Par	t III	Total Unrelated Business Taxabl	e Income							
33		f unrelated business taxable income compute	d from all unrelated trades or	busine	sses (see insti	uctions)	33			69
34		its paid for disallowed fringes			34					
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)									
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of									697
27	lines 33 and 34						36 87	_		,000
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions) Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36, enter the									, 000
38		r of zero or line 36	37 from line 36. If line 37 is gre	eater tr	nan iine 36, en	ter tne	38			
Par	t IV	Tax Computation					- 1			
39		izations Taxable as Corporations. Multiply le	ine 38 by 21% (0 21)			•	39			
40	-	Taxable at Trust Rates. See instructions for		on						
	the ar	nount on line 38 from 🛛 Tax rate schedule of	r Schedule D (Form 1041)			40			
41		tax. See instructions	•	•		•	41			
42	•	ative minimum tax (trusts only)				:	42			
43		Noncompliant Facility Income. See instruc	tions .				43			
44		Add lines 41, 42, and 43 to line 39 or 40, which					44			
Pai	rt V	Tax and Payments	<u> </u>							
		n tax credit (corporations attach Form 1118, tr	usts attach Form 1116)	45a						
		credits (see instructions)		45b						
С	Gener	al business credit. Attach Form 3800 (see instr	ructions) .	45c						
d		for prior year minimum tax (attach Form 8801	·	45d			'			
		credits. Add lines 45a through 45d					45e			(
46		act line 45e from line 44.					46			
47		taxes. Check if from Form 4255 Form 86	S11 Form 8697 Form 8	вее П	Other (attach s	chedule)	47			
48		tax. Add lines 46 and 47 (see instructions)	,	تا ٥٥٥			48			
49		et 965 tax liability paid from Form 965-A or Fo	orm 965-B. Part II. column (k)	line 2			49			
		ents A 2017 overpayment credited to 2018		50a						
	-	estimated tax payments		50b			ı 'l			
C		posited with Form 8868		50c						
		n organizations Tax paid or withheld at source	e (see instructions)	50d			i '			
	_	p withholding (see instructions)	e (see mandenons)	50e						
f		for small employer health insurance premiums	s (attach Form 8941)	50f						
-			s (allacii Fuiii 6541)	301						
9		redits,adjustments, and payments Form 2439 m 4136 Other	Total ▶	E0.						
-4	ш		Total	50g			51			(
51		payments. Add lines 50a through 50g				. 🗖	-+			
52 53		ted tax penalty (see instructions). Check if For		1		▶ U	52 53			
		ue. If line 51 is less than the total of lines 48, 4 ayment. If line 51 is larger than the total of line			rnaid		54			
54 55		the amount of line 54 you want		ni over	` 1		+			
		<u></u>				unded 🕨	55			
Par	U VI	Statements Regarding Certain A	ctivities and Other Inte	orma	tion (see inst	ructions)			Yes	No
56		time during the 2018 calendar year, did the o							103	1.00
		financial account (bank, securities, or other) ii	-	_	_					
		N Form 114, Report of Foreign Bank and Fina	riciai Accounts. II Tes, enter	ше па	ine of the fore	igir couring	,			X
E7	here	the tax year, did the organization receive a di	estribution from or was it the s	rantar	of or transfer	ar to a fore	uan tru			X
57		•	or to, a fore	agn irus	517		┼^			
		," see instructions for other forms the organiza			. .					1.
58		he amount of tax-exempt interest received or	. -		s s	manta and t		ct of my know	wladaa	
0:	- 1	Under penalties of perjury, I declare that I have examin pelief, it is true, correct, an Ocomplete. Declaration of i	preparer (other than taxpayer) is bas	ing scri sed on a	edules and state III information of	ments, and t which prepa	rer has a	ıny knowledg	je.	ariu
Sigr		She of South	11-10-2020 NUTCE	חח	естремф		May th	e IRS discus	s this re	eturn
Her	e 🗷		<u>07-28-2020</u> ► <u>VICE</u> ate Title	PR	<u>ESIDENT</u>		/	e preparer sh	_	٦
				1_			_	tions)?	res	No
ь			rer's signature	Dat 01-28	e -2020	Check		PTIN	1200	1.2
Paic	_	77	DY BOWLER					<u> P0003</u>		, 3
•	parer	Firm's name H AND R BLOCK					<u> </u>	<u>338441</u>	. 4	
use	Only	Firm's address ▶ 14 MAIN ST			I .	hone no.	2245	,		
		GORHAM ME 04038			2	<u>07839</u>	<u> 3317</u>		-	
CO.4	10	DDI 2 DWE 000 Farm Caffering - C	1000 - 2010 HDD Tau Crous Iss					Carm Of	$\Omega - T$	(2010)

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Form 990-T (2018)

Page 2

Form 990-T (2018) GENERA	L FED	ERATION	OF W	OMI	E 01-0	350	421		F	age 3
Schedule A — Cost of Good	s Sold.	Enter method o	finventor	y val	uation 🕨					
 Inventory at beginning of year 		6 Inventory at e					6			
,2 Purchases .	. 2	2			from line 5		Id. Subtract line 6			
3 Cost of labor	3				Part I, line 2			7	,	
(attach schedule)	<u></u>		8 Do the rules	of sec	tion 263A (with respec	et to	Yes N	No		
b Other costs (attach schedule)	4b						or acquired for resale	apply		
5 Total. Add lines 1 through 4b	5		0		to the organ					<u> </u>
Schedule C — Rent Income (see instructions)	(From F	Real Propert	ty and	Per	sonal Pro	perty	Leased With Re	al Property)		
1. Description of property										
(1)		_								
(2)										
(3)			_							
(4)										
		ed or accrued								
of rent for personal property is more than 10% but not more than 50%) exceeds 50°				I and personal property (if the of rent for personal property % or if the rent is based on profit or income)			3(a) Deductions directly connected with income in columns 2(a) and 2(b) (attach schedule)			
(1)					··· ·· /				•	
(2)										
(3)										
(4)										
Total	0	Total				0	(b) Total deduction	ns. Enter		
(c) Total income. Add totals of column	ns 2(a) and	d 2(b). Enter					here and on page 1, Part I,			
here and on page 1, Part I, line 6, colu		<u> </u>				0	line 6, column (B)	•		0
Schedule E — Unrelated Del	bt-Finar	nced Incom	e (see ins	truct	ions)	,				
					ome from or	3. [eductions directly con debt-fina	nected with or a inced property	llocab	le to
Description of debt-finar	allocable to debt-financed property (a) S				aight 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)				4 divided (column 2 x column 6) (column			8. Allocable d (column 6 x columns 3(a)	total	of	
(1)					%					
(2)					.%	<u> </u>				
(3)					%					
(4)					%		· · · · · · · · · · · · · · · · · · ·			
							here and on page 1,	Enter here and		

Total dividends-received deductions included in column 8

Totals

Schedule F — Interest,	Annuities, Hoya					ied Organ	ization	S (see I	ınstructı	ons)	
1. Name of controlled	2 Employer		pt Controlled Net unrelated		tions . Total of	E Dort	of column	. 4 that	1 6	. Deductions	
organization	2. Employer identification number	inco	me (loss) (se nstructions)	e s	pecified ments ma	ıs ın	cluded in	ded in the organization's		directly connected with income in column 5	
(1)											
(2)											
(3)							_				
(4)											
Nonexempt Controlled Organiz	ations			•	-						
7. Taxable Income	8. Net unrelated in (loss) (see instruct		9. Total of specific payments made		ınclu	ded in the co	t of column 9 that is ed in the controlling ation's gross income		nnected	uctions directly d with income in olumn 10	
(1)										-	
(2)											
(3)											
(4)											
Totals				•	here a line 8,	olumns 5 and nd on page 1 column (A).	Part I,	Ente Part	er here t I, line l	ns 6 and 11. and on page 1, 3, column (B).	
Schedule G - Investm	ent Income of a	Section				Organizati	on (see ı	nstructi			
1. Description of income	2. Amount of	income	direc	Deduction ctly connection ch schedu	cted		asides chedule)		and se	al deductions t-asides (col 3 lus col. 4)	
(1)											
(2)											
(3)											
(4)						L					
Totals	Enter here and Part I, line 9, co	lumn (A)	0				,	P	art I, lin	e and on page 1, e 9, column (B).	
Schedule I — Exploited	Exempt Activity	Incon	ne, Other	Than A	dvertis	ing Incom	e (see in	structio	ns)		
1. Description of exploited ac	2. Gross unrelated tivity business inco from trade o business	me cor	Expenses directly nnected with oduction of unrelated iness 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 inco from activity is not unrela business inc	vity that attributable to		ble to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).	
(1)		- -					· ·				
(2)											
(3)											
(4)		\neg		 				-			
Totals	Enter here & of page 1, Part line 10, col. (A	I, pag	er here & on ge 1, Part I, 10, col (B).)						Enter here and on page 1, Part II, line 26.	
Schedule J — Advertis	ing Income (see in	struction	s)								
Part I Income From	n Periodicals Rep	orted	on a Con	solidate	d Bas	is					
1. Name of periodical	2. Gross advertising income		3. Direct advertising costs		ertising (loss) minus). If a empute rough 7	5. Circulation 6. F		. Reade cost	•	7. Excess readership costs (column 6 minus column 5, but not more than column 4).	
(1)											
(2)											
(3)											
(4)										,	
Totals (carry to Part II line (5))	b	0	(1	n		nl -		0		

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Form **990-T** (2018)

Part II Income From Peri 2 through 7 on a line-by	•	ted on a Sepa	arate Basis (Fo	r each periodical lis	sted in Part II, fill in	columns	
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) 2018 2019 DIRECTO	1,854	1,157	697				
(2)							
(3)						_	
(4)							
Totals from Part I	0	0			*1 15	(
Totals, Part II (lines 1-5)	Enter here & on page 1, Part I, line 11, col. (A) 1,854	Enter here & on page 1, Part I, line 11, col (B)	, ,	•	,	Enter here and on page 1, Part II, line 27.	
Schedule K — Compensatio	n of Officers,	Directors, and	d Trustees (see	instructions)		<u> </u>	
1. Name			2. Tıtle	3. Percent of time devoted to business	•	sation attributable ated business	
(1)					%		
(2)					%		
(3)					%		
(4)					%		
Total Enter here and on page 1 Part	Il line 14					7	