Ţ

Form 99	∩_Т	Exempt O	rganization E	Busir	ness Incom	e Ta	x Return	100C	OMB I	No 1545-0687
Form 99			er tax year beginning _				6/30	2019	2	2018
. '	l'or car		rs.gov/Form990T to					2013		
Department of the Internal Revenue S	Treasury		mbers on this form as it					1/31	Open to Pu	blic Inspection for
△ □ Check		Do not enter 3314 no			changed and see instri		ation is a sorte.	D E	mplover ider	rganizations Only ntification number
addres	s changed	Print WASILL	A AREA SENIO		•	·		- (mployees' tr structions)	ust, see
B Exempt und 501(C			ENTURY CIRCL		1110.				92-008	2770
408(e)	220(e)		A, AK 99654					F	inrelated bus	siness activity code
☐408A, <	530(a)							- '	See instruction	ons)
529(a)									713200	_
C Book value of a at end of year	Il assets	F Group exemption	number (See instruct	tions)						
-	59,671.	G Check organizat	ion type	501(c) corporation	5010	(c) trust	401(a)	trust	Other trust
H Enter the n	umber of the orga	anization's unrelated	trades or businesses	;	<u>1</u>	De	scribe the only	y (or first)	unrelated	
	ısıness here ► <u>G</u>									lete Parts I-V
		e the first in the bla or business, then co	nk space at the end	of the	previous senter	nce, cor	mplete Parts	l and II,	complete	a Schedule M
			ibsidiary in an affilia	ted ar	oup or a parent-	subsidia	ary controlled	group?	→ □ \	Yes X No
			er of the parent cor	_			,	9.000		Z
	are in care of >	DIANA HANSO		F		Te	elephone num	nber► 9	07-376·	-3104
Part I U	nrelated Trac	de or Business			(A) Income		(B) Expe		· ·	(C) Net
1 a Gross re	ceipts or sales									
	s and allowances		c Balance►	1 c						
2 Cost of g	oods sold (Sche	edule A, line 7)		2						
		e 2 from line to	IV/ED	3						
		(attach Scheduld	NACO (4a					ļ	
		rt I dine 17) (attach For	m 4797).	4b					<u> </u>	
c Capital Id	oss deduction to oss) from a partr	or Ests MAR 1 nersbite or an Scorpe	m 4797). 0 2020 0 2010	4c						
(attach s	statement)	·		5						
6 Rent inco	ome (Schedule (ୀ OGDE	N, UT	6						
		income (Schedule	•	7	551,	377.	78	7,723.		-236,346.
•	, , ,		d organization (Schedule F)	8					ļ	
		501(c)(7), (9), or (17) (•	9						
	i exempt activity ng income (Sch	y income (Schedule	e I)	10					 	
	•	edule 3) uctions, attach scho	adula)	11		-			 	
12 Other inc	one (See instit		STATEMENT 1	12	13	193.				43,193.
13 Total Co	mbine lines 3 th		SIAIEMENI I	13	594,	_	70'	7,723.	 -	-193,153.
			here (See instru							_195,155.
			t be directly con							
•		s, directors, and tru	stees (Schedule K)					14		
	and wages							15		
	and maintenance	e						16	1	
17 Bad debt		\						17	<u> </u>	
	attach schedule Id licenses	e) (see instructions)						18	 	
		(See instructions fo	or limitation rules)					19 20	 	
	tion (attach Fori		initiation rules)		21	I	280,70	-	<u> </u>	
	•	•	nd elsewhere on ref	urn	22a		280,70			
23 Depletion						<u> </u>	200,70	23		
•		l compensation pla	ns					24		
	e benefit progra	•						25		
	xempt expense:							26		
27 Excess re	eadership costs	(Schedule J)				055 ·	.m.s.m.c	27		
	ductions (attach	•			:	SEE S	TATEMENT	. 13		43,193.
		nes 14 through 28		ا مانت	التصلطان كالمد	20.4	V	d 29		43,193.
			net operating loss do Jinning on or after Januar			29 Tron	i line 13	30 31		<u>-236,346.</u>
			ot line 31 from line 3		o (acc manuchons)		2	$\frac{31}{32}$	 	-236,346.
		on Act Notice see			TEF A02	011 1/31/	10	 		n 990-T (2018)

Form	1 990-	(2018) WASILLA AREA SENIORS, INC.	92	-0082770	Page 2
Par	t III i	Total Unrelated Business Taxable Income			
33		of unrelated business taxable income computed from all unrelated trades or businesses (see			226 246
24		ictions) ints paid for disallowed fringes		33	-236,346.
34 35		ction for net operating loss arising in tax years beginning before January 1, 2018 (see	}		
		ictions) SEE STATEMENT 3		35	
36		of unrelated business taxable income before specific deduction. Subtract line 35 from the sum		20	226 246
		es 33 and 34	-	36 · ·	<u>-236, 346.</u>
		fic deduction (Generally \$1,000, but see line 37 instructions for exceptions) ated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,	ŀ	3/	
50		the smaller of zero or line 36	39	38	-236, 346.
Par	t IV	Tax Computation		•	
39	Orga	nizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	•	39	0.
40		s Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount			
		e 38 from Tax rate schedule or Schedule D (Form 1041).	•	40	
	_	y tax. See instructions	•	41	
		native minimum tax (trusts only) n Noncompliant Facility Income. See instructions		42	
44		Add lines 41, 42, and 43 to line 39 or 40, whichever applies	}	44	0.
Par				***	
		Tax and Payments on tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a	1		
		credits (see instructions)			
		ral business credit Attach Form 3800 (see instructions) 45c			
		t for prior year minimum tax (attach Form 8801 or 8827) 45 d			
		credits. Add lines 45a through 45d		45 e	0.
		act line 45e from line 44 taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866	-	46	0.
4/		taxes Check in from Form 4255 Form 8611 Form 8697 Form 8866		47	
48		tax. Add lines 46 and 47 (see instructions)		48	0.
49		net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	ŀ	49	
50 a		ents A 2017 overpayment credited to 2018 50 a	ŀ		
	-	estimated tax payments 50 b			
С	Tax d	eposited with Form 8868 50 c			
		gn organizations Tax paid or withheld at source (see instructions) 50 d			
		up withholding (see instructions) 50e			
		t for small employer health insurance premiums (attach Form 8941) credits, adjustments, and payments Form 2439			
9	_	orm 4136 Other Total 50 g		İ	
51	_	payments. Add lines 50a through 50g		51	0.
52		nated tax penalty (see instructions) Check if Form 2220 is attached	►□Ì	52	<u></u>
53		ue. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	→	53	
54	Over	payment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	•	54	
55	Enter	the amount of line 54 you want Credited to 2019 estimated tax ► Refur	nded 🏲	55	
Par	t VI	Statements Regarding Certain Activities and Other Information (see instructions	5)		
56	-	time during the 2018 calendar year, did the organization have an interest in or a signature or other auth	-		Yes No
		cial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization may have to file in	FINCEN	Form 114,	
		t of Foreign Bank and Financial Accounts If 'Yes,' enter the name of the foreign country here	- -		- X
57		g the tax year, did the organization receive a distribution from, or was it the grantor of, or transfer	ror to, a	a foreign trust?	X
		,' see instructions for other forms the organization may have to file	_		1 1 1
58	⊏nter	the amount of tax-exempt interest received or accrued during the tax year \(\) \\$ Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to t	U. the best of	f my knowledge and	
Sigr	1	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to t belief, living true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer			
Here		Signature of officer Date CEO Title		May the IRS discus the preparer shown instructions)?	below (see
		Date Hille		X	Yes No
Paid		Print/Type preparer's name Preparer's signature Date Check	k I if	PTIN	
Pre-			mployed	P016218	318
pare	r	Firm's name ALTMAN ROGERS & CO Firm's	s EIN 🟲	92-014318	2
Use		Firm's address 3000 C STREET SUITE 201			
Only	′	ANCHORAGE, AK 99503 Phone	e no	(907) 27	
$R\Delta\Delta$		TEFA02021 01/24/19		Form	990-T (2018)

1 01111 220-1 1	(5010) MVDITTV	VICTO SENT	ONS, INC.					000	2110		ugo u
Schedule	A – Cost of Good	ds Sold. Ente	r method of inve	entory valuation	>		-			•	
1 Invento	ory at beginning of year	ar	1	6	Invento	ry at e	end of year	6			
2 Purcha	ses		2	7	Cost of	f good	s sold. Subtract				
3 Cost of labor 3				line 6 f and in		ne 5 Enter here					
4 a Additional section 263A costs (attach schedule)				-	and in	Part I,	line 2	/		Yes	No
			4 a	8	Do the	rules	of section 263A (wit	h resn	ect to	103	
b Other cos (attach so	ch)		4 b				luced or acquired fo			<u>`</u>	
5 Total.	Add lines 1 through 4t)	5		to the	organiz	zation?				X
Schedule	C — Rent Income	(From Real	Property and	d Personal P	roperty	Leas	sed With Real Pi	rope	rty) (see in	struct	ions)
1 Descriptio	n of property										
(1)											
(2)								_			
(3)											
(4)									-		
		2 Rent receive	d or accrued				24.55.1.1				
(a) From personal prope	erty		eal and persona			3(a) Deduction the income in				
(if the p	percentage of rent for orty is more than 10%	personal but not	(if the perce	entage of rent faceeds 50% or it	or person the rent	ai IS			hedule)		
ргорс	more than 50%)	but not	based	on profit or inc	come)						
(1)											
(2)											
(3)	. =-										
(4)											
Total		·	Total								
(c) Total inco	ome. Add totals of col	umns 2(a) and	2(b) Enter				(b) Total deductions of here and on page 1, Par	Enter t			
here and on	page 1, Part I, line 6,	column (A)	>				I, line 6, column (B)	` ▶			
Schedule	E — Unrelated De	bt-Financed	Income (see	instructions)							
				•	,	3 De	ductions directly co	nnecte	ed with or a	llocab	le to
	1 Description of debt-	financed prope	ertv	2 Gross incom or allocable t		,	debt-finar	_	roperty SE		
	•		•	financed pro	perty		(a) Straight line (b) Other of cattach sch) (attach sch)		b) Other de	deductions	
						depr	eciation (attach sch	4_	(attach scl	ledule	
	VIEW SENIOR HO	USING LP			30.	ļ	9				20.
(2) RAVEN					0,585.		102,130			51,3	
	NA PLACE				4,726.	<u> </u>	<u>88,657</u>			23,2	
(4) EAGLES				·	3,900.	ļ	38,161			43,7	
	unt of average ition debt on or		justed basis of debt-financed	6 Columi divided			7 Gross income ortable (column 2 x		Allocable d (column 6 x		
allocable	to debt-financed		ach schedule)	column			column 6)		lumns 3(a)		
	(attach schedule)										
(1)	1,669,860.		1,917,666.	87.0	777 %	<u> </u>	26				25.
(2)	650,870.		1,063,852.	61.:	1805 %	<u> </u>	171,663			16,2	
(3)	560,854.		559,416.		0000 %	ļ .	224,726		3	11,8	
(4)	428,305.		1,202,08 <u>7.</u>	35.0	6301 %		51,272			64,8	
						Enter Part	here and on page I, line 7, column (A)	1, Ente Par	er here and t I, line 7, d	on pa column	age 1, า (B)
Totals					•		551,377	.	7	87,7	123.
	nds-received deductio	ns included in	column 8				,	-		•	
BAA			TE	EA0203L 01/30/19				_	Form 9	90-T ((2018)

TEEA0203L 01/30/19

Form **990-T** (2018)

orm 990-T (2018) WASILLA	AREA SENIORS, INC.			92	<u>-008</u>	327 <u>70</u>	P	Page 3
Schedule A — Cost of Goo	ds Sold. Enter method of inv	entory valuation						
1. Inventory at beginning of ye	ar 1	6 Invento	ry at e	end of year	6			
2 Purchases	2							
3 Cost of labor	3			ne 5 Enter here	7			
4 a Additional section 263A costs (attack	h schedule)	andini	and in Part I, line 2					No
	4 a	a Do the	rulaa	of coation 262A (unt	h .aa.		Yes	NO
b Other costs (attach sch)	4 b			of section 263A (wit luced or acquired fo				
5 Total. Add lines 1 through 4	5	to the o				,,		X
Schedule C - Rent Income	(From Real Property an	d Personal Property	Leas	sed With Real Pi	rope	rty) (see in	struct	ions)
Description of property		<u> </u>						
(1)								
(2)								
(3)								
(4)								
	2 Rent received or accrued		-					
(a) From personal prop		eal and personal property		3(a) Deductions				
(If the percentage of rent for property is more than 10%	personal (if the perc	entage of rent for personanceeds 50% or if the rent	al	the income in columns 2(a) and (attach schedule)			u 2(0)	,
more than 50%)	based	d on profit or income)	15					
(1)								
(2)								
(3)								
(4)								
otal	Total							
c) Total income. Add totals of col	umns 2(a) and 2(b) Enter			(b) Total deductions finere and on page 1, Par	Enter t			
nere and on page 1, Part I, line 6				I, line 6, column (B)	· •			
Schedule E — Unrelated De	bt-Financed Income (see	instructions)						
1 Description of debt	-financed property	2 Gross income from or allocable to debt-	3 De	ductions directly col debt-finar	nnect nced p	ed with or a property	llocab	le to
1 Description of desc	tinaneed property	financed property		(a) Straight line eciation (attach sch)	(b) Other d (attach so		ductio iedule	ns ;)
(1)KNIK MANOR		112,983.		51,745		1	60,4	143.
(2)							1	
(3)					1			
(4)					1			
4 Amount of average	5 Average adjusted basis of	6 Column 4		7 Gross income		Allocable de		
acquisition debt on or allocable to debt-financed	or allocable to debt-financed property (attach schedule)	divided by column 5	rep	ortable (column 2 x column 6)		(column 6 x olumns 3(a)		
property (attach schedule)	property (attack solitedate)	Column C				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ua 0	(0))
(1) 1,400,916.	1,526,464.	91.7752 %		103,690		1	94,7	736.
(2)		90						
(3)		%						
(4)		%						
				here and on page				
			Part	I, line 7, column (A)	Par	rt I, line 7, c	olumr	า (B)
otals		•			\perp			
otal dividends-received deduction	ans included in column 8				7			

TEEA0203L 01/30/19

Schedule F – Interest, A	nnuiti	es, Royaltı			trolled Or			Orgai	nizations	(see in	structions	s)	
1 Name of controlled organization	ıde	Employer entification number		3 Net unrelated income (loss) (see instructions)		Ť	4 Total of specified payments made		5 Part of co that is inclu the contro organizat gross inc		in c	Deductions directly connected with ncome in column 5	
(1)						╀							
(2)						┸							
(3)						╀							
(4)													
Nonexempt Controlled Organiz							100 1		0.11		44.5		
7 Taxable Income	ind	et unrelated come (loss) instructions)	9		f specifier nts made	a	10 Part of included in organizatio	n the c	ontrolling		connecte	ctions directly d with income olumn 10	
(1)													
(2)													
(3)													
(4)													
T-1-1-							Add columns here and on p 8, co		, Part I, line		and on p	s 6 and 11 Enter page 1, Part I, line lumn (B)	
Totals	4 1		-4: - ·	- E01/	-)/7) (0		(17) O	-:4:	<u> </u>	.11.	\		
1 Description of income			2 Amount of income		(c)(7), (9), or (17) Organ 3 Deductions directly connected (attach schedule)		4 Set-asides (attach schedule		s 5 Total ule) set-as		otal deductions and t-asides (column 3 plus column 4)		
(1)					· · · · ·		· · · · · · · · · · · · · · · · · · ·					<u> </u>	
(2)													
(3)													
(4)													
Totals	•	Enter here an Part I, line 9,	colui	mn (A)	The						Part I, I	ere and on page 1 one 9, column (B)	
Schedule I – Exploited E	xemp					т —			s income from		penses	1 35 .	
1 Description of exploited a	ctivity	2 Gross unrelate busines income fro trade o busines	ed connects production of uncor busines		nnected with froduction on the function function income		Net income (loss) m unrelated trade business (column ninus column 3) a gain, compute umns 5 through 7	activity that is not unrelated business income		attributable to		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)						-							
(2)						-							
(3)									-				
(4)													
Enter on Part colu		Enter here on page Part I, line column (e 1, on page le 10, Part I, line		age 1, , line 10,					,		Enter here and on page 1, Part II, line 26	
Totals Schedule J — Advertising	a Inco	1										1	
					1. 1		1.5						
Part I Income From Per	riodica					_			т			T==	
1 Name of periodical		2 Gross advertisii income	ng	adve	Oirect ertising osts	(0	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7		5 Circulation income		idership osts	7 Excess readership costs (col 6 minus col 5, but not more than col 4)	
(1)						Γ							
(2)		ļ										_	
(3)						1						_{	
(4)		-				1						<u> </u>	
Totals (carry to Part II, line (5))		-					į						

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Page 5

Form **990-T** (2018)

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 (col 6 minus col 5, but not more than col 4)				
(1)										
(2)										
(2) (3) (4)										
					<u> </u>					
Totals from Part I				A						
	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B)	1			Enter here and on page 1, Part II, line 27				
Totals, Part II (lines 1− 5)			7 18		e de des					
Schedule K - Compensation of	Officers, Dire	ctors, and Tru	ustees (see instri	uctions)	-					
1 Name		2 Title	3 Percent time devote to busines	ed to unrela	ation attributable ated business					
					%					
					%					
					%					
					%					
Total. Enter here and on page 1, Part II	, line 14	•			•					

TEEA0204 L 12/31/18

2018 ⁻	FEDERAL STATEMENTS	PAGE 1
		92-0082770
-	WASILLA AREA SENIORS, INC.	92-0062770
OTHER INC	T, PART I, LINE 12	\$ -2. 43,195. TOTAL \$ 43,193.
OTHER DE	T, PART II, LINE 28	\$ 43,193.
		TOTAL \$ 43,193.
LOSS EN 6/ 6/ 6/ 6/ NET OPERA TAXABLE I	T, PART III, LINE 35 TING LOSS DEDUCTION S YEAR ORIGINAL LOSS 30/13 \$ 56. \$ 30/14 35,896. 30/15 53. 30/16 181,932. 30/17 155,024. 30/18 216,680. FING LOSS AVAILABLE	LOSS AVAILABLE 0. \$ 56. 0. 35,896. 0. 53. 0. 181,932. 0. 155,024. 0. 216,680. \$ 589,641. \$ -236,346. \$ 0.
OTHER DE	SENIOR HOUSING LP ST SS	\$ 1. 3. 3. 8.
MANAGE RAVEN TRE CLEANI INSURA	MENT FEES TO WASI E ING AND MAINTENANCE INCE	5. TOTAL \$ 20. \$ 3,092. 12,049.
INTERE REPAIF SUPPLI TAXES UTILII	RS TES	3,462. 42,926. 29,727. 1,327. 8,299. 80,871. 22,641.

20	18
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FEDERAL STATEMENTS

PAGE 2

WASILLA AREA SENIORS, INC.

92-0082770

STATEMENT 4 (CONTINUED)
FORM 990-T, SCHEDULE E, LINE 3B
OTHER DEDUCTIONS ALLOCABLE TO DEBT-FINANCED PROPERTY

OTHER DEDUCTIONS ALLOCABLE TO DEBT-FINANCED PROPERTY	
EMPLOYEE BENEFITS MISCELLANEOUS EQUIPMENT ALARM MONITORING TRAVEL FACILITIES - OTHER VEHICLES TRAINING BANK FEES	\$ 41,475. 1,094. 1,480. 789. 14. 1,735. 365. 9. 12. TOTAL \$ 251,367.
SUSITNA PLACE CLEANING AND MAINTENANCE INSURANCE LEGAL AND PROFESSIONAL FEES INTEREST REPAIRS SUPPLIES TAXES UTILITIES WAGES AND SALARIES EMPLOYEE BENEFITS MISCELLANEOUS EQUIPMENT ALARM MONITORING TRAVEL FACILITIES - OTHER VEHICLES TRAINING BANK FEES	\$ 2,061. 9,562. 3,920. 26,765. 43,935. 1,211. 9,678. 60,749. 21,875. 37,491. 1,021. 3,342. 948. 11. 293. 355. 10.
DANK FEES	TOTAL $\frac{1}{223,228}$
EAGLES NEST CLEANING AND MAINTENANCE INSURANCE LEGAL AND PROFESSIONAL FEES INTEREST REPAIRS SUPPLIES TAXES UTILITIES WAGES AND SALARIES EMPLOYEE BENEFITS TRAVEL OTHER FACILITIES EQUIPMENT VEHICLES ALARM MONITORING & INSPECTIONS BANK FEES MISC	\$ 1,599. 5,956. 16,301. 27,365. 13,589. 525. 7,065. 38,711. 11,350. 19,354. 941. 753. 14. 778. 22. 374. TOTAL \$ 143,724.
KNIK MANOR CLEANING AND MAINTENANCE INSURANCE LEGAL AND PROFESSIONAL FEES INTEREST REPAIRS	\$ 1,066. 6,102. 17,698. 35,532. 15,958.

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ZU		0

FEDERAL STATEMENTS

PAGE 3

WASILLA AREA SENIORS, INC.

92-0082770

STATEMENT 4 (CONTINUED) FORM 990-T, SCHEDULE E, LINE 3B OTHER DEDUCTIONS ALLOCABLE TO DEBT-FINANCED PROPERTY

SUPPLIES	\$	666.
TAXES		5,030.
UTILITIES		40,866.
WAGES AND SALARIES		11,701.
EMPLOYEE BENEFITS		23,203.
TRAVEL		11.
FACILITIES - OTHER		672.
EQUIPMENT		1,063.
VEHICLES		16.
ALARM MONITORING & INSPECTIONS		410.
MISC		449.
TC	TAL \$	160,443.