Exempt Organization Business Income Tax Return 2018 2019 For calendar year 2018 or other tax year beginning  $\frac{11}{01}$  $_{\rm max}$ , 2018, and ending 10/31► Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury Internal Revenue Service Open to Public Inspection for 501(c)(3) Organizations Only Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Check box if Check box if name changed and see instructions ) Employer identification number (Employees' trust, see instructions) address changed AWH FOUNDATION Exempt under section X 501( C 3) Print C/O ROBERT W. GILLETT 36-6050191 or 7569 N. MYSTIC CANYON DRIVE Unrelated business activity code (See instructions ) 408(e) 220(e) TUCSON, AZ 85718 408A 530(a) 529(a) 900099 Book value of all assets at end of year Group exemption number (See instructions )> Check organization type X 501(c) corporation 401(a) trust 501(c) trust Other trust 3,696,303. Enter the number of the organization's unrelated trades or businesses Describe the only (or first) unrelated trade or business here ► DEBT FINANCED INCOME If only one, complete Parts I-V If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? X No If 'Yes,' enter the name and identifying number of the parent corporation Telephone number► 847 The books are in care of ▶ ROBERT W. GILLETT 498-3309 Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1 a Gross receipts or sales c Balance ► 1 c b Less returns and allowances 2 Cost of goods sold (Schedule A, line 7) 2 3 Gross profit Subtract line 2 from line 1c 3 4a 4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b c Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation 5 (attach statement) Rent income (Schedule C) 6 Unrelated debt-financed income (Schedule E) 7 123,241 128,762 -5,521 8 Interest, annuities, royalties, and rents from a controlled organization (schedule F) 8 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) 10 Advertising income (Schedule J) 11 Other income (See instructions, attach schedule) 12 13 13 Total. Combine lines 3 through 12 123,241 128,762 -5,521**Deductions Not Taken Elsewhere** (See instructions for implications on-deductions ) (Except for contributions, deductions must be directly connected with the unrelated business income ) Part II Compensation of officers, directors, and trustees (Schedule K) 14 Š Salaries and wages 15 15 တ် FEB 2 6 2020 ដួ Repairs and maintenance 16 16 BS 17 Bad debts 17 18 Interest (attach schedule) (see instructions) 18 19 Taxes and licenses 19 20 Charitable contributions (See instructions for limitation rules) 20 Depreciation (attach Form 4562) 21 21 22 Less depreciation claimed on Schedule A and elsewhere on return 22a 22b 23 23 Depletion Contributions to deferred compensation plans 24 24 Employee benefit programs 25 26 Excess exempt expenses (Schedule I) 26 27 27 Excess readership costs (Schedule J) 28 28 Other deductions (attach schedule) 29 Total deductions. Add lines 14 through 28 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 -5,52131 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 31 from line 30 -5 521 TEEA0201L 1/31/19 Form 990-T (2018) BAA For Paperwork Reduction Act Notice, see instructions.

Form	990-	T (2018) AWH	FOUNDATION			36	-6050191	Pa	ge <b>2</b>
Par	t III	Total Unrel	ated Business Tax	able Income			_		
33			usiness taxable income of	computed from all unrelated	trades or businesses	(see			
		actions)					33	-5,52	21.
		•	sallowed fringes		1 0010 (		34		
35		ction for net op ictions)	erating loss arising in ta	x years beginning before Ja	nuary 1, 2018 (see		35		
36		,	isiness taxable income t	pefore specific deduction. Si	btract line 35 from th	e sum	30		
		es 33 and 34	someous taxable moonie t				36	-5,52	21.
37	Spec	ıfıc deduction ((	Generally \$1,000, but se	e line 37 instructions for exc	ceptions)	38	37		
				ct line 37 from line 36. If line		ne 36, <i>QQ</i>			
		the smaller of				16 30,	38	-5,52	<u>21.</u>
Par	t IV	Tax Compu	ıtation				•		
				Itiply line 38 by 21% (0 21)		<b>&gt;</b>	39		0.
40	Trust	s Taxable at Tr	ust Rates. See instruction	ons for tax computation. Inc	ome tax on the amou	nt			
	on lin	ne 38 from	Tax rate schedule or	Schedule D (Form	041).	<b>&gt;</b>	40		<u>-</u>
41	Proxy	<b>y tax.</b> See instr	ructions			•	41		
			tax (trusts only)				42		
43	Tax o	on Noncompliar	nt Facility Income. See	instructions			43		
44	Total	. Add lines 41,	42, and 43 to line 39 or	40, whichever applies			44		0.
Par	t V	Tax and Pa	yments						
45 a	Fore	gn tax credit (co	orporations attach Form	1118, trusts attach Form 11	16) <b>45 a</b>				
b	Other	credits (see in	structions)		45 b		1		
С	Gene	ral business cre	edit Attach Form 3800 (	see instructions)	45 c		1		
d	Credi	t for prior year	mınımum tax (attach Fo	rm 8801 or 8827)	45 d		1 .1		
е	Total	credits. Add I	nes 45a through 45d				45 e		0.
		act line 45e fro			_		46		0.
47				Form 8611 Form 8697	Form 8866		1 _		
		Other (attach sch					47		
			46 and 47 (see instructi				48		0.
49	2018	net 965 tax liab	oility paid from Form 965	5-A or Form 965-B, Part II, o	olumn (k), line 2		49		
50 a	Paym	nents A 2017 ov	verpayment credited to 2	2018	50 a				
		estimated tax p			50 b		]		
		leposited with F			<b>50</b> c		]		
				at source (see instructions)	50 d		]		
			(see instructions)		50 e		]		
		•	•	remiums (attach Form 8941	50 f		]		
g	$\overline{}$		ments, and payments	Form 2439					
		orm 4136	Othe	er To	al ► 50 g				
51	Total	payments. Add	l lines 50a through 50g				51		0.
52		•		eck if Form 2220 is attached		►□	52		
53	Tax d	<b>lue.</b> If line 51 is	less than the total of lir	nes 48, 49, and 52, enter an	ount owed	•	53		
54	Over	payment. If line	51 is larger than the to	tal of lines 48, 49, and 52, e	nter amount overpaid		54		
55	Enter	the amount of	line 54 you want Credi	ted to 2019 estimated tax 🟲		Refunded ►	55		
Par	t VI	Statements	Regarding Certain	Activities and Other I	nformation (see in:	structions)			
56	_			he organization have an intere	_			Yes	No
	finan	cial account (bar	nk, securities, or other) in a f	oreign country? If 'Yes,' the	organization may hav	e to file FinCEN	N Form 114,		
	Repor	t of Foreign Ban	k and Financial Accounts	If 'Yes,' enter the name of the	e foreign country here	<b>-</b>		_[ ]	Х
57	Durin	g the tax year,	did the organization rec	eive a distribution from, or v	as it the grantor of, c	r transferor to,	a foreign trust?		Х
	If 'Yes	s,' see instruction	ns for other forms the orga	anization may have to file					į
58	Enter	the amount of ta	ax-exempt interest receive	d or accrued during the tax ye	ar► \$	0.			}
		Under penalties of	perjury, I declare that I have ex-	amined this return, including accompa of preparer (other than taxpayer) is t	nying schedules and stateme	nts, and to the best o	of my knowledge and		
Sigr		Delle January			PRESIDENT	iich preparer has an	May the IRS discuss		with
Here	9	Signature of of	ficer frage	<u> </u>	Title	<del>.</del>	the preparer shown instructions)?		ا ا
							X	Yes	No
Paid	1	Print/Type preparer	r s name	Preparer shippature	Date 2/18/2020	Check If	PTIN	_	_
Pre-		STEVEN B.	WOLF	30.9	\$118/2VX	self employed	P012106	30	
pare		Firm's name	STEVEN B. WOLF	& ASSOCIATES, LTI	).	Fırm's EIN ►	36-399888	4	
Üse		Firm's address	40 SKOKIE BLVD	STE 105					
Only	/		NORTHBROOK, IL			Phone no	(224) 33	0-1717	,
BAA		•	•	TEEA0202L 01/24	/19	·	<del></del>	<b>990-T</b> (20	

Property of

Schedule A – Cost of Good	ds Sold Enter method of inv	entory valuation ►			- 000				
1 Inventory at beginning of ye		<del></del>	orv at	end of year	6				
2 Purchases	2	<del></del>	-	ds sold. Subtract	<u> </u>				
3 Cost of labor	3	line 6	from I	ine 5 Enter here	ľ				
4 a Additional section 263A costs (attack		and ir	Part I	, line 2	7		, .		
Ta / taarta onar 555to ii E557 555to (attas	4 a						Yes	No	
<b>b</b> Other costs	4 b			of section 263A (wi					
(attach sch)  5 Total. Add lines 1 through 4				duced or acquired for ization?	or resa	ale) apply		х	
Schedule C — Rent Income	·				rono	rty) (see us	ctructi		
1 Description of property	(From Real Froperty an	u rersonal rropert	y Lea	Seu With Real F			Structi		
(1)		<del></del>							
(2)									
(3)		<u></u>				<del> </del>		<del></del>	
(4)	2 Pant recovered or accrued								
(a) From parsonal prop	2 Rent received or accrued	and and personal proper	łs.,	3(a) Deduction					
(a) From personal prop (if the percentage of rent for property is more than 10% more than 50%)	personal (if the perconduction property ex	entage of rent for person	entage of rent for personal ceeds 50% or if the rent is			me in columńs 2(a) and 2(b) (attach schedule)			
(1)									
(2)									
(3)									
(4)		· ·						,	
Total	Total			İ					
(c) Total income. Add totals of col here and on page 1, Part I, line 6,				(b) Total deductions here and on page 1, Pa I, line 6, column (B)					
Schedule E - Unrelated De	ebt-Financed Income (see	instructions)		*.					
1 Description of debt	financed property	2 Gross income from or allocable to debt-	<b>3</b> D	eductions directly co debt-fina	nnect	ed with or a	llocab E ST	le to	
i Description of deat	-infanced property	financed property		(a) Straight line reciation (attach sch		(b) Other deductions (attach schedule)			
(1) DIVIDENDS		14,162					12,7	08.	
(2) CAPITAL GAINS			135,597.			143,759.			
(3)									
(4)								,	
<ul> <li>4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)</li> </ul>	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	rep	7 Gross income reportable (column 2 x column 6)		Allocable di (column 6 x olumns 3(a)	total	of	
(1) 2,779,163.	3,377,144.	82.2933	:	11,654			10,4	58.	
(2) 2,779,163.	3,377,144.	82.2933		111,587		1	18,3	04.	
(3)		9							
(4)		90							
			Ente Part	r here and on page I, line 7, column (A	1, Ent ) Pa	er here and rt I, line 7, c	on pa column	ige 1, i (B)	
Totals.		1	-	123,241		1	28,7	62.	
Total dividends-received deduction	ons included in column 8				<b>-</b>		9,9	13.	
BAA	TI	EEA0203L 01/30/19			•	Form <b>9</b>			

Schedule F - Interest, An	nuiti	es, Royalti	es, a	nd Re	nts Fro	m	Controlled (	Orga	nizations	(see in	structio	ons)
			Exer	npt Con	trolled O	rga	nızatıons			_		<del>-</del> ·
organization identi		2 Employer identification number		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		in I	Deductions directly connected with ncome in column 5
(1)												
(2)												
(3) (4)						$\perp$					_  _	
Nonexempt Controlled Organizat		<del></del>										
7 Taxable Income	inc	et unrelated come (loss) instructions)			f specifie nts made	d	10 Part of included in organizatio	n the d	controlling		connec	ductions directly ted with income column 10
(1)												
(2)												
(3)												<del></del>
(4)												
							Add columns here and on p 8, co		, Part I, line		e and o	nns 6 and 11 Enter n page 1, Part I, line column (B)
Totals										_		
Schedule G — Investment  1 Description of income	Inco	me of a Se 2 Amount			3 dire	De ctly	ductions connected	Ī	on (see ins 4 Set-aside ttach sched	S	<b>5</b> To	otal deductions and -asides (column 3
					(atta	ach	schedule)				ļ	plus column 4)
(1)					ļ							
(3)												
(4)												
Totals Schedule I — Exploited Ex	emp	Enter here an Part I, line 9,	colur	mn (A)	ner Tha	n A	Advertising	Incor	<b>ne</b> (see ins	truction	Part I	here and on page 1 , line 9, column (B)
1 Description of exploited ac		2 Gross unrelate busines income fri trade o busines	s ed s om r	3 Expension connection of u	ises directly ected with duction nrelated ess income	fro or 2 r	Net income (loss) om unrelated trade business (column minus column 3) fa gain, compute umns 5 through 7	5 Gros activ	s income from ty that is not ated business income	6 Exp	penses itable t imn 5	
(1)												
(2)												
(3)												
(4)												
		Enter here on page Part I, line column (	: 1, e 10,	on p Part I	here and page 1, I, line 10, mn (B)							Enter here and on page 1, Part II, line 26
Totals		<u> </u>										
Schedule J – Advertising						_						
Part I Income From Peri	odica					tec	d Basis					
1 Name of periodical		2 Gross advertisi income	ng	adve	Direct ertising osts	(1	Advertising gain or oss) (col 2 minus col 3) If a gain, compute cols 5 through 7		rculation ncome		idershij osts	7 Excess readership costs (col 6 minus col 5, but not more than col 4)
(1)						↓ _						
(2)		<del> </del>										_
(3) (4)							ertert orthogramme	-				
Totals (carry to Part II, line (5))	,	-										

Page 5

Part II	Income From Periodicals Reported on a Separate Basis (For each periodical lis	sted in Part II,	fill in columns 2 through
	7 on a line-by-line basis )		

		compute cols 5 through 7			1
age 1, , line 11,	Enter here and on page 1, Part I, line 11, column (B)				Enter here and on page 1, Part II, line 27
`	, ,				
rs, Direc	ctors, and Tru	istees (see instru	ctions)		
1 Name			3 Percent of time devoted to business		ation attributable ated business
	here and page 1, , line 11, mn (A)	page 1, , line 11, mn (A) Part I, line 11, column (B)	page 1, , line 11, Part I, line 11, mn (A) column (B)	on page 1,   On page 1,   Part I, line 11,   Column (B)    ers, Directors, and Trustees (see instructions)  2 Title   3 Percent of time devoted	page 1, Inne 11, Part I, Inne 11, column (B)  ers, Directors, and Trustees (see instructions)  2 Title  3 Percent of time devoted to unrelated to un

1 Name	<b>2</b> Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		્ર	
		%	
		%	
	<del>- 1</del>	%	
Total. Enter here and on page 1, Part II, line 14		<b>&gt;</b>	

BAA

TEEA0204 L 12/31/18

Form **990-T** (2018)

## SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 1120)

**Capital Gains and Losses** 

► Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

► Go to www.irs.gov/Form1120 for instructions and the latest information.

OMB No 1545 0123

2018

Name	AWH FOUNDATION			Employer	dentific	ation number
	C/O ROBERT W. GILLETT			36-60	5019	1
Par	t I Short-Term Capital Gains and	<b>Losses</b> (See instru	ctions)			-
ente	nstructions for how to figure the amounts to on the lines below.  form may be easier to complete if you round	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmer to gain or loss t Form(s) 8949, F	rom Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the
	ents to whole dollars	(Suics price)	(8) 5(1)61 543137	line 2, column	(g)	result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.	23,372,580.	23,582,984.			-210,404.
1b	Totals for all transactions reported on Form(s) 8949 with <b>Box A</b> checked					
	Totals for all transactions reported on Form(s) 8949 with <b>Box B</b> checked					
	Totals for all transactions reported on Form(s) 8949 with <b>Box C</b> checked					
4	Short-term capital gain from installment sales	s from Form 6252, line 2	26 or 37		4	
5	Short-term capital gain or (loss) from like-kin	d exchanges from Form	8824		5	
6	6 Unused capital loss carryover (attach computation)				6	
7	Net short-term capital gain or (loss) Combin	<u>-</u>			7	-210,404.
Par		Losses (See instruc	ctions)	1		
ente This	nstructions for how to figure the amounts to on the lines below.  form may be easier to complete if you round ents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustmer to gain or loss f Form(s) 8949, P line 2, column	rom art II,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.	963,790.	617,789.			346,001.
	Totals for all transactions reported on Form(s) 8949 with <b>Box D</b> checked					
	Totals for all transactions reported on Form(s) 8949 with <b>Box E</b> checked					
10	Totals for all transactions reported on Form(s) 8949 with <b>Box F</b> checked		Line and the state of the state			
11	Enter gain from Form 4797, line 7 or 9				11	
12	Long-term capital gain from installment sales		12			
13	Long-term capital gain or (loss) from like-kind		13			
14	Capital gain distributions (see instructions)		14			
15	Net long-term capital gain or (loss) Combine	lines 8a through 14 in i	column h		15	346,001.
Par	t III Summary of Parts I and II				1	1
16	Enter excess of net short-term capital gain (I	ne 7) over net long-terr	n capital loss (line 15)		16	
17	Net capital gain Enter excess of net long-ter	m capital gain (line 15)	over net short-term cap	oital loss (line 7)	17	135,597.
18	Add lines 16 and 17 Enter here and on Form <b>Note:</b> If losses exceed gains, see <b>Capital los</b>		r the proper line on oth	er returns	18_	135,597.

20	4	0
ZU	ш	6

## **FEDERAL STATEMENTS**

PAGE 1

AWH FOUNDATION C/O ROBERT W. GILLETT

36-6050191

## STATEMENT 1 FORM 990-T, SCHEDULE E, LINE 3B OTHER DEDUCTIONS ALLOCABLE TO DEBT-FINANCED PROPERTY

DIVIDENDS INTEREST TAXES DIVIDENDS RECEIVED DEDUCTION INVESTMENT EXPENSES	TOTAL	\$ 2,117. 668. 9,913. 10. 12,708.
CAPITAL GAINS INTEREST TAXES INVESTMENT EXPENSES	TOTAL	\$ 108,887. 34,384. 488. 143,759.