Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 3 Amounts paid for disallowed fringes 3 Deduction for not operating loss arraing in tax years beginning before January 1, 2018 (see instructions) 3 Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of lines 33 and 34 3 Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions) 3 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 Part IV Tax Computation 3 Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21) 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) 43 Tax on Noncompliant Facility income. See instructions 44 Total, Add lines 41, 42, and 43 to line 39 or 40, whichever applies 45 Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45 Other credits, See instructions 46 Oceratis (See instructions) 47 Total credits (See instructions) 48 Total tax Add lines 44, 22, and 43 to line 39 or 40, whichever applies 49 Cotal from the 44 40 Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 866 Other (attach schedule) 48 Total tax Add lines 44 and 47 (see instructions) 49 2018 net 965 tax lability paid from Form 965-8, Part II, column (k), line 2 50 a Payments: A 2017 overpayment credited to 2018 50 Descriptions of the form 1118 is subjected with Form 8866 6 Foreign organizations. Tax paid or withheld at source (see instructions) 6 Backup withholding (see instructions) 7 Credit for small employer health insurance premiums (attach Form 8941) 9 Other credits, adjustments, and payments: Form 2439
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Part V Tax and Payments ## Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) ## Dither credits (see instructions) ## General business credit. Attach Form 3800 ## Credit for prior year minimum tax (attach Form 8801 or 8827) ## Total credits Add lines 45a through 45d ## Subtract line 45e from line 44 ## Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule) ## Total tax Add lines 46 and 47 (see instructions) ## 2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2 ## 50a ## Dayments: A 2017 overpayment credited to 2018 ## Dayme
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g Other credits, adjustments, and payments: Form 2439
5 4400 Duy
Form 4136 Other Total ▶ 50g
51 Total payments. Add lines 50a through 50g
52 Estimated tax penalty (see instructions). Check if Form 2220 is attached
53 Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed
54 Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid 54 480.
55 Enter the amount of line 54 you want: Credited to 2019 estimated tax Refunded 55 55 480.
Part VI Statements Regarding Certain Activities and Other Information (see instructions)
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
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 trust?
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 pegury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge 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
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Here \\ \//// \/ \///\/\\\\\\\\\\\\\\\\\\
Here SECUTIVE DIRECTOR the preparer shown below (see
Here Signature of officer Signature of officer Signature of officer Date Signature of officer Signature of officer Date Signature of officer Date Signature of officer Signature of officer Date Signature of officer Signature of of
Here Signature of officer Date
Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Od/10/2020 Print/Type preparer's name
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Timesthoy at beginning of year 1 8 Imentory at end of year 2 Purchases 2 7 Cost of goods old. Subtract line 6 5 7 Cost of goods old. Subtract line 6 7 7 Cost of goods old. Subtract line 6 7 7 7 7 7 7 7 7 7	Schedule A - Cost of Goods	Sold. Enter	method of inven	tory v	aluation ► N/A					
2 Prichases 2				1				6		
3 Cast of labor 4a Additional section 263A costs (attach schedule) 4b property produced or acquired for resale) apply 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 accused (4) From personal property of the personal prop				7				***************************************		
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(2)					%					
(3)					%					
(4) % Enter here and on page 1, Part I, line 7, column (A) Totals Position (A) Part I, line 7, column (B) O • O •					%					
Totals Enter here and on page 1, Part I, line 7, column (A) Enter here and on page 1, Part I, line 7, column (B) O • O •	-				%					
	Totals				•		0.	.		0.
		<u>cluded in colu</u> mn	18							

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Schedule F - Interest, /	Annuities, Royal					tions (see in	structions	s)	
, ·		Exe	mpt Controlled C	rganizatio	ons		1		
1. Name of controlled organizal	:denti		let unrelated income is) (see instructions)			5 Part of column 4 included in the con organization s gross	trolling	6 Deductions directly connected with income in column 5	
(1)				1					
(2)	· · · · · · · · · · · · · · · · · · ·		 -						
(3)									
(4)				† · · · · ·					
Nonexempt Controlled Organi	zations	L		1					
7 Taxable Income	8 Net unrelated incor	me (loss) 0	Total of specified pay	ments	10 Part of colum	nn 9 that is included	11 Dec	ductions directly connected	
, idazio modilio	(see instruction		made		in the controlli	ng organization's i income		income in column 10	
(1)		ì					1		
(2)	***	<u> </u>							
(3)					•				
(4)									
					Enter here and	ins 5 and 10 on page 1, Part I,	Enter h	d columns 6 and 11 ere and on page 1, Part I,	
					line 8, c	olumn (A)		line 8, column (B)	
Totals				>		0.		0.	
Schedule G - Investme (see insti		Section 501	(c)(7), (9), or	(17) Org	anization				
1 Desc	cription of income		2. Amount o	f income	3 Deduction directly connect (attach schedu	cted 4. Set	t-asides schedule)	5 Total deductions and set-asides (col 3 plus col 4)	
(1)									
(2)									
(3)									
(4)									
			Enter here and Part I, line 9, c					Enter here and on page 1, Part I, line 9, column (B)	
Totals				0.				0.	
Schedule I - Exploited		Income, Ot	her Than Ad		g Income				
1 Description of exploited activity	2. Gross unrelated business income from trade or business	3 Expenses directly connect with production of unrelated business incom	minus colun	d trade or olumn 2 nn 3) If a te cols 5	5 Gross inco from activity the is not unrelate business income	hat attribu	openses utable to umn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1)					-			·	
(2)	_			t					
(3)								1	
(4)		 				- 			
	Enter here and on page 1, Part I, line 10, col (A)	Enter here and o page 1 Part I, line 10, col (B)		1		· <u> </u>		Enter here and on page 1, Part II, line 28	
Totals -	0.	<u> </u>	0.					0.	
Schedule J - Advertision Part I Income From I	ng Income (see Periodicals Rep		Consolidated	Basis	`	<u> </u>			
1 Name of periodical	2. Gross advertising income	3 Dire advertising	ct or (loss) (costs col 3) If a	rtising gain col 2 minus gain, compute through 7	5. Circulat	ion 6. Read		7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)									
(2)									
(3)									
(4)					<u> </u>				
Totals (carry to Part II, line (5))	>	0.	0.					0. Form 990-T (2018	
								-com 330-1 (2018	

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Part II, Income From Perio			ate Basis (For eac	ch periodical listed	ın Part II, fill ın	
columns 2 through 7 on a	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)	0.	0.				0 <u>.</u>
Schedule K - Compensation	n of Officers, D	irectors, and	Trustees (see in:	structions)		
1 Name			2. Title	3 Percent time devote	dia 1 4 Com	pensation attributable nrelated business

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(1) (2) (3) (4)

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