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For Paperwork Reduction Act Notice, see instructions.

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Par	t III Total Unrelated Business Taxable Income		
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see		
	ınstructions)	33	29,048.
34	Amounts paid for disallowed fringes	34	
	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		
35		25	
	instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum		00.040
	of lines 33 and 34	36	29,048.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	1,000.
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	38	28,048.
Par	t IV Tax Computation	 	
	Organizations Taxable as Corporations Multiply line 38 by 21% (0 21)	39	5,890.
39	·	35	3,030.
40	Trusts Taxable at Trust Rates See instructions for tax computation income tax on][
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041)		
41	Proxy tax See instructions		
42	Alternative minimum tax (trusts only)	42	
43	Tax on Noncompliant Facility Income. See instructions		
44	Total Add lines 41, 42, and 43 to line 39 or 40, whichever applies		5,890.
Par			
		T - 1	
	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	-	
b	Other credits (see instructions)	- 1	
С	General business credit Attach Form 3800 (see instructions)		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)]	
е	Total credits. Add lines 45a through 45d	46e	
46	Subtract line 45e from line 44		5,890.
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	47	
	Total tax Add lines 46 and 47 (see instructions)	48	5,890.
48		49	
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	43	
	Payments A 2017 Overpayment credited to 2010	1 1	
b	2018 estimated tax payments	4	
С	Tax deposited with Form 8868		
d	Foreign organizations Tax paid or withheld at source (see instructions)]	
е	Backup withholding (see instructions)]	
f	Credit for small employer health insurance premiums (attach Form 8941)] [
	Other credits, adjustments, and payments Form 2439	1	
9	Form 4136 Other Total > 50g		
- 4		۱ ۵۵	20,349.
51	Total payments Add lines 50a through 50g	51	20,343.
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	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	14,459.
655	Enter the amount of line 54 you want Credited to 2019 estimated tax ▶ 14,459. Refunded ▶	55	
<u>r </u>	t VI Statements Regarding Certain Activities and Other Information (see instructions	s)	
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or		rity Yes No
-	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may		···,
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	ioreign cour	
	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	gn trust?	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 ▶ \$		
	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements and to the b	est of my knowl	edge and belief, it is
Sigr	true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge		
_		,	scuss this return
Her		· · · —	er shown below
	<u> </u>	e instructions)?	
Dei:	Print/Type preparer's name // Preparer's signature // Date Check		/
Paid	KKISIAL K CKLACII M / M / C C C C C C C C C C C C C C C C	mployed P	01248198
	parer Firm's name ► BKD, LLP Firm's	EIN ► 44-	0160260
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Page 3 Form 990-T (2018) Schedule A - Cost of Goods Sold. Enter method of inventory valuation > Inventory at end of year Inventory at beginning of year. 2 Purchases Cost of goods sold Subtract line 3 6 from line 5 Enter here and in 3 Cost of labor 4a Additional section 263A costs Part I, line 2 No Yes (attach schedule) 4a Do the rules of section 263A (with respect to **b** Other costs (attach schedule) 4b property produced or acquired for resale) apply Total Add lines 1 through 4b . to the organization? . Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions) 1 Description of property (1) (2) (3) (4) 2 Rent received or accrued 3(a) Deductions directly connected with the income (a) From personal property (if the percentage of rent (b) From real and personal property (if the in columns 2(a) and 2(b) (attach schedule) for personal property is more than 10% but not percentage of rent for personal property exceeds more than 50%) 50% or if the rent is based on profit or income) (1) (2) (3) (4) Total (b) Total deductions (c) Total income. Add totals of columns 2(a) and 2(b) Enter Enter here and on page 1, here and on page 1, Part I, line 6, column (A) ▶ Part I, line 6, column (B) Schedule E - Unrelated Debt-Financed Income (see instructions) 3 Deductions directly connected with or allocable to 2 Gross income from or debt-financed property 1 Description of debt-financed property allocable to debt-financed (b) Other deductions (a) Straight line depreciation property (attach schedule) (attach schedule) (1) (2) (3) (4) 4 Amount of average 5 Average adjusted basis 8 Allocable deductions 6 Column acquisition debt on or of or allocable to 7 Gross income reportable 4 divided (column 6 x total of columns allocable to debt-financed debt-financed property (column 2 x column 6) by column 5 3(a) and 3(b)) property (attach schedule) (attach schedule) % (1) % (2) % (3) % (4) Enter here and on page 1, Enter here and on page 1,

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Part I, line 7, column (B)

Total dividends-received deductions included in column 8.

Part I, line 7, column (A)

Schedule F-Interest, Annu	lities, Royalties			ntrolled Or			ions (see	nstructio	ns)_	
Name of controlled organization	2 Employer identification numb	per 3	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		lling	6 Deductions directly connected with income in column 5
(1)										
(2)										
(3)										
(4)										
Nonexempt Controlled Organiz	zations									
7 Taxable Income	8 Net unrelated income (loss) (see instructions)		9 Total of specified payments made		10 Part of column 9 that is included in the controlling organization's gross income			11 Deductions directly connected with income in column 10		
(1)										
(2)										
(3)										
(4)							columns 5 a			id columns 6 and 11
Totals			 (c)(7),	(9), or (17		Part		mn (A)		er here and on page 1, rt I, line 8, column (B)
1 Description of income	2 Amount of income			directly connected (attach schedule)			4 Set-			and set-asides (col 3 plus col 4)
(1)		,	-							
(2) . (3)										
(4)										
Totals ► Schedule I – Exploited Exe	Enter here and Part I, line 9, c	olumn (A)	her Th	an Advert	ising Ir	ncome (see instru	ctions)		Enter here and on page 1 Part I, line 9 column (B)
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected wi production of unrelated business incor		4 Net inco from unrela or business 2 minus co If a gain, o cols 5 thr	ted tradé (column lumn 3) compute	from ac	as income citivity that unrelated as income	6 Expenses attributable to column 5		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)										
(2)										
(3)										
(4)										
Totals ▶	Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)								Enter here and on page 1, Part II, line 26
Schedule J- Advertising In	ICOME (see instr	uctions)								,
Part I Income From Per	•		Consol	idated Ra	sis					
arti income i fom i en		ica on a c	2011301	Tuated Bu	313					
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 (carry to Part II, line (5))										
										- 000 T

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

2 through 7 on a			rate Basis (For	each periodical	ilsted in Part I	i, fili in columns
1 Name of periodical	2 Gross		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)					<u> </u>	
Totals from Part I ▶						
	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) ▶		1				
Schedule K - Compensatio	n of Officers, D	irectors, and Tr	ustees (see insti			
1 Name		2 Title		3 Percent of time devoted to business	4 Compensation attributable to unrelated business	
(1)				%		
(2)				%		
(3)				%		
(4)				%		

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