EXTENDED TO NOVEMBER 16,

ilendar year 2019 or other tax year beginning

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

Form **990-T**

2989817704017

Form **990-T** (2019)

923701 01-27-20 LHA For Paperwork Reduction Act Notice, see instructions.

, ,	Form 99	90-T (2019)			9	1-102	L247 F	Page 2
	Par		Total Unrelated Business Taxable Income					
	` 32	Total of	unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		32	- !	2,44	<u>14.</u>
	33'	Amount	is paid for disallowed fringes		33			
	34	Charitab	ole contributions (see instructions for limitation rules)		3,4			0.
	35	Total un	prelated business taxable income before pre-2018 NOLs and specific deduction, Subject line 34 from the sum of	lines 32 and 33	35		2,44	14.
	36	Deduction	on for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	TMT 2	36			0.
	37		unrelated business taxable income before specific deduction. Subtract line 86 from line 35	7	37	- !	92,44	14.
	38		deduction (Generally \$1,000, but see line 38 instructions for exceptions)	8	38		1,00	
	39	Unrelat	ed business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	•				
			e smaller of zero or line 37	1	39	- !	92,44	14.
1 1	Par	t IV 🗀	Tax Computation					
, 1	10	Organiz	ations Taxablo as Corporations. Multiply line 39 by 21% (0.21)	>	- 40)		<u>n.</u>
	41	Trusts T	Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:					
		Та	ex rate schedule or Schedule D (Form 1041)	•	- 41	1		
	42	Proxy ta	x See instructions	•	- 42	?		
,	43		ive minimum tax (trusts only)		43			
	44		Noncompliant Facility Income. See instructions		44		•	
	45		dd lines 42, 43, and 44 to line 40 or 41, whichever applies		45			0.
i۱۱	Par	t V 1	Γax and Payments					
, ,	7 46a	Foreign	tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a					
1	b		redits (see instructions) 46b					
	C	•	business credit. Attach Form 3800 46c					
	d	Credit fo	or prior year minimum tax (attach Form 8801 or 8827)					
	е		edits. Add lines 46a through 46d		46	e		
	47	Subtrac	et line 46e from line 45		47		-	0.
	48	Other ta	ixes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (e	attach schedule	-			
	49	Total ta	x Add lines 47 and 48 (see instructions)		49			0.
	50		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3		50	1		0.
	51 a		nts: A 2018 overpayment credited to 2019					
			stimated tax payments 511b					
	C	: Tax dep	osited with Form 8868		╗,			
	d	Foreign	organizations: Tax paid or withheld at source (see instructions)					
	е	Backup	withholding (see instructions) 5 je					
	f	Credit fo	or small employer health insurance premiums (attach Form 8941) 511f					
	g	Other cr	redits, adjustments, and payments: Form 2439					
		Fc	orm 4136 Other Total ▶ <u>51g</u>		╝゚.			
	52	Total pa	ayments. Add lines 51a through 51g		52	2		
	53	Estimat	ed tax penalty (see instructions). Check if Form 2220 is attached 🕨 🔲		5	3		
	54	Tax due	e. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	•	- 5			
1	55	Overpa	yment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	•	► <u>5</u>	<u> </u>		
ا				unded	<u> </u>	<u> </u>		
	Par	t VI S	Statements Regarding Certain Activities and Other Information (see instruc	tions)				
	57	At any t	ime during the 2019 calendar year, did the organization have an interest in or a signature or other authority				Yes	No
			inancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file					
			Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country				1 1.	
		here	<u> </u>					<u> </u>
	58		the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreig	ın trust?				<u>X</u>
			see instructions for other forms the organization may have to file.					2
	59		ne amount of tax-exempt interest received or accrued during the tax year > \$					
	Sign	, Co	nder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to t irrect, and gomplete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowled	ne best of my k .ge	nowledg	e and belief, it	is true,	
	Here		KILHA MILA WILLE	ſ	May the	IRS discuss t	nis return w	rith
	1101		TREASURER			parer shown be		,
			Signature of officer Date • Title		-	ions)?	es	No
			Print/Type preparer's name Preparer's signature Date	Check	ıf F	PTIN		
	Pai			self- employe				
	Pre	parer	KARI MOORE, CPA KARI MOORE CPA 09/16/20	r		P0139		
	Use	Only	Firm's name ► JACOBSON JARVIS & CO, PLLC	Firm's EIN	<u> </u>	91-20	11386	5
			200 FIRST AVE WEST, SUITE 200	l 		.		
			Firm's address ► SEATTLE, WA 98119-4219	Phone no.	(20	6)-62		
	923711	01-27-20	•			Form	990-T (2	2019)
			- 47					

Schedule A - Cost of Goods	Sold. Enter method o	f invento	ory valuation N/A			-		
1 Inventory at beginning of year	1		6 Inventory at end of yea	r		6		
2 Purchases	2		7 • Cost of goods sold Su	ıbtract lı	ne 6			
3 Cost of labor	3		from line 5. Enter here	and in F	Part I,			
4 a Additional section 263A costs			line 2			7	<u> </u>	
(attach schedule)	4a		8 Do the rules of section	263A (v	vith respect to		Yes	No
 Other costs (attach schedule) 	4b		property produced or a	acquired	for resale) apply to		_	
5 Total. Add lines 1 through 4b	5		the organization?					<u> </u>
Schedule C - Rent Income ((see instructions)	From Real Propert	ty and	Personal Property	Lease	ed With Real Pro	perl	(y) 	
1 Description of property								
(1)						•		
(2)								
(3)								
(4)	•							
	2. Rent received or accrued				0(-) 0			
 (a) From personal property (if the perconent for personal property is more 10% but not more than 50%) 	entage of (b) Front (b) of	rent for per	d personal property (if the percental sonal property exceeds 50% or if it based on profit or income)	age	3(a) Deductions directly columns 2(a) ai	y conne nd 2(b)	(attach schedule)	ın
(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	(A) >		•	0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>	-	0.
Schedule E - Unrelated Deb	t-Financed Income	e (see in	structions)					
			2 Gross income from		3 Deductions directly cor to debt-finance			
1 Description of debt-fine	anced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	
				S'	FATEMENT 4	នា	TATEMENT	5
(1) RENTON BUILDING			• 270,278.		72,321		309,2	295.
(2)								
(3)			-				 	
(4)								
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted bas of or allocable to debt-financed property (attach schedule)		Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8 Allocable deduct (column 8 x total of co 3(a) and 3(b))	
(1) 3,157,382.	3,802,8	852.	• 83.03%		224,412	•	316,8	356.
(2)			%					
(3)			%					
(4)			%					
	STATEMENT	3			nter here and on page 1, Part I, line 7, column (A)		Enter here and on pag Part I, line 7, column	
Totals			>		224,412		316,8	356.
Total dividends-received deductions inc	cluded in column 8				>			0.

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	1				
Form 990-T (20·19)	CONSEJO	COUNSELING	&	REFERRAL	SERVICE

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Pik	F	Davis dia di	D	A		
Dart II	Income Fro	im Parionicale	Kanoman on a	Nangrata Racic	' /Ear agab pariadical liet	ممانية القسط استأميا
raitii	111001110 1 10	Jili i Ciloulouis	Heported on a	Deparate Dasis	i troi each benodical listi	eo in Pan II. Milin
			•		(For each periodical list	,
		augh 7 an a line hid				

	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)					3			-
Totals fron	n Part I	▶	0.	0.				0.
			Enter here and on paye 1, Part I,	Enter here and on - page 1, Part I, ilne 11, col (B)	المروونيت والمراجع المراجع الم	يرم يسلم المسلم المسلم المسلم المسلم		Enter here and
	rt II (lines 1-5)		0.	0.	+ -		•	0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

	1. Name	a 2 Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)			%	
(2)			%	
(3)			%	
(4)			%	
Total Enter here and o	on page 1, Part II, line 14		>	0.

Form 990-T (2019)

FORM 990-T	NET	OPERATING LOSS D	EDUCTION	STATEMENT
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	48,195.	0.	48,195.	48,195.
NOL CARRYO	VER AVAILABLE THIS	YEAR	48,195.	48,195.
FORM QQO_T	NEG	ODERATING LOSS D	EDIICATON	CMAMEMENM
FORM 990-T	NET	OPERATING LOSS D	EDUCTION	STATEMENT
	NET	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	STATEMENT AVAILABLE THIS YEAR
TAX YEAR 12/31/12	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED 9,046.	LOSS REMAINING 4,948.	AVAILABLE THIS YEAR
TAX YEAR 12/31/12 12/31/13	13,994, 2,993.	LOSS PREVIOUSLY APPLIED 9,046. 0.	LOSS REMAINING 4,948. 2,993.	AVAILABLE THIS YEAR 4,948. 2,993.
TAX YEAR 12/31/12	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED 9,046.	LOSS REMAINING 4,948.	AVAILABLE THIS YEAR

FORM 990-T SCHEDULE E - UNRELATED D AVERAGE ADJUSTED		INCOME	STATEMENT	
DESCRIPTION OF DEBT-FINANCED PROPERTY		ACTIVITY NUMBER	Y	
		1	- AMOUNT	
AVERAGE ADJUSTED BASIS OF PROPERTY FIRST AVERAGE ADJUSTED BASIS OF PROPERTY LAST			3,840,6 3,765,0	
AVERAGE ADJUSTED BASIS OF PROPERTY FOR T	HE YEAR		3,802,8	52.
TOTAL TO FORM 990-T, SCHEDULE E, COLUMN				
FORM 990-T SCHEDULE E - DEPRECIA	TION DEDUCTIO	ON	STATEMENT	4
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL	
DEPRECIATION - SUBTOTAL -	2	72,321.	72,3	21.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN	3(A)		72,3	21.
FORM 990-T SCHEDULE E - OTHER	DEDUCTIONS		STATEMENT	5
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL	
PROFESSIONAL SERVICES OFFICE EXPENSE UTILITIES PROPERTY TAXES MAINTENANCE AND REPAIRS SECURITY FIRE SAFETY INSURANCE INTEREST EXPENSE - SUBTOTAL	2	37,991. 2,953. 31,001. 43,491. 36,066. 4,763. 4,733. 7,657. 140,640.		Q.F.
- SUDTOTAL -	4		309,2	70.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN			309,2	