29

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31

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34

723701 01-22-18 LHA For Paperwork Reduction Act Notice, see instructions.

Net operating loss deduction (limited to the amount on line 30)

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

Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or

Unrelated business taxable income before specific deduction. Subtract line 31 from line 30

Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)

Form 990-T (2017)

15,534.

1,000.

29

30

31

32

33

Total deductions. Add lines 14 through 28

SEE STATEMENT 3

Form 990-	(2017) JEWISH FEDERATION	OF GREATER PITTSBU	RGH	25-10	17602	P	Page 2
Part I	II Tax Computation						
35	Organizations Taxable as Corporations. See Instr	uctions for tax computation.			7		
,	Controlled group members (sections 1561 and 15	63) check here 🕨 🔲 See instruction	s and:				
a	Enter your share of the \$50,000, \$25,000, and \$9,	925,000 taxable income brackets (in that o	order):				
	(1) \$ (2) \$	(3) \$					
b	Enter organization's share of: (1) Additional 5% ta	x (not more than \$11,750) \$	_	Ī			
	(2) Additional 3% tax (not more than \$100,000)	\$]	1 1		
C	Income tax on the amount on line 34	·		_ ▶	35c		0.
36	Trusts Taxable at Trust Rates. See instructions fo	r tax computation. Income tax on the amo	unt on line 34 t	from:			
	Tax rate schedule or Schedule D (Fo	rm 1041)		•	36		
37	Proxy tax. See instructions			•	37		
38	Alternative minimum tax				38		
39	Tax on Non-Compliant Facility Income. See instru	uctions			39		
40	Total. Add lines 37, 38 and 39 to line 35c or 36, w	nichever applies			40		0.
Part I	V Tax and Payments						
41a	Foreign tax credit (corporations attach Form 1118;	trusts attach Form 1116)	41a				
b	Other credits (see instructions)		41b				
C	General business credit. Attach Form 3800		41c				
đ	Credit for prior year minimum tax (attach Form 880)1 or 8827)	41d		<u> </u>		
е	Total credits. Add lines 41a through 41d		<u> </u>		41e		
42	Subtract line 41e from line 40				42		0.
43	Other taxes. Check if from: Form 4255	Form 8611 Form 8697 Form	1 8866 🔲 C	Other (attach schedule)	43		
44	Total tax. Add lines 42 and 43		•		44		0.
45 a	Payments: A 2016 overpayment credited to 2017		45a				
b	2017 estimated tax payments		45b		ם' ו		
С	Tax deposited with Form 8868		45c]'		
d	Foreign organizations; Tax paid or withheld at sour	ce (see instructions)	45d], ∣		
е	Backup withholding (see instructions)		45e]		
f	Credit for small employer health insurance premiui	ns (Attach Form 8941)	45f				
9	Other credits and payments:	orm 2439					
	Form 4136 0	ther Total	► 45g		<u> </u>		
46	Total payments. Add lines 45a through 45g				46		
47	Estimated tax penalty (see instructions). Check if F	orm 2220 is attached 🕨 🔙			47	-	
48	Tax due. If line 46 is less than the total of lines 44	and 47, enter amount owed		•	48		0.
49	Overpayment. If line 46 is larger than the total of li	nes 44 and 47, enter amount overpaid		>	49		0.
50	Enter the amount of line 49 you want: Credited to			Refunded 🕨	50		
Part \	Statements Regarding Certain	Activities and Other Inform	ation (see ir	nstructions)			
51	At any time during the 2017 calendar year, did the	organization have an interest in or a signat	ture or other at	uthority		Yes	No
	over a financial account (bank, securities, or other)	in a foreign country? If YES, the organiza	tion may have	to file			
	FinCEN Form 114, Report of Foreign Bank and Fina	incial Accounts. If YES, enter the name of	the foreign cou	ıntry		<u></u> ;	
	here ► CAYMAN ISLANDS					<u>X</u>	
52	During the tax year, did the organization receive a	distribution from, or was it the grantor of, o	or transferor to	, a foreign trust?			X
	If YES, see instructions for other forms the organiz	ation may have to file.				[].	.]
53	Enter the amount of tax-exempt interest received o	r accrued during the tax year ➤ \$				<u> </u>	
0	Under penalties of perjury, I declare that I have examine correct and complete. Declaration of preparer (other that	d this return, including accompanying schedules an taxpayer) is based on all information of which by	and statements, a reparer has anv k	and to the best of my kn nowledge	lowledge and be	elief, it is true,	
Sign		11.1.0		, ,	May the IRS dis	cuss this return w	uth ~
Here	Jan m	<u> </u>	DENT-AL	ND-CEO	the preparer sho	own below (see	
	Signature of officer —	Date Title			instructions)?	X Yes	No
	Print/Type preparer's name	Preparer's signature	Date	Check	ıf PTIN		
Paid				self- employed			
Prepa	rer SUSAN M. KIRSCH	SUSAN M. KIRSCH			 _	341397	
Use C	Inly Firm's name SCHNEIDER DC	WNS & CO., INC.		Firm's EIN	25 -	1408703	3
	ONE PPG PI	ACE SUITE 1700					_
	Firm's address > PITTSBURGH	I, PA 15222		Phone no.		61-3644	
					Fo	orm 990-T (2	2017)

Schedule A - Cost of Good	s Sold. Enter	method of inver	itory valuation 🕨 N/A	7		
1 Inventory at beginning of year	1		6 Inventory at end of ye	ar		6
2 Purchases	. 2		7 Cost of goods sold. S	ubtract l	ine 6	
3 Cost of labor	3	-	from line 5. Enter here	and in l	Part I,	
4a Additional section 263A costs			line 2			7
(attach schedule)	4a		8 Do the rules of section	Yes No		
 Other costs (attach schedule) 	4b	_	property produced or	acquired	for resale) apply to	
5 Total. Add lines 1 through 4b	5		the organization?		<u> </u>	
Schedule C - Rent Income (see instructions)	(From Real	Property an	d Personal Property	Leas	ed With Real Prop	perty)
Description of property						
(1)		···				***
(2)						
(3)						
(4)					<u></u>	
() 5	 -	ed or accrued			3(a) Deductions directly of	connected with the income in
(a) From personal property (if the per rent for personal property is mor 10% but not more than 50%	e than	` of rent for ;	and personal property (if the percent personal property exceeds 50% or it it is based on profit or income)	lage f	cotumns 2(a) and	2(b) (attach schedule)
(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		ter >		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	0.
Schedule E - Unrelated Del	ot-Financed	l Income (see	instructions)			
			2. Gross income from		3. Deductions directly conne to debt-finance	
1. Description of debt-fi	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				-		
(2)				-		
(2)					-	
(3)						
	of or a debt-fina	adjusted basis allocable to need property a schedule)	6. Calumn 4 divided by calumn 5		7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(3) (4) 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	allocable to inced property			reportable (column	(column 6 x total of columns
(3) (4) 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	allocable to inced property	by column 5		reportable (column	(column 6 x total of columns
(3) (4) 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2)	of or a debt-fina	allocable to inced property	by column 5		reportable (column	(column 6 x total of columns
(3) (4) 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	allocable to inced property	by column 5		reportable (column	(column 6 x total of columns
(3) (4) 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2) (3)	of or a debt-fina	allocable to inced property	by column 5 % %	ı	reportable (column	(column 6 x total of columns
(3) (4) 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2) (3)	of or a debt-fina	allocable to inced property	by column 5 % %	ı	reportable (column 2 x column 6)	(column 6 x total of columns 3(a) and 3(b)) Enter here and on page 1,
(3) (4) 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) (1) (2) (3) (4)	of or debt-fina (attac	allocable to nnced property n schedule)	by column 5 % %	ı	reportable (column 2 x column 6) inter here and on page 1, Part I, line 7, column (A)	(column 6 x total of columns 3(a) and 3(b)) Enter here and on page 1,

Schedule F - Interest,	, Annuities, Roya	alties, a		S From Controlled O			zatio	ns (see ins	truction	s)
1. Name of controlled organiz	ident	mployer rication mber	3. Net unr	related income instructions)	4. Tota	al of specified nents made	includ	t of column 4 and in the contraction's gross in	rolling	6. Deductions directly connected with income in column 5
(1)			+							
(2)		_								
(3)		_								
(4)										
Nonexempt Controlled Orga	nizations							1		
7. Taxable Income	8. Net unrelated inco (see instruction		9. Total	of specified payi made	ments	10. Part of colu in the controll gross	mn 9 tha ing orgai s income	nization's		ductions directly connected income in column 10
(1)					1	•				
(2)					Ì					
(3)					İ			-		
(4)										
			-			Add colur Enter here and line 8, d		1, Part I,	Enter h	ld columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
Totals	<u></u>							0.		0
Schedule G - Investm		Section	n 501(c)(7), (9), or	(17) Or	ganizatior	1			
(see ins	structions)									1 -
1. De	scription of income			2. Amount of	income	 Deduction directly connected (attach sched 	ected	4. Set-a (attach s		5. Total deductions and set-asides (col 3 plus col 4)
(1)										
(2)										
(3)										
(4)				. ,						
				Enter here and Part I, line 9, co			-	_	-	Enter here and on page Part I, line 9, column (B)
				, 3, 00	()					
Totals			<u> </u>	<u> </u>	0.			~ «		. 0
Schedule I - Exploited	d Exempt Activit	ty Incom	ne, Othe	r Than Ad	lvertisi	ng Income	е			
1. Description of exploited activity	2. Gross unrelated business income from trade or business	directly with pr of un	openses connected roduction irelated ss income	4. Net incomfrom unrelated business (cominus colum gain, computithrough	trade or dumn 2 n 3) If a e cols 5	5. Gross inco from activity is not unrela business inco	that ted	6. Exp attributa colun	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)	1									
(2)	1	1		1						
(3)		1								
(4)	1	1								
·	Enter here and on page 1, Part I, line 10, col (A)	page	ere and on 1, Part I, I, col (B)	, 			- -			Enter here and on page 1, Part II, line 26
Totals	<u> 0</u> ,	.	0.	<u> </u>		<u> </u>				0
Schedule J - Advertis Part I' Income From	sing Income (see a Periodicals Re			solidated	Basis					
1. Name of periodical	2. Gross advertising income	adv	3. Direct vertising costs	or (loss) (no	un, comput	5. Cricula e income		6. Reade cost:		7 Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						1				
(2)						•				_
(3)				<u> </u>	U					-
(4)				<u></u>	<u> </u>					
Totals (carry to Part II, line (5))	>	0.	0							0
	·									Form 990-T (201

Form 990-T (2017) JEWISH FEDERATION OF GREATER PITTSBURGH 25-10176 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)	<u></u>	0.	0.			<u> </u>	0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

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

Form 990-T (2017)

Internal Revenue Service

Alternative Minimum Tax - Corporations

Attach to the corporation's tax return.

► Go to www.irs.gov/Form4626 for instructions and the latest information.

OMB No 1545-0123

	JEWI	SH FEDERATION OF GREATER PITTSBURGH					25-1017602
	Note: Sea	e the instructions to find out if the corporation is a small corporation exempt					-
	from the	alternative minimum tax (AMT) under section 55(e).					
_	Tauakla	and an illustration and an archaellers deduction					14 524
1		ncome or (loss) before net operating loss deduction				1	14,534.
2		ents and preferences:					
		tion of post-1986 property				2a	
		tion of certified pollution control facilities				2b_	
		tion of mining exploration and development costs				2c	
		tion of circulation expenditures (personal holding companies only)				2d	
		gain or loss				2e	
	•	m contracts				21	
	_	t marine capital construction funds				2g	
		(33(b) deduction (Blue Cross, Blue Shield, and similar type organizations only) er farm activities (personal service corporations only)				2h 2i	
		ictivities (closely held corporations and personal service corporations only)				2j	
	k Loss limi					2) 2k	
	Depletion					21	
	•	npt interest income from specified private activity bonds				2m	
		e drilling costs				2n	
	=	ustments and preferences				20	
3	•	stment alternative minimum taxable income (AMTI). Combine lines 1 through 20				3	14,534.
4	-	current earnings (ACE) adjustment:				Ť	
	•	line 10 of the ACE worksheet in the instructions	4a	14	,534.		
	b Subtract	line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a			•		
		amount. See instructions	4b		0.		
	c Multiply I	ine 4b by 75% (0.75). Enter the result as a positive amount	4c				
	d Enter the	excess, if any, of the corporation's total increases in AMTI from prior					
	year ACE	adjustments over its total reductions in AMTI from prior year ACE					
	adjustme	nts. See instructions. Note: You must enter an amount on line 4d					
	(even if li	ne 4b is positive)	4d	<u> </u>			
	e ACE adju						
		4b is zero or more, enter the amount from line 4c)				
_		4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount	}			4e	0.
5		lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT		3 55 55 55 55		5	14,534.
6		re tax net operating loss deduction. See instructions		ATEMENT	4	6	13,081.
7		ve minimum taxable income. Subtract line 6 from line 5. If the corporation held a	i resiau	aı		١ ـ ا	1 452
8		n a REMIC, see instructions on phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on	lina On\			7	1,453.
		\$150,000 from line 7. If completing this line for a member of a controlled	ille ocj	•			
		re instructions. If zero or less, enter -0-	8a	ŀ	0.		
	•	ine 8a by 25% (0.25)	8b		0.	i l	
		in. Subtract line 8b from \$40,000. If completing this line for a member of a contro		<u> </u>		1	
	•	re instructions. If zero or less, enter -0-				8c ⁻	40,000
9		line 8c from line 7. If zero or less, enter -0-				9	0.
10		ine 9 by 20% (0.20)				10	0.
11		e minimum tax foreign tax credit (AMTFTC). See instructions				11	
12		minimum tax. Subtract line 11 from line 10				12	0.
13	Regular ta	ax liability before applying all credits except the foreign tax credit				13	
14	Alternativ	ve minimum tax. Subtract line 13 from line 12. If zero or less, enter -0 Enter her	e and o	n			-
	Form 112	20, Schedule J, line 3, or the appropriate line of the corporation's income tax retur	n			14	0.
WA	For Pape	rwork Reduction Act Notice, see separate instructions.					Form 4626 (2017)

Adjusted Current Earnings (ACE) Worksheet ► See ACE Worksheet Instructions. 14,534. 1 Pre-adjustment AMTI. Enter the amount from line 3 of Form 4626 2 ACE depreciation adjustment; a AMT depreciation **b** ACE depreciation: (1) Post-1993 property 2b(1) (2) Post-1989, pre-1994 property 2b(2) (3) Pre-1990 MACRS property 2b(3) (4) Pre-1990 original ACRS property 2b(4) (5) Property described in sections 2b(5) 168(f)(1) through (4) (6) Other property 2b(6) (7) Total ACE depreciation. Add lines 2b(1) through 2b(6) 2b(7 c ACE depreciation adjustment. Subtract line 2b(7) from line 2a 2c 3 Inclusion in ACE of items included in earnings and profits (E&P). a Tax-exempt interest income За **b** Death benefits from life insurance contracts 3b c All other distributions from life insurance contracts (including surrenders) 3d d Inside buildup of undistributed income in life insurance contracts ų e Other items (see Regulations sections 1.56(g)-1(c)(6)(iii) through (ix) for a partial list) 3e f Total increase to ACE from inclusion in ACE of items included in E&P. Add lines 3a through 3e 3f Disallowance of items not deductible from E&P: a Certain dividends received b Dividends paid on certain preferred stock of public utilities that are deductible under section 247 (as 4b affected by P L 113-295, Div A, section 221(a)(41)(A), Dec 19, 2014, 128 Stat 4043) c Dividends paid to an ESOP that are deductible under section 404(k) 4c d Nonpatronage dividends that are paid and deductible under section 4d e Other items (see Regulations sections 1.56(g)-1(d)(3)(i) and (ii) for a partial list) f Total increase to ACE because of disallowance of items not deductible from E&P. Add lines 4a through 4e 4f 5 Other adjustments based on rules for figuring E&P: a Intangible drilling costs **b** Circulation expenditures 5b c Organizational expenditures 5c d LIFO inventory adjustments 5d e Installment sales 5e f Total other E&P adjustments. Combine lines 5a through 5e Disallowance of loss on exchange of debt pools 6 Acquisition expenses of life insurance companies for qualified foreign contracts 7 Depletion 8 Basis adjustments in determining gain or loss from sale or exchange of pre-1994 property 9 Adjusted current earnings. Combine lines 1, 2c, 3f, 4f, and 5f through 9. Enter the result here and on line 4a of 14,534. Form 4626

FORM 990-T	FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS							
DESCRIPTIO	N			AMOUNT				
	ARTNERS, LP (LYNN)			-143				
	ARTNERS, LP (BERNS' NSFER PARTNERS, LP	TEIN)		145 -1,968				
ENERGI IRA	-1,900							
TOTAL TO F	-1,966							
FORM 990-T		OTHER INCOME		STATEMENT				
FORM 990-1		OTHER INCOME		SIAIEMENI .				
DESCRIPTIO	N		•	AMOUNT				
EXPENSES A FOR EMPLOY	SSOCIATED WITH QUADEES	LIFIED TRANSPORTA	TION BENEFITS	17,500				
FOR EMPLOY	· ·		TION BENEFITS	17,500				
FOR EMPLOY	EES ORM 990-T, PAGE 1,			-				
FOR EMPLOY	EES ORM 990-T, PAGE 1,	LINE 12		17,500				
FORM 990-T TAX YEAR	DOSS SUSTAINED	LINE 12 OPERATING LOSS D LOSS PREVIOUSLY APPLIED	EDUCTION LOSS REMAINING	STATEMENT AVAILABLE THIS YEAR				
FORM 990-T	EES ORM 990-T, PAGE 1, NET	LINE 12 OPERATING LOSS D LOSS PREVIOUSLY	EDUCTION LOSS	17,500 STATEMENT AVAILABLE				
FOR EMPLOY TOTAL TO F FORM 990-T TAX YEAR 06/30/09 06/30/10 06/30/11	EES ORM 990-T, PAGE 1, NET LOSS SUSTAINED 83,485. 60,684. 3,848.	DPERATING LOSS D LOSS PREVIOUSLY APPLIED 0.	LOSS REMAINING 83,485. 60,684. 3,848.	TATEMENT AVAILABLE THIS YEAR 83,485. 60,684. 3,848.				
FOR EMPLOY TOTAL TO F FORM 990-T TAX YEAR 06/30/09 06/30/10 06/30/11 06/30/12	EES ORM 990-T, PAGE 1, NET LOSS SUSTAINED 83,485. 60,684. 3,848. 2,427.	DPERATING LOSS D LOSS PREVIOUSLY APPLIED 0. 0. 0. 0. 0.	EDUCTION LOSS REMAINING 83,485. 60,684. 3,848. 2,427.	17,500 STATEMENT AVAILABLE THIS YEAR 83,485. 60,684. 3,848. 2,427.				
FOR EMPLOY TOTAL TO F FORM 990-T TAX YEAR 06/30/10 06/30/11 06/30/12 06/30/13	EES ORM 990-T, PAGE 1, NET LOSS SUSTAINED 83,485. 60,684. 3,848. 2,427. 1,368.	DPERATING LOSS D LOSS PREVIOUSLY APPLIED 0. 0. 0. 0. 0.	EDUCTION LOSS REMAINING 83,485. 60,684. 3,848. 2,427. 1,368.	17,500 STATEMENT AVAILABLE THIS YEAR 83,485. 60,684. 3,848. 2,427. 1,368.				
TOTAL TO FORM 990-T TAX YEAR 06/30/10 06/30/11 06/30/12 06/30/13 06/30/14	EES ORM 990-T, PAGE 1, NET LOSS SUSTAINED 83,485. 60,684. 3,848. 2,427. 1,368. 2,492.	DPERATING LOSS D LOSS PREVIOUSLY APPLIED 0. 0. 0. 0. 0. 0. 0.	EDUCTION LOSS REMAINING 83,485. 60,684. 3,848. 2,427. 1,368. 2,492.	17,500 STATEMENT AVAILABLE THIS YEAR 83,485. 60,684. 3,848. 2,427. 1,368. 2,492.				
TOTAL TO FORM 990-T TAX YEAR 06/30/10 06/30/11 06/30/12 06/30/13 06/30/14 06/30/15	EES ORM 990-T, PAGE 1, NET LOSS SUSTAINED 83,485. 60,684. 3,848. 2,427. 1,368. 2,492. 2,805.	LINE 12 OPERATING LOSS D LOSS PREVIOUSLY APPLIED O.	EDUCTION LOSS REMAINING 83,485. 60,684. 3,848. 2,427. 1,368. 2,492. 2,805.	17,500 STATEMENT AVAILABLE THIS YEAR 83,485. 60,684. 3,848. 2,427. 1,368. 2,492. 2,805.				
TOTAL TO FORM 990-T TAX YEAR 06/30/09 06/30/10 06/30/11 06/30/12 06/30/13 06/30/14 06/30/15 06/30/16	EES ORM 990-T, PAGE 1, NET LOSS SUSTAINED 83,485. 60,684. 3,848. 2,427. 1,368. 2,492. 2,805. 6,066.	LINE 12 OPERATING LOSS D LOSS PREVIOUSLY APPLIED O.	EDUCTION LOSS REMAINING 83,485. 60,684. 3,848. 2,427. 1,368. 2,492. 2,805. 6,066.	17,500 STATEMENT AVAILABLE THIS YEAR 83,485. 60,684. 3,848. 2,427. 1,368. 2,492. 2,805. 6,066.				
TOTAL TO FORM 990-T TAX YEAR 06/30/10 06/30/11 06/30/12 06/30/13 06/30/14 06/30/15	EES ORM 990-T, PAGE 1, NET LOSS SUSTAINED 83,485. 60,684. 3,848. 2,427. 1,368. 2,492. 2,805.	LINE 12 OPERATING LOSS D LOSS PREVIOUSLY APPLIED O.	EDUCTION LOSS REMAINING 83,485. 60,684. 3,848. 2,427. 1,368. 2,492. 2,805.	17,500 STATEMENT AVAILABLE THIS YEAR 83,485. 60,684. 3,848. 2,427. 1,368. 2,492. 2,805.				

FORM 4626	ALTERNAT	VE MINIMUM TAX NO	OL DEDUCTION	STATEMENT	4
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING		
06/30/13	1,368.	0.	1,368.		
06/30/14	2,492.	0.	2,492.		
06/30/15	2,805.	0.	2,805.		
06/30/16	6,066.	0.	6,066.		
06/30/17	5,726.	0.	5,726.		
AMT NOL CA	RRYOVER AVAILABLE	THIS YEAR	18,457.		