			EXTENDE	D TO APP	RIL 1	5, 2021 _			5031 4	1	
64	Form 990-T		Exempt Organiza	tion Bus	ines	s Income T	ax Retur	ŋ/	OMB No 1545-004	7	
-7				oxy tax und			- 'LU	シフ	2040	1	
	1 2 may 1 / 9	For ca	alendar year 2019 or other tax year beginnii					<u>20</u>	ZU 19)	
•	Department of the Treasury	- ,	Go to www irs gov					,	Open to Public Inspect	ion for	
	Internal Revenue Service	╀	Do not enter SSN numbers on the				ation is a 501(c)(3		501(c)(3) Organizations loyer identification numb	Only	
	A Check box if address changed		Name of organization (Che	d see instructions.)		(Employees' trust, see instructions)					
	B Exempt under section	Print	KENTUCKY WESLEY	AN COLL	EGE				1-0466713		
	X 501(c) (3 ,)	or Type	Number, street, and room or suite		c, see instr	uctions.			lated business activity c instructions)	ode	
	408(e) 220(e	'	JOOU PREDERICA								
	408A 530(a 529(a))	City or town, state or province, co		r foreign p	ostal code			·		
	C Book value of all assets at end of year		F Group exemption number (See		<u> </u>						
Š	at end of year 62,581,0	092.	G Check organization type	X 501(c) corp	oration	501(c) trust		a) trust	Other tr	ust (
Š			ation's unrelated trades or business		1		the only (or first)				
; —			UNRELATED BUSIN				complete Parts I-				
_	,	-	ace at the end of the previous sente	nce, complete Pa	rts I and I	I, complete a Schedule	M for each addition	onal trade	e or		
د	business, then complete								es X No		
<u> </u>	-		poration a subsidiary in an affiliated ntifying number of the parent corpor		it-Subsidia	ay controlled group?		T	es X No		
_			DAN FRAZIER	ation. >		Telenh	one number	270-	926-3113		
Щ			de or Business Income	_	-	(A) Income	(B) Expens		(C) Net		
ź	1a Gross receipts or sa						· , , , , , , , , , , , , , , , , , , ,		· · ·	\nearrow	
S	b Less returns and all		c Bala	ance >	1c				/		
G	y				2				/		
-	3 Gross profit. Subtra	•	· · · · · · · · · · · · · · · · · · ·		3						
	4a Capital gain net inco	me (atta	ch Schedule D)		4a						
	b Net gain (loss) (Fori	m 4797, F	Part II, line 17) (attach Form 4797)		4b						
	c Capital loss deduction	on for tru	sts		4c				<u> </u>		
	5 Income (loss) from	a partner	rship or an S corporation (attach sta	itement)	5						
	6 Rent income (Sched	•			6						
	7 Unrelated debt-finar		•		7		/				
		-	and rents from a controlled organiza		8						
			ion 501(c)(7), (9), or (17) organizati	ion (Schedule G)	9						
	10 Exploited exempt ac				10				-		
	11 Advertising income12 Other income (See in	-			12						
	13 Total. Combine line		· · · · · · · · · · · · · · · · · · ·		13	0.					
	Part II Deducti	ons N	ot Taken Elsewhere (See	instructions fo		ons on deductions)			•		
	(Deduction	is must	be directly connected with the i	unrelated busเศ	ess incor	me)					
	14 Compensation of o	fficers, d	lirectors, and trustees (Schedule K)					14			
	15 Salaries and wages	3						15			
	16 Repairs and mainte	enance						16			
	17 Bad debts					•		17			
	18 Interest (attach sch		see instructions)					18			
	19 Taxes and licenses		· /			1 1		19	-		
	20 Depreciation (attac					20		1045	-		
	•	ciaimed o	on Schedule A and elsewhere on retu	urn		21a		21b		—	
	22 Depletion23 Contributions to de	forred or	Smagastian plans					22	-		
	23 Contributions to de24 Employee benefit p							24		—	
	25 Excess exempt exp	7						25			
	26 Excess readership							26			
	27 Other deductions (-						27			
			44.15				1ED 1	28		0.	
	29 Unrelated business	taxable	income before net operating loss de	duction. Subtract	t line 28 f	om lineRECEN	VED O	29		0.	
	30 Deduction for net of	perating	loss arising in tax years beginning	on or after Janua	ry 1, 2018	~	امّا				
	(see instructions)		income before net operating loss de loss arising in tax years beginning and the same tax years and tax years beginning and tax years beginning and tax years beginning and tax years are tax years are tax years and tax years are tax years are tax years are tax years and tax years are years are tax years are years are tax years are tax years are tax years are tax years are			8 APR 05	2021	30		0.	
/	31 Unrelated business	taxable	income. Subtract line 30 from line 2	9		=	- 18°	31		0.	
	923701 01-27-20 LHA I	For Pape	rwork Reduction Act Notice, see in	structions.		OGDEN	N. UT	\mathcal{Q}	Porm 990-T ((2019)	

Schedule A - Cost of Goods	Sold. Enter	method of inven	tory valuation N/A					
Inventory at beginning of year	1		6 Inventory at end of year			6		
2 Purchases		7 Cost of goods sold S	ine 6					
3 Cost of labor		from line 5. Enter here and in Part I,						
4a Additional section 263A costs		line 2			7	<u> </u>		
(attach schedule)		8 Do the rules of section	1 263A (1	with respect to		Yes	No	
b Other costs (attach schedule)	property produced or a	acquired	for resale) apply to					
5 Total Add lines 1 through 4b	5		the organization?					
Schedule C - Rent Income (From Real	Property and		ease	d With Real Prop	erty)	
(see instructions)								
1 Description of property								
(1)			<u> </u>					
(2)								
(3)			-					
(4)								
· -	2. Rent receiv	ed or accrued		_				
(a) From personal property (if the perc rent for personal property is more 10% but not more than 50%)	centage of than	` of rent for p	nd personal property (if the percenta ersonal property exceeds 50% or if it is based on profit or income)	age	3(a) Deductions directly columns 2(a) a	y connec nd 2(b) (cted with the income in attach schedule)	1
(1)								
(2)			·					
(3)								
(4)				-				
Total	0.	Total		0.			•	
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		nter -		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	instructions)					
			2. Gross income from		3 Deductions directly cor to debt-finant			
1 Description of debt-fin	or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)		ns		
(1)								
(2)	-							
(3)								
(4)				l	-			
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	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 deduct (column 6 x total of co 3(a) and 3(b))		
(1)		· · ·	%	1		\top		
(2)			%					
(3)			%					
(4)			%	1				
			78		inter here and on page 1, Part I, line 7, column (A)		Enter here and on pag Part I, line 7, column	
Tatala					0			0.
Totals	oludad in oolum:	n Q				\div		0.
Total dividends-received deductions in	iciaasa ili colami	10						<u> </u>

Schedule F - Interest,	Annuities, K	oyaities		Controlled O			LIOIIS	see ins	structions	5)	
1., Name of controlled organization		2 Employer identification number	3 Net unr	related income 4		Total of specified payments made		5 Part of column 4 th included in the control organization's gross in		6 Deductions directly connected with income in column 5	
(1)											
(2)											
(3)										·	
_(4)					<u> </u>		<u> </u>				
Nonexempt Controlled Organi	zations				·				,		
7 Taxable Income	8. Net unrelate (see insi	id income (los tructions)	s) 9 Total	of specified payi made	ments	10 Part of colur in the controlli gross		nization's		fuctions directly connected income in column 10	
(1)											
(2)						_					
(3)											
(4)											
						Add colum Enter here and line 8, c		1, Part I,	Enter he	d columns 6 and 11 ere and on page 1, Part I, line 8, column (B)	
Totals					▶			0.		0.	
Schedule G - Investme	nt Income o	of a Sec	tion 501(c)(7	'), (9), or (17) Org	anization					
(see inst	ructions)										
1 Desc	cription of income			2. Amount of	псоте	3 Deduction directly connected (attach schedule)	cted	4. Set-	-asides schedule)	5 Total deductions and set-asides (col 3 plus col 4)	
(1)											
(2)											
(3)						_					
(4)											
				Enter here and Part I, line 9, co						Enter here and on page 1. Part I, line 9, column (B)	
Totals			•		0.					0.	
Schedule I - Exploited	Exempt Act	ivity Inc	ome, Other	Than Adv	vertisin	g Income					
(see instr	uctions)			· · · · · · · · · · · · · · · · · · ·							
Description of exploited activity	2. Gross unrelated busing income from trade or busine	BSS	3. Expenses rectly connected with production of unrelated rusiness income	4. Net incor from unrelated business (comminus colum gain, comput through	d trade or olumn 2 in 3) If a e cols 5	5 Gross inco from activity to is not unrelate business inco	hat ed	attribut	penses table to mn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)											
(2)											
(3)											
(4)											
	Enter here and page 1, Part I line 10, col (A	. l	nter here and on page 1, Part I, line 10, col (B)	:		•				Enter here and on page 1, Part II, line 25	
Totals	<u> </u>	0.	0.	<u> </u>	_					0.	
Schedule J - Advertisi											
Part I Income From	Periodicals	Reporte	ed on a Cons	solidated	Basis						
1 Name of periodical	adve	Gross rtising ome	3 Direct advertising costs	or (loss) (c col 3) If a g	tising gain iol 2 minus ain, compute hrough 7	5 Circulat		6 Read		7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)											
(2)											
(3)											
(4)											
Totale (carry to Part II line (5))		0								0.	

ij

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)						
Totals from Part I	▶ 0.	0.	,			0
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)			,	Enter here and on page 1, Part II, line 26
Totais, Part II (lines 1-5)	▶ 0.	0.			•	0

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name
2 Title
3 Percent of time devoted to business
4 Compensation attributable to unrelated business

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

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

Form **990-T** (2019)