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		\cap	magn exami
Exempt Organization Business Income	MOV Tay Retur	293	930670411
-orm 990-T (and proxy tax under section 6033	3(e))	" ├	OMB No 1545-0687
For calendar year 2018 or other tax year beginning $\phantom{00000000000000000000000000000000000$	nding <u>06/30</u> ,2	o <u>19</u>	2018
Department of the Treasury Separtment of the Treasury The Department of the Treasury		,,, <u> </u>	Openato Public Inspection for \$50 \$501(c)(3) Organizations Only
Do not enter SSN numbers on this form as it may be made public if your or A Check box if Name of organization (Check box if name changed and see instruction)			ॐ 501(c)(3) Organizations'Only4.ﷺ yer identification number
address changed	·	(Employ	rees trust see instructions)
B Exempt under section THE MCCALLIE SCHOOL			
X 501(C)(3) Print Number, street, and room or suite no. If a PO box, see instructions	}		75837
408(e) 220(e) Type 500 DODDS AVENUE			tructions)
529(a) City or town, state or province, country, and ZIP or foreign postal code			
Book value of all assets at end of year CHATTANOOGA, TN 37404		53112	10
F Group exemption number (See instructions)	(-) (-)	101/2) #	
Enter the number of the organization's unrelated trades or businesses ▶ 1	(c) trust Describe	401(a) to	rust Other trust (or first) unrelated
		• •	than one, describe the
first in the blank space at the end of the previous sentence, complete Parts I and II, complete a	a Schedule M for eac	h additiona	al
trade or business, then complete Parts III-V During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary	ov controlled crave?		► Yes X No
If "Yes," enter the name and identifying number of the parent corporation	y controlled group?		P tes A No
	one number > 42	3-624-	8300
Part I Unrelated Trade or Business Income (A) Income	(B) Expens	ses	(C) Net
1a Gross receipts or sales b Less returns and allowances c Balance ▶ 1c		New York	
b Less returns and allowances c Balance ▶ 1c Cost of goods sold (Schedule A, line 7) 2			
3 Gross profit Subtract line 2 from line 1c	有效的产品 被	#*###	The state of the s
4a Capital gain net income (attach Schedule D) 4a 270, 969.	* 420		270,969.
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
c Capital loss deduction for trusts			133,568.
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797). 4b c Capital loss deduction for trusts			
	i		
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	<u> </u>		
0 Exploited exempt activity income (Schedule I)			
1 Advertising income (Schedule J)			
2 Other income (See instructions, attach schedule)	C. Sales - Sales and an artist	£1.4.1.19	404,537.
3 Total Combine lines 3 through 12		ycent fo	
deductions must be directly connected with the unrelated business in		.xccpt 10	or contributions,
4 Compensation of officers, directors, and trustees (Schedule K)	<u>VED l</u>	. 14	
5 Salaries and wages		. 15	
6 Repairs and maintenance	2020 SO-9E	. 16	•
Repairs and maintenance Bad debts Interest (attach schedule) (see instructions).		. 18	
9 Taxes and licenses	T. TIT. I.	. 19	
O Charitable contributions (See instructions for limitation rules)	- Barbaran	. <u>20</u>	
1 Depreciation (attach Form 4562)		22b	
3 Depletion			
4 Contributions to deferred compensation plans			
5 Employee benefit programs	١,٠	1 -	
6 Excess exempt expenses (Schedule I)		1 -	
7 Excess readership costs (Schedule J)			
9 Total deductions Add lines 14 through 28.			
Unrelated business taxable income before net operating loss deduction. Subtract line			404,537.
Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (so	Z) 3	۱ · 	404,537.
2 Unrelated business taxable income Subtract line 31 from line 30		<u> 32 </u>	Form, 990-T (2018)
^{(2740 1} 2842LA ^{JS} 242 2/10/2020 2:08:55 PM V 18-7.6F	78725		100

62-0475837 THE MCCALLIE SCHOOL Form 990-T (2018) Page 2 Total Unrelated Business Taxable Income 'Total of unrelated business taxable income computed from all unrelated trades or businesses (see 404,537. 33 1,211. 34 34 35 Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see 193,108. 35 Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum 36 212,640. 1,000. 37 Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions) . 37 38 Unrelated business taxable income Subtract line 37 from line 36 If line 37 is greater than lines 211,640. Part IV Tax Computation 39 44,444. 40 Trusts Taxable at Trust Rates See instructions for tax computation Income tax the amount on line 38 from Tax rate schedule or Schedule D (Form 1041). . . 40 41 41 42 44,444. Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies Tax and Payments 45 a Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116). 45b c General business credit Attach Form 3800 (see instructions) e Total credits. Add lines 45a through 45d 44,444. 46 Subtract line 45e from line 44.... 47 Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 44,444. 48 49 49 2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2 56,000 50c **d** Foreign organizations. Tax paid or withheld at source (see instructions) Credit for small employer health insurance premiums (attach Form 8941) Other credits, adjustments, and payments _____ Form 2439 Form 4136 Other 56,000. 51 1,062. 52 Estimated tax penalty (see instructions) Check if Form 2220 is attached. 53 Tax due If line 51 is less than the total of lines 48, 49, and 52, enter amount owed 10,494. Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want Credited to 2019 estimated tax ▶ 10, 494. Refunded > Statements Regarding Certain Activities and Other Information (see instructions) Yes No At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign country 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 58 Enter the amount of tax-exempt interest received or accrued during the tax year > \$

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 true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this return 05/15/2020 CFO Here ELIZABETH with the preparer shown below Date Signature of office (see instructions)? X Yes

Paid Preparer **Use Only**

Print/Type prepa parer's signature Date 05/15/2020 MARC A AZAR ► SMITH & HOWARD, Firm's name Firm's address ▶ 271 17TH STREET, NW SUITE 1600, GA 30363 ATLANTA,

P91739349 self-employed Firm's EIN ▶ 58-1250486 404-874-6244

Check if

PTIN

Form 990-T (2018)

Sign

Page 3

No

Х

Schedule E - Unrelated I	Debt-Financed Income (s	ee instructions)				
Description of debt-financed property		2 Gross income from or	Deductions directly connected with or allocable to debt-financed property			
		allocable to debt-financed property	(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)		
(1)	*					
(2)						
(3)		<u> </u>				
(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)		%				
			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)		
Totals						
Total dividends-received deduc						

Form 990-T (2018)

Schedule F-Interest, Ann	uities, Royalties						ations (see	e instructio	115)	
•		Exen	npt Co	ontrolled Or	ganizati	ons	T			
organization toentification number		Der		elated income 4 Total of s payments			ied included	of column 4 that is in the controlling ion's gross income		6 Deductions directly connected with income in column 5
(1)										
(2)				-						
(3)										
(4)	_									
Nonexempt Controlled Organi	zations	-								-
7 Taxable Income	8 Net unrelated income 9			include includ		uded in the co			Deductions directly lected with income in column 10	
(1)										
(2)										
(3)							-			
(4)										
Totals					>	Ent Pa	er here and on	page 1, mn (A)	Ente	I columns 6 and 11 r here and on page 1, I, line 8, column (B)
Schedule G-investment ii	Come or a sec	<u> </u>	<u> </u>	3 Deduc		IIIZati				5 Total deductions
1 Description of income	2 Amount o	f income		directly co (attach sc	nnected			t-asides schedule)		and set-asides (col 3 plus col 4)
(1)			<u> </u>							
(2)			+						_	
(3)			 						_	_
(4)			D090s, 0.70	ha w naapoorale "ee	/ 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	A CHURACOS	JOSEPH STREET	er var entre en en en en	X73 3800 E	
Totals	Enter here and Part I, line 9, c	column (A)								nter here and on page 1 Part I, line 9, column (B)
Schedule I-Exploited Exe	empt Activity In	come, Oth	er Th	an Advert	ising Ir	come	(see instru	ctions)		
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 incor from unrela or business 2 minus co If a gain, c cols 5 thre	ted trade (column lumn 3) ompute	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)							· · · · ·			
Totals	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 26
Schedule J-Advertising Ir										
Part I Income From Per	iodicals Report	ted on a Co	onsol	idated Ba	sis					<u> </u>
1 Name of periodical	2 Gross advertising income	3 Direct advertising costs		4 Adver gain or (los 2 minus co a gain, co cols 5 thre	ss) (col ol 3) If mpute	(col 5 Circulat 3) If income		6 Readership costs		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)					n Mark					
(2)								-		KEN KAN
(3)		-								
(4)		-						!	_	
V · /		-		HALF TO BOX TO BE SUIT OF SUIT	ngar siking 1990 1972 d					~ 2-24/2/820/2/4/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2
Totals (carry to Part II, line (5))									_	Form 990-T (2018

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.)

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)	<u> </u>					
Totals from Part I ▶						
	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 27
Totals, Part II (lines 1-5) ▶						
Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)						
			•	3 Percent of	4 Componentia	- attabutable te

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business		
(1)		%			
(2)	3	%			
(3)		%			
(4)		%			
Total Enter here and on page 1, Part II, line 14					

Form **990-T** (2018)

ATTACHMENT 1

ORGANIZATION'S ONLY UNRELATED TRADE OR BUSINESS ACTIVITY

INVESTMENTS IN PASS-THROUGH ENTITIES CREATING TRADE/BUSINESS INCOME

62-0475837

ATTACHMENT 2

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS OR S CORPORATIONS

UBTI INCOME FROM VARIOUS PARTNERSHIP INVESTMENTS

133,568.

INCOME (LOSS) FROM PARTNERSHIPS

133,568.