2939332718320 EXTENDED TO NOVEMBER 15, 2019 Form 990-T **Exempt Organization Business Income Tax Return** (and proxy tax under section 6033(e)) For calendar year 2018 or other tax year beginning ► Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3) DEmployer identification number Name of organization ( Check box if name changed and see instructions.) Check box if (Employees' trust, see address changed B Exempt under section WARREN CHARITABLE FOUNDATION 30-0490635 Print E Unrelated business activity code (See instructions ) X 501(c) 3 Number, street, and room or suite no. If a P.O box, see instructions. Type 408(e) 808 W. WALL STREET 220(e) 408A City or town, state or province, country, and ZIP or foreign postal code 530(a) 531390 MIDLAND, TX 79701 529(a) C Book value of all assets at end of year 57,766,133. F Group exemption number (See instructions.) G Check organization type ► X 501(c) corporation 501(c) trust Other trust 401(a) trust H Enter the number of the organization's unrelated trades or businesses. Describe the only (or first) unrelated trade or business here **SEE STATEMENT 14** If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V. X No During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes If "Yes," enter the name and identifying number of the parent corporation. The books are in care of ► KEVIN PETTY Telephone number  $\blacktriangleright$  432-685-3666 Part I Unrelated Trade or Business Income (A) Income (C) Net (B) Expenses 1a Gross receipts or sales b Less returns and allowances c Balance 10 2 Cost of goods sold (Schedule A, line 7) 2 3 Gross profit. Subtract line 2 from line 1c 4a Capital gain net income (attach Schedule D) 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b Capital loss deduction for trusts 4c 1,351,004 351,004 Income (loss) from a partnership or an S corporation (attach statement) 5 Rent income (Schedule C) 6 Unrelated debt-financed income (Schedule E) 7 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 Q Exploited exempt activity income (Schedule I) 10 10 Advertising income (Schedule J) 11 11 Other income (See instructions; attach schedule) 12 12 1,351,004. 351,004. Total. Combine lines 3 through 12 13 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K) 14 RECEIVED Salaries and wages 15 西产呼得 Repairs and maintenance 16 S-OSC Bad debts 17 NOV 2 5 2019 Interest (attach schedule) (see instructions) 18 Taxes and licenses 19 翻 OGDEN. UT Charitable contributions (See instructions for limitation rules) 20 Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on return 22b 23 Depletion Contributions to deferred compensation plans 24 25 Employee benefit programs Excess exempt expenses (Schedule I) 26 Excess readership costs (Schedule J) 27

28 28 Other deductions (attach schedule) 0. 29 Total deductions. Add lines 14 through 28 29 1,351,004. 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) 31 Unrelated business taxable income, Subtract line 31 from line 30 1,351,004. 823701 01-09-19 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-T		<u>0-0490</u>	<u>635</u>	Page 2
Part I	Total Unrelated Business Taxable Income			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		33	1,351,004.
34	Amounts paid for disallowed fringes		34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	' 16 T	35	1,351,004.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of			<del></del>
30	lines 33 and 34		36	
				1,000.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	-	37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,			^
	enter the smaller of zero or line 36		38	0.
Part I	<u> </u>	<del></del>	—	
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 Instructions		43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies		44	0.
Part \				
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)  45a		Т	
_	Other credits (see instructions)  45b			
b	General business credit. Attach Form 3800 45c			
C				
đ			- I	
е	Total credits. Add lines 45a through 45d		45e	0.
46	Subtract line 45e from line 44		46	<u> </u>
47	Other taxes. Check If from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach	_	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 965-B, Part II, column (k), line 2	L	49	0.
50 a	Payments: A 2017 overpayment credited to 2018		1	
b	2018 estimated tax payments 50b			
c	Tax deposited with Form 8868 50c 137	,252.		
d	Foreign organizations Tax paid or withheld at source (see instructions) 50d		ł	
e	Backup withholding (see instructions) 50e		- 1	
	Credit for small employer health insurance premiums (attach Form 8941)  50f		1	
a	5 - 0.00		1	
9		,748.		
£4	Total payments. Add lines 50a through 50g SEE STATEMENT 15	-	51	140,000.
51 50	Estimated tax penalty (see instructions). Check if Form 2220 is attached		52	110,0001
52	·		53	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed		1	140,000.
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	_	54	140,000.
55 Dort \	Enter the amount of line 54 you want: Credited to 2019 estimated tax		55	140,000.
Part \		5)		T., T.,
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			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country			
	here			X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign	trust?		X
	If "Yes," see instructions for other forms the organization may have to file.			
58	Enter the amount of tax-exempt interest received or accrued during the tax year >\$			
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of	f my knowledge	and b	elief, it is true,
Sign	correct, and complete Daclaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	·	the ID1	discuss this return with
Here	11-13-19 PRESIDENT TREASUR			s discuss this return with r shown below (see
	Signature of officer Date Title		uctions	
	Print/Type preparer's name Preparer's signature Date Chec	k ıf	PTI	
		employed	' '''	•
Paid	1//// 11/12/19	cinpioyeu	D	01579061
Prepa	WEAVED AND MIDWELL LID	o'o EIN -		5-0786316
Use C	/      V	n's EIN ►		3-01003I0
	400 W. ILLINOIS AVE			CO2 F22C
		ne no. 43	<u> </u>	583-5226
823711 01	-09-19			Form <b>990-T</b> (2018)

Schedule A - Cost of Goods	Sold F			3T / 3					
	Solu. Enter	method of inven	,	N/A				T	
1 "Inventory at beginning of year	1		6 Inventory at end of year			no 6	6	<del> </del>	
2 Purchases 3 Cost of labor	3		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I,						
4a Additional section 263A costs		*	line 2	tei licie a	ina mir	art i,	7	•	
(attach schedule)	40		8 Do the rules of	caction 2	363V (#	with received to		Yes	No
b Other cost's (attach schedule)	4a		1 .		•	for resale) apply to		1.00	<del>                                     </del>
	4b		the organization		,quii eu	ioi resale) apply to			
5 Total. Add lines 1 through 4b Schedule C - Rent Income ( (see instructions)		Property and			eased	d With Real Prop	erty	)	
1 Description of property	,								
(1)	•	-		-					
(2)									
(3)									
(4)									
	2 Rent receiv	ed or accrued							
(a) From personal property (if the perconent for personal property is more 10% but not more than 50%)	centage of than	` of rent for p	nd personal property (if the tersonal property exceeds 5 it is based on profit or incom	10% or if	θ	<b>3(a)</b> Deductions directly columns 2(a) a	conne nd 2(b)	cted with the income ii (attach schedule)	n 
(1)									
(2)									
(3)									
(4)									
Total	0.	Total		·	0.				
(c) Total income. Add totals of columns there 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)	<b>&gt;</b>		0.
Schedule E - Unrelated Deb	t-Financed	Income (see	instructions)						
			2. Gross income fro			3. Deductions directly con to debt-finance	nected ced pro	with or allocable perty	
1. Description of debt-fin	anced property		or allocable to deb financed property		(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	ns
(1)				Ì					
(2)	•		İ	1					
(3)									
(4)							$\top$		
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or debt-fine	e adjusted basis allocable to inced property h schedule)	6. Column 4 divide by column 5	d		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)				%					
						nter here and on page 1, art I, line 7, column (A)		Enter here and on pag Part I, line 7, column	
Totals						0			0.
Total dividends-received deductions in	cluded in colum	n 8				<b>&gt;</b>	$\mathbf{L}$		0.
								Form <b>990-T</b>	(2018)

Page 4

			Exem	pt Controlled C	)rganızatı	ons				
1. Name of controlled organiza	tion	2. Emp identific numb	ation (loss)	unrelated income (see instructions)			5. Part of column 4 that is included in the controlling organization's gross income		6. Deductions directly connected with income in column 5	
(1)										
(2)									. <u> </u>	
(3)			_		L				·	
(4)							<u></u>	<u></u>		
Nonexempt Controlled Organ	ızatıons									
7. Taxable Income		nrelated incom ee instructions		otal of specified pay made	ments		mn 9 that is including organization's income		ductions directly connected n income in column 10	
(1)										
(2)		_								
(3)										
(4)										
						Enter here and	nns 5 and 10 on page 1, Part I, column (A)	, Enter h	dd columns 6 and 11 nere and on page 1, Part I, line 8, column (B)	
Totals				1471 401	<u> </u>			0.	0	
Schedule G - Investme		ne of a S	ection 501(c	(7), (9), or (	(17) Org	janization				
	cription of incor	ne		2. Amount o	f income	3. Deduction directly conne (attach sched	cted 4.	Set-asides	5. Total deductions and set-asides (col 3 plus col 4)	
(1)				_		tarracu scued	u,o) ,		(cor 3 pius cor 4)	
(2)										
(3)										
(4)				+						
(4)	<u>.</u>			Enter here and Part I, line 9, c			<b>.</b>		Enter here and on page Part I, line 9, column (B)	
Totals				<b>•</b>	0.				0	
Schedule I - Exploited	-	Activity	Income, Oth	er Than Ad		g Income			<u>.</u>	
Description of exploited activity	2. G unrelated income trade or b	business e from	3. Expenses directly connected with production of unrelated business income	4. Net incor from unrelate business (c minus colun gain, compu throug	d trade or olumn 2 nn 3) If a te cols 5	5. Gross inco from activity t is not unrelat business inco	hat at	. Expenses tributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)	1									
(2)										
(3)										
(4)			<u> </u>		1					
Totals <b>•</b>	Enter her page 1, line 10,	, Part I,	Enter here and on page 1, Part I, line 10, col (B)	).			· · ·	,	Enter here and on page 1, Part II, line 26	
Schedule J - Advertisi	ng Incon		structions)							
Part I Income From	Periodic	als Repo	rted on a Co	onsolidated	Basis					
<u> </u>		0 -	3. Direct	or (loss) (osts col 3) If a g	rtising gain col 2 minus gain, compute through 7	5. Circulat		Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
1. Name of periodical		2. Gross advertising income	advertising co	cols 5						
Name of periodical  (1)		advertising	advertising co	cols 51					,	
1. Name of periodical (1) (2)		advertising	advertising co	cols 5					,	
1. Name of periodical (1) (2) (3)		advertising	advertising co	cols 5					, , , , , , , , , , , , , , , , , , , ,	
1. Name of periodical (1) (2)		advertising	advertising co	cols 5						
1. Name of periodical (1) (2) (3)		advertising income	advertising co	0.					0	

Part II Income From Perio columns 2 through 7 on a	-		ate Basis (For each	ch periodical listed	I in Part II, fill in	
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, I	Directors, and	Trustees (see in	structions)		
1. Name			2. Title	3. Percer time devote busines	ed to	pensation attributable inrelated business
(1)					%	
(2)	1,				%	
(3)			-		%	
(4)					%	
Total. Enter here and on page 1, Part II, I	ne 14				<b>&gt;</b>	0.

Form 990-T (2018)

FORM 990-T	DESCRIPTION	OF ORGANIZATION'S	PRIMARY	UNRELATED	STATEMENT 1	<b>. 4</b>
		BUSINESS ACTIVIT	Ϋ́			

#### EQUITY INVESTMENTS IN BUSINESS PARTNERSHIPS

TO FORM 990-T, PAGE 1

FORM 990-T	ОТН	ER CREDITS AND PA	YMENTS	STATEMENT 15					
DESCRIPTIO	ОИ			AMOUNT					
FORM 8827,	FORM 8827, LINE 8C								
TOTAL INCL	UDED ON FORM 990-T	, PAGE 2, PART V,	LINE 50G	2,748.					
FORM 990-T	NET	OPERATING LOSS D	EDUCTION	STATEMENT 16					
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR					
12/31/11 12/31/12 12/31/13 12/31/14	122,104. 236,523. 329,419. 605,237.	0. 0. 0.	122,104. 236,523. 329,419. 605,237.	122,104. 236,523. 329,419. 605,237.					
12/31/15 12/31/16 12/31/17	576,386. 597,980. 275,954.	0. 0. 0.	576,386. 597,980. 275,954.	576,386. 597,980. 275,954.					
NOL CARRYO	OVER AVAILABLE THIS	YEAR	2,743,603.	2,743,603.					

# SCHEDULE M (Form 990-T)

## Unrelated Business Taxable Income for Unrelated Trade or Business

•	N	Τ.	T	Τ.	Y		1

OMB No 1545-0687

2018

Department of the Treasury Internal Revenue Service (99)

Name of the organization For calendar year 2018 or other tax year beginning \_\_\_\_\_\_, and ending \_\_\_\_\_\_, and ending \_\_\_\_\_\_.

For calendar year 2018 or other tax year beginning \_\_\_\_\_\_, and ending \_\_\_\_\_\_.

WARREN CHARITABLE FOUNDATION

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 30-0490635

	escribe the unrelated trade or business    STIGHT		<u></u>		
Par			(A) Income	(B) Expenses	(C) Net
rai	CT Officiated Trade of Education Institute		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(4) 4 4 4 4 4	(5)
1 a	Gross receipts or sales				
b	Less returns and allowances c Balance ▶	1c_			
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit Subtract line 2 from line 1c	3			
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		1 040 046		1 040 046
	statement) STATEMENT 17	5	1,042,846.		1,042,846.
6	Rent income (Schedule C)	6	_	<del></del>	
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			
10	Exploited exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11			-
12	Other income (See instructions, attach schedule)	12	1 040 046		1 040 046
<u>13</u>	Total. Combine lines 3 through 12	13	1,042,846.		1,042,846.
	Deductions Not Taken Elsewhere (See instruction deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K)	ınrela	ted business incom	e.)	
14 15	Salaries and wages			15	
16	Repairs and maintenance			16	<del></del>
17	Bad debts			17	
18	Interest (attach schedule) (see instructions)			18	
19	Taxes and licenses			19	
20	Charitable contributions (See instructions for limitation rules)			20	<del>-</del>
21	Depreciation (attach Form 4562)		21		
22	Less depreciation claimed on Schedule A and elsewhere on return		22a	221	5
23	Depletion Depletion		()	23	<del>-</del>
24	Contributions to deferred compensation plans			24	
25	Employee benefit programs			25	
26	Excess exempt expenses (Schedule I)			26	
27	Excess readership costs (Schedule J)			27	
28	Other deductions (attach schedule)			28	
29	Total deductions. Add lines 14 through 28			29	
30	Unrelated business taxable income before net operating loss deduced	ction :	Subtract line 29 from line		1 0 1 0 0 1 6
31	Deduction for net operating loss arising in tax years beginning on o				
	instructions)		•	31	
32	Unrelated business taxable income Subtract line 31 from line 30			32	1,042,846.
LHA	For Paperwork Reduction Act Notice, see instructions.			Sched	lule M (Form 990-T) 2018

FORM 990-T (M) INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 17
DESCRIPTION	NET INCOME OR (LOSS)
REAL ESTATE - ORDINARY BUSINESS INCOME (LOSS)	1,042,846.
TOTAL INCLUDED ON SCHEDULE M, PART I, LINE 5	1,042,846.

#### **SCHEDULE M** (Form 990-T)

## **Unrelated Business Taxable Income for Unrelated Trade or Business**

ENTITY	2
OMR No. 1545-	068

Department of the Treasury Internal Revenue Service (99) For calendar year 2018 or other tax year beginning \_\_ , and ending ► 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).

501(c)(3) Organizations Only

Name of the organization  WARREN CHARITABLE FOUNDATION					Employer identification number 30-0490635		
	nrelated business activity code (see instructions)   21111			1, 30 325 33	<del></del>		
D	escribe the unrelated trade or business MINERALS				<del> </del>		
Part I Unrelated Trade or Business Income (A) Income					(C) Net		
1 a	Gross receipts or sales						
b	Less returns and allowances c Balance ▶	1c		<del></del>			
2	Cost of goods sold (Schedule A, line 7)	_2_					
3	Gross profit Subtract line 2 from line 1c	3		<u> </u>			
	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) STATEMENT 18	5	274,444.		274,444.		
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					
10	Exploited exempt activity income (Schedule I)	10		` `	<del></del>		
11	Advertising income (Schedule J)	11			<u></u>		
12	Other income (See instructions, attach schedule)	12	0.74 444		254 444		
13	Total. Combine lines 3 through 12	13	274,444.		274,444.		
	Deductions Not Taken Elsewhere (See instruct deductions must be directly connected with the uncompensation of officers, directors, and trustees (Schedule K)				or contributions,		
14	Salaries and wages			15			
15 16	Repairs and maintenance			16			
17	Bad debts			17			
18	Interest (attach schedule) (see instructions)			18	" <del>-</del> '		
19	Taxes and licenses			19			
20	Charitable contributions (See instructions for limitation rules)			20			
21	Depreciation (attach Form 4562)		21				
22	Less depreciation claimed on Schedule A and elsewhere on return		22a	22b			
23	Depletion			23			
24	Contributions to deferred compensation plans			24			
25	Employee benefit programs			25			
26	Excess exempt expenses (Schedule I)			26	-		
27	Excess readership costs (Schedule J)			27			
28	Other deductions (attach schedule)			28			
29	Total deductions. Add lines 14 through 28			29	0.		
30	Unrelated business taxable income before net operating loss dedu	ction	Subtract line 29 from line	13 <b>30</b>	274,444.		
31	Deduction for net operating loss arising in tax years beginning on c						
	instructions)		, ,	31			
32	Unrelated business taxable income Subtract line 31 from line 30			32	274,444.		
ГНА	For Pananyork Paduction Act Natice see instructions			Schedu	le M (Form 990-T) 2018		

FORM 990-T (M) INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 18
DESCRIPTION	NET INCOME OR (LOSS)
MINERALS - ORDINARY BUSINESS INCOME (LOSS)	274,444.
TOTAL INCLUDED ON SCHEDULE M, PART I, LINE 5	274,444.

#### **SCHEDULE M** (Form 990-T)

## **Unrelated Business Taxable Income for Unrelated Trade or Business**

ENTITY					
OMB No	1545-068				

For calendar year 2018 or other tax year beginning ► Go to www.irs.gov/Form990T for instructions and the latest information.

Interna	Revenue Service (99) Do not enter SSN numbers on this form as it	may be	made public if y	our organ	zation is a 501(c)(3)	).	501(c)(3) Organizations Only
			Employer iden	r identification number			
WARREN CHARITABLE FOUNDATION 30-04906						9063	35
L	Inrelated business activity code (see instructions) > 90009	9					
	escribe the unrelated trade or business > OTHER INV	EST	MENT ACT	IVITI	ES		
Par	t I Unrelated Trade or Business Income		(A) Incom	ie	(B) Expenses	•	(C) Net
1a	Gross receipts or sales				<del></del> -		
b	Less returns and allowances c Balance ▶	1c					
2	Cost of goods sold (Schedule A, line 7)	2					
3	Gross profit Subtract line 2 from line 1c	3	·				
4 a	Capital gain net income (attach Schedule D)	4a					
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			<u> </u>		
С	Capital loss deduction for trusts	4c					
5	Income (loss) from a partnership or an S corporation (attach						
	statement) STATEMENT 19	5	33,	714.			33,714.
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					
10	Exploited exempt activity income (Schedule I)	10			· · · · · · · · · · · · · · · · · · ·		
11	Advertising income (Schedule J)	11				<u> </u>	
12	Other income (See instructions, attach schedule)	12					
<u>13</u>	Total. Combine lines 3 through 12	13	33,	714.			33,714.
Pai	Deductions Not Taken Elsewhere (See instruct deductions must be directly connected with the taken to be deductions.)					ept fo	or contributions,
14	Compensation of officers, directors, and trustees (Schedule K)					14	
15	Salaries and wages					15	
16	Repairs and maintenance					16	
17	Bad debts					17	
18	Interest (attach schedule) (see instructions)					18	
19	Taxes and licenses		-			19	
20	Charitable contributions (See instructions for limitation rules)			,		20	
21	Depreciation (attach Form 4562)		2.				
22	Less depreciation claimed on Schedule A and elsewhere on return		22	a		22b	
23	Depletion					23	
24	Contributions to deferred compensation plans					24	<del></del>
25	Employee benefit programs					25	
26	Excess exempt expenses (Schedule I)			•		26	
27	Excess readership costs (Schedule J)				}	27	
28	Other deductions (attach schedule)					28	
29	9 Total deductions. Add lines 14 through 28						0.
30	Unrelated business taxable income before net operating loss dedu	ction S	Subtract line 29	from line	13	30	33,714.
31 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see							
1	instructions)					31	
32	Unrelated business taxable income Subtract line 31 from line 30					32	33,714.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

FORM 990-T (M)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 19
DESCRIPTION		NET INCOME OR (LOSS)
OTHER - ORDINARY BUSIN	NESS INCOME (LOSS)	33,714.
TOTAL INCLUDED ON SCH	EDULE M, PART I, LINE 5	33,714.