

Name of organization _____

Address (number and street) _____

City or town, State, and ZIP code _____

A Employer identification number (employees' trust see instruction for Block A) _____

B Enter unrelated business activity codes from page 10 of instructions _____

C Check box if address changed **D** Exempt under section 501 () ()

E Check applicable box Corporation Trust Section 401(a) trust

F Group exemption number (see instructions for Block F)

If the unrelated trade or business gross income is \$10,000 or less, complete only page 1, Part III on page 2, and sign the return. Complete all applicable parts of the form (except lines 1 through 4) if unrelated trade or business gross income is over \$10,000.

Taxable Income	1 Unrelated trade or business gross income (state sources <input type="checkbox"/>)	1		
	2 Deductions (complete Parts I and II instead of lines 1, 2, 3 and 4 if you have gross income over \$10,000)	2		
	3 Unrelated business taxable income before specific deduction (subtract line 2 from line 1)	3		
	4 Specific deduction (see instructions)	4		
	5 Unrelated business taxable income (subtract line 4 from line 3 or enter amount from line 33, page 2)	5		
Tax Computation	Organizations Taxable as Corporations (See Instructions for Tax Computation)			
	6 (a) Check if you are a member of a controlled group (see sections 1561 and 1563) <input type="checkbox"/> (b) If checked, see instructions and enter your share of the \$25,000 in each taxable income bracket: (i) \$ _____ (ii) \$ _____ (iii) \$ _____ (iv) \$ _____			
	7 Income tax on amount on line 5, above. Check here <input type="checkbox"/> if alternative tax from Schedule D (Form 1120) is used.	7		
Total Income Tax	Trusts Taxable at Trust Rates (See Instructions for Tax Computation)			
	8 Enter the tax from the tax rate schedule in the instructions on the amount on line 5	8		
	9 (a) Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	9(a)		
	(b) Other credits (see instructions)	9(b)		
	(c) General business credit.— Check if from <input type="checkbox"/> Form 3800 <input type="checkbox"/> Form 3468 <input type="checkbox"/> Form 5884 <input type="checkbox"/> Form 6478	9(c)		
	10 Total (add lines 9(a) through 9(c))	10		
	11 Subtract line 10 from line 7 or line 8	11		
	12 Tax from recomputing prior year investment credit (attach Form 4255)	12		
	13 Minimum tax on tax preference items (Corporations only— see instructions)	13		
	14 Alternative minimum tax (Trusts only—see instructions)	14		
15 Total tax (add lines 11 through 14)	15			
Total Income Tax	16 Credits and payments:			
	(a) Tax deposited with Form 7004 or Form 2758	16(a)		
	(b) Foreign corporations—Tax paid or withheld at the source (see instructions)	16(b)		
	(c) Credit from regulated investment companies (attach Form 2439)	16(c)		
	(d) Credit for Federal tax on gasoline and special fuels (attach Form 4136)	16(d)		
	(e) Other credits and payments (see instructions)	16(e)		
(f) Total credits and payments (add lines 16(a) through 16(e))	16(f)			
17 TAX DUE (subtract line 16(f) from line 15). See instructions for depository method of payment	17			
18 OVERPAYMENT (subtract line 15 from line 16(f))	18			

Please Sign Here

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.

Signature of officer _____ Date _____ Title _____

Paid Preparer's Use Only

Preparer's signature _____ Date _____ Check if self-employed Preparer's social security no. _____

Firm's name (or yours, if self-employed) and address _____ E.I. No. _____ ZIP code _____

Part I Unrelated Trade or Business Income

1 (a) Gross receipts or sales	(b) Less returns and allowances	Balance ▶	1(c)		
2 Cost of goods sold and/or operations (Schedule A)			2		
3 Gross profit (subtract line 2 from line 1(c))			3		
4 (a) Capital gain net income (attach separate Schedule D) (see instructions)			4(a)		
(b) Net gain or (loss) from Part II, Form 4797 (attached)			4(b)		
(c) Capital loss deduction for trusts			4(c)		
5 Income or (loss) from partnerships (attach statement)			5		
6 Rent income (Schedule C)			6		
7 Unrelated debt-financed income (Schedule E, line 2)			7		
8 Investment income of a section 501(c)(7) or (9) organization (Schedule F)			8		
9 Interest, annuities, royalties, and rents from controlled organizations (Schedule G)			9		
10 Exploited exempt activity income (Schedule H)			10		
11 Advertising income (Schedule I, Part III, Column A)			11		
12 Other income (see instructions for line 12—attach schedule)			12		
13 TOTAL—Unrelated trade or business income (add lines 3 through 12)			13		

Part II Deductions Not Taken Elsewhere

(Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule J)			14		
15 Salaries and wages			15		
16 Repairs (see instructions)			16		
17 Bad debts (see instructions)			17		
18 Interest (attach schedule)			18		
19 Taxes			19		
20 Contributions (see instructions)			20		
21 Depreciation (attach Form 4562)	21				
22 Less depreciation claimed in Schedule A and elsewhere on return	22(a)		22(b)		
23 Depletion			23		
24 (a) Contributions to deferred compensation plans (see instructions)			24(a)		
(b) Employee benefit programs (see instructions)			24(b)		
25 Other deductions (attach schedule)			25		
26 TOTAL DEDUCTIONS (add lines 14 through 25)			26		
27 Unrelated business taxable income before allowable advertising loss (subtract line 26 from line 13)			27		
28 Advertising loss (Schedule I, Part III, Column B)			28		
29 Unrelated business taxable income before net operating loss deduction (subtract line 28 from line 27)			29		
30 Net operating loss deduction (see instructions)			30		
31 Unrelated business taxable income before specific deduction (subtract line 30 from line 29)			31		
32 Specific deduction (see instructions for line 4 of page 1)			32		
33 Unrelated business taxable income (subtract line 32 from line 31). Enter here and on page 1, line 5			33		

SCHEDULE A—COST OF GOODS SOLD AND/OR OPERATIONS

(See Instructions for Part I, line 2)

Method of inventory valuation (specify) ▶					
1 Inventory at beginning of year				1	
2 Purchases				2	
3 Cost of labor				3	
4 Other costs (attach schedule)				4	
5 TOTAL—Add lines 1 through 4				5	
6 Inventory at end of year				6	
7 Cost of goods sold and/or operations. Subtract line 6 from line 5. (Enter here and on line 2, Part I.)				7	

Part III Statements Regarding Certain Activities and Other Information

1 At any time during the tax year, did you have an interest in or a signature or other authority over a bank account, securities account, or other financial account in a foreign country (see page 9 of the instructions for exceptions and filing requirements for TD F 90-22.1)? If "Yes," write in the name of the foreign country	Yes	No
2 Were you the grantor of, or transferor to, a foreign trust which existed during the current tax year, whether or not you had any beneficial interest in it? If "Yes," you may have to file Forms 3520, 3520-A, or 926.		

SCHEDULE C—RENT INCOME FROM REAL PROPERTY AND PERSONAL PROPERTY LEASED WITH REAL PROPERTY

(See Instructions for Part I, line 6)

1. Description of property		2. Rent received or accrued	3. Percentage of rent for personal property	
			%	
			%	
			%	
			%	
			%	
4. Complete for any item if the entry in column 3 is more than 50%, or if the rent is based on profit or income		5. Complete for any item if the entry in column 3 is more than 10% but not more than 50%		
(a) Deductions directly connected (Attach schedule)	(b) Income includible (Column 2 minus column 4(a))	(a) Gross income reportable (Column 2 x column 3)	(b) Deductions directly connected with personal property (Attach schedule)	(c) Income includible (Column 5(a) minus column 5(b))
Add columns 4(b) and 5(c) and enter total here and on line 6, Part I, page 2				

SCHEDULE E—UNRELATED DEBT-FINANCED INCOME (See Instructions for Part I, line 7)

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	
				(a) Straight-line depreciation (Attach schedule)	(b) Other deductions (Attach schedule)
1					
4. Amount of average acquisition indebtedness on or allocable to debt-financed property (Attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (Attach schedule)	6. Percentage which col. 4 is of col. 5	7. Gross income reportable (Column 2 x column 6)	8. Allocable deductions (Column 6 x total of columns 3(a) and 3(b))	9. Net income or (loss) includible (Column 7 minus column 8)
		%			
		%			
		%			
		%			
2 Total (enter here and on line 7, Part I, page 2)					
3 Total dividends-received deductions included in column 8					

SCHEDULE F—INVESTMENT INCOME OF A SECTION 501(c)(7) OR (9) ORGANIZATION

(See Instructions for Part I, line 8)

1. Description	2. Amount	3. Deductions directly connected (Attach schedule)	4. Net investment income (Column 2 minus column 3)	5. Set-asides (Attach schedule)	6. Balance of investment income (Column 4 minus column 5)
Total (enter here and on line 8, Part I, page 2)					

SCHEDULE G—INCOME (ANNUITIES, INTEREST, RENTS AND ROYALTIES) FROM CONTROLLED ORGANIZATIONS

(See Instructions for Part I, line 9)

1. Name and address of controlled organization(s)			2. Gross income from controlled organization(s)	3. Deductions of controlling organization directly connected with column 2 income (Attach schedule)	4. Exempt controlled organizations		
					(a) Unrelated business taxable income	(b) Taxable income computed as though not exempt under sec. 501(a), or the amount in col. (a), whichever is more	(c) Percentage which col. (a) is of col. (b)
							%
							%
							%
5. Nonexempt controlled organizations				6. Gross income reportable (Column 2 x column 4(c) or column 5(c))	7. Allowable deductions (Column 3 x column 4(c) or column 5(c))	8. Net income includible (Column 6 minus column 7)	
(a) Excess taxable income	(b) Taxable income, or amount in column (a), whichever is more	(c) Percentage which col. (a) is of col. (b)					
		%					
		%					
		%					
Total (enter here and on line 9, Part I, page 2)							

SCHEDULE H—EXPLOITED EXEMPT ACTIVITY INCOME, OTHER THAN ADVERTISING INCOME

(See Instructions for Part I, line 10)

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 from unrelated trade or business (Column 2 minus column 3)	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)	8. Net income includible (Column 4 minus column 7)
Total (enter here and on line 10, Part I, page 2)							

SCHEDULE I—ADVERTISING INCOME AND ADVERTISING LOSS (See Instructions for Part I, line 11)

Part I Income from periodicals reported on 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 loss, enter in col. 3, Part III. Do not complete cols. 5, 6 and 7. If gain, complete cols. 5, 6 and 7.	5. Circulation income	6. Readership costs	7. If col. 5 exceeds col. 6, enter in col. A, Part III, the gain shown in col. 4. If col. 6 exceeds col. 5, subtract col. 6 plus col. 3 from col. 5 plus col. 2. Enter gain in col. A, Part III.
Totals						

Part II Income from periodicals reported on a separate basis

Part III Column A—Advertising Income

Part III Column B—Advertising Loss

(a) Enter "consolidated periodical" or names of non-consolidated periodicals	(b) Enter total amount from column 4 or 7, Part I, and amounts listed in cols. 4 and 7, Part II	(a) Enter "consolidated periodical" or names of non-consolidated periodicals	(b) Enter total amount from column 4, Part I, and amounts listed in column 4, Part II
Enter total here and on line 11, Part I, page 2		Enter total here and on line 28, Part II, page 2	

SCHEDULE J—COMPENSATION OF OFFICERS, DIRECTORS, AND TRUSTEES

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