Form	990-T	e E	Exempt Orga	anization Bu	sine	ss Income	Tax Relui	D 5	8 Qman 41545-0987
	~~	For ca	lendar year 2018 or other tax	(and proxy tax und year beginning JUL 1 yw irs.gov/Form990T for	der se , 20	ection 6033(e))	JUN 30, 20	19	2018
Depart	tment of the Treasury								Open to Public Inspection for 50 1(c)(3) Organizations Only
Interna	Check box If		Name of organization (bers on this form as it ma		d and see instructions.		D Em	ptoyer identification number
A _	address changed		wante of organization (Check box if flame	Chariye	u and see mstructions.)		nployees' trust, see tructions)
B Ex	xempt under section	Print	Playhouse	Square Found	lati	on		_ <u> </u>	23-7304942
X	- ' '	10		om or suite no. If a P.O. b		nstructions.			related business activity code e instructions)
	408(e) 220(e)	Type		d Ave, No. 2				_	
<u> </u>	408A530(a)			rovince, country, and ZIP		gn postal code		7.0	2220
o Boo	529(a) ok value of all assets		Cleveland,	OH 44115-2 mber (See instructions.)	19/	<u> </u>		/ 4	2320
ate	end of vear	34.	G Check organization to		rnoratio	n 501(c) trus	et 1401	(a) trust	Other trust
H Ent			tion's unrelated trades o		2		ibe the only (or first)		
		-	ecial Events				ne, complete Parts I-		
				ious sentence, complete P	arts I ar				
	siness, then complete I								
	-	-	·	n affiliated group or a pare	ent-subs	idiary controlled group)?		Yes X No
			ifying number of the par					01.5	
			Tim McDonald le or Business In				ephone number		
					T	(A) Income	(B) Expens	ses	(C) Net
	Gross receipts or sale		221,455	┥ .	1	221,455			
	Less returns and allow Cost of goods sold (S		Λ line 7)	c Balance	1c 2	221,433			
	Gross profit. Subtract		· · · · · · · · · · · · · · · · · · ·		3	221,455		_	221,455.
	Capital gain net incom				4a		1		
		•	art II, line 17) (attach For	rm 4797)	4b		1		
	Capital loss deduction		• •		4c			_	
5	Income (loss) from a	oartners	hip or an S corporation ((attach statement)	_5				· -
	Rent income (Schedul				6				
	Unrelated debt-finance				7		<u> </u>		
	•			d organization (Schedule F)				 _	
	Exploited exempt activ			organization (Schedule G	10	 -			
	Advertising income (S	-			11				
	Other income (See ins		•		12			,	-
	Total. Combine lines				13	221,455	•		221,455.
	t II Deduction	ns No	t Taken Elsewhe	(See instructions f	or limit	ations on deductions	s)		
	(Except for c	ontribu	itions, deductions mu	st be directly connecte	d with t	the unrelated busine	ess income)		
14		cers, dır	ectors, and trustees (Scl	nedule K)				14	
15	Salaries and wages							15	
16	Repairs and maintena	ance						16	
17 18	Bad debts Interest (attach sched	fulo) (co	on unstructions)					17	
19	Taxes and licenses	iuie) (se	e msuuchons)					19	 -
20		иs (See	instructions for limitation	ormies)				20	
21	Depreciation (attach i		21	RECEIVE	:	21	14,473		
22			Schedule A and elsewi	ste ou reggin	<u> </u>	(3) 22a		22b	14,473.
23	Depletion			M 18 1 M	20	SS		23	
24	Contributions to defe		npensation plans	SI JOIL THE HAN	ןי ייי	RS		24	<u> </u>
25	Employee benefit pro			OGDEN,	HT			25	
26	Excess exempt expen					_ #		26	
27 29	Excess readership co		•			 Geo C+-	atement 2	27	202,191.
28 29	Other deductions (att. Total deductions Ad		·			שבב שני	rcement 2	28 29	216,664.
30 /	•			ng loss deduction. Subtrac	ct line 29	9 from line 13		30	4,791.
/			•	eginning on or after Janua				31	
31/	DOGGCOOL TO HOLDE				, , – –				
31/ 32		_	come. Subtract line 31 fi			nart 1		32	4,791.

GV3

Form 990-T		Playhouse Square Foundation 25-750	14744		- ago E
Part I	ר [[וֹו	otal Unrelated Business Taxable Income			
33 /	Total	of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	4,79	<u>91.</u>
34	Amou	nts paid for disallowed fringes	34		
35	Deduc	tion for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) Stmt 3	35	4,7	<u>91.</u>
36	Total	of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of	1 1 1		
	lines :	33 and 34	36		
37	Speci	fic deduction (Generally \$1,000, but see line 37 instructions for exceptions)	137	1,0	00.
38		ated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,			
•		the smaller of zero or line 36	38		0.
Part I		ax Computation	-171		
39		izations Taxable as Corporations. Multiply line 38 by 21% (0.21)	39		0.
40	-	Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from:	00		<u> </u>
40	$\overline{}$	Tax rate schedule or Schedule D (Form 1041)	40		
44		, , , , , , , , , , , , , , , , ,	41		
41	-	tax. See instructions ative minimum tax (trusts only)	42		
42			43		
43		n Noncompliant Facility Income. See instructions Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44		0.
Part \	_	ax and Payments	1 44		<u> </u>
			1 1		
		in tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a 45b	┥ ┃		
b		credits (see instructions) 45b	-i i		
C		al business credit. Attach Form 3800	-		
đ		for prior year minimum tax (attach Form 8801 or 8827)	-		
е		credits. Add lines 45a through 45d	45e		
46		act line 45e from line 44	46		0.
47		taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	47		
48		tax. Add lines 46 and 47 (see instructions)	48		0.
49		net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49		0.
50 a	-	ents: A 2017 overpayment credited to 2018 50a	-		
b		estimated tax payments 50b	-		
C		eposited with Form 8868	-		
		n organizations: Tax paid or withheld at source (see instructions) 50d	- i		
е		p withholding (see instructions) 50e	-		
f		for small employer health insurance premiums (attach Form 8941)	⊣		
g	$\overline{}$	credits, adjustments, and payments: Form 2439			
		Form 4136 Other Total ▶ 50g	_		
51		payments. Add lines 50a through 50g	51		
52	Estim	ated tax penalty (see instructions). Check if Form 2220 is attached 🕨 🔃	52		
53	Tax d	ue. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53		
54	•	ayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54		
55		the amount of line 54 you want. Credited to 2019 estimated tax	55		
Part \	<u>/ :</u>	Statements Regarding Certain Activities and Other Information (see instructions)			
56	At any	time during the 2018 calendar year, did the organization have an interest in or a signature or other authority		Yes	No
	over a	financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file			
	FinCE	N Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country		}	ŀ
	here				<u>X</u>
57	Durin	g the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?			X
		s," see instructions for other forms the organization may have to file.			
58		the amount of tax-exempt interest received or accrued during the tax year >\$			L
Sign	Un	der penalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my know rect, and complete Declaration of preparer (other/than taxpayer) is based on all information of which preparer has any knowledge.	ledge and belief	, it is true,	
Here		() of the second	May the IRS dis	cuss this return v	vrth
110,0		Superburg of Afficial Administrat	the preparer sh		٦
			instructions)?	X Yes	No
		Print/Type preparer's name Preparer's signature Date Check	if PTIN		
Paid		Rebekuh Elev Watch COU 06/30/20 self-employe		048656	
Prepa	11 ÇI	00,00,20		247672	
Use (nly	Firm's name ► RSM US LLP Firm's EIN I	<u> 42-</u>	071432	<u> </u>
		One South Wacker Dr Ste 800	212 62	4 2422	
		Firm's address ► Chicago, IL 60606-3392 Phone no.	314-63	4-3400	

Schedule A - Cost of Goods	S Sold. Enter	method of inve	ntory v	aluation > N/A				
1 Inventory at beginning of year	1		6	Inventory at end of year	ır		6	
2 Purchases	2		7	Cost of goods sold St	ubtract li	ne 6		
3 Cost of labor	3			from line 5. Enter here	and in F	Part I,		
4a Additional section 263A costs				line 2			7	
(attach schedule)	4a		8	Do the rules of section	263A (v	vith respect to		Yes No
b Other costs (attach schedule)	4b	.		property produced or a	acquired	for resale) apply to		<u>':</u>
5 Total. Add lines 1 through 4b	5			the organization?				X
Schedule C - Rent Income ((see instructions)	(From Real I	Property and	d Per	sonal Property L	.ease	d With Real Propo	erty) 	
1 Description of property								
(1)				<u> </u>				
(2)	<u> </u>						<u>_</u>	
(3)								
(4)						г		
		ed or accrued				3(a) Deductions directly	connected with	the income in
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	centage of than	of rent for	personal	onal property (if the percental property exceeds 50% or if ed on profit or income)	ge	columns 2(a) an	d 2(b) (attach so	:hedule)
(1)								
(2)								
(3)								
(4)								
Total	0	Total			0.			
(c) Total income Add totals of columns here and on page 1, Part I, line 6, column	(A)	>			0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	>	0.
Schedule E - Unrelated Deb	t-Financed	Income (see	ınstru	ctions)				
			2	2 Gross income from		Deductions directly conn to debt-finance		locable
1 Description of debt-fin	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Or (atta	ther deductions ach schedule)
(1)								
(2)				·				
(3)								
(4)	·			<u> </u>				
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or a debt-finar	adjusted basis illocable to nced property n schedule)	6	Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)	(column	ocable deductions 6 x total of columns 3(a) and 3(b))
(1)				%				
(2)				%				
(3)				%				
(4)				%				
	<u> </u>					nter here and on page 1, lart I, line 7, column (A)		re and on page 1, ne 7, column (8)
Totals				•		0.	.	0.
Total dividends-received deductions	cluded in column	18						0.

Schedule F - Interest, F				Controlled O					tructions	
1 Name of controlled organizate	Name of controlled organization 2 Employer identification number				ments made include		Part of column 4 that is ncluded in the controlling rganization's gross income		6 Deductions directly connected with income in column 5	
(1)							-			
(2)										
(3)										
(4)										
Nonexempt Controlled Organia	zations									
7 Taxable Income	8 Net unrelated incor (see instruction		9 Total o	of specified payn made	nents	10 Part of column the controllingross	nn 9 that ng organ i income	is included ization's		fuctions directly connected income in column 10
(1)										
(2)										
(3)										
(4)										
						Add colun Enter here and line 8, c		1, Part I,)	Enter he	d columns 6 and 11 ere and on page 1, Part I, ine 8, column (B)
Totals								0.		0.
Schedule G - Investme		Section 50	1(c)(7), (9), or (⁻	17) Org	ganization				
(see instr	ription of income			2 Amount of	income	3 Deductio directly conne (attach sched	cted	4. Set-a		5. Total deductions and set-asides (col 3 plus col 4)
(1)						(attach sched	uie,			(cor 3 plus cor 4)
(1)					_	**			<u> </u>	-
(3)										
(4)										
Totals			>	Enter here and o	umn (A)					Enter here and on page 1, Part I, line 9, column (B)
Schedule I - Exploited I	-	rincome, C	otner	ı nan Adv	ertisin	ig income				
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expense directly conne with product of unrelate business inco	cted on d	4 Net incom from unrelated business (co minus column gain, compute through	trade or lumn 2 3) If a cols 5	5. Gross inco from activity to is not unrelate business inco	hat ed	6 Expe attributa colum	ble to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)			İ							
(2)										
(3)										
(4)	Enter here and on page 1, Part I, line 10, col (A)	Enter here and page 1, Part line 10, col (ti,		1 34 1 34 1 34		**************************************		Alaga de la	Enter here and on page 1, Part II, line 26
Totals	0.		o.	2 3 4 - 115	1	***	1. (1, ·	The Administration	<i>y</i> ,	0.
Schedule J - Advertisir		instructions)		* 14.1 * 18		. e.g 8.385.m ^{2.7} .d		., .,		<u>. </u>
Part I Income From F			Cons	olidated	Basis					
1. Name of periodical	2 Gross advertising income	3. Di advertisir		4 Adverti or (loss) (co col 3) If a ga cols 5 th	ol 2 minus iin, comput	5 Circulat e income		6 Reade costs		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)				والمراجع المراجع المرا	Barrati V					NAME OF THE
(2)				de servi	And the	4) 45				
(3)					4. 1. 1	*				
(4)				202	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	÷				对于一种的
Totals (carry to Part II, line (5))	>	0.	0	•						0.
										Form 990-T (2018)

	(
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)	

Columns 2 through 7	Ulla	ilile-by-lile 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	Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)							
(2)							
(3)							
(4)							
Totals from Part I	•	0.	0.	of the state of the state of the	经验,我的现在分	No. of the last of	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.	4. 10. 15. 6. 3		, होंद्र (अंद्रीकृत है को बीर्ल इ.स.च्या १ सम्बद्ध	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)

Footnotes	Statement 1
Net Operating Loss Adjustment Repeal of 512(a)(7)	
06/30/18 Loss Sustained with 512(a)(7) 512(a)(7) Parking Fringe Retroactively Repealed	4,970. 19,795.
06/30/18 Loss Sustained without 512(a)(7)	24,765.

Form 990-T Other Deductions	Statement 2
Description	Amount
Other Special Event Expenses	202,191.
Total to Form 990-T, Page 1, line 28	202,191.

Form 990-T	Net	Operating Loss D	eduction	Statement 3
Tax Year	Loss Sustained	Loss Previously Applied	Loss Remaining	Available This Year
06/30/01	61,483.	61,483.	0.	0.
06/30/02	60,298.	60,298.	0.	0.
06/30/03	11,979.	11,979.	0.	0.
06/30/04	75,567.	75,567.	0.	0.
06/30/05	172,400.	172,400.	0.	0.
06/30/06	3,296.	3,296.	0.	0.
06/30/11	81,034.	64,694.	16,340.	16,340.
06/30/12	82,231.	0.	82,231.	82,231.
06/30/13	0.	0.	0.	0.
06/30/15	10,149.	0.	10,149.	10,149.
06/30/16	77,634.	0.	77,634.	77,634.
06/30/17	10,361.	0.	10,361.	10,361.
06/30/18	24,765.	0.	24,765.	24,765.
NOL Carryov	er Available This	Year	221,480.	221,480.

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

For calendar year 2018 or other tax year beginning JUL 1, 2018 and ending JUN 30, 2019

OMB No 1545-0687

Entity

2018

Department of the Treasury Internal Revenue Service (99)

Name of the organization

► 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

Employer identification number

Playhouse Square Foundation 23-7304942 Unrelated business activity code (see instructions) > 531310 ▶ Property Management Services Describe the unrelated trade or business **Unrelated Trade or Business Income** (C) Net (A) Income (B) Expenses Part I 808,987. Gross receipts or sales 808,987 b Less returns and allowances Balance > 1c 2 2 Cost of goods sold (Schedule A, line 7) 808,987. 808,987. Gross profit Subtract line 2 from line 1c 3 4a 4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b c Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach 5 5 statement) 6 Rent income (Schedule C) 6 Unrelated debt-financed income (Schedule E) 7 7 Interest, annuities, royalties, and rents from a controlled 8 organization (Schedule F) 8 Investment income of a section 501(c)(7), (9), or (17) 9 organization (Schedule G) 10 10 Exploited exempt activity income (Schedule I) Advertising income (Schedule J) 11 11 Other income (See instructions, attach schedule) 12 12 808,987. 808,987. Total. Combine lines 3 through 12 13 Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, Part II deductions must be directly connected with the unrelated business income) Compensation of officers, directors, and trustees (Schedule K) 14 14 15 15 Salaries and wages 16 Repairs and maintenance 16 17 17 Bad debts 18 18 Interest (attach schedule) (see instructions) Taxes and licenses 19 19 20 20 Charitable contributions (See instructions for limitation rules) Depreciation (attach Form 4562) 21

LHA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income Subtract line 31 from line 30

Contributions to deferred compensation plans

Excess exempt expenses (Schedule I)

Excess readership costs (Schedule J)

Total deductions. Add lines 14 through 28

Other deductions (attach schedule)

Employee benefit programs

Less depreciation claimed on Schedule A and elsewhere on return

Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see

Schedule M (Form 990-T) 2018

895,983.

895,983.

-86,996.

-86,996.

22b

23

24

25

26

27

28

29

30

31

See Statement 4

22

23

24

25

26

27

28

29

30

31

Depletion

1 Form 990-T (2018) Page 3 Playhouse Square Foundation 23-7304942 Schedule A - Cost of Goods Sold. Enter method of inventory valuation N/A inventory at beginning of year 6 6 Inventory at end of year 2 Purchases 7 Cost of goods sold Subtract line 6 3 Cost of labor 3 from line 5. Enter here and in Part I, 7 4 a Additional section 263A costs Yes No (attach schedule) 8 Do the rules of section 263A (with respect to 4a **b** Other costs (attach schedule) property produced or acquired for resale) apply to 4b X Total Add lines 1 through 4b 5 the organization? Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions) 1 Description of property (1) (2)(3) (4) Rent received or accrued 3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule) (a) From personal property (if the percentage of (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if rent for personal property is more 10% but not more than 50%) the rent is based on profit or income) (1) (2) (3)(4) 0. Total 0. Total (b) Total deductions (c) Total income Add totals of columns 2(a) and 2(b). Enter Enter here and on page 1, Part I, line 6, column (8) here and on page 1, Part I, line 6, column (A) 0. Schedule E - Unrelated Debt-Financed Income (see instructions) 3 Deductions directly connected with or allocable to debt-financed property or allocable to debt-(a) Straight line depreciation (b) Other deductions (attach schedule) 1 Description of debt-financed property financed property (attach schedule) (1) (2) (3) (4) 4 Amount of average acquisition debt on or allocable to debt-financed 5 Average adjusted basis of or allocable to 7 Gross income reportable (column Column 4 divided 8 Allocable deductions (column 6 x total of columns by column 5 property (attach schedule) debt-financed property 2 x column 6) 3(a) and 3(b)) (attach schedule) (1) % (2) % (3)%

%

Enter here and on page 1,

Part I, line 7, column (A)

0.

Form 990-T (2018)

0.

0.

Enter here and on page 1,

Part I, line 7, column (B)

(4)

Totals

Total dividends-received deductions included in column 8

Form 990-T (M)	Other Deductions	Statement 4
Description		Amount
PSF Management Expenses		895,983.
Total to Schedule M, Part II, 1	ine 28	895,983.

Depreciation and Amortization (Including Information on Listed Property)

990-T

► Attach to your tax return.

OMB No 1545-0172

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► Go to www.irs.gov/Form4562 for instructions and the latest information.

Business or activity to which this form relates

Identifying number

Play	yhouse Square Found	ation		For	m 990-	r Page 1		23-7304942
Part		y Under Section 17	79 Note: If yo				V before y	ou complete Part I
1 Ma	aximum amount (see instructions)						1_	1,000,000.
	tal cost of section 179 property place	d in service (see	instructions)				2	
	reshold cost of section 179 property						3	2,500,000.
_	duction in limitation. Subtract line 3 f			er ⋅0⋅			4	
•	lar limitation for tax year. Subtract line 4 from line		•		nstructions		5	
6	(a) Dascription of pro			(b) Cost (busin		(c) Elected	cost	
								· "
								, ,
]
				-				
7 Lis	sted property Enter the amount from	line 29			7			
	tal elected cost of section 179 proper		ın column (c), lines 6 and	7		8	
9 Te	ntative deduction Enter the smaller	of line 5 or line 8					9	
10 Ca	rryover of disallowed deduction from	line 13 of your 20	017 Form 45	62			10	
	isiness income limitation. Enter the sn				o) or line 5		11	
	ction 179 expense deduction Add lin						12	
	urryover of disallowed deduction to 20				▶ 13			
	Don't use Part II or Part III below for I							
Part	II Special Depreciation Allowar	nce and Other De	epreciation	(Don't includ	e listed prope	erty)		
14 Sp	ecial depreciation allowance for quali	fied property (oth	er than listed	d property) pla	aced in servic	e during		
	e tax year						14	
15 Pro	operty subject to section 168(f)(1) elec	ction					15	
16 Ot	her depreciation (including ACRS)						16	
Part	III. MACRS Depreciation (Don't	include listed pro	perty See in	structions)				
			Se	ection A				
17 M	ACRS deductions for assets placed in	service in tax ye			<u> </u>		17	
	ou are electing to group any assets placed in service	e during the tax year in	ars beginning	g before 2018 eneral asset accou	ints, check here	> [, '
		e during the tax year in Placed in Servic	ars beginning to one or more g e During 20	g before 2018 eneral asset accounts 18 Tax Year U	ints, check here	▶neral Deprecia		m
	ou are electing to group any assets placed in service	e during the tax year in	ars beginning to one or more gee During 20 (c) Basis for (business/iii	g before 2018 eneral asset accou	ints, check here			em (g) Depreciation deduction
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Playhouse Square Foundation

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