,	Depar	990-T	E	xempt (1	OMB No. 1545-0687 2010					
4	Intern	at Revenue Service	For c	alendar year 2010 c				, and ending		10.5	501(c)(3) Organizations Only
2018	, A L	Check box if address changed		Name of organ	(Ewb	loyer Identification number ployees' trust, see uctions.)					
28	<u>-</u>	xempt under section	Print	ROSE B	1	4-6506873					
	B E	501()()	or	Number, street	E Unrei	lated business activity codes					
띩	=	408(e) 220(e)	(500)	instructions.)							
ביז		408A 530(a)	1								
_8	\Box	529(a) BROOKLYN, OH 44144									990
13	C Bo	ok value of all assets	_								
(STEEDERS)	au	end of year	G Check	organization ty	pe 🕨	501(c) corporat	ion L	501(c) trust	401(a) trust	L	X Other trust
7	H Describe the organization's primary unrelated business activity. See Statement 1.										
	_							diary controlled group		Ye	es X No
~~		Yes, enter the name a					OIIL SUDON	aidi y comi anod groop			23 [==] 110
2016						NAL ASSOC	IATIC	N Teler	hone number > 2	216-	813-4556
	Pa	rt Unrelate	d Trac	le or Busin	ess Inco	ome		(A) Income	(B) Expense:		(C) Net
12	18	Gross receipts or sale	es .			-			N. W. S. S. S.		
C 1	-	Less returns and allo				c Balance				<u> </u>	
H											
		3 Gross profit. Subtract line 2 from line 1c							7 7 7 3 3 3	4	
	<u>.</u> 4a								1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	44.44	
ENVELOR	., p					4797)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
. 딸 :	돌 _ c							1205	• Stmt	3 / Jan	1205.
	25 20	• • •		•	-	ch statement)		1205	· ; Seme	61,411	1205.
	€,	Rent income (Schedu					<u> </u>		 		
ě						ganizations (Sch. F)	<u> </u>		†		
		Investment income of	-				┝┷╅		-		
•							9				
٠			vity inco	me (Schedule I)			10				
									The state of the s	<u> </u>	
	13	Total. Combine lines	3 throug	h 12			13	1205			1205.
•	Pa	rt II Deductio	ns No	t Taken Els	ewhere	(See instructions	for limita	tions on deductions			
4								ne unrelated busines		1	
102 7	14	Compensation of off	icers, dir	ectors, and trus	iees (Sched	lule K)		STATUTE RECEN	UNIT	15	
7 0	15 16	Danaire and mainten		••• •••••				RECEN	/ED	16	·
	17	Rad dehte		4				DEC 27	0040	17	
JAN	18	Interest (attach sche	dule)		Γ =	· ·· ······		DELZ./	ZU16	18	
	19	Taxes and licenses			R	ECEIVED		TPR BRA	NOH	19	
<u></u> . ₹	20	i inacitania contriniiti	ANG / NAG	INCITICTIONS TOR	umitetian i	11106 1	_ [CODE	M	20	
δĞ	21	Depreciation (attach	Form 45	62)	<u>io</u> l D	EC 2.0 2010	ૹૢૼ	21		X,	
19 Received in 19 Batching Ogden	22	Less depreciation cla	aimed on	Schedule A and	elsewhere	EC 2.0 2016 on return		22a		22b	· · · · · · · · · · · · · · · · · · ·
門	23	Depletion			اس		œ́		•••••	23	
<u> </u>	24			npensation plans		<u>-L'Ciy, UT</u>				24	
4	25	Employee benefit pro	_						••••••	25	
2017	26									26_	
	27									27	
 1	28 20									28	0.
A N	29 30							from line 13		30	1205.
7	31									31	
ב	32	Unrelated business t	axable in	come before so	ecific deduc	tion. Subtract line 31	from line	30		32	1205.
丿	33									33	1000.
Ž	34							eater than line 32, ente			
SCANNED	1	of zero or line 32								34	205.
ิ้ง	023701 03-03-	11 LHA For Pap	erwork F	Reduction Act N	otice, see i	nstructions.	_			-	Form 990-T (2010)

Form 990-1		ROSE BEN		MIN	SUC	C-T/W					3	4-65	<u>0687</u>	3	Page 2
Part.!	<u> </u>	ax Computation	on												
35	Organ	izations Taxable as C	Corporat	ions.	See instr	uctions for ta	x comp	utation.	_				1 - 2		
	Contro	lled group members	(section	s 1561	and 156	3) check her	e ▶ [See	instructions	and:			. "	1	
a		our share of the \$50,	•			-							,	1	
_	ſ	\$							 \$	J. 7.	I		12.2	1	
		organization's share o											176	1	
U													ليون.	1	
	(2) AC	ditional 3% tax (not n	nore ina	ıu 20 IUU	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				19			_	e ca	l	
C	Incom	e tax on the amount o	on line 3	4		···· ······ ··						>	35c		
36	_	Taxable at Trust Rat				-							37.	l	
		ax rate schedule or	اللا	Sched	ıle D (Fo	rm 1041)						▶	36		31.
37		tax. See instructions											37		
38		ıtive minimum tax 🗼											38		
39	Total.	Add lines 37 and 38 t	o line 35	5c or 3	6. which	ever applies		•••••		•••••	••••••		39		31.
	VÎT	ax and Payme	nts												
		n tax credit (corporati		oh Eor	m 1110	tructe attach	Eorm 1	116)	-	40a			353		
													નું જેવા		
D		credits (see instructio									<u> </u>		-1 31	ł	
C		ıl business credit. Atta											12861	İ	
d	Credit	for prior year minimu	ım tax (a	ittach l	orm 880	11 or 8827)				40d	L		100	l	
e	Total o	redits. Add lines 40a	through	h 40d									40e		
41	Subtra	ct line 40e from line 3	39										41		31.
42	Other t	axes. Check if from: [Fo	rm 42!	55	Form 8611		rm 8697	Form	3866	Other (attact	achedule)	42		
43		ax. Add lines 41 and										•	43		31.
											······	••••••			<u> </u>
44 2		nts: A 2009 overpayr												l	
		stimated tax payment											- Figure	İ	
C	Tax de	posited with Form 886	68							44c			$\exists [\hat{\mathbf{x}}_i]$	}	
d	Foreig	n organizations: Tax p	oaid or w	ithheld	d at source	e (see instru	ctions)			44d			_ . ^		
e	Backu	withholding (see ins	struction	s)						44e					
		for small employer he										–	7		
		redits and payments:				orm 2439 _							ا ,(دیا		
•					=	her			Total ▶	ا معما					
4-													_		
45		ayments. Add lines 4													
46		ted tax penalty (see ir		-									_		
47		e. If line 45 is less tha											47		31.
48	Overpa	yment. If line 45 is la	arger tha	an the	total of li	nes 43 and 4	6, enter	amount :	overpaid			▶	48		
49	Enter t	he amount of line 48 v	you wan	t: Cre	ited to 2	011 estimat	ed tax	ightharpoonup			Refunde		49		
Part V	/ S	tatements Reg	jardin	ıg Ce	ertain .	Activities	and	Other	Informati	on (se	e instruction	s)			
1 At a	nv time	during the 2010 cale	ndar vea	ır. did	the organ	ization have	an inter	est in or	a signature or	other auth	nority over a fi	nancial ad	count		Yes No
		rities, or other) in a fo													罗斯 经项
											oport or r or	ngn bank	uiig		X
2 Durir	ng the tex	counts. If YES, enter year, did the organization structions for other forms	n r ecelve i	a dustrib	ution from,	or was It the gr	entor of,	or transfer	or to, a foreign tn.	uit?					X
												•••••			
		nount of tax-exempt i													新華 新華
Sched	ule A	- Cost of Goo	<u>as 50</u>	ola. į	inter me	thod of inv							-, ,		
1 inve	ntory a	t beginning of year	<u>[</u>	_1_			_ 6	Invent	ory at end of y	ear			6		
2 Pure	chases		[2			7	Cost	f goods sold.	Subtract I	line 6		.3	_	- -
3 Cos	t of labo	or		3				from I	ine 5. Enter he	re and in F	Part I. line 2		7		
		ection 263A costs		48			٦ ,	_	rules of section		• •	n	1		Yes No
							⊣'		rty produced o	•	•				100
		(attach schedule)		4b			\dashv								XB8 (802)(3)
5 Tota		lines 1 through 4b		5		1 ·			ganization?					<u></u>	
Sia-	COFF	er penalties of perjury, I de act, and complete. Declare	ation of p	reparer (examined (other than	ınıs return, inclu taxpayer) is ba	ed on all	informatic	, screaules and s in of which prepa	rer has any i	ലവ യ INS DOST (knowledge,	n my knowi	eoda sua p	जान, त 😘 📆	
Sign Here						1		L.				Ţī	May the IRS	discuss th	ia return with
HEIE								_ D.				1	he prepare	r shown bel	OW (988
		Signature of officer				Date			Title				natructions	<u> </u>	res No
	T	Print/Type preparer's	name			Preparer's	sionatur	B	ſ	Date	Chec	k 🗌	if PTI	N	
.	1]			[]			employed			
Paid	- 1					1			1		3611-	omproyet	·		
Prepa	rer	Consideration in the				L					L	olo Fini P			
Use C	nly 🖡	Firm's name									Firn	n's EIN			
	ĺ	Florada addices - •													
		Firm's address 🕨									L Pho	ne no.			
023711 03-	04-11								•					Form §	990-T (2010)

Form 990-T (2010) ROSE F Schedule C - Rent Inc	ENEJA ome (Fr	MIN SI om Real	ICC-T/W Property :	Zand	Personal F	Propert	y Le	eased '	34-65 With Real Pro	068 perl	73 (see instruction	Page 3
Description of property						-						<u> </u>
(1)						_						
										—-		
(2)											_ ·	
(3)												
(4)		 										
	2	Rent receive	d or accrued						8 /-3 5 /			
(a) From personal property (rent for personal propert 10% but not more to	y is more than	age of n	OI LEA	n nor po	nd personal property ersonal property ex t is based on profit	C0008 50% C	entage or if	•	3(2) Deductions dire columns 2(i	ctly con i) and 2(i	nected with the income in b) (attach echedule)	1
(1)		-										
(2)												
(3)					· · · · · · · · · · · · · · · · · · ·							
												
(4)					 			_ +				
Total		0.	Total					0.				
(c) Total income. Add totals of continuous and on page 1, Part I, line 6,	column (A)	▶					0. P	b) Total deductions nter here and on page 1 art I, line 6, column (B)	▶		0.
Schedule E - Unrelated	d Debt-I	Financed	Income	(see i	instructions)							
								3	Deductions directly of			
					2. Gross Inc		L		to debt-fin			
1. Description of	of debt-finance	ed property			or allocable financed				aight line depreciation (attach achedule)		(b) Other deduction (attach schedule)	8
(4)							-			-+	·	
(1)							-		-			
(2)												
(3)												
(4)												
Amount of average acquisition debt on or allocable to debt-financ property (attach achedule)	4. Amount of sverage acquisition debt on or allocable to debt-financed of property (attach schedule) debt-		adjusted basis llocable to locad property schedule)	to by colum		4 divided mn 5			7. Gross income reportable (column 2 x column 6)		8, Allocable deductions (column 6 x total of column 3(a) and 3(b))	
(1)						9	%					
(2)							%			_		
_(3)							% T		-			
							$\overline{}$					
(4)		·			<u> </u>		<u>~</u>	_				
									here and on page 1, I, line 7, column (A).		Enter here and on page Part I, line 7, column (I	B).
Totals							PL			0.	 	0.
<u>Total dividends-received deduct</u> Schedule F - Interest, <i>I</i>	ions includ	ded in column	8									<u> </u>
Schedule F - Interest, /	Annuitie	s, Royalti	es, and P	lent	s From Co	ntrolled	d Or	ganiza	ations (see in	struct	tions)	
			Ex	æmp	t Controlled O	rganizatio	ons					
Name of controlled organizat	ion	2. Employer ide numb			3. related income see instructions)		4. of spe vents n		5. Part of column 4 Included in the control organization's gross in	Olling	6. Deductions direc connected with inco in column 5	tly me
/4\		 		•		 			 			
(1)		 			-	 			 			
(2)	<u> </u>	 				 			 			
(3)		ļ			•	Ļ						
(4)												
Nonexempt Controlled Organi	zations											
7, Taxable Income		unrelated income see instructions)	(loss)	9. Tot	al of specified pays made	nents	10 in 1	Part of colu the controll gross	mn 9 that is included ing organization's s income	11.	Deductions directly conn vith income in column 10	ected
(1)												
(1)	 	 										
(2)				•								
(3)							_					
(4)												
							Ent	ter here and	nns 5 and 10. I on page 1, Part I, column (A).	Ente	Add columns 6 and 11. or here and on page 1, Pa line 8, column (B).	rti,
Totale									0.			0.
Totals	••••••										Form 990-T	_

Form 990-T (2010) ROSE I	BENEJAMIN SU	JCĊ-T/	W			:	34-	650687	3 Page
Schedule G - Investme	ent Income of a Structions)	Section 5	01(c)(7)), (9), or (17) Or	ganizat				
· · · · · · · · · · · · · · · · · · ·	ecription of Income			2. Amount of Income	directly	ductions connected schedule)		Set-asides itach achedule)	5. Total deductions and set-saides (col. 3 plus col. 4)
(1)				-	(excess)	actionally .	-		(coi. 3 plus coi. 4)
(2)	 · · · · · · · · · · · · · · · · · · 								
(3)		•							
(4)		-							
Totals				Enter here and on page 1, Part I, line 9, column (A).					Enter here and on page Part I, line 9, column (8).
Schedule I - Exploited		Income,	Other		g inco	me	118.5 4 5		<u> </u>
Description of exploited activity	2. Gross unrelated business income from trade or business	3. Experi directly con with produ of unrela business in	nected action ated	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	from ac	es income struty that unrelated as income		3. Expenses tributable to column 5	7. Excess exempt expenses (column 5 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 of page 1, Page 10, co	art i,						Enter here and on page 1, Part II, line 26.
^{[otals} Schedule J - Advertisi	ing income (see i	netructione)	0.1	the said with the said of	بارد د صد ، ا	2	. : 4,	City on Assista	<u>ki 0,</u>
Part I Income From	Periodicals Repo	orted on	a Cons	olidated Basis			-		
1. Name of periodical	2. Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, comput cols. 5 through 7.	5. c	tirculation ncome	6.	Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)		- 		·	-:				The second second
(2)				1	•				
(3)] :.					
(4)					. '				
otals (carry to Part II, line (5))	>		0.						0.
Part II Income From		orted on			each perio	odical listed	in Pa	rt II, fill in	<u>_</u>
Name of periodical	2. Gross advertising income	3.	Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, comput cols. 5 through 7.		irculation acome	6.	Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)					+				
(1) (2)		-	<u> </u>	 	+				
(3)				 	+				·· -
(4)		<u> </u>		<u> </u>	1				
(5) Totals from Part I).	0.		100	- , , ,	٠, ٠	ڭ.	0.
·	Enter here and or page 1, Part I, line 11, col. (A).	page	re and on 1, Part I, , col. (B).		, s				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)).	0.		· <u>.</u> .	<u> </u>			0.
Schedule K - Compen	sation of Officers	s, Directo	ors, and	Trustees (see	instruction				
1.	Name			2. Title		3. Percent time devoted business	ito	4, Compo	ensation attributable elated business
(1)							%	-	
(2)							%		
(3)							%		
(4)							%		

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

<u> </u>		
Form 990-T	Description of Organization's Primary Unrelated Business Activity	Statement 1

Flow through Income/Loss from Partnership Investments

To Form 990-T, Page 1

Form 990-T	Income	(Loss)	from	Partnerships	Statement 2
Description					Amount
Various Partnerships					1205.
Total to Form 990-T, 1	Page 1, li	ne 5			1205.