 Total. Combine lines 3 through 12 13 110,186. 118,415 瑙 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income.) ã 14 Compensation of officers, directors, and trustees (Schedule K) 14 15 Salaries and wages 15 16 Repairs and maintenance 16 RECEIVED Bad debts 17 17 RS-OSC 18 Interest (attach schedule) 18 NOV 1 5 2018 19 Taxes and licenses 19 20 Charitable contributions (See instructions for limitation rules) 20 OGDEN, UT 21 Depreciation (attach Form 4562) 43,335. 22 Less depreciation claimed on Schedule A and elsewhere on return 43,335. 22b 23 23 24 Contributions to deferred compensation plans 24 25 Employee benefit programs 25 26 Excess exempt expenses (Schedule I) 26 27 Excess readership costs (Schedule J) 27 28 Other deductions (attach schedule) 28 29 Total deductions. Add lines 14 through 28 29 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 -8,229. 31 Net operating loss deduction (limited to the amount on line 30) SEE STATEMENT 1 31 32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 -8,229. 32 33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions) 1,000. 33 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or 34 line 32 -8.229

orm 990-T		<u>IG & REFERRAL SERVI</u>	CE	91-10:	21247	Page 2
Part I	II Tax Computation					
35	Organizations Taxable as Corporations See ins	structions for tax computation.		·		
	Controlled group members (sections 1561 and 1	1563) check here 🕨 🔲 See instruction	ons and:			
a	Enter your share of the \$50,000, \$25,000, and \$	9,925,000 taxable income brackets (in tha	nt order):			
	(1) \$ (2) \$	(3) [\$				
b	Enter organization's share of: (1) Additional 5%	tax (not more than \$11,750) \$				
	(2) Additional 3% tax (not more than \$100,000)	 \$			1	
C	Income tax on the amount on line 34			>	35c	0.
36	Trusts Taxable at Trust Rates. See instructions	for tax computation. Income tax on the ar	mount on line 34 from:			_
	Tax rate schedule or Schedule D (Form 1041)		•	36	
37	Proxy tax. See instructions			>	37	•
38	Alternative minimum tax				38	
39	Tax on Non-Compliant Facility Income See ins	tructions			39	
40	Total. Add lines 37, 38 and 39 to line 35c or 36,	whichever applies			40	0.
Part I	V Tax and Payments					
41a	Foreign tax credit (corporations attach Form 111	8; trusts attach Form 1116)	41a			
b	Other credits (see instructions)		41b			
C	General business credit. Attach Form 3800		41c			
d	Credit for prior year minimum tax (attach Form 8	3801 or 8827)	41d			
е	Total credits. Add lines 41a through 41d				41e	
42	Subtract line 41e from line 40				42	0.
43	Other taxes. Check if from: Form 4255	Form 8611 Form 8697 Fc	orm 8866 🔲 Other	(attach schedule)	43	
44	Total tax. Add lines 42 and 43				44	0.
45 a	Payments: A 2016 overpayment credited to 201	7	45a			
b	2017 estimated tax payments		45b			
C	Tax deposited with Form 8868		45c			
d	Foreign organizations: Tax paid or withheld at so	ource (see instructions)	45d			
е	Backup withholding (see instructions)		45e			
f	Credit for small employer health insurance prem	iums (Attach Form 8941)	45f			
g	Other credits and payments:	Form 2439				
	Form 4136	Other Tota	l ▶ 45g		_	
46	Total payments. Add lines 45a through 45g				46	
47	Estimated tax penalty (see instructions). Check i	f Form 2220 is attached 🕨 🗔			47	
48	Tax due. If line 46 is less than the total of lines 4	4 and 47, enter amount owed		•	48	0.
49	Overpayment If line 46 is larger than the total o	f lines 44 and 47, enter amount overpaid	,	•	49	0.
50	Enter the amount of line 49 you want: Credited t			funded	50	
Part \	V Statements Regarding Certain	in Activities and Other Infor	mation (see instru	ictions)		
51	At any time during the 2017 calendar year, did the	ne organization have an interest in or a sig	nature or other author	ıty		Yes No
	over a financial account (bank, securities, or oth	er) in a foreign country? If YES, the organ	ization may have to file	9		
	FinCEN Form 114, Report of Foreign Bank and F	inancial Accounts. If YES, enter the name	of the foreign country			
	here					X
52	During the tax year, did the organization receive	a distribution from, or was it the grantor of	of, or transferor to, a fo	reign trust?		X
	If YES, see instructions for other forms the orga	nization may have to file.				
53	Enter the amount of tax-exempt interest received					
C:	Under penalties of perjury, I declare that I have exam correct, and complete Declaration of preparer (other	ined this return, including accompanying schedul than taxpayer) is based on all information of whic	les and statements, and to h preparer has any knowle	the best of my kn	owledge and belie	f, it is true,
Sign		1		•	May the IRS discus	ss this return with
Here		TREA	SURER		he preparer showr	
	Signature of officer	Date Title			nstructions)?	Yes No
	Print/Type preparer's name	Preparer's signature	Date	Check	ıf PTIN	
Paid				self- employed	i	
Prepa	arer HOWARD DONKIN, CPA	HOWARD DONKIN CPA	10/18/18			47726
Use C	Only Firm's name > JACOBSON JA			Firm's EIN	91-2	011386
- -	200 FIRST	T AVE WEST, SUITE 2	00			
	Firm's address ► SEATTLE,	WA 98119-4219		Phone no.	<u>(206)-6</u>	28-8990
	· · · · · · · · · · · · · · · · · · ·				Forr	m 990-T (2017)

Schedule A - Cost of Goods	Sold. Enter method of inv	entory 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. Su	btract line 6								
3 Cost of labor	3	from line 5. Enter here a	and in Part I,								
4 a Additional section 263A costs		line 2	7								
(attach schedule)	4a	8 Do the rules of section 263A (with respect to									
b Other costs (attach schedule)	4b	property produced or a									
5 Total Add lines 1 through 4b	5	the organization?									
Schedule C - Rent Income ((see instructions)	From Real Property a	ınd Personal Property I	Leased With Real Prop	erty)							
1 Description of property											
(1)											
(2)											
(3)											
(4)											
	2. Rent received or accrued										
(a) From personal property (if the pere rent for personal property is more 10% but not more than 50%)	than ' of rent i	eal and personal property (if the percenta or personal property exceeds 50% or if or rent is based on profit or income)	ge 3(a) Deductions directly columns 2(a) and	connected with the income in d 2(b) (attach schedule)							
(1)											
(2)											
(3)											
(4)											
Total	0 . Total		0.								
(c) Total income. Add totals of columns 2 here and on page 1, Part I, line 6, column			(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>	0.						
Schedule E - Unrelated Deb	t-Financed Income (s	ee instructions)									
		2 Gross income from or allocable to debt-	3. Deductions directly conr to debt-finance	ed property							
1 Description of debt-fir	anced property	financed property	(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	,						
(1) EOS MACONA BUILD	TNO	10 261	<u>STATEMENT 2</u> 7,369	STATEMENT 3	0						
(1) 50% TACOMA BUILD (2) RENTON BUILDING	TING	48,264. 107,803.	35,966								
		107,003.	33,300	30,10	<u> </u>						
(3)											
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 deduction (column 6 x total of colum 3(a) and 3(b))							
(1) 138,058.	348,03	6. 39.67%	19,146	. 11,37	6.						
(2) 1,638,465.	1,940,07		91,040								
(3)	-1010-	%	2,21,000								
(4)		%									
			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1 Part I, line 7, column (B)							
Totals		L	110,186								
Total dividends-received deductions in	cluded in column 8	•	•		0.						

Form 990-T (2017)

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	•	0.	0.		-	1	0.
		Enter here and on page 1, Part I, line 11, co! (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	•	0.	0.				0.
Schedule K - Comper	nsatio	n of Officers,		Trustees (see in	structions)		

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 (2017)

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information. Business or activity to which this form relates

E-

OMB No 1545-0172

Attachment Sequence No 179

Identifying number

CONSEJO COUNSELING & RI	EFERRAL	SERVICE	REN	TON	BUII	LDING.		91-1021247
Part Election To Expense Certain Property	Under Section 17	79 Note: If you I	nave any lis	ted pr	operty, c	omplete Part	V before y	ou complete Part I
1 Maximum amount (see instructions)							1	510,000.
2 Total cost of section 179 property placed	I in service (see	instructions)					2	· · · · · · · · · · · · · · · · · · ·
3 Threshold cost of section 179 property b	efore reduction	in limitation					3	2,030,000.
4 Reduction in limitation Subtract line 3 fro	om line 2 If zero	or less, enter -	0-				4	
5 Dollar limitation for tax year Subtract line 4 from line 1	If zero or less, enter	-0- If married filing	separately, see	ınstruct	ions		, 5	
6 (a) Description of prope			(b) Cost (busin			(c) Elected c	ost -	
					1	· · · · · · · · · · · · · · · · · · ·		
	-							
		•	•					
7 Listed property. Enter the amount from li	ne 29	I		_	7			
8 Total elected cost of section 179 propert		un column (c)	lines 6 and	7			8	
9 Tentative deduction Enter the smaller of	•	in column (c),	illies o and	'			9	
10 Carryover of disallowed deduction from le		116 Earm 4562					10	
11 Business income limitation. Enter the sm.	•			:a) ar li	no E		11	
12 Section 179 expense deduction Add line		•		•	110 3		12	
,	•			, 	13		12	
13 Carryover of disallowed deduction to 201 Note: Don't use Part II or Part III below for lis					13			
Part II Special Depreciation Allowand				a lister	l propert	v 1		
		-						
14 Special depreciation allowance for qualifi	led property (of	iei triari listeu p	property) pi	aceu ii	Service	during		
the tax year	4						14	
15 Property subject to section 168(f)(1) elec		15						
16 Other depreciation (including ACRS) Part III MACRS Depreciation (Don't in	saluda lietad era	norty) (Coo inc	tructions \				16	
Part III MACRS Depreciation (Don't in	iciude iisted pro	 	ion A	_				
				,			47	
17 MACRS deductions for assets placed in		• •					17	
18 If you are electing to group any assets placed in servic						P	diam Cuad	
Section B - Assets P	(b) Month and	(c) Basis for di	• • • • • • • • • • • • • • • • • • • •			erai Deprecia	tion Syste	
(a) Classification of property	year placed in service	(business/inve	stment use	(d)	Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property								
b 5-year property								
c 7-year property								
d 10-year property								
e 15-year property								
f 20-year property								
g 25-year property				2	5 yrs		S/L	
	/			27	5 yrs	MM	S/L	
h Residential rental property	/	١	-	27	'.5 yrs.	MM	S/L	
	07/17	2,75	4,904.	3	9 yrs	MM	S/L	32,376.
ı Nonresidential real property	07/17		5,491.			S MM	S/L	3,590.
Section C - Assets Pla							ration Sys	
20a Class life				T		1 .	S/L	
b 12-year				1	2 yrs.		S/L	
c 40-year	1				0 yrs.	MM	S/L	<u></u>
Part IV Summary (See instructions)	· · · ·			<u> </u>	-) · • ·	.,,,,,,		
21 Listed property. Enter amount from line 2	28						04	
		oo 10 ood 20 ::	a aaluma /-	١٥٥٨	lino 01		21	
22 Total. Add amounts from line 12, lines 14 Enter here and on the appropriate lines of						<u> </u>	22	35,966.
23 For assets shown above and placed in s	ervice during th	e current year,	enter the				-	
portion of the basis attributable to section	_	-			23			

	m 4562 (2017)		SEJO CO											1021		
Pa	Listed Proper		utomobiles, c	ertaın oth	ner vehic	ies, c	ertain	aircraft	t, cei	rtain com	outers, a	ınd prop	erty use	d for ent	ertainm	ent,
	Note: For any (a) through (c)	vehicle for w	hich you are	using the	standar	d mile	eage ra	ate or d	ledu	cting leas	e expen	se, com	plete on	ly 24a, 2	4b, colu	mns
		- Depreciation							truct	tions for lii	nits for	passeng	er auton	nobiles)		-
24a	Do you have evidence to		•				Yes			24b If "Y		·			Yes	No
	(a)	(b)	(c)		(d)	T		(e)		(f)		g)		h)		(i)
	Type of property	Date placed in	Business investmen	+ I	Cost or		Basis for (business			Recovery		thod/		ciation		cted on 179
	(list vehicles first)	service	use percenta		her basis			e only)		period	Conv	ention	dedi	uction		st
25	Special depreciation all	lowance for q	ualified listed	property	placed	ın ser	rvice di	uring th	he ta	ax year an	d					
	used more than 50% in											25				
26	Property used more that	an 50% in a q	ualified busir	ness use		1			т							_
		 		%												
		-	1	%		_										
		<u> </u>	1	%												
27	Property used 50% or	less in a quali	ified business						 1							
		 		%							S/L·		_			
		<u> </u>		%							S/L·					
			·	%						<u> </u>	S/L·	-T				
	Add amounts in column		_				21, pag	ge 1				28		T		
29	Add amounts in column	n (ı), line 26 E												29		
<u> </u>				Section I								4	. 16		بملميطمينا	_
	mplete this section for v		•													5
то у	our employees, first ans	swer the ques	stions in Sect	ion C to s	see it you	u mee	et an e	хсертіс	on to	completi	ng this s	ection to	or those	venicies	i	
				Τ ,	٠	1	/b\			(a)	,	۵۱		٠١	14	n
20	Total business/investment	t miles driven d	uring the	1	a) hicle	,	(b) Vehicle		W	(c) ehicle	1	d) nicle		e) nicle	(f) Vehicle	
30	year (don't include commi		uring the	Vei	IICIC		VEITICIE			CITICIC	761	IICIG	V 61	iioie	V (11	1010
21	Total commuting miles		the year		•											
	Total other personal (ne	-	•	-							 				-	
32	driven	oncommuting	,, mos		•	İ					1			'		
33	Total miles driven durin	ng the year				ļ			-							
-	Add lines 30 through 3	•														
34	Was the vehicle availal		al use	Yes	No	Ye	s I	No	Yes	No	Yes	No	Yes	No	Yes	No
•	during off-duty hours?				1			-					1.20			
35	Was the vehicle used p	orimarily by a	more													
	than 5% owner or relat	ted person?														
36	Is another vehicle avail	able for perso	onal													
	use?												Ì	İ		
		Section C	- Questions	for Emp	loyers W	Vho P	rovide	Vehic	les	for Use b	y Their I	Employe	es			
Ans	swer these questions to	determine if	you meet an	exception	n to com	pletin	ng Sect	tion B f	for v	ehicles us	ed by e	nployee	s who a	ren't mo	re than	5%
ow	ners or related persons.	<u>'</u> _														
37	Do you maintain a writt	ten policy sta	tement that p	orohibits a	all persoi	nal us	se of ve	ehicles,	, ınci	ludıng cor	nmuting	, by you	r		Yes	No
	employees?															<u> </u>
38	Do you maintain a writt	ten policy sta	tement that p	prohibits p	personal	use o	of vehic	cles, ex	ксер	t commut	ing, by y	our/			-	
	employees? See the in	structions for	r vehicles use	d by corp	porate of	ficers	s, direc	tors, o	r 1%	or more	owners				ļ	1
	Do you treat all use of	-	-												<u> </u>	
40	Do you provide more the	han five vehic	les to your e	nployees	, obtain	ınforr	nation	from y	our e	employee	s about					1
	the use of the vehicles	, and retain th	ne informatioi	received	d?										ļ	ļ
41	Do you meet the requir	rements conc	erning qualifi	ed autom	nobile de	mons	stration	use?							<u> </u>	
_	Note: If your answer to	37, 38, 39, 4	0, or 41 is "Y	'es," don'	t comple	ete Se	ection l	B for th	ne co	overed ve	hicles.					
P	art VI Amortization		· · · · · · · · · · · · · · · · · · ·						1							
	(a) Description	of costs	l _{Da}	(b) te amortization		Amori	C) tizable			(d) Code	1	(e) Amortiza	tion	Ar	(f) nortization	
	· · · · · · · · · · · · · · · · · · ·	···		begins	<u> </u>		ount			section		period or pe		fc	r this year	
<u>42</u>	Amortization of costs t	nat begins du	uring your 20	17 tax ye	ar T											
				· · · · · ·	-				ļ							
	·								l							
43	Amortization of costs t	hat began be	fore your 20	17 tax yea	ar								43			
44	Total. Add amounts in	column (f). S	ee the instruc	ctions for	where to	repo	ort						44			