Form 990-T

Department of the Treasury

address changed

]220(e)

7530(a)

Exempt under section

1a Gross receipts or sales

3

6 7

9

10

11 12

14

15

31

Internal Revenue Service

X 501(c)(3

408(e)

408A

529(a)

Book v. at end of year 50 Book value of all assets

Salaries and wages 16 Repairs and maintenance 17 Bad debts Interest (attach schedule) (see instructions) 18 Taxes and licenses Charitable contributions (See instructions for limitation rules) OGDEN, UT Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on return Depletion Contributions to deferred compensation plans Employee benefit programs 26 Excess exempt expenses (Schedule I) Excess readership costs (Schedule J) Other deductions (attach schedule) 28 Total deductions Add lines 14 through 28 29 30 √Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)

-80.641. -80,641

Form 990-T (2018)

| 5/ | During the tax year, did the organization received | re a distribution from, or was it the gra | antor of, or transferor to, | a ioreign musir | | | | -23 |
|------|--|---|--|---------------------------------|--------|---|------|-----|
| | If "Yes," see instructions for other forms the o | rganization may have to file | | | | | | |
| 58 | Enter the amount of tax-exempt interest receive | ved or accrued during the tax year | \$ | | | | | |
| ign | Under penalties of perury, declare that I have exa corred, and comflete Declaration of preparer (other | mined this return, including accompanying so er than taxpayer) is based on all information o | hedules and statements, and f which preparer has any know | to the best of my kno vledge | wiedge | and belief, it is true, | | |
| lere | Signature of officer | Date P | RESIDENT | | the p | the IRS discuss this in reparer shown below ictions)? | (see | No |
| | Print/Type preparer's name | Preparer's signature | Date | Check | ıf | PTIN | | |

self- employed 5/2/2020 Paid MICHAEL BASS Preparer Firm's name ► RSM US LLP Use Only 117 E. MAIN ST.,

IL 61401

Firm's address ► GALESBURG,

P00458970 42-0714325 Firm's EIN

Phone no. 309 - 342 - 8026Form 990-T (2018)

| Schedule A - Cost of Good | s Sold. Enter | method of inver | ntory v | aluation ► N/A | | | | | |
|--|-------------------|---|----------|--|-----------|---|----------|---|--|
| 1 Inventory at beginning of year | 1 | | | Inventory at end of year | ar | | 6 | | |
| 2 Purchases | 2 | | _] 7 | Cost of goods sold Si | ubtract l | line 6 | | | |
| 3 Cost of labor | 3 | | | from line 5. Enter here | and in I | Part I, | | | |
| 4a Additional section 263A costs | | | 1 | line 2 | | | 7 | <u> </u> | |
| (attach schedule) | 4a | | _ 8 | Do the rules of section | 263A (| with respect to | | Yes | No |
| Other costs (attach schedule) | 4b | | _ | property produced or a | acquired | for resale) apply to | | | ئـــــــــــــــــــــــــــــــــــــ |
| 5 Total Add lines 1 through 4b | 5 | | 1 | the organization? | | | | | <u>L</u> |
| Schedule C - Rent Income (see instructions) | (From Real | Property and | d Per | sonal Property L | .ease | d With Real Prop | perty) | | |
| 1 Description of property | | | | | | | | | |
| (1) | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | _ <u>_</u> | | | | | |
| (4) | | | | | | | | | |
| | 2 Rent receiv | ed or accrued | | | | 2(a) Dadwatiana direct | | tod with the receme in | _ |
| (a) From personal property (if the per rent for personal property is more 10% but not more than 50%) | e than | of rent for | personal | onal property (if the percental property exceeds 50% or if ed on profit or income) | ge | 3(a) Deductions directl columns 2(a) a | | attach schedule) | 1 |
| (1) | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | _ | | | | | |
| (4) | | | | | | | | | |
| Total | 0. | Total | | | 0. | | | | |
| (c) Total income. Add totals of columns here and on page 1, Part I, line 6, column | n (A) | • | | | 0. | (b) Total deductions Enter here and on page 1, Part I, line 6, column (B) | • | | 0. |
| Schedule E - Unrelated Del | ot-Financed | Income (see | ınstru | ctions) | ī | | | | |
| | | | 1 2 | Gross income from | | 3 Deductions directly control to debt-finant | | | |
| 1 Description of debt-fi | nanced property | | | or allocable to debt- financed property | (a) | Straight line depreciation (attach schedule) | | (b) Other deduction (attach schedule) | |
| (1) | | | | | | | | | |
| (2) | | | | | · | - | _ | | |
| (3) | | | | | | | | | |
| (4) | | (| | | | | | | |
| 4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | of or a | e adjusted basis allocable to inced property h schedule) | 6 | Column 4 divided by column 5 | | 7 Gross income reportable (column 2 x column 6) | , | 8 Allocable deduct (column 6 x total of co | |
| (1) | <u> </u> | | + | % | | | 1 | | |
| (2) | | | 1 | % | | | | _ | |
| (3) | | | | % | | | | | |
| (4) | | | 1 | % | | | | | |
| 3, | • | | | | | inter here and on page 1, Part I, line 7, column (A) | | Enter here and on pag Part I, line 7, column | |
| Totals | | | | _ | | 0 | . | | 0. |
| Total dividends-received deductions | ncluded in columi | n 8 | | | | <u>-</u> | <u> </u> | | 0. |

. -3

| Schedule r - Interest, A | | | , | 1 ' | Controlled O | | | | - (000 111 | struction | | |
|-------------------------------------|-------------------|--|----------------------------------|--|--|---------------------------------|--|----------------------------------|-----------------------------------|--------------------------|---|--|
| 1 Name of controlled organizat | ion | 2 Employer identification number | | 3 Net uni | related income | 4 Tot | al of specified | 5 Pa | rt of column 4 led in the cont | that is | 6 Deductions directly connected with income | |
| • | | | | (IOSS) (SE | e instructions) | payr | nents made | | ation's gross | | in column 5 | |
| (1) | | | | | | | | | | | · | |
| (2) | | | | | | | | | | | | |
| (3) | | | | | | | - | | | | | |
| (4) | | | | Ĭ . | | | | | | | | |
| Nonexempt Controlled Organi | zations | | | | | | | | | | | |
| 7 Taxable Income | | unrelated incon (see instruction | | 9 Total | of specified payr made | nents | 10 Part of colu in the controlli gross | mn 9 tha ng orgar s income | nization's | | eductions directly connected in income in column 10 | |
| (1) | | | | | | | | | - | | - | |
| _(2) | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | |
| _(4) | <u> </u> | | | | | _ | | | | | | |
| | | | | | | | Add colun Enter here and line 8, c | | e 1, Part I, | l | dd columns 6 and 11 nere and on page 1, Part I, line 8, column (B) | |
| Totals | | | | | | | | | 0. | | 0. | |
| Schedule G - Investme | nt Inco | me of a | Section | 501(c)(7 | 7), (9), or (| 17) Org | anization | | | L | | |
| (see insti | ructions) | | | | ľ | · · · | 3 Deduction | | 1 _ | | 5 Total deductions | |
| 1 Desc | ription of inc | ome | | | 2 Amount of | income | directly conne (attach sched | cted | 4 Set- (attach s | asides schedule) | and set-asides (col 3 plus col 4) | |
| (1) | | | | | | | _ | | | | | |
| (2) | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | |
| (4) | · | | | | | | | | | | | |
| | | | | | Enter here and o Part I, line 9, co | | | | | | Enter here and on page 1 Part I, line 9, column (B) | |
| Totals | | | | > | | 0. | | | | | 0. | |
| Schedule I - Exploited (see instru | _ | t Activity | Incom | e, Other | Than Adv | ertisin | g Income | | | | | |
| | | | 3 | penses | 4 Net incom | ne (loss) | _ | | | | 7 Excess exempt | |
| 1 Description of exploited activity | unrelate incor | Gross d business ne from business | directly of with pro of un | penses connected oduction related s income | from unrelated business (co minus columi gain, compute through | lumn 2 n 3) if a e cols 5 | 5 Gross inco from activity t is not unrelat business inco | hat ed | attribut | enses able to mn 5 | expenses (column 6 minus column 5, but not more than column 4) | |
| (1) | | | | | | | | | | | | |
| (2) | | | | | | | | | | - | | |
| (3) | | | | | | | - | | | <u> </u> | | |
| (4) | | | | | | | _ | | | | | |
| | page | ere and on 1, Part I, I, col (A) | page ' | re and on 1, Part I, , col (B) | | | | | • | | Enter here and on page 1, Part II, line 26 | |
| Totals | | 0. | | 0. | | | | | | | 0. | |
| Schedule J - Advertisir | ng Inco | me (see | nstruction | ns) | | | | | | | | |
| Part I Income From I | Periodio | cals Rep | orted o | n a Con | solidated | Basis | | | | | | |
| 1 Name of periodical | | 2 Gross advertising income | | 3 Direct ertising costs | 4 Advert or (loss) (cc col 3) If a ga cols 5 th | ol 2 minus ain, comput | 5. Circulat e income | | 6 Read cos | ership ts | 7 Excess readership costs (column 6 minus column 5, but not more than column 4) | |
| (1) | | | | | | | | | | | | |
| (2) | | | | | | | | | | | | |
| (3) | | | | | | | | | | | | |
| (4) | | | | | | | | | | | | |
| Totals (carry to Part II, line (5)) | • | | 0. | 0 | | - | | | | | 0. | |

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

| 1 Name of periodical | | 2 Gross advertising income | 3 Direct advertising costs | 4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 | 5 Circulation income | 6 Readership costs | 7 Excess readership costs (column 6 minus column 5, but not more than column 4) |
|-----------------------------|----------|--|--|--|----------------------|--------------------|---|
| (1) | _ | | _ | | · | | |
| (2) | | | | | | | |
| (3) | | | | | | | |
| (4) | | | | | | | |
| Totals from Part I | • | 0. | 0. | | | | 0 |
| | | Enter here and on page 1, Part I, line 11, col (A) | Enter here and on page 1, Part I, line 11, co! (B) | _ | الأرابة الإرابات | | Enter here and on page 1, Part II, line 27 |
| 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 (2018)

| FORM 990-T, | OTHER DEDUCTIONS | STATEMENT 1 | | |
|---------------------------------------|------------------|--|--|--|
| DESCRIPTION | | AMOUNT | | |
| SUPPLIES UTILITIES MISCELLANEOUS RENT | | 40,709. 7,192. 3,112. 28,699. | | |
| TOTAL TO FORM 990-T, PAG | E 1, LINE 28 | 79,712. | | |

| FORM 990-T | NET | STATEMENT 2 | | |
|----------------------|--------------------|-------------------------------|--------------------|------------------------|
| TAX YEAR | LOSS SUSTAINED | LOSS PREVIOUSLY APPLIED | LOSS REMAINING | AVAILABLE THIS YEAR |
| 09/30/17 09/30/18 | 49,661. 73,460. | 0. | 49,661. 73,460. | 49,661. 73,460. |
| NOL CARRYOV | ER AVAILABLE THIS | YEAR | 123,121. | 123,121. |