A 4	EXTENDED-TO AUG					
**Form 990-T	Exempt Organization Bus			ax Return	Ļ	OMB No 1545-0687
•	(and proxy tax unde				_	2047
	For calendar year 2017 or other tax year beginning $\ \underline{ ext{OCT} \ 1}$,				ا 🕰	2017
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	structio he mar	ns and the latest inform le public if your organize	ation. 501/c)(3).	게	Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if	Name of organization (Check box if name cl			1919/	D Empl	oyer identification number loyees' trust, see
address changed	DE ETTE HOLDEN CUMMER N	instru	ections)			
B Exempt under section	Print INC.		9-2191587 lated business activity codes			
X 501(c)(3)	Number, street, and room or suite no. If a P.O. box	, see in	structions.			nstructions)
408(e) 22 0(e)	029 KIVEKSIDE AVE				1	
408A 530(a) 529(a)	City or town, state or province, country, and ZIP or JACKSONVILLE, FL 32204				453	220 532000
C Book value of all assets at end of year 52,054,7		oration	501(c) trust	401(a)	truct	Other trust
	26. G Check organization type X 501(c) corports primary unrelated business activity. RETAIL				trust	Other trust
	the corporation a subsidiary in an affiliated group or a paren			<u>▶</u> [Y	es X No
	and identifying number of the parent corporation.		2.4.7 CO CCO g. COP			
	► THE ORGANIZATION		Teleph	one number 🕨 9	043	566857
Part I Unrelated	d Trade or Business Income]	(A) Income	(B) Expenses		(C) Net
1a Gross receipts or sale						
b Less returns and allow		10	206,481.	-		
2 Cost of goods sold (S		2	<u>171,398.</u> 35,083.	<u></u>	`	35,083.
3 Gross profit. Subtract		3 4a	35,063.			33,003.
4a Capital gain net incon	ne (attach Schedule D) 4797, Part II, line 17) (attach Form 4797)	4a 4b	<u>-</u>			
c Capital loss deduction		4c	· · · · · · · · · · · · · · · · · · ·			
·	artnerships and S corporations (attach statement)	5		•		
6 Rent income (Schedu		6	58,097.	89,8	01.	-31,704.
•	ed income (Schedule E)	7				
8 Interest, annuities, ro	yalties, and rents from controlled organizations (Sch. F)	8_				
9 Investment income of	f a section 501(c)(7), (9), or (17) organization (Schedule G)	9				
•	vity income (Schedule I)	10				
11 Advertising income (S		11	15,848.	<u> </u>		15,848.
	5 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	12	109,028.	89,8	01.	19,227.
	ons Not Taken Elsewhere (See instructions fo			05,0	<u> </u>	
(Except for	contributions, deductions must be directly connected	l with t	he unrelated business	income)		
14 Compensation of off	ficers, directors, and trustees (Schedule K)				14	
15 Salaries and wages			ì		15	6,061.
16 Repairs and mainter	nance RECEIVED				16	9,922.
17 Bad debts	φ	၂ပ္ဟု			17	
18 Interest (attach sche	edule) AUG 0 9 2019 Hons (See instructions for Imitation rules)	RS-OSC			18	4,354.
19 Taxes and licenses		S			19 20	4,334.
			21	22,867.	120	
	aimed on Schedule A and elsewhere on return		22a		22b	22,867.
23 Depletion	amina an admidula // and allowing a an inter-		[==+]		23	
•	erred compensation plans				24	
25 Employee benefit pr	ograms				25	8,721.
26 Excess exempt expe	nses (Schedule I)				26	
27 Excess readership c	osts (Schedule J)				27	26 042
28 Other deductions (a	•		SEE STAT	EMENT 2	28	36,843.
	Add lines 14 through 28	Aluma Ca	Man has 40		29	88,768. -69,541.
	taxable income before net operating loss deduction. Subtraction (limited to the amount on line 30)	t line 29		TEMENT 3	30	05,341.
	leduction (limited to the amount on line 30) taxable income before specific deduction. Subtract line 31 fr	om line		J. I. Fillians	32	-69,541.
	Generally \$1,000, but see line 33 instructions for exceptions				33	1,000.
	taxable income. Subtract line 33 from line 32. If line 33 is		than line 32, enter the sr	maller of zeroet		
line 32				<u> </u>	284	-69,541.
723701 01-22-18 LHA F	or Paperwork Reduction Act Notice, see instructions.	_			-	Form 990-T (2017)

DE ETTE HOLDEN CUMMER MUSEUM FOUNDATION

Form 990-1	(2017) INC.		<u></u>		59-21	<u>9158</u>	57		Page 2
Part I	II Tax Comput	tation							
35	Organizations Taxable	as Corporations. See instr	uctions for tax computation.				.		
	Controlled group mem	bers (sections 1561 and 156	53) check here 🕨 🔲 See instructio	ns and:			:		
a	Enter your share of the	\$50,000, \$25,000, and \$9,9	25,000 taxable income brackets (in that	order):	_				
	(1) \$	(2) \$	(3) \$		_	I			
b		nare of: (1) Additional 5% ta	x (not more than \$11,750)			***			
		(not more than \$100,000)	[\$			<u> </u>	<u>. </u>		
C	Income tax on the amo				_ ▶	► 35c	<u> </u>		0.
36	Trusts Taxable at Trus	st Rates. See instructions fo	r tax computation. Income tax on the am	ount on line 34 t	from:	<u> </u>			
	Tax rate schedule	e or Schedule D (Fo	rm 1041)		•	36			
37	Proxy tax. See instruc	tions	·		•	37			
38	Alternative minimum to					38			
39	Tax on Non-Compliant	t Facility Income. See instru	uctions			39			
40	•	3 and 39 to line 35c or 36, wi				40			0.
Part I									
41a	Foreign tax credit (cor	porations attach Form 1118;	trusts attach Form 1116)	41a					
b	Other credits (see insti		·	41b		٦,٠			
c	General business cred	•		41c		<u> </u>			
ď		inimum tax (attach Form 880	01 or 8827)	41d		<u> </u>	_		
e	Total credits. Add line	·	,			41e	1		
42	Subtract line 41e from	•				42			0.
43	Other taxes. Check if fi		Form 8611 Form 8697 Fo	rm 8866 🔲 (Other (attach schedule	43			
44	Total tax. Add lines 42					44			0.
		erpayment credited to 2017		45a		*			
	2017 estimated tax par			45b		٦٠.	,		
	Tax deposited with For	•		45c		⊣ . ′			
	· · · · · · · · · · · · · · · · · · ·	Tax paid or withheld at sour	ce (see instructions)	45d		┨	-		
	Backup withholding (s		ou (out mondonor)	45e		⊣ " •			
		yer health insurance premiui	ms (Attach Form 8941)	45f		⊣ -	.]		
	Other credits and payr		orm 2439	10.		┥.			
9	Form 4136		Other Total	▶ 45g		-	1		
AC	Total payments. Add		TOTAL	4591	_	46	-		
46		(see instructions). Check if F	orm 2220 is attached			47	†		
47	• •	ess than the total of lines 44				► 48	+		0.
48			ines 44 and 47, enter amount overpaid			49	 		0.
49	•	ne 49 you want: Credited to		I	Refunded	► 50	+		
Part V			Activities and Other Inform	nation (see)		1.00			
L			organization have an interest in or a sign			-		Yes	No
51			in a foreign country? If YES, the organi					1.03	
		• • • • • • • • • • • • • • • • • • • •	ancial Accounts. If YES, enter the name o						` .
		JOIL OF FOICIGIT DATIK ARD FINA	inclai Accounts. If TES, enter the hame c	in the lovelyn cot	initi y				X
50	here -	d the erganization receive a	distribution from, or was it the grantor o	f or transferor to	a foreign trust?				X
52	•	•		i, or transferor to	, a loreigh hust				 -
53	•	is for other forms the organia	r accrued during the tax year >\$.	
			this return, including accompanying schedules	and statements, an	d to the best of my know	vledge and	d belief, it is tr	 ue,	
Sign	correct, and complete	Declaration of preparer (other tha	n taxpayer) is based on all information of which p	preparer has any kno	owledge				
Here			1 3/31/19 ▲ OFFI	CER			IRS discuss th arer shown bel		vith
	Signature of off	ficer	Date Title	CLIK		instruction		res	No
			Dranasata signatura	Data	Chask		TIN	.00	1
	Print/Type prep	parer's name	Preparer's signature	Date	Check		TIN		
Paid	TAMECA	UNITEDAM	TAMEC A HALLEDAN	07/31/	self- employe		P0000!	5496	
Prepa	" e i	. HALLERAN	JAMES A. HALLERAN	U / / J I / .			59-320		8
Use (Only Firm's name	JAMES MOORE	& CO., P.L.		F <u>irm's EIN</u>		JJ J40	, 4,74	- _
	French address		PIVE CIRCLE	1	Phone no	NOT.	-257-	11ma	
	Firm's address	P DAITONA BE	EACH, FL 32114-1180		T TIONE 110	200		990-T-	10d1 -
					<i></i>			/UU-17	(2017

Page 3

59-2191587

Schedule A - Cost of Goods	Sold. Enter	method of invent	ory valuation COS	<u>T</u>			
1 Inventory at beginning of year	1	143,376.	6 Inventory at end of yea	r	6 203,348.		
2 Purchases	2	169,136.	7 Cost of goods sold. Su		₹ /		
3 Cost of labor	3	54,146.	from line 5. Enter here		<u>*</u> _		
4a Additional section 263A costs		<u> </u>	line 2	,	7 171,398.		
(attach schedule)	4a		8 Do the rules of section	263A (with respect to	Yes No		
b Other costs (attach schedule)	4b	8,088.	1	equired for resale) apply to			
5 Total. Add lines 1 through 4b	5	374,746.	the organization?		X		
Schedule C - Rent Income (F				eased With Real Pro			
(see instructions)							
1. Description of property							
(1) REAL PROPERTY							
(2)			·				
(3)							
(4)	,						
	2. Rent receiv	ed or accrued			att.		
(a) From personal property (if the percei rent for personal property is more th 10% but not more than 50%)	ntage of an	' of rent for p	nd personal property (if the percentage exconal property exceeds 50% or if the based on profit or income) SEE STATEMENT 5				
(1)			58,0	97.	89,801.		
(2)							
(3)							
(4)							
Total	0.	Total	58,0	97.			
(c) Total income. Add totals of columns 2(here and on page 1, Part I, line 6, column (A)	.	58,0	(b) Total deductions			
Schedule E - Unrelated Debt	-Financed	Income (see	nstructions)				
			2. Gross income from		connected with or allocable nanced property		
1. Description of debt-finar	nced property		or allocable to debt- financed property	(8) 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)	of or debt-fina	e adjusted basis allocable to anced property h 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)			%				
	-		,	Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)		
Tatala					0.		
Totals Total dividends-received deductions Inc.	ludad in colum	n 8			<u>0.</u> 0.		
TOTAL GIVIDENOS-TECEIVED DEDUCTIONS INC	ווועוטו או המשפח וווי						

Form 990-T (2017)

hedule F - Interest,								**		<u>9158</u>	
<u></u>	Annuitie	s, Royal	ties, an					tions	(see ins	structio	ns)
				Exempt (Controlled O	ganızatı	ons	r			
Name of controlled organization		2. Employer identification number					ayments made inc		5. Part of column 4 that is included in the controlling organization's gross income		6. Deductions dire connected with inc in column 5
											<u> </u>
_											
nexempt Controlled Organ	nizations			•						_	
7. Taxable Income		unrelated incon see instruction		9. Total	of specified payr made	nents	10. Part of colur in the controlli gross	nn 9 the ng organ income	ization's		Deductions directly cor th income in column 1
							Add colum Enter here and line 8, c		1, Part I,		Add columns 6 and 11 here and on page 1, F line 8, column (B)
ıls						▶			0.		
hedule G - Investme		me of a	Section	501(c)(7	'), (9), or (17) Org	anization				
	structions)	ome			2. Amount of	ıncome	3. Deduction	cted	4. Set-	asides	5. Total dedu
							(attach sched	uiej	<u> </u>		(col 3 plus
		· -									
					ı						
							-				_
					Enter here and						Enter here and or
					Enter here and Part I, line 9, co						Enter here and or Part I, line 9, colu
ıls				•	Part I, line 9, co	0 •					
als hedule I - Exploited	-	: Activity	Incom	► e, Other	Part I, line 9, co	0 •	g Income				
ıls	-	Activity	Incom	► e, Other	Than Adv	0. vertisin	g Income				
uls hedule I - Exploited	2. dunrelated	Gross d business ne from business	3. Educated the second	e, Other	Part I, line 9, co	o. vertisin ne (loss) brade or lumn 2 n 3) If a ne cols 5	5. Gross inco from activity is not unrelatiousiness inco	hat ed	attribut	penses lable to mn 5	
hedule I - Exploited (see instr 1. Description of exploited activity	2. dunrelated	Gross d business ne from	3. Educated the second	xpenses connected roduction velated	Than Adv 4. Net incomfrom urrelated business (cc minus colum gain, comput	o. vertisin ne (loss) brade or lumn 2 n 3) If a ne cols 5	5. Gross inco	hat ed	attribut	table to	7. Excess ex expenses (co 6 minus colur but not more
hedule I - Exploited (see instr 1. Description of exploited activity	2. dunrelated	Gross d business ne from	3. Educated the second	xpenses connected roduction velated	Than Adv 4. Net incomfrom urrelated business (cc minus colum gain, comput	o. vertisin ne (loss) brade or lumn 2 n 3) If a ne cols 5	5. Gross inco	hat ed	attribut	table to	7. Excess ex expenses (co 6 minus colur but not more
1. Description of	2. dunrelated	Gross d business ne from	3. Educated the second	xpenses connected roduction velated	Than Adv 4. Net incomfrom urrelated business (cc minus colum gain, comput	o. vertisin ne (loss) brade or lumn 2 n 3) If a pecols 5	5. Gross inco	hat ed	attribut	table to	7. Excess ex expenses (co 6 minus colur but not more
hedule I - Exploited (see instr 1. Description of exploited activity	2. dunrelated	Gross d business ne from	3. Example	xpenses connected roduction velated	Than Adv 4. Net incomfrom urrelated business (cc minus colum gain, comput	o. vertisin ne (loss) brade or lumn 2 n 3) If a pecols 5	5. Gross inco	hat ed	attribut	table to	7. Excess ex expenses (co 6 minus column 4
hedule I - Exploited (see instr 1. Description of exploited activity	2, unrelated incon trade or	Gross d business ne from business ere and on 1, Part I, 1, col (A)	3. Enter h	ere and on 1, Part 1, 0, col (B)	Than Adv 4. Net incomfrom urrelated business (cc minus colum gain, comput	o. vertisin ne (loss) brade or lumn 2 n 3) If a pecols 5	5. Gross inco	hat ed	attribut	table to	7. Excess ex expenses (co 6 minus colur but not more
hedule I - Exploited (see instr 1. Description of exploited activity	Enter he page line 10	Gross d business ne from business ere and on 1, Part I, 1, col (A)	3. Enter h	ere and on 1, Part I, 1, col (B)	Than Adv 4. Net incomfrom urrelated business (cc minus colum gain, comput	o. vertisin ne (loss) brade or lumn 2 n 3) If a pecols 5	5. Gross inco	hat ed	attribut	table to	7. Excess ex expenses (co 6 minus colur but not more column 4
tis hedule I - Exploited (see instr 1. Description of exploited activity	Enter he page line 10	Gross d business ne from business are and on 1, Part 1, 1, col (A) 0. me (see	3. Enter h	ere and on 1, Part I, 0, col (B)	Than Adv 4. Net inconfrom urrelated business (cc minus colum gain, compute through	lumn (A) 0. Vertisin The (loss) It add or It umn 2 1.3) If a cools 5 7	5. Gross inco	hat ed	attribut	table to	7. Excess ex expenses (co 6 minus colur but not more column 4
1. Description of exploited activity	Enter he page line 10	Gross d business ne from business are and on 1, Part 1, 1, col (A) 0. me (see	3. Enter h	ere and on 1, Part I, 0, col (B)	Than Adv 4. Net inconfrom urrelated business (cc minus colum gain, compute through	lumn (A) 0. Vertisin The (loss) It add or It umn 2 1.3) If a cools 5 7	5. Gross inco	hat ed	attribut	table to	7. Excess ex expenses (co 6 minus colur but not more column 4
hedule I - Exploited (see instr 1. Description of exploited activity	Enter he page line 10	Gross d business ne from business are and on 1, Part 1, 1, col (A) 0. me (see	3. Enter he page line 10	ere and on 1, Part I, 0, col (B)	Than Adv	lumn (A) 0. rertisin ne (loss) Ibrade or Ilumn 2 n 3) If a ne cols 5 7	5. Gross inco from activity is not unrelat business inco	tuon	attribut	teble to mn 5	7. Excess ex expenses (co 6 minus colur but not more column 4
thedule I - Exploited (see Instr 1. Description of exploited activity als chedule J - Advertisinart I Income From 1. Name of periodical	Enter he page line 10	Gross of business ne from business business exe and on 1, Part I, col (A) O . me (see Cals Rep	3. Enter he page line 10	ere and on 1, Part I, 1, col (B) O . O . O . O .	Than Adv 4. Net inconfrom urrelated business (criminus colum gain, comput through 5. Solidated 4. Adveror (toss) (c col 3) If a g	lumn (A) 0. rertisin ne (loss) Ibrade or Ilumn 2 n 3) If a ne cols 5 7	5. Gross inco from activity is not unrelat business inco	tuon	6. Read	teble to mn 5	7. Excess exexpenses (co 6 minus colur but not more colurn 4 column 4
thedule I - Exploited (see Instr 1. Description of exploited activity als chedule J - Advertisicant I Income From 1. Name of periodical	Enter he page line 10	Gross of business ne from business business exe and on 1, Part I, col (A) O . me (see Cals Rep	3. Enter he page line 10	ere and on 1, Part I, 1, col (B) O . O . O . O .	Than Adv 4. Net inconfrom urrelated business (criminus colum gain, comput through 5. Solidated 4. Adveror (toss) (c col 3) If a g	lumn (A) 0. rertisin ne (loss) Ibrade or Ilumn 2 n 3) If a ne cols 5 7	5. Gross inco from activity is not unrelat business inco	tuon	6. Read	teble to mn 5	7. Excess exexpenses (co 6 minus colur but not more colurn 4 column 4
thedule I - Exploited (see instr 1. Description of exploited activity als chedule J - Advertisinant I Income From 1. Name of periodical	Enter he page line 10	Gross of business ne from business business exe and on 1, Part I, col (A) O . me (see Cals Rep	3. Enter he page line 10	ere and on 1, Part I, 1, col (B) O . O . O . O .	Than Adv 4. Net inconfrom urrelated business (criminus colum gain, comput through 5. Solidated 4. Adveror (toss) (c col 3) If a g	lumn (A) 0. rertisin ne (loss) Ibrade or Ilumn 2 n 3) If a ne cols 5 7	5. Gross inco from activity is not unrelat business inco	tuon	6. Read	teble to mn 5	7. Excess exexpenses (co 6 minus colur but not more colurn 4 column 4
thedule I - Exploited (see Instr 1. Description of exploited activity als chedule J - Advertisicant I Income From 1. Name of periodical	Enter he page line 10	Gross of business ne from business business exe and on 1, Part I, col (A) O . me (see Cals Rep	3. Enter he page line 10	ere and on 1, Part I, 1, col (B) O . O . O . O .	Than Adv 4. Net inconfrom urrelated business (criminus colum gain, comput through 5. Solidated 4. Adveror (toss) (c col 3) If a g	lumn (A) 0. rertisin ne (loss) Ibrade or Ilumn 2 n 3) If a ne cols 5 7	5. Gross inco from activity is not unrelat business inco	tuon	6. Read	teble to mn 5	7. Excess exexpenses (co 6 minus colur but not more colurn 4 column 4
Is hedule I - Exploited (see instr	Enter he page line 10	Gross of business ne from business business or e and on 1, Part I, col (A) O. Me (see Cals Rep	3. Enter he page line 10	ere and on 1, Part I, 1, col (B) O . O . O . O .	Pert I, line 9, co Than Adv 4. Net inconfrom urrelated business (cc minus colum gain, comput through 5 colidated 4. Adver or (toss) (c col 3) If a g cols 5 th	lumn (A) 0. rertisin ne (loss) Ibrade or Ilumn 2 n 3) If a ne cols 5 7	5. Gross inco from activity is not unrelat business inco	tuon	6. Read	teble to mn 5	7. Excess exexpenses (co 6 minus colur but not more colurn 4 column 4

59-2191587 Page 5 Form 990-T (2017) INC. 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.) 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7 7. Excess readership 2. Gross 3. Direct 5. Circulation 6. Readership costs (column 6 minus column 5, but not more advertising income 1. Name of periodical income costs than column 4) (1) (2) (3) (4) 0. 0. 0. Totals from Part I Enter here and Enter here and on page 1, Part I, line 11, col (A) Enter here and on page 1, Part I, line 11, col (B) on page 1, Part II, line 27 0. Totals, Part II (lines 1-5) 0 Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of time devoted to business Compensation attributable to unrelated business 2. Title 1. Name

0.

% %

%

%

▶

Form **990-T** (2017)

(1)

(2)

(3)

(4)

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

DESCRIPTION AMO CATERING COMMISSION LICENSING & REPRODUCTION REVENUE TOTAL TO FORM 990-T, PAGE 1, LINE 12 FORM 990-T OTHER DEDUCTIONS STATEM DESCRIPTION AMO MISCELLANEOUS EXPENSE BANK FEES WEBSITE LOSS FROM THEFT INSURANCE PROFESSIONAL SERVICES SECURITY TELEPHONE & UTILITIES TOTAL TO FORM 990-T, PAGE 1, LINE 28 FORM 990-T NET OPERATING LOSS DEDUCTION STATEM LOSS PREVIOUSLY LOSS PREVIOUSLY APPLIED REMAINING THIS Y 09/30/08 25,802. 10,207. 15,595. 1 09/30/10 20,823. 0. 25,626. 2 09/30/11 42,255. 0. 42,255. 4 09/30/12 9,881. 0. 9,881. 09/30/15 9,393. 0. 9,393. 09/30/15 9,393. 0. 9,393. 09/30/16 4,284. 0. 4,284.								
CATERING COMMISSION LICENSING & REPRODUCTION REVENUE TOTAL TO FORM 990-T, PAGE 1, LINE 12 FORM 990-T OTHER DEDUCTIONS STATEM DESCRIPTION AMO MISCELLANEOUS EXPENSE ADVERTISING EXPENSE BANK FEES WEBSITE LOSS FROM THEFT INSURANCE PROFESSIONAL SERVICES SECURITY TELEPHONE & UTILITIES TOTAL TO FORM 990-T, PAGE 1, LINE 28 FORM 990-T NET OPERATING LOSS DEDUCTION STATEM TAX YEAR LOSS SUSTAINED APPLIED REMAINING THIS Y 09/30/08 25,802 10,207 15,595 1 09/30/08 25,802 10,207 15,595 1 09/30/09 25,626 0 25,626 2 09/30/10 20,823 0 20,823 2 09/30/11 42,255 0 42,255 4 09/30/12 9,881 0 9,393 1 09/30/15 9,393 0 9,393 1 09/30/15 9,393 0 9,393 1 09/30/16 4,284 0 4,284 0 4,284	PATEMENT 1	S		INCOME	OTHER		990-T	FORM 990
TOTAL TO FORM 990-T, PAGE 1, LINE 12 FORM 990-T OTHER DEDUCTIONS STATEM DESCRIPTION AMO MISCELLANEOUS EXPENSE BANK FEES BANK FEES WEBSITE LOSS FROM THEFT INSURANCE PROFESSIONAL SERVICES SECURITY TELEPHONE & UTILITIES TOTAL TO FORM 990-T, PAGE 1, LINE 28 FORM 990-T NET OPERATING LOSS DEDUCTION STATEM TAX YEAR LOSS SUSTAINED PREVIOUSLY LOSS AVAILA TAX YEAR LOSS SUSTAINED PREVIOUSLY LOSS AVAILA TO9/30/08 25,802. 10,207. 15,595. 1 10,9/30/10 20,823. 0. 25,626. 2 10,9/30/11 42,255. 0. 42,255. 4 10,9/30/12 9,881. 0. 9,881. 10,9/30/15 9,393. 0. 9,393. 10,9/30/16 4,284. 0. 4,284.	AMOUNT						IPTION	DESCRIPT
DESCRIPTION	15,149. 699.				ENUE			
DESCRIPTION MISCELLANEOUS EXPENSE ADVERTISING EXPENSE BANK FEES WEBSITE LOSS FROM THEFT INSURANCE PROFESSIONAL SERVICES SECURITY TELEPHONE & UTILITIES TOTAL TO FORM 990-T, PAGE 1, LINE 28 FORM 990-T NET OPERATING LOSS DEDUCTION STATEM LOSS PREVIOUSLY APPLIED REMAINING THIS Y 09/30/08 25,802. 10,207. 15,595. 1 09/30/09 25,626. 0. 25,626. 2 09/30/10 20,823. 0. 20,823. 2 09/30/11 42,255. 0. 42,255. 4 09/30/12 9,881. 0. 9,881. 09/30/15 9,393. 0. 9,881. 09/30/16 4,284. 0. 4,284.	15,848.	_			LINE 12	0-T, PAGE 1,	TO FORM 990	TOTAL TO
MISCELLANEOUS EXPENSE BANK FEES WEBSITE LOSS FROM THEFT INSURANCE PROFESSIONAL SERVICES SECURITY TELEPHONE & UTILITIES TOTAL TO FORM 990-T, PAGE 1, LINE 28 FORM 990-T NET OPERATING LOSS DEDUCTION STATEM LOSS PREVIOUSLY APPLIED REMAINING THIS Y 09/30/08 25,802. 10,207. 15,595. 1 09/30/09 25,626. 0. 25,626. 2 09/30/10 20,823. 0. 20,823. 2 09/30/11 42,255. 0. 42,255. 4 09/30/12 9,881. 0. 9,881. 09/30/15 9,393. 0. 9,393. 09/30/16 4,284. 0. 4,284.	FATEMENT 2	S'.	5	DEDUCTIO	OTHER		990-T	FORM 990
ADVERTISING EXPENSE BANK FEES WEBSITE LOSS FROM THEFT INSURANCE PROFESSIONAL SERVICES SECURITY TELEPHONE & UTILITIES TOTAL TO FORM 990-T, PAGE 1, LINE 28 FORM 990-T NET OPERATING LOSS DEDUCTION STATEM LOSS PREVIOUSLY LOSS AVAILA TAX YEAR LOSS SUSTAINED APPLIED REMAINING THIS Y 09/30/08 25,802. 10,207. 15,595. 1 09/30/09 25,626. 0. 25,626. 2 09/30/10 20,823. 0. 20,823. 2 09/30/11 42,255. 0. 42,255. 4 09/30/12 9,881. 0. 9,881. 09/30/15 9,393. 0. 9,393. 09/30/16 4,284. 0. 4,284.	AMOUNT						IPTION	DESCRIPT
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TAX YEAR LOSS SUSTAINED APPLIED REMAINING THIS Y 09/30/08 25,802. 10,207. 15,595. 1 09/30/09 25,626. 0. 25,626. 2 09/30/10 20,823. 0. 20,823. 2 09/30/11 42,255. 0. 42,255. 4 09/30/12 9,881. 0. 9,881. 9,393. 09/30/15 9,393. 0. 9,393. 9,393. 09/30/16 4,284. 0. 4,284. 4,284.	PATEMENT 3	S'	JCTION			NET	990-T	FORM 990
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NOT CARRYOVER AVAILABLE THIS YEAR 127 857 12	15,595. 25,626. 20,823. 42,255. 9,881. 9,393. 4,284.		25,626. 20,823. 42,255. 9,881. 9,393. 4,284.	0. 0. 0. 0.	10	25,626. 20,823. 42,255. 9,881. 9,393.	/09 /10 /11 /12 /15	09/30/09 09/30/10 09/30/12 09/30/15
MOD CUMITORE AVAILABLE LISTS LEWY 121/001.	127,857.		127,857.		YEAR	AILABLE THIS	ARRYOVER AV	NOL CARE

FORM 990-T	COST	OF	GOODS	SOLD	_	OTHER	COSTS	STATEMENT 4
DESCRIPTION								AMOUNT
ADVERTISING/PROMOTION								978. 1,985.
EVENT COSTS LICENSES AND FEES								495.
OTHER EXPENSE								110.
REPAIRS & MAINTENANCE								861.
SUPPLIES								1,070.
TRAVEL								2,589.
TOTAL TO FORM 990-T, S	CHEDUL	Œ A	A, LIN	E 4B				8,088.
FORM 990-T DEDUC	TIONS	COI	NNECTE	D WIT	H 1	RENTAL	INCOME	STATEMENT 5
DESCRIPTION						TIVITY UMBER	AMOUNT	TOTAL
SALARIES & BENEFITS OCCUPANCY							69,868. 2,867.	
OFFICE EXPENSE							97.	
SECURITY							9,851.	
BANK FEES							3,899.	
COST OF REVENUE							3,219.	
		- :	SUBTOT	AL -		1		89,801.
TOTAL TO FORM 990-T, S	CHEDUI	Œ (C, COL	UMN 3				89,801.