Caution: DRAFT—NOT FOR FILING

This is an early release draft of an IRS tax form, instructions, or publication, which the IRS is providing for your information as a courtesy. **Do not file draft forms.** Also, do not rely on draft instructions and publications for filing. We generally do not release drafts of forms until we believe we have incorporated all changes. However, unexpected issues sometimes arise, or legislation is passed, necessitating a change to a draft form. In addition, forms generally are subject to OMB approval before they can be officially released. Drafts of instructions and publications usually have at least some changes before being officially released.

Early releases of draft forms and instructions are at <u>IRS.gov/draftforms</u>. Please note that drafts may remain on IRS.gov even after the final release is posted at <u>IRS.gov/downloadforms</u>, and thus may not be removed until there is a new draft for the subsequent revision. All information about all revisions of all forms, instructions, and publications is at <u>IRS.gov/formspubs</u>.

Almost every form and publication also has its own easily accessible information page on IRS.gov. For example, the Form 1040 page is at IRS.gov/form1040; the Form W-2 page is at IRS.gov/w2; the Publication 17 page is at IRS.gov/pub17; the Form W-4 page is at IRS.gov/w4; the Form 8863 page is at IRS.gov/form8863; and the Schedule A (Form 1040) page is at IRS.gov/schedulea. If typing in the links above instead of clicking on them: type the link into the address bar of your browser, not in a Search box; the text after the slash must be lowercase; and your browser may require the link to begin with "www.". Note that these are shortcut links that will automatically go to the actual link for the page.

If you wish, you can submit comments about draft or final forms, instructions, or publications on the <u>Comment on Tax Forms and Publications</u> page on IRS.gov. We cannot respond to all comments due to the high volume we receive, but we will carefully consider each one. Please note that we may not be able to consider many suggestions until the subsequent revision of the product.

| | 990-T | Exempt Organization Business Income Tax Return | c | MB No. 1545-0687 | | |
|------------|--|--|-----------|---|--|--|
| Form | | (and proxy tax under section 6033(e)) | | 20 4 | | |
| | | For calendar year 2014 or other tax year beginning, 2014, and ending , 20 | | | | |
| | ent of the Treasury Revenue Service | ▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t. | Open | to Public Inspection for c)(3) Organizations Only | | |
| | Check box if | ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Name of organization (Check box if name changed and see instructions.) D Fr | | | | |
| A 🗆 a | ddress changed | | | identification number <u>'</u> trust, see instructions.) | | |
| | pt under section | | | | | |
| |)1())()))8(e) 220(e) | or Number, street, and room or suite no. If a P.O. box, see instructions. | related b | ousiness activity codes | | |
| | 08A 530(a) | | ee instru | | | |
| | | | | | | |
| C Book | value of all assets | F Group exemption number (See instructions.) ► | | | | |
| at en | d of year | | (a) trus | t 🔄 Other trust | | |
| H De | scribe the orga | anization's primary unrelated business activity. | | | | |
| | | r, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? | | ► 🗌 Yes 🗌 No | | |
| | | name and identifying number of the parent corporation. | | | | |
| _ | e books are in o | | | | | |
| Part | | d Trade or Business Income (A) Income (B) Expense | s | (C) Net | | |
| 1a 5 | Gross receipts | | | | | |
| b 2 | Less returns and | allowances c Balance 1c sold (Schedule A, line 7) 2 | | | | |
| 2 | | Subtract line 2 from line 1c | | | | |
| 4a | • | et income (attach Schedule D) | | | | |
| b | 1 0 |) (Form 4797, Part II, line 17) (attach Form 4797) 4b | | | | |
| c | | eduction for trusts | | | | |
| 5 | • | om partnerships and S corporations (attach statement) 5 | | | | |
| 6 | Rent income (| | | | | |
| 7 | Unrelated deb | ot-financed income (Schedule E) 7 | | | | |
| 8 | Interest, annuities, | , royalties, and rents from controlled organizations (Schedule F) 8 | | | | |
| 9 | Investment incom | ne of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 | | | | |
| 10 | | mpt activity income (Schedule I) 10 | | | | |
| 11 | - | come (Schedule J) | | | | |
| 12 | | (See instructions; attach schedule) 12 | | | | |
| 13 Part | | ne lines 3 through 12 | | | | |
| Fari | | is must be directly connected with the unrelated business income.) | or com | ributions, | | |
| 14 | | n of officers, directors, and trustees (Schedule K) | 14 | | | |
| 15 | Salaries and w | | 15 | | | |
| 16 | | | 16 | | | |
| 17 | | | 17 | | | |
| 18 | | h schedule) | 18 | | | |
| 19 | | enses | 19 | | | |
| 20 | | ntributions (See instructions for limitation rules) | 20 | | | |
| 21 | | (attach Form 4562) | | | | |
| 22 | | ation claimed on Schedule A and elsewhere on return 22a | 22b | | | |
| 23 | | | 23 | | | |
| 24 25 | | to deferred compensation plans | 24 25 | | | |
| 25 26 | | pt expenses (Schedule I) | 25 | | | |
| 20 27 | | rship costs (Schedule J) | 20 | | | |
| 28 | | ons (attach schedule) | 28 | | | |
| 29 | | ions. Add lines 14 through 28 | 29 | | | |
| 30 | | iness taxable income before net operating loss deduction. Subtract line 29 from line 13 | 30 | | | |
| 31 | | loss deduction (limited to the amount on line 30) | 31 | | | |
| 32 | | siness taxable income before specific deduction. Subtract line 31 from line 30 | 32 | | | |
| 33 | | ction (Generally \$1,000, but see line 33 instructions for exceptions) | 33 | | | |
| 34 | | siness taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, | | | | |
| | enter the sma | Iler of zero or line 32 | 34 | | | |

| Form 99 | 0-T (2014) | | | | | | | | | | Page 2 |
|------------|------------------|---|-------------|---------------|------------|-----------------------|-------------------------|----------|----------------------------------|-------------|------------|
| Part | II Ta | ax Computation | | | | | | | | | |
| | | zations Taxable as Corp | | | | | n. Controlled grou | l dr | | | |
| | | rs (sections 1561 and 1563 | | | | | | | | | |
| а | | our share of the \$50,000, \$ | | nd \$9,925, | | | ets (in that order): | | | | |
| | (1) \$ | (2) | | | | \$ | | | | | |
| b | | rganization's share of: (1) A | | - | | | | | | | |
| | | itional 3% tax (not more th | | | | · · · · . | | | | | |
| | | tax on the amount on line | | | | | | ▶ | 35c | | |
| | | Taxable at Trust Rat | | | | | | on | | | |
| | the amo | ount on line 34 from: 🔲 Ta | x rate sch | nedule or [| Sched | ule D (Form 1041) |) | • | 36 | | |
| 37 | - | ax. See instructions | | | | | | ▶ | 37 | | |
| 38 | Alterna | tive minimum tax | | | | | | | 38 | _ | _ |
| | | Add lines 37 and 38 to line | 35c or 36 | , whicheve | r applies | · • • • • • • | | | 39 | | |
| Part I | | ax and Payments | | | | | | <u> </u> | | | |
| 40a | | tax credit (corporations attac | | | | | l0a | _ | | | Т. |
| b | | redits (see instructions) . | | | | | i0b | _ | | | |
| С | | I business credit. Attach Fo | | • | , | | 10c | | | | |
| d | | or prior year minimum tax | | | | | l0d | | | | |
| | | redits. Add lines 40a throu | • | | | | | | 40e | | - |
| 41 | | t line 40e from line 39 . | | | | | | | 41 | | |
| 42 | | kes. Check if from: Form 4 | | | | | ner (attach schedule) . | | 42 | | |
| | | ax. Add lines 41 and 42. | | | | 1 | | | 43 | | |
| | - | nts: A 2013 overpayment c | | | | | 14a | | | | |
| | | stimated tax payments . | | | | | 14b | | | | |
| C d | | oosited with Form 8868 . | | | | | | | | | |
| | - | organizations: Tax paid or | | | - | | 14d | | | | |
| _ | - | withholding (see instruction | | | | | 14e 14f | | | | |
| f | | or small employer health ir redits and payments: | Form | - | Allach Fo | m 6941). | +41 | | | | |
| g | | | | | | Total ► 4 | l4g | | | | |
| 45 | | ayments. Add lines 44a th | | | | | Ŭ | - | 45 | | |
| | - | ed tax penalty (see instruct | | - | | | | | 46 | | |
| | | e. If line 45 is less than the | | | | | | | 47 | | |
| 48 | | yment. If line 45 is larger t | | | | | | | 48 | | |
| | - | amount of line 48 you want: | | | | | Refunded | | 49 | | |
| Part | | atements Regarding C | | | | | | | | | |
| | | time during the 2014 calen | | | | | | r ot | her author | ity Yes | No |
| • | | financial account (bank, se | | | | | | | | | |
| | | Form 114, Report of Fore | | | | | | | | | |
| | here > | | • | | | | | | • | | |
| 2 | During t | he tax year, did the organizati | on receive | a distributio | n from, or | was it the grantor of | of, or transferor to, a | fore | ign trust? | | |
| | - | see instructions for other for | | | | - | | | • | | |
| 3 | Enter th | ne amount of tax-exempt ir | iterest rec | eived or ad | crued du | iring the tax year | ▶ \$ | | | | |
| Scheo | dule A- | -Cost of Goods Sold. | Enter me | thod of in | ventory | aluation 🕨 | | | | | |
| 1 | Invento | ry at beginning of year | 1 | | 6 | Inventory at er | nd of year | | 6 | | |
| 2 | Purcha | ses | 2 | | 7 | Cost of goo | ds sold. Subtra | ct | | | |
| 3 | Cost of | labor | 3 | | | | e 5. Enter here ar | ıd | | | |
| 4a | Additio | nal section 263A costs | | | | in Part I, line 2 | | | 7 | | |
| | (attach | schedule) | 4a | | 8 | | of section 263A (| • | • | | No |
| b | Other c | osts (attach schedule) | 4b | | | | uced or acquired | | | - | |
| 5 | | Add lines 1 through 4b | 5 | | | • | ation? | | | | |
| C : | | enalties of perjury, I declare that I hav and complete. Declaration of prepare | | | | | | st of | my knowledge | and belief, | it is true |
| Sign | | and complete. Declaration of prepare | | i Dat | | in a which prepa | nuo any knowieuge. | | May the IRS | | |
| Here | | | | | | / | | | with the pre (see instruction | | |
| | Signatu | ire of officer | | Date | | Title | | | | - | |
| Paid | | Print/Type preparer's name | | Preparer's | signature | | Date | | eck 🗆 if | PTIN | |
| Prepa | arer | | | | | | | self | -employed | L | |
| Use (| | Firm's name | | | | | | Firm | n's EIN ► | | |
| | | Firm's address ► | | | | | | Pho | one no. | | |

Schedule C-Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

| A Description of successful | | | | | | | | |
|---|---|---------------------------------|-------------------------------------|---|--|---|--|--|
| 1. Description of property | | | | | | | | |
| (1) | | | | | | | | |
| (2) | | | | | | | | |
| (3) | | | | | | | | |
| (4) | | | | | | | | |
| <u></u> | 2. Rent received or acc | crued | | | | | | |
| (a) From personal property (if the perc for personal property is more than more than 50%) | centage of rent (b 10% but not perce |) From real ar ntage of rent | for personal | property (if the property exceeds profit or income) | 3(a) Deductions directly in columns 2(a) and | connected with the income 2(b) (attach schedule) | | |
| (1) | | | | , | | | | |
| (2) | | | | | | | | |
| (3) | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Total | Total | | | | (b) Total deductions. | | | |
| (c) Total income. Add totals of conhere and on page 1, Part I, line 6, of | | Enter | | _ | Enter here and on page 1, Part I, line 6, column (B) ► | | | |
| Schedule E-Unrelated De | | ome (see | instructio | ne) | | | | |
| | | | | 115) | 3. Deductions directly con | nected with or allocable to | | |
| 1. Description of del | ot-financed property | | allocable | income from or to debt-financed property | debt-financ (a) Straight line depreciation | | | |
| | | | | | (attach schedule) | (attach schedule) | | |
| (1) | | | | | | | | |
| (2) | | | | | | | | |
| (3) | | | | | | | | |
| (4) | | | | | | | | |
| 4. Amount of average acquisition debt on or allocable to debt-financed | 5. Average adjuste of or allocable debt-financed pr | e to 4 divided | | divided | 7. Gross income reportable (column 2 × column 6) | 8. Allocable deductions (column 6 × total of columns 3(a) and 3(b)) | | |
| property (attach schedule) | (attach sched | ule) | ., | | | | | |
| (1) | | | | % | | | | |
| (2) | | | | % | | | | |
| (3) | | | | % | | | | |
| (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 | · · · · · · · · | | • • • | · · · · • | | | | |
| Total dividends-received deduct | | | | | | | | |
| Schedule F-Interest, Ann | uities, Royalties, | | | | rganizations (see instru | ctions) | | |
| | | Exempt C | Controlled | Organizations | | | | |
| 1. Name of controlled organization | 2. Employer identification number | 3. Net unrela (loss) (see ir | | 4. Total of specifi payments made | | 6. Deductions directly connected with income in column 5 | | |
| (1) | | | | | | | | |
| (2) | | | | | | | | |
| (3) | | | | | | | | |
| | | | | | | | | |
| (4) Nonexempt Controlled Organiz | ationa | | | | | | | |
| 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 incom | connected with income in | | |
| (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 | <u> </u> | | | <u> </u> | | | | |
| | | | | | | - 000 T | | |

(3)

(4)

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

| Schedule G-Investment Inc | ome of a Section | 501(c)(7), (9), | or (17) Organi | zation (see instr | uctions) | Fage - | |
|--------------------------------------|---|--|---|---|--------------------------------------|---|--|
| 1. Description of income | 2. Amount of inco | ome dire | Deductions ctly connected ach schedule) | 4. Set-asides (attach schedul | and | otal deductions et-asides (col. 3 plus col. 4) | |
| (1) | | | | | | | |
| (2) | | | | | | | |
| (3) | | | | | | | |
| (4) | | | | | | | |
| Totals | Enter here and on Part I, line 9, colur | | | | | ere and on page 1, line 9, column (B). | |
| Schedule I-Exploited Exem | P Activity Incom | o Othor Than | Advortising In | come (see instr | uctions) | | |
| Schedule I - Exploited Exem | | | | | uctions | | |
| 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) | | | | | | | |
| (2) (3) (4) | | | ΤF | | F | | |
| | 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. | |
| Totals | | | | | | | |
| Schedule J—Advertising Inc | ome (see instruction | ns) | | | | | |
| Part I Income From Peri | iodicals Reported | l on a Consoli | dated 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 (carry to Part II, line (5)) | | on a Senarat | te Basis (For ea | ach periodical li | sted in Part I | | |
| 2 through 7 on a lir | • | | | | | | |
| 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 | | | | | | | |
| | 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) | | | | | | | |
| Schedule K—Compensation | of Officers, Direc | tors, and Tru | stees (see instru | , , | 1 | | |
| 1. Name | | | 2. Title | 3. Percent of time devoted to business | | tion attributable to ed business | |
| (1) | | | | % | | | |
| (2) | | | | % | | | |

.

. . .

%

%

►

.

.

.