O

r

a:

	Form	990,T (2018) Menorah Park Cente	r for Senior	34-07144	143				Page 2
	Pa	性肌 Total Unrelated Business Taxabl	e income						
	33	Total of unrelated business taxable income computed	from all unrelated trades or bu	ısınesses (see					
		Instructions)					33		
,	34	Amounts paid for disallowed fringes					34		
ł	35	Deductions for net operating loss arising in tax years t	peginning before Tanuary 1 20	118 (see	,		1		
1			regiming before bandary 1, 20	Day	HT.		35		
٠	20	Instructions)	and a decidence Contament lines	ì	1		1 1		- -
	36	Total of unrelated business taxable income before spe				^			
		of lines 33 and 34			<	~ `	36		
:	37	Specific deduction (Generally \$1,000, but see line 37 i	nstructions for exceptions)			8	3/Z		1,000
	38	Unrelated business taxable income. Subtract line 3							
	_	enter the smaller of zero or line 36					38		0
H.		戊Ⅳ, Tax Computation					l_		
H	39	Organizations Taxable as Corporations. Multiply line	38 by 21% (0 21)			•	39		
٠,	40	Trusts Taxable at Trust Rates. See instructions for	tax com <u>pu</u> tation. Income tax o	n					
		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		
		Tax on Noncompliant Facility Income. See instruct	ions				43		
		Total. Add lines 41, 42, and 43 to line 39 or 40, which					44		
13		Tax and Payments	ever applied				' 		
1		Foreign tax credit (corporations attach Form 1118, trus	ets attach Form 1116)	45a			r l a-		
			sis attach Form 1110)						
		Other credits (see instructions)		45b					
		General business credit. Attach Form 3800 (see instru		45c					
		Credit for prior year minimum tax (attach Form 8801 o	r 8827)	45d			F		
	e	Total credits. Add lines 45a through 45d		ı			45e		
4	46	Subtract line 45e from line 44		·			46		
4	47	Other taxes Check if from Form 4255 Form 8611 Form 869	7 Form 8866 Other (att	sch)			47		
	48	Total tax. Add lines 46 and 47 (see instructions)	_				48		0
	19	2018 net 965 tax liability paid from Form 965-A or Forr	n 965-B, Part II, column (k) lin	e 2 /s			49		
		Payments A 2017 overpayment credited to 2018		50a			133		<u></u>
		2018 estimated tax payments		50b					
		Tax deposited with Form 8868		50c					
		Foreign organizations Tax paid or withheld at source	(see instructions)	50d					
			(see instructions)	50e		_			
		Backup withholding (see instructions)	(-#b F 0044)				1		
		Credit for small employer health insurance premiums (•	50f					
	g	Other credits, adjustments, and payments Form 2439		1 1					
		Form 4136 Other_	Total >	50g			; 		
	51	Total payments. Add lines 50a through 50g					51		
;	52	Estimated tax penalty (see instructions). Check if Forn	n 2220 is attached			$\cdot \sqcup$	52		
:	53	Tax due. If line 51 is less than the total of lines 48, 49	, and 52, enter amount owed				53		0
;	54/	Overpayment. If line 51 is larger than the total of lines	48, 49, and 52, enter amount	overpaid		•	54		
,	_	Enter the amount of line 54 you want Credited to 2019 esting			funde	d▶	55		
1		tVI Statements Regarding Certain A		rmation (see ins	truction	ons)			<u> </u>
-		At any time during the 2018 calendar year, did the orga					- i		Yes No
	,,	over a financial account (bank, securities, or other) in	a foreign country? If "YES," the	e organization may h	ave to	file			
		FinCEN Form 114, Report of Foreign Bank and Finance							1 1 .
		here ▶							X
;		During the tax year, did the organization receive a dist		ntor of, or transferor	to, a fo	oreign	trust?		X
		If "YES," see instructions for other forms the organizat							
3	58	Enter the amount of tax-exempt interest received or ac							ii
		Under penalties of perjury, I declare that I have examined this return, if	ncluding accompanying schedules and sta	tements, and to the best of n	ny knowl	edge and	d belief, it is		
	Sig	true/correct, and complete Declaration of preparer (other than taxpay	er) is based on all information of which pre	parer has any knowledge				May	the IRS discuss this retur
	Her		gr. CFO					(see	the preparer shown below instructions)?
		Signature of officer Date	Title						Yes No
-		Pnnt/Type preparer's name	Preparer's signature		Date		Check] _{If}	PTIN
	Paid	,					-	J "	• • •
			<u> </u>	<u>-</u>	Щ_	Γ_	self-employ	eu	L
	Prep		· · · · · · · · · · · · · · · · · · ·			Firm's	EIN P		
1	Jse	oniy							
		Firm's address				Phone	no		

Form **990-T** (2018)

Schedule F – Interest, Annı	uities, Royalt	ies, and Ren					ons (see instruct	ions)		
			Exemp	ot Controlled	Organ	nizations					
1 Name of controlled organization id		genuncation number				Total of specified payments made		5 Part of column 4 that included in the controlli organization's gross inco		6 Deductions directly connected with income in column 5	
(1) N/A								· · ·	-		
(2)											
(3)											
(4)											
Nonexempt Controlled Organiza	itions					•					
7 Tayable Income		Net unrelated income loss) (see instructions)		payments made		include	Part of column 9 that is included in the controlling rganization's gross income			11 Deductions directly connected with income in column 10	
(1)											
(2)											
(3)											
(4)											
Totals					•	Add columns Enter here and Part I, line 8, c		nd on page 1,		Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)	
Schedule G – Investment In	come of a S	ection 501(c)	(7), (9).	or (17) O	rganiz	ation (s	ee ins	structions)			
			/(· /) (· /)	, ,	3			,			
1 Description of income		2 Amount of income		3 Deductions directly connected (attach schedule)		4 Set-asides (attach schedule)			5 Total deductions and set-asides (col. 3 plus col. 4)		
(1) N/A							•				
(2)											
(3)								-			
(4)	-										
Totals	•	Enter here and or Part I, line 9, col	umn (A)		٠,٠					ter here and on page 1, art I, line 9, column (B)	
Schedule I – Exploited Exer	npt Activity I	ncome, Othe	er Than	Advertisi	ng Inc	come (se	ee inst	tructions)			
2 Gross unrelated 1 Description of exploited activity business incom from trade or business		3 Expenses directly connected with production of unrelated business income		4 Net income (from unrelated to or business (co 2 minus column If a gain, comp cols 5 through	rade lumn n 3) oute	5 Gross income from activity that is not unrelated business income		at attributable		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1) N/A											
(2)								1		<u> </u>	
(3)								_		1	
(4)			1	· · -				1		1	
Totals •	Enter here and or page 1, Part I, line 10, col (A)	Enter here a page 1, Pa line 10, col	art I,		,	•		•		Enter here and on page 1, Part II, line 26	
Schedule J – Advertising In	come (see ins	structions)	L								
Part I Income From P			Conso	lidated Ba	asis						
1 Name of periodical	2 Gross advertising income	3 Direct advertising	ct	4 Advertisin gain or (loss) (2 minus col 3 a gain, compu cols 5 through	g col) If	5 Circula incom		6 Reade cost		7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1) N/A											
(2)										_]	
(3)										_	
(4)											
Totals (carry to Part II, line (5))										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 bas	ıs)				
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) N/A						
(2)	ļ. <u></u> -					
(3)						
(4)						
Totals from Part I						
	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)		L				

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) N/A		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1. Part II. line 14		•	

Form **990-T** (2018)

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income for Unrelated Trade or Business

OMB No 1545-0687 2018

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

(C) Net

Department of the Treasury Internal Revenue Service

Part I

For calendar year 2018 or other tax year beginning 07/01/18 , and ending 06/30/19

(A) Income

►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)

Name of the organization

Employer identification number

34-0714443

(B) Expenses

Menorah Park Center for Senior

Unrelated business activity code (see instructions) ▶623000

Unrelated Trade or Business Income

Describe the unrelated trade or business

Research Publications

1a	Gross receipts or sales 5,426				- 1			- 1	
b	Less returns and allowances c Balance	1c		5,	426				
2	Cost of goods sold (Schedule A line 7)	2							
3	Gross profit Subtract line 2 from line 1c	3		5,	426				5,426
4a	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 partnership and S corporation (attach statement)	5							
6	Rent income (Schedule C)	6			l				
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			0				0
13	Total. Combine lines 3 through 12	13		5,	426				5,426
Pa	Deductions Not Taken Elsewhere (See instructions for deductions must be directly connected with the unrelate					ons)(Except	for co	ontributions,
14	Compensation of officers, directors, and trustees (Schedule K)					•		14	
15	Salaries and wages							15	5,256
16	Repairs and maintenance							16	209
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 (reported on Form 4562)			21			1,224	.	
22	Less depreciation claimed on Schedule A and elsewhere on return			22a				22b	1,224
23	Depletion							23	
24	Contributions to deferred compensation plans							24	
25	Employee benefit programs							25	1,125
26	Excess exempt expenses (Schedule I)							26	
27	Excess readership costs (Schedule J)							27	
28	Other deductions (attach schedule)		See	Stat	eme	nt :	1	28	17,937
29	Total deductions. Add lines 14 through 28							29	25,751
30	Unrelated business taxable income before net operating loss deduction. Subtra	ct line	29 from	line 13				30	-20,325
31	Deduction for net operating loss arising in tax years beginning on or after Janua instructions)	ary 1, 2	2018 (se	e				31	
32	Unrelated business taxable income Subtract line 31 from line 30							32	-20,325
For	Paperwork Reduction Act Notice, see instructions.					•	Sch	edule	M (Form 990-T) 2018

Form 4562

Department of the Treasury

Depreciation and Amortization

(Including Information on Listed Property)

► Attach to your tax return.

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

OMB No 1545-0172

Internal Revenue Service Name(s) shown on return

Menorah Park Center for Senior

Identifying number

34-0714443

Living Business or activity to which this form relates Form 990-T Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I 2,500,000 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2 1,000,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 Listed property Enter the amount from line 29 R 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions 11 12 Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11 12 13 Carryover of disallowed deduction to 2019 Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions 14 15 Property subject to section 168(f)(1) election 15 $4,2\overline{13}$ Other depreciation (including ACRS) 16 16 Part III MACRS Depreciation (Don't include listed property. See instructions.) 17 MACRS deductions for assets placed in service in tax years beginning before 2018 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2018 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery placed in (a) Classification of property (business/investment use (e) Convention (f) Method (a) Depreciation deduction only-see instructions) period service 19a 3-year property b 5-year property 7-year property C 10-year property 15-year property 20-year property 25-year property 25 yrs S/L 27 5 yrs MM S/L Residential rental property S/L 27 5 yrs MM MM Nonresidential real 39 yrs S/L property MM S/L Section C-Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year S/L 12 yrs 30-year MM 30 yrs S/I 40-year d MM S/L 40 yrs Part IV Summary (See instructions) 21 Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 4,213 here and on the appropriate lines of your return Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs — —

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

PROFESSIONAL SERVICES	622
SUPPLIES AND TRANSPORTATION	2,224
TELEPHONE AND POSTAGE	229
OCCUPANCY AND UTILITIES	4,093
MARKETING, TRAVEL AND OTHER	283
PART II - LINE 28 - OTHER DEDUCTIONS	7,451

FORM 990T - SCHEDULE M - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

PROFESSIONAL SERVICES	255
SUPPLIES AND TRANSPORTATION	15,634
TELEPHONE AND POSTAGE	257
OCCUPANCY AND UTILITIES	1,675
MARKETING, TRAVEL AND OTHER	116
PART II - LINE 28 - OTHER DEDUCTIONS	17,937