| di.                                   |                  |                |  | _         |   | 2 @                                     | 202                 | 12105  | 7017           |  |  |
|---------------------------------------|------------------|----------------|--|-----------|---|---|---------------------|--|----------------|--|--|
| Form <b>99</b>                        | ∩ <sub>-</sub> T | Ex             | empt Organization  | Bus       | siness Income                           | Tax Retu                                | Mo Պ_               | OMB No 15  | 15-0687        |  |  |
| Form JJ                               | 0-1              |                |  |           | der section 6033(                       |   |                     |  |                |  |  |
| ~ ·                                   |                  | For cale       | ndar year 2018 or other tax year begin   |           |   |   | 20 <del>1 9</del> · | <b>2</b> (0) <b>1</b>  | 18             |  |  |
| Department of the<br>Internal Revenue |                  |                | ► Go to www.irs.gov/Form990  |           |   | 1 1 1                                   | ) I al-             | Open to Public Ir  | spection for   |  |  |
| $\overline{}$                         | k box if         | ▶ Do           | Name of crosspation ( Check by   |           |   |   |                     | Open to Public In<br>501(c)(3) Organia<br>ver identification |                |  |  |
|                                       | ss changed       | 1              | Name of organization ( Check bo  | ox II nai | me changed and see instruction          | 15)                                     |                     | yees' trust, see instru                                      |                |  |  |
| B Exempt unde                         | er section       | 1              | CENTENARY COLLEGE O  | r I.O     | ΔΙΤΩΤΑΝΆ                                |   |                     |  |                |  |  |
| X 501( C                              | ^                | Print          | Number, street, and room or suite no   |           |   |   | 72-04               | 108915   |                |  |  |
| 408(e)                                |                  | or             | The state of the s | 0         | DOX, GOO MIDE GOLOTO                    |   |                     | ited business act  | tivity code    |  |  |
| 408A                                  | 530(a)           | .,,,,,         | 2911 CENTENARY BOUL  | EVAR      | D                                       |   |                     | (See Instructions)   |                |  |  |
| 529(a)                                |                  |                | City or town, state or province, country   |           |   |   |                     |  |                |  |  |
| C Book value o                        |                  | 1              | SHREVEPORT, LA 7110  | 4         |   |   | 21111               | .0   |                |  |  |
| at end of yea                         | ar               | F Gro          | up exemption number (See instructi   | ons)      | <b>&gt;</b>                             |   | _                   |  |                |  |  |
| 169,89                                | 9,231.           | G Che          | ck organization type > X 501   | (c) co    | rporation 501(c                         | :) trust                                | 401(a) t            | ırust  | Other trust    |  |  |
| H Enter the                           | number of        | the orga       | nization's unrelated trades or busine  | sses.     | ▶ 3                                     | Describe                                | the only            | (or first) unrelat   |                |  |  |
| trade or bu                           | usiness her      | e >OII         | & GAS PRODUCTION   |           | If only one,                            | complete Parts I                        | -V If more          | than one, desc   | ribe the       |  |  |
| first in the                          | blank spa        | ce at the      | end of the previous sentence, cor  | nplete    | Parts I and II, complete a S            | Schedule M for ea                       | ch addition         | al   |                |  |  |
|                                       |                  |                | ete Parts III-V  |           |   |   |                     |  |                |  |  |
|                                       |                  |                | corporation a subsidiary in an affili  |           |   | controlled group?                       | <i>.</i>            | ▶ ∐ Ye   | s X No         |  |  |
|                                       |                  |                | identifying number of the parent cor   | poration  |   |   | 0.060               | 5107   |                |  |  |
|                                       |                  |                | BERT BLUE  |           |   | ne number ▶ 31                          |                     |  |                |  |  |
|                                       | receipts or s    |                | 9,410.   |           | (A) Income                              | (B) Exper                               | ses                 | (C) N  | let            |  |  |
|                                       | •                |                |  | 4.        | 9,410.                                  |   |                     |  |                |  |  |
|                                       | ms and allowa    |                | ule A, line 7)   | 1c<br>2   | 3,410.                                  |   |                     |  |                |  |  |
|                                       | -                |                | 2 from line 1c   | 3         | 9,410.                                  |   |                     |  | 9,410.         |  |  |
|                                       |                  |                | ttach Schedule D)  | 4a        | 5,1141                                  |   |                     |  | <del> </del>   |  |  |
|                                       |                  |                | Part II, line 17) (attach Form 4797)   | 4b        |   |   | /                   |  |                |  |  |
|                                       |                  |                | rusts  | 4c        |   |   |                     |  |                |  |  |
|                                       |                  |                | an S corporation (attach statement)  | 5         |   |   |                     |  |                |  |  |
|                                       |                  |                |  | 6         |   | R                                       | ECE                 | AFD O  |                |  |  |
|                                       |                  |                | come (Schedule E)  | 7         |   | 4                                       | 4 =                 | S  |                |  |  |
| 8 Interest,                           | annuities, roya  | altles, and re | nts from a controlled organization (Schedule F)  | 8         |   |   | <u>JN 15</u>        | 2020   |                |  |  |
|                                       |                  |                | I(c)(7), (9), or (17) organization (Schedule G)  | 9         |   | - m                                     |                     |  |                |  |  |
|                                       |                  |                | ncome (Schedule I)   | 10        |   | ,'C                                     | GDEN                | I, UT  |                |  |  |
|                                       |                  |                | ule J)   | 11        |   |   |                     |  |                |  |  |
|                                       |                  |                | tions, attach schedule)  | 12        | /                                       |   |                     |  |                |  |  |
| 13 Total. (                           | Combine lir      | nes 3 thre     | ough 12  | 13/       | 9,410.                                  | 111                                     |                     |  | 9,410.         |  |  |
| Saltell D                             | eduction         | ns Not         | Taken Elsewhere (See instr<br>be directly connected with the   | uctio     | ons for limitations on c                | reductions.) (I                         | except to           | or contribution  | ns,            |  |  |
| 14 Compe                              | eduction of      | officers       | directors, and trustees (Schedule K)   | ie ui     | irelated business inco                  | ome.)                                   |                     |  | <del></del>    |  |  |
| 15 Salarie                            | s and ware       | e contraction  | urrectors, and trustees (scriedule K),   | • • •     |   | • • • • • • • •                         | 15                  |  |                |  |  |
| 16 Repairs                            | s and main       | tenance        |  | • • •     |   |   | 16                  |  |                |  |  |
|                                       |                  |                |  |           |   |   |                     |  |                |  |  |
| 18 Interes                            | t (attach so     | chedule) (     | see instructions)  | · • •     |   |   | 18                  |  |                |  |  |
|                                       |                  |                | /  |           |   |   |                     |  |                |  |  |
| 20 Charita                            | ble contrib      | utions (S      | ee instructions for limitation rules)  |           |   |   | . 20                |  |                |  |  |
| 21 Deprec                             | iation (atta     | ch Form        | 4562). /   |           | 21                                      |   |                     |  |                |  |  |
| 22 Less de                            | epreciation      | claimed        | on Schedule A and elsewhere on re  | turn      | 22a                                     |   | 22b                 | <u> </u>   |                |  |  |
| 23 Depletion                          | on               |                | . /  |           |   |   | . 23                |  | 1,401.         |  |  |
| 24 Contrib                            | utions to d      | eferred 9      | 6mpensation plans  |           |   |   | 24                  |  |                |  |  |
| 25 Employ                             | ee benefit       | programs       |  |           |   |   | . 25                | ļ  |                |  |  |
| 26 Excess                             | exempt ex        | penses (S      | Schedule I).   |           |   |   | . 26                |  |                |  |  |
| 27 Excess                             | readership       | costs (So      | chedule J)   |           |   |   | . 27                | <del></del>  | 0.515          |  |  |
| 28 Other d                            | eductions        | (attach s      | chedule)   |           | • | . ATCH. 1                               | 28                  |  | 9,510.         |  |  |
| 29 Total de 30 Unrelat                | eauctions.       | Add line:      | s 14 through 28.   |           | deduction O. I.                         |   | . 29                |  | 10,911.        |  |  |
|                                       |                  |                | e income before net operating<br>gloss arising in tax years beginnin   |           |   |   |                     |  | <u>-1,501.</u> |  |  |
|                                       |                  |                | g loss arising in tax years beginnin<br>income Subtract line 31 from line  |           |   |   |                     |  | -1,501.        |  |  |
| For Paperwo                           | rk Reducti       | on Act N       | otice, see instructions.   |           |   | • | . 32                |  | 0-T (2018)     |  |  |
| 8X2740 1.000                          | AM JSA           | 0 2/0          | 6/2020 12:17:54 PM   |           |   | 70626                                   |                     | rom 99   | O-1 (2018)     |  |  |

011

rauette

Firm's address ▶ 14241 DALLAS PARKWAY, SUITE 1100, DALLAS,

JSA

**Preparer** 

**Use Only** 

Paid

JEANETTE VERRELLI

Firm's name ► BKD, LLP

TX 75254

05/11/2020

P00742631

Form 990-T (2018)

self-employed

Firm's EIN ▶ 44-0160260

Phone no 972-702-8262

%

Form 990-T (2018)

Enter here and on page 1, --- Part I, line 7, column (B)

(4)

Total dividends-received deductions included in column 8

Enter here and on page 1, Part I, line 7, column (A)

| Schedule F-Interest, Anni           | inico, Royanico   |   |                    | rolled Org   |  |                                  |   | mot dotto  | ,  |   |  |
|-------------------------------------|---|---|--------------------|--|--|----------------------------------|---|--|--|---|--|
| Name of controlled organization     | 2. Employer identification number                                     | er 3. Net   |                    | d income   | 4. Total o   |                                  | ied included  | f column 4 that is<br>In the controlling<br>ion's gross income |  | 6. Deductions directly connected with incoming the column 5   |  |
| (1)                                 |   |   |                    |  |  |                                  |   |  |  |   |  |
| (2)                                 |   |   |                    |  |  |                                  |   |  |  |   |  |
| (3) ~                               |   |   |                    |  |  |                                  |   |  |  |   |  |
| (4)                                 |   |   |                    |  |  |                                  |   |  |  |   |  |
| Nonexempt Controlled Organiz        | zations   |   |                    |  |  |                                  |   |  |  |   |  |
| 7. Taxable Income                   | 8. Net unrelated in<br>(loss) (see instruct                           |   |                    | tal of specific<br>ments made  |  |                                  |   | . Deductions directly nected with income in column 10          |  |   |  |
| (1)                                 |   |   |                    |  |  |                                  |   |  |  |   |  |
| (2)                                 |   |   |                    |  |  |                                  |   |  |  |   |  |
| (3)                                 |   |   |                    |  |  |                                  |   |  |  |   |  |
| (4)                                 |   |   |                    |  |  |                                  |   |  |  |   |  |
| Totals                              |   | tion 501(c  |                    | :  | ▶<br>) Orga  | Pa                               | ter here and on<br>int I, line 8, colur<br>on (see inst   | nn (A)   |  | er here and on page 1,<br>rt I, line 8, column (B)            |  |
| 1. Description of income            | 2. Amount of  | -   |                    | 3. Deduction directly contact (attach sci  | tions '  | •                                | 4. Set  | l-asides<br>schedule)  |  | 5. Total deductions<br>and set-asides (col. 3<br>plus col. 4) |  |
| (1)                                 |   |   |                    |  |  |                                  |   |  |  |   |  |
| (2)                                 |   |   |                    |  |  |                                  |   |  |  |   |  |
| (3)                                 |   |   | <u> </u>           |  |  |                                  | · · · ·   |  |  |   |  |
| (4)                                 |   |   | <u> </u>           |  |  |                                  |   |  |  |   |  |
| Totals ▶ Schedule I – Exploited Exc | Enter here and<br>Part I, line 9, c                                   | olumn (A)   | er Tha             | n Advert   | ising In   | com                              | see instru  | ctions)  |  | Enter here and on page<br>Part I, line 9, column (B           |  |
| Description of exploited activity   | 2. Gross<br>unrelated<br>business income<br>from trade or<br>business | 3. Expens<br>directly<br>connected<br>production<br>unrelated<br>business inc | es<br>with<br>n of | 4. Net incorfrom unrela<br>or business<br>2 minus co<br>If a gain, c<br>cols 5 thr | ne (loss)<br>ted trade<br>(column<br>lumn 3)<br>ompute | 5. G<br>from<br>is r             | 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)                                 |   |   | T I                |  |  |                                  |   |  |  |   |  |
| (2)                                 |   |   |                    | _  |  |                                  |   |  |  |   |  |
| (3)                                 |   |   |                    |  |  |                                  |   |  |  |   |  |
| (4)                                 | -   |   |                    |  |  |                                  |   |  |  |   |  |
|                                     | Enter here and on<br>page 1, Part I,<br>line 10, col (A)              | Enter here at<br>page 1, Pa<br>line 10, col                                   | irt I,             |  |  | ·                                |   |  |  | Enter here and<br>on page 1,<br>Part II, line 26              |  |
| Totals                              |   | · _   |                    |  | -,   |                                  |   |  |  |   |  |
| Schedule J- Advertising l           |   |   |                    | 1-4  | _!_  |                                  |   | -  |  | <del></del>   |  |
| Part I Income From Per              | iodicals Repor  | rea on a Co   | onsolio            | ated Ba  | SIS  |                                  |   |  |  |   |  |
| Name of periodical                  | 2. Gross<br>advertising<br>income                                     | 3. Direc<br>advertising (   |                    | 4. Adver<br>gain or (lo<br>2 minus o<br>a gain, co<br>cols 5 thr                   | ss) (col<br>ol 3) If<br>empute                         | 1 3. Circulation   C. Neadership |   |  | 7 Excess readership<br>costs (column 6<br>minus column 5, bu<br>not more than<br>column 4) |   |  |
| (1)                                 | <del>                                     </del>                      |   |                    |  |  |                                  |   |  |  |   |  |
| (2)                                 |   |   |                    |  |  |                                  |   |  |  | 7   |  |
| (3)                                 |   |   |                    |  |  |                                  |   | <u> </u>   | -  | 7   |  |
| (4)                                 |   |   |                    |  |  |                                  |   | <del>                                     </del>               |  | 7   |  |
| <u> </u>                            | <del> </del>  |   |                    |  |  |                                  |   | <u> </u>   | _  | T   |  |
| Totals (carry to Part II, line (5)) |   |   |                    |  |  | <u> </u>                         | <del></del>   |  |  | Form <b>990-T</b> (201  |  |

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<br>advertising<br>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)                           |  | i .  |   |                       |                    |  |
| (4)                           |  | 7  |   |                       |                    |  |
| Totals from Part I ▶          | ·  |  | ].  |                       |                    |  |
|                               | Enter here and on<br>page 1, Part I,<br>line 11, col (A) | Enter here and on<br>page 1, Part I,<br>line 11, col (B) |   |                       |                    | Enter here and<br>on page 1,<br>Part II, line 27                                 |
| Totals, Part II (lines 1-5) ▶ |  |  |   |                       |                    |  |

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

| 1. Name  | 2 Title | 3. Percent of time devoted to business | Compensation attributable to unrelated business |
|--|---------|--|---|
| )  |         | %                                      |   |
| ) _  |         | %                                      |   |
| )  |         | * %                                    | •   |
|  |         | %                                      |   |
| otal. Enter here and on page 1, Part II, line 14 |         |  | <del></del>                                     |

Form **990-T** (2018)

CENTENARY COLLEGE OF LOUISIANA

72-0408915

ATTACHMENT 2

CENTENARY SIF

SCHEDULE M LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

CENTENARY SIF, LP

**-149,035.** 

INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

-149,035.

72-0408915 ...

ATTACHMENT 1

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

LEASE OPERATING EXPENSE

9,510.

PART II - LINE 28 - OTHER DEDUCTIONS

9,510.

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

## **Unrelated Business Taxable Income for Unrelated Trade or Business**

OMB No 1545-0687

Department of the Treasury Internal Revenue Service Name of organization

06/30 .20 19 For calendar year 2018 or other tax year beginning  $\frac{07/01}{}$ , 2018, and ending ▶ 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).

(A) Income

(B) Expenses

(C) Net

Employer Identification number CENTENARY COLLEGE OF LOUISIANA 72-0408915

Unrelated business activity code (see instructions) ▶ 900099

| Describe the unrelated trade or business | PASS | THROUGH |
|--|------|---------|
|--|------|---------|

Part I Unrelated Trade or Business Income

|    |  |       | .,                            | (=,=::,=::=:=       |             | (0)  |
|----|--|-------|-------------------------------|---------------------|-------------|--|
| 1a | Gross receipts or sales  |       |                               |                     |             |  |
| b  | Less returns and allowances                                      | 1c    |                               |                     |             |  |
| 2  | Cost of goods sold (Schedule A, line 7)                          | 2     |                               |                     |             |  |
| 3  | Gross profit Subtract line 2 from line 1c                        | 3     |                               |                     |             |  |
| 4a | Capital gain net income (attach Schedule D)                      | 4a    |                               |                     | _           |  |
| b  | Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) | 4b    |                               |                     |             |  |
| c  | Capital loss deduction for trusts                                | 4c    |                               |                     |             |  |
| 5  | Income (loss) from a partnership or an S corporation (attach     |       |                               |                     |             |  |
|    | statement) ATCH 3  | 5     | 33,194.                       |                     |             | 33,194   |
| 6  | Rent income (Schedule C)   | 6     |                               |                     |             |  |
| 7  | Unrelated debt-financed income (Schedule E)                      | 7     |                               |                     |             |  |
| 8  | Interest, annuities, royalties, and rents from a controlled      |       |                               |                     | i           |  |
|    | 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    |                               |                     |             |  |
| 13 | Total. Combine lines 3 through 12                                | 13    | 33,194.                       |                     | Ī           | 33,194   |
| 14 | Compensation of officers, directors, and trustees (Schedule K)   |       |                               |                     | 14          |  |
| 15 | Salaries and wages   |       | · · · · · · · · · · · · · · · | <b>.</b>            |             |  |
| 16 | Repairs and maintenance  |       |                               |                     | 16          |  |
| 17 | Bad debts  |       |                               |                     | 17          |  |
| 18 | Interest (attach schedule) (see instructions).                   |       |                               |                     | 18          |  |
| 19 | Taxes and licenses   |       |                               |                     | 19          | 1,085  |
| 20 | Charitable contributions (See instructions for limitation rules) |       |                               |                     | 20          |  |
| 21 | Depreciation (attach Form 4562)                                  |       | 21                            |                     | 1           |  |
| 22 | Less depreciation claimed on Schedule A and elsewhere on re      | eturn | 22a                           |                     | 22ь         |  |
| 23 | Depletion  |       |                               |                     | 23          | <del>.</del>                                     |
| 24 | Contributions to deferred compensation plans                     |       |                               |                     | 24          |  |
| 25 | Employee benefit programs  |       |                               |                     | 25          |  |
| 26 | Excess exempt expenses (Schedule I)                              |       |                               |                     | 26          |  |
| 27 | Excess readership costs (Schedule J)                             |       |                               |                     | 27          |  |
| 28 | Other deductions (attach schedule)                               |       |                               |                     | 28          |  |
| 29 | Total deductions. Add lines 14 through 28                        | - • • |                               |                     | 29          | 1,085.   |
| 30 | Unrelated business taxable income before net operating           |       |                               |                     | 30          | 32,109.  |
| 31 | Deduction for net operating loss arising in tax years            |       |                               |                     | <u> </u>    | <del> · · · · · · · · · · · · · · · · · · </del> |
|    | instructions)  |       |                               |                     | 31          |  |
|    |  |       |                               | · · · · · · · · · · | <del></del> |  |

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

32,109.

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

## **Unrelated Business Taxable Income for Unrelated Trade or Business**

(B) Expenses

(C) Net

OMB No 1545-0687

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)

(A) Income

Name of organization

CENTENARY COLLEGE OF LOUISIANA

Part I Unrelated Trade or Business Income

**Employer Identification number** 

72-0408915 Unrelated business activity code (see instructions) ▶ 900099

Describe the unrelated trade or business ► PASS THROUGH

| 1 a      |   |    |           |              |          |                           |
|----------|---|----|-----------|--------------|----------|---------------------------|
| ь        | Less returns and allowances c Balance   | 1c |           |              |          |                           |
| 2        | Cost of goods sold (Schedule A, line 7)   | 2  |           |              |          |                           |
| 3        | Gross profit Subtract line 2 from line 1c   | 3  |           |              |          |                           |
| 4a       | Capital gain net income (attach Schedule D)   | 4a |           |              |          |                           |
| b        | Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)                                  | 4b |           |              |          |                           |
| C        | Capital loss deduction for trusts   | 4c |           |              |          |                           |
| 5        | Income (loss) from a partnership or an S corporation (attach                                      |    |           |              |          |                           |
|          | statement) ATCH 2 .   | 5  | -149,035. |              |          | -149,035                  |
| 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)  |    | 1         |              | 1        |                           |
|          | organization (Schedule G)   | 9  |           |              |          | <u> </u>                  |
| 10       | Exploited exempt activity income (Schedule I)   | 10 |           |              |          |                           |
| 11       | Advertising income (Schedule J)   | 11 |           |              |          |                           |
| 12       | Other income (See instructions; attach schedule)  | 12 |           |              |          |                           |
| 13_      | Total. Combine lines 3 through 12   | 13 | -149,035. |              |          | -149,035                  |
| 14       | Compensation of officers, directors, and trustees (Schedule K)                                    |    |           |              | 14_      |                           |
| 14       | ·   |    |           |              |          | <del></del>               |
| 15       | Salaries and wages  |    |           |              | I I      |                           |
| 16       | Repairs and maintenance   |    |           |              | 16       |                           |
| 17       | Bad debts   |    |           |              | 17       | <del></del>               |
| 18       | Interest (attach schedule) (see instructions)   |    |           |              | 18       |                           |
| 19       | Taxes and licenses  |    |           |              | 19<br>20 |                           |
| 20       | Charitable contributions (See instructions for limitation rules)  Depreciation (attach Form 4562) |    |           |              | 20       |                           |
| 21<br>22 | Less depreciation claimed on Schedule A and elsewhere on re                                       |    |           |              | 22ь      |                           |
| 23       | Depletion   |    |           | <del>.</del> | 23       |                           |
| 24       | Contributions to deferred compensation plans  |    |           |              | 24       |                           |
| 25       | Employee benefit programs   |    |           |              | 25       |                           |
| 26       | Excess exempt expenses (Schedule i),  |    |           |              | 26       |                           |
| 27       | Excess readership costs (Schedule J)  |    |           |              | 27       |                           |
| 28       | Other deductions (attach schedule)  |    |           |              | 28       |                           |
| 29       | Total deductions. Add lines 14 through 28.  |    |           |              | 29       | ·                         |
| 30       | Unrelated business taxable income before net operating  |    |           |              | 30       | -149,035                  |
| 31       | Deduction for net operating loss arising in tax years   |    |           |              |          | -                         |
|          | instructions)   |    | =         | -            | 31       |                           |
| 32       | Unrelated business taxable income. Subtract line 31 from line                                     |    |           |              | -        | -149,035                  |
| <u></u>  |   |    |           |              |          | hadula M /Form 990-T) 201 |

ATTACHMENT 3

TL JAMES

# SCHEDULE M LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

T.L. JAMES & COMPANY AND AFFILIATES

33,194.

INCOME (LOSS) FROM PARTNERSHIPS AND/OR S CORPORATIONS

33,194.