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| Name of Organization Cares on ranne crisingte and set instructions General School and set of Cognition | Internal Revenue Service | ▶ | Do not enter SSN numbers on this form as it may | / be ma | de public if your organiz | ation is a 501(c)(3) | 50 | 01(c)(3) Organizations Only |
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| trade of business here ► COMMERCIAL REAL ESTATE RENT/LEASE. If only one, complete Parts II-V if more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and III, complete a Schedule M for each additional trade or business, their complete Parts III-V. I buring the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? I buring the tax year, was the corporation as understand the parent corporation. ► J The books are in care of ► DIANE PIETROWSKI Telephone number ► 206-374-9409 I to Books are in care of ► DIANE PIETROWSKI Telephone number ► 206-374-9409 I to Books are in care of ► DIANE PIETROWSKI Telephone number ► 206-374-9409 I to Books are in care of ► DIANE PIETROWSKI Telephone number ► 206-374-9409 I to Books are in care of ► DIANE PIETROWSKI Telephone number ► 206-374-9409 I to Books are in care of ► DIANE PIETROWSKI Telephone number ► 206-374-9409 I to Books are in care of ► DIANE PIETROWSKI Telephone number ► 206-374-9409 I to Books are in care of ► DIANE PIETROWSKI Telephone number ► 206-374-9409 I to Books are in care of the previous number of the previous | 3,599, | | · | • . | | | | Other trust |
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| Depletion Contributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I) Excess readership costs (Schedule J) Other deductions (attach schedule) Total deductions. Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 30 from line 29 RECEIVED 23 24 25 26 OGDEN, UT 28 13,745. 29 49,890. | 20 Depreciation (atta | ach Form 4 | 562) | | | 125,380. | | |
| Contributions to deferred compensation plans Employee benefit programs Excess exempt expenses (Schedule I) Excess readership costs (Schedule J) Other deductions (attach schedule) Total deductions. Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 30 from line 29 23 24 25 25 26 OGDEN, UT 28 13,745. 29 49,890. | 21 Less depreciation | claimed o | n Schedule A and elsewhere on return | | 21a | 125,380. | - | 0. |
| 23 Contributions to deferred compensation plans 24 Employee benefit programs 25 Excess exempt expenses (Schedule I) 26 Excess readerstip costs (Schedule J) 27 Other deductions (attach schedule) 28 Total deductions. Add lines 14 through 27 29 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 31 Unrelated business taxable income. Subtract line 30 from line 29 31 49,890. | · · · · · · · · · · · · · · · · · · · | | | | RECEIVED |) | | |
| Other deductions (attach schedule) Total deductions. Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 30 from line 29 OGDEN, UT 28 13,745. 29 49,890. | | | mpensation plans | F | | | | · · · · · · · · · · · · · · · · · · · |
| Other deductions (attach schedule) Total deductions. Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 30 from line 29 OGDEN, UT 28 13,745. 29 49,890. | | 4 | | 2 | በሮፕ ልል 2020 | 8 | | |
| Other deductions (attach schedule) Total deductions. Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 30 from line 29 OGDEN, UT 28 13,745. 29 49,890. | | 0 | | 3 | UCI U \$.2020 | ايزا ا | | |
| Total deductions. Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 29 49,890. 30 0. Unrelated business taxable income. Subtract line 30 from line 29 31 49,890. | | | | | | | - | |
| Total deductions. Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 30 from line 29 131 49,890. | | | | } | OGDEN, UT | 「 | | 12 7/5 |
| 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) 30 0. 31 49,890. | | | | | | | $\overline{}$ | 13,743. |
| (see instructions) 30 0. 31 Unrelated business taxable income. Subtract line 30 from line 29 31 49,890. | / | | | | | | 29 | 49,890. |
| 31 Unrelated business taxable income. Subtract line 30 from line 29 31 49,890. | / | | loss arising in tax years beginning on or after Janua | ary 1, 20 | אוע | | ू | ^ |
| 000 T | | | 0 have the 00 feet to 00 | | | | | |
| | | | | | | | 31 | Form 990-T (2019) |

| Form 99 | 0-T 2019) PLYMOUTH HOUSING GROUP AND SUBSIDIARIES | <u>`</u> | 91-112 | <u> 22621</u> | Page 2 |
|--------------|--|-----------------|-------------------|----------------|--------------------|
| Part | Total Unrelated Business Taxable Income | | | | |
| 32 | Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) | . <i>∟</i> 2 | 2 | <u>49,8</u> | 90. |
| 33 | Amounts paid for disallowed fringes | <u>[3</u> | 33 | | |
| ` 34 | Charitable contributions (see instructions for limitation rules) STMT 3 | 3 | 4 | | 0. |
| 35 | Total unrelated business taxable income before pre-2018 NOLs and specific deduction Subtract line 34 from the sum of lines 32 and 32 | 5 [3 | 5 | 49,8 | 90. |
| 36 | Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) | 7 0 3 | 6 | 49,8 | 90. |
| 37 | Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35 | ्रे इ | 7 | - | |
| 38 | Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions) | % [3 | 38 | 1,0 | 00. |
| 39 | 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 | 3 | 39 | | 0. |
| Parl | | | * | | |
| 40 | Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21) | ▶ 4 | 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) | ▶ 4 | 41 | | |
| 42 | Proxy tax. See instructions | | 12 | | |
| 43 | Alternative minimum tax (trusts only) | | 13 | | |
| 44 | Tax on Noncompliant Facility Income See instructions | | 14 | | |
| 45 | Total Add lines 42, 43, and 44 to line 40 or 41, whichever applies | | 45 | | 0. |
| Parl | | | <u>/V 1</u> | - | |
| | Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a | | | | |
| | Other credits (see instructions) 46b | _ | | | |
| _ | General business credit Attach Form 3800 46c | \dashv | | | |
| | Credit for prior year minimum tax (attach Form 8801 or 8827) | \dashv | | | |
| | | ╛ | 6e | | |
| e 47 | · | | 47 | | 0. |
| 47 | Subtract line 46e from line 45 Other taxes Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (ettech schedu | | 48 | | |
| 48 | · — — — — | | 49 | | 0. |
| 49 | Total tax. Add lines 47 and 48 (see instructions) | _ | 50 | | 0. |
| 50 | 2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3 | <u> </u> | " | | -•• |
| | Payments: A 2018 overpayment credited to 2019 | \dashv | | | |
| | 2019 estimated tax payments 51b | \dashv | | | |
| | Tax deposited with Form 8868 | \dashv | | | |
| | Foreign organizations: Tax paid or withheld at source (see instructions) 51d | \dashv | | | |
| е | Backup withholding (see instructions) 51e | \dashv | | | |
| f | Credit for small employer health insurance premiums (attach Form 8941) 51f | | 1 | | |
| g | | | | | |
| | Form 4136 | ᆗ. | _ | | |
| 52 | Total payments Add lines 51a through 51g | | 52 | | |
| 53 | Estimated 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 | | 54 | | |
| 55 | Overpayment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid | | 55 | | |
| 56 | Enter the amount of line 55 you want: Credited to 2020 estimated tax Refunded A VI State monto Boggarding Contain A stigities and Other Information (see particular) | > 3 | 56 | | |
| Par | | | | | Τ |
| 57 | 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 | | | | |
| | FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign country | | | | ₩ |
| | here > | | | - | V |
| 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. | | | - } | 1 |
| 59_ | Enter the amount of tax-exempt interest received or accrued during the tax year \$ | | and balas at a | | Ь |
| Cian | 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 | | and belief, it is | | |
| Sign Here | 11/10/11/11/11/11 | | he IRS discuss | | with |
| 11016 | | | eparer shown t | | ا _{،،،} ا |
| | . Cignitude of office. | _ | ctions)? | Tes | No |
| | Print/Type preparer's name Preparer's signature Date Check | | PTIN | | |
| Paid | d TESSICA COOPER DEMUA (29/M 8.26.20 self-employ | /ed | D0101 | 11000 | |
| Pre | narer DESSICA COUPER | | P0101 | | |
| | Only Firm's name DAUBY O'CONNOR(& ZALESKI, LLC Firm's EIN | | 35-17 | / 5066 | . 4 |
| | 501 CONGRESSIONAL BLVD #300 | 12. | 171 0 | | |
| | Firm's address ► CARMEL, IN 46032 Phone no. | (3. | | 18-57 990-T | |
| 000744 | 04.07.00 | | Form | | (2010) |

Form 990-T (2019)

| Schedule A - | Cost of Goods | s Sold. Enter | method of invent | ory val | luation > N/A | | | | | |
|---|--|--|--|------------|--|---------|---|-------------|--|----------|
| .= | ginning of year | 1 | | T | Inventory at end of yea | | | 6 | | |
| 2 Purchases | 3 - 7 - · · | 2 | | 1 | Cost of goods sold Su | | ine 6 | U | | |
| 3 Cost of labor | | 3 | | 1 | from line 5. Enter here | | | | | |
| 4a Additional sect | ion 263A costs | | | 1 | line 2 | | , | 7 | | |
| (attach schedu | | 4a | | | Do the rules of section | 263A (\ | with respect to | | Yes | No |
| b Other costs (at | • | 4b | | 1 | property produced or a | • | • | | | |
| • | es 1 through 4b | 5 | | 1 ' | the organization? | | , , , , , | | | |
| Schedule C - (see instructions | | (From Real | Property and | Pers | onal Property L | ease | d With Real Prop | erty) | | |
| Description of prope | rty | | | | | | | | | |
| _(1) | | | | | | | | | | |
| _(2) | · | · | | | · | | | | | |
| _(3) | · | | | | | | | | | |
| _(4) | | | | | | | | | <u> </u> | |
| | | | ed or accrued | | | | 2/a) Daductions discotts | | tod with the means | _ |
| ` rent for p | sonal property (if the per ersonal property is more but not more than 50%) | than | l 'of rent for pe | ersonal pr | al property (if the percentag roperty exceeds 50% or if I on profit or income) | ge | 3(a) Deductions directly columns 2(a) an | d 2(b) (a | ittach schedule) | |
| _(1) | | | | | | | | | | |
| (2) | | | | | | | | | | |
| (3) | | | | | | | | | <u>.</u> | |
| (4) | | | | | | | | | | |
| Total | | 0. | Total | | | 0. | | | | |
| | Part I, line 6, column | ı (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 (see in | nstruct | tions) | | | | | |
| | | | | | Gross income from allocable to debt- | | 3. Deductions directly conr to debt-finance | ed prop | erty | |
| 1 | . Description of debt-fir | nanced property | | | financed property | , , | Straight line depreciation (attach schedule) | 1 | (attach schedule) | |
| | ···- | | | | | S | TATEMENT 6 | SI | ATEMENT | <u> </u> |
| _(1) | | | | | | | | 4 | | |
| | DG RENTAL | - LEWIS | TON | | | | | - | | |
| (3) HOTEL | | | · | | 321,132. | | 125,380 | 4 | 90,1 | 51. |
| _(4) | | | | <u> </u> | | | | +- | | |
| 4. Amount of ave debt on or allocabl property (atte STATEM | e to debt-financed ich schedule) | ofora | adjusted basis illocable to nced property Schedula) | 6 | Column 4 divided by column 5 | | 7. Gross income reportable (column 2 x column 6) | (| 8 Allocable deduct column 6 x total of co 3(a) and 3(b)) | |
| | ILLINI O | DIMIL | <u> </u> | | 0/_ | L | | + | | |
| (1) (2) (3) 2 | | | | - | <u>%</u> % | | | + | | |
| (3) 2 | ,251,410. | 3 | 736,297. | <u> </u> | 60.26% | | 193,514 | + | 129,8 | 79. |
| (4) | , , | | , , | | <u> </u> | | | + | | <u> </u> |
| STAT | EMENT 4 | STAT | EMENT 5 | <u> </u> | | | nter here and on page 1, | | nter here and on pag | |
| 7 -4-1- | | | | | _ | | 193,514 | | 129,8 | |
| Totals | eived deductions in | ndudad in ooluma | ν 8 | | P 1 | | 193,314 | + | 129,0 | 0. |
| TOTAL DIVIDENDS-160 | CIACO OCONCRIOUS IL | iciaaca ili Coldiili | 10 | | | | | | | |

| Schedule F - Interest, | Annuities, Roya | ties, and Re | ents F | | ntrolle | | tions | see in: | structio | ns) |
|--|---|---|-----------------------------|--|--|--|--|--|---------------|---|
| | | Exe | mpt Co | ntrolled Or | ganızatı | ons | | | | |
| Name of controlled organizat |] identif | | Net unrelat ss) (see ins | ted income structions) | | al of specified nents made | includ | t of column 4 ed in the cont ation's gross | rolling | 6 Deductions directly connected with income in column 5 |
| /1\ | | | | | | | - | | | |
| (1) | | | | | | | | | | - |
| (2) | | | | | | | - | | | · · · · · · · · · · · · · · · · · · · |
| (3) | | | | | . | | - | | \rightarrow | - |
| (4) | | | | • | | | L | | | · |
| Nonexempt Controlled Organi | 1 | | | | | 40.0 | | | 44 - | |
| 7. Taxable Income | 8. Net unrelated incor | | . lotalors | specified payn made | ients | 10 Part of colur in the controlli gross | nn 9 tha ng orgar income | iization's | | Deductions directly connected th income in column 10 |
| (1) | | | | | 1 | | | | | |
| (2) | | | | | Ì | | | | | |
| (3) | | | | | Ì | | | | | |
| (4) | | | | | | | | | | |
| XV. | | ······································ | | | | Add colum Enter here and | | 1, Part I, | 1 | Add columns 6 and 11 here and on page 1, Part I, line 8, column (B) |
| | | | | | | | - ···· V | | | |
| Totals | | | | | <u> ▶</u> | | | 0. | | 0 |
| Schedule G - Investme | | Section 501 | (c)(7), | (9), or (1 | 7) Org | janization | | | | |
| (see inst | ructions) | | | | | | | ı | | 1 |
| 1 Desc | ription of income | | 2 | Amount of | ncome | 3 Deduction directly conne | | 4. Set- | | Total deductions and set-asides |
| ······ | | | | | | (attach sched | ule) | (attach s | schedule) | (col 3 plus col 4) |
| (1) | | | | | | | | | | - |
| (2) | | | | | | | _ | | | |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | | |
| | | | | nter here and c art I, line 9, col | | | | | | Enter here and on page Part I, line 9, column (B) |
| Totals | | | | | 0. | | | | | 0 |
| Schedule I - Exploited | • | Income, O | ther TI | han Adv | | g Income | | | | |
| (see instruction of exploited activity | 2. Gross unrelated business income from trade or business | 3 Expenses directly connect with production of unrelated business incon | ted fr | 4 Net incom from unrelated business (col minus column gain, compute through | trade or umn 2 3) If a cols 5 | 5 Gross inco from activity to is not unrelate business inco | hat ed | 6 . Exp attribut colui | able to | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4) |
| | | | -+ | through | <u></u> | | | | | |
| (1) | | | -+ | | | | | | | |
| (2) | | | -+ | | | | | | | |
| (3) | | | \longrightarrow | | | | | | | |
| (4) | Enter here and on page 1, Part I, line 10, col (A) | Enter here and page 1, Part I line 10, col (B | 3) | | <u>.</u> | • | | | • | Enter here and on page 1, Part II, line 25 |
| Totals - | 0. | l | 0. | 1 | | | | | | 0 |
| Schedule J - Advertision | | | | | | _ | | | | |
| Part I Income From | Periodicals Rep | orted on a (| Conso | lidated | Basis | | | | | |
| 1. Name of periodical | 2. Gross advertising income | 3 Dire advertising | | 4. Adverti or (loss) (co col 3) If a ga cols 5 th | l 2 minus in, compute | 5. Circulat | | 6. Read | | 7. Excess readership costs (column 6 minus column 5, but not more than column 4) |
| (1) | | | | | | | | | | - |
| (2) | | | | | | | | | | 1 |
| | | | | | | | | | | 1 . |
| (3) | | | | • | | | | | | 4 |
| (4) | | | | | | | | | | |
| Totals (carry to Part II, line (5)) | • | 0. | 0. | | | <u></u> | | | | 0 |
| | | | | | | | | | | Form 990-T (201 |

Form 990-T (2019) PLYMOUTH HOUSING GROUP AND SUBSIDIARIES 91-11226
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)

| 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. | | * | 9 | 0. |
| • | Enter here and on page 1, Part I, line 11, cot (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. | • * | r | • | 0. |
| Schedule K - Compensation | of Officers, D | Directors, and | 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 (2019)

| FORM 990-T | INTEREST PAID | STATEMENT 1 |
|--------------------------------|---------------|-------------|
| DESCRIPTION | | AMOUNT |
| INTEREST EXPENSE - LEWISTON HO | OTEL | 13,745. |
| TOTAL TO FORM 990-T, PAGE 1, I | LINE 18 | 13,745. |

| FORM 990-T | NET | OPERATING LOSS D | EDUCTION | STATEMENT 2 |
|------------|--------------------|-------------------------------|-------------------|------------------------|
| TAX YEAR | LOSS SUSTAINED | LOSS PREVIOUSLY APPLIED | LOSS REMAINING | AVAILABLE THIS YEAR |
| 12/31/04 | 303,273. | 303,273. | 0. | 0. |
| 12/31/05 | 228,880. | 65,212. | 163,668. | 163,668. |
| 12/31/06 | 231,567. | 0. | 231,567. | 231,567. |
| 12/31/07 | 116,308. | 0. | 116,308. | 116,308. |
| 12/31/12 | 2,641. | 0. | 2,641. | 2,641. |
| 12/31/13 | 1,204. | 0. | 1,204. | 1,204. |
| 12/31/14 | 93,537. | 0. | 93,537. | 93,537. |
| NOL CARRYO | VER AVAILABLE THIS | YEAR | 608,925. | 608,925. |

| FORM 990-T | CONTR | IBUTIONS SUMMARY | <u>-</u> | STATEMENT | 3 |
|---------------------------------|--|---|-------------------------|-----------|---|
| | CONTRIBUTIONS SUBJECT CONTRIBUTIONS SUBJECT | | | | |
| FOR TAX FOR TAX FOR TAX FOR TAX | OF PRIOR YEARS UNUSED YEAR 2014 YEAR 2015 YEAR 2016 YEAR 2017 YEAR 2018 | CONTRIBUTIONS 142,434 148,916 97,796 104,563 176,285 | | | |
| TOTAL CARR | - RYOVER RENT YEAR 10% CONTRIBU | TIONS | 669,994 | | |
| | RIBUTIONS AVAILABLE | JUSTED | 669,994 | _ | |
| EXCESS 100 | TRIBUTIONS CONTRIBUTIONS CSS CONTRIBUTIONS | | 669,994 0 669,994 | _ | |
| ALLOWABLE | CONTRIBUTIONS DEDUCTION | ON | | _ | 0 |
| TOTAL CONT | RIBUTION DEDUCTION | | | | 0 |

| FORM 990-T SCHEDULE E - UNRELATED DEBT-FINANCED AVERAGE ACQUISITION DEBT | INCOME | STATEMENT 4 |
|---|--------------------|--|
| DESCRIPTION OF DEBT-FINANCED PROPERTY | ACTIVITY NUMBER | AMOUNT OF OUTSTANDING |
| COMM BLDG RENTAL - LEWISTON HOTEL | 2 | DEBT |
| BEGINNING FIRST MONTH BEGINNING SECOND MONTH BEGINNING THIRD MONTH BEGINNING FOURTH MONTH BEGINNING FIFTH MONTH BEGINNING SIXTH MONTH BEGINNING SEVENTH MONTH BEGINNING EIGHTH MONTH BEGINNING NINTH MONTH BEGINNING TENTH MONTH BEGINNING TENTH MONTH BEGINNING TENTH MONTH TOTAL OF ALL MONTHS NUMBER OF MONTHS IN YEAR | | 2,226,410. 2,226,410. 2,226,410. 2,226,410. 2,226,410. 2,226,410. 2,226,410. 2,226,410. 2,226,410. 2,226,410. 2,226,410. 2,226,410. 2,226,410. 2,226,410. |
| TOTALS TO FORM 990-T, SCHEDULE E, COLUMN 4 FORM 990-T SCHEDULE E - UNRELATED DEBT-FINANCED AVERAGE ADJUSTED BASIS | INCOME | STATEMENT 5 |
| | | |
| DESCRIPTION OF DEBT-FINANCED PROPERTY | ACTIVITY NUMBER | 7 |
| COMM BLDG RENTAL - LEWISTON HOTEL | 2 | AMOUNT |
| AVERAGE ADJUSTED BASIS OF PROPERTY FIRST DAY OF YEAR AVERAGE ADJUSTED BASIS OF PROPERTY LAST DAY OF YEAR | | 3,872,952. 3,599,641. |
| AVERAGE ADJUSTED BASIS OF PROPERTY FOR THE YEAR | | 3,736,297. |
| TOTAL TO FORM 990-T, SCHEDULE E, COLUMN 5 | | |

| FORM 990-T SCHEDULI | E E - DEPRECIA | ATION DEDUCT | ION | STATEMENT 6 |
|---|----------------|--------------------|--|-----------------|
| DESCRIPTION | | ACTIVITY NUMBER | AMOUNT | TOTAL |
| DEPRECIATION | - SUBTOTAL - | - 2 | 125,380. | 125,380 |
| TOTAL OF FORM 990-T, SCHEDU | JĒĒĒ, COLUMN | _3(<u>A</u>) | | 125,380 |
| FORM 990-T SCHEI | OULE E - OTHER | R DEDUCTIONS | | STATEMENT 7 |
| | | | | |
| DESCRIPTION | | ACTIVITY NUMBER | AMOUNT | TOTAL |
| DESCRIPTION PERSONNEL EXPENSE PROPERTY EXPENSE PROFESSIONAL SERVICES UTILITIES PROGRAM SUPPLY/SERVICE EXPENSE BLDG SUPPLY/SERVICE EXPENSE | | NUMBER | 9,366. 61,713. 5,513. 12,305. 630. 624. | TOTAL 90,151 |

| FORM 990-T | | ACQUISITION TO DEBT-FIN | | | ТY | STATEMENT 8 |
|---------------------|-------------|----------------------------|---------------|---|------------|-------------|
| DESCRIPTION | | | ACTIV NUME | | AMOUNT | TOTAL |
| AVERAGE ACQUISITION | | SUBTOTAL - | | 2 | 2,251,410. | 2,251,410. |
| TOTAL OF FORM 990- | T, SCHEDULE | E, COLUMN | 4 | | | 2,251,410. |

| FORM 990-T | AVERAGE ADJUSTED ALLOCABLE TO DEBT-FI | STATEMENT 9 | | |
|-------------------|---------------------------------------|--------------------|------------|------------|
| DESCRIPTION | | ACTIVITY NUMBER | AMOUNT | TOTAL |
| AVERAGE BASIS | - SUBTOTAL - | 2 | 3,736,297. | 3,736,297. |
| TOTAL OF FORM 990 | -T, SCHEDULE E, COLUMN | 5 | | 3,736,297. |

Depreciation and Amortization (Including Information on Listed Property)

E-

1

OMB No 1545-0172

► Attach to your tax return.

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

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

| PLYMOUTH HOUSING GROUP | AND SUBS | SIDIARIE | s | | | | | | 91-1122621 |
|--|--|--|---|------------------------------------|---|--|-------------|---|---------------------------------|
| Part Election To Expense Certain Propert | | | | ed pr | operty | , complete P | art V I | before y | ou complete Part I |
| 1 Maximum amount (see instructions) | 1 | 1,020,000. | | | | | | | |
| 2 Total cost of section 179 property place | d in service (see | instructions) | | | | | | 2 | |
| 3 Threshold cost of section 179 property b | 3 | 2,550,000. | | | | | | | |
| 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- | | | | | | | | | |
| 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions | | | | | | | | | |
| 6 (a) Description of prop | | | (b) Cost (busines | | | (c) Elec | ted cos | t | |
| | | | | | | | | | 1 |
| | | | | | | | | |] |
| | | | | | | | | |] · |
| | | | | | Ì | | | | |
| 7 Listed property Enter the amount from I | ine 29 | | | | 7 | | | | |
| 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 | | | | | | | 8 | | |
| 9 Tentative deduction Enter the smaller of line 5 or line 8 | | | | | | | | | |
| 10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 | | | | | | | | | |
| 11 Business income limitation. Enter the sm | | | s than zero) |) or lin | ne 5 | | | 11 | |
| 12 Section 179 expense deduction Add lin | | • | | • | | | | 12 | |
| 13 Carryover of disallowed deduction to 20 | • | | | ▶ | 13 | | | | |
| Note: Don't use Part II or Part III below for III | • | | | | | | | | |
| Part II Special Depreciation Allowan | ce and Other D | epreciation (Do | n't include | listed | prope | erty) | | | |
| 14 Special depreciation allowance for qualif | | - | | | | | | | |
| the tax year | | | . ,,, | | | | | 14 | |
| 15 Property subject to section 168(f)(1) elec | tion | | | | | | | 15 | |
| 16 Other depreciation (including ACRS) | | | | | | | | 16 | |
| Part III MACRS Depreciation (Don't | nclude listed pro | perty See instr | uctions) | | | | | | |
| | · | Sect | | | | | | | |
| | | | | | | | | | |
| 17 MACRS deductions for assets placed in | service in tax ve | | | | | | | 17 | |
| 17 MACRS deductions for assets placed in 18 If you are electing to group any assets placed in service | - | ars beginning b | efore 2019 | ts, chec | ck here | • | | 17 | |
| 17 MACRS deductions for assets placed in 18 If you are electing to group any assets placed in service Section B - Assets 8 | e during the tax year in | ars beginning b | efore 2019 al asset account | | | ▶ neral Depre | ciatio | | m |
| 18 If you are electing to group any assets placed in service Section B - Assets 8 | e during the tax year in Placed in Servic (b) Month and | ars beginning b nto one or more gener e During 2019 (c) Basis for de | efore 2019 all asset account Tax Year Us preciation | sing t | he Ge | . | $\neg \neg$ | n Syste | |
| 18 If you are electing to group any assets placed in service | e during the tax year in Placed in Servic | ars beginning b nto one or more gene e During 2019 | efore 2019 all asset account Tax Year Us preciation tment use | sing t | he Ge | | $\neg \neg$ | | m (g) Depreciation deduction |
| 18 If you are electing to group any assets placed in service Section B - Assets 8 | e during the tax year in Placed in Servic (b) Month and year placed | ars beginning b to one or more generate During 2019 (c) Besis for de (business/investines | efore 2019 all asset account Tax Year Us preciation tment use | sing t | he Ge | . | $\neg \neg$ | n Syste | |
| 18 If you are electing to group any assets placed in service Section B - Assets F (a) Classification of property | e during the tax year in Placed in Servic (b) Month and year placed | ars beginning b to one or more generate During 2019 (c) Besis for de (business/investines | efore 2019 all asset account Tax Year Us preciation tment use | sing t | he Ge | . | $\neg \neg$ | n Syste | |
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| Section B - Assets F (a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property | e during the tax year in Placed in Servic (b) Month and year placed in service | ars beginning b to one or more generate During 2019 (c) Besis for de (business/investines | efore 2019 all asset account Tax Year Us preciation tment use | 25 27 | Recovery period | (e) Conven | $\neg \neg$ | n Syste | |
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| Section B - Assets F (a) Classification of property 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 h Residential rental property i Nonresidential real property | e during the tax year in Placed in Service (b) Month and year placed in service // // // aced in Service | ars beginning b | efore 2019 al asset account Tax Year Us preciation Iment use ructions) | 25 27 27 | 5 yrs 5 yrs 9 yrs | (e) Conven | ion (f) | s/L S/L S/L S/L S/L S/L | (g) Depreciation deduction |
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| Section B - Assets F (a) Classification of property 19a 3-year property b 5-year property c 7-year property d 10-year property e 15-year property f 20-year property h Residential rental property i Nonresidential real property i Nonresidential real property C 30-year c 30-year d 40-year Part IV Summary (See instructions) 21 Listed property Enter amount from line 22 Total. Add amounts from line 12, lines 1 | e during the tax year in Placed in Service (b) Month and year placed in Service // // // aced in Service // // // aced in Service | es 19 and 20 in artnerships and | efore 2019 al asset account Tax Year Usi preciation Iment use ructions) ax Year Usi column (g), S corporatio | 2: 27 27 3: ng the 1: 3: 4: | 5 yrs 5 yrs 5 yrs 9 yrs 2 yrs 0 yrs | MM | ion (f) | S/L | (g) Depreciation deduction |

44 Total. Add amounts in column (f) See the instructions for where to report

42 Amortization of costs that begins during your 2019 tax year

43 Amortization of costs that began before your 2019 tax year

begins

Form 4562 (2019)

916252 12-12-19

nod or percentag

43

44

4562

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

2

 \mathbf{E} –

Sequence No 179

OMB No 1545-0172

► Go to www.irs.gov/Form4562 for instructions and the latest information. Internal Revenue Service (99) Name(s) shown on return ass or activity to which this form relates COMM BLDG RENTAL -PLYMOUTH HOUSING GROUP AND SUBSIDIARIES LEWISTON HOTEL 91-1122621 Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 1,020,000. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 3 2,550,000. 3 Threshold cost of section 179 property before reduction in limitation 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property Enter the amount from line 29 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2020 Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Don't include listed property) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 14 15 15 Property subject to section 168(f)(1) election 9,445. 16 Other depreciation (including ACRS) 16 Part III | MACRS Depreciation (Don't include listed property See instructions) Section A 115,935 17 17 MACRS deductions for assets placed in service in tax years beginning before 2019 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2019 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery period (a) Classification of property (e) Convention (f) Method (business/investment us only - see instructions) (a) Depreciation deduction IN SALVICA 19a 3-year property b 5-year property 7-year property C 10-year property d 15-year property e 20-year property S/L 25-year property ММ S/L 27 5 yrs Residential rental property h 27 5 yrs ММ S/L MM 39 yrs S/L i Nonresidential real property ММ S/L Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

40-year Part IV | Summary (See instructions)

20a

ь

C

Class life

12-year

30-year

21 Listed property Enter amount from line 28

22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr

23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

916251 12-12-19 LHA For Paperwork Reduction Act Notice, see separate 71 structions.

12 <u>yrs</u>

30 yrs

40 yrs

Form 4562 (2019)

125,380.

ММ

MM

S/L

S/L

S/I

S/L

21

916252 12-12-19

43 Amortization of costs that began before your 2019 tax year

44 Total. Add amounts in column (f) See the instructions for where to report

43

44

Form 4562 (2019)