| Form 890-    | (2018) NORTHEAST PARENT & CHILD SOCIETY, INC.   | 14-1   | <u>646198                                    </u> | Page 2         |
|--------------|---|--|---|----------------|
| Part I       | II Total Unrelated Business Taxable Income  |  |   |                |
| 33           | Total of unrelated business taxable income computed from all unrelated trades or businesses (see insti  | ructions)                                    | 33  | 0.             |
| 34           | Amounts paid for disallowed fringes   | ,  | 34  |                |
|              | Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions  | o)   | 35  |                |
| 35           |   |  | 00   -  | -              |
| 36           | Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of  |  |   |                |
|              | lines 33 and 34   | •  | 36  | 1 000          |
| 37           | Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)   | <i>,</i>                                     | S 37  | 1,000.         |
| 38           | Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,   |  | 411   | _              |
|              | enter the smaller of zero or line 36  |  | 38  | 0.             |
| Part I       | V Tax Computation   |  | <u> </u>  |                |
| 39           | Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)   |  | 39  | 0.             |
| 40           | Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line   | 28 from:                                     |   |                |
| 40           | Tax rate schedule or Schedule D (Form 1041)   | , 00 mam.                                    | ▶ 40  |                |
|              |   |  | 41  |                |
| 41           | Proxy tax. See instructions   |  | 42  |                |
| 42           | Alternative minimum tax (trusts only)   |  |   |                |
| 43           | Tax on Noncompliant Facility Income. See instructions   |  | 43  |                |
| 44           | Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies   |  | . 44  |                |
| Part \       | / Tax and Payments  |  |   |                |
| 45 a         | Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)   |  |   |                |
| b            | Other credits (see instructions) 45h  |  |   |                |
| -            | General business credit. Attach Form 3800   | : [  |   |                |
|              | Credit for prior year minimum tax (attach Form 8801 or 8827)  |  |   |                |
|              | Total credits. Add lines 45a through 45d  | /-   | 45e   |                |
|              |   |  | 46  | 0.             |
| 46           | Subtract line 45e from line 44  |  |   |                |
| 47           | Other taxes. Check if from Form 4255 Form 8611 Form 8697 Form 8866  | Other (attach schedu                         | 8   |                |
| 48           | Total tax. Add lines 46 and 47 (see instructions)   |  | 48  | 0.             |
| 49           | 2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2  | ı  | 49  | 0.             |
| 50 a         | Payments: A 2017 overpayment credited to 2018   |  |   |                |
| b            | 2018 estimated tax payments Slb 50b   |  |   |                |
|              | Tax deposited with Form 8868 510 50c  | 3,12   | 2.  |                |
|              | Foreign organizations: Tax paid or withheld at source (see instructions) 500  |  |   |                |
|              | Backup withholding (see instructions)   |  | 7   |                |
|              | ,   |  | _   |                |
|              | , and the same of | · · · · · · · · · · · · · · · · · · ·        | <del> </del>                                      |                |
| g            | Other credits, adjustments, and payments Form 2439  | . [  |   |                |
|              | Form 4136 Other Total ▶ _500  |  | <del></del>                                       | 6,038.         |
| 51           | Total payments. Add lines 50a through 50g   |  | 51  | 0,030.         |
| 52           | Estimated tax penalty (see instructions). Check if Form 2220 is attached  |  | 52  |                |
| 53           | Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed   |  | 58  |                |
| 54           | Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid   |  | 54  | 6,038.         |
| 55           | Enter the amount of line 54 you want: Credited to 2019 estimated tax  | Refunded                                     | 55  | 6,038.         |
| Part \       | /I Statements Regarding Certain Activities and Other Information (s   | see instructions)                            | •   |                |
| 56           | At any time during the 2018 calendar year, did the organization have an interest in or a signature or oth   | er authority                                 | l   | Yes No         |
| 00           | over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may  |  |   |                |
|              | FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign   |  |   |                |
|              |   | Journa y                                     |   | X              |
|              | here >  |  |   | $-\frac{x}{x}$ |
| 57           | During the tax year, did the organization receive a distribution from, or was it the grantor of, or transfer  | for to, a foreign trust?                     |   | <u> </u>       |
|              | If "Yes," see instructions for other forms the organization may have to file.   |  |   | 1              |
| 58           | Enter the amount of tax-exempt interest received or accrued during the tax year   |  |   |                |
|              | Under penalties of perjury, I declare translates examined this return, including accompanying schedules and statement correct, and complete Declaration of propherer has a  | s, and to the best of my kno<br>ny knowledae | wiedge and belief, it                             | is true,       |
| Sign         | CHIEF EXEC  | CUTIVE                                       | May the IRS discu                                 |                |
| Here         | 1.19.20 OFFICER   |  | the preparer show                                 |                |
|              | Sugnature of officer Date Title   |  | instructions)?                                    | Yes No         |
|              | Print/Type preparer's name Preparer's signature Date  | Check  | ıf PTIN   |                |
|              | Transfype proparer a name ( Treparer a signature )  | self- employ                                 | - I   |                |
| Paid         | KENNETH MCGIVNEY 04/1   |  | בוחם  | 24731          |
| Prepa        | PONADIO C CO LLB  |  | . 444   | 131146         |
| Use (        | Only Firm's name BONADIO & CO., LLP   | Firm's EIN                                   | 10-1  |                |
| 6 WEMBLEY CT |   |  |   | 000            |
|              | Firm's address ► ALBANY, NY 12205   | Phone no.                                    |   |                |
| 822711 01    | 00.40   |  | For   | m 990-T (2018) |