	بر بر مست													
	, , , , , , , , , , , , , , , , , , ,	l Ex	empt Organ	ization	Bus	siness Inc	ome '	Tax Ret	urņ		OMB No	1545-0047		
Forn	" ° 990-T		(and p	roxy tax	cun	der section	6033(e)) (ON	ን <u>Ի</u>				
	· · · · · · · · · · · · · · · · · · ·								, 20 2	<u>୪</u> 0				
Depa	ortment of the Treasury		► Go to www irs g									9 I J		
	nal Revenue Service	▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3								(3) Open to Public Inspection for 501(c)(3) Organizations Only				
A	Check box if		Name of organization (Check b	ox if na	me changed and see	instruction	s)	D		yer identifica rees' trust, see :	ation number		
	address changed									(=p.0)		mondadons /		
	cempt under section	PLURIBUS RESOURCES												
X	501(°C (/3-)	1	A								74-2603561			
	408(e) 220(e)		Type								E Unrelated business activity code (See instructions)			
<u></u>	408A530(a)		1506 BEXAR (_	•	,			
	529(a)		City or town, state or p		-	ZIP or foreign postal o	code							
	ook value of all assets end of year		SAN ANTONIO,											
	,		up exemption number				1		П.			Tau		
2		•	ck organization type				[501(c) trust		01(a) t		Other trust		
\sim			nization's unrelated tra	ides or busine	esses					- '	(or first) unr			
47.7	rade or business her		end of the previous					complete Par			-	lescribe the		
_	irst in the blank spa rade or business, th		•	sentence, co	mpiete	Faits Faild II, Con	ripiete a S	Chedale M 10	eacii a	dultion	וג			
			corporation a subsidia	arv in an affil	ıated n	roup or a parent-si	ibsidiany (controlled arou	ın?		—	Yes X No		
٦ ٦			identifying number of				300.0.0.7	50. II. 51. 52 5. 52	٠			,		
			AUDIA OLIVEIF		pords	5(1 p	Telephor	e number 🕨	210-	832-	5000			
u Pa	rt I Unrelated	Trade o	or Business Incor	ne	•	(A) Incom		(B) Exp				C) Net		
≶ 1a						_								
℥ℴ	Less returns and allowa	inces		c Balance 🕨	1 c									
	Cost of goods sol	ld (Schedu	ule A, line 7)	- 	2									
3	Gross profit Sub	tract line	2 from line 1c		3						_			
4a	Capital gain net ii	ncome (a	ttach Schedule D)		4a				_/		ļ			
b	Net gain (loss) (Fo	orm 4797,	Part II, line 17) (attach F	orm 4797)	4b									
С	Capital loss dedu	ction for ti	rusts		4c						 			
5	Income (loss) from a p	artnership or	an S corporation (attach state	ement)	5			/_	_		 			
6	•				6			/						
7	Unrelated debt-fir	nanced in	come (Schedule E) .		7		_/							
8	· · ·		nts from a controlled organiza				/							
9			1(c)(7), (9), or (17) organizat			/					- -			
10		•	ncome (Schedule I)		10									
11 12	_	•	tions, attach schedule)		12									
			ough 12			/	0.							
			Taken Elsewhere			ns for limitation	ns on c	leductions) (Dec	ductio	ns must	be directly		
			ne unrelated busir			DEC	7[1]	/ED	•			-		
14	Compensation of	officers,	directors, and trustees	(Schedule K)			7 II. 1 V	<u> </u>		14				
15	Salaries and wage	es		/		A058	.o. v .o	n21 O		15				
16	Repairs and main	tenance .		. <i>[</i>			262	UZI . 📆		16				
17	Bad debts		/	.		[]				17				
18			see instructions)					.UTTI		18				
19			. <i></i>							19	 			
20			4562)				_							
21			on Schedule A and els							21b				
22			/							22				
23			compensation plans .							23				
24			Salandala D							24				
25			Schedule I)							25				
26 27			chedule J)							26				
27 28			s 14 through 27							27				
28 29			s 14 inrough 27 le income before ne							29				
30	/		g loss arising in tax ye							30				
31			e income. Subtract line	•	-		•			31				
			otice, see instructions			<u></u>		<u> </u>		<u> </u>	Form	9 90-T (2019)		

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Form	990-T (2	org) PLURIBUS RESC	DURCES		74-2	603561	Page
Par	telli 📗	Total Unrelated Business Taxable	e Income				
32	Total	of unrelated business taxable income con	nputed from all unrelated	d trades or businesses (s	iee		
	instruct	ions)			32		
33	Amoun	s paid for disallowed fringes			33		
34	Charita	ble contributions (see instructions for limitation i	rules)		34		
35	Total (inrelated business taxable income before	pre-2018 NOLs and spec	cific deduction Subtract li	ne		
	34 from	the sum of lines 32 and 33			35		0
36	Deduct	on for net operating loss arising in t	ax years beginning bef	ore_ January <u>_</u> 1, 2018 _(s	ee		
-	instruct	ions)			36		
37	Total of	unrelated business taxable income before spe	cific deduction. Subtract line	36 from line 35	37		
38	Specific	deduction (Generally \$1,000, but see line 38	nstructions for exceptions) .		38		
39	Unrelat	ed business taxable income. Subtract line	38 from line 37 If line	38 is greater than line 3	37,		_
	enter th	e smaller of zero or line 37	<u> </u>	<u></u>	39		0
Par		Tax Computation			-		
40	Organi						
41	Trusts						
	the am	ount on line 39 from Tax rate schedule or	Schedule D (Forn	n 1041)	. ▶ 41		
42	-						
43					1 1	 .	
44					· · · · · · · · · · · · · · · · · · ·		
45			ever applies	<u> </u>	45		
Par				140-			
					460		
47						·	
48							0
49 50						•	
		* *			· · -3-	_	
	-			The state of the s			
				[]			
	-	- ·					
·		orm 4136 Other		▶ 51g			
52	Total p	ayments Add lines 51a through 51g			52		
53	Estimat	ed tax penalty (see instructions) Check if Form	2220 is attached	▶	53		
54	Tax due	If line 52 is less than the total of lines 49, 50	, and 53, enter amount owed		. ▶ 54		
55	Overpa	yment. If line 52 is larger than the total of lines	49, 50, and 53, enter amour	nt overpaid	. ▶ 55		
56	Enter the						
Par	t VI					13	
57							res No
	FinCEN	Form 114, Report of Foreign Bank and	Financial Accounts If "Y	es," enter the name of	the foreign	country	l,
	here 🕨						
58	•	• •		grantor of, or transferor to, a	toreign trust	' · · · · ⊢	$\frac{1}{x}$
	•	_	=	_			
<u>59</u>	Enter th	e amount of tax-exempt interest received or ac	crued during the tax year	schedules and statements and to	the heet of	v knowledge an	d helief #
٥.	l tn	e correct, and complete Declaration of pleparer (other than ta	ans return, including accompanying expayer) is based on all information of	which preparer has any knowledge	ine pest of m	, movieuge an	o polici, It
Sigr		Claudia () Iwena	105/17/2021		• •		
Her	_	on ature of officer					
		gnature of officer Print/Type preparer's name		Date		_	IND
Paid			L'insparci à signature			i	0558
	arer	DVD TTD	12-00				
•	Only	Firm's name BKD, LLP 8200 W INTERSTATE 10	. SUITE 900. SAN ANT	ONIO, TX 78230-3806	Ohana sa 21	0.341 94	400
	-	Firm's address - 5255 ". Intercenting 10	for disallowed finges irrioutions (see instructions for limitation rules) 33 34 34 35 36 37 38 38 39 39 30 30 31 30 31 30 31 31 31 32 32 33 34 34 35 36 36 37 37 38 38 38 38 38 38 38 38				

Form **990-T** (2019)

Form 990-T (2019) Schedule A - Cost of Go	odo Sold E								ş	Page 3
		nter metno	a of invento				6	·		
1 Inventory at beginning of ye		 				ar	┡			
2 Purchases					•	old Subtract line				
3 Cost of labor						here and in Part	_			
4a Additional section 263A co	1 1								Vaa	Na
(attach schedule)	I I					section 263A (w			Yes	No
b Other costs (attach schedul						_oracquired _for				
-5-Total. Add lines 1 through				to the orga	anization?		<u></u>			<u> </u>
Schedule C - Rent Income	(From Real F	roperty a	ind Persor	ial Property	Leased V	With Real Proper	ty)			
(see instructions)										
1 Description of property										
(1)										
(2)										
(3)										
(4)										
	2 Rent rece	ived or accru	red							
(a) From personal property (if the p for personal property is more tha more than 50%)		percent	tage of rent for	personal property personal property based on profit or	exceeds	3(a) Deductions dir in columns 2(a			me	
(1)										
(2)										
(3)						_				
(4)										
Total		Total								
(c) Total income. Add totals of co here and on page 1, Part I, line 6,		(b) Enter				(b) Total deduction Enter here and on Part I, line 6, colum	page 1			
Schedule E - Unrelated De			ee instructio	ns)		<u> </u>		<u></u>		
1 Description of debt	-		2 Gross II	ncome from or debt-financed	3 [Deductions directly con debt-finance	d prope	erty		
- Description of description	-interfoce property		property		(a) 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) 5 Average adjusted basis of or allocable to debt-financed property (attach schedule)			4 0	Column Iivided olumn 5		income reportable n 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))			
(1)			<u> </u>	%						
(2)				%						
(3)				%						
(4)	·			%						
					Enter her Part I, lin	re and on page 1, ne 7, column (A)	Ente Part	r here and or I, line 7, colu	n page umn (B	1, i)
Totals					<u> </u>	▶		Form 99	90-T	(2019)

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Schedule F – Interest, Ann	unies, Noyanie			ntrolled Org		_	eations (se	.c monaca	0113)		
Name of controlled organization	2 Employer identification numb	iei	3 Net unrelated inc (loss) (see instruction				fied included	Part of column 4 that is cluded in the controlling anization's gross income		6 Deductions directly connected with income in column 5	
(1)								_			
(2)											
(3)											
(4)											
Nonexempt Controlled Organia	zations						D-1-6	0.45.54.5	- 44	Dadustiana diseatti	
7 Taxable Income	8 Net unrelated in (loss) (see instruc		9 Total of specifie payments made		included		luded in the co			Deductions directly nnected with income in column 10	
(1)											
(2)											
(3)											
(4)											
Totals						Pa		tructions)		er here and on page 1, at 1, line 8, column (B)	
1 Description of income	2 Amount of	income	ome 3 Dedu directly co (attach so		nected			et-asides schedule)		and set-asides (col 3 plus col 4)	
(1)			+						+		
(2)			-						-+		
(3)	<u> </u>		 				_				
(4)	Enter here and	on page 1,	+		 -	[Enter here and on page 1 Part I, line 9, column (B)	
Totals	empt Activity In	come, Oth	er Th	an Adverti	sing Ir	come	e (see instru	uctions)			
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 inconfrom unrelat or business 2 minus coll if a gain, co cols 5 thro	(column lumn 3) compute 5 Gros from ac is not u		ross income activity that ot unrelated ness income	tivity that attributable to		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)							_				
(2)											
(3)											
(4)										<u></u>	
	Enter here and on page 1, Part I, line 10, col (A)	Enter here a page 1, Pa	art I,						Enter here and on page 1, Part II, line 25		
Totals ▶ Schedule J-Advertising In Part I Income From Peri			neoli	idated Bas	ie						
income i fom Fen	Calcals Report	ou on a ot	3011	Lucio Das		_		i			
1 Name of periodical	2 Gross advertising income 3 Direct advertising c			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)							_	T .			
(3)							_				
(4)											
		-									
Totals (carry to Part II, line (5))				<u> </u>						Form 990-T (2019)	

(3)

(4)

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

Page 5 Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns Part II 2 through 7 on a line-by-line basis) 4 Advertising 7 Excess readership costs (column 6 gain or (loss) (col 2 Gross 3 Direct 5 Circulation 6 Readership minus column 5, but 2 minus col 3) If 1 Name of periodical advertising income costs advertising costs not more than a gain, compute income column 4) cols 5 through 7 (1) (2) (3) (4) Totals from Part I. Enter here and Enter here and on Enter here and on page 1, Part I, page 1, Part I, on page 1, Part II, line 26 line 11, col (B) line 11, col (A) Totals, Part II (lines 1-5) ▶ Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3 Percent of time devoted to business 4 Compensation attributable to 2 Title unrelated business % (1) (2) %

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% %

▶

ATTACHMENT 1

ORGANIZATION'S ONLY UNRELATED TRADE OR BUSINESS ACTIVITY

THE TAXPAYER DOES NOT HAVE ANY ACTIVITIES GENERATING UNRELATED BUSINESS TAXABLE INCOME (AS DEFINED IN IRC SECTION 512(A)) IN THE CURRENT YEAR ._ FORM 990-T IS BEING FILED TO COMMENCE RUNNING ON THE PERIOD UNDER THE STATUTES OF LIMITATION FOR REPORTING UNRELATED BUSINESS INCOME.