	a a	_		ENDED TO MA			_				
Form	990-T	E	xempt Orgai				「ax Retur	' ም	OMB N	No 1545-0047	
	-8			nd proxy tax unde			2004		0	040	
		For cal	endar year 2019 or other tax yea	r beginning JUL 1,	20:	19 , and ending $J\overline{U}$	<u>אר 30, 20</u>	<u> 20</u> .	Z	019	
Departm	ent of the Treasury			irs.gov/Form990T for in				}	Open to P	ublic Inspection	n for
Internal F	Revenue Service	•	Do not enter SSN number				ration is a 501(c)(3			ublic Inspection Organizations Or fication number	
A L	Check box if address changed		Name of organization (Check box if name c	hanged	and see instructions.)		(Emp	oloyees' tru uctions)	st, see	
	mpt under section	Print	KENTS HILL S	SCHOOL					-	11532	
	501(d)/3)	Or	Number, street, and room		k, see in	structions.			lated busin Instruction	iess activity cod s)	le
·	408(e) 2 220(e)	Туре	P.O. BOX 25			- · · ·	·	4			
	408A 530(a) 529(a)		City or town, state or prov KENTS HILL,		r foreigi 0 2 5 7	n postal code 7	_	532	000		
C Book	value of all assets		F Group exemption numb	er (See instructions.)	>						<u> </u>
	53,732,6	44.	G Check organization type		oration	501(c) trust	401	(a) trust		Other trus	<u>:t</u> _C
H Ente	r the number of the o	organiza	tion's unrelated trades or b	usinesses. 🕨	2	Describe	the only (or first)	unrelated	I		
			TAL INCOME				, complete Parts I-			e,	
			ce at the end of the previou	is sentence, complete Pa	rts I an	d II, complete a Schedul	e M for each additi	onal trade	e or		
	ness, then complete l			······································							
			oration a subsidiary in an a		it-subsi	diary controlled group?	•	[] Yi	es 🔀	∑ No	
			ifying number of the paren	t corporation.		T-11	none number 🕨	207	<i>C</i> 0 <i>E</i>	1011	—
			ANDREW MAY le or Business Inc	ome		(A) Income	(B) Expens		003-	(C) Net /	
			le of Busiliess inc	Offic		(A) moonie	(b) Expens	, 1	 	(0) 1101	_
•	iross receipts or sale			c Balance	ا ۱۰		ľ		مينك .	All property of the second	- 1
(_1	ess returns and allow			c dalatice	1c 2		1. 		/		_
	ost of goods sold (S	ling 2 fr	om line 1)	•	3		<u>'</u>				<u> </u>
Z	iross profit. Subtract apital gain net incom	na (attac	h Schedule D\		4a		†				_
3 N	let nam (loss) (Form	4797 P	art II, line 17) (attach Form	4797)	4b						_
<i>a</i>	apital loss deduction			4.01)	4c		7				_
	•		ship or an S corporation (at	tach statement)	5		/ /		1		
	lent income (Schedu		(a.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	6			===	- 1 /		<u> </u>
	Inrelated debt-financ	•	ne (Schedule E)		7			REC			
			nd rents from a controlled c	organization (Schedule F)	8					SC	
9 Ir	nvestment income of	a sectio	on 501(c)(7), (9), or (17) or	ganization (Schedule G)	9		22	APR	4 2		
10 E	xploited exempt activ	vity inco	me (Schedule I)		10				L	RS	<u> </u>
11 A	dvertising income (S	Schedule	: J)		11 ,	<u>/</u>		06 5	EN-	HT	<u> </u>
12 0	other income (See ins	struction	is; attach schedule)		12	<u> </u>			,		1
	otal. Combine lines	3 throu	gh 12		13	0.	<u> </u>		<u>L</u>		—
Part	Deductio (Deductions	ns No must b	ot Taken Elsewhere be directly connected wi	e (See instructions fo th the unrelated busin	r lımıta ess inc	itions on deductions.) come.)					
14			rectors, and trustees (Sche		-			14	<u> </u>		—
\	Salaries and wages	, u	tottoro, and a dottoro (ound				•	15	1		_
	Repairs and mainten	ance						16			
	Bad debts			<i>j</i> .	•			17	Ĭ	_	
18	Interest (attach sche	dule) (se	ee instructions)					18_			
	Taxes and licenses	, ,						19			
7	Depreciation (attach	Form 45	562)			20		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
21	Less depreciation cla	aimed or	n Schedule A and elsewhere	e on return		21a		21b	ļ	(0.
22	Depletion		. /					22	ļ		
23	Contributions to defe	erred co	mpensation plans	•				23			
	Employee benefit pro	- /	/					24			
	Excess exempt expe	<i>_</i>	· ·					25	ļ		
	Excess readership co	,						26	 		
	Other deductions (at							27	 		
	Total deductions. A							28	 		0.
	/		ncome before net operating				•	_29	+		<u>0.</u>
	/	erating I	loss arising in tax years beg	ginning on or after Janua	ry 1, 20	18				1	0.
	(see instructions)		Dishbert Has 00 for					30	 		0.
	,		ncome. Subtract line 30 fro				·		Form	990-T (20	
923701	,01-27-20 LHA F0	raper	work Reduction Act Notice		7			$\Omega 1$	Q	, 555 - (20	513)

57 2019.05080 KENTS HILL SCHOOL

		KENTS HILL SCHOOL	01	-0211532 Page 2
(Pari	HAMI	Total Unrelated Business Taxable Income		
32	Total	of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	0.
33	Amou	nts paid for disallowed fringes	33	
34	Chari	able contributions (see instructions for limitation rules)	34	0.
35	Total	unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33	35	
36		ction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36	0.
37		of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37.	
38		fic deduction (Generally \$1,000, but see line 38 instructions for exceptions)	.38	1,000.
39	•	ated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	7	·····
•		the smaller of zero or line 37	39	0.
Part		Tax Computation		
40		izations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	0.
41	-	Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:		
71		Tax rate schedule or Schedule D (Form 1041)	41	
42		tax. See instructions	42	
	-		43	
43		ative minimum tax (trusts only)	44	
44		n Noncompliant Facility Income. See instructions	45	0.
45 ID 25		Add lines 42, 43, and 44 to line 40 or 41, whichever applies Tax and Payments	45	
			اعنده	
		In tax credit (corporations attach Form 1118; trusts attach Form 1116)		
b		credits (see instructions)		
C		al business credit. Attach Form 3800		
d		for prior year minimum tax (attach Form 8801 or 8827)		
е		credits. Add lines 46a through 46d	46e	
47		act line 46e from line 45	47	0.
48		taxes. Check If from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	48	
49		tax. Add lines 47 and 48 (see instructions)	49	0.
50		net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	0.
51 a	Paym	ents: A 2018 overpayment credited to 2019		
b	2019	estimated tax payments . 51b		
C	Tax d	eposited with Form 8868		
d	Foreig	n organizations: Tax paid or withheld at source (see instructions)		
е	Backı	p withholding (see instructions) 51e		
f	Credit	for small employer health insurance premiums (attach Form 8941)		
g	Other	credits, adjustments, and payments: Form 2439		
		Form 4136 Other Total ▶ 51g		
52	Total	payments. Add lines 51a through 51g	52	
53	Estim	ated tax penalty (see instructions). Check if Form 2220 is attached 🕨 📖	53	
54	Tax d	ue. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
55	Overp	ayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid .	55	<u> </u>
56		the amount of line 55 you want: Credited to 2020 estimated tax	56	
Part		Statements Regarding Certain Activities and Other Information (see instructions)		·
57	At any	rtime during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Yes No
	over a	i financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		
	FinCE	N Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country		
	here	>		X
58	Durin	g the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		<u> </u>
	If "Ye	s," see instructions for other forms the organization may have to file.		
59	Enter	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 the best of my knowled correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	ge and b	elief, It Is true,
Sign			v the IRS	discuss this return with
Here	'		-	r shown below (see
		Signature of officer Date Title inst	tructions)7 X Yes No
		Print/Type preparer's name Preparer's signature Date Check If	PTII	
Paic	4	self- employed		
	, pare	NICK CROSMAN NICK CROSMAN 03/22/21	_ P(01498238
-	Only	- NUTDELT LID	3.	9-0758449
U36	Only	30 LONG CREEK DRIVE		
			07.	774.5701
923711	01-27-2			Form 990-T (2019)
				· /

Schedule A - Cost of Goods	s Sold. Enter	method of inver	ntory va	luation > N/A					
1 Inventory at beginning of year	1			Inventory at end of yea	r		6		
2 Purchases	2		_	Cost of goods sold. St		ine 6	7 Mer		
3 Cost of labor	3			from line 5. Enter here					
4 a Additional section 263A costs				line 2			7	_	
(attach schedule)	4a		8	Do the rules of section	263A (\	with respect to		Yes	No
b Other costs (attach schedule)	4b	·	_	property produced or a					
5 Total, Add lines 1 through 4h	5			the organization?	·				
Schedule C - Rent Income (see instructions)	(From Real 1	Property and	d Pers	onal Property L	ease	d With Real Prop	erty)		
1. Description of property									
(1)									
(2)									
(3)									
(4)									
	2. Rent receive	ed or accrued							
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	than	of rent for	personal p	nal property (if the percentage roperty exceeds 50% or if d on profit or income)	ge	3(a) Deductions directly columns 2(a) a	y connect and 2(b) (a	ted with the Income attach schedule)	in
(1)		l							
(2)									
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)	<u> </u>			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	•		0.
Schedule E - Unrelated Deb	ot-Financed	income (see	e instruc	tions)					
			2.	Gross Income from		Deductions directly cor to debt-finan			
1. Description of debt-fli	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule	
(1)		_	1						
(2)									
(3)									
(4)									
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a	adjusted basis allocable to nced property n schedule)	6.	Column 4 divided by column 5		7. Gross Income reportable (column 2 x column 6)	(8 . Allocable deductions of column 6 x total of column 3(a) and 3(b))	olumns
(1)				%					
(2)	<u> </u>		 -	%					
(3)			 	%		· · · · · · · · · · · · · · · · · · ·			
(4)			—	%					
Allen	1		1			nter here and on page 1, Part I, line 7, column (A)		Enter here and on pa Part I, line 7, column	•
Totals						0	.1		0.
Total dividends-received deductions	ncluded in column	ı 8					<u> </u>		0.

Form 990-T (2019)

			Exempt (Controlled O	ganızati	ons			
1. Name of controlled organizat	Iden	mployer lification Imber		elated income Instructions)	4. Tot payr	al of specified nents made	Included in 1	olumn 4 that is the controlling s gross Income	6. Deductions directi connected with incom in column 5
)			 	-					
)			1		-				
			1						
<u>) </u>			 				 		
)							<u>L. </u>		L
nexempt Controlled Organi	zations		,						
7. Taxable Income	8. Net unrelated inc (see instruction		9. Total	of specified payr made	nents	10 Part of colu in the controll gross	mn 9 that is ind ing organizatio s income		Deductions directly connec with income in column 10
)			1						
)									
3)	1					···		1	
1)	1		 	·					
•}	1		<u></u>					-	
						Enter here and	nns 5 and 10 I on page 1, Pa column (A)	rt I, Ente	Add columns 6 and 11 er here and on page 1, Part line 8, column (B)
tals .					▶			0.	
chedule G - Investme	ent Income of a	Section	501(c)(7	'), (9), or (17) Org	anization			
(see inst	ructions)			ı				-,,-,-,-	1
1. Desc	ription of Income			2. Amount of	income	 Deduction directly connection (attach sched) 	cted	4. Set-asides (attach schedule	5. Total deduction and set-aside (col 3 plus col
)						(attach school	idie)		teel e blas eel
ý))				 				-	
n			-						
3)						·			
4)				<u> </u>		· 			
otals			•	Enter here and o Part I, line 9, co		diang	# # # # # # *		Enter here and on pa Part I, line 9, column
chedule I - Exploited (see instru	•	y Incom	e, Other	Than Adv	ertisin	g Income			•
(000 1110 111	T	1		A National	- ()>			······································	
1. Description of exploited activity	2. Gross unrelated business income from trade or business	directly with pr of un	openses connected roduction related ss income	4. Net incom from unrelated business (co minus columi gain, compute through	trade or lumn 2 n 3) If a n cols 5	5. Gross inco from activity to is not unrelate business inco	that ted	6. Expenses attributable to column 5	7. Excess exemplex penses (column 6 minus column but not more that column 4)
)		1							
2)		╁┈╌┈							
		+		ļ					
3)		+	-	 					
4)	Enter here and on page 1, Part I, line 10, col (A)	page	ere and on 1, Part I, 1, col (B)	, .	* °	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Enter here and on page 1, Part II, line 25
tals >	0.		0.					1.1	·
chedule J - Advertisi	ng Income (see	instructio	ns)						
Part I Income From	Periodicals Re	orted o	n a Cons	solidated	Basis				
		- 1		1 4					
1. Name of periodical	2. Gross advertising Income	adv	3. Direct vertising costs	4. Advert or (loss) (co col 3) If a ga cols 5 th	of 2 minus iin, comput	5. Circula Income		. Readership costs	7. Excess readersh costs (column 6 min column 5, but not mo than column 4)
)					7	س سر			
2)				1	, - '	` [
3)				7	•	-:			7
	- 			\dashv					┪
1)					1 .0	·1 -	$\!\!\!\!+\!\!\!\!-$		
	1	- 1				Ī	j		I

Form 990-T (2019) KENTS HILL SCHOOL 01-02115

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	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)		1						
(2)						-		
(3)	.		•					
(4)			 -					
Totals from I	Part I	▶	0.	0.	ie.	u .		0.
			Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)	الم الم	kita ya saki. Petar		Enter here and on page 1, Part II, line 26
Totals, Part		▶	0.	0.		**	A 1 - 1	0.

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

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)

FOOTNOTES STATEMENT 1

NOL CARRYBACK ELECTION:

UNDER IRC SECTION 172(B)(3), THE TAXPAYER ELECTS TO RELINQUISH THE ENTIRE CARRYBACK PERIOD WITH RESPECT TO ANY REGULAR TAX AND AMT NET OPERATING LOSS INCURRED DURING THE CURRENT TAX YEAR.

FORM 990-T	NET	OPERATING LOSS I	DEDUCTION	STATEMENT 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/13	34,571.	0.	34,571.	34,571.
06/30/14	59,857.	0.	59,857.	59,857.
06/30/15	71,148.	0.	71,148.	71,148.
06/30/16	73,233.	0.	73,233.	73,233.
06/30/17	66,670.	0.	66,670.	66,670.
06/30/18	66,828.	0.	66,828.	66,828.
NOL CARRYO	VER AVAILABLE THIS	YEAR	372,307.	372,307.

Unrelated Business Taxable Income from an

Unrelated Trade or Business

For calendar year 2019 or other tax year beginning JUL 1, 2019, and ending JUN 30,

OMB No 1545-0047

1

ENTITY

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990T for instructions and the latest information.

Open to Public Inspection for 501(c)(3) Organizations Only

Interna	Revenue Service Do not enter SSN numbers on this	form as it may be	made public if your organi	zation is <u>a 501(c)(3).</u>	501(c)(3) Organizations Only
Name	of the organization KENTS HILL SCHOOL			Employer identificati	
Ų		900099	····		
	Describe the unrelated trade or business NVE	STMENT A	CTIVITIES		
Pai	Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
	Gross receipts or sales				
		lance 1c			.
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit. Subtract line 2 from line 1c	3			
	Capital gain net income (attach Schedule D)	4a			-
c	•	4c			
5	Income (loss) from a partnership or an S corporation (atta				
_	statement)	5			
6	Rent income (Schedule C)	6	41,196.	137,482.	-96,286.
7	Unrelated debt-financed income (Schedule E)	7	41,190.	137,402.	-30,200.
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17)				
	organization (Schedule G)	9			
10	Exploited exempt activity income (Schedule I)	10_			
11	Advertising income (Schedule J)	11			
12	Other income (See instructions; attach schedule)	12	44 406	408 400	06.006
<u>13</u>	Total. Combine lines 3 through 12	13	41,196.	137,482.	-96,286.
Par 14	Deductions Not Taken Elsewhere (See directly connected with the unrelated bus Compensation of officers, directors, and trustees (Schedu	iness income		luctions.) (Deduction	ons must be
15	Salaries and wages	210 14		15	
16	Repairs and maintenance			16	
17	Bad debts			17	
18	Interest (attach schedule) (see instructions)			18	
19	Taxes and licenses			19	
20	Depreciation (attach Form 4562)		20	95,221.	
	Less depreciation claimed on Schedule A and elsewhere	on return	21a	95,221. 21b	0.
21	Depletion	OHIGIGIII	[214]	22	
22	•			23	
23	Contributions to deferred compensation plans			24	
24	Employee benefit programs		•	. 25	
25	Excess exempt expenses (Schedule I)			26	
26	Excess readership costs (Schedule J) Other deductions (attach schedule)			27	
27	Other deductions (attach schedule)			28	0.

LHA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 30 from line 29

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

Schedule M (Form 990-T) 2019

29

STMT

-96,286.

29

30

instructions)

SCHEDULE M	net net	NET OPERATING LOSS DEDUCTION					
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR			
06/30/19	53,699.		53,699.	53,699.			
NOL CARRYO	VER AVAILABLE THIS	YEAR	53,699.	53,699.			

· KENTS HILL S	сноот.		01-0211	532
Schedule A - Cost of Goods Sol	d. Enter method of invento	ory valuation	01 0211	332
1 Inventory at beginning of year	1	6 Inventory at end of year		6
2 Purchases	2	7 Cost of goods sold. Su	· -	n1
3 Cost of labor	3	from line 5. Enter here a		<u> </u>
4a Additional section 263A costs		line 2	<i>'</i>	7
(attach schedule)	4a	8 Do the rules of section :	263A (with respect to	Yes No
b Other costs (attach schedule)	4b		equired for resale) apply to	,
5 Total. Add lines 1 through 4b	5	the organization?		
Schedule C - Rent Income (From			eased With Real Prope	rty)
(see instructions)				
Description of property				
(1)				
(2)				
(3)				
(4)				
2.	Rent received or accrued			
(a) From personal property (If the percentage rent for personal property is more than 10% but not more than 50%)	' of rent for per	d personal property (if the percentag rsonal property exceeds 50% or if is based on profit or income)	e 3(a) Deductions directly co columns 2(a) and	onnected with the income in 2(b) (attach schedule)
(1)		· · · · · · · · · · · · · · · · · · ·		
(2)				
(3)		·········		· ****
(4)				
Total	Total	· · · · · · · · · · · · · · · · · · ·		
(c) Total income. Add totals of columns 2(a) a	nd 2(b). Enter		(b) Total deductions.	
here and on page 1, Part I, line 6, column (A)	. ` ′		Enter here and on page 1, Part I, line 6, column (B)	>
Schedule E - Unrelated Debt-Fir	nanced Income (see in	nstructions)		
		2. Gross income from	Deductions directly conne to debt-financed	
1. Description of debt-financed	property	or allocable to debt- financed property	(a) Straight line depreclation (attach schedule)	(b) Other deductions (attach schedule)
			STATEMENT 8	STATEMENT 9
(1) ALFOND ATHLETICS CE	NTER	76,346.	95,221.	159,564.
(2)				<u> </u>
(3)				
(4)			· ·	
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross Income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1) 3,300,284.	6,116,167.	53.96%	41,196.	137,482.
(2)		%	· · · · · · · · · · · · · · · · · · ·	
(3)		%		
(4)		%		
	STATEMENT 7		Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)

Form **990-T** (2019)

Totals

Total dividends-received deductions included in column 8

FORM 990-T (M) SCHEDULE E - UNRELATED DEBT-FINANCED AVERAGE ACQUISITION DEBT	INCOME	STATEMENT 6
DESCRIPTION OF DEBT-FINANCED PROPERTY ALFOND ATHLETICS CENTER	ACTIVITY NUMBER 1	AMOUNT OF OUTSTANDING DEBT
BEGINNING FIRST MONTH BEGINNING SECOND MONTH BEGINNING THIRD MONTH BEGINNING FOURTH MONTH BEGINNING SIXTH MONTH BEGINNING SEVENTH MONTH BEGINNING SEVENTH MONTH BEGINNING NINTH MONTH BEGINNING TENTH MONTH BEGINNING TENTH MONTH BEGINNING TWELFTH MONTH TOTAL OF ALL MONTHS NUMBER OF MONTHS IN YEAR		3,376,712. 3,362,816. 3,348,920. 3,335,024. 3,321,128. 3,307,232. 3,293,336. 3,279,440. 3,265,544. 3,251,648. 3,237,752. 3,223,856. 39,603,408. 12
TOTALS TO FORM 990-T, SCHEDULE E, COLUMN 4		
FORM 990-T (M) SCHEDULE E - UNRELATED DEBT-FINANCED AVERAGE ADJUSTED BASIS	INCOME	STATEMENT 7
	INCOME ACTIVIT NUMBER	
AVERAGE ADJUSTED BASIS DESCRIPTION OF DEBT-FINANCED PROPERTY	ACTIVIT	
AVERAGE ADJUSTED BASIS	ACTIVIT NUMBER	Y —

TOTAL TO FORM 990-T, SCHEDULE E, COLUMN 5

FORM 990-T (M) SCHEDULE E - DEPRECIAT	CION DEDUCTION	·	STATEMENT 8
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION - SUBTOTAL	- 1	95,221.	95,221.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN	1 3(A)		95,221.
FORM 990-T (M) SCHEDULE E - OTHE	R DEDUCTIONS		STATEMENT 9
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
PAYROLL EMPLOYEE BENEFITS MAINTENANCE, SUPPLIES AND EQUIP ELECTRICITY FUEL CONTRACTED SERVICES CAPITAL EXPENSE BASKETBALL FLOOR - SUBTOTAL	- 1	33,123. 8,987. 6,427. 26,728. 26,882. 4,719. 52,698.	159,564.

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

ENTITY

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning JUL 1, 2019, and ending JUN 30, 2020

► Go to www.irs.gov/Form990T for instructions and the latest information.

Open to Public Inspection for 501(c)(3) Organizations Only

Name of the organization KENTS HILL SCHOOL	5 it illay 25 i		Employer ider	tification		
Unrelated Business Activity Code (see instructions) > 900	002			-		
Describe the unrelated trade or business > SKI HILI	RENT.	AL	····			
Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	3	(C) Ne	t
1 a Gross receipts or sales					ŧ	
b Less returns and allowances c Balance	▶ 1c		·			
2 Cost of goods sold (Schedule A, line 7)	2]
3 Gross profit. Subtract line 2 from line 1c	3					
4 a Capital gain net income (attach Schedule D)	4a					
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b					
c Capital loss deduction for trusts	4c	<u></u>				
5 Income (loss) from a partnership or an S corporation (attach						
statement)	5	4 514	36.0	27	21	E12
6 Rent income (Schedule C)	6	4,514.	36,0	4/•	-31	<u>,513.</u>
7 Unrelated debt-financed income (Schedule E)	7				-	
8 Interest, annuities, royalties, and rents from a controlled						
organization (Schedule F)	8				-	
9 Investment income of a section 501(c)(7), (9), or (17)						
organization (Schedule G)	9			- 		
10 Exploited exempt activity income (Schedule I)	10					
11 Advertising income (Schedule J)	11 12				 	
12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12	13	4,514.	36,0	27.	-31	513.
						,
Part II Deductions Not Taken Elsewhere (See instrudirectly connected with the unrelated business			auctions.) (Dec	luctions	s must be	
uncerty connected with the difference business						
14 Compensation of officers, directors, and trustees (Schedule K)				14		
15 Salaries and wages			15			
16 Repairs and maintenance				16		
17 Bad debts				17		
18 Interest (attach schedule) (see instructions)			•	18		
19 Taxes and licenses		1 1		19		
20 Depreciation (attach Form 4562)		20				
21 Less depreciation claimed on Schedule A and elsewhere on retu	urn	21a		21b		
22 Depletion				22		
23 Contributions to deferred compensation plans				23		
24 Employee benefit programs				24		
25 Excess exempt expenses (Schedule I)				25		
26 Excess readership costs (Schedule J)				26 27		
27 Other deductions (attach schedule)	?7 Other deductions (attach schedule)				···	
28 Total deductions. Add lines 14 through 27				28	2.1	<u>0.</u>
29 Unrelated business taxable income before net operating loss de			13	29	-3 <u>1</u>	<u>513.</u>
30 Deduction for net operating loss arising in tax years beginning of	n or after J	anuary 1, 2018 (see	amen 4			Λ
instructions)	_		STMT 4	30	21	<u>0.</u>
31 Unrelated business taxable income. Subtract line 30 from line 2	9			31	-31	, <u>513.</u>

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

SCHEDULE M NET		OPERATING LOSS I	DEDUCTION	STATEMENT 4	
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR	
06/30/19	27,476.		27,476.	27,476.	
NOL CARRYO	VER AVAILABLE THIS	YEAR	27,476.	27,476.	

Form 990-T (2019)						01 021	1 5 2 9	Page 3
Schedule A - Cost of Goods	Sold Enter	method of inven	tone	valuation		01-021	133.	<u> </u>
KENTS HILL SCHOOL Schedule A - Cost of Goods Sold. Enter method of invent 1 Inventory at beginning of year 2 Purchases 2 3 Cost of labor 3 4 a Additional section 263A costs (attach schedule) 4a b Other costs (attach schedule) 4b 5 Total. Add lines 1 through 4b 5 Schedule C - Rent Income (From Real Property and (see instructions)			6 7 8	Inventory at end of year Cost of goods sold. So from line 5. Enter here line 2 Do the rules of section property produced or a the organization?	ubtract I and in F i 263A (v acquired	ine 6 Part I, with respect to I for resale) apply to	7	Yes No
(1) SKI HILL RENTAL								
(2)				.				
(3)				· · · · · · · · · · · · · · · · · · ·				_
(4)						T		
rent for personal property is more than of rent for personal property is more than			and personal property (if the percentage columns 2(a) and 2(b) (attach so the based on profit or income) 3(a) Deductions directly connected with columns 2(a) and 2(b) (attach so the based on profit or income) SEE STATEMENT				ttach schedule)	
(1)	4,514.	0.				-	36,027.	
(2)		-						
(3)	_			*****				
(4)					•			
Total	4,514.	Total			0.		, ,	
(c) Total income. Add totals of columns there and on page 1, Part I, line 6, column	2(a) and 2(b). En	ter		4,5		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>	36,027.
Schedule E - Unrelated Deb	t-Financed	Income (see	instru	ictions)				
			Gross income from or allocable to debt-financed property (a)			Deductions directly connected with or allocable to debt-financed property		
1. Description of debt-fin	anced property) Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)	
(1)	·				 			
(2)			1					
(3)								
(4)								
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 5. Average adjusted basis of or allocable to debt-financed property (attach schedule)			6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	((8. Allocable deductions column 6 x total of columns 3(a) and 3(b))	
(1)				%				
				%				
(2)				%				
(4)				%				
					E	nter here and on page 1,	E	inter here and on page 1,

Totals

Total dividends-received deductions included in column 8

FORM 990-T (M)	DEDUCTIONS	CONNECTED	WITH RENTAL	INCOME	STATEMENT 5
DESCRIPTION			ACTIVITY NUMBER	AMOUNT	TOTAL
ELECRICITY SKI HILL INSTRUCT REPAIRS & MAINTE PAYROLL EMPLOYEE BENEFIT	ENANCE			3,486. 3,852. 1,108. 21,216. 6,365.	26.005
		- SUBTOTA	L – 2		36,027.
TOTAL TO FORM 99	90-т, schedui	LE C, COLUI	MIN 3		36,027.

Depreciation and Amortization (Including Information on Listed Property)

Business or activity to which this form relates

 \mathbf{E} –

1

OMB No 1545-0172

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

► Attach to your tax return. ► Go to www.irs.gov/Form4562 for instructions and the latest information.

Sequence No 179 Identifying number

KENTS HILL SCHOOL			FOND ATH			
Part I Election To Expense Certain Property	Under Section 179	Note: If you have any	listed property, c	omplete Part	V before y	
1 Maximum amount (see instructions)	1	1,020,000.				
2 Total cost of section 179 property placed	2	<u></u>				
3 Threshold cost of section 179 property b	efore reduction in	n limitation			3	2,550,000.
4 Reduction in limitation. Subtract line 3 fr	om line 2. If zero (or less, enter -0-			4	
5 Dollar limitation for tax year Subtract line 4 from line 1.	If zero or less, enter -0	If married filing separately, see	Instructions		5	
6 (a) Description of prop	erty	(b) Cost (bus	iness use only)	(c) Elected o	cost	, · · · · · · · · · · · · · · · · · · ·
] ,
						, ,
]'
7 Listed property. Enter the amount from I	ne 29		7			a
8 Total elected cost of section 179 proper		n column (c), lines 6 and	17		8	
9 Tentative deduction. Enter the smaller of		(-,,		•	9	
10 Carryover of disallowed deduction from		18 Form 4562	•		10	
11 Business income limitation. Enter the sm	•		ero) or line 5		11	
12 Section 179 expense deduction. Add line		•	-		12	
13 Carryover of disallowed deduction to 20			▶ 13			Roll But Be
Note: Don't use Part II or Part III below for li						
Part II Special Depreciation Allowan			de listed propert	v.)		· · · · · · · · · · · · · · · · · · ·
14 Special depreciation allowance for qualif						<u> </u>
	ied property (othe	si triair iisted property) p	11 301 1100	during	14	
the tax year	t.a.			•	15	
15 Property subject to section 168(f)(1) elec	tion				16	
16 Other depreciation (including ACRS) Part III MACRS Depreciation (Don't i	nolude listed pror	norty See instructions)			1 10	<u> </u>
MACKS Depreciation (Don't	iciade listed prop	Section A				
47 AAA CDC dadaatica farancee alaced in			<u> </u>		17	
17 MACRS deductions for assets placed in	1 July 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
18 If you are electing to group any assets placed in service		During 2019 Tax Year		ral Deprecia		
Section B - Assets F	(b) Month and	(c) Basis for depreciation	1	Tar Deprecia	lion Oysic	
(a) Classification of property	year placed In service	(business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
		, , , , , , , , , , , , , , , , , , ,			 	
19a 3-year property		.	-			<u></u>
b 5-year property	 	"" '				
c 7-year property		*			 	
d 10-year property	 				 	
e 15-year property			- -			
f 20-year property			05	 	6//	·
g 25-year property	'		25 yrs.	 	S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
	 		27.5 yrs.	MM_	S/L_	<u> </u>
i Nonresidential real property	<u> </u>		39 yrs.	MM	S/L	
	<u> </u>			MM	S/L	
Section C - Assets PI	aced in Service I	During 2019 Tax Year I	Jsing the Altern	ative Depreci	ation Sys	tem
20a 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	<u> </u>
Part IV Summary (See instructions.)						
21 Listed property. Enter amount from line	28				21	
22 Total. Add amounts from line 12, lines 1		es 19 and 20 in column (g), and line 21.			-
Enter here and on the appropriate lines of	_			<u></u>	22	95,221.
23 For assets shown above and placed in s		;				
nortion of the hasis attributable to section 263A costs						ļ. ^ i

494752_1

01-0211532 Page 2 Form 4562 (2019) KENTS HILL SCHOOL Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for Part V entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes 24b If "Yes," is the evidence written? Yes No No (b) (c) (i) (e) (f) (g) Date Elected Business/ Basis for depreciation Recovery Method/ Depreciation Type of property Cost or section 179 placed in investment (business/Investment deduction (list vehicles first) other basis period Convention use percentage use only) service cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use: % % 27 Property used 50% or less in a qualified business use % S/L % S/L % S/L 28 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. **(f)** (a) (b) (c) (d) (e) Vehicle Vehicle Vehicle Vehicle 30 Total business/investment miles driven during the Vehicle Vehicle year (don't include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use Yes No Yes No Yes Yes during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. Yes No 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use?

the use of the verticles, and retain the information received?

41 Do you meet the requirements concerning qualified automobile demonstration use?

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

(a)

Description of costs

(b)

Other information is "Yes," don't complete Section B for the covered vehicles.

(c)

Other information is "Yes," don't complete Section B for the covered vehicles.

(b)

Other information is "Yes," don't complete Section B for the covered vehicles.

(b)

Other information is "Yes," don't complete Section B for the covered vehicles.

(c)

Other information is "Yes," don't complete Section B for the covered vehicles.

(d)

Other information is "Yes," don't complete Section B for the covered vehicles.

	Description of costs	Date amortization begins	Amortizable amount	Code section	Amortization period or percentage	Amortization for this year	
42	Amortization of costs that begins during your 2	2019 tax year.					
_						144,	
		<u></u>			l		
43	Amortization of costs that began before your 2	43					
44	Total Add amounts in column (f) See the instr	44					

916252 12-12-19

Form 4562 (2019)