

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

## 2016

Department of the Treasury  
Internal Revenue Service

For calendar year 2016 or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

▶ **Information about Form 990-T and its instructions is available at [www.irs.gov/form990t](http://www.irs.gov/form990t).**  
▶ **Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).**

Open to Public Inspection for  
501(c)(3) Organizations Only

<p><b>A</b> <input type="checkbox"/> Check box if address changed</p> <p><b>B</b> Exempt under section  <input checked="" type="checkbox"/> 501(c)(3)  <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e)  <input type="checkbox"/> 408A <input type="checkbox"/> 530(a)  <input type="checkbox"/> 529(a)</p> <p><b>C</b> Book value of all assets at end of year  <b>37,580.</b></p>	<p>Print or Type</p>	<p>Name of organization ( <input type="checkbox"/> Check box if name changed and see instructions.)  <b>BOYS &amp; GIRLS CLUB OF CORYELL COUNTY</b></p> <p>Number, street, and room or suite no. If a P.O. box, see instructions.  <b>304 WEST AVENUE B</b></p> <p>City or town, state or province, country, and ZIP or foreign postal code  <b>KILLEEN, TX 76541</b></p> <p><b>F</b> Group exemption number (See instructions.) ▶</p> <p><b>G</b> Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p>	<p><b>D</b> Employer identification number (Employees' trust, see instructions.)  <b>74-2712199</b></p> <p><b>E</b> Unrelated business activity codes (See instructions.)  <b>713200</b></p>
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**H** Describe the organization's primary unrelated business activity. ▶ **EVENT BINGO**

**I** 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. ▶

**J** The books are in care of ▶ **WALLACE VERNON** Telephone number ▶ **254-519-5801**

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales <b>281,610.</b>			
b Less returns and allowances			
c Balance ▶	<b>281,610.</b>		
2 Cost of goods sold (Schedule A, line 7)	<b>7,884.</b>		
3 Gross profit. Subtract line 2 from line 1c	<b>273,726.</b>		<b>273,726.</b>
4 a Capital gain net income (attach Schedule D)			
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
c Capital loss deduction for trusts			
5 Income (loss) from partnerships and S corporations (attach statement)			
6 Rent income (Schedule C)			
7 Unrelated debt-financed income (Schedule E)			
8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)			
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			
10 Exploited exempt activity income (Schedule I)			
11 Advertising income (Schedule J)			
12 Other income (See instructions; attach schedule)			
13 <b>Total.</b> Combine lines 3 through 12	<b>273,726.</b>		<b>273,726.</b>

**Part II Deductions Not Taken Elsewhere** (See instructions for limitations on deductions.)  
 (Except for contributions, 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)		18
19 Taxes and licenses		19
20 Charitable contributions (See instructions for limitation rules)		20
21 Depreciation (attach Form 4562)	21	
22 Less depreciation claimed on Schedule A and elsewhere on return	22a	22b
23 Depletion		23
24 Contributions to deferred compensation plans		24
25 Employee benefit programs		25
26 Excess exempt expenses (Schedule I)		26
27 Excess readership costs (Schedule J)		27
28 Other deductions (attach schedule)	<b>SEE STATEMENT 2</b>	<b>254,280.</b>
29 <b>Total deductions.</b> Add lines 14 through 28		<b>254,280.</b>
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13		<b>19,446.</b>
31 Net operating loss deduction (limited to the amount on line 30)		
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30		<b>19,446.</b>
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)		<b>1,000.</b>
34 <b>Unrelated business taxable income.</b> Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32		<b>18,446.</b>

<b>Part III Tax Computation</b>	
<b>35 Organizations Taxable as Corporations.</b> 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) \$ _____ (2) \$ _____ (3) \$ _____ b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____ (2) Additional 3% tax (not more than \$100,000) \$ _____ c Income tax on the amount on line 34 <span style="float:right">▶</span>	<b>35c</b> <b>2,767.</b>
<b>36 Trusts Taxable at Trust Rates.</b> 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) <span style="float:right">▶</span>	<b>36</b>
<b>37 Proxy tax.</b> See instructions <span style="float:right">▶</span>	<b>37</b>
<b>38 Alternative minimum tax</b> <span style="float:right">▶</span>	<b>38</b>
<b>39 Tax on Non-Compliant Facility Income.</b> See instructions <span style="float:right">▶</span>	<b>39</b>
<b>40 Total.</b> Add lines 37, 38 and 39 to line 35c or 36, whichever applies <span style="float:right">▶</span>	<b>40</b> <b>2,767.</b>

<b>Part IV Tax and Payments</b>		
<b>41a</b> Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) <span style="float:right">▶</span>	<b>41a</b>	
<b>b</b> Other credits (see instructions) <span style="float:right">▶</span>	<b>41b</b>	
<b>c</b> General business credit. Attach Form 3800 <span style="float:right">▶</span>	<b>41c</b>	
<b>d</b> Credit for prior year minimum tax (attach Form 8801 or 8827) <span style="float:right">▶</span>	<b>41d</b>	
<b>e Total credits.</b> Add lines 41a through 41d <span style="float:right">▶</span>		<b>41e</b>
<b>42</b> Subtract line 41e from line 40 <span style="float:right">▶</span>		<b>42</b> <b>2,767.</b>
<b>43</b> Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule) <span style="float:right">▶</span>		<b>43</b>
<b>44 Total tax.</b> Add lines 42 and 43 <span style="float:right">▶</span>		<b>44</b> <b>2,767.</b>
<b>45a</b> Payments: A 2015 overpayment credited to 2016 <span style="float:right">▶</span>	<b>45a</b>	
<b>b</b> 2016 estimated tax payments <span style="float:right">▶</span>	<b>45b</b>	
<b>c</b> Tax deposited with Form 8868 <span style="float:right">▶</span>	<b>45c</b>	
<b>d</b> Foreign organizations: Tax paid or withheld at source (see instructions) <span style="float:right">▶</span>	<b>45d</b>	
<b>e</b> Backup withholding (see instructions) <span style="float:right">▶</span>	<b>45e</b>	
<b>f</b> Credit for small employer health insurance premiums (Attach Form 8941) <span style="float:right">▶</span>	<b>45f</b>	
<b>g</b> Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other <span style="float:right">▶</span>	<b>45g</b>	
<b>46 Total payments.</b> Add lines 45a through 45g <span style="float:right">▶</span>		<b>46</b>
<b>47</b> Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/> <span style="float:right">▶</span>		<b>47</b> <b>86.</b>
<b>48 Tax due.</b> If line 46 is less than the total of lines 44 and 47, enter amount owed <span style="float:right">▶</span>		<b>48</b> <b>2,853.</b>
<b>49 Overpayment.</b> If line 46 is larger than the total of lines 44 and 47, enter amount overpaid <span style="float:right">▶</span>		<b>49</b>
<b>50</b> Enter the amount of line 49 you want: <b>Credited to 2017 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/> <span style="float:right">▶</span>		<b>50</b>

<b>Part V Statements Regarding Certain Activities and Other Information</b> (see instructions)		
<b>51</b> At any time during the 2016 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 <span style="float:right">▶</span>	Yes	No
		<b>X</b>
<b>52</b> 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. <span style="float:right">▶</span>		<b>X</b>
<b>53</b> Enter the amount of tax-exempt interest received or accrued during the tax year <span style="float:right">▶</span> \$ _____		

<b>Sign Here</b>	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 <span style="float:right">▶</span> _____ <span style="float:right">▶</span> <b>PRESIDENT</b> Date <span style="float:right">▶</span> _____ Title	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature
	<b>JAMES MOBLEY</b>	_____
	Date	<b>09/07/17</b>
Firm's name <span style="float:right">▶</span>	Firm's EIN <span style="float:right">▶</span>	Check <input type="checkbox"/> if self-employed
<b>LOTT, VERNON &amp; CO., P.C.</b>	<b>74-2484378</b>	PTIN <b>P00156987</b>
Firm's address <span style="float:right">▶</span>	Phone no. <b>254-526-0571</b>	
<b>109 E AVE B</b>		
<b>KILLEEN, TX 76541</b>		

<b>Schedule A - Cost of Goods Sold.</b> Enter method of inventory valuation ▶ <b>N/A</b>					
1 Inventory at beginning of year	1	0.	6 Inventory at end of year	6	0.
2 Purchases	2	7,884.	7 <b>Cost of goods sold.</b> Subtract line 6 from line 5. Enter here and in Part I, line 2	7	7,884.
3 Cost of labor	3				
4a Additional section 263A costs (attach schedule)	4a		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		Yes
b Other costs (attach schedule)	4b				No
5 <b>Total.</b> Add lines 1 through 4b	5	7,884.			<b>X</b>

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

2. Rent received or accrued			3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(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)		
(1)			
(2)			
(3)			
(4)			
Total	0.	Total 0.	
(c) <b>Total income.</b> Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶			(b) <b>Total deductions.</b> Enter here and on page 1, Part I, line 6, column (B) ▶ 0.

**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		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(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 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
<b>Totals</b> ▶			0.	0.
<b>Total dividends-received deductions</b> included in column 8 ▶				0.

**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)					
(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).
<b>Totals</b>			<b>0.</b>	<b>0.</b>

**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)				
(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).
<b>Totals</b>		<b>0.</b>		<b>0.</b>

**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)						
(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 II, line 26.
<b>Totals</b>		<b>0.</b>	<b>0.</b>			<b>0.</b>

**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)						
(2)						
(3)						
(4)						
<b>Totals (carry to Part II, line (5))</b>		<b>0.</b>	<b>0.</b>			<b>0.</b>

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FOOTNOTES

STATEMENT 1

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BOYS & GIRLS CLUB OF CORYELL COUNTY IS  
MAKING THE DE MINIMIS SAFE HARBOR ELECTION  
UNDER REG.SEC.1.263(A)-1(F).

FORM 990-T

OTHER DEDUCTIONS

STATEMENT

2

DESCRIPTIONAMOUNT

CASH PRIZES	191,987.
JANITORIAL SERVICES	7,165.
ADVERTISING	1,210.
LICENSES & PERMITS	2,649.
PAYROLL LEASE EXPENSES	25,899.
SUPPLIES	3,287.
RENT	19,143.
CHARITABLE CONTRIBUTIONS	2,940.
TOTAL TO FORM 990-T, PAGE 1, LINE 28	254,280.

# Underpayment of Estimated Tax by Corporations

Department of the Treasury  
Internal Revenue Service

▶ Attach to the corporation's tax return. **FORM 990-T**

**2016**

▶ Information about Form 2220 and its separate instructions is at [www.irs.gov/form2220](http://www.irs.gov/form2220).

Name <b>BOYS &amp; GIRLS CLUB OF CORYELL COUNTY</b>	Employer identification number <b>74-2712199</b>
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**Note:** Generally, the corporation isn't required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

<b>Part I Required Annual Payment</b>			
1 Total tax (see instructions) .....		1	<b>2,767.</b>
2 a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....	2a		
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....	2b		
c Credit for federal tax paid on fuels (see instructions) .....	2c		
d Total. Add lines 2a through 2c .....		2d	
3 Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation doesn't owe the penalty .....		3	<b>2,767.</b>
4 Enter the tax shown on the corporation's 2015 income tax return. See instructions. <b>Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5</b> .....		4	<b>3,136.</b>
5 <b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....		5	<b>2,767.</b>

**Part II Reasons for Filing** - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it doesn't owe a penalty. See instructions.

6  The corporation is using the adjusted seasonal installment method.

7  The corporation is using the annualized income installment method.

8  The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

<b>Part III Figuring the Underpayment</b>			(a)	(b)	(c)	(d)
9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th ( <b>Form 990-PF filers:</b> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....	9		04/15/16	06/15/16	09/15/16	12/15/16
10 <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column. ....	10	692.	692.	691.	692.	
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions .....	11					
<b>Complete lines 12 through 18 of one column before going to the next column.</b>						
12 Enter amount, if any, from line 18 of the preceding column .....	12					
13 Add lines 11 and 12 .....	13					
14 Add amounts on lines 16 and 17 of the preceding column .....	14		692.	1,384.	2,075.	
15 Subtract line 14 from line 13. If zero or less, enter -0- .....	15	0.	0.	0.	0.	
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....	16		692.	1,384.		
17 <b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 .....	17	692.	692.	691.	692.	
18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....	18					

**Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.**

LHA For Paperwork Reduction Act Notice, see separate instructions. Form 2220 (2016)

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. <i>(C Corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.)</i> See instructions	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2016 and before 7/1/2016	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 4\% (0.04)}{365}$	22	\$	\$	\$
23 Number of days on line 20 after 06/30/2016 and before 10/1/2016	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 4\% (0.04)}{365}$	24	\$	\$	\$
25 Number of days on line 20 after 9/30/2016 and before 1/1/2017	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 4\% (0.04)}{365}$	26	\$	\$	\$
27 Number of days on line 20 after 12/31/2016 and before 4/1/2017	27	<b>SEE ATTACHED WORKSHEET</b>		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 4\% (0.04)}{365}$	28	\$	\$	\$
29 Number of days on line 20 after 3/31/2017 and before 7/1/2017	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	30	\$	\$	\$
31 Number of days on line 20 after 6/30/2017 and before 10/1/2017	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	32	\$	\$	\$
33 Number of days on line 20 after 9/30/2017 and before 1/1/2018	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	34	\$	\$	\$
35 Number of days on line 20 after 12/31/2017 and before 3/16/2018	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$	36	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$
38 <b>Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 33; or the comparable line for other income tax returns	38	\$		<b>86.</b>

\* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.



FORM 990-T  
**UNDERPAYMENT OF ESTIMATED TAX WORKSHEET**

Name(s) <b>BOYS &amp; GIRLS CLUB OF CORYELL COUNTY</b>					Identifying Number <b>74-2712199</b>
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
04/15/16	692.	692.	61	.000109290	5.
06/15/16	692.	1,384.	92	.000109290	14.
09/15/16	691.	2,075.	91	.000109290	21.
12/15/16	692.	2,767.	16	.000109290	5.
12/31/16	0.	2,767.	135	.000109589	41.
Penalty Due (Sum of Column F) .....					<b>86.</b>

\* Date of estimated tax payment, withholding credit date or installment due date.

Form **990-W**

**Estimated Tax on Unrelated Business Taxable  
Income for Tax-Exempt Organizations**

OMB No. 1545-0976

(Worksheet)

Department of the Treasury  
Internal Revenue Service

(and on Investment Income for Private Foundations) FORM 990-T

**2017**

Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax year .....	1	
2	Tax on the amount on line 1. See instructions for tax computation .....	2	
3	Alternative minimum tax. See instructions .....	3	
4	Total. Add lines 2 and 3 .....	4	
5	Estimated tax credits. See instructions .....	5	
6	Subtract line 5 from line 4 .....	6	
7	Other taxes. See instructions .....	7	
8	Total. Add lines 6 and 7 .....	8	
9	Credit for federal tax paid on fuels. See instructions .....	9	
10a	Subtract line 9 from line 8. <b>Note:</b> If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions .....	10a	
b	Enter the tax shown on the 2016 return. See instructions. <b>Caution:</b> If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c .....	10b	2,767.
c	<b>2017 Estimated Tax.</b> Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c .....	10c	2,800.
		<b>ADJUSTED TO</b>	

		(a)	(b)	(c)	(d)	
11	Installment due dates. See instructions .....	11	04/18/17	06/15/17	09/15/17	12/15/17
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization." .....	12	700.	700.	700.	700.
13	2016 Overpayment. See instructions .....	13				
14	Payment due (Subtract line 13 from line 12) .....	14	700.	700.	700.	700.

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2017)