Amended Return - Section 512(a)(7) Repeal Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e)) For calendar year 2018 or other tax year beginning ► Go to www.irs.gov/Form990T for instructions and the latest information Department of the Treasury Open to Public Inspection 501(c)(3) Organizations O Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Internal Revenue Service Employer identification number (Employees' trust, see Check box if Name of organization ( Check box if name changed and see instructions.) address changed instructions) B Exempt under section Print Center for U.S. Global Leadership 74-3093659 Unrelated business activity cod X = 501(c)(3)Number, street, and room or suite no. If a P.O. box, see instructions (See instructions.) Type ] 408(e) [\_\_\_\_220(e) 1129 20th Street, NW, No. 600 408A \_\_530(a) City or town, state or province, country, and ZIP or foreign postal code 529(a) Washington, DC 20036 900099 C Book value of all assets F Group exemption number (See instructions.) end of year 6, 215,836. G Check organization type ► X 501(c) corporation 401(a) trust 501(c) trust Other trust H Enter the number of the organization's unrelated trades or businesses. Describe the only (or first) unrelated trade or business here . If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedulc M for each additional trade or business, then complete Parts III-V X Nú During the tax year, was the corporation a subsidiary in an affiliated group or a parent subsidiary controlled group? If "Yes," onter the name and identifying number of the parent corporation. J The books are in care of ▶ Dular Niyangoda 689-8911 Telephone number Partil: Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales b Less returns and allowances c Balance 1¢ 2 Cost of goods sold (Schedule A, line 7) 2 物心性的 沙亚 计记录设计 3 Gross profit, Subtract line 2 from line 1c 3 an a desire 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 心脏的论法或 红色 Income (loss) from a partnership or an S corporation (attach statement) 5 Rent income (Schedule C) 6 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) · Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 10 Exploited exempt activity income (Schedule I) 10 Advertising income (Schedule J) 11 12 Other income (See instructions; attach schedule) 12 with first the filter of the Total. Combine lines 3 through 12 13 (Rárt/III Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income) 14 Compensation of officers, directors, and trustees (Schedule K) Salaries and wages 15 RECEIVED Repairs and maintenance 16 17 Bad debts 17 MAR 2 3 2020 Interest (attach schedule) (see instructions) 18 19 Taxes and licenses 19 Charitable contributions (See instructions for limitation rule 20 OGDEN, UT 21 Depreciation (attach Form 4562) 21 22a 22 Less depreciation claimed on Schedule A and elsewhere on return 22b 23 23 24 Contributions to deferred compensation plans 24 Employee benefit programs 25 Excess exempt expenses (Schedule I) 26 27 Excess readership costs (Schedule J) 27 28 Other deductions (attach schedule) 28 29 0. Total deductions. Add lines 14 through 28 29

32 Unrelated business taxable income Subtract line 31 from line 30
823701 01-09-19 LHA For Paperwork Reduction Act Notice, see instructions.

Unrolated business taxable income before net operating loss deduction. Subtract line 29 from line 13

Deduction for not operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)

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. Form 990			74-309	3659	Page 2
Part	111	Total Unrelated Business Taxable Income			
33	, Total	of unrelated business taxable income computed from all unrelated trades or businesses (see instructio	ns)	33	0.
34		unts paid for disallowed fringes	,	34	
35		uction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)		35	
36		of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of		00	
30					
		33 and 34		36	4 000
37	Speci	rific deduction (Generally \$1,000, but see line 37 instructions for exceptions)		37	1,000.
38		elated business taxable income Subtract line 37 from line 36. If line 37 is greater than line 36,			
		r the smaller of zero or line 36		38	0.
		Tax Computation		<del></del>	
39		inizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	•	39	0.
40	Trust	ts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 fr	om:	2.44	
		Tax rate schedule or Schedule D (Form 1041)	<b>&gt;</b>	40	
41	Proxy	y tax. See instructions	<b>•</b>	41	
42	Altern	native minimum tax (trusts only)		42	
43	Tax o	on Noncompliant Facility Income. See instructions		43	
44		I. Add lines 41, 42, and 43 to line 39 or 40, whichever applies		44	0.
Part.		Tax and Payments	· · · ·	1	
<u> </u>		gn tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a		86.80	
		r credits (see instructions)  45b			
		oral business credit. Attach Form 3800 45c	<del> </del>	1	
		111111111111111111111111111111111111111		祭選  -	
		It for prior year minimum tax (attach Form 8801 or 8827)		12	
		I credits. Add lines 45a through 45d		45e	
46		ract line 45e from line 44		46	0.
47	Other	r taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Ot	her (attach schedule)	47	
48		I 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), line 2		49	0.
50 a	a Paym	nents: A 2017 overpayment credited to 2018 50a		200 S 75	
		estimated tax payments 50b	5,400.	( S	
		deposited with Form 8868 50c		135	
		gn organizations Tax paid or withheld at source (see instructions) 50d		انليني	
		up withholding (see instructions) 50e		1839	
		it for small employer health insurance premiums (attach Form 8941)  50f			
		, , , , , , , , , , , , , , , , , , , ,		12.5%	
į		r credits, adjustments, and payments. Form 2439	260	34	
		Form 4136	260.		5 660
51		payments. Add lines 50a through 50g See Statemen	t 1	51	5,660.
52	Estima	nated tax penalty (see instructions). Check if Form 2220 is attached 🕨 📖		52	
53	Tax d	due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	▶	53	
54	Overp	payment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	▶	54	5,660.
55	Enter	the amount of line 54 you want: Credited to 2019 estimated tax	Refunded <b>&gt;</b>	55	5,660.
Part	VI S	Statements Regarding Certain Activities and Other Information (see in	structions)		
56	At any	y time during the 2018 calendar year, did the organization have an interest in or a signature or other aut	hority		Yes No
	over a	a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have t	o file		475 18 8
	FinCE	N Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign cou	ntry		
	here		,		X
57		ng the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to,	a foreign trust?		$ \frac{1}{x}$
٠.		s," see instructions for other forms the organization may have to file.	a loroigh trust.		
58		the amount of tax-exempt interest received or accrued during the tax year >\$			10000000000000000000000000000000000000
		nder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, an	d to the best of my kno	wledge and	belief, it is true,
Sign	cor	prect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any known	owledge		. ,
Here		EGA 2/   2/20/2020 President &		•	iscuss this return with
		Signature of officer Date Title			hown below (see
	———			structions)?	X Yes No
		Print/Type preparer's name Preparer's signature Date		f PTIN	
Paid		[ / / / / / / / / / / / / / / / / / / /	self- employed		
Prepa	arer	Jie Chen, CPA   Men 12   01/31/2	U		1049760
Use (		Firm's name ▶ Rogers & Company PLLC	Firm's EIN	58	-2676261
300 (	-··· <b>,</b>	8300 Boone Boulevard, Suite 600			<del></del>
		Firm's address ▶ Vienna, VA 22182	Phone no. (	703)	893-0300

Schedule A - Cost of Good	s Sold. Enter	method of inver	itory v	aluation N/A					
1 Inventory at beginning of year	1		6	Inventory at end of year	ır		6		
2 Purchases	2		7	Cost of goods sold Su	ubtract I	ine 6	8 10		
3 Cost of labor	3			from line 5 Enter here	and in F	Part I,			
4a Additional section 263A costs			1	line 2			7		
(attach schedule)	4a		8	Do the rules of section	263A (	with respect to		Ye	s No
b Other costs (attach schedule)	4b		7	property produced or a	acquired	I for resale) apply to			
5 Total. Add lines 1 through 4b	5	_		the organization?					
Schedule C - Rent Income (see instructions)	(From Real	Property an	d Pe	rsonal Property	Leas	ed With Real Pro	pert	ty)	
Description of property				<del> </del>					
								******	
(1)					<del></del>	<del></del>			
(2)									
(3)									
(4)	2. Rent receiv	ed or accrued				T			
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	rcentage of e than	(b) From real of rent for p	personal	onal property (if the percenta property exceeds 50% or if ed on profit or income)	age	3(a) Deductions directly columns 2(a) ar	conne nd 2(b)	ected with the incon (attach schedule)	ne in
(1)	· · · · · · · · · · · · · · · · · · ·	tie rei	it is bas	ed on profit of income)					
(2)									<del></del>
(3)	<del></del>								
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		ter			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<b>&gt;</b>		0.
Schedule E - Unrelated Del	ot-Financed	Income (see	ınstru	ctions)		•			
			2	. Gross income from		3 Deductions directly con to debt-finance			
1. Description of debt-fi	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedu	
(1)	<del></del>		t		<u> </u>		┪		
(2)			<u> </u>				1		
(3)							1		
(4)									
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis illocable to nced property i schedule)	6	Column 4 divided by column 5		7 Gross income reportable (cotumn 2 x column 6)		8 Allocable ded (column 6 x total of 3(a) and 3(b	columns
(1)				%			$\dagger$		
(2)				%					
(3)				%					
(4)				%					
						nter here and on page 1, Part I, line 7, column (A)		Enter here and on p	
Totals				•		0			0.
Total dividends-received deductions in	icluded in column	18				<b>&gt;</b>	+		0.

Schedule F - Interest,	Amunes, noye			Controlled O			Lauvi	(see ins	truction	s)
1. Name of controlled organiza	identi	mployer ification mber	3 Net unro (loss) (see	elated income instructions)		tal of specified ments made	includ	t of column 4 t ed in the contr ation's gross in	ntrolling connected with income	
(1)										
(2)										
(3)			<u> </u>	<u></u>			L			
(4)										
Nonexempt Controlled Organ	izations		•							
7. Taxable Income	8 Net unrelated inco (see instruction		9. Total o	of specified payi made	ments	10 Part of colui in the controlli gross		nization's		ductions directly connected income in column 10
(1)			1							
(2)										
(3)										
_(4)										•
						Add colun Enter here and line 8, c		+ 1, Part I, A)	Enter h	d columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
Totals				- 1-	<u> </u>			0.	`	0.
Schedule G - Investme	ent income of a tructions)	Section	n 501(c)(7	7), (9), or	(17) Oi	rganization	1			
	cription of income			2. Amount of	income	3. Deduction directly connect (attach schedu	cted	4. Set-a		5. Total deductions and set-asides (cot 3 plus cot 4)
(1)				,						,
(2)						· - · · · · · · · · · · · · · · · · · ·				
(3)										
(4)	··········								<del></del>	
Totals				Enter here and o Part I, line 9, co						Enter here and on page 1, Part I, line 9, column (B)
Schedule I - Exploited (see instri		y Incom	ne, Other	Than Ad	vertis	ing Income	)	, , , , , ,		<b></b>
1. Description of exploited activity	2. Gross unrelated business income from trade or business	directly of un	penses connected oduction related ss income	4 Net incomfrom unrelated business (cominus columi gain, compute through	trade or lumn 2 n 3) If a e cols 5	5 Gross inco from activity t is not unrelat business inco	hat ed	6. Expe attributa colum	ble to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)		<u> </u>								
(2)	1 .		f							
(3)	<del> </del>	<b> </b>	<del> </del>							
(4)	1			···		<u>.                                    </u>				<u> </u>
Totals	Enter here and on page 1, Part I line 10, col (A)	page	ere and on 1, Part I, , col (B)				2.72			Enter here and on page 1, Part II, line 26
Schedule J - Advertisi	ing Income (see	instruction	ns)	near rate 22	3.8.			p+ ; *****	6 - 3	
Part Is Income From	Periodicals Rep	orted o	n a Con	solidated	Basis	_ f 2				
1. Name of periodical	2. Gross advertising income	adv	3 Direct ertising costs	4. Adverti or (loss) (co col 3) If a ga cols 5 th	ol 2 minus iin, compu	5. Circulat income	ion	6 Reader		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)				BANK .		ĝ .				
(2)			<del></del>							WAY XXXXXXX
(3)								*		
(4)						Ř				
Totals (carry to Part II, line (5))	<u> </u>	0.	0	•						0.
						·				Form 990-T (2018)

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[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.			was a series of the series of	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 27
Totals, Part II (lines 1-5)	▶ 0.	0.				0.

1. Name	2 Title	3 Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		<b>&gt;</b>	0.

Form 990-T (2018)

Form 990-T	Other Credits and Payments	Statement	1
Description		Amount	
Amount paid with orig	ginal return	2	60.
Total included on For	rm 990-T, Page 2, Part V, line 50g	2	60.

## **Amended Return**

The return is being amended to remove the increase in UBTI under Section 512(a)(7) per Taxpayer Certainty and Disaster Tax Relief Act of 2019 found in Division Q of the Further Consolidated Appropriations Act, 2020 (H R 1865) signed into law on December 20, 2019 The Act retroactively repeals Section 512(a)(7) of the Internal Revenue Code that expanded the definition of unrelated business taxable income to include certain transportation and parking fringe benefits provided to employees

## Line numbers changed on Amended 990-T

Form 990-1		Originally Filed 990-T	Amended 990-T
Part I Unrel	ated Trade or Business Income		
Line 12	Other Income		
Luna 42	Total	-	-
Line 13	Total	-	-
	octions Not Taken Elsewhere		
Line 19	Taxes and Licenses	2,513	•
Line 28	Other Deductions UBI Tax Preparation Fees	400	-
Line 29	Total Deductions	2,913	-
Line 30	Unrelated business taxable income before NOL deduction	(2,913)	•
Line 32	Unrelated business taxable income	(2,913)	-
Part III Tota	l Unrelated Business Taxable Income		
Line 33	Unrelated business taxable income	(2,913)	-
Line 34	Amounts paid for disallowed fringes	30,865	•
Line 36	Total unrelated business taxable income before specific deduction	27,952	-
Line 37	Specific deduction	1,000	1,000
Line 38	Unrelated business taxable income	26,952	•
Part IV Tax	Computation		
Line 39	Income tax on the amount on line 38	5,660	-
Line 44	Total	5,660	-
Part V Tax	and Payments		
Line 46	Subtract line 41e from line 40	5,660	-
Line 48	Total tax	5,660	-
Line 50 b	2018 estimated tax payments	5,400	5,400
Line 50 c	Tax deposited with Form 8868	-	-
Line 50g	Other credits, adjustments, and payments Other Amount paid with original return	-	260
Line 53	Tax due	260	-
Line 54	Overpayment Credited to 2019 estimated tax Refunded	- - -	5,660 - <b>5,660</b>