Form 990-	Extended to 1 T Exempt Organization But	May 1	5,2020 ss Income Ta	ax Return	L	OMB No 1545-0687		
rain GGG	(and proxy tax un	der sec	tion 6033(e))	190	ωГ			
	For calendar year 2018 or other tax year beginning JUL 1			1 30, 2019	ĭ	2018		
Department of the	Go to work its nov/Form990T for				- L			
Internal Revenue		ay be mad	e public if your organizat			Open to Public Inspection for 01(c)(3) Organizations Only		
A Check addre	box if Name of organization (Check box if names changed	Name of organization (Check box if name changed and see instructions.) D Employer identification number (Employees' trust, see Instructions)						
B Exempt un	er section Print RUMSEY HALL SCHOOL IN	<u>c</u>				5-0692379		
X 501(C		box, see in:	structions			ted business activity code structions.)		
408(e)	201 ROMFORD ROAD							
408A 529(a)	City or town, state or province, country, and ZIF WASHINGTON DEPOT, CT	or toreign 0679			5311	120		
o Book value of		D	<u> </u>					
at end of year 2	222, 412. G Check organization type X 501(c) of		501(c) trust	401(a)	trust	Other trust		
	mber of the organization's unrelated trades or businesses.	1		he only (or first) unr				
trade or bus	ness here See Statement 1			complete Parts I-V. I		than one,		
	first in the blank space at the end of the previous sentence, complete	Parts I and						
	n complete Parts III-V.							
I During the t	x year, was the corporation a subsidiary in an affiliated group or a pa	rent-subsid	diary controlled group?	▶ [Ye:	s 🗶 No		
	r the name and identifying number of the parent corporation.							
	e in care of GORDON RINGER			ne number > 8				
Part I	Inrelated Trade or Business Income		(A) Income	(B) Expenses		(C) Net		
_	eipts or sales							
	rns and allowances c Balance	► 1c						
``	oods sold (Schedule A, line 7)	2						
•	offit. Subtract line 2 from line 1c	3				1		
-	ain net income (attach Schedule D)	4a				IVED 10		
-	(loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			-C4	WE TOO		
	ss deduction for trusts	4c 5		R		180 1800		
	loss) from a partnership or an S corporation (attach statement) ome (Schedule C)	6			20	2 1 5000 Jail		
	I debt-financed income (Schedule E)	7		181	74x	27 2020 65		
	annuities, royalties, and rents from a controlled organization (Schedule			181		DEN, UT		
•	nt income of a section 501(c)(7), (9), or (17) organization (Schedule				_a			
	exempt activity income (Schedule I)	10						
•	ng income (Schedule J)	11						
12 Other in	ome (See instructions; attach schedule) Statement 2	12	168,970.			168,970.		
	ombine lines 3 through 12	13	168,970.			168,970.		
	Deductions Not Taken Elsewhere (See instruction							
	Except for contributions, deductions must be directly connec	ted with t	he unrelated business	income.)	,			
)	nsation of officers, directors, and trustees (Schedule K)				14			
_	and wages		•		15	60,928.		
,	and maintenance				16	-		
17 Bad de	• • • • • • •				17			
-	(attach schedule) (see instructions)			•	18	1 551		
	nd licenses ple contributions (See instructions for limitation rules)		• •	• •	19 20	4,661.		
	ation (attach Form 4562)		21	78,953.	-20			
	preclation claimed on Schedule A and elsewhere on return		22a	, , , , , , , ,	22b	78,953.		
23 Deplet	•		. , [253]		23	, , , , , , , , ,		
	utions to deferred compensation plans				24			
	ee benefit programs		· · · · · · · · · · · · · · · · · · ·		25	1,084.		
	exempt expenses (Schedule I)				26			
	readership costs (Schedule J)	•			27			
	eductions (attach schedule)		See Stat	ement 3	28	92,334.		
	eductions. Add lines 14 through 28	-		290	29	237,960.		
	ed business taxable income before net operating loss deduction. Sub	tract line 29	9 from line 13		30	-68,990.		
31 Deduc	on for net operating loss arising in tax years beginning on or after Ja	nuary 1, 20	118 (see instructions)	٥.	31			
32 Unrela	ed business taxable income. Subtract line 31 from line 30			3	32	-68,990.		
823701 01-09-1	LHA For Paperwork Reduction Act Notice, see instructions.				j	Form 990-T (2018)		

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orm 990-T	(2018)	RUMSEY HALL SCHOOL	INC		06-069	2379	Page 2
Part I	<u> </u>	otal Unrelated Business Taxab					
33		funrelated business taxable income computer		(see instructions)		33	-68,990.
34		ts paid for disallowed fringes		,	•	34	
35		ion for net operating loss arising in tax years		structions)		35	
36		funrelated business taxable income before sp			• •		
•		3 and 34				36	-68,990.
37		c deduction (Generally \$1,000, but see line 37	Instructions for exceptions)		38	37	1,000.
38		ted business taxable income. Subtract line 3			• .		
•		ne smaller of zero or line 36		,	39	38	-68,990.
Part [VIT	ax Computation			· · · · · · · · · · · · · · · · · · ·		
39		zations Taxable as Corporations. Multiply li	ne 38 by 21% (0.21)			39	0.
40	-	Taxable at Trust Rates. See instructions for		nt on line 38 from	u.		
	$\overline{}$	ax rate schedule or Schedule D (For	•			40	
41		tax. See instructions				41	
42		tive minimum tax (trusts only)		• •		42	
43		Noncompliant Facility Income. See Instruct	ions			43	
44		Add lines 41, 42, and 43 to line 39 or 40, which				44	0.
Part \		ax and Payments					
45 a	Foreign	n tax credit (corporations attach Form 1118; to	rusts attach Form 1116)	45a		T	
	_	credits (see instructions)		45b		7	
c	Genera	l business credit. Attach Form 3800		45c		7	
d	Credit	for prior year minimum tax (attach Form 880)	1 or 8827)	456] [
e		redits. Add lines 45a through 45d				45e	
46	Subtra	ct line 45e from line 44				46	0.
47			Form 8611 Form 8697 Form	8866 🔲 Oth	er (attach schedule)	47	
48	Total t	ax. Add lines 46 and 47 (see instructions)				48	0.
49	2018 r	net 965 tax liability paid from Form 965-A or F	form 965-B, Part II, column (k), line 2			49	0.
50 a		ints: A 2017 overpayment credited to 2018		50a			
	-	estimated tax payments		50b		7	
c	Tax de	posited with Form 8868		50c		7 1	
d	Foreig	n organizations; Tax paid or withheld at sourc		50d			
		p withholding (see instructions)		50e		7	
1	Credit	for small employer health insurance premium	ns (attach Form 8941)	50f			
9	Other	credits, adjustments, and payments: 🔲 Fo	rm 2439				
_		Form 4136 Ot	her Total	▶ 50g			
51	Total	payments. Add lines 50a through 50g				51	
52	Estima	ated tax penalty (see instructions). Check if Fo	orm 2220 is attached 🕨 🔲 👢			52	
53	Tax di	ue. If line 51 is less than the total of lines 48,	49, and 52, enter amount owed		, >	53	
54	Overp	ayment. If line 51 is larger than the total of hi	nes 48, 49, and 52, enter amount overpaid	1	🕨	54	_
55		the amount of line 54 you want: Credited to 2			Refunded 🕨	55	
Part	VI S	tatements Regarding Certain	Activities and Other Informa	tion (see inst	tructions)		
56	At any	time during the 2018 calendar year, did the c	organization have an interest in or a signat	ure or other auth	ority		Yes No
		financial account (bank, securities, or other)					,
	FinCE	N Form 114, Report of Foreign Bank and Finai	ncial Accounts. If "Yes," enter the name of	the foreign count	try		
	here	-					X
57	Durin	g the tax year, did the organization receive a d	istribution from, or was it the grantor of,	or transferor to, a	foreign trust?		X
	If "Yes	;, see instructions for other forms the organiz	ration may have to file.				"
58	_	the amount of tax-exempt interest received or					
Sign	Un	der penalties of perjury. I declare that I have examined rect, and complete Declaration of preparer (other than	this return, including accompanying schedules an taxpayer) is based on all information of which pre	d statements, and to parer has any knowle	the best of my know edge	tedge and beli	af, it is true,
Here			11/1/20 > -			May the IRS d	scuss this return with
11010		E-continue of officer	Treas	urer			nown below (see
		Signature of officer	Date Title	1		instructions)?	Yes No
		Print/Type preparer's name	Preparer's signature	Date		if PTIN	
Paid		Enrico Melaragno,	5-31/60	4/13/20	self- employe		04 000 66
Prep	ui Ci	CPA	The solution	1770	1		0178861
Use (Only	Firm's name ► CHARLES HEAV			Firm's EIN	<u> </u>	-0666222
		207-231 Ba				202 5	24104
		Firm's address ▶ Waterbury,	CT 00/02		Phone no.	<u>~~~/</u>	53-4101>

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4 ...

Schedule A - Cost of Goods	Sold. Enter	method of inven	tory valuation N/A			-
1 Inventory at beginning of year	1		6 Inventory at end of year			6
2 Purchases	2				ine 6	
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 (v	with respect to	Yes No
b Other costs (attach schedule)	46		property produced or a	cquired	for resale) apply to	12 3 - 20
5 Total. Add lines 1 through 4b	5		the organization?			
Schedule C - Rent Income (From Real I	Property and	Personal Property L	.ease	d With Real Prope	rty)
(see instructions)			<u>.</u>			
1. Description of property						
(1)						
(2)						
(3)						
(4)						
		d or accrued			2/a) Darturilana disastica	
(a) From personal property (if the perconal property is more 10% but not more than 50%)	centage of than	of rent for p	and personal property (if the percenta- personal property exceeds 50% or if at is based on profit or Income)	d personal property (if the percentage rsonal property exceeds 50% or if is based on profit or income)		
(1)						
(2)			• • •			
(3)			<u> </u>			
(4)						
Total	0.	Total		0.		
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	2(a) and 2(b). En ı (A)	ter	-	0.	(b) Total deductions. Enter here and on page 1, Part I, line 6 column (B)	.
Schedule E - Unrelated Deb		Income (see	instructions)			
			2. Gross Income from		3. Deductions directly conne to debt-financed	cted with or allocable I property
Description of debt-financed property			or allocable to debt- financed property		Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				<u> </u>		
(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 n 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)			%			
					inter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I line 7 column (8)
Totals			•		0.	0.
Total dividends-received deductions in	ncluded in columi	 18		-	D	0.
						Form 990-T (2018)

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Total. Enter here and on page 1, Part II, line 14

Form 990-T (2018) RUMSEY HALL SCHOOL INC. 06-06923

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in Page 5 columns 2 through 7 on a line-by-line basis.) 4. Advertising gain or (loss) (cot 2 minus col 3) if a gain, compute cols 5 through 7 7. Excess readership costs (column 8 minus column 5, but not more than column 4) 2. Gross advertising 3. Direct 5. Circulation 6. Readership 1. Name of periodical advertising costs Income (1) (2) (3) (4) 0. Ō. 0. Totals from Part I Enter here and on Enter here and on Enter here and page 1, Part I, line 11, col (A) page 1, Part I, line 11, col (B) on page 1, Part II, line 27 * 154 0 Totals, Part II (lines 1-5) 0. Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of time devoted to business 4. Compensation attributable 1. Name 2. Title to unrelated business (1) % (2) % (3) % (4) %

Form 990-T (2018)

0.

Form 990-T Description of Organization's Primary Unrelated Statement 1
Business Activity

Use of school facility (tennis courts and hockey rink)

To Form 990-T, Page 1

Form 990-T	Other Income	Statement 2
Description	-•	Amount
Fee for usage of tennis cour fee for usage of ice hocky r	ts by oudside parties ink courts by oudside parties	68,060. 100,910.
Total to Form 990-T, Page 1,	line 12	168,970.

Form 990-T	Other Deductions	Statement 3
Description		Amount
Accounting fees Insurance Utilities - direct		1,500. 23,715. 67,119.
Total to Form 990-T, Page 1, li	ne 28	92,334.