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Excess readership costs (Schedule J) Other deductions (attach schedule) Total deductions. Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 Unrelated business taxable income Subtract line 30 from line 29 Unrelated business taxable income Subtract line 30 from line 29 Excess readership costs (Schedule J) 26 27 28 8,752.			<i>7</i> '	dule I)						-	-	
Other deductions (attach schedule) Total deductions. Add lines 14 through 27 Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Urrelated business taxable income Subtract line 30 from line 29 31 8,752.												
Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions). 30 31 Note that the properties of the perating loss arising in tax years beginning on or after January 1, 2018 (see instructions). 30 31 8,752.		<i>,</i> .	•									
30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) 30 June lated business taxable income Subtract line 30 from line 29 31 8,752.	28	/		-								
31 Unrelated business taxable income Subtract line 30 from line 29 31 8,752.		/		•	_				m line 13			8,752.
		,	_				s (see instruc	tions)				0 757
						<u> </u>	•			31	F	



	1 990-1 (2019) NORTHERN VALLEY CATHOLIC SOCIAL 20	0-0984601	Page :
	7- 1		
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	امدا	
	instructions)	32	8,752.
33	Amounts paid for disallowed fringes.	33	
34	Charitable contributions (see instructions for limitation rules)	34	
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from		
	the sum of lines 32 and 33	35	8,752.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instr.)	36	8,752.
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	0.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	
	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	1	
	enter the smaller of zero or line 37	39	0.
Par	t IV Tax Computation	1	
	Organizations Taxable as Corporations. Multiply line 39 by 21% (0 21).	40	0.
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount	-	0.
7.		41	
40			
	Proxy tax. See instructions	42	
	Alternative minimum tax (trusts only)	43	
	Tax on Noncompliant Facility Income. See instructions	44	
_	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	0.
Par			
46 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 46a		
b	Other credits (see instructions) 46b		
С	General business credit Attach Form 3800 (see instructions) 46 c]	
d	Credit for prior year minimum tax (attach Form 8801 or 8827). 46d]	
	Total credits. Add lines 46a through 46d	46 e	0.
	Subtract line 46e from line 45	47	0.
48	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866		
	Other (attach schedule)	48	
49	Total tax. Add lines 47 and 48 (see instructions).	49	0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	
51 a	Payments A 2018 overpayment credited to 2019 51 a		
	2019 estimated tax payments. 51 b	1	
	Tax deposited with Form 8868 51 c	1	
ď	Foreign organizations Tax paid or withheld at source (see instructions) 51 d	1	
	Backup withholding (see instructions) 51 e	1	
	Credit for small employer health insurance premiums (attach Form 8941) 51 f	1 1	
q	Other credits, adjustments, and payments Form 2439	1 1	
J	Form 4136 ☐ Other Total ► 51 g		
52	Total payments. Add lines 51a through 51g	52	0.
	Estimated tax penalty (see instructions). Check if Form 2220 is attached	53	.
	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
			
	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	
	Enter the amount of line 55 you want Credited to 2020 estimated tax Refunded	56	
	Statements Regarding Certain Activities and Other Information (see instructions)		, , , , , , , , , , , , , , , , , , ,
	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority of		Yes No
	financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization may have to file FinCEN	N Form 114,	
	Report of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign country here		- X
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to,	a foreign trust?	Х
	If 'Yes,' see instructions for other forms the organization may have to file		
59	Enter the amount of tax-exempt interest received or accrued during the tax year ► \$		1
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any	of my knowledge and	
Sign		knowledge May the IRS discuss t	his return with
Here	S'II'-202 EXECUTIVE DIRECTOR	the preparer shown b	
	Signature of officer Date Title	instructions)?	res No
	Print/Type preparer's name Preparer's signature Date Check If	PTIN	
Paid	KRISTEL MAIKRANZ, CPA Self-employed	P0142920	13
Pre-		68-0146027	
pare Use		00-0140027	
Only	Firm's address 1726 COURT ST	(520) 241	2001
	REDDINGY CIT 70001	(530) 241	
BAA	TEEA0202L 02/21/20	Form 9	90-T (2019)

Schedule A - Cost of Good	15 Sold. Enter method of inv	entory valuation						
1 Inventory at beginning of year	ar 1	6 Invento	ory at e	y at end of year 6				
2 Purchases	2	7 Cost of goods sold. Subtract						
3 Cost of labor	3	line 6 f		ne 5 Enter here	7			
4 a Additional section 263A costs (attach	ı schedule)	ariu iii	raiti,	11116 2	<u>'</u>	<u> </u>	Yes	No
	4 a	9 D- 4b-		-4 1 0634 6			162	NO
b Other costs (attach sch)	4b	8 Do the	ruies (tv prod	of section 263A (w luced or acquired f	or resa	pect to ale) apply		
5 Total. Add lines 1 through 4b	5	to the						Х
Schedule C - Rent Income	(From Real Property an	d Personal Property	Leas	ed With Real F	rope	rty) (see ır	nstructi	ons)
1 Description of property								
(1)								
(2)								
(3)								
(4)								
	2 Rent received or accrued			3(a) Daduetia	ne dira	oth, conno	tod wit	h
(a) From personal prope		eal and personal property	y .	3(a) Deduction the income in	ın colui	mns 2(a) ai	nd 2(b)	.11
(if the percentage of rent for property is more than 10%		entage of rent for person ceeds 50% or if the rent		(at	ttach s	chedule)		
more than 50%)		d on profit or income)						
(1)								
(2)								
(3)								
(4)								
Total	Total			(h) Tatal daduations	Cata:			
(c) Total income. Add totals of column here and on page 1, Part I, line 6,	` , ` , ,			(b) Total deductions. here and on page 1, Pa I, line 6, column (B)				
Schedule E - Unrelated De		instructions)						
1 Description of debt-	financed property	2 Gross income from or allocable to debt-	3 De	ductions directly c debt-fina	onnect anced p	ed with or a	ellocab E ST	le to
i bescription of debt-	manced property	financed property	depre	(a) Straight line eciation (attach sci		(b) Other de (attach sc		
(1) COMMERCIAL RENTAL -	WASHINGTON PLAZA	375,407.	<u> </u>	106,268. 250,			50,0	64.
(2)		5.57.5						
(3)								
(4)				•				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5		7 Gross income ortable (column 2 x column 6)	(-	Allocable d (column 6 x olumns 3(a)	total	of
(1) 2,799,450.	6,101,274.	45.8830 %		172,248	3.	1	63,4	96.
(2)	<u> </u>	%						
(3)	-	%				,		
(4)		%						
				here and on page I, line 7, column (A				
Totals		•		172,248	3.	1	63,4	96.

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Page 3

Form **990-T** (2019)

Form 990-T (2019) NORTHERN VALLEY CATHOLIC SOCIAL

Total dividends-received deductions included in column 8

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Page 4

Schedule F — Interest, A		os, noyani		Controlled O			yu		,555 111		·/	
organization ide		Employer ntification number	oyer 3 Net unrelated income (loss)		payments ma		ide that is inc the cont organiza		ncluded in i		Deductions directly connected with ncome in column 5	
(1)	-				1							
(2)						-	_					
(3)	l			•								
(4)												
Nonexempt Controlled Organiz	ations											
7 Taxable Income	ind	let unrelated come (loss) instructions)		l of specifie nents made	nade included		column 9 that is n the controlling on's gross income			connecte	ctions directly d with income olumn 10	
(1)												
(2)												
(3)				_								
(4)						-						
Totals					ŀ	Add column here and on p 8, co		, Part I, line		e and on p	s 6 and 11 Enter page 1, Part I, line lumn (B)	
Schedule G - Investmen	nt Inco	me of a Se	ction 50	1(c)(7), (9	9), or	(17) Orga	nizati	on (see in	structio	ns)		
1 Description of income	:	2 Amount	of income	ncome 3 Dec		uctions connected chedule)	ected (attach sched		ule) set-as		tal deductions and asides (column 3 olus column 4)	
(1)												
(1) (2) (3)												
(3)												
(4)							L	***				
	•	Enter here an Part I, line 9,	d on page column (/	1,						Enter he Part I, II	re and on page 1 ne 9, column (B)	
Totals		A A adicide a las		Nh au Tha	- A	d. ravelia in a	lmaar		1 1	->		
Schedule I — Exploited E	xemp				$\overline{}$	_	1				T 55 .	
1 Description of exploited a	activity	2 Gross unrelate busines income fro trade of busines	d co s om c	penses directly nnected with production of unrelated siness income	from or bu 2 mil	t income (loss) unrelated trade isiness (column nus column 3) gain, compute ins 5 through 7.	activi unrela	s income from ty that is not ated business income	attribi	penses itable to imn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)	•				 			-				
(2)		 										
(3)	_			_	T^-							
(4)		·										
E P		Enter here on page Part I, line column (1, o 10, Pa	nter here and on page 1, Part I, line 10, column (B)							Enter here and on page 1, Part II, line 25	
Totals		<u> </u>	1					_			<u> </u>	
Schedule J - Advertisin												
Part I Income From Pe	riodica	als Reporte	d on a C	onsolida								
adver		2 Gross advertisir income	ng a	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 Readerst costs			7 Excess readership costs (col 6 minus col 5, but not more than col 4)	
(1)]	
(2)					4						1	
(3)					4						4	
(4)					+							
Totals (carry to Part II, line (5))) •	•										
ВАА				TEEA0204 L	09/19/1	9		_		F	orm 990-T (2019)	

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

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% ► Page 5

Form **990-T** (2019)

TOMESON (2013) NORTHERN VAL					20 0304001	
Part II Income From Periodica 7 on a line-by-line basis)	ils Reported or	n a Separate E	Basis (For each p	eriodical listed in	Part II, fill in co	lumns 2 through
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 (col 6 minus col. 5, but not more than col 4).
(1)						
(2)						
(3)						
(2) (3) (4)						
Totals from Part I						
	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on paye 1, Part I, line 11, column (B)	1	- '		Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1− 5)	•		[,]			
Schedule K - Compensation o	f Officers, Dire	ctors, and Tru	ustees (see instri	uctions)		
1 Name	,	2 Title	3 Percent o time devote to business	d to unrela	ation attributable ated business	
				:	8	
				!	8	
					%	

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2019

FEDERAL STATEMENTS

PAGE 1

NORTHERN VALLEY CATHOLIC SOCIAL SERVICE, INC

20-0984601

STATEMENT 1 FORM 990-T, PART III, LINE 36 NET OPERATING LOSS DEDUCTION

LOSS YEAR ENDING	0	RIGINAL LOSS	PF	LOSS REVIOUSLY USED	A	LOSS /AILABLE
6/30/05 6/30/06 6/30/07 6/30/08 6/30/09 6/30/10 6/30/11 6/30/12 6/30/15 6/30/16 NET OPERATING LOSS TAXABLE INCOME NET OPERATING LOSS		37,544. 76,135. 15,932. 8,304. 10,176. 35,485. 34,445. 111,577. 4,009. 19,295.		25,564. 0. 0. 0. 0. 0. 0. 0.	\$	11,980. 76,135. 15,932. 8,304. 10,176. 35,485. 34,445. 111,577. 4,009. 19,295. \$ 327,338. \$ 8,752. \$ 8,752.

STATEMENT 2 FORM 990-T, SCHEDULE E, LINE 3B OTHER DEDUCTIONS ALLOCABLE TO DEBT-FINANCED PROPERTY

COMMERCIAL RENTAL - WASHINGTON PLAZA		
CLEANING AND MAINTENANCE	\$	16,407.
INSURANCE		9,949.
LEGAL AND PROFESSIONAL FEES		26,690.
INTEREST	•	56,927.
SUPPLIES		581.
TAXES		L 4,687 .
TELEPHONE		4,522.
UTILITIES		59,198.
WAGES AND SALARIES	2	20,908.
POSTAGE		191.
EMPLOYEE MEETINGS		4.
	TOTAL \$ 25	50,064.