

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2017

For calendar year 2017 or other tax year beginning 07/01/17, and ending 06/30/18

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).

Department of the Treasury Internal Revenue Service

A Check box if address changed
B Exempt under section 501(c)(3)
408(e)
408A
529(a)

Name of organization Maui County Community Television, Inc.
Number, street, and room or suite no. 333 Dairy Road Suite 104
City or town, state or province, country, and ZIP or foreign postal code Kahului HI 96732

D Employer identification number 99-0300906
E Unrelated business activity codes 531120 221000

C Book value of all assets at end of year 4,660,826

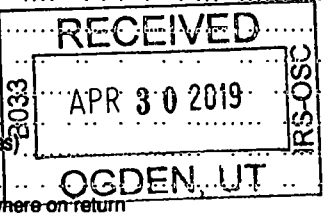
F Group exemption number
G Check organization type 501(c) corporation

H Describe the organization's primary unrelated business activity Commercial Rental Real Estate
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

J The books are in care of Terrie Roberts Telephone number 808-871-5554

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Less returns and allowances, Cost of goods sold, etc.

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, directors, and trustees, Salaries and wages, Repairs and maintenance, etc.



38

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Part III Tax Computation

| | | | |
|----|---|---|-----------|
| 35 | Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and | | |
| a | Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order) | (1) \$ <input type="text"/> (2) \$ <input type="text"/> (3) \$ <input type="text"/> | |
| b | Enter organization's share of (1) Additional 5% tax (not more than \$11,750) | \$ <input type="text"/> | |
| | (2) Additional 3% tax (not more than \$100,000) | \$ <input type="text"/> | |
| c | Income tax on the amount on line 34 | | 35c 3,684 |
| 36 | Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) | | 36 |
| 37 | Proxy tax. See instructions | | 37 |
| 38 | Alternative minimum tax | | 38 |
| 39 | Tax on Non-Compliant Facility Income. See instructions | | 39 |
| 40 | Total. Add lines 37, 38, and 39 to line 35c or 36, whichever applies | | 40 3,684 |

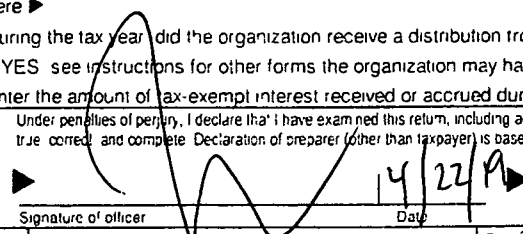
Part IV Tax and Payments

| | | | | |
|-----|--|-----|--------|--|
| 41a | Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) | 41a | | |
| b | Other credits (see instructions) | 41b | | |
| c | General business credit. Attach Form 3800 (see instructions) | 41c | 3,684 | |
| d | Credit for prior year minimum tax (attach Form 8801 or 8827) | 41d | | |
| e | Total credits. Add lines 41a through 41d | 41e | 3,684 | |
| 42 | Subtract line 41e from line 40 | 42 | 0 | |
| 43 | Other taxes. Check if from <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 6611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (att. sch) | 43 | | |
| 44 | Total tax. Add lines 42 and 43 | 44 | 0 | |
| 45a | Payments. A 2016 overpayment credited to 2017 | 45a | 17,365 | |
| b | 2017 estimated tax payments | 45b | | |
| c | Tax deposited with Form 8868 | 45c | 7,300 | |
| d | Foreign organizations. Tax paid or withheld at source (see instructions) | 45d | | |
| e | Backup withholding (see instructions) | 45e | | |
| f | Credit for small employer health insurance premiums (Attach Form 8941) | 45f | | |
| g | Other credits and payments <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other <input type="checkbox"/> | 45g | | |
| 46 | Total payments. Add lines 45a through 45g | 46 | 24,665 | |
| 47 | Estimated tax penalty (see instructions). Check if Form 2220 is attached | 47 | | |
| 48 | Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed | 48 | | |
| 49 | Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid | 49 | 24,665 | |
| 50 | Enter the amount of line 49 you want credited to 2018 estimated tax | 50 | 24,665 | |

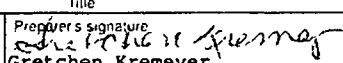
Part V Statements Regarding Certain Activities and Other Information (see instructions)

| | | | |
|----|---|-----|----|
| 51 | At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority 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 <input type="checkbox"/> | Yes | No |
| 52 | 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 <input type="checkbox"/> | | X |
| 53 | Enter the amount of tax-exempt interest received or accrued during the tax year <input type="checkbox"/> \$ | | |

Under penalties of perjury, 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, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here  4/22/19 CEO/President

Signature of officer: Gretchen Kremeyer Date: 4/22/19 Title: CEO/President

Print preparer's name: Gretchen Kremeyer Preparer's signature:  Date: Preparer's PTIN: P00768528

Firm's name: Carbonaro CPAs & Management Group Firm's EIN: 99-0303190

Firm's address: 1885 Main St Ste 408 Wailuku, HI 96793 Phone no: 808-242-5002

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Schedule A – Cost of Goods Sold. Enter method of inventory valuation ►

| | | | | | |
|--|-----------|--|---|----------|----------------------|
| 1 Inventory at beginning of year | 1 | | 6 Inventory at end of year | 6 | |
| 2 Purchases | 2 | | 7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2 | 7 | |
| 3 Cost of labor | 3 | | | | |
| 4a Additional sec. 263A costs (attach schedule) | 4a | | | | |
| b Other costs (attach schedule) | 4b | | 8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? | | Yes No |
| 5 Total. Add lines 1 through 4b | 5 | | | | |

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 | | |
| (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) | | |
| (4) | | |
| Total | Total | (b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ► |
| (c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ► | | |

Schedule E – Unrelated Debt-Financed Income (see instructions)

| 1. Description of debt-financed property | | 2. Gross income from or allocable to debt-financed property | 3. Deductions directly connected with or allocable to debt-financed property | |
|---|---|---|--|---|
| | | | Stmt 1 (a) Straight line depreciation (attach schedule) | Stmt 2 (b) Other deductions (attach schedule) |
| (1) | Commercial Rental | 838,263 | 86,301 | 609,539 |
| (2) | Electricity | 5,967 | 53,619 | |
| (3) | | | | |
| (4) | | | | |
| 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | 5. Average adjusted basis of or allocable to debt-financed property (attach schedule) | 6. Column 4 divided by column 5 | 7. Gross income reportable (column 2 x column 6) | 8. Allocable deductions (column 8 x total of columns 3(a) and 3(b)) |
| (1) | 735,955 | 1,515,866 | 48.55% | 406,977 |
| (2) | 630,806 | 603,997 | 100.00% | 53,619 |
| (3) | | | % | |
| (4) | | | % | |
| See Statement 3 See Statement 4 | | | Enter here and on page 1, Part I, line 7, column (A). | Enter here and on page 1, Part I, line 7, column (B). |
| Totals | | | 412,944 | 391,449 |
| Total dividends-received deductions included in column 8 | | | | |

Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

| 1. Name of controlled organization | 2. Employer identification number | Exempt Controlled Organizations | | | |
|------------------------------------|-----------------------------------|---|-------------------------------------|---|--|
| | | 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 | 6. Deductions directly connected with income in column 5 |
| (1) N/A | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |

Nonexempt Controlled Organizations

| 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) | | | | |
| | | | Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). | Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B). |

Totals ▶

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

| 1. Description of income | 2. Amount of income | 3. Deductions directly connected (attach schedule) | 4. Set-asides (attach schedule) | 5. Total deductions and set-asides (col 3 plus col 4) |
|--------------------------|---------------------|---|---------------------------------|---|
| (1) N/A | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| | | Enter here and on page 1, Part I, line 9, column (A). | | Enter here and on page 1, Part I, line 9, column (B). |

Totals ▶

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

| 1. Description of exploited activity | 2. Gross unrelated business income from trade or business | 3. Expenses directly connected with production of unrelated business income | 4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols 5 through 7. | 5. Gross income from activity that is not unrelated business income | 6. Expenses attributable to column 5 | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4) |
|--------------------------------------|---|---|---|---|--------------------------------------|---|
| (1) N/A | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| | | 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 I, line 28. |

Totals ▶

Schedule J – Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated 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) N/A | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |

Totals (carry to Part II, line (5)) ▶

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) N/A | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals from Part I ▶ | | | | | | |
| Totals, Part II (lines 1-5) ▶ | 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 |

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) N/A | | % | |
| (2) | | % | |
| (3) | | % | |
| (4) | | % | |
| Total. Enter here and on page 1, Part II, line 14 ▶ | | | |

Federal Statements**Statement 1 - Form 990-T, Schedule E, Column 3a - Straight Line Depreciation**

| Description | Deduction |
|------------------------|----------------------|
| Commercial Rental | |
| Commercial Property | 61,538 |
| Solar | 6,075 |
| Roofing | 3,659 |
| Siding and Sofit | 1,817 |
| Solar Panels | 1,558 |
| Improvements | 283 |
| Improvements | 471 |
| Improvements | 309 |
| Improvements | 208 |
| Air Conditioner | 238 |
| Air Conditioner | 337 |
| Air Conditioner | 369 |
| Air Conditioner | 221 |
| Improvements | 958 |
| Improvements | 1,383 |
| Water Main Replacement | 2,545 |
| Air Conditioner | 3,293 |
| Improvements | 77 |
| Improvements | 119 |
| Improvements | 138 |
| Improvements | 333 |
| Improvements | 86 |
| Improvements | 95 |
| Improvements | 83 |
| Improvements | 108 |
| Total | <u>86,301</u> |
| Electricity | |
| Photovoltaic | 53,619 |
| Total | <u>53,619</u> |

Federal Statements

Statement 2 - Form 990-T, Schedule E, Column 3b - Other Deductions

| <u>Description</u> | <u>Deduction</u> |
|------------------------|------------------|
| Commercial Rental | |
| Accounting Fees | 6,682 |
| Legal Fees | 483 |
| Commissions | 19,148 |
| Management Fees | 57,634 |
| Interest | 47,734 |
| Insurance | 24,999 |
| Cleaning & Maintenance | 80,950 |
| Supplies | 4,089 |
| Repairs | 27,884 |
| Taxes | 58,755 |
| Utilities | 61,959 |
| Rent | 218,354 |
| Amortization | 868 |
| Total | <u>609,539</u> |

Statement 3 - Form 990-T, Schedule E, Column 4 - Average Acquisition Debt

| <u>Description</u> | <u>Deduction</u> |
|---|------------------|
| Commercial Rental | |
| Sum of Debt Outstanding at First of Each Month | 8,831,454 |
| Divided by Total Number of Months Property Held | <u>12</u> |
| Average Acquisition Debt | <u>735,955</u> |
| Electricity | |
| Sum of Debt Outstanding at First of Each Month | 5,046,448 |
| Divided by Total Number of Months Property Held | <u>8</u> |
| Average Acquisition Debt | <u>630,806</u> |

Federal Statements

Statement 4 - Form 990-T, Schedule E, Column 5 - Average Adjusted Basis

| <u>Description</u> | <u>Deduction</u> |
|---|-------------------------|
| Commercial Rental | |
| Adjusted Basis on First Day Property Was Held | 1,493,671 |
| Adjusted Basis on Last Day Property Was Held | <u>1,538,061</u> |
| | 3,031,732 |
| Divided by 2 | <u>2</u> |
| Average Adjusted Basis | <u><u>1,515,866</u></u> |
| Electricity | |
| Adjusted Basis on First Day Property Was Held | 630,806 |
| Adjusted Basis on Last Day Property Was Held | <u>577,188</u> |
| | 1,207,994 |
| Divided by 2 | <u>2</u> |
| Average Adjusted Basis | <u><u>603,997</u></u> |

Form **3800**

General Business Credit

OMB No. 1545-0895

2017

Attachment Sequence No. **22**

Department of the Treasury
Internal Revenue Service (99)

▶ Go to www.irs.gov/Form3800 for instructions and the latest information.
▶ You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

| | |
|--|---|
| Name(s) shown on return Maui County Community Television, Inc. | Identifying number 99-0300906 |
|--|---|

Part I Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT)
(See instructions and complete Part(s) III before Parts I and II)

| | | |
|--|---|--|
| 1 General business credit from line 2 of all Parts III with box A checked | 1 | |
| 2 Passive activity credits from line 2 of all Parts III with box B checked | 2 | |
| 3 Enter the applicable passive activity credits allowed for 2017. See instructions | 3 | |
| 4 Carryforward of general business credit to 2017. Enter the amount from line 2 of Part III with box C checked. See instructions for statement to attach | 4 | |
| 5 Carryback of general business credit from 2018. Enter the amount from line 2 of Part III with box D checked. See instructions | 5 | |
| 6 Add lines 1, 3, 4, and 5 | 6 | |

Part II Allowable Credit

| | | |
|--|-----|--------------|
| 7 Regular tax before credits: • Individuals. Enter the sum of the amounts from Form 1040, lines 44 and 46, or the sum of the amounts from Form 1040NR, lines 42 and 44 • Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2; or the applicable line of your return • Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b; or the amount from the applicable line of your return | 7 | 3,684 |
| 8 Alternative minimum tax: • Individuals. Enter the amount from Form 6251, line 35 • Corporations. Enter the amount from Form 4626, line 14 • Estates and trusts. Enter the amount from Schedule I (Form 1041), line 56 | 8 | |
| 9 Add lines 7 and 8 | 9 | 3,684 |
| 10a Foreign tax credit | 10a | |
| b Certain allowable credits (see instructions) | 10b | |
| c Add lines 10a and 10b | 10c | |
| 11 Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16 | 11 | 3,684 |
| 12 Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0- | 12 | 3,684 |
| 13 Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000 (see instructions) | 13 | |
| 14 Tentative minimum tax: • Individuals. Enter the amount from Form 6251, line 33 • Corporations. Enter the amount from Form 4626, line 12 • Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54 | 14 | |
| 15 Enter the greater of line 13 or line 14 | 15 | |
| 16 Subtract line 15 from line 11. If zero or less, enter -0- | 16 | 3,684 |
| 17 Enter the smaller of line 6 or line 16 C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or reorganization. | 17 | 3,684 |

For Paperwork Reduction Act Notice, see separate instructions.

Form **3800** (2017)

Part III Allowable Credit (Continued)

Note: If you are not required to report any amounts on lines 22 or 24 below, skip lines 18 through 25 and enter -0- on line 26.

| | | | |
|----|---|----|---------|
| 18 | Multiply line 14 by 75% (0.75). See instructions | 18 | |
| 19 | Enter the greater of line 13 or line 18 | 19 | |
| 20 | Subtract line 19 from line 11. If zero or less, enter -0- | 20 | |
| 21 | Subtract line 17 from line 20. If zero or less, enter -0- | 21 | |
| 22 | Combine the amounts from line 3 of all Parts III with box A, C, or D checked | 22 | |
| 23 | Passive activity credit from line 3 of all Parts III with box B checked | 23 | |
| 24 | Enter the applicable passive activity credit allowed for 2017. See instructions | 24 | |
| 25 | Add lines 22 and 24 | 25 | |
| 26 | Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25 | 26 | |
| 27 | Subtract line 13 from line 11. If zero or less, enter -0- | 27 | 3,684 |
| 28 | Add lines 17 and 26 | 28 | |
| 29 | Subtract line 28 from line 27. If zero or less, enter -0- | 29 | 3,684 |
| 30 | Enter the general business credit from line 5 of all Parts III with box A checked | 30 | 189,242 |
| 31 | Reserved | 31 | |
| 32 | Passive activity credits from line 5 of all Parts III with box B checked | 32 | |
| 33 | Enter the applicable passive activity credits allowed for 2017. See instructions | 33 | |
| 34 | Carryforward of business credit to 2017. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach | 34 | |
| 35 | Carryback of business credit from 2018. Enter the amount from line 5 of Part III with box D checked. See instructions | 35 | |
| 36 | Add lines 30, 33, 34, and 35 | 36 | 189,242 |
| 37 | Enter the smaller of line 29 or line 36 | 37 | 3,684 |
| 38 | Credit allowed for the current year. Add lines 28 and 37. Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return. • Individuals. Form 1040, line 54, or Form 1040NR, line 51 • Corporations. Form 1120, Schedule J, Part I, line 5c • Estates and trusts. Form 1041, Schedule G, line 2b | 38 | 3,684 |

Name(s) shown on return

Identifying number

Maui County Community

99-0300906

Part III General Business Credits or Eligible Small Business Credits (see instructions)

Complete a separate Part III for each box checked below (see instructions).

- A General Business Credit From a Non-Passive Activity
- B General Business Credit From a Passive Activity
- C General Business Credit Carryforwards
- D General Business Credit Carrybacks
- E Reserved
- F Reserved
- G Eligible Small Business Credit Carryforwards
- H Reserved

I If you are filing more than one Part III with box A or B checked, complete and attach first an additional Part III combining amounts from all Parts III with box A or B checked. Check here if this is the consolidated Part III

| (a) Description of credit | (b) If claiming the credit from a pass-through entity, enter the EIN | (c) Enter the appropriate amount |
|---|---|-------------------------------------|
| Note: On any line where the credit is from more than one source, a separate Part III is needed for each pass-through entity. | | |
| 1a Investment (Form 3468, Part II only) (attach Form 3468) | 1a | |
| b Reserved | 1b | |
| c Increasing research activities (Form 6765) | 1c | |
| d Low-income housing (Form 8586, Part I only) | 1d | |
| e Disabled access (Form 8826) (see instructions for limitation) | 1e | |
| f Renewable electricity, refined coal, and Indian coal production (Form 8835) | 1f | |
| g Indian employment (Form 8845) | 1g | |
| h Orphan drug (Form 8820) | 1h | |
| i New markets (Form 8874) | 1i | |
| j Small employer pension plan startup costs (Form 8881) (see instructions for limitation) | 1j | |
| k Employer-provided child care facilities and services (Form 8882) (see instructions for limitation) | 1k | |
| l Biodiesel and renewable diesel fuels (attach Form 8864) | 1l | |
| m Low sulfur diesel fuel production (Form 8896) | 1m | |
| n Distilled spirits (Form 8906) | 1n | |
| o Nonconventional source fuel (carryforward only) | 1o | |
| p Energy efficient home (Form 8908) | 1p | |
| q Energy efficient appliance (carryforward only) | 1q | |
| r Alternative motor vehicle (Form 8910) | 1r | |
| s Alternative fuel vehicle refueling property (Form 8911) | 1s | |
| t Enhanced oil recovery credit (Form 8830) | 1t | |
| u Mine rescue team training (Form 8923) | 1u | |
| v Agricultural chemicals security (carryforward only) | 1v | |
| w Employer differential wage payments (Form 8932) | 1w | |
| x Carbon dioxide sequestration (Form 8933) | 1x | |
| y Qualified plug-in electric drive motor vehicle (Form 8936) | 1y | |
| z Qualified plug-in electric vehicle (carryforward only) | 1z | |
| aa Employee retention (Form 5884-A) | 1aa | |
| bb General credits from an electing large partnership (Schedule K-1 (Form 1065-B)) | 1bb | |
| zz Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions) | 1zz | |
| 2 Add lines 1a through 1zz and enter here and on the applicable line of Part I | 2 | |
| 3 Enter the amount from Form 8844 here and on the applicable line of Part II | 3 | |
| 4a Investment (Form 3468, Part III) (attach Form 3468) | 4a | 189,242 |
| b Work opportunity (Form 5884) | 4b | |
| c Biofuel producer (Form 6478) | 4c | |
| d Low-income housing (Form 8586, Part II) | 4d | |
| e Renewable electricity, refined coal, and Indian coal production (Form 8835) | 4e | |
| f Employer social security and Medicare taxes paid on certain employee tips (Form 8846) | 4f | |
| g Qualified railroad track maintenance (Form 8900) | 4g | |
| h Small employer health insurance premiums (Form 8941) | 4h | |
| i Increasing research activities (Form 6765) | 4i | |
| j Reserved | 4j | |
| z Other | 4z | |
| 5 Add lines 4a through 4z and enter here and on the applicable line of Part II | 5 | 189,242 |
| 6 Add lines 2, 3, and 5 and enter here and on the applicable line of Part II | 6 | 189,242 |

Form **4562**

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2017

Department of the Treasury
Internal Revenue Service (89)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment Sequence No. **179**

Name(s) shown on return **MauI County Community Television, Inc.**

Identifying number
99-0300906

Business or activity to which this form relates

Electricity

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

| | | | |
|----|---|------------------------------|------------------|
| 1 | Maximum amount (see instructions) | 1 | 510,000 |
| 2 | Total cost of section 179 property placed in service (see instructions) | 2 | |
| 3 | Threshold cost of section 179 property before reduction in limitation (see instructions) | 3 | 2,030,000 |
| 4 | Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- | 4 | |
| 5 | Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions | 5 | |
| 6 | (e) Description of property | (b) Cost (business use only) | (c) Elected cost |
| 7 | Listed property. Enter the amount from line 29 | 7 | |
| 8 | Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 | 8 | |
| 9 | Tentative deduction. Enter the smaller of line 5 or line 8 | 9 | |
| 10 | Carryover of disallowed deduction from line 13 of your 2016 Form 4562 | 10 | |
| 11 | Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) | 11 | |
| 12 | Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 | 12 | |
| 13 | Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12 | 13 | |

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.)

| | | | |
|----|---|----|--|
| 14 | Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) | 14 | |
| 15 | Property subject to section 168(f)(1) election | 15 | |
| 16 | Other depreciation (including ACRS) | 16 | |

Part III MACRS Depreciation (Don't include listed property.) (See instructions.)

Section A

| | | | |
|----|---|----|---|
| 17 | MACRS deductions for assets placed in service in tax years beginning before 2017 | 17 | 0 |
| 18 | If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here | | |

Section B—Assets Placed in Service During 2017 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only—see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|--------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 19a 3-year property | | | | | | |
| b 5-year property | | 536,185 | 5.0 | HY | S/L | 53,619 |
| c 7-year property | | | | | | |
| d 10-year property | | | | | | |
| e 15-year property | | | | | | |
| f 20-year property | | | | | | |
| g 25-year property | | | 25 yrs. | | S/L | |
| h Residential rental property | | | 27.5 yrs. | MM | S/L | |
| | | | 27.5 yrs. | MM | S/L | |
| i Nonresidential real property | | | 39 yrs. | MM | S/L | |
| | | | | MM | S/L | |

Section C—Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System

| | | | | | | |
|----------------|--|--|---------|----|-----|--|
| 20a Class life | | | | | S/L | |
| b 12-year | | | 12 yrs. | | S/L | |
| c 40-year | | | 40 yrs. | MM | S/L | |

Part IV Summary (See instructions.)

| | | | |
|----|--|----|--------|
| 21 | Listed property. Enter amount from line 28 | 21 | |
| 22 | Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions | 22 | 53,619 |
| 23 | For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs | 23 | |

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2017)

There are no amounts for Page 2

Form **4562**

Depreciation and Amortization
(Including Information on Listed Property)

OMB No. 1545-0172

2017

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Attachment Sequence No. **179**

Name(s) shown on return **Maui County Community Television, Inc.**

Identifying number
99-0300906

Business or activity to which this form relates
Commercial Rental

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

| | | | |
|----|---|------------------------------|------------------|
| 1 | Maximum amount (see instructions) | 1 | 510,000 |
| 2 | Total cost of section 179 property placed in service (see instructions) | 2 | |
| 3 | Threshold cost of section 179 property before reduction in limitation (see instructions) | 3 | 2,030,000 |
| 4 | Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- | 4 | |
| 5 | Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions | 5 | |
| 6 | (a) Description of property | (b) Cost (business use only) | (c) Elected cost |
| 7 | Listed property. Enter the amount from line 29 | 7 | |
| 8 | Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 | 8 | |
| 9 | Tentative deduction. Enter the smaller of line 5 or line 8 | 9 | |
| 10 | Carryover of disallowed deduction from line 13 of your 2016 Form 4562 | 10 | |
| 11 | Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) | 11 | |
| 12 | Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 | 12 | |
| 13 | Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12 | ▶ 13 | |

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.)

| | | | |
|----|---|----|---------------|
| 14 | Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) | 14 | |
| 15 | Property subject to section 168(f)(1) election | 15 | |
| 16 | Other depreciation (including ACRS) | 16 | 86,301 |

Part III MACRS Depreciation (Don't include listed property.) (See instructions.)

Section A

| | | | |
|----|---|----|----------|
| 17 | MACRS deductions for assets placed in service in tax years beginning before 2017 | 17 | 0 |
| 18 | If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here | ▶ | |

Section B—Assets Placed in Service During 2017 Tax Year Using the General Depreciation System

| (a) Classification of property | (b) Month and year placed in service | (c) Basis for depreciation (business/investment use only—see instructions) | (d) Recovery period | (e) Convention | (f) Method | (g) Depreciation deduction |
|--------------------------------|--------------------------------------|--|---------------------|----------------|------------|----------------------------|
| 19a 3-year property | | | | | | |
| b 5-year property | | | | | | |
| c 7-year property | | | | | | |
| d 10-year property | | | | | | |
| e 15-year property | | | | | | |
| f 20-year property | | | | | | |
| g 25-year property | | | 25 yrs. | | S/L | |
| h Residential rental property | | | 27.5 yrs. | MM | S/L | |
| | | | 27.5 yrs. | MM | S/L | |
| i Nonresidential real property | | | 39 yrs. | MM | S/L | |
| | | | | MM | S/L | |

Section C—Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System

| | | | | | | |
|----------------|--|--|---------|----|-----|--|
| 20a Class life | | | | | S/L | |
| b 12-year | | | 12 yrs. | | S/L | |
| c 40-year | | | 40 yrs. | MM | S/L | |

Part IV Summary (See instructions.)

| | | | |
|----|--|----|---------------|
| 21 | Listed property. Enter amount from line 28 | 21 | |
| 22 | Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions | 22 | 86,301 |
| 23 | For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs | 23 | |

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? 24b If "Yes," is the evidence written? 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 26 Property used more than 50% in a qualified business use: 27 Property used 50% or less in a qualified business use: 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (don't include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use?

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

42 Amortization of costs that begins during your 2017 tax year (see instructions): 43 Amortization of costs that began before your 2017 tax year 44 Total. Add amounts in column (f). See the instructions for where to report