8X2740 1 000

	990-T (2018)		Page 2
Pai	t III Total Unrelated Business Taxable Income		
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see		
	instructions)		1,201
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see		
	instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum		
	of lines 33 and 34		1,201
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	237	1,000
38	Unrelated business taxable income Subtract line 37 from line 36 If line 37 is greater than line 36	4 /	
	enter the smaller of zero or line 36	\$8	201
Par	t IV Tax Computation	-	
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0 21)	3/9	42
40	Trusts Taxable at Trust Rates. See instructions for tax computation Income tax on		
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041)	40	
41	Proxy tax See instructions		
42	Alternative minimum tax (trusts only)		
43	Tax on Noncompliant Facility Income See instructions		
44	Total Add lines 41, 42, and 43 to line 39 or 40, whichever applies		42
Par		J/ 14- 1	
			
45 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	1	
b	Other credits (see instructions)	-	
С	General business credit Attach Form 3800 (see instructions)	4	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	4	4.0
е	Total credits Add lines 45a through 45d	45e	42
46	Subtract line 45e from line 44	46	
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule).	47	
48	Total tax Add lines 46 and 47 (see instructions)	48	0_
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	
50 a	Payments A 2017 overpayment credited to 2018]]	
	2018 estimated tax payments]	
	Tax deposited with Form 8868]	
	Foreign organizations Tax paid or withheld at source (see instructions)]	
	Backup withholding (see instructions)	1	
	Credit for small employer health insurance premiums (attach Form 8941) 50f	1 1	
	Other credits, adjustments, and payments Form 2439	1	
9	Form 4136 Other Total 50g		
E 4	Total payments Add lines 50a through 50g	51	
51		52	
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached		
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	54	
55	Enter the amount of line 54 you want Credited to 2019 estimated tax Refunded	<u> 55 </u>	
Par	tVI Statements Regarding Certain Activities and Other Information (see instructions		T
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or		Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the	foreign country	
	here ▶		X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign	gn trust?	Х
	If "Yes," see instructions for other forms the organization may have to file		
58	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		
	Under penalties of pagury, I declare that I have examined this return, including accompanying schedules and statements, and to the b	est of my knowledge	and belief, it is
Sigr	true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge		
Her		ly the IRS discuss h the preparer sh	
		e instructions)? X Y	
	Print/Type preparer's name	PTIN	110
Paid		k L I BOOL	56798
	MICHERE E WEBEK		
	Firm's name GRANT TRORNTON BUE		
	Firm's address ► 100 E WISCONSIN AVE , MILWAUKEE, WI 53202 Phone	eno 414-289-	0200

Page 3

1 01111 330-1 (2010)										-90
Schedule A - Cost of G	oods Sold. En	ter metho	d of inven	tory valuation	>	_				
1 Inventory at beginning of	year . 1			6 Inventory	at end of ye	ar	6			
2 Purchases	2					old Subtract line				
3 Cost of labor	3			6 from	line 5 Er	nter here and in				
4a Additional section 263A c	osts			Part I, line	2		7			
(attach schedule)	4a			8 Do the	rules of	section 263A (w	th respec	ct to	Yes	No
b Other costs (attach schedu	ıle) . 4b					or acquired for				1
5 Total Add lines 1 through				to the org	anization? .			<u> </u>		X
Schedule C - Rent Incom	e (From Real P	roperty a	nd Perso	nal Property	Leased V	Vith Real Proper	ty)			
(see instructions)										
1 Description of property	"									
(1)										
(2)						 				
(3)						·				
(4)						Ŧ.				
1	2 Rent receiv	ed or accru	ed			_				
(a) From personal property (if the for personal property is more th more than 50%	nan 10% but not	percent	age of rent f	d personal property or personal propert s based on profit or	y exceeds	3(a) Deductions dir in columns 2(a				me
(1)		-								
(2)	· ·			- 10 - 2 - 12						
(3)				•			•			
(4)			-							
Total		Total								
(c) Total income Add totals of c			•			(b) Total deduction Enter here and on Part I, line 6, colum	page 1,			
Schedule E - Unrelated D	ebt-Financed Ir	ncome (se	ee instruct	ions)						
1 Description of de	ot-financed property	-		income from or to debt-financed		Deductions directly connected with or all debt-financed property				
			1	property	(a) Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)			
(1)			ļ							
(2)			ļ <u></u>							
(3)										
(4)										
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	5 Average adjus of or allocat debt-financed j (attach sche	ole to property	4	. Column divided column 5		income reportable n 2 x column 6)	(column 6	able dedu x total of i) and 3(b)	columr	ns
(1)	1			%						
(2)				%						
(3)	-			%						
(4)				%						
			-			e and on page 1, e 7, column (A)	Enter her Part I, lin			
Totals										

Schedule F—Interest, Ann	unics, noyunic			ntrolled Or			(5	oo mon don	0.107	
1 Name of controlled organization	2 Employer identification numb	Jer		ated income nstructions)	4 Total	of speci ents mad	fied includ	of column 4 t ed in the contr ation's gross ii	rolling	6 Deductions directly connected with income in column 5
(1)										
(2)					ļ					
(3)					ļ. <u></u>					
(4)								<u> </u>		
Nonexempt Controlled Organi	zations									
7 Taxable Income	8 Net unrelated ii (loss) (see instruc	I		Total of specifical ayments made		inc	Part of colur luded in the anization's gr	controlling		Deductions directly nnected with income in column 10
(1)										
(2)										
(3)									İ	
(4)			_							
Totals		tion 501(c	: :)(7),	 (9), or (17		En Pa	dd columns 5 ter here and c irt I, line 8, cc on (see in	on page 1, lumn (A)	En	dd columns 6 and 11 ter here and on page 1, art I, line 8, column (B)
1 Description of income	2 Amount of	Income		directly cor (attach sch	nected			Set-asides th schedule)		5 Total deductions and set-asides (col. 3 plus col. 4)
(1)										
(2)			-							
(3)			+							
(4)	Enter here and	on page 1.	ļ		_	ļ				Enter here and on page 1
Totals ▶ Schedule I-Exploited Exe			er Th	an Adverti	ising Ir	ncome	e (see insti	ructions)		Part I, line 9, column (B)
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expens directly connected production unrelated business incompany	with of d	4 Net incon from unrelat or business 2 minus col If a gain, co cols 5 thro	ed tradé (column umn 3) ompute	from is n	ross income activity that of unrelated ness income	6 Expe attributa colum	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)					:					
(2)					_					
(3)								<u> </u>		
(4)										
	Enter here and on page 1, Part I, line 10, col (A)	Enter here ar page 1, Pa line 10, col	ırt I,	-				, t . , , , _ , _ ,		Enter here and on page 1, Part II, line 26
Totals ▶ Schedule J– Advertising In	Come (see instri	uctions)		<u> </u>						
Part I Income From Per			neoli	dated Ras						
income From Per		ed on a CC	JUSOII	4 Advert	ısıng		. .			7 Excess readership
1 Name of periodical	2 Gross advertising income	3 Direct advertising of		gain or (los 2 minus co a gain, cor cols 5 thro	3) If		Circulation Income	6 Reade cost	•	costs (column 6 minus column 5, but not more than column 4)
(1)										
(2)										
(3)										_
(4)										
								1		
Totals (carry to Part II, line (5))								<u> </u>	_	Form 990-T (2018)

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line 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 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, Directors, and Trustees (see instructions)

1. Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	 -
(2)		%	
(3)		%	
(4)		%	
Fotal Enter here and on page 1, Part II,	ine 14		

Form 990-T (2018)

ATTACHMENT 1	
FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS OR S CORPORATION	IS
LAGERS LLC - ORDINARY INCOME	3,335

INCOME (LOSS) FROM PARTNERSHIPS

3,335

ATTACHMENT

3,335
0,000
2,000
. (
* 10
134
27

FEDERAL FOOTNOTES

EAA AVIATION FOUNDATION, INC FEIN 39-1033301

FORM 990-T, PART II, LINE 20 CHARITABLE CONTRIBUTIONS CARRYFORWARD

	TOTAL	CHARITABLE	CHARITABLE CONTRIBUTION	CHARITABLE CONTRIBUTION				
YEAR	CHARITABLE CONTRIBUTIONS	CONTRIBUTION UTILIZED	CONVERTED TO NOL	CARRYOVER TO FUTURE YEARS				
02/28/19*	278	134.	_	144				
TOTAL	278	134	-	144				
* 5-YEAR CARRYFORWARD								
CHARITABLE	144							

_			
7	ATTACHMENT	3	

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

ACCOUNTING AND TAX PREP FEES

2,000

PART II - LINE 28 - OTHER DEDUCTIONS

2,000

General Business Credit

OMB No 1545-0895

Department of the Treasury Internal Revenue Service (99)

▶ Go to www.irs.gov/Form3800 for instructions and the latest information. ▶ You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return. Attachment Sequence No 22

Identifying number Name(s) shown on return 39-1033301 EAA AVIATION FOUNDATION, INC **Current Year Credit for Credits Not Allowed Against Tentative Minimum Tax (TMT)** (See instructions and complete Part(s) III before Parts I and II.) General business credit from line 2 of all Parts III with box A checked . . . Passive activity credits from line 2 of all Parts III with box B checked | 2 2 Enter the applicable passive activity credits allowed for 2018 See instructions . 3 3 Carryforward of general business credit to 2018 Enter the amount from line 2 of Part III with 4 4 box C checked See instructions for statement to attach Carryback of general business credit from 2019 Enter the amount from line 2 of Part III with box D checked See instructions 6 0 Add lines 1, 3, 4, and 5 **Allowable Credit** Part II Regular tax before credits: • Individuals Enter the sum of the amounts from Form 1040, line 11a, and Schedule 2 (Form 1040), line 46, or the sum of the amounts from Form 1040NR, lines 42 and 44 · Corporations Enter the amount from Form 1120, Schedule J, Part I, line 2; or the 42 applicable line of your return . -• Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, or the amount from the applicable line of your return Alternative minimum tax: Individuals Enter the amount from Form 6251, line 11 · Corporations Enter -0-• Estates and trusts Enter the amount from Schedule I (Form 1041), line 56 42 Add lines 7 and 8 . . . Foreign tax credit . . 10a 10b Certain allowable credits (see instructions) . 10c 0 Add lines 10a and 10b 42 Net income tax. Subtract line 10c from line 9 If zero, skip lines 12 through 15 and enter -0- on line 16 11 42 Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0-12 Tole Enter 25% (0 25) of the excess, if any, of line 12 over \$25,000 See 13 13 instructions Tentative minimum tax: 14 · Individuals. Enter the amount from Form 6251, line 9 · Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54. . 0 15 Enter the greater of line 13 or line 14. 16 Subtract line 15 from line 11 If zero or less, enter -0-16 17 17 C corporations: See the line 17 instructions if there has been an ownership change, acquisition,

or reorganization.

Par	Allowable Credit (continued)		, age =
	: If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and e	nter -	0- on line 26
18	Multiply line 14 by 75% (0 75). See instructions	18	
19	Enter the greater of line 13 or line 18	19	
20	Subtract line 19 from line 11 If zero or less, enter -0	20	
21	Subtract line 17 from line 20 If zero or less, enter -0-	21	
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	
23	Passive activity credit from line 3 of all Parts III with box B checked 23		
24	Enter the applicable passive activity credit allowed for 2018 See instructions .	24	
25	Add lines 22 and 24	25	
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0
27	Subtract line 13 from line 11 If zero or less, enter -0	27	42
28	Add lines 17 and 26	28	0
29	Subtract line 28 from line 27 If zero or less, enter -0	29	42
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	1,603
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked 32		
33	Enter the applicable passive activity credits allowed for 2018 See instructions	33	
34	Carryforward of business credit to 2018. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach	34	4,084
35	Carryback of business credit from 2019. Enter the amount from line 5 of Part III with box D checked. See instructions	35	
36	Add lines 30, 33, 34, and 35	36	5,687
37	Enter the smaller of line 29 or line 36	37	42
38	Credit allowed for the current year. Add lines 28 and 37 Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return Individuals. Schedule 3 (Form 1040), line 54, or Form 1040NR, line 51 Corporations. Form 1120, Schedule J, Part I, line 5c Estates and trusts. Form 1041, Schedule G, line 2b	38	42

	shown on return		Identify	ıng number	Page
	AVIATION FOUNDATION, INC General Business Credits or Eligible Small Business Credits (se	o inc		033301	
	lete a separate Part III for each box checked below. See instructions.	<u> </u>	iluctions)		
	General Business Credit From a Non-Passive Activity E Reserved				
B \square	General Business Credit From a Passive Activity F Reserved Reserved				
_ =		Ducir	ann Cradit Carrufa	nuarda	
_ =		Dusii	ness Credit Carryfo	iwaius	
_					,
	ou are filing more than one Part III with box A or B checked, complete and attach fire Parts III with box A or B checked. Check here if this is the consolidated Part III	st an a	additional Part III co	•	rom ▶ [
	(a) Description of credit		(b)	(c)	
	On any line where the credit is from more than one source, a separate Part III is needed for earough entity	ach	If claiming the credit from a pass-through entity, enter the EIN	Enter the appropr amount	riate
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a			
b	Reserved	1b		•	
С	Increasing research activities (Form 6765)	1c			<u> </u>
d	Low-income housing (Form 8586, Part I only)	1d			
e	Disabled access (Form 8826) (see instructions for limitation)	1e			
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f			
g	Indian employment (Form 8845)	1g			
h	Orphan drug (Form 8820)	1h			
i	New markets (Form 8874)	<u> 1i</u>			
j	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1 <u>j</u>			
k	Employer-provided child care facilities and services (Form 8882) (see				
	instructions for limitation)	1k			
1	Biodiesel and renewable diesel fuels (attach Form 8864)	11	*****		
m	Low sulfur diesel fuel production (Form 8896)	1m	<u> </u>		<u> </u>
n	Distilled spirits (Form 8906)	1n			
0	Nonconventional source fuel (carryforward only)	10			
p	Energy efficient home (Form 8908)	1p			
q	Energy efficient appliance (carryforward only)	1q			
r	Alternative motor vehicle (Form 8910)	1r			
s	Alternative fuel vehicle refueling property (Form 8911)	<u>1s</u>			
t	Enhanced oil recovery credit (Form 8830)	1t			
u	Mine rescue team training (Form 8923)	1u			
V	Agricultural chemicals security (carryforward only)	1v			
W	Employer differential wage payments (Form 8932)	1w			
x	Carbon oxide sequestration (Form 8933)	1x			
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1y			
z	Qualified plug-in electric vehicle (carryforward only)	1z			
aa	Employee retention (Form 5884-A)	1aa			_
bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb			
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain other credits (see instructions)	1zz			
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2) T	0	
3	Enter the amount from Form 8844 here and on the applicable line of Part II	_ 3			
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a	_		
b	Work opportunity (Form 5884)	4b			
С	Biofuel producer (Form 6478)	4c			
ď	Low-income housing (Form 8586, Part II)	4d			
е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e			_
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f	58-2311575	1,603	
g	Qualified raılroad track maintenance (Form 8900)	4g			
h	Small employer health insurance premiums (Form 8941)	4h			
i	Increasing research activities (Form 6765)	4i_			
j	Employer credit for paid family and medical leave (Form 8994)	4 <u>j</u>			
Z	Other	4z			
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5		1,603	
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6		1.603	

Jame/s) si	hown on return		Ide	ntifvin	g number	ugo		
•					39-1033301			
	VIATION FOUNDATION, INC	o inot		-10.	33301			
Part II		e insi	ructions)					
•	te a separate Part III for each box checked below. See instructions.							
	General Business Credit From a Non-Passive Activity							
_	General Business Credit From a Passive Activity F Reserved	_						
	<u> </u>	Buşır	iess Credit Car	ryforv	vards			
	General Business Credit Carrybacks H 🔳 Reserved							
	u are filing more than one Part III with box A or B checked, complete and attach firs	st an a	additional Part I	II com				
all Pa	arts III with box A or B checked Check here if this is the consolidated Part III		•			▶		
	(a) Description of credit		(b)		(c)			
Note: On	any line where the credit is from more than one source, a separate Part III is needed for ϵ	each	If claiming the cr		Enter the appropr amount	rate		
	ough entity		entity, enter the		amount			
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a						
b	Reserved	1b						
С	Increasing research activities (Form 6765)	1c						
d	Low-income housing (Form 8586, Part I only)	1d						
e	Disabled access (Form 8826) (see instructions for limitation)	1e			-			
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f						
g	Indian employment (Form 8845)	1g						
h	Orphan drug (Form 8820)	1h						
i.	New markets (Form 8874)	1i						
i	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1j						
J L	Employer-provided child care facilities and services (Form 8882) (see							
k	instructions for limitation)	1k]					
	Biodiesel and renewable diesel fuels (attach Form 8864)	11		-				
ı m	Low sulfur diesel fuel production (Form 8896)	1m		-				
m		1n		-				
n	Distilled spirits (Form 8906)	10		-				
0	Nonconventional source fuel (carryforward only)			-				
р	Energy efficient home (Form 8908)	1p						
q	Energy efficient appliance (carryforward only)	1q	ļ					
r	Alternative motor vehicle (Form 8910)	1r		-+				
S	Alternative fuel vehicle refueling property (Form 8911)	1s						
t	Enhanced oil recovery credit (Form 8830)	1t		$ \vdash$	·			
u	Mine rescue team training (Form 8923)	1u		_				
V	Agricultural chemicals security (carryforward only)	1v						
w	Employer differential wage payments (Form 8932)	1w						
×	Carbon oxide sequestration (Form 8933)	1x						
У	Qualified plug-in electric drive motor vehicle (Form 8936)	1 <u>y</u>						
Z	Qualified plug-in electric vehicle (carryforward only)	1z		_				
aa	Employee retention (Form 5884-A)	1aa						
bb	General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb						
ZZ	Other. Oil and gas production from marginal wells (Form 8904) and certain			1				
	other credits (see instructions)	1zz						
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2	1		0			
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3						
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a						
b	Work opportunity (Form 5884)	4b						
С	Biofuel producer (Form 6478)	4c	=					
d	Low-income housing (Form 8586, Part II)	4d						
е	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e						
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f			4,084			
g	Qualified railroad track maintenance (Form 8900)	4g						
h	Small employer health insurance premiums (Form 8941)	4h						
i	Increasing research activities (Form 6765)	4i						
i	Employer credit for paid family and medical leave (Form 8994)	4j			-			
z	Other	4z						
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5	0		4,084			
6	Add lines 2.3 and 5 and enter here and on the applicable line of Part II	6	Jan 1		4 084			

EAA Aviation Foundation, Inc.

FEIN: 39-1033301 2/28/2019 Form 3800, Part III General Business Credit(s)

Amount of General Business Credit(s) Available		803	3,23	1,603	79′5
Amount of <u>Credit(s)</u> Expired		•	•	•	, ,
Amount of Credit(s) Amount of Credit(s) Utilized Expired		1,442	1	•	1,442
Amount of Credit(s) Allowed for Original Year		1,099	•	•	1,099
Amount of Credit(s) as Originally Reported on the Original Return		3,344	3,239	1,603	8,186
Tax Year the Credit(s)		2016*	2017*	2018*	
Description of Credit(s)	Employer social security and Medicare taxes	4f paid on certain employee tips			TOTAL
Line		46			

* 1-Year Carryback/20-Year Carryforward

5,645

Amount of the credit carryback/carryforward allowed for 2/28/2020: