	Form	990-T	E	exempt Organization Bus			ax <u>R</u> eturn	۱	OMB No 1545-0047
		•		(and proxy tax und			2006	'	0040
		31	For cal	endar year 2019 or other tax year beginning $\ \ \overline{ extstyle { extstyle JUL}} \ \ extstyle 1$,	20	19 , and ending JUN	<u>1 30, 202</u>	<u>0</u>	2019
	Departi	ment of the Treasury		➤ Go to www irs gov/Form990T for ir				-	Open to Public Inspection for
		Revenue Service	▶	Do not enter SSN numbers on this form as it may			tion is a 501(c)(3)		Open to Public Inspection for 501(c)(3) Organizations Only
	A L	Check box if ' address changed	·	Name of organization (Check box if name of	-	•		Emp	loyer identification number ployees' trust see
				UNIVERSITY OF MISSOURI	ALU	JMNI			uctions)
		empt under section	Print	ASSOCIATION					3-0621788
	X	501(c 2 3)	or Type	Number, street, and room or suite no. If a P.O. bo			instructions)		
	\vdash	408(e) 220(e)	','	123 D W REYNOLDS ALUMN		4			
	\vdash	408A530(a)		City or town, state or province, country, and ZIP of	or foreigi	n postal code		F 4 1	0.00
	- 200	529(a) k value of all assets	L	COLUMBIA, MO 65211				541	. 800
	C at er	nd of year	<i>c</i> 2	F Group exemption number (See instructions.) G Check organization type ► X 501(c) cor		501(a) trust	401/2		Other trust
									Other trust
			-	tion's unrelated trades or businesses	3		he only (or first) un		
				VERTISING & GROUP TOURS			complete Parts I-V		
				ce at the end of the previous sentence, complete Pa	arts i an	o II, complete a Schedule i	witor each addition	ai traut	e or
		iness, then complete		oration a subsidiary in an affiliated group or a pare	nt-cuber	diary controlled group?			es X No
				ifying number of the parent corporation	111-30031	olary controlled group.	-		63 [11] 140
				CINDY FRAZIER		Telepho	ne number 🕨 (573	882-0011
		TI Unrelated	Trac	le or Business Income		(A) Income	(B) Expenses		(C) Net
	/	Gross receipts or sale					~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ 		1
		Less returns and allov		c Balance ▶	1c		*	-	
	_	Cost of goods sold (S			2		-	•	/
		Gross profit. Subtract			3		,	.,/.	1
		Capital gain net incom			4a		• /	,	(
		-		art II, line 17) (attach Form 4797)	4b				
		Capital loss deduction			4c		/		
	5	Income (loss) from a	partners	thip or an S corporation (attach statement)	5		·		- M M M M M M M M M M
	6	Rent income (Schedu	le C)		6			L.	CEIVED
	7	Unrelated debt-financi	ed incon	ne (Schedule E)	7		3052		V 27 2020 S
	_	•		nd rents from a controlled organization (Schedule F)	_		<u> </u> 8	NC	V 27 2020 Q
	9	Investment income of	a sectio	on 501(c)(7), (9), or (17) organization (Schedule G)					88
		Exploited exempt activ			10/		<u>_</u> _	QG	DEN UT
		Advertising income (S			11				
		Other income (See ins			12			`	,
	13 Par	Total Combine lines	3 throu	gh 12 ot Taken Elsewhere (See instructions fo	13	0.			
2	170			be directly connected with the unrelated busing					
2								14	<u> </u>
V.) 14 515	Salaries and wages	icers, un	rectors, and trustees (Schedule K)				15	
	15 16	Repairs and mainten	ance					16	
CANNED MAY	17	Bad debts	unoo					17	
2	18	Interest (attach sche	dule) (se	ee instructions)				18	
	19	Taxes and licenses	, ,					19	
Z	20	Depreciation (attach	Form 45	562)		20		,	
Z	21			n Schedule A and elsewhere on return		21a	•	21b	
Q	22	Depletion						22	
V.	23	Contributions to defe	erred col	mpensation plans				23	
	24	Employee benefit pro	ograms					24	
	25	Excess exempt exper						25	
	26	Excess readership co						26	
	27	Other deductions (at						27	
	28	Total deductions A						28	0.
	29			ncome before net operating loss deduction. Subtrac				29	0.
	30		erating l	oss arising in tax years beginning on or after Janua	ary 1, 20	18		<u> </u>	_
	/	(see instructions)						30	0.
	31			ncome Subtract line 30 from line 29				31	0.
	923701	1 01-27-20 LHA FO	or Paper	work Reduction Act Notice, see instructions					Form 990-T (2019)

Form 990	O-T (2019) UNIVERSITY OF MISSOURI ALUMNI ASSOCIATION	43-0621	788 Page
Part	Total Unrelated Business Taxable Income		
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32 5	5,818.
33	Amounts paid for disallowed fringes	38	
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 sum of lines 32 and 33		5,818.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	. 36	- /
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35		5,818.
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)		1,000.
39	Unrelated business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37.	30	<u> </u>
00	enter the smaller of zero or line 37	39 5	4,818.
Part	∬ Tax Computation	1 9	- /
40	Organizations Taxable as Corporations Multiply line 39 by 21% (0.21)	40 1	1,512.
	Trusts Taxable at Trust Rates See instructions for tax computation. Income tax and the amount on line 39 from		
	Tax rate schedule or Schedule D (Form 1041)	41	
42	Proxy tax See instructions	1/2	
	Alternative minimum tax (trusts only)	43	
	Tax on Noncompliant Facility Income See instructions	45	
	Total Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45 1	1,512.
Part		1 45 1 1	1,212.
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116), \ 46a	T - T	
	Other credits (see instructions)	1	
	General business credit Attach Form 3800	┤	
	1 1/1/	1	
		 11 	
	Total credits Add lines 46a through 46d	46e	1 [10
47	Subtract line 46e from line 45	47 1	1,512.
	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	48	1 510
	Total tax Add lines 47 and 46 (see instructions)	49 1	1,512.
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 51a 5, 007.	4 1	
b	2019 estimated tax payments $0051b$ $14,993$.	.	
C	Tax deposited with Form 8868]]	
d	Foreign organizations Tax paid or withheld at source (see instructions)	J i	
е	Backup withholding (see instructions) 51e]	
f	Credit for small employer health insurance premiums (attach Form 8941)]	
Q	Other credits, adjustments, and payments Form 2439	1 l	
	☐ Form 4136 ☐ Other ☐ Total ► 51g		
52	Total payments Add lines 51a through 51g	52 2	0,000.
	Estimated tax penalty (see instructions) Check if Form 2220 is attached	58	
	Tax due If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
	Overpayment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid		8,488.
	Enter the amount of line 55 you want. Credited to 2020 estimated tax 8,488. Refunded	56	0,400.
Part		1 30 1	
_	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		100 100
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign country		,
	here		X
			X
	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		^
	If "Yes," see instructions for other forms the organization may have to file		
59	Enter the amount of tax-exempt interest received or accrued during the tax year S Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowle	doe and helief it is too	
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	age and Dener, It is ifUE	
Here	\rightarrow 00 M φ_{M} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	lay the IRS discuss this	return with
11010	IMEGUTVE BIRECTOR	ne preparer shown below	·
		structions)? X Ye	s No
		if PTIN	
Paid	Self-employed		
	parer ECHELMETER SCHOLLZ JUMANAA MUUR 11.12 W	P00048	
•	Only Firm's name ► WILLIAMS - KEEPERS LLC V Firm's EIN ►	43-112	6847
_ 23	2005 WEST BROADWAY, SUITE 100		
	Firm's address ► COLUMBIA, MO 65203- Phone no (573) 442	-6171
923711 (01-27-20		90-T (2019)

Schedule A - Cost of Goods	Sold. Enter	method of inver	ntory v	aluation > N/A					
1 Inventory at beginning of year	1		6	Inventory at end of yea	r		6		
2 Purchases	2		7	Cost of goods sold Su	ıbtract I	ine 6			
3 Cost of labor	3			from line 5 Enter here	and in F	Part I,			
4 a Additional section 263A costs				line 2			7		
(attach schedule)	4a		8	Do the rules of section	263A (v	with respect to		Yes	No
b Other costs (attach schedule)	4b		7	property produced or a	•	·			
5 Total Add lines 1 through 4b	5		7	the organization?		, , , ,			
Schedule C - Rent Income (I	From Real	Property and	Per	sonal Property L	ease	d With Real Prop	erty)		
(see instructions)				, <u>-</u>					
1 Description of property									
(1)									
(2)									
(3)									
(4)		-	•						
	2 Rent receiv	ed or accrued	_						
(a) From personal property (if the perconent for personal property is more to 10% but not more than 50%)	entage of than	of rent for	personal	onal property (if the percental property exceeds 50% or if ed on profit or income)	ge	3(a) Deductions directly columns 2(a) ar	connec nd 2(b) (a	ted with the income ii attach schedule)	n
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income Add totals of columns 2 here and on page 1, Part I, line 6, column	(A)	<u> </u>			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	ınstru	ctions)					
			١,	Gross income from		3 Deductions directly con to debt-finance			
1 Description of debt-fin:	anced property		'	or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	
(1)	-	·							
(2)			1						
(3)									
(4)									
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or debt-fina	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 deduc (column 6 x total of co 3(a) and 3(b))	olumns
(1)				%					
(2)			T	%			1		
(3)				%					
(4)				%					
			•			inter here and on page 1 Part I, line 7, column (A)		Enter here and on pag Part I, line 7 column	
Totala				_		0	.		0.
Totals Total dividends-received deductions in	cluded in colum	n 8					-	÷	0.
10.4. 0171001100 10001700 0000010110 111	2.2000 AT 0070TH	· -							

Schedule F - Interest, A	nnuities	s, Royalt	es, and	d Rents	From Co	ntrolle	Organiza	tions	(see ins	truction	s)
				Exempt 0	Controlled O	ganızatı	ons				
1 Name of controlled organizati	on	2 Emp identific numb	ation		elated income instructions)		al of specified nents made	included	Part of column 4 that is included in the controlling rganization's gross income		6 Deductions directly connected with income in column 5
(1)											
(1)					<u> </u>						-
(2)											
(3)				<u> </u>							
(4)				l				L			
Nonexempt Controlled Organiz				T -		1					
7 Taxable Income		nrelated income ee instructions)		9 Total	of specified payr made	nents	10 Part of coluing the controlling gross	mn 9 that is ing organiz s income	s included ation s		ductions directly connected income in column 10
(1)											
(2)											
(3)											
(4)				l							
							Enter here and	nns 5 and 1 on page 1 column (A)			id columns 6 and 11 ere and on page 1, Part I line 8, column (B)
Totals						▶			0.		0.
Schedule G - Investme		ne of a S	ection	501(c)(7), (9), or (17) Org	anization		- 1		
1 Descri	ription of incor	ne			2 Amount of	income	3 Deductio directly conne (attach sched	cted	4 Set-a		5 Total deductions and set-asides (col 3 plus col 4)
(1)											
(2)											
(3)											
(4)											
					Enter here and	n page 1	-		>	-	Enter here and on page 1,
					Part I, line 9, co	lumn (A)	•	1		•	Part I, line 9, column (B)
Totalo						0.			-		0.
Schedule I - Exploited I	-	Activity	Income	e, Other	Than Adv	1	g Income		· · ·		
Description of exploited activity	2 G unrelated income trade or b	business e from	directly c with pro of unr	penses onnected oduction elated s income	4 Net incom from unrelated business (co minus columi gain compute through	trade or lumn 2 n 3) If a cols 5	5 Gross inco from activity t is not unrelat business inco	hat ed	6 Exp attributa colun	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)									 -		
(2)										·	
(3)											
(4)											
	Enter her page 1, line 10,	Part I,		re and on , Part I, col (B)	,	. ,			•		Enter here and on page 1 Part II, line 25
Totals Schedule J - Advertising	na Incon		struction		<u> </u>		<u></u> -				
Part I Income From F					hatchilos	Racie	 .				
Part I income From F	eriodic				Juanea		 				
1 Name of periodical		2 Gross advertising income		3 Direct ertising costs			5 Circulat income		6 Reade costs		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)											
(2)]		,				
(3)					1 .						, , , .
(4)	<u> </u>				7						
_·····											
Totals (carry to Part II, line (5))	>	<u>C</u>		0			<u></u>				0. Form 990-T (2019)

orm 990-1 (2	019) ASSOCIATION	ON				43-062176	o Page
	ncome From Perio olumns 2 through 7 on a			ate Basis (For each	ch periodical liste	d in Part II, fill in	
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 Pa	art I	0.	0.	- 1 1 12 1			0.
		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

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)

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

1

Open to Public Inspection for

ENTITY

43-0621788

Department of the Treasury Internal Revenue Service

Name of the organization

For calendar year 2019 or other tax year beginning JUL~1, 2019, and ending JUN~30, 2020► 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 UNIVERSITY OF MISSOURI ALUMNI Employer identification number

ASSOCIATION Unrelated Business Activity Code (see instructions)

	Describe the unrelated trade or business ADVERTISI	NG			
Pa	TI Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales				
b	Less returns and allowances c Balance ▶	1c		• • •	1 4
2	Cost of goods sold (Schedule A, line 7)	2			
3	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		•	
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach			• .	
	statement)	5		, *	
6	Rent income (Schedule C)	6			
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, 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 activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11	82,401.	35,463.	46,938.
12	Other income (See instructions, attach schedule) STMT 1	12	5,500.	•	5,500.
13	Total. Combine lines 3 through 12	13	87,901.	35,463.	52,438.

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	304.
20	Depreciation (attach Form 4562)	20			
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	46,938.
27	Other deductions (attach schedule)			27	
28	Total deductions. Add lines 14 through 27			28	47,242.
29	Unrelated business taxable income before net operating loss deduction. Subtract lin	29	5,196.		
30	Deduction for net operating loss arising in tax years beginning on or after January 1,	2018 (see	٠.	
	instructions)			30	0.
31	Unrelated business taxable income Subtract line 30 from line 29			31	5,196.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

FORM 990-T (M)	OTHER INCOME	STATEMENT 1			
DESCRIPTION		AMOUNT			
BOOTH ADVERTISING		5,500.			
TOTAL TO SCHEDULE M, PAR	F I, LINE 12	5,500.			

UNIVERSITY OF MISSOURI ALUMNI ASSOCIATION

Schedule J - Advertising Income (see instructions)

Part In Income From Periodicals Reported on a Consolidated 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) MISSOURI ALUMNIS	82,401.	35,463.	THE SET OF THE	46,938.	144,278.	A PROPERTY OF
(2)						
(3)						
(4)			TO THE REAL PROPERTY.			
		-			•	
Totals (carry to Part II, line (5))	82,401.	35,463.	46,938.			46,938.
Part III Income From Period	dicals Reporte	ed on a Separ	ate Basis (For ea	ch 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	82,401.	35,463.	17、100000000000000000000000000000000000	Action Williams		46,938.
	Enter here and on page 1, Part I,	Enter here and on page 1, Part I,		A PARTY		Enter here and on page 1,
-	line 11 col (A)	line 11, col (B)	经验证			Part II, line 27
Totals, Part II (lines 1-5)	82,401.	35,463.	THE WAY	是这种人类。		46,938.

2

OMB No 1545-0047

Open to Public Inspection for

501(c)(3) Organizations Only

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning JUL_1 , 2019, and ending JUN_30 , 2020

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

Department of the Treasury Internal Revenue Service

Name of the organization

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). UNIVERSITY OF MISSOURI ALUMNI

Employer identification number 43-0621788

ASSOCIATION Unrelated Business Activity Code (see instructions) 561520

GROUP TOURS

Pa	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales 102,332.		100 330		. ;
b	Less returns and allowances c Balance ▶	1c	102,332.	, ,	·
2	Cost of goods sold (Schedule A, line 7)	2	48,743.		,
3	Gross profit Subtract line 2 from line 1c	3	53,589.	ē.	53,589.
4 a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			,
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach			•	
	statement)	5			
6	Rent income (Schedule C)	6			
7	Unrelated debt financed income (Schedule E)	7			
8	Interest, annuities, royalties, 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 activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11			
12	Other income (See instructions, attach schedule)	12		·	<u> </u>
13	Total. Combine lines 3 through 12	13	53,589.		53,589.

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	2,967.
20	Depreciation (attach Form 4562)	20			
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	2,967.
29	Unrelated business taxable income before net operating loss deduction. Subtract line	29	50,622.		
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	50,622.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

Page 3 ASSOCIATION 43-0621788 Schedule A - Cost of Goods Sold. Enter method of inventory valuation N/AInventory at beginning of year 6 Inventory at end of year 6 48,743. 2 2 Purchases 7 Cost of goods sold Subtract line 6 3 Cost of labor 3 from line 5 Enter here and in Part I, 48,743. 4 a Additional section 263A costs line 2 7 Yes No (attach schedule) 8 Do the rules of section 263A (with respect to 4a b Other costs (attach schedule) 4b property produced or acquired for resale) apply to 48,743 X Total Add lines 1 through 4b the organization? Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions) 1 Description of property (1) (2)(3)(4) Rent received or accrued 3(a) Deductions directly connected with the income in (a) From personal property (if the percentage of (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if columns 2(a) and 2(b) (attach schedule) rent for personal property is more than 10% but not more than 50%) the rent is based on profit or income) (1) (2)(3)(4) Total 0. Total 0 (b) Total deductions (c) Total income Add totals of columns 2(a) and 2(b) Enter Enter here and on page 1 Part I line 6, column (B) here and on page 1, Part I, line 6, column (A) 0 0. Schedule E - Unrelated Debt-Financed Income (see instructions) 3 Deductions directly connected with or allocable to debt-financed property 2 Gross income from or allocable to debt-(a) Straight line depreciation (b) Other deductions 1 Description of debt-financed property financed property (attach schedule) (attach schedule) (1) (2) (3) (4) 4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) Average adjusted basis ĸ Column 4 divided 7 Gross income 8 Allocable deductions of or allocable to debt-financed property (attach schedule) by column 5 reportable (column (column 6 x total of columns 2 x column 6) 3(a) and 3(b)) % (1) % (2) % (3)% (4) Enter here and on page 1. Enter here and on page 1. Part I line 7, column (A) Part I, line 7, column (B)

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0

0.

0.

Totals

Total dividends-received deductions included in column 8