2019
ro
_
OCT
0
SCANNED

		ርዕስ ተ	Ex	empt Org	anization B	uși	ness l	ncome Ta	x Return	1	ОМВ	No 1545-06	87
	Fo	99 0-T		•	d proxy tax u							2018	
		•			ıx year beginning				,,	<u></u>		<u> </u>	
	Depart	ment of the Treasury		_	ov/Form990T fo						Open to P	ublic Inspect	tion for
	Interna	I Revenue Service	► Do not	enter SSN numbe					zation is a 501(c)(3).	نا	501(c)(3)	Organization	s Only ,
	A	Check box if address changed	d				•	d see instructions)		(Er	nployees'		umber
		xempt under sectio		AMERICAN	BANJO MUSE HERIDAN AVE	EUM,	INC.				tructions)		
	X	501(C) <u>03</u>)	or Type		CITY, OK 7			1			3-152	26929 usiness activ	uty code
	-	408(e) 1220(.6)	OT LES ESTATES	0111, 01.	. 0 _ 0		-			ee instruct		,
	-]408A	.a)							1	53220	า	1
	C Bo	ok value of all assets	F Group	l exemption num	mber (See instruct	ions)		-		-1	33220	<u>, </u>	— L
		end of year	0 (1	k organization			c) corpora	ation 501	(c) trust 40	01(a) t	rust	Other	trust
	H E	7,332,142 Inter the number of t	<u> </u>				<u>▶ 1</u>		escribe the only (or				
		ade or business he	-									olete Parts	s I-V
	H	more than one, de	escribe the firs	t in the blank s	space at the end	of the	e previou	s sentence, co					
		or each additional t											
		ouring the tax year,	•		_	_		parent-subsidi	ary controlled gro	up ^y		Yes X	No
		'Yes,' enter the na			of the parent cor	porati	on -	~		- / 4	05) 6	.60 106	
		he books are in care		NY BAIER					elephone number	-	05) 2	260-132 (C) Net	23
		t [ត្រ Unrelated			1	_	(A) Income	(B) Expense	5	 	(C) Net	**********
		Gross receipts or s		23,40	b. c Balance►	1 c		22 406	A STATE	T,	1		[3*1] ·
	-	Cost of goods sold		line 7)	C Balance	2		23,406. 41,835.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	~	المامنية	1 37. 34.4 63.	
		Gross profit Subtr				3	ļ	-18,429.				-18,4	
		Capital gain net in				4a		10,423.	1 1/2 1 1 1 1 1 1 1				127.
		Net gain (loss) (Form 4	•	•	797)	4b	 	116,818.	-3	7		116,8	318.
		Capital loss deduc			•	4c			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	5	Income (loss) from		r an S corporati	on	_			772	3			
	c	(attach statement) Rent income (Schi				6	 	15 104	0.0	141			252
	6 7	Unrelated debt-fin	•	(Schedule FT	DEOF	107		15,194.	8,9	741.	_	0,2	<u> 253.</u>
	8	Interest, annuities, roya			RECEI	8-	1						
	9	Investment income of a			. 1	9	l is						
	10	Exploited exempt					S						
		Advartiaina incom.	o (Cobodulo I)	18	41	11	Œ						
	12	Other income (See	e instructions,	attach schedu	le) OCDEN		IT		E A	٠			
				L.	<u> </u>	112	<u></u>	1	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	13	Total. Combine lin				13		113,583.		941.		104,6	542.
	Par	t II Deduction	ns Not Take	en Elsewhei	r e (See instru	ction	is for lir	nitations on	deductions.) (Exce	pt for		
						nect	ea with	the unrelate	ed business in		} .)		
	14 15	Compensation of or Salaries and wage		ors, and truste	es (Schedule K)					14			375.
		Repairs and maint								16			<u>706.</u> 329 <u>.</u>
	17	Bad debts	criance							17	,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		J2 J
•	18	Interest (attach sc	hedule) (see ıı	nstructions)						18			
Š	19	Taxes and license	- ,	ŕ						19		4.3	365.
J	20	Charitable contribu	utions (See ins	structions for li	mitation rules)					20			
•	21	Depreciation (attack	ch Form 4562)					21	35,012.	7		· ·	
-	22	Less depreciation	claimed on Sc	hedule A and	elsewhere on ret	turn		,22a	3,516.	22b		31,4	<u> 196.</u>
2	23	Depletion							- · · · · · · · · · · · · · · · · · · ·	23			
,	24	Contributions to de	eferred compe	nsation plans						24			
1	25	Employee benefit								25		13,6	<u>542.</u>
Ž		Excess exempt ex								26			
NEW YORK		Excess readership						SEE	STATEMENT 1	27 28		- 20 (71 -
Š	28 29	Other deductions (29		29,0 135,9	
J)		Unrelated business			operating loss de	educti	ion. Subt	ract line 29 froi	m line 13	30			286.
	31	Deduction for net opera								31			2
		Unrelated busines	s taxable incor	me Subtract li	ne 31 from line 3					32		-31,2	
•	BAA	For Paperwork Re	duction Act N	otice, see inst	tructions.			TEEA0201L 1/31	/19	7 6	J. For	rm 990-T (2	2018)
									7 /		1,16) '	
										•	"	j	10

Form	1 990-T	(2018) AMERICAN BANJO MUSEUM, INC.		73·	-1526929	Pa	ge 2
		Total Unrelated Business Taxable Income					
	Total	of unrelated business taxable income computed from all unrelated trades o					
		ctions)		L	33	-31,28	<u>86.</u>
		ints paid for disallowed fringes			34		
35		ction for net operating loss arising in tax years beginning before January 1,	,	35			
36		ctions)		35			
-		es 33 and 34			36	-31,28	86.
37	Speci	fic deduction (Generally \$1,000, but see line 37 instructions for exceptions)		. <i>.</i>	37		
38	Unrel	ated business taxable income. Subtract line 37 from line 36. If line 37 is gr	eater than line 36	5, [
		the smaller of zero or line 36			38	-31,28	<u> 36.</u>
Par		Tax Computation					
39		nizations Taxable as Corporations. Multiply line 38 by 21% (0.21)			39		0.
40		s Taxable at Trust Rates. See instructions for tax computation. Income tax					
		e 38 from:			40	-	
		/ tax. See instructions			41		
		native minimum tax (trusts only)			42		
43 44		n Noncompliant Facility Income. See instructions			43	•	_
					44		0.
		Tax and Payments			- Invest		
	-	on tax credit (corporations attach Form 1118; trusts attach Form 1116)	45 a				
		credits (see instructions)ral business credit. Attach Form 3800 (see instructions)	45 b				
		for prior year minimum tax (attach Form 8801 or 8827)					
		credits. Add lines 45a through 45d			45 e		0.
		act line 45e from line 44			46		0.
47	Other	taxes. Check if from: Form 4255 Form 8611 Form 8697 Form	8866				<u> </u>
		ther (attach schedule)			47		
48		tax. Add lines 46 and 47 (see instructions)			48		0.
49	2018	net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k	x), line 2	[49		
50 a	Paym	ents: A 2017 overpayment credited to 2018	50 a		26.5		
		estimated tax payments	50 b			•	
		eposited with Form 8868	50 c				
		on organizations: Tax paid or withheld at source (see instructions)	50 d		12		
		up withholding (see instructions)	50 e				
		credits, adjustments, and payments: Form 2439	301				
A	_	orm 4136 Other Total	50 g				
51	_	payments. Add lines 50a through 50g	309		51		0
52		nated tax penalty (see instructions). Check if Form 2220 is attached		▶□	52	'	<u>u.</u>
53		ue. If line 51 is less than the total of lines 48, 49, and 52, enter amount own		····	53	<u>.</u>	
54		payment. If line 51 is larger than the total of lines 48, 49, and 52, enter amo			54		—
55	•	the amount of line 54 you want: Credited to 2019 estimated tax	· .	Refunded ►	55		—
		Statements Regarding Certain Activities and Other Informa	<u> </u>				
		time during the 2018 calendar year, did the organization have an interest in or a			er a	Yes	No
	-	tial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization	_	_			E. S
		t of Foreign Bank and Financial Accounts. If 'Yes,' enter the name of the foreign	_	-		Pal.2074. 1	X
57	-	the tax year, did the organization receive a distribution from, or was it the		ensferor to, a	foreign trust	2.	X
		, see instructions for other forms the organization may have to file.		·	•	32 XX	¥2
58		the amount of tax-exempt interest received or accrued during the tax year ▶	\$	0.			2
		Under penalties of perjury, I declare that I have examined this return, including accompanying sched belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all	lules and statements, a	and to the best o	my knowledge ar	nd	
Sign			XECUTIVE D		May the IRS discu	ss this return v	with
Her	e	Signature of officer Date Titl			the preparer show instructions)?		No
		Distr.		. –		7 162	יייון
Paid	d	10 - 500 4	ate	Check if	PTIN		
Pre-	•		8/15/19	self-employed	P00385		
pare		Firm's name MARKS AND ROUND, INC.		Firm's EIN	73-12660	UU	
Use Only		Firm's address 7312 NORTH MACARTHUR BLVD		_	405 505		
BAA		OKLAHOMA CITY, OK 73132		Phone no.	405-721	– <u>9360</u> n 990-T (20	11.0\
					COM	aave i LZU	41111

TOTAL SOUTH (SOUTH) WHENTCH	ON DOMAG N	BEUM, INC.					13-	1320323	i age 3
Schedule A'- Cost of Goo	ds Sold. Ente	er method of inv	entory valua	tion	> cc	ST			
1 Inventory at beginning of ye	ear	1	11,691.	6	Invento	ry at e	end of year	6	13,104.
2 Purchases	Ī	2	43,248.	7	Cost of	f good	s sold. Subtract		
3 Cost of labor	Ī	3	·	1	line 6 f		TO DETROIT HOLD IN	通信 7	41 025
4 a Additional section 263A costs (attac	ch schedule)				and in	raiti,	line 2		41,835. Yes No
b Other costs	1	4 a		8	Do the	rules	of section 263A (with	respect to	
(attach sch)		4 Б		ĺ			luced or acquired for	resale) apply	
5 Total. Add lines 1 through 4		5	54,939.	<u> </u>	to the o				X
Schedule C - Rent Income	e (From Real	Property and	d Persona	II Pr	operty	Leas	sed With Real Pro	operty) (see i	nstructions)
1 Description of property							_		
(1) BUILDING									
(2) OKLAHOMA CITY FACIL	LITY		_						
(3)									
(4)									
	2 Rent receive	d or accrued					3(a) Deductions	directly conne	cted with
(a) From personal prop (if the percentage of rent for		(b) From re	eal and pers entage of re	onal	property	/ al	the income in	columns 2(a) a	
property is more than 10%	but not	property ex	ceeds 50% (or ıf t	he rent i	IS	'	ch schedule)	
more than 50%)		based	on profit or	inco			SEE STATEMENT	Г 3	
(1)					15,3	194.			8,941.
(2)	-							·	
(3)			<u> </u>						
Total		Total			15,	104			
					13,.	194.	(b) Total deductions Er	nter	
(c) Total income. Add totals of collhere and on page 1, Part I, line 6		2(0) Enter ►			15,	194	here and on page 1, Part I, line 6, column (8)	>	8,941.
Schedule E - Unrelated De		Income (see	instructions	.)	10,.	1,71.	1,, (2,		
		(000		-	,	3 De	ductions directly con	nected with or	allocable to
1 Description of debt	financed prope	ertv	2 Gross in or allocab				debt-financ	ed property	
	, ,	,	financed				(a) Straight line	(b) Other d	
						depri	eciation (attach sch)	(attach so	
(1)									
(2)						ļ	···		
(3)						-	 		
(4) 4 Amount of average	E Average ad	usted besie of	6 Col		1		7 Gross income	8 Allocable	doductions
acquisition debt on or		justed basis of debt-financed		led by			ortable (column 2 x	(column 6	x total of
allocable to debt-financed property (attach schedule)	property (att	ach schedule)	colu	ımn 5	5		column 6)	columns 3(a) and 3(b))
(1)	 				%	 		 	
(2)					%			 	
(3)	 								
(4)	 				%				
	·		L			Enter	here and on page 1,	Enter here an	d on page 1,
						Part	I, line 7, column (A)	Part I, line 7,	column (B)
Totals.					>				
Total dividends-received deduction	ons included in	column 8							
BAA		TE	EA0203L 01/3	0/19				Form	990-T (2018)

Schedule F'- Interest, A	nnuiti				m Controlled	Orga	nizations	(see ins	structions)
1 Name of controlled organization	ıde	Employer ntification number	3 Net un	nrelated e (loss) ructions)	4 Total of spec payments m		5 Part of that is in the con organiz gross i	cluded i trolling ation's	in c	eductions directly onnected with ome in column 5
(1)										
(5)										
(3)										
(4)										
Nonexempt Controlled Organiza	ations									
7 Taxable Income	ind	et unrelated come (loss) instructions)		of specifie ents made	ıncluded	in the	n 9 that is controlling oss income		connected	tions directly d with income lumn 10
(1)										
(1) (2) (3) (4)										
(3)										
(4)								1		
Totals					Add column here and on 8, co		, Part I, line		and on p	6 and 11 Enter age 1, Part I, line umn (B).
Schedule G - Investmen	t Inco	me of a Sec	ction 501	(c)(7) (9) or (17) Orga	nizat	on /coo inc	truction)c)	
1 Description of income	111100		2 Amount of income		Deductions ctly connected ach schedule)	4 Set-asides (attach schedul		5 Total deduction set-asides (deductions and sides (column 3 us column 4)
(1)		····		1				_		
(2)				1						
(2)										
(4)										
Totals Schedule I — Exploited E	>	Enter here and Part I, line 9,	column (A)	1	n Advertising	Incor	70 (000 100	1 24 6 12 4 4 7	Part I, III	re ánd on þáge 1 ne 9, column (B)
1 Description of exploited a		2 Gross unrelated business income fro trade or business	3 Expe cond of pr of busii	enses directly nected with oduction unrelated ness income		5 Gros	s income from ity that is not ated business income	6 Exp	penses table to mn 5	7 Excess exempt expenses (column 6 minus column 5, bu not more than column 4)
(1)		<u> </u>				1 -				
(2)										
(3)										
(4)										-
Totals	,	Fnter here on page Part I, line column (A	1, on 10, Part	r here and page 1, I, line 10, umn (B)	Control of the second					Enter here and on page 1, Part II, line 26.
Schedule J - Advertising	a Inco	me (see instr	uctions)		Jak 1888 Kulan ya 1 Tana		- * <u>*</u>	<u> </u>	* **	1
Part I Income From Per				neolida	tod Pacie					· · · · · · · · · · · · · · · · · · ·
Tartiv income From Fer	Toulca	2 Gross		Direct	4 Advertising gain o	- E C		6 Dec	dosebio.	7 Cyana yandarahin
1 Name of periodical		advertisin	ig adv	vertising costs	(loss) (col 2 minus) col 3) If a gain, compute cols. 5 through 7	30	rculation ncome		dership osts	7 Excess readership costs (col 6 minus col 5, but not more than col 4).
(1)					**************************************					
(5)		ļ				<u> </u>				10 Th
(3) (4)	<u>-</u>				Filter To the					1.0 1 Par 11 St. 154.
Totals (carry to Part II, line (5))		-								

Form 990-1 (2018) AMERICAN BA	NJO MUSEUM, I	INC.			73-1526929	Page 5
Rart-III Income From Periodi 7 on a line-by-line basis)	cals Reported o	n a Separate E	Basis (For each p	eriodical listed in	Part II, fill in col	umns 2 through
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 (col 6 minus col. 5, but not more than col 4)
(1)						
(2) (3) (4)						
(3)			 	 		
						1
Totals from Part I	•	_		7		
Totals, Part II (lines 1– 5)	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B)				Enter here and on page 1, Part II, line 27
Schedule K – Compensation	of Officers Dire	ctors and Tri	ISTACS (see instri	ictions)		·
Schedule K – Compensation	or Onicers, Dire	ctors, and m	usices (see msm		- 1	
1 Name			2 Title	3 Percent o time devote to business	d to unrela	ation attributable ated business
				2	8	
				9		
					ő	
				9	d ·	
Total. Enter here and on page 1, Par	t II, line 14				>	
BAA		TEEA0204 L	12/31/18		F	orm 990-T (2018)

2018	FEDERAL STA	TEMENTS		PAGE 1
,	AMERICAN BANJO	NUSEUM, INC.		73-1526929
STATEMENT 1 FORM 990-T, PART II, LINE OTHER DEDUCTIONS	: 28			
ADVERTISING AUTOMOBILE CREDIT CARD FEES DUES/SUBSCRIPTIONS INSURANCE INTERNET OFFICE SUPPLIES PENALTIES POSTAGE PRINTING PROFESSIONAL SERVICES SECURITY		`1	\$	3,064. 1,091. 654. 515. 5,425. 602. 1,703. 204. 698. 1,243. 3,376. 434. 232.
SUPPLIES TELEPHONE TRAVEL UTILITIES			TOTAL §	1,230. 2,008. 6,536. 29,015.
STATEMENT 2 FORM 990-T, PART III, LINE NET OPERATING LOSS DE	E 35 DUCTION ORIGINAL	LOSS PREVIOUSLY	ī	oss
ENDING 12/31/17 NET OPERATING LOSS AV. TAXABLE INCOME	LOSS \$ 115,625. \$	USED		115,625. 115,625.
STATEMENT 3 FORM 990-T, SCHEDULE C DEDUCTIONS DIRECTLY C	, LINE 3 ONNECTED WITH INCOME			,
BUILDING DEPRECIATION INSURANCE			TOTAL	\$ 3,516. 5,425. \$ 8,941.

Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

Department of the Treasury Internal Revenue Service (99 ► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

2018

Attachment Sequence No 179

Sequence No

Identifying number Name(s) shown on return 73-1526929 AMERICAN BANJO MUSEUM, Business or activity to which this form relates RENTAL ACTIVITY - BUILDING Part 1 T Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 1 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing 5 separately, see instructions (c) Elected cost 6 (b) Cost (business use only) (a) Description of property Listed property Enter the amount from line 29 7 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 9 9 10 10 Carryover of disallowed deduction from line 13 of your 2017 Form 4562 11 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instrs. 12 Section 179 expense deduction Add lines 9 and 10, but don't enter more than line 11 12 ▶ 13 Carryover of disallowed deduction to 2019 Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Partill Special Depreciation Allowance and Other Depreciation (Don't include listed property See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 tax year See instructions 15 15 Property subject to section 168(f)(1) election 2,771 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Don't include listed property See instructions) Section A 17 745 MACRS deductions for assets placed in service in tax years beginning before 2018 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System (f) Method (a) Classification of property (b) Month and (C) Basis for depreciation (d) (e) (g) Depreciation vear placed (business/investment use Recovery period Convention in service only - see instructions) 19 a 3-year property .) **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L 25 yrs g 25-year property S/L 27.5 yrs MM h Residential rental 27.5 yrs MM S/L property 39 yrs MM S/L Nonresidential real S/L MM property - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System Section C S/L 20 a Class life 14 12 yrs S/L b 12-year 43. 30 yrs MM S/L c 30-year 40 yrs MM S/L d 40-year Part IV. Summary (See instructions) 21 21 Listed property Enter amount from line 28 Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions.

For assets shown above and placed in service during the current year, enter