

#### \*\* PUBLIC INSPECTION COPY \*\*

Form	990- I		:xem					ss income i	ax Return	ן ו	OIVIB	NO. 1545-0047
								ection 6033(e))	- 20 000	, I	9	010
		For cal	endar year					19_ , and ending SE		<u> 10 .  </u>		2019
Depart Interna	ment of the Treasury Il Revenue Service	<b>•</b>	Do not e					ons and the latest inform de public if your organiz		).	Open to 501(c)(3)	Public Inspection for Organizations Only
Α	Check box if address changed		Name of	f organization (	Check	k box if name cl	hanged	and see instructions.)		DEmp (Emp	loyer iden oloyees' tr uctions.)	ntification number rust, see
B Ex	cempt under section	Print	NAT]	IONAL PU	BLIC	RADIO,	IN	C.		5	2-0	907625
X	501( <b>c</b> )(3)	or Type		, street, and roo							lated bus instructio	iness activity code ns.)
	408(e) 220(e)	Турс		LNORTH								
	408A530(a)			own, state or pro		• .	r foreig	n postal code				
	529(a)			IINGTON,		20002				515	100	
C at e	Book value of all assets at end of year 392,176,596.    G Check organization type ► X 501(c) corporation 501(c) trust 401(a) trust									\ <b></b>		044
	•											
	Enter the number of the organization's unrelated trades or businesses.   3 Describe the only (or first) unrelated trade or businesses. If only one, complete Parts I-V. If more than one,											
	-				ue conton	no complete Da	rte Lar	II only one, id II, complete a Schedule	•			ie,
	siness, then complete			end of the previo	าน5 5611เธาเ	se, complete ra	ii lo i ai	iu ii, complete a scheuuk	s IVI IOI Eacii audilioi	iai ii au	G UI	
				subsidiary in an	affiliated o	roun or a naren	nt-suhs	idiary controlled group?	<b></b>	T y	es [	X No
	Yes," enter the name a						it oubo	idiary controlled group.			00	<u></u> 100
	e books are in care of						CFO	Teleph	one number <b>&gt;</b> 2	202-	513	-2000
	rt I Unrelated							(A) Income	(B) Expense			(C) Net
1 a	Gross receipts or sale	S										
	Less returns and allow				<b>c</b> Baland	ce <b>&gt;</b>	1c					
2	Cost of goods sold (S	chedule	A, line 7)	)			2					
	Gross profit. Subtract						3					
	Capital gain net incom						4a					
	Net gain (loss) (Form						4b					
	Capital loss deduction						4c					
	Income (loss) from a					,	5					
	Rent income (Schedu						6					
	Unrelated debt-finance						7					
	Interest, annuities, roy						8					
	Investment income of		. ,		-			61,186,146.	4 202 0	70	5.6	883,167.
	Exploited exempt activ						11	01,100,140.	4,302,3	119.	56,	565,107.
11 12	Advertising income (S Other income (See ins	struction	; J)	schodula) ST	יΔππΜι	ะงา 1	12	1,061,890.			1	061,890.
	Total. Combine lines							62,248,036.		79.		945,057.
								ations on deductions.)		,,,,,	J , , .	<del>313   03   1</del>
				ly connected v								
14	Compensation of off	icers, di	rectors, a	nd trustees (Sch	edule K)					14		
15										15		
16										16		
17	Bad debts									17		
18										18		
19										19	_	500.
20	Depreciation (attach											
21	Less depreciation cla									21b		
22	Depletion									22	-	
23										23	-	
24										24	56	883,167.
25 26	Evoges readership of	11252 (O(	hedule I)	'						26	50,	555,107.
20 27	Other deductions (at	tach coh	nedule) nedule)					SEE STAT	ЕМЕМТ 2	27	<del>                                     </del>	802,834.
28	Total deductions A	dd linee	14 throw	nh 27				DDD DIAI		28		686,501.
29	Unrelated business to	axable ir	ncome he	efore net oneratir	a loss ded	uction, Subtrac	t line 2	8 from line 13		29		258,556.
30	Deduction for net op											
		-		-			-			30		0.
31	Unrelated business t	axable ir	ncome. S	ubtract line 30 fr	om line 29					31		258,556.

923701 01-27-20 LHA For Paperwork Reduction Act Notice, see instructions.

Part	· III	Total Unrelated Business Taxable Income					
32	Total of	unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		32	: 2	258,5	56.
33	Amoun	ts paid for disallowed fringes		33	,		
34	Charita	ble contributions (see instructions for limitation rules)		34	,		0.
35		nrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from the sum of line		35	; 2	258,5	56.
36		ion for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)		36		258,5	
37		unrelated business taxable income before specific deduction. Subtract line 36 from line 35					
38		c deduction (Generally \$1,000, but see line 38 instructions for exceptions)					0.
39		ted business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,		"	1		
-		e smaller of zero or line 37		39	,		0.
Part	IV	Tax Computation		1 55			
40		zations Taxable as Corporations. Multiply line 39 by 21% (0.21)	<b></b>	40			0.
41		<b>Taxable at Trust Rates.</b> See instructions for tax computation. Income tax on the amount on line 39 from:					
•		ax rate schedule or Schedule D (Form 1041)	•	41			
42		ax. See instructions		42			
43		tive minimum tax (trusts only)					
44	Tayon	Noncompliant Facility Income. See instructions		44	_		
45	Total A	Add lines 42, 43, and 44 to line 40 or 41, whichever applies		45			0.
_		Tax and Payments		1 40			<del></del>
		tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a					
		redits (see instructions) 46b		-			
		business credit. Attach Form 3800   46c		-			
		or prior year minimum tax (attach Form 8801 or 8827)		-			
		redits. Add lines 46a through 46d		466			
47					_		0.
48	Other to	ot line 46e from line 45 axes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attac	ا مانام مام مام	48	_		
49				_			0.
50		ax. Add lines 47 and 48 (see instructions) et 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3					0.
		nts: A 2018 overpayment credited to 2019		30			
		stimated tax payments 51b		-			
				-			
				-			
		7		-			
		withholding (see instructions) 51e or small employer health insurance premiums (attach Form 8941) 51f		-			
		redits, adjustments, and payments: Form 2439		-			
y							
50				52	,		
	Fetimat	ayments. Add lines 51a through 51g		53	_		
53 54		a. If line 52 is less than the total of lines 40, 50, and 52, enter amount award		54			
55		yment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount ower		55			
56	-	ne amount of line 55 you want: <b>Credited to 2020 estimated tax</b> Refund	ded beh	56	_		
		Statements Regarding Certain Activities and Other Information (see instruction		1 30			
57		time during the 2019 calendar year, did the organization have an interest in or a signature or other authority	-110)			Yes	No
0,		inancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file				100	"
		Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country					
	here	► RUSSIA				Х	
58		the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign t	ruet?			-	X
00	_	see instructions for other forms the organization may have to file.					
59		ne amount of tax-exempt interest received or accrued during the tax year \(\bigs\) \\$					
		nder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the burrect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	pest of my kn	owledge	e and belief,	it is true,	
Sign	co	prect, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	_				
Here		Melonah G (ONTEN   8/12/21 LEFO AND TREASURE	- T	•	IRS discuss arer shown I		with
		Signature of officer Date Title		nstruction		Yes	No
		Print/Type preparer's name Preparer's signature Date Che			TIN	· · <u></u>	
ъ.			f- employed				
Paid		ELIZABETH W. HELLER   W. SCHULLY   8/12/2021   SETTING   8/12/2021   8/12/2021   SETTING   8/12/2021   SETTING   8/12/2021   SETTING	opioyou		P0039	97829	)
_	oarer		rm's EIN 🕨		$\frac{10032}{42-07}$		
Use	Only	2021 L STREET, NW	III O LIIN				
			none no.	202	-293-	-2200	)
923711	01-27-20					990-T	

65

Form 990-T (2019) NATIONAL PUBLIC RADIO, INC.

Schedule A - Cost of Goods	Sold. Enter	method of inven	tory v	aluation ► N/A					
1 Inventory at beginning of year				Inventory at end of yea			6		
2 Purchases			_	Cost of goods sold. Su					
3 Cost of labor			1	from line 5. Enter here					
4 a Additional section 263A costs			1				7		
(attach schedule)	4a		8	Do the rules of section				Yes	No
<b>b</b> Other costs (attach schedule)			1 -	property produced or a	,				
5 Total. Add lines 1 through 4b			1						
Schedule C - Rent Income ( (see instructions)		Property and	Pe	rsonal Property	Leas	ed With Real Prop	perty)		
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 of rent for personal property is more than				conal property (if the percental property exceeds 50% or if ed on profit or income)	ige	<b>3(a)</b> Deductions directly of columns 2(a) and	connected with th d 2(b) (attach sche	e income i dule)	n
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.				
(c) Total income. Add totals of columns 2 here and on page 1, Part I, line 6, column	2(a) and 2(b). En (A)	ter			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	•		0.
Schedule E - Unrelated Deb	t-Financed	I Income (see	instru	ctions)		•			
			2	Gross income from		Deductions directly conn- to debt-finance		cable	
1. Description of debt-fin	anced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	<b>(b)</b> Other (attach	deduction schedule)	ıs
(1)									
(2)									
(3)									
(4)									
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis illocable to nced property n schedule)	€	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8. Allocate (column 6 x 3(a)		
(1)				%					
(2)				%					
(3)				%					
(4)				%					
			•			nter here and on page 1, Part I, line 7, column (A).	Enter here a		
Totals				•		0.			0.
Total dividends-received deductions inc						<b>&gt;</b>			0.

Page 4

Schedule F - Interest,	a	, ui		Controlled O				(300 1118	, ii a o ti Of I	<u>.</u>
1. Name of controlled organizar	identi	nployer fication mber	3. Net unr	related income e instructions)	<b>4.</b> Tota	al of specified nents made	includ	t of column 4 ded in the contraction's gross is	rolling	6. Deductions directly connected with income in column 5
(1)										
(2)										
(3)										
(4)										
Nonexempt Controlled Organi	zations									
7. Taxable Income	8. Net unrelated inco (see instruction		9. Total	of specified payr made	nents	10. Part of column in the controllingross	mn 9 tha ing orgar s income	nization's		ductions directly connected income in column 10
(1)										
(2)										
(3)										
(4)										
						Add colun Enter here and line 8, o		e 1, Part I, A).	Enter h	d columns 6 and 11. ere and on page 1, Part I, line 8, column (B).
Totals					<b></b>			0.		0
Schedule G - Investme		Section	1 501(c)(	7), (9), or	(17) Or	ganization	1			
	ription of income			2. Amount of	income	3. Deductio directly conne (attach scheo	ected	<b>4.</b> Set-		5. Total deductions and set-asides
(1)						lattach Sched	.uicj	<u> </u>		(col. 3 plus col. 4)
(2)										
(3)										
(4)										
(7)				Enter here and Part I, line 9, co	on page 1, lumn (A).					Enter here and on page 1 Part I, line 9, column (B).
Totals					0.					0.
Schedule I - Exploited (see instru	<b>Exempt Activit</b>			r Than Ad	lvertisi	ng Income	9			
1. Description of exploited activity	2. Gross unrelated business income from trade or business	directly of with pro-	penses connected oduction related s income	4. Net incom from unrelated business (co minus colum gain, compute through	trade or lumn 2 n 3). If a e cols. 5	5. Gross inco from activity to is not unrelate business inco	that ted	6. Exp attributr colur STMT	able to nn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)										
(2)										
(1) (2) (3)										
(4) STATEMENT 3										
	Enter here and on page 1, Part I, line 10, col. (A).	page 1 line 10,	re and on 1, Part I, , col. (B).							Enter here and on page 1, Part II, line 25.
Totals ••••••••••••••••••••••••••••••••••••	61,186,146.									56,883,167
Schedule J - Advertisi					D					
Part I Income From	Periodicals Rep	oorted o	n a Con	solidated	Basis					
1. Name of periodical	2. Gross advertising income		3. Direct ertising costs	or (loss) (co	ising gain bl. 2 minus ain, comput irough 7.	5. Circulat income		6. Reade cost		7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)										
(2)										
(2)										
(4)										
Totals (carry to Part II, line (5))	▶	0.	0	•						0
										Form <b>990-T</b> (2019

923731 01-27-20

Form 990-T (2019) NATIONAL PUBLIC RADIO, INC.

# 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 26.
Totals, Part II (lines 1-5)	0.	0.				0.

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

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

FORM 990-T	OTHER INCOME	STATEMENT 1				
DESCRIPTION		AMOUNT				
DISTRIBUTION OF EXCESS STUDIO RENTAL	S SATELLITE CAPACITY	1,037,890				
TOTAL TO FORM 990-T, 1	PAGE 1, LINE 12	1,061,890.				
FORM 990-T	OTHER DEDUCTIONS	STATEMENT 2				
DESCRIPTION		AMOUNT				
PROFESSIONAL SERVICES CONNECTIVITY COMMUNICATIONS TRAVEL DEDUCTIBLE MEALS LEASE OCCUPANCY PRINTING SUPPLIES PROMOTIONS POSTAGE AND FREIGHT EMPLOYEE DEVELOPMENT EQUIPMENT TAX PREPARATION FEE MISCELLANEOUS LEGAL		782. 164,846. 4,671. 32,759. 242. 9,436. 154,354. 304. 979. 2,361. 2,876. 2,409. 189. 4,284. 223,329. 711.				
PAID BENEFITS LEASE SATELLITE SPACE		1,532 196,770				

802,834.

TOTAL TO FORM 990-T, PAGE 1, LINE 27

FORM 990-T	SCHEDULE	I - EXPLOIT	ED EXEMPT	ACTIVITY	INCOME	STATEMENT	3
(1) DESCRIPTION OF ACTIVITY	(2) GROSS UBI	(3) UBI EXPENSES	(4) NET INCOME	(5) GROSS INCOME	(6) COL 5 EXPENSE	(7) EXCESS ES EXEMPT I	
UNQUALIFIED SPO	ONSORSHIP ON 61,186,146.	ORGANIZATI 4,302,979.	ON'S WEBS	ITE	56,907,1	167. 56,883,	167.
COLUMN TOTALS	61,186,146.	4,302,979.	56,883,167.		56,907,1	167. 56,883,	167.
FORM 990-T		- EXPENSES ON OF UNREL				STATEMENT	4
DESCRIPTION			ACTIVI NUMBI		MOUNT	TOTAL	
MISCELLANEOUS		- SUBTOTA	 L - 1		,302,979.	4,302,97	79.
TOTAL OF FORM 9	990-т, ѕснег	OULE I, COLU	MN 3			4,302,97	79.
FORM 990-T		- EXPENSES TION OF UNR				STATEMENT	5
DESCRIPTION			ACTIVI NUMBI		MOUNT	TOTAL	
MISCELLANEOUS		- SUBTOTA	L - 1	 56 1	,907,167.	56,907,16	57.
TOTAL OF FORM S	990-T, SCHED	OULE I, COLU	MIN 6			56,907,16	57.

Employer identification number

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

## **Unrelated Business Taxable Income from an Unrelated Trade or Business**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

For calendar year 2019 or other tax year beginning OCT~1 , ~2019 , and ending SEP~30 , ~2020► 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) Organizations Only

	NATIONAL PUBLIC RADIO, INC. 52-0907625										
Unrelated Business	Activity Code (see instructions	$\rightarrow$ 454110									
	ed trade or business	ONLINE AND	) D]	STRIBUTION S	ALES						
Part I Unrelated	Trade or Business Inc	ome		(A) Income	(B) Expenses	(C) Net					
1a Gross receipts or s	sales 240,461	•									
<b>b</b> Less returns and allo	wances	c Balance ►	1c	240,461.							
2 Cost of goods sold	d (Schedule A, line 7)	_	2	209,973.							
	ract line 2 from line 1c		3	30,488.		30,488.					
	come (attach Schedule D)		4a								
<b>b</b> Net gain (loss) (For	rm 4797, Part II, line 17) (attac	h Form 4797)	4b								
c Capital loss deduc	tion for trusts		4c								
	a partnership or an S corpora										
statement)			5								
	edule C)		6								
	anced income (Schedule E)		7								
8 Interest, annuities,	royalties, and rents from a co	ontrolled									
organization (Sche	edule F)		8								
	e of a section 501(c)(7), (9), or										
organization (Sche	edule G)		9								
	activity income (Schedule I)		10								
11 Advertising income	e (Schedule J)		11								
	instructions; attach schedule		12								
13 Total. Combine lin	es 3 through 12		13	30,488.		30,488.					
directly co	s Not Taken Elsewher nnected with the unrelat	ted business inc									
44 Componentian of	officers directors and tructor	a (Cabadula I/)			1 4/	79 796					

14	Compensation of officers, directors, and trustees (Schedule K)	14	79,796.
15	Salaries and wages		
16	Repairs and maintenance		17,381.
17	Bad debts		
18	Interest (attach schedule) (see instructions)		
19	Taxes and licenses		
20	Depreciation (attach Form 4562)		
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	
22	Depletion	22	
23	Contributions to deferred compensation plans		
24	Employee benefit programs		68,739.
25	Excess exempt expenses (Schedule I)		
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule) SEE STATEMENT	6 27	133,546.
28	Total deductions. Add lines 14 through 27	28	1,510,458.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-1,479,970.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions) STMT	7 30	0.
31	Unrelated business taxable income. Subtract line 30 from line 29	31	-1,479,970.
	·	•	

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

FORM 990-T	(M)	OTHER DEDUC	TIONS	STATEMENT		
DESCRIPTION	1			AMOUNT		
ONLINE SHOP	133,546.					
TOTAL TO SO	133,546.					
					_	
SCHEDULE M	NET	OPERATING LOSS	DEDUCTION	STATEMENT		
SCHEDULE M TAX YEAR	NET	OPERATING LOSS  LOSS PREVIOUSLY APPLIED	DEDUCTION  LOSS REMAINING	STATEMENT  AVAILABLE THIS YEAR	7	
	· · · · · · · · · · · · · · · · · · ·	LOSS PREVIOUSLY	LOSS	AVAILABLE		

Page 3

Form 990-T (2019)	D				F0 000F	Page :
NATIONAL School of Cook	PORTIC 1	RADIO, II	NC.		52-0907	625
Schedule A - Cost of Good		method of inver				
1 Inventory at beginning of year		200 072	6 Inventory at end of year			6
2 Purchases		209,973				
3 Cost of labor	3		from line 5. Enter here			222 272
4a Additional section 263A costs			line 2			7 209,973.
(attach schedule)	4a		8 Do the rules of section	1 263A (	with respect to	Yes No
<b>b</b> Other costs (attach schedule)			property produced or	acquired	d for resale) apply to	
5 Total. Add lines 1 through 4b		209,973	ŭ			
Schedule C - Rent Income (see instructions)	(From Real	Property an	d Personal Property	Leas	ed With Real Prop	erty)
Description of property						
(1)						
(2)						
(3)						
(4)						
	2. Rent receiv	ed or accrued			24.)	
(a) From personal property (if the per rent for personal property is mor 10% but not more than 50%	e than -	tage f	<b>3(a)</b> Deductions directly c columns 2(a) and	onnected with the income in 2(b) (attach schedule)		
(1)						
(2)						
(3)						
(4)						
Total	0.	Total		0.		
(c) Total income. Add totals of columns	2(a) and 2(b). En	ter			(b) Total deductions.	
here and on page 1, Part I, line 6, column	n (A)			0.	Enter here and on page 1, Part I, line 6, column (B)	0.
Schedule E - Unrelated Del	bt-Financed	I Income (see	instructions)		•	
					3. Deductions directly conne	
_			<ol><li>Gross income from or allocable to debt-</li></ol>	(2)	to debt-financed	(b) Other deductions
1. Description of debt-fi	inanced property		financed property	(a)	Straight line depreciation (attach schedule)	(attach schedule)
(1)						
(2)						
(3)						
(4)						
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	4. Amount of average acquisition debt on or allocable to debt-financed     5. Average adjusted basis of or allocable to				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)			%			
			%	+		
	<u> </u>		70	+ -	'ntor hore and ar 4	Fator have or description
					inter 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 in		. 0				0.

\*\* PUBLIC INSPECTION COPY \*\*

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

### Unrelated Business Taxable Income from an **Unrelated Trade or Business**

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

For calendar year 2019 or other tax year beginning OCT 1, 2019, and ending SEP 30, 2020► Go to www.irs.gov/Form990T for instructions and the latest information.

501(c)(3) Organizations Only

NATIONAL PUBLIC RADIO, INC. Unrelated Business Activity Code (see instructions) 523000

**Employer identification number** 52-0907625

► INVESTMENTS Describe the unrelated trade or business **Unrelated Trade or Business Income** (A) Income (B) Expenses (C) Net 1a Gross receipts or sales **b** Less returns and allowances **c** Balance ▶ 1c Cost of goods sold (Schedule A, line 7) 2 2 Gross profit. Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D) 4a 4b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) ... c Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach 421 421. statement) 5 6 Rent income (Schedule C) 6 Unrelated debt-financed income (Schedule E) 7 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 10 Exploited exempt activity income (Schedule I) 10 Advertising income (Schedule J) 11 11 Other income (See instructions; attach schedule) 12 12 421. 421. 13 Total. Combine lines 3 through 12

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (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	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	
20	Depreciation (attach Form 4562)  Less depreciation claimed on Schedule A and elsewhere on return  20  21a		
21	Less depreciation claimed on Schedule A and elsewhere on return 21a	21b	
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule) SEE STATEMENT 8	27	12,500.
28	Total deductions. Add lines 14 through 27	28	12,500.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-12,079.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions) STMT 9	30	0.
31	Unrelated business taxable income. Subtract line 30 from line 29	31	-12,079.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

FORM 990-T	(M)	OTHER DEDUCT:	IONS	STATEMENT	8
DESCRIPTION	ı			AMOUNT	
INVESTMENT	12,500.				
TOTAL TO SO	12,500.				
SCHEDULE M	NET	OPERATING LOSS I	DEDUCTION	STATEMENT	9
SCHEDULE M	NET	OPERATING LOSS I  LOSS PREVIOUSLY APPLIED	DEDUCTION  LOSS REMAINING	STATEMENT  AVAILABLE THIS YEAR	9
		LOSS PREVIOUSLY	LOSS	AVAILABLE	