

EXTENDED TO MAY 15, 2020

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Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0687

For calendar year 2018 or other tax year beginning JUL 1, 2018 and ending JUN 30, 2019

2018

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

A Check box if address changed

Name of organization ( Check box if name changed and see instructions.)

D Employer identification number (Employees trust, see instructions)

B Exempt under section X 501(c)(3) 408(e) 220(e) 408A 530(a) 529(a)

Print or Type

NEAR EAST FOUNDATION

13-1624114

Number, street, and room or suite no. If a P.O. box, see instructions.

110 WEST FAYETTE STREET, NO. 710

E Unrelated business activity code (See instructions)

City or town, state or province, country, and ZIP or foreign postal code

SYRACUSE, NY 13202

C Book value of all assets at end of year 11,259,076.

F Group exemption number (See instructions.)

G Check organization type X 501(c) corporation 501(c) trust 401(a) trust Other trust

H Enter the number of the organization's unrelated trades or businesses. 1 Describe the only (or first) unrelated trade or business here. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous contonco, 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? If "yes," enter the name and identifying number of the parent corporation. Yes No

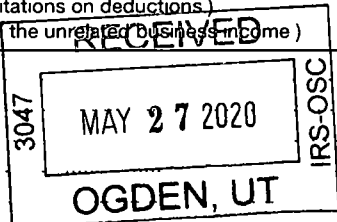
J The books are in care of JOHN ASHBY Telephone number 315-428-8670

Part I Unrelated Trade or Business Income

Table with 4 columns: (A) Income, (B) Expenses, (C) Net, and a description column. Rows 1-13 include Gross receipts, Cost of goods sold, Capital gain, etc. Total income is 0.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions)

Table with 4 columns: (A) Income, (B) Expenses, (C) Net, and a description column. Rows 14-32 include Compensation of officers, Salaries and wages, Charitable contributions, etc. Total deductions are 0.



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Part III Total Unrelated Business Taxable Income

Table with 2 columns: Line number and Amount. Line 36: 1,000. Line 37: 1,000. Line 38: 0.

Part IV Tax Computation

Table with 2 columns: Line number and Amount. Line 44: 0.

Part V Tax and Payments

Table with 2 columns: Line number and Amount. Line 51: 3,420. Line 54: 3,420. Line 55: 3,420.

Part VI Statements Regarding Certain Activities and Other Information

Table with 2 columns: Question and Yes/No. Question 56: SEE STATEMENT 1. Question 57: X. Question 58: \$.

Sign Here: Signature of officer, Date 1/5/2020, Title CHIEF FINANCIAL OFFICER.

Paid Preparer Use Only: Preparer's name KAREN NASONI, Signature, Date 4/18/2020, Firm's name BONADIO & CO., LLP, Firm's EIN 16-1131146, Firm's address SYRACUSE, NY 13204, Phone no. (315) 476-4004.

FORM 990-T

NAME OF FOREIGN COUNTRY IN WHICH  
ORGANIZATION HAS FINANCIAL INTEREST

STATEMENT 1

NAME OF COUNTRY

MALI  
MOROCCO  
JORDAN  
EGYPT  
SUDAN  
OTHER COUNTRY