			NDED TO NOVE				D -	A	٠,		
Form 990-T		Exempt Orga					ах ке	turn	⊢	OMB N	lo 1545-0687
		•	nd proxy tax unde	er se						2	018
	For calendar year 2018 or other tax year beginning, and ending, and ending Go to www.irs.gov/Form990T for instructions and the latest information.						-		U IU		
Department of the Treasury Internal Revenue Service	•	Do not enter SSN number						1(c)(3).	3	Open to Public Inspection for 501(c)(3) Organizations Only	
A Check box if address changed		Name of organization (Check box if name cl	nanged	and see instruc	tions)				yees' trus	ication number st, see
B Exempt under georion	Print	MENNO-HAVEN	INC						2:	3-62	76101
X 501(c)(3	TVD0		n or suite no. If a P.O. box	, see ir	structions.					ted busing structions	ess activity code
408(e) 220(e)	Туре	2011 SCOTLA									
408A530(a) 529(a)		City or town, state or pro	vince, country, and ZIP or G , PA 17201		n postal code				722	320	
C Book value of all assets at end of year	2.5	F Group exemption num		<u> </u>				1 4044.3			7 045 44
		G Check organization typ		oration		c) trust	the eath (ex	401(a)			Other trust
H Enter the number of the	-	DD SERVICE S.		<u> </u>			the only (or complete Pa	•		than one	•
		ice at the end of the previo		rts I an		-					' ,
business, then complete					,		,				
I During the tax year, was			affiliated group or a paren	t-subsi	idiary controlled	group?		▶ [Ye	s X	No
		tifying number of the parer							4 = -		
J The books are in care of		LYNETTE M. M de or Business Inc		ONTE	ROLLER	<u> </u>	one number			261-	
		de or business inc	Joine		(A) Incor	iie	(0) 0	xpenses			(C) Net
1a Gross receipts or saleb Less returns and allo			c Balance	1c							
2 Cost of goods sold (S		A. line 7)	y & Balanco	2							
3 Gross profit. Subtrac		•		3							
4a Capital gain net incor	,	•		4a							
b Net gain (loss) (Form	1 4797, P	Part II, line 17) (attach Forn	n 4797)	4b			<u> </u>				
c Capital loss deductio				4c							
		ship or an S corporation (a	ttach statement)	5 6					1		
6 Rent income (Sched)7 Unrelated debt-finance		me (Schedule F)		7					t		
		nd rents from a controlled	organization (Schedule F)	8							
9 Investment income o	f a section	on 501(c)(7), (9), or (17) o	rganization (Schedule G)	9							
10 Exploited exempt act	ivity inco	me (Schedule I)		10							
11 Advertising income (na mentento 1	11	262	070					62 070
12 Other income (See in		,	PATEMENT 1	12	362, 362,						$\frac{62,078}{62,078}$
Part II Deduction		ot Taken Elsewher	e (See instructions fo								02,0101
		utions, deductions mus					income)				
14 Compensation of of	ficers, di	rectors, and trustees (Scho							14		
15 Salaries and wages			RECEIVED	\					15	2	30,462.
16 Repairs and mainter	nance	1 [8					16	.	
17 Bad debts • Interest (attach scho	adula) (c	ee instructions)	DEC 0 4 2019	12	SEE	стат	EMENT	2	17 18		5,000.
18 Interest (attach scho19 Taxes and licenses	suuis) (s	Tal	DC0 -	<u> </u>	522	D 1111		-	19		1,500.
	ions (Se	e instructions for limitation	MESTOEN LIT		1				20		
21 Depreciation attach			OGDEN		نے نے	21	4,	000.			
	aimed oi	n Schedule A and elsewher	e on return		2	2a			22b		4,000.
23 Depletion								•	23		
24 Contributions to del		mpensation plans							24		
25 Employee benefit pr26 Excess exempt expe		rhedule I)							25 26		
27 Excess readership of									27		
28 Other deductions (a					SEE	STAT	EMENT	3	28		42,865.
29 Total deductions.	Add lines	14 through 28							29		83,827.
30 Unrelated-business		ncome before net operatin							30	=	21,749.
		loss arising in tax years be		y 1, 20)18 (see instruct	ions)			31		<u> </u> 21,749.
32 Unrelated business 823701 01-09-19 LHA F		ncome. Subtract line 31 fro							32		990-T (2018)
OZOTO I O I-OS- IS LI IA F	or Laber	MAIN LICERRELION WOLLHOTTE	o, 566 matrubuluna.							, 0, ,,,	(2010)

Form 990-T	(2018) MENNO-HAVEN INC			23-627	6101		Page 2
Part II	I Total Unrelated Business Taxable	Income					
33	Total of unrelated business taxable income computed fi	rom all unrelated trades or businesses (se	ee instructions)		33	13,3	62.
34	Amounts paid for disallowed fringes				34		
35	Deduction for net operating loss arising in tax years be	ginning before January 1, 2018 (see instr	uctions) S7	MT 4	35	13,3	62.
36	Total of unrelated business taxable income before spec	ific deduction. Subtract line 35 from the s	sum of				
	lines 33 and 34				36		
37	Specific deduction (Generally \$1,000, but see line 37 in	structions for exceptions)			37	1,0	00.
38	Unrelated business taxable income Subtract line 37		: 36,				
	enter the smaller of zero or line 36				38		0.
Part I	/ Tax Computation						
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 38 from:				
	Tax rate schedule or Schedule D (Form	1041)		>	40		
41	Proxy tax. See instructions			>	41		
42	Alternative minimum tax (trusts only)				42		
43	Tax on Noncompliant Facility Income. See instruction	ns			43		
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whiche	ever applies			44		0.
Part V	Tax and Payments				, ,,		
45 a	Foreign tax credit (corporations attach Form 1118, trus	its attach Form 1116)	45a				
b	Other credits (see instructions)		45b		1 1		
C	General business credit Attach Form 3800		45c		4		
đ	Credit for prior year minimum tax (attach Form 8801 or	r 8827)	45d		.		
е	Total credits. Add lines 45a through 45d				45e		
46	Subtract line 45e from line 44				46		0.
47	Other taxes. Check if from Form 4255 For	m 8611 Form 8697 Form 88	866 🔙 Other (attach schedule)	47		
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	m 965-B, Part II, column (k), line 2			49		0.
50 a	Payments. A 2017 overpayment credited to 2018		50a		↓		
b	2018 estimated tax payments		50b		-		
C	Tax deposited with Form 8868		50c				
d	Foreign organizations: Tax paid or withheld at source (s	see instructions)	50d		-		
е	Backup withholding (see instructions)		50e		╡		
f	Credit for small employer health insurance premiums (attach Form 8941)	50f		↓		
g	Other credits, adjustments, and payments' Form						
	Form 4136 Other	Total >	50g		-		
51	Total payments. Add lines 50a through 50g				51		
52	Estimated tax penalty (see instructions) Check if Form				52		
53	Tax due. If line 51 is less than the total of lines 48, 49,	·			53		
54	Overpayment If line 51 is larger than the total of lines		1		54		
55	Enter the amount of line 54 you want. Credited to 2019			iunded 🕨	55		
Part V	·······	• • •					
56	At any time during the 2018 calendar year, did the orga	_				Yes	No
	over a financial account (bank, securities, or other) in a						
	FinCEN Form 114, Report of Foreign Bank and Financia	ıl Accounts. If "Yes," enter the name of the	foreign country				37
	here -			 			X
57	During the tax year, did the organization receive a distri		ransferor to, a for	eign trust?		-	
	If "Yes," see instructions for other forms the organization						
58	Enter the amount of tax-exempt interest received or acc		atomenic and to the	heet of my knowle	dge and belief it	ie trije	
Sign	correct, and complete Declaration of preparer (other than taxe				ago ano bonor, n		
Here	1 / 1 ACT	111/15/219 CEO		1	lay the IRS discus		/ith
	Signature of officer	Date CFO			ne preparer shown nstructions)? X	Yes Yes	7 No Ì
						100	1110
	Print/Type preparer's name	17 60 -					
Paid	rer KERRI N. BOGDA, CPA	Ally though	11149	self- employed		60402	
Prepa	T . PANDO MILIN WI	RCHOW KRAUSE! LLP	U = E = []	Firm's EIN		85991	0
Use C	1570 FRUITVI		0	, III S LIN	33 0	<u> </u>	

Firm's address LANCASTER, PA 17601

Page 3

Schedule A - Cost of Good	s Sold. Enter	method of inver	ntory va	luation N/A					
1 Inventory at beginning of year	1.			Inventory at end of yea	r		6		
2 Purchases	2		7	Cost of goods sold. Su	ıbtract l	ine 6		1	
3 Cost of labor	3			from line 5. Enter here and in Part I,		Part I,			
4a Additional section 263A costs				line 2				<u> </u>	,
(attach schedule)	4a		8 Do the rules of section 263A (with respect to		with respect to		Yes	No	
b Other costs (attach schedule)	4b		property produced or acquired for resale) apply to		for resale) apply to				
5 Total. Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income (see instructions)	(From Real	Property and	d Pers	onal Property L	ease	d With Real Prop	eπy	') 	
Description of property									
(1)	<u> </u>								
(2)									
(3)		-							
(4)									
	2 Rent receiv	ed or accrued		,					
(a) From personal property (if the per rent for personal property is mor 10% but not more than 50%	e than	` of rent for	personal p	nal property (if the percentag roperty exceeds 50% or if d on profit or income)	ge	3(a) Deductions directl columns 2(a) a	y conne and 2(b)	cted with the income in (attach schedule)	ı
(1)									
(2)									
(3)		ļ							
(4)									
Total	0.	Total			0.	# 1 T 4 1 4 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1			
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, colum	n (A)	•			0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	•		0.
Schedule E - Unrelated Del	bt-Financed	Income (see	instruc	tions)					
			,	Gross income from		 Deductions directly conto debt-finant 			
1 Description of debt-fi	inanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	ns
(1)									
(2)									
(3)									
(4)									
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or debt-fina	e adjusted basis allocable to inced property h schedule)	6	Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)		8 Allocable deduct (column 6 x total of co 3(a) and 3(b))	
(1)				%					
(2)				%					
(3)				%		_		_	
(4)				<u></u> %		· 			
						inter here and on page 1, Part I, line 7, column (A)		Enter here and on pag Part I, line 7, column (
Totals				•		0			0.
Total dividends-received deductions	ncluded in colum	n 8		- 1			>		0.

Schedule F - Interest, A	initialities, No	<u> </u>		Controlled Or					iructions	
1. Name of controlled organization		Employer lentification number	3. Net unr	elated income instructions)	4. Tota	al of specified nents made	ınclud	t of column 4 t ed in the contr ation's gross i	olling	6 Deductions directly connected with income in column 5
(1)							Ī			
(2)										
(3)										
(4)										
Nonexempt Controlled Organiz	ations		<u> </u>			•				
7 Taxable Income	8. Net unrelated (see instru		9 Total	of specified payn made	nents	10. Part of column the controllingross		nization's	11. Dec	luctions directly connected income in column 10
(1)	,				1					
(2)										
(3)			1		i					
(4)			+		t t					
						Add colun Enter here and line 8, c		1, Parti,	Enter he	d columns 6 and 11 we and on page 1, Part I, line 8, column (B)
Totals Schedule G - Investmer		a Section	n 501(c)(7	'), (9), or (17) Org	anization		<u> </u>		
(see instri	iption of income			2 Amount of	ıncome	3 Deduction	ected	4. Set-		5 Total deductions and set-asides (col 3 plus col 4)
(1)						(00011 001101				(55. 5 pies 66. 4)
(2)	•					<u>.</u>				
(3)					1					
(4)										1
(4)	`			Enter here and o Part I, line 9, co				<u> </u>		Enter here and on page Part I, line 9, column (B)
Totals			•		0.					0
Schedule I - Exploited I	•	ity Incom	ne, Other	Than Adv		g Income				1 <u> </u>
Description of exploited activity	2. Gross urrelated business income from trade or business	directly with p of u	expenses y connected production unrelated ess income	4. Net incom from unrelated business (co minus columi gain, compute through	trade or lumn 2 n 3) If a s cols 5	5. Gross inco from activity is not unrelat business inco	that ted	- 6 Exp attribut colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)					i					
(2)										
(3)										
(4)	_	- -	- 11-14-1	<u> </u>					-	1
	Enter here and on page 1, Part I, line 10, col (A)	page line 1	here and on e 1, Part I, IO, col (B)		1			1		Enter here and on page 1, Part II, line 26
Totals Date of Advertisis		0.	0.	<u> </u>						0
Schedule J - Advertisin Part I Income From F				solidated	Basis		-			
1. Name of periodical	2 Greadvertii	sing	3. Direct dvertising costs	4 Advert or (loss) (co col 3) If a ga cols 5 th	ising gain of 2 minus ain, compute rough 7	5. Circula income		6 Read		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))	<u> </u>	0.	0							0 Form 990-T (201)

Part II	Income From Periodicals Reported on a Separate Basis	(For each periodical listed in Part II, fill in
	columns 2 through 7 on a line-by-line 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 from Part I	0.	0.				0.
	Enter here and on page 1, Part I, line 11, col. (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	0.	0.				0.
Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)						

1. Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2018)

FORM 990-T	OTHER INCOME	STATEMENT 1
DESCRIPTION		AMOUNT
FOOD SERVICE		362,078.
TOTAL TO FORM 990-T, F	PAGE 1, LINE 12	362,078.
FORM 990-T	INTEREST PAID	STATEMENT 2
DESCRIPTION		AMOUNT
		5,000.
TOTAL TO FORM 990-T, I	PAGE 1, LINE 18	5,000.
FORM 990-T	OTHER DEDUCTIONS	STATEMENT 3
DESCRIPTION		AMOUNT
FOOD SUPPLIES, MAINTENANCE, UTILITIES	REPAIRS	113,511. 27,329. 2,025.
TOTAL TO FORM 990-T, I	PAGE 1, LINE 28	142,865.

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 4
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/03	2,461.	0.	2,461.	2,461.
12/31/04	24,009.	0.	24,009.	24,009.
12/31/05	29,123.	0.	29,123.	29,123.
12/31/06	19,874.	0.	19,874.	19,874.
12/31/09	406,617.	0.	406,617.	406,617.
12/31/10	301,688.	0.	301,688.	301,688.
12/31/11	224,022.	0.	224,022.	224,022.
12/31/12	282,060.	0.	282,060.	282,060.
12/31/13	325,558.	. 0.	325,558.	325,558.
12/31/14	267,774.	0.	267,774.	267,774.
12/31/15	87,936.	0.	87,936.	87,936.
12/31/16	276,923.	0.	276,923.	276,923.
12/31/17	6,721.	0.	6,721.	6,721.
NOL CARRYO	VER AVAILABLE THIS	YEAR	2,254,766.	2,254,766.

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

ENT	rij	Y.	2
014	O NI-	45.45	oce.

2018

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

Department of the Treasury Internal Revenue Service (99) For calendar year 2018 or other tax year beginning , and e

▶ 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).

2018

Name	of the organization MENNO-HAVEN INC			Employer ider 23-62		
	Inrelated business activity code (see instructions) 72131	0		1 20 02		
	Describe the unrelated trade or business GUEST ROO	M				
Part I Unrelated Trade or Business Income (A) Income (B) E						(C) Net
1 a	Gross receipts or sales 29,410.					
ь	Less returns and allowances c Balance ▶	1c	29,410.			
2	Cost of goods sold (Schedule A, line 7)	2				
3	Gross profit Subtract line 2 from line 1c	3_	29,410.			29,410.
4 a	Capital gain net income (attach Schedule D)	4a				
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5				
6	Rent income (Schedule C)	6				
7	Unrelated debt-financed income (Schedule E)	7				-
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)			•		
	organization (Schedule G)	9				<u> </u>
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule)	12				
13	Total. Combine lines 3 through 12	13	29,410.			29,410.
	Deductions Not Taken Elsewhere (See instruction deductions must be directly connected with the understand the second seco	unrela	ited business income	.)	14	
14	Compensation of officers, directors, and trustees (Schedule K)				15	
15	Salaries and wages				16	
16	Repairs and maintenance				17	
17	Bad debts , .		SEE STATE	MENT 5		3,540.
18	Interest (attach schedule) (see instructions)		SEE SINIE	MENI J	18 19	2,452.
19	Taxes and licenses				20	2,4321
20	Charitable contributions (See instructions for limitation rules)		04	5,477.	20	
21	Depreciation (attach Form 4562)		21	3,411.	22b	5,477.
22	Less depreciation claimed on Schedule A and elsewhere on return		22a		$\overline{}$	3,4111
23	Depletion				23	<u> </u>
24	Contributions to deferred compensation plans				25	_
25	Employee benefit programs				26	<u> </u>
26	Excess exempt expenses (Schedule I)				27	
27	Excess readership costs (Schedule J)		SEE STATE	אידאיי 6	-	4,579.
28	Other deductions (attach schedule)		SEE SIAIR	THEILT O	28	16,048.
29	Total deductions. Add lines 14 through 28	atus - 1	Dulatra et lina 20 frans lina - 1	2	29	13,362.
30	Unrelated business taxable income before net operating loss deduc			3	30	13,302.
31	Deduction for net operating loss arising in tax years beginning on o	πaπer	January 1, 2018 (See		31	
	Instructions)			•	32	13,362.
32	Unrelated business taxable income Subtract line 31 from line 30				<u>3</u> 2	

Р	age	3

MENNO-HAV	EN INC			23-627	6101		
Schedule A - Cost of Goods	s Sold. Enter	method of inven	itory valuation 🕨 N/A				
1 Inventory at beginning of year	1		6 Inventory at end of year	•	6		
2 Purchases	2		7 Cost of goods sold. Su	btract line 6			
3 Cost of labor	3		from line 5. Enter here a	and in Part I,			
4 a Additional section 263A costs			line 2		7		
(attach schedule)	4a	8 Do the rules of section 263A (with respect to			Yes	No	
b Other costs (attach schedule)	4b	property produced or acquired for resale) apply to					.
5 Total. Add lines 1 through 4b	5		the organization?				X
Schedule C - Rent Income ((From Real	Property and	Personal Property Lo	eased With Real Prop	erty)		
(see instructions)							
1. Description of property							
(1)							
(2)							
(3)							
(4)		-					
		ed or accrued		3(a) Deductions direct		d with the means w	_
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)		(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)		ge S(a) Deductions directions columns 2(a) a	and 2(b) (att	ach schedule)	
(1)							
(2)							
(3)							
(4)							
Total	0.	Total		0.			
(c) Total income. Add totals of columns	2(a) and 2(b) En	iter		(b) Total deductions. Enter here and on page 1,			
here and on page 1, Part I, line 6, column				0 . Part I, line 6, column (B)	<u> </u>		0.
Schedule E - Unrelated Deb	ot-Financed	Income (see	instructions)				
			2 Gross income from	3 Deductions directly connected with or allocable to debt-financed property			
Description of debt-financed property			or allocable to debt- financed property	(a) Straight line depreciation		(b) Other deductions	
				(attach schedule)	(attach schedule) (attach sc		
							
(1)							
(2)					+		
(3)							
(4)			C Calumn A dundad	7. Gross income	+	9 Allocable deduct	hone
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or a debt-fina	adjusted basis allocable to inced property h schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6) 8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))			
(1)			%				
(2)			%				
(3)			%				
(4)			%				
	•			Enter here and on page 1,	En	ter here and on pag	je 1,
				Part I, line 7, column (A)	P	art I, line 7, column	(B)
Totals			▶	0).		0.
Total dividends-received deductions	ncluded in columi	n 8			▶		0.

FORM 990-T (M)	INTEREST PAID	STATEMENT 5	
DESCRIPTION ,		AMOUNT	
		3,540.	
TOTAL TO SCHEDULE M, PA	RT II, LINE 18	3,540.	
FORM 990-T (M)	OTHER DEDUCTIONS	STATEMENT 6	
DESCRIPTION	AMOUNT		
SUPPLIES, MAINTENANCE, UTILITIES	3,000. 1,579.		
TOTAL TO SCHEDULE M, PA	4,579.		