Form <b>990-T</b>	Exempt Organization Bus	siness Income T	ax Return	OMB No 1545-0047								
Form 330-1	(and proxy tax und		1912	0040								
	For calendar year 2019 or other tax year beginning	, and ending	1110	2019								
Department of the Treasury Internal Revenue Service	► Go to www.irs.gov/Form990T for in ► Do not enter SSN numbers on this form as it may			Open to Public Inspection for 501(c)(3) Organizations Only								
A Check box if	<del></del>	hanged and see instructions.)	Ď Em	ployer identification number								
address changed	NEIGHBORHOOD HOUSING S			ructions)								
B Exempt under section	Print GREEN BAY, INC.			39-1402851								
X = 501(d)(3)	Number, street, and room or suite no. If a P.O. box	x, see instructions.		elated business activity code instructions )								
408(e) 220(e)	437 S. UACRSON STREET											
408A530(a)	City or town, state or province, country, and ZIP or foreign postal code  GREEN BAY, WI 54301 531110											
C Book value of all assets at end of year	F Group exemption number (See instructions.)	<b>&gt;</b>	<u> </u>									
21,253,0	75. G Check organization type 🕨 🗶 501(c) corp	poration 501(c) trust	401(a) trust	Other trust								
			the only (or first) unrelate									
trade or business here			complete Parts I-V. If mo									
	lank space at the end of the previous sentence, complete Pa	irts I and II, complete a Schedule	M for each additional trac	e or								
business, then complete	Parts III-V. the corporation a subsidiary in an affiliated group or a parei	nt-cuberdiany controlled group?		res X No								
	and identifying number of the parent corporation.	nt-subsidiary controlled group.		es <u>III</u> NO								
	► ALEX MUELLER	Telepho	one number > 920	-448-3075								
Part I Unrelated	Trade or Business Income	(A) income	(B) Expenses	(C) Net								
1a Gross receipts or sale	s			/								
b Less returns and allow		1c										
2 Cost of goods sold (S	•	2		<del>                                     </del>								
3 Gross profit. Subtract		3		<del> -/</del>								
4a Capital gain net incon	·	4a										
	4797, Part II, line 17) (attach Form 4797)	4b 4c		1								
•	partnership or an S corporation (attach statement)	5										
6 Rent income (Schedu	•	6 86,907.	64,689	22,218.								
•	ed income (Schedule E)	7	7-7-3-1									
	valties, 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 activ	vity income (Schedule I)	10										
11 Advertising income (S	Schedule J)	11										
12 Other income (See in:	structions; attach schedule)	12										
13 Total. Combine lines		86,907.	64,689.	22,218.								
Part II Deduction	ns Not Taken Elsewhere (See instructions for must be directly connected with the unrelated busing	ess recomes an deductions.										
	icers, directors, and trustees (Schedule K)	EIVE	14	1								
15 Salaries and wages	icers, directors, and trustees (ochedule ky		15									
16 Repairs and mainten	ance SSB	NOV 0 9 2020	16									
17 Bad debts		MOA O S SOSS	17									
	dule) (see instructions)	OGDEN, UT	18									
19 Taxes and licenses		OGDETA, OT	19									
20 Depreciation (attach	Form 4562)	20	13,725.									
21 Less depreciation cla	umed on Schedule A and elsewhere on return	21a	13,725. 21b	0.								
22 Depletion			22	ļ <u></u>								
	erred compensation plans		23	<del> </del>								
24 Employee benefit pro		•	24	<del>                                     </del>								
25 Excess exempt exper			25	<del> </del>								
26 Excess readership co 27 Other deductions (at	·	•	26 27	<del> </del>								
	dd lines 14 through 27		27	0.								
,	axable income before net operating loss deduction. Subtract	t line 28 from line 13	29	22,218.								
,	erating loss arising in tax years beginning on or after Janual		TY									
(see instructions)	5		30	0.								
<b>/</b> '	axable income. Subtract line 30 from line 29		31									
	- Danamust Daduction Act Station and Instructions	<del></del> <del></del>		Form 990-T (2019)								

Form 9	90-T (2019	NEIGHBORHOOD HOUSING SERVICES OF	GREEN BAY,	INC.		3	9-1402	851	Page 2			
Par	t JII	Total Unrelated Business Taxable Income										
32	Totàl o	of unrelated business taxable income computed from all unrelated trades or	businesses (see instruct	tions)		32	2	22,2	18.			
33	Amour	nts paid for disallowed fringes			1	33						
34	Charita	able 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 sum of lines 32 and 33 35 22,											
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)  STMT 1 36 22											
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35											
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)  8 38 1,											
39												
		he smaller of zero or line 37	,			39			0.			
/ Paf	Part IV Tax Computation											
40	Organi	izations Taxable as Corporations. Multiply linc 39 by 21% (0.21)	- * * -		• •	<b>4</b> 0	-		0.			
41	-	Taxable at Trust Rates. See instructions for tax computation. Income tax	on the amount on line 39	from:	-							
		Tax rate schedule or Schedule D (Form 1041)			•	<b>→</b> 41	7					
42	Proxy	tax. See instructions				<b>→</b> 42						
43	-	ative minimum tax (trusts only)			_	43						
44		Noncompliant Facility Income. See Instructions				44						
. 45/	_	Add lines 42, 43, and 44 to line 40 or 41, whichever applies				45			0.			
Par	rt V	Tax and Payments										
468	Foreigi	n tax credit (corporations attach Form 1118; trusts attach Form 1116)	46a									
		credits (see instructions)	46b				·					
		al business credit. Attach Form 3800	46c									
		for prior year minimum tax (attach Form 8801 or 8827)	46d			┑,						
		credits. Add lines 46a through 46d		•		46e						
47		Subtract line 46e from line 45										
48		taxes. Check if from: Form 4255 Form 8611 Form 869	7	Other (	attach schedule		1		0.			
49		ax. Add lines 47 and 48 (see instructions)				49			0.			
50		net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k	), tine 3			50			0.			
		ents: A 2018 overpayment credited to 2019	51a	1		1						
	-	estimated tax payments	51b			7	İ					
		posited with Form 8868	51c									
		n organizations: Tax paid or withheld at source (see instructions)	5,10	1		Π,						
	-	p withholding (see instructions)	5/1e	•								
	•	for small employer health insurance premiums (attach Form 8941)	51f	1								
		credits, adjustments, and payments: Form 2439				_						
'	` —	Form 4136 Other	Total ▶ 5/1g				1					
52		payments. Add lines 51a through 51g				52	1					
53	-	sted tax penalty (see instructions). Check if Form 2220 is attached				53						
54		e. If line 52 is less than the total of lines 49, 50, and 53, enter amount owe	 I		•	<b>►</b> 5,4						
. 55		ayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amou				55						
_56-	Enter t	he amount of line 55 you want. Credited to 2020 estimated tax	•	Ref	unded 🕨	▶ 56						
Par	t VI	Statements Regarding Certain Activities and Othe	r Information (se	e instruc	tions)	,						
57	At any	time during the 2019 calendar year, did the organization have an interest in	or a signature or other a	authority				Yes	No			
	over a	financial account (bank, securities, or other) in a foreign country? If "Yes," t	he organization may hav	e to file								
	FinCEN	Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter t	ne name of the foreign c	ountry				<u> </u>				
	here	<b>&gt;</b>							X			
58	During	the tax year, did the organization receive a distribution from, or was it the	rantor of, or transferor t	to, a foreig	n trust?				X			
	If "Yes,	" see instructions for other forms the organization may have to file.										
59	Enter t	he amount of tax-exempt interest received or accrued during the tax year	<b>\$</b>									
		Inder penalties of perjury, I declare that I have examined this return, including accompanyli orrect, and complete. Declaration of preparer (other than taxpayer) is based on all informat			est of my know	vledge and	l belief, it is tru	e,				
Sign		///////////////////////////////////////		_	•	May the I	RS discuss thi	s return w	vith			
Here	9	1464 10/30/2020	PRESIDENT/	CEO		-	rer shown belo					
		Signature of officer Date	Title			instructio	ns)? 🗶 Y	es	No			
		Print/Type preparer's name Preparer's signature	Date	[ (	Check 🔲	ıf P1	rin					
Pai	d		1		self- employe							
	parer	BECKY MEYER BECKY MEYER	10/19	/20			201246					
	Only	Firm's name ► CLIFTONLARSONALLEN LLP			Firm's EIN	<u> </u>	<u>11-074</u>	674	9			
	•	PO BOX 23819				_						
		Firm's address ► GREEN BAY, WI 54305			Phone no.	920-						
923711	01-27-20						Form 9	90-T (	(2019)			

Form 990-T (2019) GREEN BAY, INC.

Schedule A - Cost of Goods Sold. Ente	er method of inven	tory va	luation N/A	<u></u>	<del></del>					
1 Inventory at beginning of year 1	-		Inventory at end of yea	ır		6				
2 Purchases 2		7	Cost of goods sold. St	ubtract I	ine 6	2 )				
3 Cost of labor 3		1								
4 a Additional section 263A costs		1	line 2	7						
(attach schedule) 4a		8	Do the rules of section	with respect to		Yes	No			
b Other costs (attach schedule) 4b		1	property produced or a	acquired	Ę					
5 Total Add lines 1 through 4b 5			the organization?							
Schedule C - Rent Income (From Real (see instructions)	Property and	Pers	onal Property L	.ease	d With Real Prop	erty)	<del>-</del>			
1. Description of property										
(1) 441-443 S JACKSON ST						=				
(2) 722 BODART							-			
(3)										
(4)										
•	ved or accrued			•						
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	ersonal	nal property (if the percenta property exceeds 50% or if d on profit or income)	age 3(a) Deductions directly connected with the Income in columns 2(a) and 2(b) (attach schedule)  SEE STATEMENT 2							
(1)			27,6	27.			19,3	54.		
(2)			59,2	80.			45,3	35.		
(3)			•				•			
(4)										
Total 0.	Total		86,9	07.						
(c) Total income. Add totals of columns 2(a) and 2(b). E here and on page 1, Part I, line 6, column (A)	<b>•</b>		86,9	07.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<b>&gt;</b>	64,6	89.		
Schedule E - Unrelated Debt-Finance	lincome (see	ınstruc	ctions)	,	•					
			. Gross income from or allocable to debt-	L	3. Deductions directly conto debt-finance	ed property				
Description of debt-financed property			financed property	(a)	Straight line depreciation (attach schedule)	(6	Other deduction attach schedule)	ns		
(1)		†				1				
(2)		1				1				
(3)						İ				
(4)					-	Ì				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)  5. Average adjusted basis of or allocable to debt-financed property (attach 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 column 3(a) and 3(b))				
(1)		Î	%							
(2)			%							
(3)			%							
(4)			%		· <u></u>					
					nter here and on page 1, art I, line 7, column (A)		here and on pag I, line 7, column (			
Totals			<b>▶</b>		0			0.		
Total dividends-received deductions included in colum	n 8							0.		

0. Form **990-T** (2019)

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

(2) (3) (4)

0.

0 .

1. Name of periodical						rculation 6.	Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)		
(1)	-						<u>-</u>			
(2)										
(3)										
(4)										
Totals from Part I	0.		0.					0 .		
,	Enter here and on page 1, Part I, line 11, col (A)	page 1	re and on , Part I, col (B)			Enter here and on page 1, Part II, line 26				
Totals, Part II (lines 1-5)	0.		0.					0.		
Schedule K - Compensation	n of Officers, I	Directo	rs, and	Trustees (see in	structio	ns)				
1. Name				2. Title		3. Percent of time devoted to business		ensation attributable related business		
(1)						9/2	Î			

Form 990-T (2019)

(2) (3) (4)

Total. Enter here and on page 1, Part II, line 14

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 1		
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR		
12/31/12	28,017.	7,517.	20,500.	20,500.		
12/31/13	28,564.	0.	28,564.	28,564.		
12/31/14	13,125.	0.	13,125.	13,125.		
12/31/15	99.	0.	99.	99.		
12/31/16	47,822.		47,822.	47,822.		
NOL CARRYO	VER AVAILABLE THIS	YEAR	110,110.	110,110.		

FORM 990-T	DEDUCTIONS	CONNECTED	WITH	RENTAL	INCOME	STATEMENT 2
DESCRIPTION				CTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION LOAN INTEREST REAL ESTATE TAXE REPAIRS & MAINTE CLEANING WASTE REMOVAL GAS/ELECTRIC WATER/SEWER OTHER/MISC LAWN CARE PROPERTY INSURAN	NANCE	- SUBTOTA	 	1	10,122. 984. 1,506. 1,067. 796. 537. 2,680. 196. 548. 678. 240.	19,354.
DEPRECIATION LOAN INTEREST REAL ESTATE TAXE LAWN CARE GAS/ELECTRIC WATER/SEWER PROPERTY MANAGEM PROPERTY INSURAN WASTE REMOVAL	ENT	- SUBTOTA		2	3,603. 16,340. 5,366. 4,144. 3,650. 3,812. 6,257. 1,820. 343.	45,335.
TOTAL TO FORM 99	0-т, SCHEDUI	LE C, COLUI	<b>1</b> 0N 3			64,689

## Form 4562

## **Depreciation and Amortization**

(Including Information on Listed Property)

▶ Attach to your tax return.

Business or activity to which this form relates

C-

1

OMB No 1545-0172

Identifying number

Sequence No 179

Department of the Treasury Internal Revenue Service

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

NEIGHBORHOOD HOUSING SERVICES OF 39-1402851 441-443 S JACKSON ST GREEN BAY, INC. 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. 1,020,000. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 3 2,550,000. 3 Threshold cost of section 179 property before reduction in limitation 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 married filling (a) Description of property (b) Cost (business use only) (c) Elected cost 7 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 R Q 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 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 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 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Don't include listed property ) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 14 15 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Don't include listed property. See instructions.) Section A 10,122. 17 17 MACRS deductions for assets placed in service in tax years beginning before 2019 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 System (c) Basis for depreciation (b) Month and year placed (d) Recovery period (q) Depreciation deduction (a) Classification of property ousiness/investment use only - see instructions) in service 19a 3-year property b 5-year property 7-year property 10-year property 15-year property 20-year property S/L 25 yrs. 25-year property g 27 5 yrs MM S/L Residential rental property h 1 27.5 yrs MM S/L MM S/L 39 yrs. i Nonresidential real property ММ S/L Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System S/L Class life 20a 12 yrs. S/L 12-year b MM 30 vrs. S/L 30-year 40 yrs ММ S/L 40-year Part IV Summary (See instructions.) 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), and line 21. 10,122. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr 23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs

Form 4562 (2019)	GRE	EN BAY,	INC	•							39-	1402	851	Page 2
	perty (Include a			er vehic	les, cert	tain aircr	aft, an	d property	used fo	or				
	ent, recreation, c iny vehicle for w		•	standar	d mileag	ge rate o	r dedu	cting lease	e expen	se, com	olete or	nly 24a,		
24b, colum	ns (a) through (c	) of Section A,	all of S	ection B	and Se	ection C	if appli	cable	•					
	A - Depreciation				_		_	T					٦ ٧ ٦	<del></del>
24a Do you have evidence	(b)	(c)	nt use cia		<u>                                     </u>	es (e)	_  NO	24b If "Y	T -		T		Yes _	<u>No</u> (i)
(a) Type of property	Date	Business/		(d) Cost or		sis for depre		Recovery	l .	(g) ethod/	1	(h) eciation	Elec	cted
(list vehicles first)	placed in service	investment use percentag		her basis	(bu	siness/inve use only		period		vention		uction		n 179 St
5 Special depreciation		<u> </u>		placed	n servic	e durina	the ta	x vear and	1					131
used more than 50%	•	•	эгорогчу	piacou i	11 001 110	o dami		or your and	•	25				
6 Property used more			ss use.							, 20				
<del></del>		9	6							-				
		9	6											
		9	6											
7 Property used 50% of	or less in a qualif	fied business u	ıse											
		9	6			•			S/L·					
		9	6						S/L·		<u> </u>			
	<u> </u>	9	6						S/L·					
8 Add amounts in colu	ımn (h), lınes 25	through 27. Er	nter here	and on	line 21,	page 1				28	<u> </u>			
9 Add amounts in colu	ımn (ı), line 26. E	nter here and	on line 7	<sup>7</sup> , page 1								29		
		S	ection (	B - Infor	mation	on Use	of Veh	nicles						
complete this section fo	r vehicles used l	by a sole propi	rietor, pa	artner, or	other "	more tha	an 5%	owner," o	related	person	If you p	rovided v	ehicles	
o your employees, first	answer the ques	stions in Section	n C to s	ee if you	meet a	n excep	tion to	completin	ig this s	ection fo	r those	vehicles.		
			1		1						T			
			l	a)		<b>b</b> )		(c)	I	(d)		(e)	(f	
O Total business/investm		uring the	Vel	nicle	Vehicle Vehicle		Vehicle		Vehicle		Vehicle			
year (don't include con	- '						<u> </u>				-			
1 Total commuting mil	_	•					<b>}</b>					-		
2 Total other personal	(noncommuting	) miles												
driven			<u> </u>	······	ļ		<del> </del>				-			
3 Total miles driven du									1		1			
Add lines 30 through		-1	\ <u>\</u>	l Na	Vaa	I No	Vaa		V	T No		T		
Was the vehicle available during off-duty hours	•	ai use	Yes	No	Yes_	No.	Yes	No No	Yes	No	Yes	No	Yes	No
5 Was the vehicle use		more		<u> </u>		1	<del>                                     </del>	<del>                                     </del>		<del>                                     </del>		<del>                                     </del>		
than 5% owner or re		more												
6 Is another vehicle av	•	nal				<del>                                     </del>								
use?	anable for perce									İ				
	Section C	- Questions for	or Empl	overs W	ho Prov	vide Veh	icles f	or Use by	Their I	Employe	es			
nswer these questions			•	•				•				ren't		
ore than 5% owners or	-		•	•	•				•					
7 Do you maintain a w	ritten policy stat	ement that pro	ohibits a	II person	al use o	f vehicle	s, ınclı	uding com	muting,	by your		-	Yes	No
employees?														
8 Do you maintain a w	ritten policy stat	ement that pro	ohibits p	ersonal (	use of v	ehicles,	except	commuti	ng, by y	our				
employees? See the	instructions for	vehicles used	by corp	orate off	icers, dı	rectors,	or 1%	or more o	wners					
9 Do you treat all use	of vehicles by en	nployees as pe	ersonal u	ıse?									L	
O Do you provide more	than five vehicl	les to your emp	oloyees,	obtaın ıı	nformati	on from	your e	mployees	about				ĺ	
the use of the vehicle	es, and retain th	e information r	eceived	?										<u> </u>
<ol> <li>Do you meet the req</li> </ol>	uirements conce	eming qualified	automo	obile den	nonstrat	tion use1	?							
Note: If your answer	to 37, 38, 39, 4	0, or 41 is "Ye	s," don'1	comple	te Secti	on B for	the co	vered veh	icles.					
Part VI Amortizatio	<u> </u>													
	a) on of costs	Date	(b) amortization		(C) Amortizab	ole		(d) Code		(e) Amortiza	tion	An	(f) nortization	
			begins		amount	-	_L_	section		period or per		fo	this year	
2 Amortization of costs	s that begins du	ring your 2019	tax yea	r.					1					
							+							
3 Amortization of costs		-	-								43			
14 Total. Add amounts	ın column (f). Se	e the instructi	ons for v	where to	report						44			

916252 12-12-19

Form 4562 (2019)

## 4562

Department of the Treasury Internal Revenue Service

## **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.

2

C-

OMB No 1545-0172

Sequence No 179

Business or activity to which this form relates NEIGHBORHOOD HOUSING SERVICES OF 722 BODART 39-1402851 GREEN BAY, INC. 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. 1,020,000. 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,550,000. Threshold cost of section 179 property before reduction in limitation 3 4 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 married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 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 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 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 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 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. Special Depreciation Allowance and Other Depreciation (Don't include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax vear 14 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) Part III | MACRS Depreciation (Don't include listed property. See instructions.) Section A 3,603. 17 MACRS deductions for assets placed in service in tax years beginning before 2019 17 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 System (c) Basis for depreciation (business/investment use only - see instructions) (b) Month and (d) Recovery period (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction in service <u>19a</u> 3-year property ь 5-year property 7-year property C 10-year property d 15-year property 20-year property f 25-year property 25 yrs. S/L q MM S/L 27.5 yrs h Residential rental property 27.5 yrs. MM S/L 1 ММ 39 yrs. S/L i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/L 30-year 30 yrs. ММ S/L C 40-year 40 vrs ММ S/L Part IV Summary (See instructions.) 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), and line 21 3,603. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr. 22 23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs

NEIGHBORHOOD HOUSING SERVICES OF GREEN BAY, INC. 39-1402851 Page 2 Form 4562 (2019) Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement ) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles) 24a Do you have evidence to support the business/investment use claimed? No 24b If "Yes," is the evidence written? No Yes Yes (c) (e) (d) Date Business Basis for depreciation Elected Type of property Cost or Recovery Method/ Depreciation section 179 placed in investment (business/investment (list vehicles first) other basis period Convention deduction use percentage use only) service cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 25 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L · % % S/L · % 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 29 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles. (f) (a) (b) (c) (d) (e) Vehicle 30 Total business/investment miles driven during the Vehicle Vehicle Vehicle Vehicle Vehicle year (don't include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use Yes No Yes No Yes No Yes No Yes No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles

Part VI Amortization

(a)
Description of costs

(b)
Date amortization
begins

Amortizable amount

Amortization
begins

Amortization
begins

Amortization
for this year

42 Amortization of costs that begins during your 2019 tax year

43 Amortization of costs that began before your 2019 tax year

44 Total. Add amounts in column (f). See the instructions for where to report

45 Amortization of costs that began before your 2019 tax year

46 Total. Add amounts in column (f). See the instructions for where to report

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