∠~aan_T	Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e)) For calendar year 2018 or other tax year beginning 2018, and ending 20						<u> </u>	OMB No 1545-0687	
990-T									
*	For calendar year 2018 or other tax year beginning, 2018, and ending, 20 ► Go to www.irs.gov/Form990T for instructions and the latest information.						-	2010	
Department of the Treasury Internal Revenue Service	 ▶ Don	ot enter SSN numbers on this form as it may					n to Public Inspection for		
Check box if	7 5011	er identification number							
B Exempt under section			(Employ	ees' trust, see instructions)					
X 501(C 123)	Print	Number, street, and room or suite no If a P O box, se	e instructi	ons	•		23-72	97042	
408(e) 220(e)	or	1306 N 10th Street		E Unrelated business activity code					
408A 530(a)	Туре	City or town, state or province, country, and ZIP or fore	(See ins	tructions)					
529(a)		Spearfish, SD 57783			_				
C Book value of all assets at end of year	F Gro	oup exemption number (See instructions)	>						
803,950			c) corpo	ration	501(c) tru:)1(a) trust		
	•	nization's unrelated trades or businesses	_			escribe the o	• •	•	
trade or business her			_		mplete Parts I				
•		end of the previous sentence, complete Pa	ırts I an	d II, comp	olete a Sched	ule M for eac	ch addition	nal	
trade or business, the					ha.d.a	allad assum?		No. VIN	
		corporation a subsidiary in an affiliated groud dentifying number of the parent corporation		parent-su	osidiary contr	ollea group?		. ► Yes XN	
		Stephanie Crago			Telephone	number ►	/60E\6	42-2827	
		e or Business Income		(A)	Income	(B) Exp		(C) Net	
1a Gross receipts or s		e of Business income	T	101	ilicome	(5) - 1	enses	(O) Net	
b Less returns and a		c Balance ►	1c						
		ule A, line 7)	2						
3 Gross profit Subtr	•	•	3				-		
4a Capital gain net inc			4a		·				
b Net gain (loss) (Fo	rm 4797	, Part II, line 17) (attach Form 4797)	4b			٠.		,	
c Capital loss deduct									
5 Income (loss) from a	·			_					
6 Rent income (Sche	edule C)		6						
7 Unrelated debt-fina	anced inc	come (Schedule E)	7						
8 Interest, annuities, royalt	erest, annuities, royalties, and rents from a controlled organization (Schedule F)								
	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)								
		come (Schedule I)	10			ľ			
_	•	ule J)	11.						
·		ons, attach schedule)	12			<u> </u>			
		ough 12	13	r limitat	uone on de	ductions \	/Evoor	t for contributions	
		be directly connected with the un					(Excer	of for contributions	
14 Compensation of o	fficers d	rectors, and trustees (Schedule K)	T Clate	ם טעאווו	OF!\	<u> </u>	. 14		
15 Salaries and wage	s	· · · · · · · · · · · · · · · · · · ·		\KE	CLIVE		4-		
_		• • • • • • • • • • • • • • • • • • • •]		ါ်လိုု :	40		
17 Bad debts			[2	. JUL	L. 2.2.20.1	9 . 있 .	4=		
18 Interest (attach sch	redule) (:	see instructions)		J		1021 .	- 1-		
19 Taxes and licenses	s	• • • • • • • • • • • • • • • • • • • •	.	$\cdot \cdot 0G$	151.161.1	<u>.</u> Т	. 19		
20 Charitable contribu	itions (Se	ee instructions for limitation rules)	Ļ		· · · · · · ·	'	. 20		
21 Depreciation (attac	h Form	4562)			21				
22 Less depreciation	claimed	on Schedule A and elsewhere on return			22a		22b		
23 Depletion							. 23		
		ompensation plans							
		S						<u> </u>	
		Schedule I)						ļ	
·	-	Schedule J)							
28 Other deductions (•						.	
	·								
		loss arising in tax years beginning on or at		-	•	•	<u> </u>	 	
32 Unrelated busines: For Paperwork Reducti		Income Subtract line 31 from line 30	<u> </u>	· · · · ·		· · · · ·	. 32	Form 990-T (2018	

EEA

Form	990-T (20	018) Spearfish Seni	or Service Center		2	3-72 <u>9704</u> 2	2 Page 2
Pa		<u> Total Unrelated Business T</u>					
33	Total of u	unrelated business taxable income c	computed from all unrelated trades or	businesses (see	e		
,	instructio	ns)				33	
34	Amounts	paid for disallowed finges				34	
35	Deductio	on for net operating loss arising in tax	years beginning before January 1, 2	018 (see			
			35				
36	Total of u						
•		33 and 34		36			
37			e line 37 instructions for exceptions)			37	
38		, , , , , , , , , , , , , , , , , , , ,	ract line 37 from line 36. If line 37 is			- 	
Jo				~	•	38	0
<u> </u>				<u> </u>	· · · · · · · · · · · · · · · · · · ·	30	
		Tax Computation	Multiply line 38 by 21% (0 21)			39	
39	_		tions for tax computation Income ta			39 -	
40			40				
			chedule or Schedule D (Form 1			40	
41						41	
42						42	
43			ee instructions			43	
44			40, whichever applies		<u></u>	44	
Pai		Tax and Payments				,	
45a	Foreign t		1118, trusts attach Form 1116)		298]	
þ	Other cre	edits (see instructions)		. 45b]	
С	General	business credit Attach Form 3800 (s	see instructions)	. 45c]	
d	Credit fo	r prior year minimum tax (attach Forr	m 8801 or 8827)	. 45d]	
е	Total cr	edits. Add lines 45a through 45d .				45e	298
46	Subtract	line 45e from line 44				46	(298)
47			Form 8611 Form 8697 Form 8697			47	
48						48	(298)
49			-A or Form 965-B, Part II, column (k)			49	
50 a		- ·	2018	1 1			
b	-	· ·				1	
	Tax depo		1				
C	Foreign		1				
d	•		1				
e		= :				1	
T			emiums (Attach Form 8941)	. 50f		1 1	
g		edits, adjustments, and payments		-			
		4136 Ot				l <u></u>	
51	•]			51	
52			ck if Form 2220 is attached			52	
53			nes 48, 49, and 52, enter amount ow			53	
54	Overpay	yment. If line 51 is larger than the to	otal of lines 48, 49, and 52, enter am	ount overpaid.		54	298
55	Enter the	e amount of line 54 you want Credi	ted to 2019 estimated tax ►		Refunded ►	55	298
Pa	rt VI S	Statements Regarding Cert	ain Activities and Other Info	ormation (se	e instructions)	l	
56	At any ti	me dunng the 2018 calendar year, de	d the organization have an interest in	or a signature o	r other authority		Yes No
	over a fi	nancial account (bank, secunties, or	other) in a foreign country? If "Yes," t	he organization i	may have to file		1 1 '
	FinCEN	Form 114, Report of Foreign Bank a	nd Financial Accounts If "Yes," enter	the name of the	foreign country		
	here ▶						X
57	Dunng ti	he tax year, did the organization rece	ive a distribution from, or was it the gr	antor of, or trans	feror to, a foreign	trust?	. <u> </u>
	If "Yes."	see instructions for other forms the o	rganization may have to file		•		
58	-	amount of tax-exempt interest rece	•	▶ \$			
	Under	penalties of perjury, I declare that I have examin	ned this return, including accompanying schedule	es and statements, an		wledge and belief	f, it is
Sig	true.co	ny knowledge					
_	- I		scuss this return				
Her	· '-	with the prepar (see instruction	er shown below s)? X Yes No				
	Jugite	Brint/Type prepared name	Date Title	Date	1	1	IZN TESI I NO
D-:		Print/Type preparer's name	Preparer's signature		Check self-employe	f PTIN	F44.600
Pai		Teresa Bonnet	Teresa Bonnet	05-15-2019	,	P00	541699
						<u>26-1157</u>	958
USE	Only	Phone no					
		Belle Fourc	he SD 57717			605-723	-0980