Form 990-T	Exe	empt Orga	INDED TO NOV	sine	ss Inco	ome T	ax Retur	n	OMB No 1545-0047
		-	and proxy tax und	der se	ection 603	3(e))	1417		2040
	For calendar	year 2019 or other tax y	· · 		, and e	· -	1-11-	—	2019
Department of the Treasury Internal Revenue Service	▶ Do n		w.irs.gov/Form990T for i ers on this form as it ma					, t	Open to Public Inspection for 501(c)(3) Organizations Only
Check box if	1		Check box if name				24011 13 2 30 1(0)(0	D Empl	loyer identification number
address changed	"""	o or organization (onesk bek ii name	onangoo	2 una 000 mon	40110713.7			lloyees' trust, see uctions)
Exempt under section	Print GR	ITMAN MEI	CENTER	NINO	C.			8	2-0146328
X 501(c1) 3)	or Num	nber, street, and roo	m or suite no. If a P.O. be	ox, see in	nstructions.				lated business activity code instructions)
408(e) 220(e)	Type 70	0 S MAIN	STREET			_]	
408A530(a) 529(a)	1 1 -	or town, state or pro	ovince, country, and ZIP 83843	or foreig	n postal code			531	120
Book value of all assets at end of year			nber (See instructions.)						
			pe ▶ X 501(c) co		n 50	01(c) trust		a) trust	Other trust
Enter the number of the	-		· · · · · · · · · · · · · · · · · · ·	2		_	the only (or first) u		
trade or business here						•	, complete Parts I-V		•
		the end of the previo	ous sentence, complete P	'arts I an	ia II, complete	a Schedule	M for each addition	nal trade	or
business, then complete During the tax year, was		on a cubcidiany in ar	affiliated group or a pari	ont-cube	ıdıarı controll	ed group?		_ \ Ye	es X No
If "Yes," enter the name		-		3111-2002	iuiąry controli	ea group.		<u></u>	S A INU
The books are in care of			THE GOT POTATIONS OF			Telenh	one number	208-	883-2220
		r Business Inc	come		(A) Inc		(B) Expense		(C) Net
1a Gross receipts or sal	 es			\top	, , ,	-			
b Less returns and allo			c Balance	10					
2 Cost of goods sold (S	Schedule A, lın	ue 7)	_	2					
3 Gross profit. Subtrac	t line 2 from lii	ne 1c		3					
4a Capital gain net incor	ne (attach Sch	iedule D)		4a		-			
b Net gain (loss) (Form	4797, Part II,	line 17) (attach For	m 4797)	4b		-			
c Capital loss deductio	n for trusts			4c					
5 Income (loss) from a	partnership or	r an S corporation (attach statement)	5					
6 Rent income (Schedu	ıle C)			6	1,793	<u>,922,-</u>	2,183,4	129.	-389,507.
7 Unrelated debt-finance	ed income (Sc	chedule E)		7					
	•		organization (Schedule F)						
			organization (Schedule G	<i>'</i>					
0 Exploited exempt act	- '	Schedule I)	_	10					
1 Advertising income (,			11					
2 Other income (See in	•	,		12	1 702	022	2 102	120	200 507
3 Total. Combine lines Part II Deduction	ne Not Ta	ken Elsewhe	re (See instructions f	13	1,793	<u>, 922.</u>	2,183,4	129.	-389,507.
(Deductions	must be dire	ectly connected v	with the unrelated busing	ភិ ម និទ្ធព្រះ	confictive Ru	e Servic	0		
		s, and trustees (Sch	*						
 Londensation of of 				LACA!	ved US Ba	<u> ank - US</u>	B	14	
	,	s, and trustees (oct	edule K)	Kecen	ved US Ba 3·3	ank - US	В	14	
5 Salaries and wages		s, and trustees (our	edule K)		3 ⋅3	الما مجموعه د	<u> </u>	15	
		s, and trustees, our	edule ky			الما مجموعه د	B	15 16	
5 Salaries and wages6 Repairs and mainter	nance		edule N		3 ⋅3	الما مجموعه د	B	15	
Salaries and wagesRepairs and mainterBad debts	nance		edule Kj		s·s NOV 23	2020	B	15 16 17	
 5 Salaries and wages 6 Repairs and mainter 7 Bad debts 8 Interest (attach sche 	nance edule) (see inst		edule N		3 ⋅3	2020	B	15 16 17 18	
 5 Salaries and wages 6 Repairs and mainter 7 Bad debts 8 Interest (attach sche 9 Taxes and licenses 	nance edule) (see inst Form 4562)	tructions)	icadic Ny		s·s NOV 23	2020	B	15 16 17 18	
 5 Salaries and wages 6 Repairs and mainter 7 Bad debts 8 Interest (attach sche 9 Taxes and licenses 0 Depreciation (attach 	nance edule) (see inst Form 4562)	tructions)	icadic Ny		s·s NOV 23	2020	B	15 16 17 18 19	
5 Salaries and wages 6 Repairs and mainter 7 Bad debts 8 Interest (attach sche 9 Taxes and licenses 0 Depreciation (attach 1 Less depreciation cl 2 Depletion 3 Contributions to def	nance edule) (see inst Form 4562) aimed on Sche erred compens	tructions) edule A and elsewhe	icadic Ny		s·s NOV 23	2020	B	15 16 17 18 19	
5 Salaries and wages 6 Repairs and mainter 7 Bad debts 8 Interest (attach sche 9 Taxes and licenses 0 Depreciation (attach 1 Less depreciation cl 2 Depletion 3 Contributions to def 4 Employee benefit pr	nance dule) (see inst Form 4562) aimed on Sche erred compens ograms	tructions) edule A and elsewhe sation plans	icadic Ny		s·s NOV 23	2020	B	15 16 17 18 19 21b 22	
5 Salaries and wages 6 Repairs and mainter 7 Bad debts 8 Interest (attach sche 9 Taxes and licenses 0 Depreciation (attach 1 Less depreciation of 2 Depletion 3 Contributions to def 4 Employee benefit pr 5 Excess exempt expe	nance Form 4562) aimed on Sche erred compens ograms nses (Schedule	tructions) edule A and elsewhe sation plans	icadic Ny		s·s NOV 23	2020	B	15 16 17 18 19 21b 22 23	
5 Salaries and wages 6 Repairs and mainter 7 Bad debts 8 Interest (attach sche 9 Taxes and licenses 0 Depreciation (attach 1 Less depreciation of 2 Depletion 3 Contributions to def 4 Employee benefit pr 5 Excess exempt expe 6 Excess readership of	nance Form 4562) aimed on Sche erred compens ograms nses (Schedule	tructions) edule A and elsewhe sation plans le I) e J)	icadic Ny		s·s NOV 23	2020	B	15 16 17 18 19 21b 22 23 24 25 26	
5 Salaries and wages 6 Repairs and mainter 7 Bad debts 8 Interest (attach sche 9 Taxes and licenses 0 Depreciation (attach 1 Less depreciation of 2 Depletion 3 Contributions to def 4 Employee benefit pr 5 Excess exempt expe 6 Excess readership of 7 Other deductions (at	edule) (see inst Form 4562) aimed on Sche erred compens ograms nses (Schedule osts (Schedule)	edule A and elsewhersation plans le I) e J)	icadic Ny		s·s NOV 23	2020	B	15 16 17 18 19 21b 22 23 24 25 26 27	
5 Salaries and wages 6 Repairs and mainter 7 Bad debts 8 Interest (attach sche 9 Taxes and licenses 0 Depreciation (attach 1 Less depreciation of 2 Depletion 3 Contributions to def 4 Employee benefit pr 5 Excess exempt expe 6 Excess readership of 7 Other deductions. A	rance Form 4562) aimed on Sche erred compens ograms nses (Schedule osts (Schedule) dd lines 14 thr	edule A and elsewher sation plans le I) e J) rough 27	re on return	i	s·s NOV 23 Ogden	2020	B	15 16 17 18 19 21b 22 23 24 25 26 27 28	0.
5 Salaries and wages 6 Repairs and mainter 7 Bad debts 8 Interest (attach sche 9 Taxes and licenses 0 Depreciation (attach 1 Less depreciation of 2 Depletion 3 Contributions to def 4 Employee benefit pr 5 Excess exempt expe 6 Excess readership of 7 Other deductions. A 9 Unrelated business of	rance Form 4562) aimed on Sche erred compens ograms nses (Schedule osts (Schedule) idd lines 14 thr taxable income	edule A and elsewher sation plans le I) e J) rough 27 e before net operatin	re on return g loss deduction. Subtrac	i	s·3 NOV 23 Ogden,	2020	B	15 16 17 18 19 21b 22 23 24 25 26 27	0.
5 Salaries and wages 6 Repairs and mainter 7 Bad debts 8 Interest (attach sche 9 Taxes and licenses 10 Depreciation (attach 11 Less depreciation of 12 Depletion 13 Contributions to def 14 Employee benefit pr 15 Excess exempt expe 16 Excess readership of 17 Other deductions (attach 18 Total deductions. A 19 Deduction for net op 10 Deduction for net op	rance Form 4562) aimed on Sche erred compens ograms nses (Schedule osts (Schedule) idd lines 14 thr taxable income	edule A and elsewher sation plans le I) e J) rough 27 e before net operatin	re on return	i	S-3 NOV 23 Ogden,	2020 205 208 21a		15 16 17 18 19 21b 22 23 24 25 26 27 28 29	-389,507.
5 Salaries and wages 6 Repairs and mainter 7 Bad debts 8 Interest (attach sche 9 Taxes and licenses 0 Depreciation (attach 1 Less depreciation of 2 Depletion 3 Contributions to def 4 Employee benefit pr 5 Excess exempt expe 6 Excess readership of 7 Other deductions (at 8 Total deductions. A 9 Inrelated business of 0 Deduction for net op (see instructions)	rance Form 4562) aimed on Sche erred compens ograms nses (Schedule ttach schedule) dd lines 14 thr taxable income errating loss ar	edule A and elsewhersation plans le I) e J) rough 27 e before net operation	re on return g loss deduction. Subtrac	i	S-3 NOV 23 Ogden,	2020 205 208 21a	EMENT 1	15 16 17 18 19 21b 22 23 24 25 26 27 28 29	-389,507. 0.
5 Salaries and wages 6 Repairs and mainter 7 Bad debts 8 Interest (attach sche 9 Taxes and licenses 10 Depreciation (attach 11 Less depreciation of 12 Depletion 13 Contributions to def 14 Employee benefit pr 15 Excess exempt expe 16 Excess readership of 17 Other deductions (attach 18 Total deductions. A 19 Deduction for net op 10 Deduction for net op	rance Form 4562) aimed on Sche erred compens ograms nses (Schedule ttach schedule) dd lines 14 thr taxable income errating loss ar	tructions) edule A and elsewher sation plans le I) e J) rough 27 e before net operation rising in tax years be e. Subtract line 30 fro	re on return g loss deduction. Subtrac eginning on or after Janua	i	S-3 NOV 23 Ogden,	2020 205 208 21a		15 16 17 18 19 21b 22 23 24 25 26 27 28 29	-389,507.

		Total Unrelated Business Taxable Income	04	-0140320 Page
			<u>. </u>	20 604
32		f unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	28,684
33		its paid for disallowed fringes $\psi \omega ag{1}$	33	
34	Charita	ible contributions (see instructions for limitation rules)	34	0
35	Total u	nrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of lines 32 and 33	35	28,684
36	Deduct	tion for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36	28,684
37	Total o	f unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	
38	Specifi	c deduction (Generally \$1,000, but see line 38 instructions for exceptions)	á 8	1,000
39	Unrela	ted business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,		
	enter ti	he smaller of zero or line 37	39	0
Par	t IV	Tax Computation		
40	Organi	zations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	0
41	Trusts	Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:		
	П Т	ax rate schedule or Schedule D (Form 1041)	41	
42	Proxy t	tax. See instructions	42	
43	Alterna	tive minimum tax (trusts only)	43	
44		Noncompliant Facility Income. See instructions	44	
45		Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	0
Part		Tax and Payments		
46a	Foreign	n tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a	T	
b	-	credits (see instructions) 46b	1	
C		l business credit. Attach Form 3800 46c	1	
		for prior year minimum tax (attach Form 8801 or 8827)	1	
e		redits. Add lines 46a through 46d	46e	
47		ct line 46e from line 45	47	Ō
48		axes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	48	<u></u>
49		ax. Add lines 47 and 48 (see instructions)	49	0
50		et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	0
		nts: A 2018 overpayment credited to 2019		<u> </u>
	-	stimated tax payments 51b	-	
		posited with Form 8868 51c	⊣	
	•	n organizations; Tax paid or withheld at source (see instructions) 51d	┤	
	_	withholding (see instructions) 51e	∃ I	
		for small employer health insurance premiums (attach Form 8941) 516	┤ │	
		redits, adjustments, and payments: Form 2439	1 1	
y	_	orm 4136 Other Total > 51g	1 1	
52		ayments. Add lines 51a through 51g		
53		ted tax penalty (see instructions). Check if Form 2220 is attached	52 53	
- 4		e. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54	
54 55		syment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	
56	•	ne amount of line 55 you want. Credited to 2020 estimated tax	56	
Part		Statements Regarding Certain Activities and Other Information (see instructions)	1 20 1	
57		time during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Yes No
V,		financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		Tes No
		Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country		
	here	Total 114, report of Foreign bank and Financial Accounts. If Tes, enter the name of the foreign country		<u> </u>
58		the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		${x}$
30		see instructions for other forms the organization may have to file.		 ^
59		ne amount of tax-exempt interest received or accrued during the tax year \(\bigs\) \\$		
		der penalties of periury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowled	dge and h	elief, it is true
Sign	cc	vect, and complete Declaration of preparation (other than taxpayer) is based on all information of which preparer has any knowledge	age and o	31161, 1C 13 1 UG,
Here		. B. / W. V. V. B. B. A. B. G. B. A. B. G. B.	-	discuss this return with
				shown below (see
			1	
		MUDDI DUVIGORI COL	If PTIN	ı
Paid		1		10006512
-	parer			00096513 9-0758449
Use	Only	Firm's name ►WIPFLI LLP PO BOX 12237	٥:	<u>,-U/36449</u>
			200 4	562 0016
000711	04.07.00	Firm's address ► GREEN BAY, WI 54307-2237 Phone no. 9	ZU.	562.0016
923711	01-27-20			Form 990-T (2019

Schedule A - Cost of Goods	Sold. Enter	method of invei	ntory v	aluation > N/A	<u> </u>		_	
1 Inventory at beginning of year	1			Inventory at end of year			6	
2 Purchases	2		_	Cost of goods sold. S		line 6		
3 Cost of labor	3			from line 5. Enter here	and in i	Part I,		
4 a Additional section 263A costs			7	line 2		,	7	
(attach schedule)	4a		8	Do the rules of section	263A (with respect to		Yes No
b Other costs (attach schedule)	4b			property produced or a	,	•		
5 Total. Add lines 1 through 4b	5		_	the organization?	•	, ., ., .		
Schedule C - Rent Income	From Real	Property and	d Per	sonal Property L	ease	d With Real Prop	erty)	
(see instructions)								
1. Description of property								
(1) REAL ESTATE RENT.	AL						-	
(2)								
(3)								
(4)								
		ed or accrued				2(a) Dadustus streethy		
(a) From personal property (if the per- rent for personal property is more 10% but not more than 50%)	centage of than	(b) From real of rent for the re	and pers personal int is bas	onal property (if the percenta property exceeds 50% or if ed on profit or income)	ıge		EMENT 3	
(1)	1,793,922.				2,183,429.			
(2)		I				1		
(3)								
(4)								
Total	0.	Total		1,793,9	22.			
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		ter -		1,793,9	22.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	▶ 2,1	83,429.
Schedule E - Unrelated Deb	t-Financed	Income (see	ınstru	ctions)			•	
			2	. Gross income from		3. Deductions directly cont to debt-finance		able
1. Description of debt-fir	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other (attach	deductions schedule)
(1)						-		
(2)					Ì			
(3)								
(4)	•							
4. Amount of everage acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis allocable to nced property n schedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	(column 6 x	ble deductions total of columns and 3(b))
(1)				%				
(2)				%				
(3)				%		 -		
(4)				%			1	
						nter here and on page 1, Part I, line 7, column (A)	1	nd on page 1, 7, column (B)
Totals				•		0 .	.	0.
Total dividends-received deductions	cluded in column	n 8				•	.	0.
					-		For	m 990-T (2019)

			Exempt	Controlled O	rganizatio	ons					
1. Name of controlled organiza	ıder	Employer tification umber	3. Net unrelated income (loss) (see instructions)		4. Total of specified payments made		5. Part of column 4 that is included in the controlling organization's gross income		rolling	6. Deductions directly connected with income in column 5	
			+				 	-			
1) <u> </u>	-						_		-		
			·						_		
3)	+		-				-				
4) onexempt Controlled Organ	ızatıone						<u> </u>				
	8 Net unrelated inc	nama (leas)	0 Tatal	of specified payr		40 Part of colu	0.45-		44 0		
7. Taxable Income	(see instructi		9. 10141	made	ients	10. Part of colur in the controlli gross	ng orgai s income	nzation's		eductions directly connected in income in column 10	
2)											
3)											
4)											
				·		Add colum Enter here and line 8, c		1, Part I,		dd columns 6 and 11 here and on page 1, Part I, line 8, column (B)	
tals					•			0.		C	
chedule G - Investme	ent Income of a ructions)	Section	501(c)(7	'), (9), or (⁻	17) Org	anization					
· · · · · · · · · · · · · · · · · · ·	·				I	3. Deduction		4. Set-	2ahiaa	5. Total deduction	
1. Desc	cription of income			2. Amount of	income	directly conne (attach sched			chedule)	and set-asides (col 3 plus col 4	
1)					Î						
2)											
3)					İ						
4)					1					1	
				Enter here and o Part I, line 9, col		_				Enter here and on page Part I, line 9, column (E	
otals			•		٥.١					■ o	
chedule I - Exploited	=	y Incom	e, Other	Than Adv		g Income				<u> </u>	
(see instri 1. Description of exploited activity	2. Gross unrelated business income from trade or business	directly with p of ui	xpenses connected roduction nrelated ss income	4. Net incomfrom urrelated business (cominus column gain, compute through	trade or umn 2 3) If a cols 5	5. Gross inco from activity to is not unrelate business inco	hat ed	6. Exp attributi colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
1)											
2)											
3)											
4)											
	Enter here and on page 1, Part I, line 10, col (A)	page (ine 10	ere and on 1, Part I,), col (B)		4					Enter here and on page 1, Part II, line 25	
itals ► Schedule J - Advertisi	ng Income (see		0.							0	
Rart∤I∎ Income From				solidated	Basis						
1. Name of periodical	2. Gross advertising income	. 1	3. Direct vertising costs	4. Adverti or (loss) (co col 3) If a ga cols 5 th	l 2 minus in, compute	5. Circulati	ion	6. Reade		7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
1)											
2)	-		•								
3) 4)			-								
<u> </u>			· · · · · ·			 					
	Į.			1		1					

0.

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) 7. Excess readership costs (column 6 minus column 5, but not more than column 4) 4. Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7 2. Gross 3. Direct 5. Circulation 6. Readership advertising income 1. Name of periodical advertising costs (1) (2) (3) (4) Totals from Part I 0. 0. 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)

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
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2019)

Enter here and on page 1, Part II, line 26

FORM 990-T	NET	OPERATING	LOSS D	EDUCTION	STATEMENT 1
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUS APPLIE		LOSS REMAINING	AVAILABLE THIS YEAR
12/31/18	335,568.		0.	335,568.	335,568.
NOL CARRYO	VER AVAILABLE THIS	YEAR		335,568.	335,568.

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT 2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/17	55,536.	23,724.	31,812.	31,812.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	31,812.	31,812.

FORM 990-T	DEDUCTIONS	CONNECTED	WITH	RENTAL	INCOME	STATEMENT 3
DESCRIPTION				CTIVITY NUMBER	AMOUNT	TOTAL
UTILITIES REPAIRS & MAIN SNOW REMOVAL & INSURANCE PROPERTY TAXES INTEREST SUPPLIES OTHER DEPRECIATION SALARIES & WAG	E LANDSCAPING	- SUBTOTA	 L -	1	229,499. 110,788. 76,142. 38,588. 285,978. 447,829. 156. 164,180. 734,718. 95,551.	2,183,429.
TOTAL TO FORM	990-T, SCHEDUI	LE C, COLUI	MIN 3			2,183,429.

SCHEDULE M (Form 990-T)

Unrelated Business Taxable Income from an Unrelated Trade or Business

ENT	ITY	1
	OMB No	1545-0047

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning ► 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).

Open to Public Inspection for 501(c)(3) Organizations Only

Name	of the organization GRITMAN MEDICAL CENTER	Employer identifie 82-0146	cation number		
	Inrelated Business Activity Code (see instructions) > 90009			02 0140	
	Describe the unrelated trade or business COURIER S	_	ICE		
=	t I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales				
b	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			
4 a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach		-		
	statement)	5			
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)			-	
	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) STMT 4	_12	72,269.		72,269.
13	Total. Combine lines 3 through 12	13	72,269.		72,269.
Pai	Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business income			ctions.) (Deduc	tions must be
14	Compensation of officers, directors, and trustees (Schedule K)			1	4
15	Salaries and wages			. <u> 1</u>	5 32,361.
16	Repairs and maintenance			1	6 10,168.
17	Bad debts			1	7
18	Interest (attach schedule) (see instructions)			1	8
19	Taxes and licenses		1 1	1	9
20	Depreciation (attach Form 4562)		20		
21	Less depreciation claimed on Schedule A and elsewhere on return		21a	21	b
22	Depletion			2	2
23	Contributions to deferred compensation plans			2	3
24	Employee benefit programs			2	4
25	Excess exempt expenses (Schedule I)			2	5

LHA For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income. Subtract line 30 from line 29

Excess readership costs (Schedule J)

Total deductions. Add lines 14 through 27

Other deductions (attach schedule)

Schedule M (Form 990-T) 2019

1,056.

43,585.

28,684.

28,684.

0.

26

27

28

29

30

26

27

28

29

30

Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see

SEE STATEMENT 5

FORM 990-T (M)	OTHER	INCOME	STATEMENT 4
DESCRIPTION			AMOUNT
COURIER SERVICES			72,269.
TOTAL TO SCHEDULE M, PART	I, LINE 12		72,269.
FORM 990-T (M)	OTHER	DEDUCTIONS	STATEMENT 5
DESCRIPTION			AMOUNT
MISCELLANEOUS			1,056.
TOTAL TO SCHEDULE M, PART	II, LINE 27		1,056.