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Form <b>990-T</b>	Exem		rended to nization B			ss Income Ta	∽ ax Returr		OMB No 1545-0047		
Form OOO I	ZXOIII	(a	nd proxy tax u	under	sec	ction 6033(e))	ax HotaH	·			
	For calendar year 2019 or other tax year beginning JUL 1, 2019, and ending JUN 30, 2020 2019										
Department of the Treasury Internal Revenue Service		nter SSN numbe	rs on this form as ıt			ns and the latest informa le public if your organiza			Open to Public Inspection for 501(c)(3) Organizations Only		
A Check box if address changed	Name of	organization (	Check box if na	ame char	nged :	and see instructions )		Emp	oyer identification number loyees' trust, see ictions)		
B Exempt under section	Print ROSE	CRANCE,	INC.					3			
X 501(c)(3 0°) 408(e) 220(e)	I Tuno I	street, and roon	n or suite no. If a P.C ORD RD	O box, s	see in:	structions.			E Unrelated business activity code (See instructions )		
408A530(a)			vince, country, and 2	ZIP or fo	oreign	postal code					
529(a)	·	FORD, I	· · · · · · · · · · · · · · · · · · ·			<del></del>		900	099	1 +	
C Book value of all assets at end of year	F Group	exemption num	ber (See instructions	s.) <b>&gt;</b>		F04/->		\ <b>A a.k</b>	Other tweet	4	
at end of year 85,509,8 H Enter the number of the o	38 G Check	organization typ	e ► X 501(C	corpor:	ation	501(c) trust	401(a		Other trust	1	
trade or business here	-		Jusiliesses.			<del></del>	he only (or first) u complete Parts I-V				
describe the first in the b			us sentence, comple	ete Parts	Lanc						
business, then complete	,		ac comonoc, compre			, , , , , , , , , , , , , , , , , , ,					
I During the tax year, was		subsidiary in an	affiliated group or a	parent-s	subsid	diary controlled group?	<b></b>	Ye	es X No		
If "Yes," enter the name a											
J The books are in care of							ne number 🕨 8		<del>,</del>		
	d Trade or Bu	usiness inc	ome		_	(A) Income	(B) Expense	S	(C) Net		
1 a Gross receipts or sale		<del></del>			.				İ		
b Less returns and allow	<u> </u>		<b>c</b> Balance	· —	1c						
<ul><li>2 Cost of goods sold (S</li><li>3 Gross profit. Subtract</li></ul>	_				3						
<ul><li>3 Gross profit. Subtract</li><li>4a Capital gain net incom</li></ul>	_				4a						
b Net gain (loss) (Form			n 4797)	F	4b						
c Capital loss deduction		177 (attagn 1 011)	141511	-	4c						
5 Income (loss) from a		S corporation (a	ttach-statement)		5						
6 Rent income (Schedu	•	,			6						
7 Unrelated debt-finance	ed income (Schedi	ule E)			7	5,565.	6,7	56.	-1,191.		
8 Interest, annuities, roy	alties, and rents fro	om a controlled	organization (Schedu	ůle F)	8						
9 Investment income of	a section 501(c)(7	7), (9), or (17) o	rganızatıon (Schedul	· —	9						
10 Exploited exempt active	vity income (Sched	fule I)			10						
11 Advertising income (S	•				11						
12 Other income (See ins	·	chedule)			12	5,565.	6 7	56.	-1,191.		
13 Total. Combine lines Part II Deductio	3 through 12	n Flsewher	A (See instruction		13	tions on deductions)	0,7	50.			
(Deductions	must be directly	connected w	ith the unrelated b	ousines	s inc			т			
14 Compensation of offi	icers, directors, an	d trustees (Sche	POLE REC	孙 2	٠,١			14			
<ul><li>15 Salaries and wages</li><li>16 Repairs and mainten</li></ul>						1.5		15 16			
17 Bad debts	ance		MAY 2	24 20	121			17			
18 Interest (attach sche	dule) (see instructi	ions)						18			
19 Taxes and licenses	a 2.10) (000 m.o 201	,	OGD	FN.	UT	į		19	-		
20 Depreciation (attach	Form 4562)					20	51,674		,		
21 Less depreciation cla	umed on Schedule	A and elsewher	e on return			21a	51,674.	21b	0.		
22 Depletion								22			
23 Contributions to defe	erred compensation	n plans						23	<u> </u>		
24 Employee benefit pro	•							24	<del>\</del>		
25 Excess exempt exper								25	<del></del>		
26 Excess readership co								26	<del>\ \</del>		
27 Other deductions (at		L 07						27	1		
28 Total deductions A	=		a loce deduction. Col	ibtroot le	<sub>በብ</sub> ሳብ	from line 12		28	-1,191.		
29 Unrelated business to								29			
30 Deduction for net op (see instructions)	erauny 1055 dhSiN(	j ili tax yedis De	girning on or after J	Janual y	1, 20	10		30	`₀.	0	
31 Unrelated business to	axable income. Sui	htract line 30 fro	nm line 29					31	-1,191.	10	
923701 01-27-20 LHA F0			-						Form <b>990-T</b> (2019)	,	
				1				11	•		

Schedule A - Co	st of Goods	Sold. Enter	method of invent	ory valuation   N/A	<u> </u>				
1 Inventory at beginn		1	,	6 Inventory at end of year	ar		6		
2 Purchases		2		7 Cost of goods sold Subtract line 6					
3 Cost of labor		3		from line 5. Enter here	and in Part	ı,			
4 a Additional section 2	263A costs			line 2			7		
(attach schedule)		4a		8 Do the rules of section	n 263A (with	respect to		Yes	No
b Other costs (attach	schedule)	_4b		property produced or	acquired for	resale) apply to			
5 Total Add lines 1		_   5		the organization?					<u></u>
(see instructions)	nt Income (	From Real	Property and	Personal Property L	_eased V	Vith Real Prope	erty)		
1 Description of property									
(1)				· ·					
(2)			•						
(3)					·				
(4)									
		2 Rent receive	ed or accrued			O(a) Daduations dispatible		46-46	
rent for persor	property (if the perc nal property is more not more than 50%)	entage of than	of rent for pe	d personal property (if the percenta rsonal property exceeds 50% or if is based on profit or income)	age	3(a) Deductions directly c columns 2(a) and	2(b) (attac	h schedule)	•
(1)									
(2)									
(3)									
(4)									
Total		0.	Total		<u> </u>				
(c) Total income Add to here and on page 1, Part	I, line 6, column	(A)	<b>&gt;</b>		Ènt	Total deductions er here and on page 1, t I, line 6, column (B)	<b>-</b>		0.
Schedule E - Unr	elated Deb	t-Financed	Income (see	nstructions)					
				Gross income from or allocable to debt-		Deductions directly conne to debt-finance	d property		
Description of debt-financed property				financed property	(a) Straight line depreciation (attach schedule)  STATEMENT 1		(b) Other deductions (attach schedule)  STATEMENT 2		
(1) BUILDING				248,427.	STA	TEMENT 1 51,674.	STA	249,9	<u> </u>
(1) BOTEDTING (2)				240,427.	<del>                                     </del>	31,074.		447,7	14.
(3)					<del> </del>				
(4)									
4 Amount of average debt on or allocable to d property (attach so	ebt-financed	of or a debt-final	adjusted basis illocable to nced property n schedule)	6 Column 4 divided by column 5	rep	Gross income ortable (column 2 x column 6)		Allocable deducti mn 6 x total of co 3(a) and 3(b))	
(1)	51,968.	2,	,318,451.	2.24%		5,565.		6,7	56.
(2)				%					
(3)				%	<u> </u>	<b></b>			
(4)				%					
						nere and on page 1, line 7, column (A)		here and on page	
					Part I,	inte 7, column (A)	''''	*, * , oo.a (	
Totals				•	Part I,	5,565.	'aı	6,7	56.

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(2) (3) (4)

0

0

Totals (carry to Part II, line (5))

<u>36-2235167</u> 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) 4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7 7 Excess readership costs (column 6 minus 3 Direct 5 Circulation 6 Readership advertising 1 Name of periodical column 5, but not more than column 4) advertising costs ıncome costs (1) (2) (3) (4) 0. 0 0. Totals from Part I Enter here and on page 1, Part I, Enter here and on page 1, Part I, Enter here and on page 1, Part II, line 26 line 11, col (B) line 11, col (A) 0 0. 0 Totals, Part II (lines 1-5) Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3 Percent of time devoted to business Compensation attributable to unrelated business 2 Title 1 Name

% (1) % (2) % (3) % (4) 0.  $\triangleright$ Total Enter here and on page 1, Part II, line 14

Form 990-T (2019)

FORM 990-T	SCHEDULE E - DEPRECIA	ATION DEDUCTI	ON	STATEMENT 1
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION	- SUBTOTAL -	- 1	51,674.	51,674.
TOTAL OF FORM 990-1	, SCHEDULE E, COLUMN	3(A)		51,674.
FORM 990-T	SCHEDULE E - OTHER	R DEDUCTIONS		STATEMENT 2
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
UTILITIES PROPERTY TAXES MANAGEMENT FEE LEASING FEE MAINTENANCE OTHER TAXES INSURANCE			24,589. 70,104. 12,300. 13,504. 56,291.	
OCCUPANCY PROFESSIONAL FEES INTEREST	- SUBTOTAL -	- 1	11,671. 450. 59,523.	249,914.
TOTAL OF FORM 990-1	, SCHEDULE E, COLUMN	3(B)		249,914