NNED NOV 0	<b>9</b> 2020
Z	<b>0</b> ∧ Ĉ
K	Z

Form	990-T	E	xempt Organi	zation Bus	sine	ss Inco	me T	ax Return	a_ F	OMB No 1545-0687
			•	proxy tax und				7 21 201	ᅏᅵ	2010
•	ين الا	For ca	lendar year 2018 or other tax year be						<u>9</u>	ZU 10
Departm Internal	nent of the Treasury Ravenue Service	<b>&gt;</b>	Do not enter SSN numbers of		be ma	de public if yo	ur organiza	ition 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 c	hanged	and see instru	ictions.)	·	(Emple	oyer identification number oyees' trust, see ctions )
B Exe	mpt under section	Print	NATIONAL OUTI	OOR LEADE	RSH:	IP SCHO	OL		_	3-0204184
X	501(c <b>(08_</b> )	or	Number, street, and room or	suite no. If a P.O. box	x, see ır	structions.				ated business activity code istructions)
	408(e) 220(e)	Туре	284 LINCOLN S							
=	408A530(a) 529(a)		City or town, state or province LANDER, WY	453¢	000					
C Book	value of all assets		F Group exemption number		<b></b>					
aten	110,287,8	01.	G Check organization type		poration	n 50	1(c) trust	401(a)	trust	Other trust
			tion's unrelated trades or bus		3		Describe	the only (or first) un	related	
trade	or business here	<b>►</b> S	EE STATEMENT	1				complete Parts I-V.		than one,
desc	rihe the first in the b	lank spa	ce at the end of the previous s	sentence, complete Pa	arts I an	d II, complete	a Schedule	M for each additiona	al trade	or
busi	ness, then complete	Parts III	-V.					*		
		-	oration a subsidiary in an affil		nt-subs	idiary controlle	ed group?	'▶ [	Ye	s X. No
			tifying number of the parent c	orporation. 🕨						-
			TERESA MARCUS					one number > 3		
20			le or Business Incor	ne	_	(A) Inc	ome	(B) Expenses		(C) Net
	Gross receipts or sale		383,844.			202	0.4.4	16.48		
	ess returns and allow			Balance	1c		<u>,844.</u>	1 14 12/ - 17 12 12 12 12 12 12 12 12 12 12 12 12 12		######################################
	Cost of goods sold (S		•		2		,010. ,834.		500000	156,834.
	Gross profit. Subtract				3	130	,054.	``````````````````````````````````````	A CHA	130,034.
	Capital gain net incon		· ·	707)	4a 4b			* * * * * * * * * * * * * * * * * * * *	2 * 7	<u> </u>
	apital loss deduction		art II, line 17) (attach Form 47	91)	40 4c				~~~~	
	-		ship or an S corporation (attac	h statement)	5			The state of the s	4.00	
	Rent income (Schedu		ship of all o corporation (attac	ar statement)	6			- is it is	- Garana	
	Inrelated debt-financ		ne (Schedule E)		7			-		
			nd rents from a controlled orga	anization (Schedule F)	8					
9 li	nvestment income of	f a sectio	on 501(c)(7), (9), or (17) orga	nization (Schedule G)	9					
10 E	xploited exempt acti	vity inco	me (Schedule I)	,	10				,	<del> </del>
11 A	Advertising income (S	Schedule	e J)		11					*
	Other income (See in:		•		12					4.56.004
13 1	otal. Combine lines	3 throu	gh 12		13		,834.			156,834.
:Par	Deductio	ns No	ot Taken Elsewhere utions, deductions must be	(See instructions for	or limita	ations on dec	ductions)	Incomo )		
					WILLI	ine umerateu	business		1	
	•	icers, di	rectors, and trustees (Schedu		E1\ /1	= [	•	•	14	52,818.
	Salaries and wages			REC					15 16	32,010.
	Repairs and mainter Bad debts	lance		-	^	lõl			17	
	Interest (attach sche	idule) (s	ee instructions)	MAR !	257	020 0			18	
	Taxes and licenses	iddic) (3	co msa donons,						19	5,942.
		ons (Se	e instructions for limitation rul	es) OGD	ΕŃ.	UT			20	
1	Depreciation (attach						21	269.		
i			n Schedule A and elsewhere o	n return		Ì	22a		22b	269.
	Depletion		1			•	•		23	
24	Contributions to def	erred co	mpensation plans						24	·
25	Employee benefit pr	ograms							25	8,042.
26	Excess exempt expe	nses (So	chedule I)			•			26_	
	Excess readership c			•					27	<u> </u>
	Other deduction's (at					SEE	STAT	EMENT 2	28	17,163.
	Total deductions A							250		84,234.
,			ncome before net operating lo						30	72,600.
		- •	loss arising in tax years begin		ıry 1, 20	118 (see instru	ctions)	31	31	72 600
<u>32</u>			ncome. Subtract line 31 from					71	82	72,600.

Part I	Total Unrelated Business Taxable Income						
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	e instructions)		33_	7	2,60	00.
34	Amounts paid for disallowed fringes			34			
35.	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instru	ctions) STM	Г 4	35	7	2,60	<u>. 0 c</u>
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the su						
	lines 33 and 34			36			
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)		25			1,00	00.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 3	36					
30	enter the smaller of zero or line 36	30,		38			0.
Dart I	V Tax Computation			1 10 1			<del></del>
				39			0.
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	na lina 00 frami		39			<u> </u>
40	Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount of	on line 38 from:					
	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.
Part \				· · · · · ·			
45 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a		-			
b	Other credits (see instructions)	45b		-			
C	General business credit. Attach Form 3800	45c		4 1			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d					
е	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 889	66 🔲 Other (atta	h 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					
b	2018 estimated tax payments	50b					
	Tax deposited with Form 8868	50c		1			
	Foreign organizations: Tax paid or withheld at source (see instructions)	50d		7			
	Backup withholding (see instructions)	50e		1			
	Credit for small employer health insurance premiums (attach Form 8941)	50f		1			
a	Other credits, adjustments, and payments: Form 2439			1			
y	Form 4136 Other Total	50g				•	
51	Total payments. Add lines 50a through 50g	004		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		_	53			
	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid			54			
54 55	Enter the amount of line 54 you want: Credited to 2019 estimated tax	Refund	lad	55			
Part \				1 33			
-	At any time during the 2018 calendar year, did the organization have an interest in or a signature		,			Yes	No
56	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization					163	110
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the						
	·	Toreign country				Х	
						<del>  </del>	Х
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or tra	ansieror to, a foreigi	i trust r			$\vdash$	
F0	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   \$\bigs\\$  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the hes	of my knowle	edge and h	elief it is tru		
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer		-	ougo una c		-,	
Here	X Terus 1 / M X 3 18 10 PRESIDE	NTO		-	S discuss this		ith
	Signature of officer Date Title	IN T			r shown belo s)? X Y		7 No
		4- Ch	_			53	No
_	Print/Type preparer's name Preparer's signature Da			ıf PTI	IN		
Paid	MAYNE B HEBB \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	3/09/20 sell	- employed		00189	027	
Prepa	WOODE WEADING COLTE	<del></del>	min File N		3-033		<u> </u>
Use (	IN CHARGE TO THE CONTRACT OF T		m's EIN	. 0	7-033	144	<del>)</del>
	P.O. BOX 1088		one no.	207	631 2	151	
	Firm's address  CHEYENNE, WY 82003	111	iulie IIO.	JU/-	ひつせーム	TOT	

Schedule A - Cost of Goods	Sold. Enter	method of invent	ory v	aluation > COS	Т				
Inventory at beginning of year	1	316,482.		Inventory at end of year	ır		6	348,918.	
2 Purchases	2	259,446.		Cost of goods sold. St		ine 6			
3 Cost of labor	3			from line 5. Enter here					
4 a Additional section 263A costs				line 2		•	7	227,010.	
(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	575,928.		the organization?				X	
Schedule C - Rent Income (	From Real	Property and	Per	sonal Property L	.ease	d With Real Prop	erty	<u> </u>	
(see instructions)									
Description of property				_					
(1)				•					
(2)									
(3)									
(4)						<del></del>			
****	2. Rent receiv	ed or accrued		101		3(a) Deductions directly	conno	cted with the income in	
(a) From personal property (if the perc rent for personal property is more 10% but not more than 50%)	centage of than	of rent for pe	rsonal	onal property (if the percentage property exceeds 50% or if ed on profit or income)	ge	columns 2(a) a	nd 2(b)	(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,		0	
here and on page 1, Part I, line 6, column Schedule E - Unrelated Deb		Income (see	netni	ctions)	0.	Part I, line 6, column (B)	▶	0.	
		(366)	1300	Chorisy		3 Deductions directly con	nected	with or allocable	
			2	Gross income from		to debt-finan			
Description of debt-fin	anced property		or allocable to debt- financed property			Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)	
						,		,	
(1)						· ·	1	··- · · · · · · · · · · · · · · · · · ·	
(2)					<u> </u>	;			
(3)									
(4)									
4. Amount of average acquisition debt on or allocable to debt-financed		adjusted basis	6	Column 4 divided by column 5		7. Gross income reportable (column		8. Allocable deductions (column 6 x total of columns	
property (attach schedule)		nced property h schedule)		- <b>,</b>		2 x column 6)		3(a) and 3(b))	
(1)				%					
(2)				%					
(3)				%					
(3) (4)									
				%	E	inter here and on page 1,	+	Enter here and on page 1,	
				%		nter here and on page 1, Part I, line 7, column (A)	-	Enter here and on page 1, Part I, line 7, column (8)	
				%					

				Exempt 0	Controlled O	rganızatı	ons				
1. Name of controlled organizat	ION	2. Emp identific numb	ation		elated income instructions)		tal of specified ments made			rolling	6 Deductions directly connected with income in column 5
(1)											<del></del>
(2)									*		
(3)					•						
(4)		` ,					F				
Nonexempt Controlled Organi	zations										
7 Taxable Income		inrelated incomi see instructions		9 Total	of specified payr made	nents	10 Part of column the controllingross	nn 9 tha ng orgai income	nization's		ductions directly connected income in column 10
(1)											
(2)											
(3)											
(4)											
							Add colun Enter here and line 8, c		1, Part I,	ı	td columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
Totals							-		0.		0.
Schedule G - Investme	nt Incor	ne of a S	ection	501(c)(7	), (9), or (	17) Or	ganization				
(see insti	ructions)								•		_
1, Desc	ription of inco	me			2 Amount of	income	ncome 3 Deductions directly connected (attach schedule) 4. Set-asi (attach sch		asides schedule)	5. Total deductions and set-asides (col 3 plus col 4)	
(1)											
(2)											
(3)											1
(4)											
					Enter here and Part I, line 9, co	lumn (A)					Enter here and on page 1 Part I, line 9, column (B)
Totals Schedule I - Exploited	Evamet	Activity	Incomo	Othor	Than Adv	0.	a Incomo	Best	a the hand	ولا هر المعالم المناه أنها	0.
(see instru	-	Activity	come	, Other	· · · · · · · · · · · · · · · · · · ·	ei tisii			<b>.</b>		
Description of exploited activity	unrelated incom	Gross business ie from business	3. Exp directly co with pro of unre business	onnected duction elated	4 Net incomfrom unrelated business (cominus colum gain, compute through	I trade or olumn 2 in 3) If a e cols 5	5. Gross inco from activity t is not unrelat business inco	hat ed	attribut	penses table to mn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(2)											
(3)											′
(4)											
			Enter her page 1, line 10,	Parti, col (B)				第10分 多次 次			Enter here and on page 1, Part II, line 26
Totals Schedule J - Advertising	a Incor	0.  ne (see in	struction	0.		ant bei		~{*^ 1,6."	with the man	man i will	<u>al</u> 0.
Rartill Income From I					hotobilos	Racic			-		
Frankis income From	-eriodic	ais nepu	nteu oi	i a Cons	Solidated	Da515					
1. Name of periodical		2. Gross advertising income		3. Direct rtising costs					6. Read cos		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)				5			W.				
(2)					7.4		200				
(3)			1								
(4)		***									
	· •		).	0		on participation					0.
Totals (carry to Part II, line (5))			/ • J	U	• [				<u> </u>		

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

Form 990-T (2018) NATIONAL OUTDOOR LEADERSHIP SCHOOL 83-02041

Pairtil 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	<b></b>	0.	0.			157495753	0.
	Ö	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (8)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	<b>&gt;</b>	0.	0.	Marian .			0.
Schedule K - Comper	satio	n of Officers, I	Directors, and	Trustees (see in	nstructions) ,		
					. 3. Percer		ensation attributable

time devoted to business to unrelated business 2 Title 1 Name (1) (2) (3) (4)

> Form 990-T (2018) 0

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED STATEMENT 1 BUSINESS ACTIVITY

SALE OF MERCHANDISE AND OUTDOOR GEAR

TO FORM 990-T, PAGE 1

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 2
DESCRIPTION		AMOUNT
OVERHEAD ALLOCATION		17,163.
TOTAL TO FORM 990-T, PAGE 1,	LINE 28	17,163.

FORM 990-T NAME OF FOREIGN COUNTRY IN WHICH STATEMENT 3 ORGANIZATION HAS FINANCIAL INTEREST

#### NAME OF COUNTRY

CANADA CHILE **MEXICO** NEW ZEALAND INDIA SWEDEN TANZANIA

FORM 990-T	NET	STATEMENT 4		
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
08/31/02	518.	0.	518.	518.
08/31/03	63,631.	0.	63,631.	63,631.
08/31/04	9,891.	0.	9,891.	9,891.
08/31/05	78,614.	0.	78,614.	78,614.
08/31/06	73,386.	0.	73,386.	73,386.
08/31/07	137,021.	0.	137,021.	137,021.
08/31/08	182,779.	0.	182,779.	182,779.
08/31/09	142,480.	0.	142,480.	142,480.
08/31/10	371,005.	0.	371,005.	371,005.
08/31/11	139,791.	0.	139,791.	139,791.
08/31/12	38,118.	0.	38,118.	38,118.
08/31/13	127,760.	0.	127,760.	127,760.
08/31/14	222,067.	0.	222,067.	222,067.
08/31/15	221,187.	0.	221,187.	221,187.
08/31/16	76,912.	0.	76,912.	76,912.
08/31/17	155,820.	0.	155,820.	155,820.
08/31/18	249,852.	0.	249,852.	249,852.
NOL CARRYOV	ER AVAILABLE THIS	YEAR	2,290,832.	2,290,832.

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

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

For calendar year 2018 or other tax year beginning SEP 1, 2018, and ending AUG 31,

OMB No 1545-0687

ENTITY

Department of the Treasury Internal Revenue Service (99) ► 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 Rublic Inspection for 50 1(c)(3) Organizations Only

Name	of the organization NATIONAL OUTDOOR LEADERS	SHIP	SCHOOL	Employer identific 83-0204	
	Unrelated business activity code (see instructions) > 72111		Beneez	, 00 000	
	Describe the unrelated trade or business HOTEL				
	Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
	Gross receipts or sales 11,493.		<del></del>		
b	Less returns and allowances c Balance	1c	11,493.		
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit Subtract line 2 from line 1c	3	11,493.		11,493.
	Capital gain net income (attach Schedule D)	4a			` v.j
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			*
С	Capital loss deduction for trusts	4c			Tá l
5	Income (loss) from a partnership or an S corporation (attach			7.2	•
	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	3		
12	Other income (See instructions; attach schedule)	12			
13	Total. Combine lines 3 through 12	13	11,493.		11,493.
Pai	Deductions Not Taken Elsewhere (See instructions deductions must be directly connected with the undertaken to the connected with the				t for contributions,
14	Compensation of officers, directors, and trustees (Schedule K)			10	4
15	Salaries and wages			1:	<u>23,968.</u>
16	Repairs and maintenance			10	6
17	Bad debts .			_1	7
18	Interest (attach schedule) (see instructions)				
19	Taxes and licenses			1:	9 2,261.
20	Charitable contributions (See instructions for limitation rules)			20	
21	Depreciation (attach Form 4562)		21	37,807.	45
22	Less depreciation claimed on Schedule A and elsewhere on return		22a	22	2b 37,807.
23	Depletion			23	3   •
24	Contributions to deferred compensation plans			24	
25	Employee benefit programs			2	5,298.

For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income Subtract line 31 from line 30

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

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

Excess exempt expenses (Schedule I)

Excess readership costs (Schedule J)

Total deductions. Add lines 14 through 28

Other deductions (attach schedule)

Schedule M (Form 990-T) 2018

24,355

93,689.

-82,196.

26

27

29

30

SEE STATEMENT 5

26

27

28

29 30

31

Page 3

NATIONAL	OUTDOOR	LEADERSH	IP SCHOOL		83-020	418	4	
Schedule A - Cost of Goods	Sold. Enter	method of inver	tory valuation   N/A					
<ol> <li>Inventory at beginning of year</li> </ol>	1		6 Inventory at end of year	ar		6		
2 Purchases	2		7 Cost of goods sold St					
3 Cost of labor	3		from line 5. Enter here	and in F	Part I,			
4a Additional section 263A costs			line 2			7	1.	T
(attach schedule)	4a		8 Do the rules of section				Yes	No
<b>b</b> Other costs (attach schedule)	4b		property produced or a	acquired	for resale) apply to			<del>                                     </del>
5 Total Add lines 1 through 4b	5	D	the organization?		J.Mith Dool Drop		<u>L</u>	X
Schedule C - Rent Income (see instructions)	From Hear	Property and	i Personai Property L	.ease	with Real Prop	ertyj		
Description of property	· · · · · · · · · · · · · · · · · · ·							
(1)								
(2)				<del></del>			·	
(3)								
(4)	2. Rent receiv	ed or accrued				,		
(a) From personal property (if the per		and personal property (if the percenta	qe	3(a) Deductions directly			n	
rent for personal property is more 10% but not more than 50%)	than	personal property exceeds 50% or if nt is based on profit or income)		columns 2(a) ar	10 2(6) (8	attach schedule)		
_(1)								
(2)								
(3)								
(4)								
Total	0.	Total		0.	(h) Total daduations			
(c) Total income. Add totals of columns		ter		^	(b) Total deductions. Enter here and on page 1,			^
here and on page 1, Part I, line 6, column Schedule E - Unrelated Deb		Income (see	instructions)	0.	Part I, line 6, column (B)	<u> </u>		0.
Scriedale E - Officiated Det	7t-i illaliceu	meome (see	instructions)	T	3 Deductions directly con-	nected v	with or allocable	
			2. Gross income from		to debt-finance			
1 Description of debt-fit	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)		
					(andon bonedalo)		(0.1.00.1.00.1.00,	
(1)						+		<del></del>
(2)						+		
(3)						1		
(4)			*****			1		
4 Amount of average acquisition	5 Average	adjusted basis	6. Column 4 divided		7. Gross income	Ť	8 Allocable deduct	tions
debt on or allocable to debt-financed property (attach schedule)	of or a	allocable to nced property	by column 5		reportable (column 2 x column 6)	] (	column 6 x total of co 3(a) and 3(b))	
F - F - 9, C	(attac	n schedule)			2 x column oj		3(3) 210 3(0))	
(1)			%					
(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			_		0	.		0.
Total dividends-received deductions in	cluded in column	n 8	<b>,</b>			$\top$		0.
						_		<u> </u>

FORM 990-T (M)	OTHER DEDUCTIONS	STATEMENT 5
DESCRIPTION		AMOUNT
OPERATING SUPPLIES OVERHEAD ALLOCATION		5,264. 19,091.
TOTAL TO SCHEDULE M, PART II,	LINE 28	24,355.

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

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

For calendar year 2018 or other tax year beginning SEP 1, 2018 and ending AUG 31, 2019

ENTITY

Employer identification number

OMB No 1545-0687

Department of the Treasury Internal Revenue Service (99) Name of the organization ► 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).

.501(c)(3) Organizăti

	NATIONAL OUTDOOR LEADERS	SHIF	SCHOOL	83-02	0418	4
L	Inrelated business activity code (see instructions) > 42400					
	escribe the unrelated trade or business RATION SA	LES				
Pai	tभा Unrelated Trade or Business Income		(A) Income	(B) Expense	s	(C) Net
1a	Gross receipts or sales 69,797.			0.70 3.79		
ь	Less returns and allowances c Balance	1c	69,797			
2	Cost of goods sold (Schedule A, line 7)	2		1.25 C T. T. T.		
3	Gross profit. Subtract line 2 from line 1c	3	69,797			69,797.
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		TO THE STATE OF TH		
5	Income (loss) from a partnership or an S corporation (attach				F	
	statement)	5				v
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)	12		45.43.27.34.28		
13	Total. Combine lines 3 through 12	13	69,797	•		69,797.
Pa	Deductions Not Taken Elsewhere (See Instruction deductions must be directly connected with the unconnected with th	ions f Inrela	or limitations on d ted business inco	eductions.) (Exc me.)	ept fo	r contributions,
`14	Compensation of officers, directors, and trustees (Schedule K)				14	
15	Salaries and wages				15	10,816.
16	Repairs and maintenance		j.		16	
17	Bád debts				17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses				19	1,078.
20	Charitable contributions (See instructions for limitation rules)		, ,		20	
21	Depreciation (attach Form 4562)		21	18.		
22	Less depreciation claimed on Schedule A and elsewhere on return		22a		22b	18.

Unrelated business taxable income Subtract line 31 from line 30 For Paperwork Reduction Act Notice, see instructions.

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

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

Contributions to deferred compensation plans

Excess exempt expenses (Schedule I)

Excess readership costs (Schedule J)

Total deductions. Add lines 14 through 28

Other deductions (attach schedule)

Employee benefit programs

Schedule M (Form 990-T) 2018

1,101.

75,782

88,795.

-18,998.

-18,998.

23 24

25

26

27

28

29

30 

SEE STATEMENT 6

23

24

25

26

27

28

29

30

31

Depletion

Page 3

2

NATIONAL	OUTDOOR	LEADERSH	IP SCHOOL		83-0204	184
Schedule A - Cost of Goods	s Sold. Enter	method of invent	tory valuation > N/A	A		
1 Inventory at beginning of year	1		6 Inventory at end of ye	ar		6
2 Purchases	2		7 Cost of goods sold. S		ine 6	
3 Cost of labor	3		from line 5. Enter here			
4a Additional section 263A costs			line 2			7
(attach schedule)	4a		8 Do the rules of section	n 263A (1	with respect to	Yes No
<b>b</b> Other costs (attach schedule)	4b		property produced or acquired for resale) apply to			
5 Total Add lines 1 through 4b					,	X
Schedule C - Rent Income (	From Real	Property and	Personal Property I	Lease	d With Real Prope	erty)
(see instructions)						
1 Description of property						
(1)						
(2)						
(3)						
(4)						
	2. Rent receiv	ed or accrued				
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)		(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)		
(1)			-			
(2)						
(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		iter 🛌		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<b>.</b> 0.
Schedule E - Unrelated Deb		Income (see	instructions)			
		(			3. Deductions directly conne	
		<ol><li>Gross income from or allocable to debt-</li></ol>	(-)	to debt-financed property		
Description of debt-financed property		financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				ļ		
(2)				<u> </u>		
(3)				ļ		
(4)						
<ol> <li>Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)</li> </ol>	of or a debt-fina	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 deductions (column 6 x total of columns 3(a) and 3(b))
(1)			%	1		
(2)			%			
(3)			%			
(4)			%			
					nter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Totals			•		0.	0.
Total dividends-received deductions un	actuded in column	n 8	•		<u> </u>	0.

FORM 990-T (M)	OTHER DEDUCTIONS	STATEMENT 6
DESCRIPTION		AMOUNT
OPERATING SUPPLIES RATIONS SUPPLIES ALLOCATION OF OVERHEAD		1,347. 56,342. 18,093.
TOTAL TO SCHEDULE M, PART II, L	INE 28	75,782.

1