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Almost every form and publication has a page on IRS.gov with a friendly shortcut. For example, the Form 1040 page is at IRS.gov/Form1040; the Pub. 501 page is at IRS.gov/Pub501; the Form W-4 page is at IRS.gov/W4; and the Schedule A (Form 1040/SR) page is at IRS.gov/ScheduleA. If typing in a link above instead of clicking on it, be sure to type the link into the address bar of your browser, not a Search box.

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Form **990-T**

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

OIVID	NO.	1545-	004

Department of the Treasury
nternal Revenue Service

For calendar year 2021 or other tax year beginning _____, 2021, and ending _____ ► Go to www.irs.gov/Form990T for instructions and the latest information.

Form **990-T** (2021)

Inte	Do not enter SSN numbers on this form as it may be made public if your organization is a 501(content of the following publi		(c)(3).	for 501(c)(3) Organizations Only				
A [Check box if address changed.	Name of organization (Check box if name changed and see instructions.)	D Emp	oloyer identification number				
B Exempt under section 501()() 408(e) 220(e) Print or Type Number, street, and room or suite no. If a P.O. box, see instructions. City or town, state or province, country, and ZIP or foreign postal code			E Group exemption number (see instructions)					
Ī	408A 530(a)		F \square	Check box if				
	529(a) 529A	C Book value of all assets at end of year	- Ш	an amended return.				
G	Check organizatio	n type ► ☐ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust						
Н	Check if filing only	to Claim credit from Form 8941 Claim a refund shown on Form 2	2439					
I	Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation							
J	Enter the number	of attached Schedules A (Form 990-T)						
K	During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ► ☐ Yes ☐ No							
	If "Yes," enter the	name and identifying number of the parent corporation ▶						
	The books are in c		<u> </u>					
P		nrelated Business Taxable Income		-				
		ated business taxable income computed from all unrelated trades or businesses (s	see					
	,		.	1				
				2				
3 Add lines 1 and 2				3				
4 Charitable contributions (see instructions for limitation rules)				4				
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3				5				
 6 Deduction for net operating loss. See instructions				6				
	7 Total of unrela Subtract line 6	on.	_					
			.	7				
8 Specific deduction (generally \$1,000, but see instructions for exceptions)				8				
		n 199A deduction. See instructions		9				
 Total deductions. Add lines 8 and 9				10				
١				11				
Ð		nputation		11				
		s taxable as corporations. Multiply Part I, line 11 by 21% (0.21)		1				
	~	e at trust rates. See instructions for tax computation. Income tax on the amount	on	•				
•		rom: Tax rate schedule or Schedule D (Form 1041)		2				
3 Proxy tax. See instructions			3					
	•	·	4					
	 4 Other tax amounts. See instructions			5				
		mpliant facility income. See instructions	.	6				
		es 3 through 6 to line 1 or 2, whichever applies	.	7				

Form 990-T (2021) Part III **Tax and Payments** 1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 1a 1b General business credit. Attach Form 3800 (see instructions). 1c С Credit for prior year minimum tax (attach Form 8801 or 8827) . . . 1d Ы Total credits. Add lines 1a through 1d 1e 2 Subtract line 1e from Part II, line 7 3 Other amounts due. Check if from: Form 4255 Form 8611 Form 8697 Other (attach statement) 3 Total tax. Add lines 2 and 3 (see instructions).

Check if includes tax previously deferred under 4 5 Current net 965 tax liability paid from Form 965-A, Part II, column (k) 6a Payments: A 2020 overpayment credited to 2021 6a 2021 estimated tax payments. Check if section 643(g) election applies ▶ □ 6b Tax deposited with Form 8868 6c С Foreign organizations: Tax paid or withheld at source (see instructions) 6d Backup withholding (see instructions) 6e Credit for small employer health insurance premiums (attach Form 8941) . Other credits, adjustments, and payments: Form 2439 Form 4136 Other Total payments. Add lines 6a through 6g . 7 8 Estimated tax penalty (see instructions). Check if Form 2220 is attached . 9 **Tax due.** If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed . . . 9 10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid 10 Enter the amount of line 10 you want: Credited to 2022 estimated tax ▶ 11 Refunded ▶ Statements Regarding Certain Activities and Other Information (see instructions) Part IV At any time during the 2021 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 2 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. Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$. Do not include any post-2017 NOL carryover Enter available pre-2018 NOL carryovers here ▶ \$ shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 4. Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce 5 the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions. **Business Activity Code** Available post-2017 NOL carryover Did the organization change its method of accounting? (see instructions) . . . If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," **Supplemental Information** Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions. 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 May the IRS discuss this return Here with the preparer shown below (see instructions)? ☐Yes ☐No Signature of officer Title Date Print/Type preparer's name Preparer's signature Check if **Paid** self-employed

Preparer

Use Only

Firm's name

Firm's address ▶

Firm's EIN ▶

Phone no.