	4	000 T	E	Exempt Organization	on Business	Inc	ome Tax Re	turn		MB No 1545-0047
ي بـ	3	990-T			ax under sect	tion (	6033(e)) ე	200	<i>Y</i> 0	2019
ح ک	Departm	ent of the Treasury	▶Dor	Open	to Public Inspection fo					
		Check box if address changed		501(c)(3) Organizations Onl Employer identification number						
		pt under section	(Employees	ployees' trust, see instructions)						
	<b>₽</b> 50	<u> </u>	Print or	Number, street, and room or suite	no If a P O box, see in	nstructio	ons			12843763
3	☐ 40		Туре	95 PROSPECT PARK WEST					(See instru	ousiness activity code ctions)
1,	☐ 40 ☐ 52			City or town, state or province, co BROOKLYN, NY, 11215		480000				
6	C Book	value of all assets		40000						
•	at 611	d of year		oup exemption number (See leck organization type		on	☐ 501(c) trust		401(a) trus	t Other trust
				rganization's unrelated trade						r first) unrelated
	firs	st in the blank :	space a	TRANSPORTATION FRINGE In the end of the previous somplete Parts III-V.						
1				e corporation a subsidiary in ar		•	nt-subsidiary contro	lled gro	oup?	Yes 🗹 No
				and identifying number of the	e parent corporation	on. ►				
				JAMES SNOW     or Business Income			Telephone n (A) Income		Expenses	7189658951 (C) Net
		Gross receipts			T	Т	(A) Income	(6)	Expenses	(C) Net
	b	Less returns a			c Balance ▶	1c				/
	2	Cost of goods	sold (S	chedule A, line 7)	_	2				
	3			line 2 from line 1c		3				
	4a			ne (attach Schedule D) .		4a				
	b			4797, Part II, line 17) (attach		4b				
	c			n for trusts		4c			_/_	
	5	statement)	•	a partnership or an S cor		5		/		
	6			le C)		6		-		
	12/4/6/16/25~			ed income (Schedule E) .		7				
	<b>E</b>			s, and rents from a controlled organ ection 501(c)(7), (9), or (17) organi;		9				
	₹0			vity income (Schedule I)	zation (ochedule d)	10/	/			
	41	Advertising inc	•	, , ,		11				
1	<u>(12</u>	•	•	structions, attach schedule)	/	12	0			
	<del>-</del> 13	Total. Combin			<u>/</u>	13	0			0
(	Part	connected	d with th	Taken Elsewhere (See ins ne unrelated business inco	me.)	•	s on deductions.)	(Dedu	ictions mu	st be directly
	<b>₩</b> 4	Compensation	of offic	ers, directors, and trustees	(Schedule K) .	•			. 14	
	₹15 ≫e	Salaries and w	vages			• •			. 15	
Č	≱6 ¥7								. 16	
ì	7 7 18	Interest (attach	 h sched	ule) (see instructions) .					18	
	19			/					. 19	-
	20	Depreciation (a	attach F	form <i>4</i> 562)						
	21			med on Schedule A and else			. 21a		21b	
	22	Depletion			· R	EC	EIVED · ·	•	. 22	
	23 24			red compensation plans grams	1 [	·	SC		. 23	
	24 25	Excess exemn	it expedient (	grams		 		٠.	. 24	
	26	Excess reader	ship co	sts (Schedule J)		ו יום	3 2921 O	l : .	25	
	27	Other deduction	ons (atta	ach schedule)		· ·	<u> </u>		27	
	28	Total deduction	ons. Ad	d lines 14 through 27 .	<b>O</b>		EN, UT.		. 28	
	29 /			xable income before net ope						
	30/	Deduction for	net op	erating loss arising in tax	years beginning	on or	after January 1,	2018	(see	

instructions) .

30

31

Part I	Ш Т	otal Unrelated Business Taxable	Income							
32	Total o	f unrelated business taxable income	computed from all unrelated trades	or businesses (s	see					
	instruc	ions)				32				
33	Amoun	ts paid for disallowed fringes				33				
34			limitation rules)			34				
35			fore pre-2018 NOLs and specific ded							
						35				
36	Deduct	ion for net operating loss arising	in tax years beginning before Jar	nuary 1, 2018 (s	see					
						36				
37		37								
38			pefore specific deduction. Subtract line e line 38 instructions for exceptions)			38				
39			ract line 38 from line 37. If line 38 is			55				
03			39			0				
Part !		ax Computation			•	39				
			lultiply line 39 by 21% (0.21)		<b></b>	40			0	
40			instructions for tax computation			+0				
41	the am	<b>I</b>	<del>     </del>							
40			41							
42	_					42				
43		, , , , , , , , , , , , , , , , , , , ,				43				
441			instructions			44				
45			41, whichever applies		•	45			0	
7		ax and Payments	<del></del>							
	-	tax credit (corporations attach Form		16a		1				
b				16b		-				
C		business credit Attach Form 3800 (s		16c		1				
		or prior year minimum tax (attach For	•	16d		<u>  </u>				
e						46e				
47			· · · <u>·</u> · · · · <u>· ·</u> · · · · <u>· ·</u> ·			47				
48			18611 🗌 Form 8697 🔲 Form 8866 🔲 Ot	•		48				
49			ons)			49				
50		- ·	-A or Form 965-B, Part II, column (k),	line 3		50				
51a		nts A 2018 overpayment credited to 2		51a						
b	2019 e	stimated tax payments		jb-	7560	}·				
С	Tax de	Tax deposited with Form 8868								
d	Foreign	oreign organizations: Tax paid or withheld at source (see instructions) . 51d								
е	•	withholding (see instructions)	1 1							
f		or small employer health insurance pi		51f						
g	Other o	redits, adjustments, and payments.								
	☐ Forr	n 4136 Oth	erTotal ▶ [	51g						
52	Total p					52			7560	
53	Estimat	ed tax penalty (see instructions). Che	ck if Form 2220 is attached	▶[	)	53				
54	Tax du	e. If line 52 is less than the total of line	es 49, 50, and 53, enter amount owed		$\blacktriangleright$	54			0	
55	Overpa	yment. If line 52 is larger than the tot	al of lines 49, 50, and 53, enter amou	nt overpaid	D	55			7560	
56	Enter th	amount of line 55 you want Credited	to 2020 estimated tax	Refunded	Þ	56			7560	
.Part.\	71 S	tatements Regarding Certain Ad	ctivities and Other Information (s	ee instructions)		-∦				
57	At any	time during the 2019 calendar year, d	id the organization have an interest in	or a signature or	oth	er autho	ority [	Yes	No	
			other) in a foreign country? If "Yes,"						- 1	
	FINCEN	Form 114, Report of Foreign Bank a	nd Financial Accounts. If "Yes," enter	the name of the	fore	gn cou	ntry			
	here <b>&gt;</b>								~	
58	During t	ne tax year, did the organization receive a	distribution from, or was it the grantor of,	or transferor to, a	oreig	n trust?			~	
	If "Yes,	" see instructions for other forms the	organization may have to file.						- 1	
59	Enter th	e amount of tax-exempt interest rece	eived or accrued during the tax year	<b>\$</b>				-		
			this return, including accompanying schedules and			of my kno	wledge a	nd beli	ef, it is	
Sign	true, c	prect, and complete Declaration of preparer (other t	than taxpayer) is based on all information of which pr	eparer has any knowled		May the IF	IS discur	s this	return	
Here	<b>)</b>		17(な(ユ) CEO/COO		I۷	vith the p	reparer s	hown I	below	
		re of officer	Date Title		Ľ	see instruc	uons)?	_tes [	סמיך	
Paid		Print/Type preparer's name	Preparer's signature	Date	Char	k 🔲 if	PTI	N		
_						mployed				
Prepa		Firm's name ▶		•		EIN ►				
Use (	וחכ	Firm's address ▶			Phone					

Schedule A—Cost of Goo	ds Sold. En	ter method of	nventory va	aluation <b>&gt;</b>		
1 Inventory at beginning	of year	1	6	Inventory a	at end of year	6
2 Purchases		2	7	Cost of g	oods sold. Subtract line	13.54
3 Cost of labor	[	3	1	6 from line	5. Enter here and in Part	
4a Additional section 263	3A costs			I, line 2		7
(attach schedule)		4a	8	Do the ru	les of section 263A (with	respect to Yes No
<b>b</b> Other costs (attach sch	edule)	4b		property p	roduced or acquired for i	resale) apply المراجعة
5 Total. Add lines 1 throu	ıgh 4b	5		to the orga	anization?	
Schedule C-Rent Income	e (From Re	al Property an	d Persona	Property	Leased With Real Pro	perty)
(see instructions)						
Description of property		-				
(1)						
(2)						
(3)						
(4)						
	2. Rent receiv	ed or accrued				
(a) From personal property (if the perconal property is more than more than 50%)		(b) From real a percentage of rent 50% or if the ren		operty exceeds	1 '' ' ''	connected with the income 2(b) (attach schedule)
(1)						
(2)					·	
(3)						
(4)				•	***	
Total		Total			/53 T-A-1 d- d- d- d-	
(c) Total income. Add totals of co here and on page 1, Part I, line 6, o	column (A)	. ` ▶			<ul> <li>(b) Total deductions.</li> <li>Enter here and on page 1</li> <li>Part I, line 6, column (B) I</li> </ul>	•
Schedule E—Unrelated De	ebt-Finance	ed Income (see	instructions	s)		
1. Description of del	bt-financed prop	erty		come from or debt-financed	3. Deductions directly con- debt-finance	ed property
			pro	perty	(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)					,	
(2)			1	<del> </del>		· · · · · · · · · · · · · · · · · · ·
(3)	* *	- <u>-</u> -	1			
(4)	•		1			
Amount of average     acquisition debt on or     allocable to debt-financed     property (attach schedule)	of or debt-fina	e adjusted basis allocable to anced property h schedule)	4 dı	olumn vided ilumn 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)			i -	%		
					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				▶	L	
Total dividends-received deduct	ions included	in column 8	<u></u>		. •	
						Form <b>990-T</b> (2019)

Schedule F-Interest, Ang		<u> </u>			d Organizations				
Name of controlled organization identified		2. Employer Ification number	3. Net unrelated income (loss) (see instructions)			Part of column 4 that is included in the controlling organization's gross income		6. Deductions directly connected with income in column 5	
(1)									
(2)									
(3)									
(4)					1			<u> </u>	
Nonexempt Controlled Organia	zation	s							
7. Taxable Income	3. Net unrelated ind (loss) (see instructi			otal of specified syments made	10. Part of colunt included in the corganization's gr	controlling	connected with income in		
(1)								1	
(2)		,						T	
(3)									
(4)									-
Totals .						Add columns 5 Enter here and c Part I, line 8, co	on page 1,	Enter I	columns 6 and 11 here and on page 1, , line 8, column (B)
Schedule G-Investment I	ncor	ne of a Sect	ion 501	(c)(7) (9)	or (17) Organi	zation (see ins	tructions	9	
1. Description of income	2, Amount of income		3. Deductions directly connected (attach schedule)		4. Set-asides (attach schedule)		5. To and s	otal deductions et-asides (col. 3 plus col. 4)	
(1)					· ·	· <del></del> ·			·
(2)									
(3)				<u> </u>					
(4)									
Totals Schedule I—Exploited Exe	<b>▶</b>	Part I, line 9, c	olumn (A	)	Advertising Ir	come (see inst	ructions	Part I, I	re and on page 1, ne 9, column (B)
Description of exploited activity	2. Gross unrelated business incor from trade o business	3. Expenses directly connected with production of		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	6. Expenses attributable to column 5		7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)						,			
(2)									
(3)									
(4)	Enter here and page 1, Part line 10, col (4	I, page 1, Part I,				<u> </u>		Enter here and on page 1, Part II, line 25	
Schedule J-Advertising I	ncon	ne (see instruc	tions)		<u> </u>				•
Part I Income From P	erioc	licals Repor	ted on	a Consoli	idated 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)				·-			]	•	
(2)									
(3)									
(4)									
Totals (carry to Part II, line (5))	<b>•</b>								200 7

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

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns Part II 2 through 7 on a line-by-line basis.) 4. Advertising gain or (loss) (col 2 minus col 3) If 7. Excess readership 2. Gross costs (column 6 minus column 5, but 3. Direct 5. Circulation 6. Readership 1. Name of periodical advertising advertising costs ıncome costs ıncome a gain, compute not more than cols 5 through 7 column 4) (1) (2) (3) (4) ▶ 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 26 Totals, Part II (lines 1-5) Schedule K-Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of time devoted to business 4. Compensation attributable to unrelated business 1. Name 2. Title (1) % (2) % (3) % (4) %

Form **990-T** (2019)