ŕ	~ ~	990-T	Ex	empt Organization B	usin	ness Income	9 <b>3 9 3</b> 7 Iax Retu	126	6 6	3 4 2 4 0 OMB No 1545-0687
	Forn	330-1		(and proxy tax ur	ıder	r section 6033 7/1/2018 , and e	8(e)) 190	P	ł	2018
		artment of the Treasury	▶	Go to www.irs.gov/Form990T for i	nstru	ctions and the latest	information.		`	pen to Public Inspection fo
	Inter	nal Revenue Service Check box if	► Do no	et enter SSN numbers on this form as it m					5	01(c)(3) Organizations Only ridentification number
	A	address changed		<u> </u>		ne changed and see instru	ctions)			s' trust, see instructions )
		Exempt under section  X 501 (C ) (13 )		Interior Alaska Center for Non-Vid Number, street, and room or suite no. If a					,	22 0002020
	i	408(e) 220(e)	Print	726 26th Avenue, Suite 1	- 0 50	A, see insudenons		E U		92-0063639 d business activity code
	ĺ	408A 530(a)	or Type	City or town	State	e ZIP	code	(S	ee instru	ctions)
	i	529(a)	.,,,,,	Fairbanks	AK	99	701			
				Foreign country name Fo	oreign p	province/state/county Forei	n postal code			740000
		Pools value of all assets at	E Grou	I up exemption number (See instruc	tions	) ▶			-	713200
	-	Book value of all assets at end of year 13.965.775		ck organization type   X 501			) trust	4016	a) trus	other trust
	Н			ization's unrelated trades or busin			<u> </u>		•	(or first) unrelated
		trade or business her	e <mark>▶</mark> Ch	naritable Gaming		If only one, comple	te Parts I–V	If mo	re tha	n one, describe the
		trade or business, the		end of the previous sentence, com	plete	Parts I and II, comple	ete a Schedul	e M f	or eac	h additional
	$\overline{}$			poration a subsidiary in an affiliated g	roup o	or a parent-subsidiany	controlled arou	n2	-	
	•			itifying number of the parent corporal		a parent-subsidiary (	willioned grou	þ:		Yes X N
	J	The books are in care		Brenda Stanfill	_	Telephor	e number	<b>9</b> 1	07-452	2-2293
				Business Income		(A) Income	(B) Ex	penses		(C) Net
		a Gross receipts or sa		52,512		50.540			li	<b>**</b>
	2	b Less returns and allowa Cost of goods sold		c Balance ►	1c 2	52,512	-			-/+
	3	Gross profit Subtra		•	3	17,528 34,984				34,984
		a Capital gain net inco			4a	34,904				34,504
			•	rt II, line 17) (attach Form 4797)	4b	-6,272		/		-6,272
		c Capital loss deducti	on for tru	sts	4c					
	<del>~</del> 5	, ,	•	r an S corporation (attach statement)	5					
Š	∋ 6 7 -	Rent income (Sched		(0.1.1.5)	6	17,400	19	9,815		-2,415
6	- / √2 Ω	Unrelated debt-final		from a controlled organization (Schedule F)	8					
_ c	1707 ¥ A	-		(7), (9), or (17) organization (Schedule G)	9		<del> </del>			-
<u> </u>	<del>5</del> 10	Exploited exempt ac			10					
=	ร์ 11	Advertising income			11					
Ω	12			ns, attach schedule)	12					
NE	13	Total. Combine line			<u>1 13</u>	46,112		9,815		26,297
AN	Fa			ken Elsewhere (See instruction				Exce	pt for	contributions,
SC/	14	-		directly connected with the uni ectors, and trustees (Schedule K)	relate	<u>ea pusiness incom</u>	e.)		44	0.770
(C)	15	Salaries and wages		ectors, and trustees (Scriedule K)					14 15	3,772 1,009
	16	Repairs and mainte			,	_			16	1,009
	17	Bad debts			1	01720			17	
	18	Interest (attach sche	edule) (se	ee instructions)	U	01/1/			18	
$\bigcirc$	19	Taxes and licenses	(0	Landa de la landa de la landa de la					19	335
$\mathcal{L}$	20 21	Depreciation (attach		einstructions for limitation rules)		21	3,668		20	
U	22			n Schedule A and elsewhere on ret	urn	22a	3,000		22b	3,668
7	23	Depletion							23	0,000
ج ا	24	Contributions to def		npensation plans					24	
Rest 06173	25	Employee benefit pr						[	25	1,688
0	26 27	Excess exempt exp						ļ	26	
_	27 28	Excess readership of Other deductions (a							27 28	15 005
Ų	29	Total deductions.						28	29	15,825 26,297
$\preceq$	30			ncome before net operating loss de	educti	on Subtract line 29 f	rom line 13	• 0	30	0
M	31			arising in tax years beginning on or a					31	
	<u>32</u>	Unrelated business	taxable ır	ncome Subtract line 31 from line 3	80				32	0
$\mathcal{L}$	For	Paperwork Reduction A	Act Notice	e, see instructions.				_	`	Form <b>990-T</b> (2018

Part		Total Unrelated Business Taxable Income						
33	Total of	unrelated business taxable income computed from all unrelated trades or business	es (see					
	instruction	ons)	•		33		ol	
34	Amounts	s paid for disallowed fringes			34	_		
35		on for net operating loss arising in tax years beginning before January 1, 2018 (see	<b>:</b>					
	instruction				35		ol	
36		unrelated business taxable income before specific deduction. Subtract line 35 from	the sum					
		33 and 34			36		ol	
37	Specific	deduction (Generally \$1, 000, but see line 37 instructions for exceptions)			317		ō	
38		ed business taxable income. Subtract line 37 from line 36 If line 37 is greater tha	n line 36.		<del>                                     </del>	_		-
		e smaller of zero or line 36			38		ol	
Part	V 1	ax Computation						
39		ations Taxable as Corporations. Multiply line 38 by 21% (0 21)		•	39		ol	_
40	-	<b>Taxable at Trust Rates</b> . See instructions for tax computation. Income tax on the			1		┪	
		on line 38 from Tax rate schedule or Schedule D (Form 1041)		•	40		ł	
41		ax. See instructions			41			
42	-	ve minimum tax (trusts only)			42		$\neg$	
43		Noncompliant Facility Income. See instructions			43		<del>- i</del>	
44		dd lines 41, 42, and 43 to line 39 or 40, whichever applies			44	_	0	
Part		ax and Payments				<del></del>		
45 a		tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a					T	
b		edits (see instructions)		$\vdash$				
c		business credit Attach Form 3800 (see instructions)  45c		<del>                                     </del>				
d		or prior year minimum tax (attach Form 8801 or 8827)		<del>                                     </del>			- 1	
e		edits. Add lines 45a through 45d			45e		o	
46		line 45e from line 44			46		- 6	
47			attach sched	lula)	47		-4	
48		c. Add lines 46 and 47 (see instructions)	attacii scriet	iuicj	48		<u> </u>	
49		t 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2			49			
50 a		ts A 2017 overpayment credited to 2018		1 .	73		_	
b	-	timated tax payments 50b			4			
c		osited with Form 8868 50c						
ď		organizations Tax paid or withheld at source (see instructions)  50d						
e	_	withholding (see instructions)  50e						
f	-	r small employer health insurance premiums (attach Form 8941)  50f						
-		edits, adjustments, and payments Form 2439		-	'			
3			_					
E4		n 4136	0	L	54		اہ	
51 52	•	ed tax penalty (see instructions) Check if Form 2220 is attached		<b>┌</b> ┐┃	51 52		의	
52 53				╙╻	53		${}$	
54		. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed vment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpa	aid		54		읭	
55		1.1	Refunded		55		0	
Part		atements Regarding Certain Activities and Other Information (see ins			- <del> </del>		- 01	
							res	No
56	-	me during the 2018 calendar year, did the organization have an interest in or a sign			•	-	162	IVO
		nancial account (bank, securities, or other) in a foreign country? If "Yes," the organi		•				
	here ►	Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name	or the to	reign	country	-		
57		e tax year, did the organization receive a distribution from, or was it the grantor of, or tran-	eferor to	forou	an truct?			
31	-	see instructions for other forms the organization may have to file	316101 10, 6	a loreií	yıı ıı uət:	<b> </b>	<b></b> 1	_
58		e amount of tax-exempt interest received or accrued during the tax year > \$						
<del></del>		r penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to	the best of n	ny knowi	edge and beli	ef, it is true, c	orrect.	
Cian.	and o	complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge				,, -		
Sign		5/27/2020 Executive Director				discuss this		vith
Here		nature of officer Date Title		— I	instructions	r shown below )? Yes	$\overline{}$	No
	Sig						_	_
Paid		Print/Type preparer's name Preparer's signature Date		Chec		PTIN		
Prep					mployed			
Use		Firm's name		Firm's	EIN P	<del></del>		
-3 <del>-</del>	<b>∵</b> y	Firm's address		Phone	no			

<u>· · · · · · · · · · · · · · · · · · · </u>								000000		age J
Schedule A—Cost of Goo	ds Sold. Ente	r method o	f inven	tory valu	atioi	n <b>►</b>				
1 Inventory at beginning of	year	1		6	ln	ventory at en	d of year	6		
2 Purchases		2	17,528	7	C	ost of goods	sold. Subtract			
→ 3 → Cost of labor		3					5 Enter here			
4 a Additional section 263A	costs -					nd in Part I, lir		7	17,528	
(attach schedule)	4	la		8	Do	the rules of	section 263A (w	th respect to		+
<b>b</b> Other costs (attach sched	dule)	lb					ced or acquired f	•	-:	110
5 Total. Add lines 1 through	· —	5	17,528			ply to the org	•	,		
Schedule C—Rent Income		Property a	nd Per	rsonal P				operty)		
(see instructions)	•				•	•		1 1 7 7		
1. Description of property										
(1) 1410 23rd Avenue - Unit 2 &	. 3							•		-
(2)								-		_
(3)										
(4)								_		
	2. Rent receiv	ed or accrued	-							
(a) From nomenal property (if the no	received of sont	(1) 5				. / 4 4 1-	9/-> Ddd			
<ul> <li>(a) From personal property (if the personal property is more than</li> </ul>				d personal p or personal (			3(a) Deductions of in columns 20	a) and 2(b) (atta		me
more than 50%)		50% or r	f the rent is	s based on p	rofit o	r income)			•	
(4)		<u> </u>				47.400		<del></del>		2045
(1)						17,400			18	9,81 <u>5</u>
(3)		_								
(4)										
Total	0	Total				17,400				
						17,400	(b) Total deduc	tions.		
(c) Total income. Add totals of col		(b) Enter				47.400	Enter here and			
here and on page 1, Part I, line 6, o		<u> </u>				17,400	Part I, line 6, co	lumn (B)	19	9,81 <u>5</u>
Schedule E—Unrelated De	ept-Financed	income (se	ee instru T	ictions)		Γ				
			2. Gros	s income fro	m or	3. [	Deductions directly con to debt-finan		allocable	
1 Description of debt-	financed property		allocable	e to debt-fina property	nced	(a) Straight	line depreciation		er deductions	
				property			n schedule)		h schedule)	
(1)										
(2)									_	
(3)									_	
(4)		· <del></del> ·· ·-								
4. Amount of average	5. Average adj	usted basis	. ا	S. Column				9 Allega	ble deductions	
acquisition debt on or allocable to debt-financed	of or alloc debt-financed			4 divided			come reportable 2 × column 6)		total of colum	
property (attach schedule)	(attach sch		b <sub>i</sub>	y column 5		(۵,0,0,0,0	z ~ column o)	3(a)	and 3(b))	
(1)					%		0			0
(2)					<del>%</del>	l	0			<del></del> 0
(3)					<del>-/</del> %		0			<del></del> 0
(4)			<u> </u>		<del>//</del>		0	- /		
··			L			Enter har-	and on page 1.	Enter har-	and ac ====	
							7, column (A)		and on page 7, column (E	
Totals						i aiti, mie	7, Widilii (A)	r art i, iiile	r, coluinii (t	<u>0</u>
Total dividends-received deduct	ions included in	column 8					▶			

Form **990-T** (2018)

Schedule F—Interest, Annui	ties, Royalties,			Controlled Org Organizations	anizations (se	e instru	uctions)	<del></del>
Name of controlled organization	2. Employer identification number	3. Net un	related incom	ie 4. Total of specifi		e controlli	ng con	Deductions directly nected with income in column 5
(1)								
(2)								
(3)								
(4)								
Nonexempt Controlled Organization	ns							
7. Taxable Income	8. Net unrelated (loss) (see instru		9	. Total of specified payments made	10. Part of column included in the organization's	e controlli	ng conn	Deductions directly ected with income in column 10
(1)								
(2)								
(3)				-				
(4)				·				
Totals					Add columns Enter here and Part I, line 8,	d on page	1, Enter	columns 6 and 11 here and on page 1, I, line 8, column (B)
Schedule G—Investment Inc	ome of a Section	on 501/c	1/71 (91	or (17) Organiza	tion (see instri	ictions)	<u> </u>	
Description of income	2. Amount of		dır	B. Deductions ectly connected ttach schedule)	4 Set-aside	:s	and s	otal deductions et-asides (col. 3 plus col. 4)
(1)			,_				'	0
(2)								0
(3)								0
(4)								0
	Enter here and o				•			re and on page 1, ne 9, column (B)
Totals	<u> </u>	0	<del></del>					0
Schedule I—Exploited Exem	pt Activity Inco	me, Oth	er Than /	Advertising Inco	me (see instru	ctions)		
1. Description of exploited activity	2. Gross unrelated business incon from trade or business	ne conn prod ur	expenses irrectly ected with duction of irelated ess income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	attrib	xpenses utable to lumn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)				0				0
(2)				0	<del>                                     </del>			0
(3)				0			-	0
(4)				0		i i		0
	Enter here and page 1, Part I line 10, col (A	, page ) line 1	nere and on 1, Part I, 0, col (B)	· · · · · · · · · · · · · · · · · · ·			-	Enter here and on page 1, Part II, line 26
Totals	<u> </u>	<u> </u>	0	<u> </u>				] 0
Schedule J—Advertising Inc							<del></del>	
Part I Income From Peri	<u>odicals Reporte</u>	ed on a (	Consolid	ated Basis		,		·
1. Name of penodical	2. Gross advertising income		Direct tising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income		adership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)								
(2)								]
(3)								] i
(4)								
Totals (carry to Part II, line (5))	•	0	0	0			0	0

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in Part II columns 2 through 7 on a line-by-line basis.) 4. Advertising 7. Excess readership costs (column 6 minus column 5, 2. Gross gain-or (loss) (col 3. Direct 5. Circulation 6. Readership 1. Name of periodical advertising 2 minus col 3) If advertising costs ıncome costs ıncome a gain, compute but not more than column 4) cols 5 through 7 0 (1) 0 (2) 0 0 (3) 0 0 (4) 0 Totals from Part I 0 0 0 Enter here and on Enter here and on Enter here and page 1, Part I, page 1, Part I, on page 1, Part II, line 27 line 11, col (A) line 11, col (B) Totals, Part II (lines 1-5) 0 Schedule K—Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2 Title	3. Percent of time devoted to business	4 Compensation attributable to unrelated business
(1) Brenda Stanfill	Executive Director	3 05%	3,772
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		<b></b>	3,772

Form **990-T** (2018)

## Form 4562

**Depreciation and Amortization** 

(Including Information on Listed Property)

2018

Attachment

Department of the Treasury Internal Revenue Service

(99)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Sequence No 179

Name(s) shown on return Business or activity to which this form relates Identifying number Interior Alaska Center for Non-Violent Living 990T 92-0063639 **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I Maximum amount (see instructions) 1 1,000,000 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,500,000 4 Reduction in limitation Subtract line 3 from 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 instructions 5 1,000,000 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 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 0 9 Tentative deduction Enter the smaller of line 5 or line 8 9 0 10 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 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 2019 Add lines 9 and 10, less line 12 ▶ 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Don't include listed property. See instructions.) Part III Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2018 17 3,668 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 2018 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (a) Classification of property year placed (business/investment use (e) Convention (f) Method (a) Depreciation deduction penod in service only-see instructions) 19 a 3-year property **b** 5-year property 7-year property d 10-year property e 15-year property f 20-year property g 25-year property 25 yrs S/L h Residential rental 27 5 yrs MM S/L property 27 5 yrs MM S/L i Nonresidential real 39 vrs MM S/L MM S/L Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System 20 a Class life S/L **b** 12-year 12 yrs S/L c 30-year 30 yrs MM S/L d 40-year 40 yrs MM S/L Part IV Summary (See instructions) 21 Listed property Enter amount from line 28 21 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 instructions 22 3,668 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

متين المستريد							
Line 2	20 (990-T) <i>-</i>	- Charitable Contrib	utions				
	ck ("X") box	X Corporations	Cash			-	
CHE		=				<del></del>	
		Trusts 50%	Non Cas	h under \$5000		<del></del>	
		Trusts (combined)	Non Cas	h over \$5000			
			Г		Deduction	Adjustment	,
1 Cont	tributions for cu	irrent vear			Allowed in	under Section	New
	er the contributi	•		Amount	Current Year	170(d)(2)(B)	Carryov
	porations	chie by type	10% limitation	0	0	170(0)(2)(0)	Carryov
Trus		170(b)(1)(A)	50% limitation		0		
			30% limitation		0		
	yover from:			·			
	preceding perio	od	2a		_ [		
	oorations	470/L\/4\/A\	10% limitation	0	0		
Trust	15	1/U(D)(1)(A)	50% limitation 30% limitation	0	. 0		
b 4th r	oreceding perio		2b	<u>-</u>			
	orations		10% limitation	o	o		
Trust		170(b)(1)(A)	50% limitation	0			-
			30% limitation	0	0		
<b>c</b> 3rd <b>p</b>	preceding perio	od	2c				
Corp	oorations		10% limitation	0	0		
Trust	ts	170(b)(1)(A)	50% limitation	0	0		
4 0-4			30% limitation	<u>o</u> l	0		
	preceding perio	od	2d 10% limitation	0			
Trust	orations	170(b)(1)(A)	50% limitation	0	0		
1143		170(0)(1)(A)	30% limitation	0	0		
e 1st p	preceding perio	d	2e				
	orations		10% limitation	o	0		
Trust	ts	170(b)(1)(A)	50% limitation	0	0		
			30% limitation	0	0		_
3 Total			3 [	0	0	0	
		next year due to 5 year limi arryover to next year	tation			4 -	
J IOIAI	Continuation Ca	arryover to next year				<b>3</b> -	
	С	omputation of Section	179 Deduction	n for Estimate	d Charitable	Contribution	
		•					
		mputed without contribution		ction 179		6	
		tion for purposes of contribut				7 _	
		s Section 179 deduction Si		m line 6		8 -	·
		ion limitation Enter 10 perce tion considering Section 179		ller of line 3 colu	mp A or line O	9 10	
io Cont	indution deduct	ion considering Section 179	illillialion Siliai	iler of lifte 3, cold	min A or line 9	10 _	
		Computa	tion of Actual	Charitable Co	ntribution		
		•			<b></b>		
	al Section 179					11 _	
				446		12	
12 Taxal		s actual Section 179 deducti		e 11 from line 6			
12 Taxal	operating loss of	deductions limited by line 12			- 40	13	
<ul><li>12 Taxa</li><li>13 Net o</li><li>14 Taxa</li></ul>	operating loss of the control of the	deductions limited by line 12 purposes of contribution dec	duction Subtrac		e 12	14	
12 Taxal 13 Net c 14 Taxal 15 Maxii	operating loss of the complete income for immum contributions.	deductions limited by line 12 purposes of contribution decion limitation. Enter 10 perce	duction Subtracent of line 14	t line 13 from line	e 12	14 <u> </u>	
12 Taxal 13 Net c 14 Taxal 15 Maxii	operating loss of the complete income for immum contributions.	deductions limited by line 12 purposes of contribution dec	duction Subtracent of line 14	t line 13 from line	e 12	14	
12 Taxal 13 Net c 14 Taxal 15 Maxii	operating loss of the complete income for immum contributions.	deductions limited by line 12 purposes of contribution decion limitation. Enter 10 perce	duction Subtracent of line 14	t line 13 from line	e 12	14 <u> </u>	
12 Taxal 13 Net c 14 Taxal 15 Maxii	operating loss of the complete income for immum contributions.	deductions limited by line 12 purposes of contribution decion limitation. Enter 10 perce	duction Subtracent of line 14	t line 13 from line	e 12	14 <u> </u>	
12 Taxal 13 Net o 14 Taxal 15 Maxii 16 Actua	operating loss of the income for imum contribution of contribution of the income of th	deductions limited by line 12 purposes of contribution decion limitation. Enter 10 percededuction. Smaller of line 3	duction Subtracent of line 14	t line 13 from line	e 12	14 <u> </u>	
12 Taxal 13 Net c 14 Taxal 15 Maxii 16 Actua	operating loss of the income for imum contribution of the contribu	deductions limited by line 12 purposes of contribution decion limitation. Enter 10 percededuction. Smaller of line 3	duction Subtracent of line 14	t line 13 from line	e 12	14 <u> </u>	
12 Taxal 13 Net of 14 Taxal 15 Maxii 16 Actua  Line 2i 1 Autor	operating loss of the income for the income for the income for the income contribution of the income c	deductions limited by line 12 purposes of contribution decion limitation. Enter 10 percededuction. Smaller of line 3	duction Subtracent of line 14	t line 13 from line	e 12	14 <u> </u>	
12 Taxal 13 Net of 14 Taxal 15 Maxii 16 Actua  Line 2i 1 Autor 2 Insur	operating loss of the income for the income for the income for the income contribution of the income c	deductions limited by line 12 purposes of contribution decion limitation. Enter 10 percededuction. Smaller of line 3.  Other Deductions ck expenses	duction Subtracent of line 14	t line 13 from line	e 12	14 <u> </u>	
12 Taxal 13 Net of 14 Taxal 15 Maxii 16 Actua  Line 2i 1 Autor 2 Insur 3 Lega	bperating loss of the income for the income for the income for the income for the income department of the income departm	purposes of contribution decion limitation. Enter 10 percededuction. Smaller of line 3  Other Deductions  ck expenses  anal fees	duction Subtracent of line 14 , col A, or line 15	t line 13 from line	e 12	14 <u> </u>	10
12 Taxal 13 Net of 14 Taxal 15 Maxii 16 Actua  Line 2i 1 Autor 2 Insur 3 Lega 4 Code	bperating loss of the income for imum contribution of the income for imum contribution of the income and the importance at and profession section 162 e	deductions limited by line 12 purposes of contribution decion limitation. Enter 10 percededuction. Smaller of line 3  Other Deductions  ck expenses  anal fees expenses required for state lines.	duction Subtracent of line 14, col A, or line 15	t line 13 from line		14 <u> </u>	10
12 Taxal 13 Net of 14 Taxal 15 Maxii 16 Actua  1 Autor 2 Insur 2 Insur 3 Lega 4 Code 5 Office	bperating loss of the income for imum contribution of all contribution of the imum contribution	deductions limited by line 12 purposes of contribution decion limitation. Enter 10 percededuction. Smaller of line 3  Other Deductions  ck expenses  anal fees expenses required for state lines.	duction Subtracent of line 14, col A, or line 15	t line 13 from line		14 <u> </u>	10
12 Taxal 13 Net of 14 Taxal 15 Maxii 16 Actua  1 Autor 2 Insur 2 Insur 3 Lega 4 Code 5 Office	B (990-T) - mobile and tructance al and profession e Section 162 e e expenses behone	deductions limited by line 12 purposes of contribution decion limitation. Enter 10 percededuction. Smaller of line 3  Other Deductions  ck expenses  anal fees expenses required for state lines.	duction Subtracent of line 14, col A, or line 15	t line 13 from line		14 <u> </u>	10

Line 4b, Sch A (990-T) - Other Costs for Cost of Goods Sold

1	Travel, Meals and Entertainment	•		
	a Travel		1a	
	<b>b</b> Total meals and entertainment	1b		_
	c 50% of line b	1c	0	
	d Subtract line c from line b	,	1d	0
2	Depreciation		2	
3	Compensation of officers	•	3	<del></del>
4	Salesperson wages and commissions		4	<u> </u>
5	Indirect labor		5	
6	Rent		6	
7	Amortization		7	
8	Freight-in		8	
9	Supplies		9	
10	Taxes		10	
11	Utilities		11	
12			12	
13			13	
14			14	
15			15	
16	Total other costs		16	0
17	Reduction of expenses for offsetting credits (see attached statement)		17	0
18	Total other costs less expenses for offsetting credits		18	0

## Sch K (990-T) - Compensation of Officers, Directors, and Trustees

					Total:	3,772
			(c) Percent of	Percent of	corporation	
1			time devoted to	stock	owned	
	(a) Name of officer	(b) Title	business	(d) Common	(e) Preferred	(f) Amt of compensation
1	Brenda Stanfill	Executive Director	3 05%			3,772

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Line 35 (990-T) - Net Operating Loss Carryover	Net Operat	ing Loss C	arryover				
	Beginning	Ending	Amount of	Amount of Amount Used Adjustment	Adjustment		Amour
	Loss Period	Loss Period	Loss Period   Net Operating   in Prior Years/   Under Sec	in Prior Years/	Under Sec		Availab
Carryover Period	(M/D/YYYY)	(M/D/YYYY)	Loss	Carrybacks	_	Adjustments	This Ye
20th Preceding Period			0			0	
19th Preceding Period			0	0	0	0	
18th Preceding Period			0	0	0	0	

Г		·	6	0	0	ि	ान	0	10	0	6	ि	6	0	ि	10	Г	T0	0	Ю	0	6	ര
Cumulative	Unused Net	Operating Loss																				329	329
Net Operating	Loss Available	for Carryover	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0 .	329	0
	Expiring	Losses	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	Amount Used	This Year	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Amount	Available	This Year	0	0	0	0	0	0	0	0	0	0	0	0	0	O	0	0	o	0	0	329	0
		Adjustments	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	o	0	0	
Adjustment	Under Sec	170(d)(2)(B)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	o	0	0	0	
Amount Used	In Prior Years/	Carrybacks	0	0	0	0	0	0	0	0	0	0	0	0	0	5,654	0	0	0	0	0	0	
Amount of	Net Operating	Loss	0	0	0	0	0	0	0	0	0	0	0	0	0	5,654	0	0	0	0	0	329	0
Ending	Loss Period	(M/D/YYYY)													6/30/2011	6/30/2012	6/30/2013	6/30/2014	6/30/2015	6/30/2016	6/30/2017	6/30/2018	6/30/2019
Beginning	Loss Period	(M/D/YYYY)													7/1/2010	7/1/2011	7/1/2012	7/1/2013	7/1/2014	7/1/2015	7/1/2016	7/1/2017	7/1/2018
		Carryover Period	20th Preceding Period	19th Preceding Period	18th Preceding Period	17th Preceding Period	16th Preceding Period	15th Preceding Period	14th Preceding Period	13th Preceding Period	12th Preceding Period	11th Preceding Period	10th Preceding Period	9th Preceding Period	8th Preceding Period	7th Preceding Period	6th Preceding Period	5th Preceding Period	4th Preceding Period	3rd Preceding Period	2nd Preceding Period	1st Preceding Period	Current Period

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Total Net Operating Loss Used This Year:

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Taxable Income Before Net Operating Loss:

, Lí	ne 50b (990-T) -	Tax F	Pavments				_
						Date	Amount
1	First quarter estimated					1	
2	Second quarter estima					2	-
_3	Third quarter estimated			•		3	
4	Fourth quarter estimate			•		4	
5	The amount of any est				on as the		<del>-</del>
	beneficiary of a trust m	akıng a	a section 643(g)	election		5	
6	Other payments					6	0
_7	Total						0
La	ite Filing Penalty	and	Interest (99	)0-T)			
	End of tax year						6/30/2019
	Tax return due date						11/15/2019
	Taxes due with return						0
La	te Payment Penalty			• • •			
	Enter the date that total	al pavm	ent will be made				
	Number of months late					0	
	Monthly penalty rate for		avment			0 50%	
	Total late payment pen		<b>,</b>				0
			<u>_</u>			<del> </del>	
La	te Filing Penalty						
	Enter the due date or e	extende	ed due date if ext	ension was filed		11/15/2019	
	Enter the date the tax i		vill be filed				
	Number of months filed				0		
	Monthly penalty rate for		iling		5 00%		
	A Total late filing pen	alty			,	A0	
	If over 60 days late						
	Number of days return	will be	filed late		0		
	B Late filing penalty					3 0	
	Total late filing penalty	/lorgor	of A or B)				0
	Total late liling penalty	(larger	OIA OI B)	·-····································			0
La	te Interest						
	Enter the due date for Number of days return					<u>11/15/2019</u> 0	
	•		late				
	Quarterly interest rate(	s)			Internet Date		
				Number of Days	Interest Rate Per Annum	Late Interest Due	
	1/1/2019	to	3/31/2019	0	6 00%	0 00	
	4/1/2019	to	6/30/2019	0	0 00%	0 00	
	7/1/2019	to	9/30/2019	0	0 00%	0 00	
	10/1/2019	to	12/31/2019	0	0 00%	0 00	
	1/1/2020	to	3/31/2020		0 00%	0 00	
	4/1/2020	to	6/30/2020		0 00%	0 00	
	7/1/2020	to	9/30/2020	0	0 00%	0 00	
	10/1/2020	to	12/31/2020	0	0 00%	0 00	
	1/1/2021	to	3/31/2021		0 00%	0 00	
	4/1/2021	to	6/30/2021	0	0 00%	0 00	
	7/1/2021	to	9/30/2021	0	0 00%	0 00	
	10/1/2021	to	12/21/2021		0.00%	0.00	

0 00%

0 00

10/1/2021

to

12/31/2021