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	(Cor				,	20	29	3 2.8 <i>i</i>	4 1 1 7 OMB No 1	ን በ ን
Form	990-T	35	xempt Organization (and proxy to	on Business ax under sect	Inc ion (ome Ta 6033(e)	un Ito	Laiii	-	омя no 19 20	
1	•	For cale	ndar year 2019 or other tax year be	gınning July 1 ,	2019, a	and ending	June 30	2, 20	20 .	<u>~</u> U	13
•	ment of the Treasury		► Go to www.irs.gov/Form9						Ope	n to Public I	Inspection for izations Only
Interna	Revenue Service	▶ Do r	not enter SSN numbers on this for Name of organization (izations Only tion number
	address changed		The Queens Borough Public		ana see	instructions	,				instructions)
	mpt under section 501(C) (7) 3)	Print	Number, street, and room or suite		struction	ons			1	11-190426	2
	108(e) 220(e)	Type	89-11 Merrick Blvd								ctivity code
_	108A 530(a)	1,550	City or town, state or province, cou	intry, and ZIP or foreigr	n postal	code			(See instr	uctions)	
	529(a)		Jamaica, NY 11432								
C Boo at e	k value of all assets nd of year		oup exemption number (See				· \ 4 4		401/5) 450	<u> </u>	O4h o 4
=			eck organization type			<u></u> 501(c	c) trust		401(a) tru		Other trust
	nter the number ade or business		rganization's unrelated trade			o comple				(or first) ui	scribe the
			t the end of the previous se	entence, complete	Parts	s I and II.	complet	e a Sc	hedule M	for each	additional
		-	omplete Parts III-V.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, aa,					
			e corporation a subsidiary in an	affiliated group or	a pare	nt-subsidia	ry contro	iled gr	oup? ~	▶ ☐ Ys	s 🗹 No
			and identifying number of the						_		
	he books are in						phone n				
Par			e or Business Income	·		(A) Inc	ome	(B)	Expenses		C) Net
1a	•			- Balanca N	4.			,			
b				c Balance ►	1c 2			, , -	· · · ·		
2 3	-		chedule A, line 7) . line 2 from line 1c .		3			- '	· · · · · ·	+	
4a	•		ne (attach Schedule D)		4a		. —		•	-	
b	, •		4797, Part II, line 17) (attach	Form 4797) .	4b		-	-	L _P N ₊		
c					4c			, 4			1
5	Income (loss) statement)	from	a partnership or an S cor	poration (attach	5	_		"RE	CEIVE	<u> </u>	
6	Rent income (6		[2]	AU	3 1 0 20	120 13	1
7			ed income (Schedule E) .		7		86	AU			-
8	•		s, and rents from a controlled organ	•	8_		1 !		DEN,	TIT	+
9			ection 501(c)(7), (9), or (17) organiz		10			00	JULIV,		<u></u>
10 11	•	•	vity income (Schedule I)		11						
12	_	•	structions; attach schedule)		12		0		. O. Co.	9	0
13			3 through 12		13		0				0
	t II Deductio	ns Not	Taken Elsewhere (See ins	tructions for limit	tation	s on dedu	ictions.)	(Dedu	ictions m	ust be di	rectly
	connected	d with t	he unrelated business inco	me)							
14			cers, directors, and trustees	(Schedule K) .				•	14		
15	Salaries and v	vages			•		•		1:		
16			ince		•		•	•	10		
17 18			ule) (see instructions)			· · ·	•	•	<u> </u>		
19										_	
20	Depreciation (attach f				2	0		i		
21			med on Schedule A and else				1a	•			
22										2	
23	Contributions	to defe	rred compensation plans						. 2		
24	Employee ber	nefit pro	grams					•	. 24		
25	Excess exemp	ot exper	nses (Schedule I)						2		
26			sts (Schedule J)								
27		-	ach schedule)								
28			dd lines 14 through 27 exable income before net ope							_	
29 30			axable income before net ope perating loss arising in tax								
50	instructions)		to all in tax	,					. 30	ا م	

For Paperwork Reduction Act Notice, see instructions.

31 Unrelated business taxable income. Subtract line 30 from line 29

Cat No 11291J

G (Form 990-T (2019)

Part I								
		al Unrelated Business Taxable Income	unrelated trades o	r huginossos (T			
, 32	Instruction	unrelated business taxable income computed from all ns)			see	20		
22		•			}	32		0
33 34		paid for disallowed fringes				34		
3 4 35		elated business taxable income before pre-2018 NOLs		tion Subtract	line	34		
55	34 from t	····C	35					
36		he sum of lines 32 and 33			see	-		
•	Instructio	.	36					
37		ns)	tion Subtract line :	36 from line 35	ŀ	37		
38		deduction (Generally \$1,000, but see line 38 instructions				38		
39	•	d business taxable income. Subtract line 38 from line	• •		-	-		
		smaller of zero or line 37				39		0
Part I		Computation					-	
40		itions Taxable as Corporations. Multiply line 39 by 219	6 (0.21)		•	40		0
41		Taxable at Trust Rates. See instructions for t		Income tax	on			
		nt on line 39 from: Tax rate schedule or Sche	•		▶	41		
42	Proxy ta:	K. See instructions			>	42		
43		e minimum tax (trusts only)			.	43	_	
44		oncompliant Facility Income. See instructions				44		
45	Total. Ad	d lines 42, 43, and 44 to line 40 or 41, whichever applies	<u> </u>	<u>.</u>	[45		0
Part '	V Tax	and Payments		_				
46a	Foreign to	ax credit (corporations attach Form 1118; trusts attach F	orm 1116) . 46	a				
b	Other cre	dits (see instructions)	46	b				
С	General b	ousiness credit Attach Form 3800 (see instructions)						
d	Credit for	prior year minimum tax (attach Form 8801 or 8827)	46	d				
е	Total cre	dits. Add lines 46a through 46d			. [46e		
47		line 46e from line 45				47		
48	Other taxes	s Check if from Form 4255 Form 8611 Form 8697	Form 8866 Othe	r (attach schedul	e) _	48		
49		. Add lines 47 and 48 (see instructions)			. [49		
		965 tax liability paid from Form 965-A or Form 965-B, P	art II, column (k), Iır	ie _, 3	. [50		
		s: A 2018 overpayment credited to 2019				'		
		mated tax payments			0,982	ر. د		
C		• •	1.54	n l				
	•	sited with Form 8868						
	Foreign o	sited with Form 8868. rganizations [.] Tax paid or withheld at source (see instruc	tions) 51	d				
d e	Foreign of Backup v	sited with Form 8868 . rganizations: Tax paid or withheld at source (see instruc vithholding (see instructions)	tions) 510	d e		a a		
d e f	Foreign of Backup vicedit for	sited with Form 8868 . rganizations: Tax paid or withheld at source (see instructions) small employer health insurance premiums (attach Form	tions) 510	d e				
d e f g	Foreign of Backup wo Credit for Other cre	sited with Form 8868	tions)	d e f				
d e f g	Foreign of Backup wo Credit for Other cre	sited with Form 8868	tions) 510	d e f		- "		50.000
d e f g	Foreign of Backup with Credit for Other credit Form of Total pay	sited with Form 8868	tions)	d e f		52		50,982
d e f g 52 53	Foreign of Backup wo Credit for Other credit Form of Total pay Estimated	sited with Form 8868	tions)	d e f		52 53		50,982
d e f g 52 53 54	Foreign of Backup v Credit for Other cre Total pay Estimated Tax due.	sited with Form 8868	tions)	d e f f g		52 53 54		
d e f g 52 53 54 55	Foreign of Backup wo Credit for Other cre Form of Total pay Estimated Tax due.	sited with Form 8868	tions)	d e f g	· · · · · · · · · · · · · · · · · · ·	52 53 54 55		50,982
d e f g 52 53 54 55 56	Foreign of Backup wo Credit for Other cre Form Total pay Estimated Tax due. Overpaying Enter the a	sited with Form 8868	tions)	d e f g	· · · · · · · · · · · · · · · · · · ·	52 53 54		
d e f g 52 53 54 55 56 Part	Foreign of Backup wo Credit for Other credit Form of Total pay Estimated Tax due. Overpayou Sta	sited with Form 8868	tions)	d e e f f g		52 53 54 55 56		50,982 50,982
d e f g 52 53 54 55 56 Part \	Foreign of Backup wo Credit for Other credit Form of Total pay Estimated Tax due. Overpayor Enter the a Star At any times	sited with Form 8868	tions)	d e f f g▶[• other	52 53 54 55 56	ity Yes	50,982 50,982
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d e f g 52 53 54 55 56 Part \	Foreign of Backup v Credit for Other cre Total pay Estimated Tax due. Overpayi Enter the a Standard Tax any time over a fin over a fin.	sited with Form 8868	tions)	d e f g overpaid	other may h	52 53 54 55 56	ity Yes	50,982 50,982 No
d e f g 52 53 54 55 56 Part \	Foreign of Backup wo Credit for Other cre Form Total pay Estimated Tax due. Overpaye Enter the a Sta At any time over a fin FinCEN Finere Foreign Finere Fi	sited with Form 8868	tions)	d e f g	other may h	52 53 54 55 56 r author ave to 1	ity Yes	50,982 50,982
d e f g 52 53 54 55 56 Part V	Foreign of Backup wo Credit for Other credit Form of Total pay Estimated Tax due. Overpaying Enter the a Stan At any time over a fin FinCEN Finere During the	sited with Form 8868	tions)	d e f g	other may h	52 53 54 55 56 r author ave to 1	ity Yes	50,982 50,982 No
d e f g 52 53 54 55 56 Part V 57	Foreign of Backup wo Credit for Other credit Form of Total pay Estimated Tax due. Overpaying Enter the a Stall At any time over a fin FinCEN Fine During the If "Yes," s	sited with Form 8868	Total 51 Total 51 Total 51 Total 51 tached	d e f g	other may h	52 53 54 55 56 r author ave to 1	ity Yes	50,982 50,982 No
d e f g 52 53 54 55 56 Part V 57	Foreign of Backup with Credit for Other credit for Other credit Form of Total pay Estimated Tax due. Overpaying Enter the a Stan At any time over a fin FinCEN Fin	sited with Form 8868	tions)	d e f g▶[other may h	52 53 54 55 55 56 r author ave to to gn coun	ity Yes	50,982 50,982 No
d e f g 52 53 54 55 56 Part V 57	Foreign of Backup with Credit for Other credit for Other credit Form of Total pay Estimated Tax due. Overpaying Enter the a Stan At any time over a fin FinCEN Fin	sited with Form 8868	tions)	d e f g▶[other may h foreign	52 53 54 55 56 r author ave to 1 gn coun	ity Yes	50,982 50,982 No
d e f g 52 53 54 55 56 Part V 57	Foreign of Backup with Credit for Other credit for Other credit Form of Total pay Estimated Tax due. Overpays Enter the a Stan over a fin FinCEN Fin	sited with Form 8868	tions)	d e f g	other other may he foreign	52 53 54 55 56 r author ave to 1 gn coun	ity Yes file try edge and be discuss this parer shown	50,982 50,982 No
d e f g 52 53 54 55 56 Part \ 57	Foreign of Backup with Credit for Other credit for Other credit Form of Total pay Estimated Tax due. Overpays Enter the a Stan over a fin FinCEN Fin	sited with Form 8868	Total 51 Total 51 Total 51 Total 51 Total 551 Tota	d e f g	other other may he foreign	52 53 54 55 56 r author ave to 1 gn coun	ity Yes	50,982 50,982 No
d e f g 52 53 54 55 56 Part V 57	Foreign of Backup with Credit for Other credit for Other credit Form of Total pay Estimated Tax due. Overpaying Enter the a Standard Standard Information Fincen Financial Fina	sited with Form 8868	tions)	d e f g	other may h foreign best of lige Mi will (see	52 53 54 55 55 56 r author ave to 1 gn coun n trust?	ity Yes file try edge and be discuss this parer shown	50,982 50,982 No
d e f g 52 53 54 55 56 Part \ 57 58 59 Sign Here	Foreign of Backup word Credit for Other credit for Other credit Form of Total pay Estimated Tax due. Overpayore Enter the a Standard Stan	sited with Form 8868	tions)	d e f g	other other of oreign discontinuous foreign	52 53 54 55 56 r author ave to 1 gn coun	ity Yes ile try edge and be discuss this parer shown	50,982 50,982 No
d e f g 52 53 54 55 56 Part V 57	Foreign of Backup with Credit for Other credit for Other credit Form of Total pay Estimated Tax due. Overpaying Enter the a Stan At any time over a fin FinCEN Fin	sited with Form 8868	tions)	d e f g	other other of oreign discontinuous foreign	52 53 54 55 56 r author ave to 1 an trust? my knowled the presentation of the presenta	ity Yes ile try edge and be discuss this parer shown	50,982 50,982 No

Sche	dule A-Cost of Goods	Sold. Er	nter method of	inventory va	aluation >		
1	Inventory at beginning of ye	ear	1	6	Inventory a	at end of year	6
2	Purchases	. Г	2	7	Cost of g	oods sold. Subtract line	
3	Cost of labor	. [3		6 from line	5. Enter here and in Part	<u>.</u>
4a	Additional section 263A	costs			I, line 2		7
	(attach schedule)	. [,	4a	8	Do the rul	les of section 263A (with	respect to Yes No
b	Other costs (attach schedu	ıle)	4b			roduced or acquired for i	
5	Total. Add lines 1 through		5			anization?	
	dule C-Rent Income (F			d Persona			
	instructions)		• • •			•	••
1. Desc	ription of property						
(1)							
(2)						<u></u>	<u></u>
(3)							·
(4)							
	2.	Rent receiv	ed or accrued	-			
	om personal property (If the percenta personal property is more than 10% more than 50%)	(b) From real appropriate percentage of ren 50% or if the rer		operty exceeds	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)		
(1)		-					
(2)							<u> </u>
(3)							
(4)			-	•			_ ·
Total			Total			(b) Total deductions	
here ar	al income. Add totals of column ad on page 1, Part I, line 6, colum	mn (A)	<u> </u>			(b) Total deductions. Enter here and on page 1 Part I, line 6, column (B)	· *'
Sche	dule E-Unrelated Debt-	-Financ	ed Income (se	e instructions	s)	C Cod observed to the	and the second second
ı	1. Description of debt-fin	anced prop	erty	Gross income from or allocable to debt-financed		Deductions directly confident debt-finance (a) Straight line depreciation	
				pro	perty	(attach schedule)	(attach schedule)
(1)							<u> </u>
(2)							
(3)							
(4)							
a	Amount of average acquisition debt on or llocable to debt-financed roperty (attach schedule)	of or debt-fin	e adjusted basis allocable to anced property ch schedule)	4 d	olumn vided olumn 5	7. Gross income reportable (column 2 × column 6)	8. Allocable deductions (column 6 × total of columns 3(a) and 3(b))
(1)					%		
(2)					%		
(3)					%		
(4)					%		
						Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Totals					•		
Total c	lividends-received deductions	ıncluded	ın column 8		· _ ·	. •	
							Form 990-T (2019)

Sche	edule F-Interest, Ann	uities	, Royalties,				anizations (se	e instruc	ctions)	
						Organizations				
•	Name of controlled organization		. Employer fication number		elated income e instructions)	4. Total of specified payments made	5. Part of column included in the corganization's gro	ontrolling	conne	eductions directly ected with income in column 5
(1)										
(2)										
(3)				_						
(4)										
None	xempt Controlled Organiz	zations	S							
	7. Tayable Income 8.1		. Net unrelated incloss) (see instructi	1		otal of specified yments made	10. Part of column 9 that is included in the controlling organization's gross income		connec	reductions directly cted with income in column 10
(1)										
(2)	-									
(3)										
(4)										
Totals						.	Add columns 5 Enter here and o Part I, line 8, co	n page 1, lumn (A)	Enter h Part I,	columns 6 and 11 nere and on page 1, line 8, column (B)
Sche	edule G-Investment I	Incon	ne of a Sect	ion 501						tal daduations
	1. Description of income		2. Amount of	income	dire	Deductions ctly connected ach schedule)	4. Set-asides (attach schedule)		5. Total deductions and set-asides (col 3 plus col 4)	
(1)							-			
(2)										
(3)										
(4)										·-
*			Enter here and Part I, line 9, c							re and on page 1, ne 9, column (B)
Totals		•								
Sche	edule I – Exploited Exe	empt	Activity Inco	ome, O	ther Than	Advertising In	come (see inst	ructions	5)	
	1. Description of exploited activi	ıty	2. Gross unrelated business incol from trade o business	me cor	Expenses directly nnected with oduction of unrelated 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	attribu	penses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)										
(2)										
(3)				<u> </u>						
(4)										
			Enter here and page 1, Part line 10, col (A	I, pa	r here and on ge 1, Part I, e 10, col (B)		Trans.	, ,		Enter here and on page 1, Part II, line 25
Totals		P	<u> </u>			L"	0 to 19 to 1			L
	edule J - Advertising I				- Oli	data d Basis				
Par	t I Income From P	erioa	icais Repor	tea on	a Consoli					
	1. Name of periodical		2. Gross advertising income		3. Direct ertising costs	4. Advertising gain or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7	5. Circulation income		dership ests	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)		_				,				
(2)										
(3)						* * * * * * * * * * * * * * * * * * * *				
(4)						. 3.				1
Totals	s (carry to Part II, line (5))	>	1							

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

Part II, Income From Periodi 2 through 7 on a line-b	•	on a Separat	e Basis (For eacl	n periodical l	isted in Part II	, fill in column
1. Name of periodical	2. Gross advertising income	advertising advertising costs 2 minus col 3) If		5. Circulation income	6. Readership costs	7. Excess readershi costs (column 6 minus column 5, bu not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I			J. 2 3 3 3	H FRE TY	gar jagang dina	<u> </u>
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1–5) . ▶			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	`		
Schedule K-Compensation of	Officers, Direc	tors, and Tru	stees (see instruct	ions)		
1. Name	:	2 Title	3. Percent of time devoted to business	. L 4. Compensar	ion attributable to ed business	
(1)				9/	6	
(2)				%	6	
(3)				9/	6	
(4)				9/	6	

Form **990-T** (2019)