

Extended to May 17, 2021

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0047

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

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).

Open to Public Inspection for 501(c)(3) Organizations Only

Form header section including: A Check box if address changed; B Exempt under section 501(c)(3); C Book value of all assets at end of year 12,714,821; D Employer identification number 59-1708182; E Unrelated business activity code 722320; F Group exemption number; G Check organization type 501(c) corporation.

H Enter the number of the organization's unrelated trades or businesses. 3 Describe the only (or first) unrelated trade or business here: FOOD SERVICE AND CATERING.

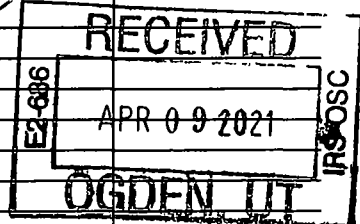
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? No.

J The books are in care of Tina Phillips Telephone number 863-709-9392

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include: 1a Gross receipts or sales 448,855; 2 Cost of goods sold 183,851; 3 Gross profit 265,004; 13 Total 265,004.

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include: 14 Compensation of officers, directors, and trustees 181,656; 15 Salaries and wages 4,929; 19 Taxes and licenses 12,637; 20 Depreciation 12,275; 27 Other deductions 40,563; 28 Total deductions 252,060; 29 Unrelated business taxable income before net operating loss deduction 12,944; 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 0; 31 Unrelated business taxable income 12,944.

SCANNED JAN 11 2022



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Part III Total Unrelated Business Taxable Income

Table with 2 columns: Description and Amount. Rows include: 32 Total of unrelated business taxable income... 19,584; 33 Amounts paid for disallowed fringes; 34 Charitable contributions... 0; 35 Total unrelated business taxable income before pre-2018 NOLs... 19,584; 36 Deduction for net operating loss... 19,584; 37 Total of unrelated business taxable income before specific deduction; 38 Specific deduction... 1,000; 39 Unrelated business taxable income... 0.

Part IV Tax Computation

Table with 2 columns: Description and Amount. Rows include: 40 Organizations Taxable as Corporations... 0; 41 Trusts Taxable at Trust Rates; 42 Proxy tax; 43 Alternative minimum tax; 44 Tax on Noncompliant Facility Income; 45 Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies... 0.

Part V Tax and Payments

Table with 2 columns: Description and Amount. Rows include: 46a Foreign tax credit; 46b Other credits; 46c General business credit; 46d Credit for prior year minimum tax; 46e Total credits; 47 Subtract line 46e from line 45... 0; 48 Other taxes; 49 Total tax; 50 2019 net 965 tax liability; 51a Payments: A 2018 overpayment credited to 2019; 51b 2019 estimated tax payments; 51c Tax deposited with Form 8868; 51d Foreign organizations; 51e Backup withholding; 51f Credit for small employer health insurance premiums; 51g Other credits, adjustments, and payments; 52 Total payments; 53 Estimated tax penalty; 54 Tax due; 55 Overpayment; 56 Enter the amount of line 55 you want: Credited to 2020 estimated tax Refunded.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 2 columns: Question and Yes/No. Rows include: 57 At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority over a financial account...; 58 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?; 59 Enter the amount of tax-exempt interest received or accrued during the tax year \$.

Sign Here: Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature of officer: Tina Phillips, Date: 3/17/20, Title: Director of Finance. May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [ ] No.

Paid Preparer Use Only: Print/Type preparer's name: Tracy Y. Kimbrough; Preparer's signature: Tracy Y. Kimbrough; Date: 3/17/20; Check self-employed: [ ] if PTIN: P00186561; Firm's name: CPS Group CPAs PA; Firm's EIN: 20-8787232; Firm's address: 205 East Orange Street, LAKELAND, FL 33801-4600; Phone no.: (863) 688-1725.

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation **► Lower of Cost or Market**

1 Inventory at beginning of year	1	45,188.	6 Inventory at end of year	6	207,129.
2 Purchases	2	345,792.	7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	183,851.
3 Cost of labor	3		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a Additional section 263A costs (attach schedule)	4a				X
b Other costs (attach schedule)	4b				
5 Total. Add lines 1 through 4b	5	390,980.			

**Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

1. Description of property

(1)
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) 0.

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
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 columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Statement 5		Statement 6		
Totals		Enter here and on page 1, Part I, line 7, column (A)		Enter here and on page 1, Part I, line 7, column (B)
		0.		0.
Total dividends-received deductions included in column 8				0.

**Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

		Exempt Controlled Organizations			
1. Name of controlled organization	2. Employer identification number	3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
<b>Totals</b>			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)	
			0.	0.	

**Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
<b>Totals</b>		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)
		0.		0.

**Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1. Description of 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 or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
<b>Totals</b>		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 25
		0.	0.			0.

**Schedule J - Advertising Income** (see instructions)

**Part I 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)						
(2)						
(3)						
(4)						
<b>Totals (carry to Part II, line (5))</b>		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)						
<b>Totals from Part I</b>	<b>0.</b>	<b>0.</b>				<b>0.</b>
<b>Totals, Part II (lines 1-5)</b>	<b>0.</b> <small>Enter here and on page 1, Part I, line 11, col (A)</small>	<b>0.</b> <small>Enter here and on page 1, Part I, line 11, col (B)</small>				<b>0.</b> <small>Enter here and on page 1, Part II, line 26</small>

**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)		%	
<b>Total. Enter here and on page 1, Part II, line 14</b>			<b>0.</b>

Footnotes

Statement 1

SCHEDULE OF NET OPERATING LOSS CARRYFORWARDS:

6/30/07 - GENERATED	183,724.
6/30/08 - GENERATED	318,096.
6/30/09 - UTILITZED	-28,428.
6/30/10 - GENERATED	109,904.
6/30/11 - UTILIZED	-46,777.
6/30/12 - GENERATED	62,281.
6/30/13 - GENERATED	127,536.
6/30/14 - GENERATED	41,660.
6/30/15 - UTILIZED	-3,397.
6/30/16 - GENERATED	86,189.
6/30/17 - GENERATED	122,697.
6/30/18 - GENERATED	80,494.
06/30/19 - Utilized - Rental Income	-28,608.
06/30/20 - Utilized - Rental Income	-6,640.
06/30/20 - Utilized - Food Service and Catering	-12,944.
NOL CARRYFORWARD AVAILABLE FOR 6/30/21	<u>1,005,787.</u>

NOL - Psychiatric:

06/30/19 - Generated	56,510.
06/30/20 - Generated	176,754.
	<u>233,264.</u>

NOL CARRYFORWARD AVAILABLE FOR 6/30/21

233,264.

NOL - Food Service & Catering:

06/30/19 - Generated	12,015.
	<u>12,015.</u>

NOL CARRYFORWARD AVAILABLE FOR 6/30/21

12,015.

Total Net Operating Loss Carryover

1,251,066.

EXPLANATION: Schedule I, Line 18 Other Additions

2018 Form 990T NOL Carryforward for Food Service & Catering -12,015.  
 Software excluded from return.

Form 990-T	Other Deductions	Statement	2
<u>Description</u>		<u>Amount</u>	
OCCUPANCY		10,076.	
TRAVEL		81.	
INSURANCE		15,515.	
SUBCONTRACT SERVICES		8,133.	
SUPPLIES		4,469.	
EQUIPMENT RENTAL		755.	
CONFERENCES		78.	
PROFESSIONAL FEES		849.	
Professional Dues		243.	
Miscellaneous Expense		364.	
Total to Form 990-T, Page 1, line 27		40,563.	

Form 990-T	Net Operating Loss Deduction			Statement	3
Tax Year	Loss Sustained	Loss Previously Applied	Loss Remaining	Available This Year	
06/30/19	12,015.	0.	12,015.	12,015.	
NOL Carryover Available This Year			12,015.	12,015.	

Form 990-T	Net Operating Loss Deduction			Statement	4
Tax Year	Loss Sustained	Loss Previously Applied	Loss Remaining	Available This Year	
06/30/13	726,336.	32,005.	694,331.	694,331.	
06/30/14	41,660.	0.	41,660.	41,660.	
06/30/16	86,189.	0.	86,189.	86,189.	
06/30/17	122,697.	0.	122,697.	122,697.	
06/30/18	80,494.	0.	80,494.	80,494.	
NOL Carryover Available This Year			1,025,371.	1,025,371.	

Form 990-T      Schedule E - Unrelated Debt-Financed Income      Statement 5  
 Average Acquisition Debt

Description of Debt-Financed Property	Activity Number	Amount of Outstanding Debt
	2	
Beginning first month		348,345.
Beginning second month		347,072.
Beginning third month		345,795.
Beginning fourth month		344,471.
Beginning fifth month		343,183.
Beginning sixth month		
Beginning seventh month		
Beginning eighth month		
Beginning ninth month		111,699.
Beginning tenth month		111,411.
Beginning eleventh month		111,108.
Beginning twelfth month		110,818.
Total of All Months		2,173,902.
Number of Months in Year		12
Average Aquisition Debt		181,159.

Totals to Form 990-T, Schedule E, Column 4





**SCHEDULE M  
(Form 990-T)**

**Unrelated Business Taxable Income from an  
Unrelated Trade or Business**

Entity **1**

OMB No 1545-0047

**2019**

For calendar year 2019 or other tax year beginning JUL 1, 2019, and ending JUN 30, 2020

▶ Go to [www.irs.gov/Form990T](http://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).

Open to Public Inspection for  
501(c)(3) Organizations Only

Department of the Treasury  
Internal Revenue Service

Name of the organization **TRI-COUNTY HUMAN SERVICES, INC.** Employer identification number **59-1708182**

Unrelated Business Activity Code (see instructions) ▶ 621300

Describe the unrelated trade or business ▶ **Psychiatric Services**

<b>Part I Unrelated Trade or Business Income</b>		(A) Income	(B) Expenses	(C) Net
<b>1 a</b>	Gross receipts or sales <u>444,719.</u>			
<b>b</b>	Less returns and allowances			
<b>c</b>	Balance ▶	<b>1c</b>		
		<u>444,719.</u>		
<b>2</b>	Cost of goods sold (Schedule A, line 7)	<b>2</b>		
<b>3</b>	Gross profit Subtract line 2 from line 1c	<b>3</b>		<u>444,719.</u>
<b>4 a</b>	Capital gain net income (attach Schedule D)	<b>4a</b>		
<b>b</b>	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4b</b>		
<b>c</b>	Capital loss deduction for trusts	<b>4c</b>		
<b>5</b>	Income (loss) from a partnership or an S corporation (attach statement)	<b>5</b>		
<b>6</b>	Rent income (Schedule C)	<b>6</b>		
<b>7</b>	Unrelated debt-financed income (Schedule E)	<b>7</b>		
<b>8</b>	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	<b>8</b>		
<b>9</b>	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>		
<b>10</b>	Exploited exempt activity income (Schedule I)	<b>10</b>		
<b>11</b>	Advertising income (Schedule J)	<b>11</b>		
<b>12</b>	Other income (See instructions, attach schedule)	<b>12</b>		
<b>13</b>	<b>Total.</b> Combine lines 3 through 12	<b>13</b>	<u>444,719.</u>	<u>444,719.</u>

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)

<b>14</b>	Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>		
<b>15</b>	Salaries and wages	<b>15</b>		<u>379,186.</u>
<b>16</b>	Repairs and maintenance	<b>16</b>		<u>3,614.</u>
<b>17</b>	Bad debts	<b>17</b>		
<b>18</b>	Interest (attach schedule) (see instructions)	<b>18</b>	See Statement 7	<u>6,109.</u>
<b>19</b>	Taxes and licenses	<b>19</b>		<u>28,349.</u>
<b>20</b>	Depreciation (attach Form 4562)	<b>20</b>	<u>10,042.</u>	
<b>21</b>	Less depreciation claimed on Schedule A and elsewhere on return	<b>21a</b>		<b>21b</b> <u>10,042.</u>
<b>22</b>	Depletion	<b>22</b>		
<b>23</b>	Contributions to deferred compensation plans	<b>23</b>		
<b>24</b>	Employee benefit programs	<b>24</b>		
<b>25</b>	Excess exempt expenses (Schedule I)	<b>25</b>		
<b>26</b>	Excess readership costs (Schedule J)	<b>26</b>		
<b>27</b>	Other deductions (attach schedule)	<b>27</b>	See Statement 8	<u>194,173.</u>
<b>28</b>	<b>Total deductions.</b> Add lines 14 through 27	<b>28</b>		<u>621,473.</u>
<b>29</b>	Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13	<b>29</b>		<u>-176,754.</u>
<b>30</b>	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	<b>30</b>	Stmt 9	<u>0.</u>
<b>31</b>	Unrelated business taxable income Subtract line 30 from line 29	<b>31</b>		<u>-176,754.</u>

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

Form 990-T (M)	Interest Paid	Statement	7
<u>Description</u>		<u>Amount</u>	
Interest		6,109.	
Total to Schedule M, Part II, line 18		6,109.	

Form 990-T (M)	Other Deductions	Statement	8
<u>Description</u>		<u>Amount</u>	
Occupancy		4,127.	
Travel		462.	
Insurance		10,451.	
Subcontractor		82,829.	
Supplies		29,087.	
Equipment Rental		329.	
Professional Dues		441.	
Conferences		2,740.	
Professional Fees		44,614.	
Unwind Fee		17,080.	
Miscellaneous		2,013.	
Total to Schedule M, Part II, line 27		194,173.	

Schedule M	Net Operating Loss Deduction			Statement	9
<u>Tax Year</u>	<u>Loss Sustained</u>	<u>Loss Previously Applied</u>	<u>Loss Remaining</u>	<u>Available This Year</u>	
06/30/19	56,510.		56,510.	56,510.	
NOL Carryover Available This Year			56,510.	56,510.	

TRI-COUNTY HUMAN SERVICES, INC.

59-1708182

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation **N/A**

1	Inventory at beginning of year	1		6	Inventory at end of year	6	
2	Purchases	2		7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3	Cost of labor	3		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a	Additional section 263A costs (attach schedule)	4a					X
4b	Other costs (attach schedule)	4b					
5	Total. Add lines 1 through 4b	5					

**Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

1. Description of property			
(1)			
(2)			
(3)			
(4)			
2. Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)	
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)		
(1)			
(2)			
(3)			
(4)			
Total	0.	Total	0.
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	
0.		0.	

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
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 columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Total dividends-received deductions included in column 8			0.	0.

**SCHEDULE M  
(Form 990-T)**

**Unrelated Business Taxable Income from an  
Unrelated Trade or Business**

Entity **2**

OMB No 1545-0047

**2019**

For calendar year 2019 or other tax year beginning JUL 1, 2019, and ending JUN 30, 2020

Department of the Treasury  
Internal Revenue Service

▶ Go to [www.irs.gov/Form990T](http://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).

Open to Public Inspection for  
501(c)(3) Organizations Only

Name of the organization **TRI-COUNTY HUMAN SERVICES, INC.** Employer identification number **59-1708182**

Unrelated Business Activity Code (see instructions) ▶ **531120**  
Describe the unrelated trade or business ▶ **Commercial Rental**

<b>Part I Unrelated Trade or Business Income</b>		(A) Income	(B) Expenses	(C) Net
<b>1a</b> Gross receipts or sales				
<b>b</b> Less returns and allowances				
<b>c</b> Balance ▶	<b>1c</b>			
<b>2</b> Cost of goods sold (Schedule A, line 7)	<b>2</b>			
<b>3</b> Gross profit Subtract line 2 from line 1c	<b>3</b>			
<b>4a</b> Capital gain net income (attach Schedule D)	<b>4a</b>			
<b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<b>4b</b>			
<b>c</b> Capital loss deduction for trusts	<b>4c</b>			
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement)	<b>5</b>			
<b>6</b> Rent income (Schedule C)	<b>6</b>			
<b>7</b> Unrelated debt-financed income (Schedule E)	<b>7</b>	34,200.	14,008.	20,192.
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Schedule F)	<b>8</b>			
<b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	<b>9</b>			
<b>10</b> Exploited exempt activity income (Schedule I)	<b>10</b>			
<b>11</b> Advertising income (Schedule J)	<b>11</b>			
<b>12</b> Other income (See instructions, attach schedule)	<b>12</b>			
<b>13</b> Total. Combine lines 3 through 12	<b>13</b>	34,200.	14,008.	20,192.

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)

<b>14</b> Compensation of officers, directors, and trustees (Schedule K)	<b>14</b>			
<b>15</b> Salaries and wages	<b>15</b>		6,955.	
<b>16</b> Repairs and maintenance	<b>16</b>		591.	
<b>17</b> Bad debts	<b>17</b>			
<b>18</b> Interest (attach schedule) (see instructions)	<b>18</b>			
<b>19</b> Taxes and licenses	<b>19</b>		516.	
<b>20</b> Depreciation (attach Form 4562)	<b>20</b>	9,032.		
<b>21</b> Less depreciation claimed on Schedule A and elsewhere on return	<b>21a</b>	9,032.		
<b>21b</b>			0.	
<b>22</b> Depletion	<b>22</b>			
<b>23</b> Contributions to deferred compensation plans	<b>23</b>			
<b>24</b> Employee benefit programs	<b>24</b>			
<b>25</b> Excess exempt expenses (Schedule I)	<b>25</b>			
<b>26</b> Excess readership costs (Schedule J)	<b>26</b>			
<b>27</b> Other deductions (attach schedule)	<b>27</b>	See Statement 10	5,490.	
<b>28</b> Total deductions. Add lines 14 through 27	<b>28</b>		13,552.	
<b>29</b> Unrelated business taxable income before net operating loss deduction Subtract line 28 from line 13	<b>29</b>		6,640.	
<b>30</b> Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)	<b>30</b>		0.	
<b>31</b> Unrelated business taxable income Subtract line 30 from line 29	<b>31</b>		6,640.	

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

Form 990-T (M)	Other Deductions	Statement 10
Description		Amount
Occupancy		290.
Subcontractor		263.
Supplies		4,525.
Professional Dues		23.
Professional Fees		369.
Travel		20.
Total to Schedule M, Part II, line 27		5,490.

**TRI-COUNTY HUMAN SERVICES, INC.**

**59-1708182**

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation ▶

1	Inventory at beginning of year	1		6	Inventory at end of year	6	
2	Purchases	2		7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3	Cost of labor	3		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a	Additional section 263A costs (attach schedule)	4a					
b	Other costs (attach schedule)	4b					
5	Total. Add lines 1 through 4b	5					

**Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)**  
(see instructions)

1. Description of property

(1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

(4) \_\_\_\_\_

2. Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total	Total	

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ▶

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule) <b>Statement 11</b>	(b) Other deductions (attach schedule) <b>Statement 12</b>	
(1) <b>COMMERCIAL RENTALS</b>	<b>34,200.</b>	<b>9,032.</b>	<b>11,167.</b>	
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) <b>Statement 13</b>	5. Average adjusted basis of or allocable to debt-financed property (attach schedule) <b>Statement 14</b>	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1) <b>457,829.</b>	<b>660,124.</b>	<b>69.35%</b>	<b>23,718.</b>	<b>14,008.</b>
(2)		%		
(3)		%		
(4)		%		
<b>Totals</b>			<b>23,718.</b>	<b>14,008.</b>
<b>Total dividends-received deductions included in column 8</b>				<b>0.</b>

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Form 990-T (M)      Schedule E - Depreciation Deduction      Statement 11

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Description	Activity Number	Amount	Total
Depreciation		9,032.	
- Subtotal -	3		9,032.
Total of Form 990-T, Schedule E, Column 3(a)			9,032.

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Form 990-T (M)      Schedule E - Other Deductions      Statement 12

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Description	Activity Number	Amount	Total
INTEREST		8,514.	
INSURANCE		2,653.	
- Subtotal -	3		11,167.
Total of Form 990-T, Schedule E, Column 3(b)			11,167.

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Form 990-T (M)      Average Acquisition Debt on or  
Allocable to Debt-Financed Property      Statement 13

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Description	Activity Number	Amount	Total
AVERAGE ACQUISITION DEBT		457,829.	
- Subtotal -	3		457,829.
Total of Form 990-T, Schedule E, Column 4			457,829.



