

EXTENDED TO NOVEMBER 16, 2020

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

OMB No 1545-0047

2019

Form 990-T

For calendar year 2019 or other tax year beginning and ending 1912

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

Header section containing: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets; D Employer identification number; E Unrelated business activity code; F Group exemption number; G Check organization type.

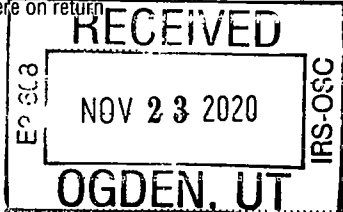
H Enter the number of the organization's unrelated trades or businesses. 1 SEE STATEMENT 1

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

J The books are in care of THE ORGANIZATION Telephone number 502-365-3209

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include: 1a Gross receipts or sales; 2 Cost of goods sold; 3 Gross profit; 4a Capital gain net income; 5 Income (loss) from a partnership; 6 Rent income; 7 Unrelated debt-financed income; 8 Interest, annuities, royalties; 9 Investment income; 10 Exploited exempt activity income; 11 Advertising income; 12 Other income; 13 Total.

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include: 14 Compensation of officers; 15 Salaries and wages; 16 Repairs and maintenance; 17 Bad debts; 18 Interest; 19 Taxes and licenses; 20 Depreciation; 21 Less depreciation; 22 Depletion; 23 Contributions to deferred compensation; 24 Employee benefit programs; 25 Excess exempt expenses; 26 Excess readership costs; 27 Other deductions; 28 Total deductions; 29 Unrelated business taxable income before net operating loss; 30 Deduction for net operating loss; 31 Unrelated business taxable income.



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Received in Batching Ogden JAN 04 2021

Part II Total Unrelated Business Taxable Income

Table with 2 columns: Description and Amount. Rows 32-39. Total amount 0.

Part III Tax Computation

Table with 2 columns: Description and Amount. Rows 40-45. Total amount 0.

Part IV Tax and Payments

Table with 2 columns: Description and Amount. Rows 46a-56. Total amount 1,450.

Part VI Statements Regarding Certain Activities and Other Information

Table with 3 columns: Question, Yes, No. Rows 57-59.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature of officer: Jeff Pelson, Date: 10/30/2020, Title: EXECUTIVE DIRECTOR

Paid Preparer Use Only: Print/Type preparer's name: CHRISTINE N KOENIG, Preparer's signature: Christine N Koenig, Date: 10/28/2020, Firm's name: DEMING MALONE LIVESAY & OSTROFF PSC, Firm's EIN: 61-1064249, Firm's address: 9300 SHELBYVILLE RD STE 1100 LOUISVILLE, KY 40222-5187, Phone no.: (502) 426-9660

FORM 990-T	DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY	STATEMENT	1
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REPEAL OF SECTION 512(A)(7) - AMOUNTS PAID FOR DISALLOWED FRINGE BENEFITS
TO FORM 990-T, PAGE 1