31 Unrelated business taxable income Subtract line 30 from line 29
923701 01-27-20 LHA For Paperwork Reduction Act Notice, see instructions

31

-750.

Form 990-T (2019)

SEE STATEMENT 3

(see instructions)

Form 9	90-T (2019) ASSOCIATION OF SCHOOL BUSINESS OFFICIALS INTERNATIONAL	36-61246	10 Page 2
Par	rt III Total Unrelated Business Taxable Income	1	
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	-750.
`33	Amounts paid for disallowed fringes	33	
34	Charitable contributions (see instructions for limitation rules)	34	0.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction Subtract line 34 from the 1 mm of lines 32 and 33		-750.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36	<del></del>
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from the 35		-750.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)		,000.
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	<del>                                      </del>	, , , , ,
,	enter the smaller of zero or line 37	39	-750.
/ \ Pá	t IV Tax Computation	/	
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	0.
41	Trusts Taxable at Trust Rates. See instructions for tax computation, income tax on the amount on line 39 from:	70	
71	Tax rate schedule or Schedule D (Form 1041)	١, ١	
42	Proxy tax. See instructions	42	
43	Alternative minimum tax (trusts only)	43	
	Tax on Noncompliant Facility Income. See instructions	44	
44	······································	45	0.
\ Paf	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies  t V Tax and Payments	<del>-45</del> 1	<del></del>
		<del></del>	<del></del>
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)		
b			
C	· · · · · · · · · · · · · · · · · · ·	, f	
ď	· · · · · · · · · · · · · · · · · · ·		
	Total credits. Add lines 46a through 46d	48e	
47	Subtract line 46e from line 45	47	0.
48	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	48	
49	Total tax. Add lines 47 and 48 (see instructions)	49	0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	0.
	Payments: A 2018 overpayment credited to 2019	<b>'</b>	
1	2019 estimated tax payments	ļ	
(		Í	
	Foreign organizations: Tax paid or withheld at source (see instructions)		
(	Backup withholding (see instructions)	1	
1	Credit for small employer health insurance premiums (attach Form 8941)	Ì	
•	Other credits, adjustments, and payments: Form 2439	j	
	Form 4136 Other Total ▶ 51g	<b>}</b>	
52	Total payments. Add lines 51a through 51g	52	
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	53	
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	<del> </del>
56-		56	<del></del>
Par	t 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	<u>  Y</u>	es No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file	1	1
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country	1	
	here		<u> </u>
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?	<u> </u>	X
	If "Yes," see instructions for other forms the organization may have to file.	1	1
59	Enter the amount of tax-exempt interest received or accrued during the tax year > \$		
	Under payalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge correct, and complete Declaration of prepayer other than taxpayer) is based on all information of which preparer has any knowledge	ge and belief, it is true,	
Sign		y the IRS discuss this ret	um with
Here		preparer shown below (s	
	Signature of officer // Date / Title inst	ructions)? X Yes	No
	Print/Type preparer's name Preparer's signature Date Check if	PTIN	
Pai	and ampliand		
	parer LINDSEY KHOKHAR LINDSEY KHOKHAR 11/12/20	P017552	18
	Only Firm's name ► DIXON HUGHES GOODMAN LLP Firm's EIN ►	56-07479	
USE	1410 SPRING HILL ROAD, SUITE 500		
		703) 970-0	1400
923711	01-27-20	Form 990	

## Form 990-T (2019) OFFICIALS INTERNATIONAL

Schedule A - Cost of Good	s Sold. Enter	method of inver	ntory valuation N/A		<del></del>		
1 Inventory at beginning of year	1	Thethed of lifter	6 Inventory at end of year			6	
2 Purchases 2			7 Cost of goods sold Subtract line 6				
3 Cost of labor	3		from line 5 Enter here				
4 a Additional section 263A costs	-	<del></del>	line 2	and mi	αιτι,	7	
•	40		8 Do the rules of section	2634 (	l with respect to	Yes No	
(attach schedule)	4a		property produced or			1 1	
b Other costs (attach schedule)	4b		┥ ゜゜゜゜゜	acquireu	ioi resale) apply to		
5 Total Add lines 1 through 4b Schedule C - Rent Income	/Erom Real	Property and	the organization?	6256	d With Real Prop	!! ertv)	
(see instructions)	(i Tolli Tical	r roperty and					
1 Description of property							
(1)							
(2)							
(3)			· · · · · · · · · · · · · · · · · · ·				
(4)						<del> </del>	
(4)	2 Rent receiv	ed or accrued					
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	rcentage of e than	(b) From real a	and personal property (if the percenta personal property exceeds 50% or if nt is based on profit or income)	ige	3(a) Deductions directly columns 2(a) an	connected with the income in d 2(b) (attach schedule)	
(1)	·		·				
(2)			·				
(3)		*****	·				
(4)				_			
Total	0.	Total		0.		<u> </u>	
(c) Total income Add totals of columns here and on page 1, Part I, line 6, columns	2(a) and 2(b). En	ter		0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	<b>.</b>	
Schedule E - Unrelated Del		Income (see	instructions)		[		
			2 Gross income from		3 Deductions directly conr to debt-finance		
1. Description of debt-fi	inanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)					<del></del>		
(2)							
(3)							
(4)							
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property n schedule)	6 Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	Allocable deductions (column 6 x total of columns     3(a) and 3(b))	
(1)			%	<u> </u>			
(2)			%	<u> </u>			
(3)			%				
(4)			%				
1.7			1		nter here and on page 1,	Enter here and on page 1, Part I line 7, column (B)	
				'	_		
Totals		. 0	•	L	0.	<del></del>	
Total dividends-received deductions	nciuaea in columi	10			<b>&gt;</b>	· [	

Form 990-T (2019)

Form 990-T (2019) OFFICIALS INTERNATIONAL

(1) (2) (3) (4)  Totals  Schedule G - Investment I (see instructions)	8 Net unrelated income (see instructions)	(loss) (see	of specified payments made	Enter  Drganiza	nt of column 9 that controlling organ gross income	d 10	6 Deductions directly connected with income in column 5  Deductions directly connected with income in column 10  Add columns 6 and 11 er here and on page 1, Part I, line 8, column (B)
(2) (3) (4)  Nonexempt Controlled Organization 7 Taxable Income 8  (1) (2) (3) (4)  Totals  Schedule G - Investment is (see instruction)	Net unrelated income (see instructions)  Income of a Settions)		made  '), (9), or (17)	Enter  Drganiza	e controlling organ gross income add columns 5 an here and on page tine 8, column (	d 10	Add columns 6 and 11 er here and on page 1, Part I, line 8, column (B)
(2) (3) (4) Nonexempt Controlled Organization 7 Taxable Income 8 (1) (2) (3) (4)  Totals Schedule G - Investment is (see instruction)	Net unrelated income (see instructions)  Income of a Settions)		made  '), (9), or (17)	Enter  Drganiza	e controlling organ gross income add columns 5 an here and on page tine 8, column (	d 10	Add columns 6 and 11 er here and on page 1, Part I, line 8, column (B)
(3) (4) Nonexempt Controlled Organization 7 Taxable Income 8 (1) (2) (3) (4)  Totals Schedule G - Investment is (see instruction	Net unrelated income (see instructions)  Income of a Settions)		made  '), (9), or (17)	Enter  Drganiza	e controlling organ gross income add columns 5 an here and on page tine 8, column (	d 10	Add columns 6 and 11 er here and on page 1, Part I, line 8, column (B)
(4) Nonexempt Controlled Organization 7 Taxable Income 8  (1) (2) (3) (4)  Totals Schedule G - Investment I (see instruction	Net unrelated income (see instructions)  Income of a Settions)		made  '), (9), or (17)	Enter  Drganiza	e controlling organ gross income add columns 5 an here and on page tine 8, column (	d 10	Add columns 6 and 11 er here and on page 1, Part I, line 8, column (B)
7 Taxable Income 8  (1) (2) (3) (4)  Fotals Schedule G - Investment is (see instructions)	Net unrelated income (see instructions)  Income of a Settions)		made  '), (9), or (17)	Enter  Drganiza	e controlling organ gross income add columns 5 an here and on page tine 8, column (	d 10	Add columns 6 and 11 er here and on page 1, Part I, line 8, column (B)
7 Taxable Income 8  (1) (2) (3) (4)  Fotals Schedule G - Investment I (see Instruction	Net unrelated income (see instructions)  Income of a Settions)		made  '), (9), or (17)	Enter  Drganiza	e controlling organ gross income add columns 5 an here and on page tine 8, column (	d 10	Add columns 6 and 11 er here and on page 1, Part I, line 8, column (B)
(1) (2) (3) (4)  Totals Schedule G - Investment I (see instruction	income of a Settions)		made  '), (9), or (17)	Enter  Drganiza	e controlling organ gross income add columns 5 an here and on page tine 8, column (	d 10	Add columns 6 and 11 er here and on page 1, Part I, line 8, column (B)
(2) (3) (4)  Totals  Schedule G - Investment I (see instruction	tions)	ection 501(c)(7		► Enter  Drganiza	here and on page line 8, column (	e 1, Part I. Ento A)	er here and on page 1, Part I, line 8, column (B)
(2) (3) (4)  Totals  Schedule G - Investment I (see instruction	tions)	ection 501(c)(7		► Enter  Drganiza	here and on page line 8, column (	e 1, Part I. Ento A)	er here and on page 1, Part I, line 8, column (B)
otals Schedule G - Investment I (see instruction	tions)	ection 501(c)(7		► Enter  Drganiza	here and on page line 8, column (	e 1, Part I. Ento A)	er here and on page 1, Part I, line 8, column (B)
(4)  Fotals  Schedule G - Investment I (see instructi	tions)	ection 501(c)(7		► Enter  Drganiza	here and on page line 8, column (	e 1, Part I. Ento A)	er here and on page 1, Part I, line 8, column (B)
Totals Schedule G - Investment I (see instructi	tions)	ection 501(c)(7		► Enter  Drganiza	here and on page line 8, column (	e 1, Part I. Ento A)	er here and on page 1, Part I, line 8, column (B)
Schedule G - Investment i (see instructi	tions)	ection 501(c)(7			ation	0.	0
Schedule G - Investment i (see instructi	tions)	ection 501(c)(7			ation		<u>_</u>
(see instructi	tions)						
	on of income					1	
1 Description			2 Amount of incom	e direc	Deductions tly connected ch schedule)	4 Set-asides (attach schedule	5 Total deductions and set-asides (col 3 plus col 4)
(1)			1				
(2)							
(3)							
(4)				_			
			Enter here and on pag Part I, line 9, column (	1	കുറിയും കുറത്ത	and a second to the breath a	Enter here and on page Part I, line 9, column (B)
<sup>Totals</sup> Schedule I - Exploited Ex€	empt Activity li	ncome. Other		sina Inc	ome		
(see instructio							
exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss from unrelated trade business (column 2 minus column 3) If gain, compute cols through 7	or 5 G from	cross income activity that of unrelated ness income	6. Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5 but not more than column 4)
(1)							
(2)							
			<del>-</del>	_			
(3)				<del></del>	-		-
(4)	Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1 Part I, line 10 col (B)		. '	······································	<u>.</u>	Enter here and on page 1, Part II line 25
「otals ►	0.	0.				-1	0
Schedule J - Advertising I							
Part I Income From Per			solidated Bas	is			
	2.0		4 Advertising o	ain	<del>_,,</del>		7 Excess readership
1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	or (toss) (col 2 m col 3) If a gain col cols 5 through	nus 5 npute	Circulation income	6 Readership costs	costs (column 6 minus column 5, but not more than column 4)
(1) SCHOOL BUSINESS	3	-					
(2) AFFAIRS,							
(3) ACCENTS, ANNUAL	,						
(4) MEETING REPORTE		. 128,853	•	8	34,624.	410,636	•
Fotals (carry to Part II, line (5))	<b>▶</b> 265,647	. 128,853	. 136,79	) / B	84,624.	410,636	136,794 Form 990-T (201

Form 990-T (2019) OFFICIALS INTERNATIONAL

Partill 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		265,647.	128,853.				136,794.
		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)	<b>•</b>	265,647.	128,853.				136,794.
Calandula I/ Campag		o of Officers	liractora and	Tructoon /	-4		·

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

Form 990-T (2019)

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1
BUSINESS ACTIVITY

## ADVERTISING INCOME FROM PUBLICATIONS

TO FORM 990-T, PAGE 1

FORM 990-T OTHER DEDUCTIONS					STATEMENT 2
DESCRIPTIO	NO				AMOUNT
TAX PREPAR	750.				
TOTAL TO F	FORM 990-T, PAGE 1,	LINE 27			750.
FORM 990-7	r NET	OPERATING	G LOSS D	EDUCTION	STATEMENT 3
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOU APPLI	JSLY	LOSS REMAINING	AVAILABLE THIS YEAR
03/31/19	750.		0.	750.	750.
NOL CARRYO	OVER AVAILABLE THIS	750.	750.		