| Form 990-T .  | E  | Exempt Orga   |                          |  |                                       |                                       |                    | OMB No 1545-0687         |  |  |  |
|---|--|---|--------------------------|--|---------------------------------------|---------------------------------------|--------------------|--------------------------|--|--|--|
| <b>*</b>  | For ca   | (a)<br>lender year 2018 or other tax yea  | 19                       | 2018   |                                       |                                       |                    |                          |  |  |  |
|   |  | ► Go to www   |                          | 2010   |                                       |                                       |                    |                          |  |  |  |
| Department of the Treasury<br>Internal Revenue Service  | ▶  | Do not enter SSN numbe  | ).                       | Open to Public Inspection for 501(c)(3) Organizations Only |                                       |                                       |                    |                          |  |  |  |
| A Check box if address changed  |  | Name of organization (  |                          |  |                                       |                                       |                    |                          |  |  |  |
| B Exempt under section  | Print  | BROOKLYN AC   | 1                        | 1-2201344  |                                       |                                       |                    |                          |  |  |  |
| X 501(C <b>1)</b> )   | or<br>Type   | Or Number, street, and room or suite no. If a P O. box, see instructions.    E Unrelated but (See instructions) |                          |  |                                       |                                       |                    |                          |  |  |  |
| 408(e) 220(e)   | '',  | 30 LAFAYETTE AVENUE   |                          |  |                                       |                                       |                    |                          |  |  |  |
| 408A530(a)<br>529(a)  |  | City or town, state or province, country, and ZIP or foreign postal code  BROOKLYN , NY 11217 541800            |                          |  |                                       |                                       |                    |                          |  |  |  |
| C Book value of all assets  | 70   | F Group exemption numb  |                          | <u> </u>   | 501(0) trust                          |                                       | a) trust           | Other trust              |  |  |  |
| 156,317,7<br>H Enter the number of the  |  | G Check organization typ  |                          | 1  |                                       | e the only (or first) i               | a) trust           |                          |  |  |  |
| trade or business here  | -  |   |                          | <u>*</u>   | <del></del>                           | e, complete Parts I-\                 |                    |                          |  |  |  |
|   |  | ce at the end of the previou  | us sentence, complete Pa | ırts I an  | · · · · · · · · · · · · · · · · · · · |                                       |                    |                          |  |  |  |
| business, then complete   |  | · · · · · · · · · · · · · · · · · · ·   |                          |  |                                       |                                       |                    |                          |  |  |  |
| I During the tax year, was  | the corp   | oration a subsidiary in an  |                          | nt-subs  | idiary controlled group?              | <b>&gt;</b>                           | Ye                 | es X No                  |  |  |  |
|   |  | tifying number of the paren   |                          |  |                                       | <u>-</u>                              | <del>/ 5 4 4</del> |                          |  |  |  |
| J The books are in care of  |  | JENNIFER ANG<br>de or Business Inc  |                          |  |                                       |                                       | (718               | <del>`</del>             |  |  |  |
|   |  | de or business inc  | onie                     | 1  | (A) Income                            | (B) Expens                            | es                 | (C) Net                  |  |  |  |
| 1a Gross receipts or sale   |  |   | c Balance                | ۱,   |                                       |                                       |                    |                          |  |  |  |
| <ul><li>b Less returns and allow</li><li>2 Cost of goods sold (S</li></ul>                    |  | Δ Ine 7)  | t balarice               | 1c 2   |                                       | -                                     |                    |                          |  |  |  |
| 3 Gross profit. Subtract  |  | •   |                          | 3  |                                       | <u> </u>                              |                    |                          |  |  |  |
| 4a Capital gain net incom   |  |   |                          | 48   |                                       |                                       |                    |                          |  |  |  |
| , -   | •  | art II, line 17) (attach Form   | ı 4797)                  | 4b   |                                       |                                       |                    |                          |  |  |  |
| c Capital loss deduction  | for true   | sts   |                          | 4c   |                                       |                                       | <u></u>            |                          |  |  |  |
| 5 Income (loss) from a  | partners   | ship or an S corporation (a   | ttach statement)         | 5  |                                       |                                       |                    |                          |  |  |  |
| 6 Rent income (Schedu   | le C)  |   |                          | 6  |                                       |                                       |                    |                          |  |  |  |
| 7 Unrelated debt-finance  |  | ,   |                          | 7  |                                       | $\swarrow$                            | <del>.</del>       |                          |  |  |  |
| •   |  | nd rents from a controlled  |                          | 8  | /                                     |                                       | <del></del>        |                          |  |  |  |
|   |  | on 501(c)(7), (9), or (17) o  | rganization (Schedule G) |  | /                                     |                                       |                    |                          |  |  |  |
| <ul><li>10 Exploited exempt activate</li><li>11 Advertising income (\$\frac{5}{2}\$</li></ul> |  | , ,   |                          | 10   | 74,470                                |                                       |                    | 74,470.                  |  |  |  |
| 11 Advertising income (S<br>12 Other income (See in:  |  | •   |                          | 12   | /                                     | · · · · · · · · · · · · · · · · · · · |                    | , = 7 = 1.00             |  |  |  |
| 13 Total. Combine lines   |  |   |                          | 13   | 74,470                                | •                                     |                    | 74,470.                  |  |  |  |
| Part II Deductio  | ns No  | ot Taken Elsewher   | e (See instructions/fo   | r limit  | ations on deductions                  | )                                     |                    |                          |  |  |  |
| (Except for o   | contribi   | utions, deductions must   | be directly connected    | with   | the unrelated busines                 | s income )                            | _                  |                          |  |  |  |
| 14 Compensation of off  | icers, di  | rectors, and trustees (Sche   | edule K)                 |  |                                       |                                       | 14                 | 112 212                  |  |  |  |
| 15 Salaries and wages   |  |   |                          |  |                                       |                                       | 15                 | 119,018.                 |  |  |  |
| 16 Repairs and mainten  | ance   |   |                          |  |                                       |                                       | 16                 |                          |  |  |  |
| 17 Bad debts  | م) لامانياس  |   |                          |  |                                       |                                       | 17                 |                          |  |  |  |
| 18 Interest (attach sche  | aule) (s   | ee instructions)  |                          |  |                                       |                                       | 19                 |                          |  |  |  |
| <ul><li>19 Taxes and licenses</li><li>20 Charitable contributi</li></ul>                      | ons (Se  | e instructions for limitation   | rules)                   |  |                                       |                                       | 20                 |                          |  |  |  |
| 21 Depreciation (attach   | •  |   | 101007                   |  | 21                                    | 17,224                                |                    |                          |  |  |  |
|   |  | n Schedule A and elsewher   | e on return              |  | 22a                                   |                                       | 22b                | 17,224.                  |  |  |  |
| 23 Depletion  |  |   | RECE                     | VE   | D                                     |                                       | 23                 |                          |  |  |  |
| 24 Contributions to defi  | erred co   | mpensation plans  | 4                        |  | ၂႘                                    |                                       | 24                 |                          |  |  |  |
| 25 Employee benefit pro   | ggrams   |   | JUL 24                   | 202  | n löl                                 |                                       | 25                 |                          |  |  |  |
| 26 Excess exempt expe   |  |   | la                       |  | RS-08                                 |                                       | 26                 |                          |  |  |  |
| 27 Excess readership of   |  |   | 47.Dm/                   | , ,  | <u></u>                               | mpwpym 1                              | 27                 | 20 070                   |  |  |  |
|   | Other deductions (attach schedule)  SEE STATEMENT 1  28  28,070. |   |                          |  |                                       |                                       |                    |                          |  |  |  |
| 29 Total deductions. A  |  |   | n logo daduation Cutting | t line O   | 0 from line 12                        |                                       | 29<br>30           | 164,312.<br>-89,842.     |  |  |  |
|   |  | ncome before net operating<br>loss arising in tax years be  | •                        |  |                                       |                                       | 30                 | -89,842.                 |  |  |  |
|   |  | ioss arising in tax years be<br>ncome. Subtract line 31 fro   |                          | .y 1, 20   |                                       | ,                                     | 32                 | -89,842.                 |  |  |  |
| 823701 01-09-19 LHA F   |  |   |                          |  | War I                                 |                                       | 1                  | Form <b>990-T</b> (2018) |  |  |  |

11-3518842

Phone no. 212-503-8800

Firm's EIN

**Use Only** 

Firm's name ► MARKS PANETH LLP

Firm's address ► NEW YORK, NY 10017

685 THIRD AVENUE

| Schedule A - Cost of Goods   | Sold. Enter        | method of inven  | tory v   | aluation > N/A  |           |  |                       |  |           |
|--|--------------------|--|----------|---|-----------|--|-----------------------|--|-----------|
| 1 Inventory at beginning of year   | 1                  |  | 6        | Inventory at end of year  | ar        |  | 6                     |  |           |
| 2 Purchases  | 2                  |  | 7        | Cost of goods sold. S   | ubtract I | ine 6  | ٠ جيءَ -              |  |           |
| 3 Cost of labor  | 3                  | •  |          | from line 5. Enter here   | and in F  | Part I,  |                       |  |           |
| 4a Additional section 263A costs   |                    |  |          | line 2  |           |  | 7                     |  |           |
| (attach schedule)  | 4a                 |  | 8        | Do the rules of section   | 263A (v   | with respect to  |                       | Y  | es No     |
| b Other costs (attach schedule)  | 4b                 |  |          | property produced or a  | acquired  | for resale) apply to   |                       |  | _         |
| 5 Total. Add lines 1 through 4b  | 5                  |  | ]        | the organization?   |           |  |                       |  |           |
| Schedule C - Rent Income (   | From Real          | Property and   | Per      | sonal Property L  | ease      | d With Real Prop   | erty)                 |  |           |
| (see instructions)   |                    |  |          |   |           |  |                       |  |           |
| 1. Description of property   |                    |  |          |   |           |  |                       |  |           |
| (1)  |                    |  |          |   |           |  |                       |  |           |
| (2)  |                    |  |          |   |           |  |                       |  |           |
| (3)  |                    |  |          |   |           |  |                       |  |           |
| (4)  |                    |  |          |   |           |  |                       |  |           |
|  | 2. Rent receiv     | ed or accrued  |          |   |           | 2/a) Caduations discoults  |                       | ad with the income                                     |           |
| (a) From personal property (if the per<br>rent for personal property is more<br>10% but not more than 50%)                 | centage of<br>than | of rent for p  | ersonal  | onal property (if the percenta<br>property exceeds 50% or if<br>ad on profit or income) | де        | 3(a) Deductions directly columns 2(a) ar   | connect<br>nd 2(b) (a | ed with the incom<br>Itach schedule)                   | te in     |
| (1)  |                    |  |          |   |           |  |                       |  |           |
| (2)  |                    |  |          |   |           |  |                       |  |           |
| (3)  |                    |  |          |   |           |  |                       | , , ,  |           |
| (4)  |                    |  |          |   |           |  |                       |  |           |
| Total  | 0.                 | Total  |          |   | 0.        |  |                       |  |           |
| (c) Total income. Add totals of columns here and on page 1, Part I, line 6, column   | (A)                | <b>&gt;</b>  |          |   | 0.        | (b) Total deductions.<br>Enter here and on page 1,<br>Part I, line 6, column (B) | <b>&gt;</b>           |  | 0.        |
| Schedule E - Unrelated Deb   | t-Financed         | Income (see  | ınstru   | ctions)   |           |  |                       | ·  |           |
|  |                    |  | ١,       | . Gross income from   | ĺ         | <ol> <li>Deductions directly control to debt-finance</li> </ol>                  | nected w              | ith or allocable<br>orty                               |           |
| 1 Description of debt-fin  | anced property     |  |          | or allocable to debt-<br>financed property  | (a)       | Straight line depreciation (attach schedule)                                     | Ť                     | (b) Other deduc  |           |
|  |                    |  |          |   |           | <b>,</b>   |                       | •  |           |
| (1)  |                    |  |          |   |           |  |                       |  |           |
| (2)  |                    | ·  | <u> </u> |   |           |  |                       |  |           |
| (3)  |                    |  | <u> </u> |   |           |  |                       |  |           |
| (4)  |                    |  | <u> </u> |   |           |  |                       |  |           |
| <ol> <li>Amount of average acquisition<br/>debt on or allocable to debt-financed<br/>property (attach schedule)</li> </ol> | of or a            | adjusted basis<br>illocable to<br>nced property<br>n schedule) | 6        | Column 4 divided<br>by column 5   |           | 7. Gross income<br>reportable (column<br>2 x column 6)                           | (0                    | 8. Allocable ded<br>olumn 6 x total of<br>3(a) and 3(t | f columns |
| (1)  |                    |  |          | %   |           | •  |                       |  |           |
| (2)  |                    |  |          | %   |           |  | 1                     |  |           |
| (3)  |                    |  |          | %   |           |  |                       |  |           |
| (4)  |                    |  |          | %   |           | -  |                       |  |           |
|  |                    |  | • • • •  |   |           | nter here and on page 1,<br>Part I, line 7, column (A)                           |                       | nter here and on p<br>Part I, line 7, colur            |           |
| Totals   |                    |  |          | <b>.</b>  |           | 0  | .                     |  | 0.        |
| Total dividends-received deductions in   | cluded in column   | n 8  |          |   |           |  | :                     |  | 0.        |
|  |                    | · <del>.</del>   |          |   |           | <u> </u>   |                       |  |           |

|            | 1. Name of periodical      | 2. Gross<br>advertising<br>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 | Excess readership costs (column 6 minus column 5, but not more than column 4) |
|------------|----------------------------|-----------------------------------|-----------------------------|--|-----------------------|---------------------|---|
| (1)        |                            | 74,470.                           | 0.                          | -  | 0.                    | 0.                  |   |
| (2)        |                            |                                   |                             |  |                       |                     | '   |
| (3)        | ·····                      |                                   |                             |  |                       |                     |   |
| (4)        |                            |                                   |                             |  |                       |                     |   |
| Totals (ca | arry to Part II, line (5)) | 74,470.                           | 0.                          | 74,470.  |                       |                     | 0.  |

%

| Part II | Income Fr     | om Periodicals       | Reported on a | Separate Basis | (For each periodical listed in Part II, fill | lın |
|---------|---------------|----------------------|---------------|----------------|--|-----|
|         | columns 2 thr | rough 7 on a line-by | line basis )  |                |  |     |

| Name of periodical          |       | 2. Gross<br>advertising<br>income                        |  | 3. Direct advertising costs |                | 4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 |       |         | ion                          | 6. Readership costs |     | P | 7. Excess readership costs (column 6 minus column 5, but not more than column 4) |  |
|-----------------------------|-------|--|--|-----------------------------|----------------|---|-------|---------|------------------------------|---------------------|-----|---|--|--|
| (1)                         |       |  |  |                             |                |   |       | •       |                              |                     |     |   |  |  |
| (2)                         |       |  |  |                             |                |   |       |         |                              |                     |     |   |  |  |
| (3)                         |       |  |  |                             |                |   |       |         |                              |                     |     |   |  |  |
| (4)                         |       |  |  |                             |                |   |       |         |                              |                     |     |   |  |  |
| Totals from Part I          | ▶     | 74,470.  |  | 0.                          | -              | -   | •     |         |                              |                     |     |   |  |  |
|                             |       | Enter here and on<br>page 1, Part I,<br>line 11, col (A) | Enter here a<br>page 1, Pa<br>line 11, col | art I,                      |                | •   |       |         |                              |                     | . 4 | 7 | Enter here and<br>on page 1,<br>Part II line 27                                  |  |
| Totals, Part II (lines 1-5) | •     | 74,470.  |  | 0.                          | . •            | * •   |       | *       | 1                            | •                   |     |   | (  |  |
| Schedule K - Compensa       | itior | of Officers, I   | Directors                                  | , and                       | Trustee        | S (see in   | struc | ctions) |                              |                     |     |   |  |  |
| 1. Na                       | ne    |  |  |                             | <b>2</b> . Tit | le  |       |         | Percent one devoted business |                     | 4.  |   | ensation attributable<br>elated business   |  |

Form 990-T (2018)

0.

(2) (3)

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

NOL CARRYOVER AVAILABLE THIS YEAR

06/30/17

61,800.

20,435.

20,435.

20,435.

20,435.

| FORM 990-T |                    | STATEMENT 1                |                |                        |
|------------|--------------------|----------------------------|----------------|------------------------|
| DESCRIPTIO | и                  |                            |                | AMOUNT                 |
| OCCUPANCY  |                    |                            |                | 28,070.                |
| TOTAL TO F | ORM 990-T, PAGE 1, | LINE 28                    |                | 28,070.                |
| FORM 990-T | net                | OPERATING                  | LOSS DEDUCTION | STATEMENT 2            |
| TAX YEAR   | LOSS SUSTAINED     | LOSS<br>PREVIOUS<br>APPLIE |                | AVAILABLE<br>THIS YEAR |

41,365.