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Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Setting the public of your organization is a 501(c)(3). A
Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). A
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Solic Sol
The process are in care of Suzame Bagdasarian Telephone number 603-516-9300
Google Source Given G
Solicion
C Book value of all assets at each of lyear and of year and year and of year and year and of year and of year and year and of year and year and of year and of year and year and of year and of year and of year and year and of year and of year and of year and year and year and wages and officers, drectors, and trustees (Schedule K PCEIVED 17 and wages and officers, drectors, and trustees (Schedule K PCEIVED 18 and wages 18 Novy 19 2019 18 Novy 19
Enter the number of the organization type
trade or business here ▶ describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes X No II 'Yes,' enter the name and identifying number of the parent corporation. ▶ J The books are in care of ▶ Suzame Bagdasarian Telephone number ▶ 603-516-9300 [Part 1] Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1 a gross receipts or sales b Less returns and allowances 2 Cost of goods sold (Schedule A, line 7) 3 Gross profit. Subtract line 2 from line 1c 4 a Capital gain net income (attach Schedule D) b Net gain (loss) (From 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (Ioss) from a partnership or an S corporation (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annutius, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule F) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions, attach schedule) 13 Total. Complenies 3 through 12 [Exart III] Deductions Not Taken Elsewhere (See instructions for Immitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K) RECEIVED 15 Salares and wages 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions)
describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete A Schedule M for each additional trade or business, then complete Parts III-V. During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?
During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes X No H Yes, enter the name and identifying number of the parent corporation.
During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes
If Yes,* enter the name and identifying number of the parent corporation.
The books are in care of Suzanne Bagdasarian Telephone number 603-516-9300 Rart Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales
Income Capital companies Capital compani
1a Gross receipts or sales b Less returns and allowances 2 Cost of goods sold (Schedule A, Inne 7) 3 Gross profit. Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule G) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule J) 11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12 Part III Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K RECEIVED 15 15 Salanes and wages 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 18
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Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9
10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12 13 Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K) 15 Salaries and wages 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions)
Advertising income (Schedule J) 12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12 13 0. Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K Salaries and wages 15 Salaries and maintenance 16 Repairs and maintenance 17 Bad debts Interest (attach schedule) (see instructions)
Total. Combine lines 3 through 12 Part III Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income) 14
Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income) 14
(Except for contributions, deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K) 15 Salaries and wages 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 18 Interest (attach schedule) (see instructions)
Compensation of officers, directors, and trustees (Schedule K) Salaries and wages Repairs and maintenance Bad debts Interest (attach schedule) (see instructions) RECEIVED 15 16 17 18
15 Salaries and wages 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) RECEIVED 16 17 18 18
16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 19 NOV 1 9 2019 10 17 18
19 Taxes and licenses 19 Taxes 1
21 Depregation (attach Form 4562)
22 Less degreciation claimed on Schedule A and elsewhere on return 22a 22b
23 Depletion 24 Contributions to deferred compensation plans 25 24
25 Employee benefit programs 25
26 Excess exempt expenses (Schedule I)
27 Excess readership costs (Schedule J) 28 Other deductions (attach schedule) 28 28
25 Sills (gastions (analysis)
Complication and the control of the
<u> </u>
32Unrelated business taxable income. Subtract line 31 from line 3032U.823701 01-09-19 LHAFor Paperwork Reduction Act Notice, see instructionsForm 990-T (2018)

Form 990-			02-	036	612	O Page
Part	III Total Unrelated Business Taxable Income					
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (se	e instru	ctions)		33	0
34	Amounts paid for disallowed fringes				34	6,850
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instru	uctions)			35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the si	um of				
	lines 33 and 34				36	6,850
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)				37	1,000
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 3	36,				· · ·
	enter the smaller of zero or line 36	•			38	5,850
Part	IV Tax Computation					· · · · · · · · · · · · · · · · · · ·
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)		·		39	1,229
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount of	on line 3	38 from	•	1 4-21	· · · · ·
	Tax rate schedule or Schedule D (Form 1041)			•	40	
41	Proxy tax See instructions				41	
42	Alternative minimum tax (trusts only)				42	
43	Tax on Noncompliant Facility Income. See instructions				43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies				44	1,229
	Tax and Payments				44	1,225
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a			***J#	
b		45b				
	0 11 11 15 0000	45c				
C	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d				
	, ,	45u			4F.	
	Total credits Add lines 45a through 45d				45e	1,229
46	Subtract line 45e from line 44	cc] 045		46	1,223
47	Other taxes. Check if from. Form 4255 Form 8611 Form 8697 Form 886	00	Other (attach sche	dule)	47	1,229
48	Total tax. Add lines 46 and 47 (see instructions)				48	
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	1 1			49	0
	a Payments: A 2017 overpayment credited to 2018	50a		4.0		
	2018 estimated tax payments	50b	4	40.	100	
	: Tax deposited with Form 8868	50c				
C	f Foreign organizations, Tax paid or withheld at source (see instructions)	50d				
6	e Backup withholding (see instructions)	50e			1135	
f	Credit for small employer health insurance premiums (attach Form 8941)	50f				
ç	Other credits, adjustments, and payments: Form 2439	1 1				
	Form 4136 Other Total ▶	50g			10 4	
51	Total payments Add lines 50a through 50g				51	440
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached 🕨 📖				52	9
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed				53	798
54	Overpayment 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		Refunded	>	55	
,Part)	Statements Regarding Certain Activities and Other Information	on (see	e instructions)			
56	At any time during the 2018 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	n may ha	ive to file			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the	foreign	country			
	here >					X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or tra	ansferor	to, a foreign trust	?		X
	If "Yes," see instructions for other forms the organization may have to file.					
58	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 s	statement	s, and to the best of r	ny kao	wledge ar	nd belief, it is true,
Sign	correct, and condition of preparer (other than taxpayer) is based on all information of which prepare	rer has an	y knowledge	_		
Here		er			-	discuss this return with shown below (see
	Signature of Officer Date Title				structions	
	Print/Type preparer's name Preparer's signature Dat	te	Check		f PTIN	
	Barbara J. McGuan, Barbara J. McGuan,		self- emp	—	. ' '"	•
Paid		/05		oyeu	ום	00219457
Prepa	Porre Dunn Manail C Darkor IIC	., 05,	Firm's E	INI 🛌		1-0523282
Use (P.O. Box 1100		FIRMSE	IIV P	0.	1 0323202
			Dhans -	, ,	207) 775-2387
000711			Phone n	<u> </u>	207	Form 990-T (201)
823711 0	בו -בט-ו					Form 990-1 (201)

Schedule A - Cost of Good	s Sold. Enter	method of inver	ntory valuation N/A						
1 Inventory at beginning of year	1		6 Inventory at end of year	ır		6			
2 Purchases	2		7 Cost of goods sold. Subtract line 6						
3 Cost of labor	3		from line 5. Enter here	and in F	Part I,	19 9 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
4 a Additional section 263A costs			line 2	7					
(attach schedule)	4a	<u>-</u>	8 Do the rules of section	Yes No					
b Other costs (attach schedule)	4b	_	property produced or acquired for resale) apply to						
5 Total. Add lines 1 through 4b	5	_	the organization?						
Schedule C - Rent Income (see instructions)	(From Real	Property an	d Personal Property	Lease	ed With Real Prop	erty)			
1. Description of property									
(1)									
(2)									
(3)			·						
(4)									
		ed or accrued			3(a) Deductions directly of	onnected with the income in			
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	e than	of rent for	and personal property (if the percent personal property exceeds 50% or if nt is based on profit or income)	age	ge 3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)				
(1)									
(2)									
(3)									
(4)			·						
Total	0.	Total		0.	(b) T-4-1 d-d44				
(c) Total income. Add totals of columns here and on page 1, 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	ot-Financed	Income (see	2. Gross income from		3. Deductions directly conne	ected with or allocable			
1. Description of debt-fit	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)			
(1)									
(2)									
(3)									
(4)									
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or a debt-fina	adjusted basis illocable to nced property i 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)			%						
(3)			%						
(4)			%						
					nter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)			
Totals			>		0.	0.			
Total dividends-received deductions in	icluded in column	8				0.			
						Form 990-T (2018)			

		111	15		11		- A : -			
Schedule F - Interest,	Annuities, Roya	alties, ar	nd Rents	s From Co	ontroll	ed Organiz	zatio	ns (see ins	struction	ns)
,			Exempt (Controlled O	rganızat	ions				
1. Name of controlled organiza	rdenti	mployer ification mber	Net unrelated income (loss) (see instructions)		4. Total of specified payments made		5. Part of column 4 t included in the controrganization's gross in		rolling	6. Deductions directly connected with income in column 5
/1\								 -	\rightarrow	
<u>(1)</u> (2)							├		+	
(3)			 				 			-
(4)					-					
Nonexempt Controlled Organ	uzations	-					L			
7. Taxable Income	8 Net unrelated inco	me (loce)	O Total	of specified pay	monte	10. Part of colu	mn Q tha	t is included	11 0	eductions directly connected
7. Taxable Income	(see instructio		9, 10.21	made		in the controll	ing orgai	nization's		h income in column 10
(1)										
(2)	†					-				
(3)	1									
(4)			<u> </u>							
(4)	<u>I.</u>		1			Add colum				dd columns 6 and 11
						Enter here and tine 8, o	column (Lines	here and on page 1, Part I, line 8, column (B)
Totals					>			0.		0
Schedule G - Investme	ent Income of a tructions)	Section	501(c)(7), (9), or	(17) O	rganizatior	1			
						3. Deductio		4. Set-	asidos	5. Total deductions
1 Des	cription of income			2. Amount of	income	directly conne (attach sched			schedule)	and set-asides (col 3 plus col 4)
(1)	<u> </u>		-							
(2)										
(3)								<u> </u>		
(4)										
			-	Enter here and	on page 1,	CATATION	i kingiri.	l Stevetor		Enter here and on page
Totals			_	Part I, line 9, co	lumn (A)					Part I, line 9, column (B)
Schedule I - Exploited	Exempt Activit	y Incom	e, Other	r Than Ac		ing Income	<u> </u>	इत्या प्रथमित्र । ज्या र	01. An 1884 1.7	0.00
(see instr	uctions)					T				· · · · · · · · · · · · · · · · · · ·
1. Description of exploited activity	2. Gross unrelated business income from trade or business	directly of unit	penses connected oduction related is income	4 Net incom from unrelated business (co minus colum gain, comput through	I trade or dumn 2 n 3) If a e cols 5	5. Gross inco from activity is not unrelat business inco	that ted	attribut	penses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)										
(2)								<u> </u>		
(3)			-	_						
(4)	-									
(1)	Enter here and on page 1, Part I,	page 1	re and on							Enter here and on page 1,
-	line 10, col (A)	1	, col (B)							Part II, line 26
Totals •	0.		<u> </u>	Tark Strategy		insi 40°. Melatrik			kádstr	0
Schedule J - Advertis										
Part∰ Income From	Periodicals Rej	ported o	n a Con	solidated	Basis	•				
	2 Gross		3 Direct	4. Advert	ising gain of 2 minus	5 Circulat	tion	6. Read	ership	7. Excess readership costs (column 6 minus
1. Name of periodical	income	adv	ertising costs	col 3) If a ga		rte income	•	cost	ts	column 5, but not more than column 4)
(1)						ega Car				
(2)		_								
(3)										
(4)					制的基份	\$4°				
Totals (carry to Part II, line (5))		0.	0							0.
		•								Form 990-T (2018

02-0366120

Page 5

Behavioral Health & Developmental

Form 990-T (2018) Services of Strafford County, Inc. 02-03661

Partill Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in advance 2 though 7 and lead to the basis) 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 (column 6 minus column 5, but not more than column 4)
(1)	T						
(2)							
(3)							
(4)							
Totals from Part I	▶	0.	0.				0.
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (8)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	▶	0.	0.				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 (2018)