Form <b>990-T</b>	E	Exempt Organization Bus	sine ler se	ess Income 7	「ax Returi ໄຊ ົ່ງ (	י	OMB No 1545-0687
	Forca	lendar year 2018 or other tax year beginning ${ t JUL} \;\; 1$ ,		18 and ending JU	N 30, 201	.9	2018
¢	•	Go to www irs gov/Form990T for in					
Department of the Treasury Internal Revenue Service	▶	Do not enter SSN numbers on this form as it may	y be ma	de public if your organiz	zation_is a 501(c)(3)		Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if address changed		Name of organization ( Check box if name of	changed	and see instructions.)		(Emp	loyer identification number loyees' trust, see uctions)
B Exempt under section	Print	The College of Idaho I			2-0200906		
X 501(c)(30)	Type	Number, street, and room or suite no. If a P.O. bo		nstructions.			lated business activity code instructions )
408(e)220(e)	Type	2112 Cleveland Bouleva		<u> </u>		_	
408A 530(a) 529(a)		City or town, state or province, country, and ZIP of Caldwell, ID 83605	r foreig	n postal code		721	.000
C Book value of all assets		F Group exemption number (See instructions.)	<b>&gt;</b>				
166,559,1	06.	G Check organization type ► X 501(c) corp	poratio	n 501(c) trust	401(a	) trust	Other trust
		ition's unrelated trades or businesses.	3		the only (or first) ur		
		nference Catering Servi			complete Parts I-V.		
		ice at the end of the previous sentence, complete Pa	arts I ar	id II, complete a Schedul	e M for each additior	nal trad	e or
business, then complete					<del></del>		
		poration a subsidiary in an affiliated group or a pare	nt-subs	idiary controlled group?	▶ l	Ye	es X No
		tifying number of the parent corporation.				000	<u> </u>
J The books are in care of					one number > 2		
L		de or Business Income		(A) Income	(B) Expense	s 	(C) Net
1a Gross receipts or sale		140,591.	١.	140 501			
b Less returns and allow		c Balance	10	140,591.	<del>-</del>	'	
2 Cost of goods sold (S			2	140,591.			140,591.
3 Gross profit. Subtract			3 4a	140,391.	·		140,331.
4a Capital gain net incom			4a 4b				
		Part II, line 17) (attach Form 4797)	40 4c			RE	CEIVED
c Capital loss deduction 5 Income (loss) from a		ship or an S corporation (attach statement)	5				<del></del>
6 Rent income (Schedu		ship of an o corporation (attach statement)	6		8		1 9 2020
7 Unrelated debt-financ		me (Schedule F)	7		8	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3 7070
		and rents from a controlled organization (Schedule F)	8				
		on 501(c)(7), (9), or (17) organization (Schedule G)	_			OG	DEN, UT
10 Exploited exempt activ			10		<del></del>		
11 Advertising income (S	•	•	11/				
12 Other income (See ins		•	12				
13 Total, Combine lines		· ·	13	140,591.			140,591.
		ot Taken Elsewhere (See instructions for	or limita	ations on deductions)			
(Except for d	contribi	utions, deductions must be directly connecte	d with	the unrelated busines	s income )		
14 Compensation of off	icers, di	rectors, and trustees (Schedule K)				14	
15 Salaries and wages						15	134,474.
16 Repairs and mainten	ance					16	
17 Bad debts						17	
18 Interest (attach sche	dule) (s	ee instructions)				18	
19 Taxes and licenses						19	
		e instructions for limitation rules)				20	
21 Depreciation (attach				21			
	aimed oi	n Schedule A and elsewhere on return		22a		22b	
23 Depletion						23	
24 Contributions to defe	/	mpensation plans				24	
25 Employee benefit pro						25	
26 Excess exempt expe						26	
27 Excess readership of				Coo Ctot	omont 2	27	127 567
28 Other deductions (at				See Stat	Dec 2	28 29	127,567. 262,041.
29 Total deductions. A			at long O	0 from line 12	. 00	30	-121,450.
/		ncome before net operating loss deduction. Subtract			٠.	31	121,430.
•		loss arising in tax years beginning on or after Janua	uy I, Zl	TIO (SEE IIISITUCIIONS)	21	32	-121,450.
		ncome. Subtract line 31 from line 30 rwork Reduction Act Notice, see instructions		<del></del>	<del></del>	1 12	Form <b>990-T</b> (2018)
823701 01-09-19 LMA FC	or rape	WOIR REQUESION ACTIONES, SEC 11120 DESIDE					10 500 1 (2010)

Form 5an		2-020	10900	<u>)                                    </u>	Page Z
Papt	III Total Unrelated Business Taxable Income				
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		33		0.
34	Amounts paid for disallowed fringes	_	34		
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	3	35		0.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of		1		
	lines 33 and 34	8	36		000
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	ي ا	37	<u> </u>	000.
38	Unrelated business taxable income Subtract line 37 from line 36. If line 37 is greater than line 36, enter the smaller of zero or line 36				0
Dort			38	<del></del> -	0.
Part 39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)		39		0.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from:		1		<del>- •</del>
40	Tax rate schedule or Schedule D (Form 1041)		40		
41	Proxy tax. See instructions		41		
42	Alternative minimum tax (trusts only)		42		
43	Tax on Noncompliant Facility Income. See instructions		43		
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies		44		0.
	V Tax and Payments		1		
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a		<del>1</del> ; 1	<del></del>	<del></del>
	Other credits (see instructions) 45b		1: 1		
С			1		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)		1		
	Total credits. Add lines 45a through 45d		45e		
46	Subtract line 45e from line 44		46		0.
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach	schedule)	47		
48	Total 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	Payments: A 2017 overpayment credited to 2018 50a		1		
	2018 estimated tax payments		1		
	Tax deposited with Form 8868		1 1 1		
	Foreign organizations: Tax paid or withheld at source (see instructions) 50d		1		
	Backup withholding (see instructions) 50e		1 '		
	Credit for small employer health insurance premiums (attach Form 8941) 50f		1 1 1		
	Other credits, adjustments, and payments: Form 2439		1 .		
_	☐ Form 4136 ☐ Other ☐ Total ► 50g		1 !		
51	Total payments. Add lines 50a through 50g		51		
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached		52		
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	<b>▶</b>	53		
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	▶ `	154		
55	Enter the amount of line 54 you want: Credited to 2019 estimated tax Refunded		155		
Part V	Statements Regarding Certain Activities and Other Information (see instructions	)	1		
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority			Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file				T
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country				
	here >				X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign tr	ust?			X
	If "Yes," see instructions for other forms the organization may have to file.				
58	Enter the amount of tax-exempt interest received or accrued during the tax year ▶\$				
0:	Under penalities of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	of my know	vledge and	belief, it is true,	
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Chief Financial	Ma	y the IRS d	liscuss this return	n with
Here	School W Enn 98/2020 Officer			hown below (see	
	Signature of officer Date Title	ins		X Yes	No
	Print/Type preparer's name Preparer's signature Date Check	ıf	PTIN		
Paid		nployed		0.4045.64	•
Prepa	rer Kim Hunwardsen, CPA CPA 06/05/20			0484560	
Use O	nly Firm's name ►EIDE BAILLY LLP Firm's	EIN -	45	-025095	o 8
	877 W. MAIN ST. STE. 800	_	00 0	44 845.	•
	Firm's address ► BOISE, ID 83702	no 21	U & - 34	44-7150	)

Schedule A - Cost of Good	s Sold. Enter	method of inver	ntory v	aluation N/A		<del></del>			
1 Inventory at beginning of year	1			Inventory at end of year	ar		6		
2 Purchases	2		7	Cost of goods sold S	ubtract l	ine 6		_	
3 Cost of labor	3			from line 5. Enter here	and in F	Part I,			
4a Additional section 263A costs		-		line 2			7		
(attach schedule)	4a		8	Do the rules of section	263A (	with respect to		Yes	No
<ul><li>Other costs (attach schedule)</li></ul>	4b			property produced or a	acquired	f for resale) apply to			.
5 Total Add lines 1 through 4b	5		<u> </u>	the organization?					<u> </u>
Schedule C - Rent Income (see instructions)	(From Real	Property an	d Per	rsonal Property	Leas	ed With Real Pro	opert	:y) 	
1 Description of property									
(1)									
(2)									
(3)									
(4)						•			
		ed or accrued				3(a)Deductions direct	ly conne	cted with the income	ın
(a) From personal property (if the personal property is more 10% but not more than 50%	e than	` 'of rent for	personal	onal property (if the percent property exceeds 50% or if ed on profit or income)	age			(attach schedule)	
(1)									
(2)							_		
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income Add totals of columns here and on page 1, Part I, line 6, column		nter -			0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	<b>&gt;</b>		0.
Schedule E - Unrelated De	bt-Financed	l Income (see	ınstru	ctions)					
			2	Gross income from or allocable to debt-	L.,	3 Deductions directly co to debt-finan		perty	
1 Description of debt-fi	nanced property			financed property	(a)	Straight line depreciation (attach schedule)		(D) Other deductio (attach schedule)	
(1)							$\top$		
(2)	_								
(3)	-								
(4)		•							
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	e adjusted basis allocable to inced property h schedule)	6	Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)		8. Allocable deduc (column 6 x total of c 3(a) and 3(b))	
(1)			1	%				<u> </u>	
(2)				%					
(3)				%					
(4)				%					
						nter here and on page 1, Part I, line 7, column (A)		Enter here and on pag Part I, line 7, column	
Totals				<b>•</b>		0			0.
Total dividends-received deductions if	ncluded in columi	1 8					<b>-</b>		0.

				Exempt	Controlled O	rganizati	ons	,			
1 Name of controlled organizat	ion	ıdentıf	iployer ication iber		related income e instructions)	4. Tota payn	al of specified nents made	includ	t of column 4 ed in the cont ation's gross	rolling	6 Deductions directly connected with income in column 5
1)											
2)											
(3)											
(4)				<u> </u>							
lonexempt Controlled Organi	zations			•							<del></del>
7 Taxable Income		nrelated incor	me (loss)	Q Total	of specified pay	ments T	10 Part of colu	mn Q tha	t is included	11 0	Peductions directly connected
, laxable illcome		ee instruction		J. Total	made		in the control!	ing organ	nization's		th income in column 10
(1)	-										
(2)											
(3)						ĺ					
(4)					_	İ					
							Add colur Enter here and line 8, 6		9 1, Part I,		Add columns 6 and 11 here and on page 1, Part I, line 8, column (B)
otals						▶			0.		0
Schedule G - Investme		ne of a	Section	n 501(c)	(7), (9), or	(17) Or	ganization	1			
	ription of inco	me			2 Amount of	ıncome	3 Deduction directly connection (attach scheduler)	cted	4 Set-		5 Total deductions and set-asides (col 3 plus col 4)
(1)				-	1			-			
(2)											
(3)					<del> </del>						
(4)		<del></del>			1						
(4)	•				Enter here and	on page 1.					Enter here and on page
					Part I, line 9, co						Part I, line 9, column (B)
otals				•		٥.١					0
Schedule I - Exploited (see instru		Activity	/ Incom	ne, Othe	r Than Ac	lvertisi	ng Income	)			
(See Institu	Cuoris)				1 4			-			1
1. Description of exploited activity	2. G unrelated incom trade or l	business e from	directly with pr of un	openses connected roduction irelated iss income	4 Net incon from unrelated business (co minus colum gain, comput through	i trade or Numn 2 n 3) If a e cols 5	5 Gross inco from activity is is not unrelat business inco	that ted	6 Exp attribute colum	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)		-			<u> </u>						
(2)				_			_			_	
(2)					<del> </del>						
(3)					<b>.</b>	-					
(4)	Enter her page 1 line 10,	, Part I,	page	ere and on 1, Part I, I, col (B)		1					Enter here and on page 1, Part II, line 26
otals <b>•</b>		0.		0.	l						0
Schedule J - Advertisi											
Part I Income From I	Periodic	als Rep	orted c	n a Cor	nsolidated	Basis					
1. Name of periodical		2. Gross advertising income	adv	3 Direct vertising costs	or (loss) (c		5 Circulat		6. Reade		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)	$\neg$										][
(2)											]'
(3)					****						1
(4)	-		_	-	7		· -				1
<u> </u>					<del>                                     </del>		<b>†</b>				
otals (carry to Part II, line (5))	<b>•</b>		0.	0	).		<u> </u>				0 5 990-T (2011

# Form 990-T (2018) The College of Idaho Inc 82-02009 | 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.		-		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)	<b>&gt;</b>	0.	0.	-	•		. 0.

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

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

Form 990-T (2018)

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

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

Entity

OMB No 1545-0687

Department of the Treasury Internal Revenue Service (99) For calendar year 2018 or other tax year beginning  $\frac{JUL}{1}$ ,  $\frac{2018}{2018}$ , and ending  $\frac{JUN}{30}$ ,  $\frac{30}{2019}$ 

► 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 The College of Idaho In	C		Employer ide	entification i	
	Inrelated business activity code (see instructions) > 54180					
	escribe the unrelated trade or business Advertisi					
Pai			(A) Income	(B) Expense	es	(C) Net
1 a	Gross receipts or sales					
	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				T	
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)					
	organization (Schedule G)	9			ļ	
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule) Stmt 4	12	24,000.			24,000.
13	Total. Combine lines 3 through 12	13	24,000.			24,000.
Dai	t III Deductions Not Taken Elsewhere (See Instructi	ons i	for limitations on ded	uctions ) (Ex	cept for	contributions
Га	deductions must be directly connected with the				oopt ioi	oonanbations,
14	Compensation of officers, directors, and trustees (Schedule K)				14	
15	Salaries and wages				15	29,066.
16	Repairs and maintenance				16	
17	Bad debts				17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses				19	
20	Charitable contributions (See instructions for limitation rules)		1 1		20	
21	Depreciation (attach Form 4562)		21		J	
22	Less depreciation claimed on Schedule A and elsewhere on return		22a		22b	
23	Depletion				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)		See State	ment 5	28	1,500.
29	Total deductions. Add lines 14 through 28				29	30,566.
30	Unrelated business taxable income before net operating loss dedu			13	30	-6,566.
31	Deduction for net operating loss arising in tax years beginning on o	or afte	r January 1, 2018 (see			
	instructions)				31	
32	Unrelated business taxable income Subtract line 31 from line 30				32	-6,566.

Form 990-T (M)	Other Income	Statement 4
Description		Amount
Advertising Revenue		24,000.
Total to Schedule M, Part	I, line 12	24,000.
Form 990-T (M)	Other Deductions	Statement 5
Description		Amount
Signage		1,500.

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

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

Entity

OMB No 1545-0687

501(c)(3) Organizations Only

Employer identification number

Department of the Treasury Internal Revenue Service (99)

Name of the organization

For calendar year 2018 or other tax year beginning  $\,\,\,$  JUL  $\,\,$  1 ,  $\,\,$  2018  $\,_{,\,}$  and ending  $\,\,$  JUN  $\,\,$  30 ,  $\,\,$  2019

► 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

Inrelated business activity code (see instructions) > 45300		The College of Idaho Inc						
Inrelated business activity code (see instructions) $ ightharpoonup 45300$	0 _							
Describe the unrelated trade or business   Campus St	ore							
t l Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net				
Gross receipts or sales 202, 154.	T							
Less returns and allowances c Balance ▶	1c	202,154.						
Cost of goods sold (Schedule A, line 7)	2							
Gross profit Subtract line 2 from line 1c	3	90,690.	_	90,690.				
Capital gain net income (attach Schedule D)	4a							
Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b							
Capital loss deduction for trusts	4c		* '					
Income (loss) from a partnership or an S corporation (attach								
statement)	5							
Rent income (Schedule C)	6							
Unrelated debt-financed income (Schedule E)	7							
Interest, annuities, royalties, and rents from a controlled								
organization (Schedule F)	8							
Investment income of a section 501(c)(7), (9), or (17)								
organization (Schedule G)	9							
Exploited exempt activity income (Schedule I)	10							
Advertising income (Schedule J)	11							
Other income (See instructions, attach schedule)	12							
Total. Combine lines 3 through 12	13	90,690.		90,690.				
deductions must be directly connected with the			e.)					
	Gross receipts or sales Less returns and allowances  Cost of goods sold (Schedule A, line 7) Gross profit Subtract line 2 from line 1c Capital gain net income (attach Schedule D) Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach statement) Rent income (Schedule C) Unrelated debt-financed income (Schedule E) 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) Exploited exempt activity income (Schedule I) Advertising income (Schedule J) Other income (See instructions, attach schedule) Total. Combine lines 3 through 12  Ttill Deductions Not Taken Elsewhere (See instructions must be directly connected with the	Gross receipts or sales Less returns and allowances  Cost of goods sold (Schedule A, line 7) Gross profit Subtract line 2 from line 1c Capital gain net income (attach Schedule D) Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach statement) Rent income (Schedule C) Unrelated debt-financed income (Schedule E) 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) Explorted exempt activity income (Schedule I) Advertising income (Schedule J) Other income (See instructions, attach schedule) Total. Combine lines 3 through 12  Till Deductions Not Taken Elsewhere (See instructions for deductions must be directly connected with the unrelative service of the sales and service in the content of the c	Gross receipts or sales Less returns and allowances Cost of goods sold (Schedule A, line 7) Gross profit Subtract line 2 from line 1c Capital gain net income (attach Schedule D) Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach statement) Rent income (Schedule C) Unrelated debt-financed income (Schedule E) Interest, annuities, royalties, and rents from a controlled organization (Schedule G) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) Advertising income (Schedule J) Other income (See instructions, attach schedule) Total. Combine lines 3 through 12  (A) Income  (A) Income  (A) Income  (A) Income  (A) Income	Gross receipts or sales Less returns and allowances Cost of goods sold (Schedule A, Ine 7) Gross profit Subtract line 2 from line 1c Capital gain net income (attach Schedule D) Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) Capital loss deduction for trusts Income (Ioss) from a partnership or an S corporation (attach statement) Rent income (Schedule C) Unrelated debt-financed income (Schedule E) Interest, annuities, royalties, and rents from a controlled organization (Schedule G) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Explorted exempt activity income (Schedule I) Advertising income (Schedule J) Other income (See instructions, attach schedule) Total. Combine lines 3 through 12  Total. Combine lines 3 through 12  Total Deductions Not Taken Elsewhere (See instructions for limitations on deductions ) (Except deductions must be directly connected with the unrelated business income.)				

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	95,479.
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	_
20	Charitable contributions (See instructions for limitation rules)	20	
21	Depreciation (attach Form 4562)		
22	Less depreciation claimed on Schedule A and elsewhere on return 22a	22b	
23	Depletion	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)  See Statement 6	28	6,833.
29	Total deductions. Add lines 14 through 28	29	102,312.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-11,622
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	31	
32	Unrelated business taxable income Subtract line 31 from line 30	32	-11,622.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2018

` The Colle	ge of Id	laho Inc		82-02	0090	6
Schedule A - Cost of Good			ory valuation N/A	1		
1 Inventory at beginning of year	1	92,583.	6 Inventory at end of ye	ar	6	107,792.
2 Purchases	2	126,673.	7 Cost of goods sold S	ubtract line 6		
3 Cost of labor	3		from line 5. Enter here	and in Part I,		
4a Additional section 263A costs			line 2		7	111,464.
(attach schedule)	4a		8 Do the rules of section	n 263A (with respect to		Yes No
b Other costs (attach schedule)	4b		property produced or	acquired for resale) apply to		
5 Total Add lines 1 through 4b	5	219,256.	the organization?			X
Schedule C - Rent Income	(From Real	Property and	Personal Property	Leased With Real Pr	opert	y)
(see instructions)						
1 Description of property						
(1)						
(2)						
(3)						
(4)						
		ed or accrued		3(a) Deductions direc	tly conne	cted with the income in
rent for personal property is more than of rent for			nd personal property (if the percent ersonal property exceeds 50% or it is based on profit or income)	(age columns 2(a)		attach schedule)
(1)						
(2)		-				
(3)						
(4)						
Total	0.	Total		0.		
(c) Total income. Add totals of columns		ter		(b) Total deductions Enter here and on page 1.		_
nere and on page 1, Part I, line 6, column				O . Part I, line 6, column (B)	<u> </u>	0.
Schedule E - Unrelated Deb	ot-Financed	Income (see	nstructions)			
			2. Gross income from	<ol> <li>Deductions directly c to debt-fina</li> </ol>		
1. Description of debt-fir	nanced property		or allocable to debt- financed property	(a) Straight line depreciation	$\Box$	(b) Other deductions
To Codd Ipilon of God. III	namous proporty		illianced property	(attach schedule)		(attach schedule)
(1)					$\dashv$	
(2)					+	
(3)						
· · · ·	F A	adjusted basis	6 Column 4 divided	7 Gross income	+	8. Allocable deductions
<ol> <li>Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)</li> </ol>	of or a debt-fina	adjusted dasis llocable to nced property schedule)	6 Column 4 divided by column 5	reportable (column 2 x column 6)	(	column 6 x total of columns 3(a) and 3(b))
(1)			%		$\neg$	
(2)			%			,
(3)			%			
(4)			%			
			<u> </u>	Enter here and on page 1,		Enter here and on page 1,
				Part I, line 7, column (A)		Part I, line 7, column (B)
Totals			<b>•</b>		0.	0.
Total dividends-received deductions in	cluded in column	8			<b>▶</b>	0.

Form 990-T (M)	m 990-T (M) Other Deductions		6
Description		Amount	
Office Expense		6,83	3.
Total to Schedule M, Part II,	line 28	6,83	3.

Form 990-	m 990-T Other Deductions		Statement 2	
Description				Amount
Catering Expense Overhead Expense AV Services				108,285. 17,502. 1,780.
Total to Form 990-T, Page 1, line 28				127,567.
Form 990-T Net Operating Loss Deduction				Statement 3
Tax Year	Loss Sustained	Loss Previously Applied	Loss Remaining	Available This Year
06/30/15 06/30/16 06/30/17 06/30/18	3,010. 32,890. 2,862. 114,216.	0. 0. 0.	3,010. 32,890. 2,862. 114,216.	3,010. 32,890. 2,862. 114,216.
NOL Carryover Available This Year			152,978.	152,978.