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| Contract Annabe For all ender your 2019 or other assessment of the Trace | Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e)) For calendar year 2019 or other tax year beginning Soft to www.irs.gov/Form90T 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 organization (| oction for its Only inber |
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| Unrelated business taxable income. Subtract line 30 from line 29 31 1,114,606. | | |
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| | | THE ROCK AND ROLL HALL OF FAME AND MUSEUM, INC. | 34 | -1520995 Page 2 |
|----------|------------|---|-------------|----------------------------|
| Part | | Total Unrelated Business Taxable Income | | 4 4 5 5 6 6 6 |
| 32 | Total of | f unrelated business taxable income computed from all unrelated trades or businesses (see instructions) | 32 | 1,177,219. |
| 33 | Amoun | its paid for disallowed fringes | 33 | |
| 34 | Charita | ble contributions (see instructions for limitation rules) | 34 | 0. |
| 35 | Total u | nrelated business taxable income before pre-2018 NOLs and specific deduction Subtract line 34 from the sum of lines 32 and 33 | 35 | 1,177,219. |
| 36 | Deduct | ion for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) | 36 | |
| 37 | Total of | f unrelated business taxable income before specific deduction. Subtract line 36 from line 35 | 37 | 1,177,219. |
| 38 | Specific | c deduction (Generally \$1,000, but see line 38 instructions for exceptions) | 38 | 1,000. |
| 39 | Unrelat | ted business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37, | | |
| | enter th | ne smaller of zero or line 37 | 39 | 1,176,219. |
| Part | IV | Tax Computation | | |
| 40 | Organia | zations Taxable as Corporations. Multiply line 39 by 21% (0.21) | 40 | 247,006. |
| 41 | Trusts | Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from: | | |
| | T | ax rate schedule or Schedule D (Form 1041) | 41 | |
| 42 | Proxy t | tax. See instructions | 42 | <u> </u> |
| 43 | Alterna | tive minimum tax (trusts only) | 43 | |
| 44 | Tax on | Noncompliant Facility Income. See instructions | 44 | |
| 45 | Total. | Add lines 42, 43, and 44 to line 40 or 41, whichever applies | 45 | 247,006. |
| Part | V . | Tax and Payments | | |
| 46 a | Foreign | n tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a | | |
| b | Other c | credits (see instructions) | | |
| С | Genera | I business credit. Attach Form 3800 | | |
| d | Credit f | for prior year minimum tax (attach Form 8801 or 8827) | | |
| е | Total c | redits. Add lines 46a through 46d | 46e | |
| | | ct line 46e from line 45 | 47 | 247,006. |
| 48 | Other to | axes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule) | 48 | |
| 49 | Total ta | ax. Add lines 47 and 48 (see instructions) | 49 | 247,006. |
| | | et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3 | 50 | 0. |
| | | nts. A 2018 overpayment credited to 2019 | | |
| | - | stimated tax payments 51b 308,800. | | |
| | | posited with Form 8868 51c | | |
| | • | n organizations; Tax paid or withheld at source (see instructions) 51d | | |
| | _ | withholding (see instructions) 51e | | |
| | • | for small employer health insurance premiums (attach Form 8941) 51f | | |
| a | Other c | credits, adjustments, and payments: Form 2439 | | |
| | F | orm 4136 Other Total ▶ 51g |] ! | |
| 52 | | ayments. Add lines 51a through 51g | 52 | 308,800. |
| 53 | Estimat | ted tax penalty (see instructions). Check if Form 2220 is attached 🕨 🗓 | 53 | |
| | | e. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed | 54 | |
| 55 | Overpa | syment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid | 55 | 61,794. |
| 56 | Enter th | he amount of line 55 you want. Credited to 2020 estimated tax | 56 | 61,794. |
| Part | VI : | Statements Regarding Certain Activities and Other Information (see instructions) | | |
| 57 | At any | time during the 2019 calendar year, did the organization have an interest in or a signature or other authority | | Yes No |
| | | 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 |
| 58 | 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. | | |
| 59 | Enter th | he amount of tax-exempt interest received or accrued during the tax year 🕒 \$ | | |
| | U | inder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled orrect, and complete. Declaration of greparer (other than taxpayer) is based on all information of which preparer has any knowledge. | ge and t | oelief, it is true, |
| Sign | | | av the IR | S discuss this return with |
| Here | | | • | s shown below (see |
| | | Signature of Officer Date Title ins | structions | s)? 🗶 Yes 📄 No |
| | | Print/Type preparer's name Preparer's signature Date Check i | f PTI | N |
| Paid | i | CHRISTOPHER B. C. J. /2-2 self- employed | | |
| Prep | | ANDERSON Changele 9/1/2526 self-employed | | 00226559 |
| - | Only | Firm's name ► MALONEY + NOVOTNY LLC Firm's EIN ► | 3 | 4-0677006 |
| 230 | -···y | 1111 SUPERIOR AVE, SUITE 700 | | |
| | | Firm's address ► CLEVELAND, OH 44114-2540 Phone no. (| <u>21</u> 6 |) 363-0100 |
| 923711 (| 01-27-20 | <u> </u> | - | Form 990-T (2019) |

| Schedule A - Cost of Goods | Sold. Enter | method of invent | ory v | aluation > COS | T | | | |
|---|--|------------------|--|--|--|--|---|---|
| 1 Inventory at beginning of year | 1 | 308,165. | | Inventory at end of year | | - | 6 | 354,376. |
| 2 Purchases | 2 1 | ,881,483. | 7 | Cost of goods sold. Su | btract | line 6 | | |
| 3 Cost of labor | 3 | | | from line 5. Enter here | and in | Part I, | | |
| 4a Additional section 263A costs | | | | line 2 | | | 7 | 1,835,272. |
| (attach schedule) | 4a | | 8 | Do the rules of section | 263A (| with respect to | | Yes No |
| Other costs (attach schedule) | 4b | | | property produced or a | cquired | l for resale) apply to | | _ |
| 5 Total. Add lines 1 through 4b | | ,189,648. | L | the organization? | | | | <u> </u> |
| Schedule C - Rent Income ((see instructions) | From Real | Property and | Per | sonal Property L | ease | d With Real Prop | erty |) |
| Description of property | | <u>.</u> | | | | | | |
| (1) | | | | | | | | |
| (2) | | | | | | · <u>-</u> | | |
| (3) | | | - | | | | | |
| (4) | | | | | | | | |
| | 2. Rent receiv | ed or accrued | | | | | | |
| (a) From personal property (if the perc rent for personal property is more 10% but not more than 50%) | ` of rent for pe | rsonal | onal property (if the percentag property exceeds 50% or if ed on profit or income) | je | 3(a) Deductions directly columns 2(a) ai | conne nd 2(b) | cted with the income in (attach schedule) | |
| (1) | | | | | | | | |
| (2) | - | | | | | | | |
| (3) | | | | | | L. | | * * |
| (4) | | | | | | | | |
| Total | 0. | Total | | | 0. | | | |
| (c) Total income. Add totals of columns there 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 I | nstru | ctions) | | | | |
| | | | 2 | Gross income from | | with or allocable perty | | |
| 1. Description of debt-fin | anced property | | | or allocable to debt- financed property | (a) | Straight line depreciation (attach schedule) | | (b) Other deductions (attach schedule) |
| (1) | | | | | | | 1 | , |
| (2) | - | | | | | | 1 | |
| (3) | | | | | | | | |
| (4) | | | | | | | | |
| 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | adjusted basis allocable to nced property n schedule) | 6 | Column 4 divided by column 5 | | 7. Gross income reportable (column 2 x column 6) | | 8. Allocable deductions (column 6 x total of columns 3(a) and 3(b)) | |
| (1) | | | | % | - | | \top | |
| (2) | | | | % | | | 1 | |
| (3) | | | | % | | | | |
| (4) | | | | % | | | | |
| | | | | | | nter here and on page 1, Part I, line 7, column (A) | | Enter here and on page 1, Part I, line 7, column (B) |
| Totals | | | | ▶ | | 0 | | 0. |
| Total dividends-received deductions in | cluded in columi | n 8 | | , , | | | | 0. |

| ichedule F - Interest, A | Annuities | , Royal | | | | | - | tions | see ins | struction | s) |
|--|---------------------------------------|-----------------------------------|--|---------------------------|---|---|---|--|---|---------------------|---|
| | | | 1 | Exempt | Controlled Or | ganızatı | ons | | | | |
| Name of controlled organizat | tion | 2. Em identifi num | cation | | related income e instructions) | | al of specified nents made | includ | rt of column 4 led in the cont tation's gross | rolling | 6. Deductions directly connected with income in column 5 |
| , | | | | | | | | - | · · · · · · · · · · · · · · · · · · · | | |
|) | - | | + | | | | <u>-</u> | | | | |
| <u>) </u> | - + | | | | | | | | | | |
|) | | | <u>-</u> | | | | | | | | |
|) | | | | | | | | | | | |
| nexempt Controlled Organi | | | | | | | | | | | |
| 7. Taxable Income | | related incom e instructions | | 9. Total | of specified paym made | ients | 10. Part of colui in the controlli gross | mn 9 tha ng organ s income | nization's | 11. Dec with | ductions directly connect income in column 10 |
|) | | | | | | | | | | | |
|) | | | | | | | | | | | |
| 3) | Ī | | | | | | | | | T | |
| 1) | | | 1 | | | | | | | | |
| | | | | | | | Add colum Enter here and line 8, c | | o 1, Part I, | Enter h | d columns 6 and 11 ere and on page 1, Part I, line 8, column (B) |
| tals | _ | | | | | | | | 0. | | (|
| chedule G - Investme | | e of a S | Section 5 | i01(c)(7 | <mark>7), (9), or (</mark> 1 | 7) Org | anization | | | | |
| (see inst | ructions) | | | | , | | | | | | |
| 1. Desc | 1. Description of income | | | | 2. Amount of | Amount of income 3. Deductions directly connected (attach schedule) 4. Set-left | | | | asides schedule) | 5. Total deduction and set-asides (col 3 plus col 4 |
|) | | | | | | | | | | | |
|) | | | | | | | | | | | |
| 3) | | | | | | | | | | | |
| 1) | | | | | | | | | | | |
| | | | | | Enter here and o Part I, line 9, col | | | | | · | Enter here and on pag Part I, line 9, column (6 |
| tals | | | | > | | 0. | | | | | |
| chedule I - Exploited (see instru | • | Activity | Income, | Other | Than Adv | ertisin | g Income | | | | • |
| · | T | | _ | | 4. Net incom | e (loss) | | | 1 | | 1 - |
| 1. Description of exploited activity | 2. Greuntelated buncome trade or bu | usiness from | 3. Expe directly cor with prod of unrel business i | nnected uction ated | from unrelated business (col minus column gain, compute through | trade or umn 2 3) If a cols 5 | Gross inco from activity t is not unrelat business inco | hat ed | 6. Exp attribut colui | able to | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4) |
| 1) | | | | | | | • | | | | |
| 2) | 1 | | | | | | | | | | |
| 3) | 1 | | | | | | | | | | |
| 4) | | | | | | | | | | | |
| | Enter here page 1, I line 10, c | Part I, oI (A) | Enter here page 1, F line 10, co | Parti, ol (B) | | | | | I | | Enter here and on page 1, Part II, line 25 |
| tals ► chedule J - Advertisi | na Incom | 0. | nstructions | 0. | <u> </u> | | | | | | 1 0 |
| Part I Income From | | | | , | nolidated ! | Dania - | | | | | |
| rart i income From | | iis nepo | ortea on | a Con | Solidated | | | | | | |
| 1. Name of periodical | | 2. Gross advertising income | | . Direct lising costs | 4. Adverti or (loss) (co col 3) If a ga cols 5 th | l 2 minus in, compute | 5. Circulat income | | 6. Read cost | | 7. Excess readership costs (column 6 minus column 5, but not more than column 4) |
|) | | | | | | | | | | | |
| 2) | | | | | | | | | | | |
| 3) | | | | - | 7 | | | | | | , |
| l) | | | | | ┑ | | | | | | |
| · | | | | | <u> </u> | - | 1 | | | | |
| tals (carry to Part II, line (5)) | • | (| 0. | 0 | | | | | | | Form 990-T (20 |

| Part II | Income | From | Periodi | cals Reported on | a Separate Basis | (For each p | periodical listed in Part I | l, fill in |
|---------|-----------|---------|------------|-------------------|------------------|-------------|-----------------------------|------------|
| | columns 2 | through | 7 on a lii | ne-by-line basis) | | | | |

| 1. Name of periodical | | 2. Gross edvertising 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 26 |
| Totals, Part II (lines 1-5) | ▶ | 0. | 0. | | • | • | 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 (2019)

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

OMB No 1545-0172

Department of the Treasury Attachment Sequence No 179 ▶ Go to www.irs.gov/Form4562 for instructions and the latest information. Internal Revenue Service Business or activity to which this form relates Identifying number Name(s) shown on return ROCK AND ROLL HALL OF FAME AND MUSEUM, INC. SECTOR 45: RETAIL TRADE 34-1520995 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. Total cost of section 179 property placed in service (see instructions). 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If marned filing separately, see instructions 5 6 (a) Description of property (b) Cost (business use only) Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 10 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 . . Carryover of disallowed deduction to 2020 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) Special depreciation allowance for qualified property (other than listed property) placed in service 14 15 71,515.00 Other depreciation (including ACRS) 16 MACRS Depreciation (Don't include listed property. See instructions.) Section A 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 2019 Tax Year Using the General Depreciation System (c) Basis for depreciation (d) Recovery (b) Month and year (e) Convention (g) Depreciation deduction (business/investment use only - see instructions) (f) Method (a) Classification of property placed in period service 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property

| i Nonresidential real | | 39 yrs | MM | S/L S/L | |
|-----------------------|---------------------------------|-----------------------|-------------------|------------|--------|
| Section C - Asset | s Placed in Service During 2019 | Tax Year Using the Al | MM ternative D | | Svstem |
| 20a Class life | | | | S/L | |
| b 12-year | | 12 yrs | | S/L | |
| c 30-year | | 30 yrs | MM | S/L | |
| d 40-year | | 40 yrs | MM | S/L | |

25 yrs

27 5 yrs

27 5 yrs

ММ

ММ

S/L

S/L

S/L

| Part IV | Summary | (See instruction | าร.) |
|---------|---------|------------------|------|

| 21 | Listed property Enter amount from line 28 | | | | 21 | |
|----|--|---------|-----------|---------|----|--|
| 22 | Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column | (g), ar | nd line 2 | 1 Enter | | |
| | here and on the appropriate lines of your return. Partnerships and S corporations - see instru | 22 | 71,515.00 | | | |
| 23 | For assets shown above and placed in service during the current year, enter the | | | | | |
| | portion of the basis attributable to section 263A costs | 22 | | | | |

f 20-year property g 25-year property

h Residential rental

property

| $\overline{}$ | 1 4562 (2019) | 4 0 1 1 | | | | | · · · • | | | | | | | 4 | Page 2 |
|---------------|---|---|--|---------|-------------------|---------------------------------------|---|-----------|---------------------------|-------------|----------------------|-----------|---------------------------|--|---------------------------------------|
| Pa | entertainm | operty (Include ent, recreation, o | r amuseme | ent.) | | | | | | | • | | | • | ed fo |
| | | iny vehicle for wh is (a) through (c) of | | | | | | | | Jucting | lease e | xpense | e, comp | nete of | II y 248 |
| | | · Depreciation and | | | | | | | | mits for | passe | nger au | itomobile | es) | |
| 24a | Do you have evident | ce to support the bus | iness/investm | ent use | claimed | ? Y | es | No | 24b If "\ | ∕es," ıs t | he evide | nce writt | ten? | Yes | No |
| | (a) Type of property (list vehicles first) | (b) Date placed in service | (c) Business/ investment us percentage | e Cost | (d) or other b | | (e) sis for depre siness/inve use only | stment | (f) Recovery period | Met | g) hod/ ention | Depre | (h) eciation uction | Elected s | i) ection 179 ost |
| 25 | Special depreciati | | qualified lis | | | | ın serv | ice di | | L | | | | | |
| | the tax year and us | | | | | se See | ınstruct | ions | <u></u> | <u></u> | . 25 | l | | | |
| 26 | Property used mo | re than 50% in a qi | 1 | ess us | | | | | 1 | | | Ι—— | | T | |
| | | <u> </u> | ļ | % | | + | | | | | | | | | |
| | | | | % | | | | | | | | | | | |
| 27 | Property used 50% | u | 1 | | | | | | | · | | l | | | |
| | · · · | 1 | T - | % | | | •• | | | S/L - | | | | | |
| | | | 4 | % | | | | | | S/L - | | | |] | |
| | | | l . | % | | | | | | S/L - | | | |] | |
| | Add amounts in co | • • | - | | | | | - | | | | | | | |
| 29 | Add amounts in co | olumn (ı), line 26 E | | | | | | | | | <i>.</i> . | | . 29 | | |
| _ | | | Sectio | | | | | | | | -1-4-4 | | 16 | | |
| | nplete this section fo our employees, first ar | | | | | | | | | | | | | rovideo | venicie |
| | | - | | | (a) | | b) | | (c) | T - | d) | Τ. | (e) | (| f) |
| 30 | Total business/inv | | | | nicle 1 | | ıcle 2 | Ve | Vehicle 3 Vehic | | | | Vehicle 5 Vehicle | | |
| 31 | Total commuting n | | | | | | | | | | | <u> </u> | | | |
| | - | _ | mmuting) | | | | | | | | | | | | |
| | miles driven | | | | | | | | | | | | | | |
| 33 | Total miles drive | en during the y | ear. Add | | _ | | • | | • | | • | | • | | |
| | lines 30 through 3 | | 1 | | 0 | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | 0 | | 0 | | 0 | V | 0 | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | , , , , , , , , , , , , , , , , , , , |
| 34 | Was the vehicle | | | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| 25 | use during off-duty | | ſ | | + | | - | | | | | <u></u> | - | | _ |
| 33 | Was the vehicle than 5% owner or | | | | | | | | | | | | | | |
| 36 | Is another vehic | • | ſ | | | | | | | | | | | | |
| •• | use? | | • | | | | | | | | | | | | |
| | | ction C - Question | | ploye | rs Who | Provi | ide Vel | nicles | for Use | by Th | eir Em | ploye | es | | |
| | swer these question re than 5% owners | | • | | eption t | to com | pleting | Section | on B for | vehicles | s used | by em | ployees | who a | ren't |
| | Do you maintain your employees? | a written policy s | statement ti | nat pr | | | | | | | | | ng, by | Yes | No |
| 38 | Do you maintain | a written policy | statement t | hat pr | ohibits | person | al use | of ve | hicles, e | xcept c | ommut | ing, by | | | |
| 39 | employees? See the Do you treat all us | | | | | | | | | | | | | _ | |
| 40 | | | | | | | in infor | matio | n from | vour en | nplove | s abo | ut the | | ļ |
| . • | use of the vehicles | | | | 2 | | | | | | | | | | |
| 41 | Do you meet the re | | | | | e demo | nstratio | n use? | See ins | truction | s | | | | |
| | Note: If your answ | | | | | | | | | | | | | | |
| Pa | rt VI Amortizat | ion | 1 | | , | | | | | | | | | | |
| | (2) | | (b) | | | (c) | | | (d) | | (e | | | (f) | |
| | (a) Description | of costs | Date amorti begins | | | | (d) Code section | | | | | | tization for this year | | |
| 42 | Amortization of co | ete that begins dur | <u> </u> | | Vear les | o inetri | ictions) | L | | _ | percer | rage | | | |
| 42 | Amortization of Co | ais mai begins dur | ing your 20 | JIAX | year (St | 5 6 1115111 | 2011011S) | · | | - | | | | | |
| | | | | _ | † | | | \dashv | _ | | | | | | |
| 43 | Amortization of co | sts that began befo | ore your 20 | 19 tax | year | | | | _ | | · | 43 | | | |
| 44 | Total. Add amoun | its in column (f) Se | ee the instru | ıctions | for who | ere to re | port | | | | | 44 | | | |

| FORM 990-T | OTHER DEDUCTIONS | STATEMENT 1 |
|--|------------------|--|
| DESCRIPTION | | AMOUNT |
| STORE OPERATING EXPENSES UTILITIES GENERAL AND ADMINISTRATIVE INSURANCE MANAGEMENT FEES SALES RELATED CHARGES CAM ALLOCATION TELEPHONE CLEANING SERVICES OTHER | | 59,205. 16,383. 3,373. 5,940. 374,379. 78,220. 1,463. 687. 10,334. 548. |
| TOTAL TO FORM 990-T, PAGE 1, L | INE 27 | 550,532. |

Unrelated Business Taxable Income from an Unrelated Trade or Business

| T | Y | 1 |
|---|--------|-----------|
| | OMB No | 1545-0047 |

Department of the Treasury Internal Revenue Service For calendar year 2019 or other tax year beginning ______ , and ending

ding ______ 20 |

401,650.

ENTITY

► Go to www.irs.gov/Form990T for instructions and the latest information.

o 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

1,201,085.

| nterna | II Nevenue Service | Do not enter SSN numbers | on this form as it | may be | made public if your organi | zation is a 501(c)(3). | 50 1(c)(3) Organizations Only |
|---|-----------------------|--------------------------------------|---|--------|----------------------------|------------------------|-------------------------------|
| Name of the organization THE ROCK AND ROLL HALL (AND MUSEUM, INC. | | | | | FAME | Employer identificati | |
| ι | Jnrelated Business | Activity Code (see instructions) | = | 0 | | 1 02 2020 | |
| | | | SECTOR 53 | : R | BNTAL | | _ |
| Pa | rt I Unrelated | Trade or Business Inco | me | , | (A) Income | (B) Expenses | (C) Net |
| 1 a | Gross receipts or | sales | | | | | , |
| b | Less returns and allo | owances | c Balance ▶ | 1c | | > | |
| 2 | Cost of goods sole | d (Schedule A, line 7) | | 2 | | | • |
| 3 | Gross profit Subti | ract line 2 from line 1c | | 3 | | | |
| 4 a | Capital gain net in | come (attach Schedule D) | | 4a | | | |
| b | Net gain (loss) (For | rm 4797, Part II, line 17) (attach | Form 4797) | 4b | | | |
| c | Capital loss deduc | ction for trusts | | 4c | | | |
| 5 | Income (loss) from | a partnership or an S corporati | on (attach | | | • | |
| | statement) | | | 5 | | • | |
| 6 | Rent income (Scho | edule C) | | 6 | 1,602,735. | 401,650. | 1,201,085. |
| 7 | Unrelated debt-fin | anced income (Schedule E) | | 7 | | | |
| 8 | Interest, annuities, | , royalties, and rents from a con- | trolled | | | | |
| | organization (Sche | edule F) | | 8 | | | |
| 9 | Investment income | e of a section 501(c)(7), (9), or (1 | 7) | | | | |
| | organization (Sche | edule G) | | 9 | | | |
| 10 | Exploited exempt | activity income (Schedule I) | | 10 | | | |
| 11 | Advertising incom | e (Schedule J) | | 11 | | | |
| 12 | Other income (See | e instructions, attach schedule) | | 12 | | | |

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)

13

1,602,735.

| 14 | Compensation of officers, directors, and trustees (Schedule K) | 14 | |
|----|--|-----|------------|
| 15 | Salaries and wages | 15 | 298,417. |
| 16 | Repairs and maintenance | 16 | 21,829. |
| 17 | Bad debts | 17 | |
| 18 | Interest (attach schedule) (see instructions) | 18 | |
| 19 | Taxes and licenses | 19 | |
| 20 | Depreciation (attach Form 4562) 20 434, 228. | | |
| 21 | Less depreciation claimed on Schedule A and elsewhere on return | 21b | 434,228. |
| 22 | Depletion | 22 | |
| 23 | Contributions to deferred compensation plans | 23 | |
| 24 | Employee benefit programs | 24 | |
| 25 | Excess exempt expenses (Schedule I) | 25 | |
| 26 | Excess readership costs (Schedule J) | 26 | |
| 27 | Other deductions (attach schedule) SEE STATEMENT 2 | 27 | 535,531. |
| 28 | Total deductions, Add lines 14 through 27 | 28 | 1,290,005. |
| 29 | Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 | 29 | -88,920. |
| 30 | Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see | | |
| | instructions) STMT 3 | 30 | 0. |
| 31 | Unrelated business taxable income. Subtract line 30 from line 29 | 31 | -88,920. |

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

13 Total. Combine lines 3 through 12

Enter here and on page 1,

Part I, line 7, column (B)

Totals

Enter here and on page 1,

Part I, line 7, column (A)

Total dividends-received deductions included in column 8

Form 4562

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

Attachment Sequence No

Department of the Treasury Internal Revenue Service

| Part Election To Expense Certain Property Under Section 179 | 34-1520995 |
|---|----------------------------|
| Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount (see instructions) | |
| 1 Maximum amount (see instructions). 1 2 Total cost of section 179 property placed in service (see instructions). 2 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- 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If marned filling separately, see instructions 5 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 7 Listed property Enter the amount from line 29. 7 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 10 | , |
| Total cost of section 179 property placed in service (see instructions). Threshold cost of section 179 property before reduction in limitation (see instructions). Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0- Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0 If marmed filing. (a) Description of property. (b) Cost (business use only). Listed property. Enter the amount from line 29. Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7. Tentative deduction. Enter the smaller of line 5 or line 8. Carryover of disallowed deduction from line 13 of your 2018 Form 4562. 2 1 2 2 3 4 4 4 5 4 6 Carryover of disallowed deduction from line 13 of your 2018 Form 4562. | |
| Total elected cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If marned filing separately, see instructions (a) Description of property (b) Cost (business use only) 7 Listed property Enter the amount from line 29. Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 10 | |
| Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- Dollar limitation for tax year Subtract line 4 from line 1 if zero or less, enter -0- if marned filing separately, see instructions (a) Description of property (b) Cost (business use only) Listed property Enter the amount from line 29. Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 Tentative deduction Enter the smaller of line 5 or line 8 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 4 Dollar limitation Subtract line 3 from line 2 lif zero or less, enter -0- If marned filing 5 4 Total elected cost 7 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 | |
| 5 Dollar limitation for tax year Subtract line 4 from line 1 lf zero or less, enter -0- lf married filing separately, see instructions | |
| 6 (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property Enter the amount from line 29 | |
| 7 Listed property Enter the amount from line 29 | • |
| 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 | |
| 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 | |
| 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 | |
| 10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 | |
| | |
| | |
| 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 | |
| 13 Carryover of disallowed deduction to 2020 Add lines 9 and 10, less line 12 ▶ 13 | ٠. |
| 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 instru | uctions) |
| 14 Special depreciation allowance for qualified property (other than listed property) placed in service | |
| during the tax year See instructions | |
| 15 Property subject to section 168(f)(1) election | |
| 16 Other depreciation (including ACRS) | 434,228.00 |
| Part III MACRS Depreciation (Don't include listed property. See instructions.) | |
| Section A | |
| 17 MACRS deductions for assets placed in service in tax years beginning before 2019 | <u> </u> |
| 18 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 2019 Tax Year Using the General Depreciation Sys | stem |
| (b) Month and year (c) Basis for depreciation (d) Recovery | (-) D |
| (a) Classification of property placed in service only - see instructions) period (e) Convention (f) Method | (g) Depreciation deduction |
| 19a 3-year property | |
| b 5-year property | |
| c 7-year property | |
| d 10-year property | |
| e 15-year property | |
| f 20-year property | |
| g 25-year property . 25 yrs S/L | |
| h Residential rental 27 5 yrs MM S/L | |
| property 27 5 yrs MM S/L | |
| i Nonresidential real 39 yrs MM S/L | |
| property MM S/L | |
| Property | System |
| Section C - Assets Placed in Service During 2019 Tax Tear Using the Alternative Debreciation S | |
| Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation S 20a Class life S/L | |
| 20a Class life S/L | |
| 20a Class life S/L b 12-year . 12 yrs S/L | |
| 20a Class life S/L b 12-year . 12 yrs S/L c 30-year 30 yrs MM S/L | |
| 20a Class life S/L b 12-year . 12 yrs S/L c 30-year 30 yrs MM S/L d 40-year 40 yrs MM S/L | |
| 20a Class life S/L b 12-year . 12 yrs S/L c 30-year 30 yrs MM S/L d 40-year 40 yrs MM S/L Part IV Summary (See instructions.) | |
| 20a Class life S/L b 12-year 12 yrs S/L c 30-year 30 yrs MM S/L d 40-year 40 yrs MM S/L Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28 21 | |
| 20a Class life S/L b 12-year 12 yrs S/L c 30-year 30 yrs MM S/L d 40-year 40 yrs MM S/L Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28 | 434.228.00 |
| 20a Class life S/L b 12-year 12 yrs S/L c 30-year 30 yrs MM S/L d 40-year 40 yrs MM S/L Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28 21 | 434,228.00 |

| For | n 4562 (2 | 019) | | | | | | | | | | | | | | | Page 2 |
|-----------|------------------|------------------------------------|---|--|----------|-------------------|----------------|---------------------|------------|----------------|---------------------------|-------------|-----------------------------|----------------|---------------------------|---------------------|-------------------------|
| | irt V | Listed Pro | operty (Include ent, recreation, o | r amusem | ent.) | | | | | | s, certa | | | and | prope | • | ed fo |
| | | 24b, column | ny vehicle for wh s (a) through (c) of | Section A, | all of S | Section | B, and | d Sec | tion | C if a | pplicable | | | | | | ıly 24a |
| | | | Depreciation and | | | | | | e ins | | | | | | | | |
| 248 | Do you | have evidenc | e to support the bus | T | nent use | claimed | <u> </u> | Yes | | No | 24b If "\ | ∕es,″ ıs t | he evide | nce writ | ten? | Yes | No |
| | Type of p | (a) roperty (list les first) | (b) Date placed in service | (c) Business/ investment us percentage | se Cost | (d) or other b | | Basis fo busines | | stment | (f) Recovery period | Met | g) hod/ ention | Depr | (h) eciation uction | Elected s | i) ection 179 ost |
| 25 | | | on allowance for | qualified lis | • | | • | d ın | serv | rice d | - | 1 | T | | | - | |
| | | | ed more than 50% | | | | se Se | e inst | ruct | ions | <u></u> | <u></u> | . 25 | | | | |
| 26 | Proper | ty used mor | e than 50% in a qu | Jaifled busi | | e | | | | | | | | | | Ι. | |
| | | | | | % | | | | | | ļ | | | | | | |
| | | | | | % | | | | | | | <u> </u> | | | | | |
| | | | <u> </u> | <u> </u> | % | | | | | | L | | | <u> </u> | | l | |
| 27 | Prope | rty used 50% | or less in a qualifi | ed business | 1 | | | | | | | T = | | | | 1. | |
| | | | | | % | | | | | | | S/L - | | | | 1 | |
| | | | | | % | | | | | | | S/L - | | | | 4 | |
| _ | | | | | % | | | | | | | S/L - | 1 | | | - | |
| 28 | | | lumn (h), lines 25 | | | | | | | | | | . 28 | | | | |
| <u>29</u> | Add ar | nounts in co | lumn (ı), line 26. E | | | | | | | | | | | <u></u> | . 29 | | |
| | | | | | | | | | | | ehicles | | | | | | |
| | | | r vehicles used by | | | | | | | | | | | | | rovided | vehicle |
| to y | our empi | oyees, first an | swer the questions in | Section C to | | | t an ex | | пю | comp | | 1 - | | | | 1 . | |
| | | | | | | a) iicle 1 | V | (b) ehicle 2 | , | _v , | (c) ehicle 3 | | d) icle 4 | | (e) nde 5 | | f) cle 6 |
| 30 | | | estment miles drivi ude commuting m | | | | | | • | | | , , , | | | | | |
| 31 | Total o | ommuting m | ııles drıven durıng | the year . | | | | | | | | | | | | | |
| 32 | Total miles o | • | ersonal (nonco | mmuting) | | | | | | | | | | | | | |
| 33 | Total | miles drive | n during the ye | ear Add | | | | | | | | | | | | | |
| | lines 3 | 0 through 32 | 2 | | | 0 | | | 0 | | 0 | | 0 | | 0 | | (|
| 34 | Was | the vehicle | available for | personal | Yes | No | Yes | <u> </u> | lo | Yes | No | Yes | No | Yes | No | Yes | No |
| | use du | ring off-duty | hours? | | | | | | | | | | | | <u> </u> | | |
| 35 | Was t | he vehicle | used primarily by | a more | | | | | | | | | | | | ļ | |
| | than 5 | % owner or r | elated person? | | | | | | | | | | | | | | |
| 36 | | | e available for | • | | | | | | | | | _ | | | | |
| | | | ction C - Questic | | ploye | rs Who | Pro | vide | Veh | nicles | for Use | by Th | eir Em | ploye | es | | |
| | | ese question | s to determine if | you meet | an exc | | | | | | | | | | | who a | ren't |
| 37 | | | a written policy s | | | | | | | | | | | | ng, by | Yes | No |
| 38 | Do yo | u maintain : | | tatement | hat pr | ohibits | perso | onal ι | ıse | of ve | hicles, e | xcept o | ommul | ing, b | y your | | |
| | | | e instructions for | | | | | | | | | | | | | | |
| 39 | | | e of vehicles by em | | | | | | | | | | | | | | |
| | | | ore than five vel | | | | | | | | | | | | ut the | | |
| | - | • | and retain the info | | | | | | | | | | | | | | |
| 41 | Do you | meet the re | quirements conce | rning quali | ied aut | omobile | e dem | nonstr | atio | n use | ? See ins | truction | s · · · | | | | |
| | | | er to 37, 38, 39, 4 | | | | | | | | | | | | | | |
| Pa | rt VI | Amortizati | ion | | | | | | | | | | | | | | |
| | | (a) Description o | f costs | (b) Date amor begin | | An | (c nortizab | c) ble amo | ount | | (d) Code se | | (e Amorti: perio | zation d or | Amortiza | (f) ation for th | ns year |
| 42 | Amad | zation of occ | te that house door | | | Vear /cr | a inct | tructio | , ne | | | · · · | percer | nage | | | |
| 42 | Amort | zation of cos | sts that begins duri | ng your 20 | is lax | year (St | e 11151 | ii ucile | лıs) | | | | Γ | | | | |
| _ | | | | | | | | | | \dashv | | | | | | | |
| 42 | A === ==== | | ita that haven bee | | 10 4 | <u> </u> | | | | | | | l | -+ | | | |
| | | | sts that began before ts in column (f). Se | | | | ere to | repor | <u>: :</u> | | | <u></u> | · · · · · | 43 | | | |

| FORM 990-T | (M) | OTHER | DEDUCTIONS | | STATEMENT | 2 |
|-------------|--------------------|------------------------------|------------|----------------------------|-------------|--------------|
| DESCRIPTION | 4 | | | | AMOUNT | |
| INSURANCE | _ | | | | 24,2 | 297. |
| UTILITIES | | | | | 107,2 | 293. |
| CAM ALLOCA | rion | | | | 5,6 | 507. |
| TELEPHONE | | | | | 1 | L 69. |
| SUPPLIES | | | | | 11,0 | 05. |
| CURATORIAL | EXPENSES | | | | 301,7 | 755. |
| OTHER DEPAI | RTMENTAL EXPENSES | | | | 85,4 | 105. |
| | | | | | | |
| TOTAL TO SO | CHEDULE M, PART II | I, LINE 27 | | | 535,5 | 31. |
| TOTAL TO SO | | | LOSS DEDU | CTION | 535,5 | |
| | | | S USLY | CTION LOSS REMAINING | <u> </u> | |
| SCHEDULE M | NET | OPERATING LOSS PREVIOU | S USLY | LOSS | STATEMENT | 3 |

| FORM 990-T (M) | DEDUCTIONS | CONNECTED | WITH RE | NTAL | INCOME | STATEMENT 5 |
|------------------|--------------|------------|------------|--------------|----------|-------------|
| DESCRIPTION | | | | VITY IBER | AMOUNT | TOTAL |
| DIRECT EXPENSES | | | | | 401,650. | |
| | | - SUBTOTA | L – | 1 | 0. | 401,650. |
| TOTAL TO FORM 99 | 0-т, schedui | LE C, COLU | MIN 3 | | | 401,650. |

2 OMB No 1545-0047

Department of the Treasury

For calendar year 2019 or other tax year beginning

60,874.

▶ Go to www.irs.gov/Form990T for instructions and the latest information.

60,874.

Internal Revenue Service ▶ 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 THE ROCK AND ROLL HALL OF FAME Employer identification number Name of the organization 34-1520995 AND MUSEUM, INC. 900004 Unrelated Business Activity Code (see instructions) Describe the unrelated trade or business

SECTOR 72: ACCOMMODATIONS Part I Unrelated Trade or Business Income (C) Net (A) Income (B) Expenses 60,874. 1 a Gross receipts or sales 60,874. c Balance **b** Less returns and allowances 2 Cost of goods sold (Schedule A, line 7) 60,874 60,874. 3 Gross profit Subtract line 2 from line 1c 4 a Capital gain net income (attach Schedule D) 4a 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 statement) Rent income (Schedule C) 6 6 7 Unrelated debt-financed income (Schedule E) 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) Exploited exempt activity income (Schedule I) 10 10

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)

11

12

13

| 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 | Depreciation (attach Form 4562) | | |
| 21 | Less depreciation claimed on Schedule A and elsewhere on return | 21b | |
| 22 | Depletion | 22 | |
| 23 | Contributions to deferred compensation plans | 23 | |
| 24 | Employee benefit programs | 24 | |
| 25 | Excess exempt expenses (Schedule I) | 25 | |
| 26 | Excess readership costs (Schedule J) | 26 | |
| 27 | Other deductions (attach schedule) | 27 | |
| 28 | Total deductions. Add lines 14 through 27 | 28 | 0. |
| 29 | Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 | 29 | 60,874. |
| 30 | Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see | | |
| | instructions) | 30 | 0. |
| 31_ | Unrelated business taxable income. Subtract line 30 from line 29 | 31 | 60,874. |

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

Advertising income (Schedule J)

Total. Combine lines 3 through 12

Other income (See instructions, attach schedule)

12

| Form 990-T (2019) THE ROCK . | AND ROLI | HALL OF | FAME | | | | Page 3 |
|---|--------------------|--|---|------------|---|--|---------------|
| AND MUSEU | M, INC. | | | | 34-1520 | 995 | |
| Schedule A - Cost of Goods | Sold. Enter | method of invent | ory valuation N/ | <u> </u> | | | |
| 1 Inventory at beginning of year | 1 | | 6 Inventory at end of ye | ar | L | 6 | |
| 2 Purchases | 2 | | .7 Cost of goods sold. S | Subtract I | ine 6 | | |
| 3 Cost of labor | 3 | | from line 5. Enter here | e and in F | Part I, | | |
| 4a Additional section 263A costs | | | line 2 | | L | 7 | |
| (attach schedule) | 4a | | 8 Do the rules of section | n 263A (\ | with respect to | <u> </u> | Yes No |
| b Other costs (attach schedule) | 4b | | property produced or | acquired | for resale) apply to | | |
| 5 Total. Add lines 1 through 4b | 5 | | the organization? | | | | X |
| Schedule C - Rent Income (| From Real | Property and | Personal Property | Lease | d With Real Prope | rty) | |
| (see instructions) | | _ | | | | | |
| Description of property | | | | | | | |
| (1) | | <u>.</u> . | | | | | |
| (2) | | | | | | | |
| (3) | | | | | | | |
| (4) | | | | | | | |
| | 2. Rent receiv | ed or accrued | | | | | |
| (a) From personal property (if the perconnection for personal property is more 10% but not more than 50%) | centage of than | of rent for pe | nd personal property (if the percent ersonal property exceeds 50% or if t is based on profit or income) | age | 3(a) Deductions directly cocolumns 2(a) and | onnected with the inc 2(b) (attach schedule | ome in |
| (1) | | | | | | | |
| (2) | | | | | | - | |
| (3) | | | | | | | |
| (4) | _ | | | | | | |
| Total | 0. | Total | | 0. | | - | |
| (c) Total income. Add totals of columns | | ter | | | (b) Total deductions. | | |
| here and on page 1, Part I, line 6, column | | | | 0. | Part I, line 6, column (B) | <u> </u> | 0. |
| Schedule E - Unrelated Deb | t-Financed | Income (see | nstructions) | | | _ | |
| | | | 2. Gross income from | | Deductions directly conne to debt-finance | | Ð |
| 1. Description of debt-fir | nanced property | | or allocable to debt- financed property | (a) | Straight line depreciation (attach schedule) | (b) Other de (attach sch | |
| (1) | | | | 1 | | | |
| (2) | | | | | | | |
| (3) | | | | | | | |
| (4) | | | | | | | |
| Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | of or e | adjusted basis allocable to nced property h schedule) | 6. Column 4 divided by column 5 | | 7. Gross income reportable (column 2 x column 6) | 8. Allocable (column 6 x tota 3(a) and | al of columns |

Form 990-T (2019)

0.

0.

Enter here and on page 1,

Part I, line 7, column (B)

(1)

(2)

(3)

(4)

Totals

%

%

%

%

Enter here and on page 1, Part I, line 7, column (A)

0.

Total dividends-received deductions included in column 8

ENTITY 3 OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning

► 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

THE ROCK AND ROLL HALL OF FAME

Employer identification number

34-1520995 AND MUSEUM, INC. Unrelated Business Activity Code (see instructions) 525990 Describe the unrelated trade or business > SECTOR 52: INVESTMENT INCOME Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales b Less returns and allowances c Balance ▶ Cost of goods sold (Schedule A, line 7) 2 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 c Capital loss deduction for trusts 4c 5 Income (loss) from a partnership or an S corporation (attach 1,739. 1,739. statement) STATEMENT 4 Rent income (Schedule C) 6 6 7 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) 10 Exploited exempt activity income (Schedule I) 10 11 Advertising income (Schedule J) 11 12 Other income (See instructions, attach schedule) 12 1,739. 1,739. 13

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)

| 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 | Depreciation (attach Form 4562) | | | |
| 21 | Less depreciation claimed on Schedule A and elsewhere on return 21a | | 21b | |
| 22 | Depletion | | 22 | |
| 23 | Contributions to deferred compensation plans | | 23 | |
| 24 | Employee benefit programs | | 24 | |
| 25 | Excess exempt expenses (Schedule I) | | 25 | |
| 26 | Excess readership costs (Schedule J) | | 26 | |
| 27 | Other deductions (attach schedule) | | 27 | |
| 28 | Total deductions. Add lines 14 through 27 | | 28 | 0. |
| 29 | Unrelated business taxable income before net operating loss deduction. Subtract line 28 fr | rom line 13 | 29 | 1,739. |
| 30 | Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 | (see | | |
| | instructions) | L | 30 | 0. |
| 31 | Unrelated business taxable income Subtract line 30 from line 29 | | 31 | 1,739. |

LHA For Paperwork Reduction Act Notice, see instructions.

Total. Combine lines 3 through 12

Schedule M (Form 990-T) 2019

| FORM 990-T (M) | INCOME (LOSS) FROM PARTNERSHIPS | STATEMENT 4 |
|----------------------|---------------------------------|-------------------------|
| DESCRIPTION | | NET INCOME OR (LOSS) |
| BEL PRO PARTNERS - 0 | ORDINARY BUSINESS INCOME (LOSS) | 1,739. |
| TOTAL INCLUDED ON SO | CHEDULE M, PART I, LINE 5 | 1,739. |